

Transcript of Jason T. McConville, Ph.D.

Date: April 12, 2024

Case: Intas Pharmaceuticals Ltd. -v- Atossa Therapeutics, Inc. (PTAB)

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Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

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1	UNITED STATES PATENT AND TRADEMARK OFFICE	1	APPEARANCES:
2	DEFORE THE DITENT TOTAL AND ADDRESS DOADS	2	FOR THE RETATIONED
3	BEFORE THE PATENT TRIAL AND APPEAL BOARD	3	FOR THE PETITIONER:
5	TNTAC DUADWACTUTTCALC LTD	5	MCANDREWS HELD & MALLOY, LTD.
6	INTAS PHARMACEUTICALS LTD.,	6	500 West Madison Street, 34th Floor
7	Petitioner, 	7	Chicago, Illinois 60661
8	V.	8	312.775.8000
9	ATOSSA THERAPEUTICS, INC., Patent Owner.	9	BY: ALEJANDRO MENCHACA, ESQ.
10	ratent owner.	10	amenchaca@mcandrews-ip.com
11		11	
12		12	
		13	•
13 14		14	'
15	DEPOSITION OF	15	,
	DEPOSITION OF		
16		16	, .
17 18		17	
	8:56 a.m. CST	18	
19	Reported by:	19	
	Janice M. Kocek, CSR, CLR	21	
22	Job No. 529945	22	melissa.harwood@dlapiper.com
	2	┢	4
1	The deposition of JASON T. MCCONVILLE,	1	A P P E A R A N C E S: (Continued)
2	PH.D., reported stenographically by Janice M.	2	
3	Kocek, License No. 084-002871, Certified Shorthand	3	ALSO PRESENT:
4	Reporter, Certified LiveNote Reporter, and Notary	4	ERIN M. GAFFNEY, Ph.D.,
5	Public of the state of Illinois, held at 500 West	5	DLA Piper, Patent Agent
6	Madison Street, Chicago, Illinois, commencing at	6	
7	the hour of 8:56 a.m. CST, on Friday, April 12,	7	STEVEN QUAY, M.D., PH.D.,
8	2024.	8	Atossa Therapeutics
9		9	
10	* * *	10	
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Conducted on April 12, 2024

		Conducted on		
1	TNDEV	5	1 (Witness sworn.)	
2	INDEX		· · · · · · · · · · · · · · · · · · ·	
3				
٦	Examination by Ms. Krumplitsch	7	3 called as a witness herein, having been first duly	
5	Examination by Ms. Krumpiitsen	1	4 sworn, was examined and testified as follows:	
6	EXHIBITS		5 EXAMINATION	
7	EXHIBIT DESCRIPTION	PAGE	6 BY MS. KRUMPLITSCH:	
,	Exhibit 1 Curriculum Vitae of	13	7 Q. Good morning, Dr. McConville.	
٩	Jason T. McConville, PH.D.	13	8 A. Good morning.	
10	Exhibit 2 International Journal of	69	9 Q. So before this proceeding, you served	
11	Pharmaceutics, Article by	03	10 as an expert witness in other PTAB proceedings; is	
12	Berkenfeld, McConville, Lampr	echt	11 that right?	
	Exhibit 1001 United States Patent	22	12 A. So do you mean with regard to like	
14	11,572,334 B2	22	13 IPR-type cases?	
	Exhibit 1003 United States Patent	47	14 Q. Yes.	
16	9,333,190 B2			
	Exhibit 1004 WO 2017/070651 A1	64	15 A. Yeah, just a couple.	
	Exhibit 1005 WO 2012/050263 A1	91	16 Q. Okay. And were you cross-examined in	
	Exhibit 1006 Nature Publishing Group,	125	17 connection with those proceedings?	
20	Article by Ahmad, et al.		18 A. Once or twice I think, yes.	
	Exhibit 1007 Journal of Clinical Oncology,	136	19 Q. And you've also served as an expert in	
22	Article by Ahmad, et al.		20 district court litigation, correct?	
	•		21 A. Yes.	
			22 Q. So you understand the ground rules of a	
		6	8	
1	EXHIBITS		1 deposition?	
2	EXHIBIT DESCRIPTION	PAGE	2 A. More or less.	
3	Exhibit 1008 International Journal of	100	Q. So we won't talk over each other for	
4	Pharmaceutics, Article by		4 the beneficial of the court reporter.	
5	Cole, et al.		5 Do you understand that?	
6	Exhibit 1010 Capsule Technology,	109	6 A. Yes.	
7	Article by Benameur		7 Q. And that you need to answer all of my	
8	Exhibit 1011 Capsugel, Article by	117	8 questions with a verbal answer.	
9	Stegemann, Bornem		9 A. Yes.	
10	Exhibit 1012 Handbook of Pharmaceutical	121		
11	Excipients, Fifth Edition		10 Q. And I'll assume that you understand my	
12	Exhibit 1014 Endoxifen Tablets, Zonalta	27	11 questions. If you do not, let me know, just let	
	Exhibit 1020 Expert Declaration of	11	12 me know and I'll clarify.	
14	Jason McConville, Ph.D.		13 A. Yes, I will do.	
15			14 Q. We'll take a break whenever you need	
16			15 one. I try to go about an hour at a time. But if	
17			16 you need a break at any time, that's fine. I	
18			17 would just ask that you answer any pending	
19			18 question before we break.	
20			19 A. Okay. Thank you.	
21			20 Q. And you understand that you're offering	
22			21 sworn testimony under oath today, correct?	
			21 5 Wolfi testimony under ball today, contect:	
			22 A. I do, yes.	

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

Conducted on April 12, 2024				
9	11			
1 Q. Did you prepare for this deposition	1 Q. And you're being compensated for your			
2 today?	2 time testifying today?			
3 A. A little, yes.	3 A. Yes.			
4 Q. How did you prepare?	4 Q. How much?			
5 A. I essentially read through my report.	5 A. For live testimony it's \$900 an hour.			
6 It was prepared several months ago. So I wanted	6 Q. So I'm going to hand you what has been			
7 to refresh my memory on that. And looked at some	7 marked in this proceeding Exhibit 1020, which is			
8 of the exhibits also.	8 your declaration.			
9 Q. Did you meet with anyone to prepare for	9 A. Oh, okay. Thank you.			
10 this deposition?	10 (Deposition Exhibit 1020 was			
11 A. Yes, I met yesterday with Alex and a	11 introduced for identification.)			
12 couple of other attorneys just here in the office	12 BY MS. KRUMPLITSCH:			
13 for a couple of hours.	13 Q. Do you recognize Exhibit 1020?			
14 Q. A couple of hours?	14 A. Yes, it's a copy of my declaration.			
15 A. Yeah.	15 Q. Did you write Exhibit 1020?			
16 Q. So that was just one day?	16 A. Yes.			
17 A. Yeah, yeah.	17 Q. How long did you spend writing			
18 Q. Did you have any phone calls with	18 Exhibit 1020?			
19 attorneys other than your meeting yesterday?	19 A. Well, there was meetings via I think			
20 A. We had a phone call I think Tuesday. A	20 we used Zoom or Teams. And we discussed relevant			
21 lot of it was to do with logistics.	21 issues related to the matter at hand. And a draft			
Q. And other than meeting with your	22 was prepared based on my I guess my ideas and			
22 Q. And other than meeting with your	22 was prepared based on my I guess my ideas and			
10	12			
1 attorneys, reviewing your declaration and some of	1 dictation with the attorneys that came back to me.			
1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare	1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back			
1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition?	1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted			
1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No.	1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and so I I think it took a			
1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you	1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and — so I — I think it took a 5 month or so to — to prepare.			
1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed?	1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and — so I — I think it took a 5 month or so to — to prepare. 6 Q. When did you start working on your			
1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my	1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and so I I think it took a 5 month or so to to prepare. 6 Q. When did you start working on your 7 declaration?			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes,	1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and — so I — I think it took a 5 month or so to — to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes, 9 exactly.	12 1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and — so I — I think it took a 5 month or so to — to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think 9 beginning of the summer last year at some point.			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes, 9 exactly. 10 Q. How long did you spend reviewing those	1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and — so I — I think it took a 5 month or so to — to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think 9 beginning of the summer last year at some point. 10 Q. Summer of 2023?			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes, 9 exactly. 10 Q. How long did you spend reviewing those 11 exhibits?	12 1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and — so I — I think it took a 5 month or so to — to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think 9 beginning of the summer last year at some point. 10 Q. Summer of 2023? 11 A. Somewhere around then, yeah. There was			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes, 9 exactly. 10 Q. How long did you spend reviewing those 11 exhibits? 12 A. Not – not too long. Just looking over	12 1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and so I I think it took a 5 month or so to to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think 9 beginning of the summer last year at some point. 10 Q. Summer of 2023? 11 A. Somewhere around then, yeah. There was 12 a lot going on in the academic calendar at the			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes, 9 exactly. 10 Q. How long did you spend reviewing those 11 exhibits? 12 A. Not – not too long. Just looking over 13 how they correlate to my report – my declaration.	12 1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and — so I — I think it took a 5 month or so to — to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think 9 beginning of the summer last year at some point. 10 Q. Summer of 2023? 11 A. Somewhere around then, yeah. There was 12 a lot going on in the academic calendar at the 13 time as well.			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes, 9 exactly. 10 Q. How long did you spend reviewing those 11 exhibits? 12 A. Not – not too long. Just looking over 13 how they correlate to my report – my declaration. 14 Sorry.	12 1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and — so I — I think it took a 5 month or so to — to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think 9 beginning of the summer last year at some point. 10 Q. Summer of 2023? 11 A. Somewhere around then, yeah. There was 12 a lot going on in the academic calendar at the 13 time as well. 14 Q. So if you could turn in your			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes, 9 exactly. 10 Q. How long did you spend reviewing those 11 exhibits? 12 A. Not – not too long. Just looking over 13 how they correlate to my report – my declaration. 14 Sorry. 15 Q. Did you review the declaration of 16 Dr. Davies?	12 1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and — so I — I think it took a 5 month or so to — to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think 9 beginning of the summer last year at some point. 10 Q. Summer of 2023? 11 A. Somewhere around then, yeah. There was 12 a lot going on in the academic calendar at the 13 time as well. 14 Q. So if you could turn in your 15 declaration to paragraph 3 on page 1.			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes, 9 exactly. 10 Q. How long did you spend reviewing those 11 exhibits? 12 A. Not – not too long. Just looking over 13 how they correlate to my report – my declaration. 14 Sorry. 15 Q. Did you review the declaration of	12 1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and so I I think it took a 5 month or so to to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think 9 beginning of the summer last year at some point. 10 Q. Summer of 2023? 11 A. Somewhere around then, yeah. There was 12 a lot going on in the academic calendar at the 13 time as well. 14 Q. So if you could turn in your 15 declaration to paragraph 3 on page 1. 16 Are you there? 17 A. Yes.			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes, 9 exactly. 10 Q. How long did you spend reviewing those 11 exhibits? 12 A. Not – not too long. Just looking over 13 how they correlate to my report – my declaration. 14 Sorry. 15 Q. Did you review the declaration of 16 Dr. Davies? 17 A. I did, yes. 18 Q. Did you review any other exhibits cited	12 1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and — so I — I think it took a 5 month or so to — to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think 9 beginning of the summer last year at some point. 10 Q. Summer of 2023? 11 A. Somewhere around then, yeah. There was 12 a lot going on in the academic calendar at the 13 time as well. 14 Q. So if you could turn in your 15 declaration to paragraph 3 on page 1. 16 Are you there? 17 A. Yes. 18 Q. And do you see the reference to your CV			
10 1 attorneys, reviewing your declaration and some of 2 the exhibits, did you do anything else to prepare 3 for this deposition? 4 A. No. 5 Q. Do you recall which exhibits you 6 reviewed? 7 A. I – exhibits that are listed in my 8 declaration and those really were our focus, yes, 9 exactly. 10 Q. How long did you spend reviewing those 11 exhibits? 12 A. Not – not too long. Just looking over 13 how they correlate to my report – my declaration. 14 Sorry. 15 Q. Did you review the declaration of 16 Dr. Davies? 17 A. I did, yes.	12 1 dictation with the attorneys that came back to me. 2 And there was several iterations that went back 3 and forth where I made corrections, inserted 4 information, and so I I think it took a 5 month or so to to prepare. 6 Q. When did you start working on your 7 declaration? 8 A. I'm not sure exactly. It was I think 9 beginning of the summer last year at some point. 10 Q. Summer of 2023? 11 A. Somewhere around then, yeah. There was 12 a lot going on in the academic calendar at the 13 time as well. 14 Q. So if you could turn in your 15 declaration to paragraph 3 on page 1. 16 Are you there? 17 A. Yes.			

21

22 okay.

Q.

21

22

Just the Davies declaration?

Just the declaration, yes.

So we did not receive that CV. That's

16

13

14

- Is the description of your education
- 2 and professional background in your declaration 3 accurate?
- 4 A. Yes. So as I prepared this, this
- 5 covers most of the highlights, if you like, from
- 6 the CV, you know, in a written sense. The CV is
- 7 more of a bullet-point list. So this -- this
- 8 captures most of that.
- 9 O. Sure.
- 10 MS. KRUMPLITSCH: And I would ask if
- 11 we could mark this as McConville Exhibit 1.
- 12 (McConville Deposition Exhibit 1
- 13 was marked for identification.)
- 14 BY MS. KRUMPLITSCH
- Q. Dr. McConville, the court reporter has 16 marked what is Exhibit 1 to your deposition. This 17 is a CV -- I'll represent that this is a CV that 18 we found online. And it appears to be a CV that 19 you submitted in a different IPR proceeding.
- A. Okay. This looks like my CV, yes. I'm 21 not sure when this was last updated, this 22 particular copy. But I can potentially fill in

1 UNM.

- 2 O. Is that a small molecule?
- 3 A. Yes. Most – most of the research that 4 I do is with small molecule drugs.
- So if you could turn to your CV, which
- 6 is Exhibit 1, on page 3, you'll see there's a
- heading, 6, entitled "Current Research Interests."
- Is this maybe a more succinct summary
- 9 of your research interests than what you've just 10 described?
- A. Yeah. So there's quite a it's a 12 broad field, drug delivery and formulation 13 science. And so this is a rather broad statement, 14 which essentially covers what I just said, yeah.
- Q. Tell me a little bit about your project 16 on oral drug delivery.
- A. So at the moment I am looking at 3D 18 printed tablets and interaction with various 19 excipients, you know, the inactive ingredients, to 20 try to deliver drug in - in various ways from 21 immediate release formulations through to more 22 sustained release or delayed release as well.

1 any missing information you might require.

- Q. And so is it accurate to say that this
- 3 CV is accurate but it perhaps was not -- is not up
- 4 to date?
- A. Yes. 5
- Q. So you are currently an associate
- 7 professor of pharmaceutics at the University of
- 8 New Mexico?
- 9 A. That's correct.
- 10 Q. In this role do you conduct research in 11 pharmaceutics?
- 12 A. I do, yes.
- Q. And what specific areas of research are 14 you currently pursuing?
- A. So I I'm doing a lot of formulation 16 studies. And I have one project related to 17 aerosol drug delivery. Another project related to 18 thin film drug delivery. Another project related 19 to oral drug delivery, so tablets and that sort of 20 thing. And one other project related to - well, 21 it's a pre-cancerous therapy. It's a 22 collaborative study with the medical school at

- Q. And why do you study the interaction between -- let me withdraw that.
- 3 Why do you study the interaction with various excipients and the active ingredients?
- A. So the excipients really are the key to 5 6 changing the drug delivery modality within the
- 7 body. Albeit my research is in vitro at the
- 8 moment. But hopefully this translates to an
- 9 in vitro situation. And the excipients are really 10 the gatekeepers of drug release, if you like.
- Q. So are you studying -- sorry. Let me 12 withdraw that.
- 13 Would different excipients translate to 14 different release rates of the drug?
- A. Well, not to give too much away about 16 the current research, but I'm trying to effect 17 mostly one excipient and change its functionality.
- Q. And to see how that one excipient 19 impacts drug release?
- 20 Α. Yes.
- Q. Are you currently conducting research 21
- 22 in the field of synthetic organic chemistry?

Transcript of Jason T. McConville, Ph.D.

Conducted or	n April 12, 2024		
17 1 A. No.	1 Q. And have you ever taught a class in how		
1 A. No. 2 Q. Are you currently conducting research	2 to separate diastereomers?		
	1		
	1.		
5 Q. Have you ever conducted any research on	5 any of the courses that you teach?		
6 endoxifen?	6 A. Not that I recall.		
7 A. No.	7 Q. In your role as an associate professor		
8 Q. Can you tell me the difference between	8 of pharmaceuticals, do you publish research		
9 a diastereomer and an enantiomer?	9 papers?		
10 A. Well, I know there are different	10 A. Yes.		
11 stereoisomers of drugs. And so this would fall	11 Q. And is paragraph 12 of your		
12 into that category. And it would really relate to	12 declaration, which is on page 4, an accurate		
13 a subtle structural differences and — and how	13 summary of the number of publications you have to		
14 that might potentially affect, I guess, things	14 your name?		
15 such as stability and maybe even efficacy.	15 A. Yes. As I said, there may be one or		
16 Q. Do you have any laboratory experience	16 two changes to the CV now. I – I haven't looked		
17 separating enantiomers?	17 at the last publication on here. There's been a		
18 A. No.	18 couple over the last year or so.		
19 Q. Do you have any laboratory experience	19 Q. So your CV has a complete list of your		
20 separating diastereomers?	20 publications but it might be missing a few from		
21 A. No.	21 the last year or so?		
Q. In your role as an associate professor	22 A. Yeah, one or two, let's say.		
18	20		
1 of pharmaceutics, do you teach?	1 Q. Have you published any research papers		
2 A. Yes, I teach.	2 on endoxifen?		
Q. What courses do you teach?	3 A. No.		
4 A. My courses involve drug – aspects of	4 Q. So turning to paragraph 6 of your		
5 drug delivery and also pharmacokinetics.	5 declaration, which is on page 2, is paragraph 6 an		
6 Q. Paragraph 10 of your declaration, which	6 accurate description of your Ph.D. thesis?		
7 is on page 3, is that an accurate summary of the	7 A. Yes.		
8 types of classes you teach?	8 Q. And your thesis was titled "Pulsed-		
9 A. Yes.	9 Release Drug Delivery and Development of the Time-		
10 Q. Have you ever taught a synthetic	10 Delayed Capsule," correct?		
11 organic chemistry class?	11 A. Yes. I thought the time-delayed		
12 A. No.	12 capsule would be a big thing at the time.		
13 Q. Have you ever taught a medicinal	13 Q. Was it?		
14 chemistry class?	14 A. No.		
-	15 Q. How long did you spend on research for		
	16 your dissertation?		
16 Q. Have you ever taught a class in how to			
17 prepare chemically and isomerically pure organic	17 A. Three years, two months.		
18 compounds?	18 Q. Does your thesis include any		
19 A. I have not.	19 description of drug delivery of endoxifen?		

21 Why did you research for your thesis

22 take three years and two months?

20

Q. Have you ever taught a class in how to

21 separate enantiomers?

No.

Α.

Conducted on April 12, 2024

1	A.	I'm not sure whether you think that it
---	----	--

- 2 was a long time or short time. So I'm not quite
- 3 sure how I should answer that.
- 4 Q. What were you doing in those three
- 5 years and two months?
- 6 A. Bench research.
- Q. What was your bench research on?
- 8 A. This pulsed-release drug delivery oral
- 9 formulation.
- 10 Q. Were you designing new oral
- 11 formulations?
- 12 A. Yes.
- 13 Q. Is it fair to say that's complex 14 research?
- 15 A. Well, it it depends on the aspect
 16 you're looking at. As a whole, it was a unique
 17 area of research. Could somebody else have done
 18 it? Probably, with the same supervisor. But it
 19 was unique the way I did it. So there are
 20 complexities involved, of course, down to the
 21 individual. But there could have been a different
 22 time delayed capsule I suppose that came out from

1 BY MS. KRUMPLITSCH

- Q. Do you recognize this document?
- 3 A. Yes.
- 4 Q. What is it?
- 5 A. It's the patent-in-suit that I've 6 prepared my declaration with respect to.
 - Q. Is it okay with you if we refer to this
- 8 as the '334 patent?
- 9 A. Yes.
- 10 Q. Before you were approached to serve as 11 an expert in this case, were you aware of the '334 12 patent?
- 13 A. I'm not sure if I've seen it before 14 this case. Probably not.
- 15 Q. When were you first approached to work 16 on this case?
- 17 A. Sometime last year, I think. I can't 18 recall the initial date. I'd have to go in my 19 files and look at when I was first retained and I 20 I really don't know.
- Q. Is it fair to say that it was in the
- 22 first half of last -- of 2023?

1 somebody else.

- 2 Q. Did your thesis include any description
- 3 of the drug delivery of endoxifen?
- 4 A. No.
- 5 Q. And turning to paragraph 11 of your
- 6 declaration, which is on page 3, is this an
- 7 accurate description of your work with solid oral
- 8 dosage forms over the course of your career?
- 9 A. Yes.
- 10 Q. And is it fair to say if we wanted a
- 11 more detailed description of your research
- 12 projects, we could look at your CV?
- 13 A. Yes.
- 14 Q. Have you ever worked with a solid oral 15 dosage form of endoxifen?
- 16 A. Not that I'm aware, no.
- 17 MS. KRUMPLITSCH: Okay.
- 18 Dr. McConville, I'm handing you what has
- 19 previously been marked as Exhibit 1001 in this 20 proceeding.
- 21 (Deposition Exhibit 1001 was
- 22 introduced for identification.)

- 1 A. Somewhere around then I believe, yeah.
 - Q. And who contacted you?
- 3 A. I think it may have been Ben Mahon, who
- 4 is an attorney here.
- Q. Before you were contacted to work on
- 6 this case, were you aware of the compound
- 7 endoxifen?

- A. I think so, yeah. I mean, I hadn't
- 9 thought about it very much but I think I heard of 10 it and tamoxifen as well.
- 11 Q. So were you -- let me withdraw.
- Before you were approached to work on
- 13 this case, were you aware that endoxifen is a
- 14 metabolite of tamoxifen?
- 15 A. I don't know if I'd put that together.
- 16 Q. So is it fair to say you may have heard 17 of endoxifen before you worked on this case but 18 you can't quite recall?
- 19 A. Yeah. I can't recall, yeah.
- 20 Q. Before you were approached to work on
- 21 this case, were you aware that endoxifen exists as
- 22 two isomers, the (Z)- and (E)-forms?

Conducted on April 12, 2024

		Conducted on	Apr	11-12,	, 2024
4		L howards thought about it no	1 £	- 110 m	27
1	A.	I haven't thought about it, no.			s, (as read): Stereoisomers are compounds
					e same chemical formula, but a different
3 a ₁		ate that endoxifen exists as two isomers?		nree-d	limensional arrangement of atoms.
4	A.	Yes.	4		Correct?
5	Q.	And how did you learn this fact?	5	Α.	Yes.
6	A.	By looking at the case material, the	6	Q.	Do you still agree with that definition
		dence I've relied on, et cetera.	7 o	f ster	eoisomer?
8	Q.	If you could turn in the '334 patent to	8	A.	I do.
9 tł	ne claii	ms, which is the very last two pages.	9	Q.	Would a compound and a salt of a
10	A.	Okay.	10 c	ompo	ound have the same chemical formula?
11	Q.	And we're going to focus on Claim 1.	11	A.	No.
12	A.	Okay.	12	Q.	Dr. McConville, I'm handing you what
13	Q.	Is it your understanding that the	13 has previously been marked in this proceeding as		
14 m	nolecu	lar structure contained here in Claim 1 is	14 E	Exhibit	t 1014.
15 e	ndoxif	en?	15	A.	Thank you.
16	A.	Yes.	16		MS. KRUMPLITSCH: I apologize. It is
17	Q.	You understand that the wavy line in	17 ir	ı very	small print so we're all going to have to
18 th	ne diag	gram connected to the attached ethyl group	18 s	quint.	
19 re	eprese	nts the two stereoisomers?	19	•	(Deposition Exhibit 1014 was
20	Α.	The methyl group?	20		introduced for identification.)
21	Q.	Let's go back one step.	21 E	3Y M	S. KRUMPLITSCH
22		Do you see the wavy line in that	22	Q.	Do you recognize Exhibit 1014?
		26			28
1 c	hemica	al structure?	1	A.	Let me see. This isn't one of the
2	2 A. Yes.		2 e	xhibi	ts I reviewed prior to coming here. So I
3	Q. And what does that represent?		3 c	an't r	recall if I've seen this before and I rely
4 A. I have just as you've said, yeah, I			4 0	n it ir	n my declaration or not. But I I didn't
5 believe so, that represents the difference in the			5 r	eview	v this just before the testimony today.
-			6	Q.	Okay. And I'll point you to your
7 Q. And you agree that the two			7 d	ec lara	ation, paragraph 18 on page 6.
8 s1	tereois	omers differ only in the three-dimensional	8	A.	Okay.
9 a	rrange	ment of the ethyl group?	9	Q.	I'll give you a second.
10	_	Right.	10	A.	Okay. Yeah.
۱.,		A 1'C 11 1 1	1.1	0	D

11 Q. And if you could also have your

12 declaration out -- we're going to look at both

13 documents -- and turn to page 7 of your

14 declaration.

15 A. Okay.

16 Q. And you agree that the two

17 stereoisomers (Z)-endoxifen and (E)-endoxifen are

18 represented by the structures you present in your

19 declaration?

20 A. Yes

21 Q. In paragraph 21, which is right above 22 that figure, you define the term stereoisomer as

11 Q. Do you see that you've cited this

12 exhibit in that paragraph?

13 A. Sorry. Page 6?

14 Q. Yeah. Paragraph 18.

15 A. I went to page 18.

16 Okay. Yes. I see that now, yeah.

17 Okay. Good.

8 Q. Okay. So is it your understanding that

19 Exhibit 1014 is a drug label for Zonalta?

20 A. Yes.

21 Q. And this is a drug that is sold by

22 Intas Pharmaceuticals?

PLANET DEPOS

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

Conducted on April 12, 2024				
29	31			
1 A. Okay. Yes.	1 portion has different atoms but the active moiety			
2 Q. And Intas is the same Intas that is the	2 is exactly the same.			
3 petitioner in this case?	3 Q. But my question was not asking you			
4 A. It's my understanding, yes.	4 about the active moiety. It was asking you about			
5 Q. Now, Zonalta is an endoxifen citrate	5 the compound as a whole, which would include			
6 drug?	6 active moiety and anything.			
7 A. Okay.	7 So with that definition of compound,			
8 Q. Correct?	8 would a compound and a salt of the compound be			
9 A. Yes.	9 made up of the same atoms?			
10 Q. And if you turn to so we're looking	10 MR. MENCHACA: Same objection.			
11 at the Zonalta drug label on the second page.	11 THE WITNESS: Well, until it			
12 A. Okay.	dissolves, then there are different atoms.			
13 Q. The right-hand column.	13 But once dissolution has occurred, of			
14 A. Yep.	14 course you've got the same atoms because			
15 Q. Midway down, paragraph 7, entitled	15 there's the active component released.			
16 "Description" and there's a chemical structure	16 BY MS. KRUMPLITSCH			
17 there.	17 Q. So my question was not with regards to			
Do you see that?	18 dissolution.			
19 A. Yes.	19 Would a compound and a solvate of the			
20 Q. And this molecular structure is the	20 compound be made up of the same atoms?			
21 molecular structure for the endoxifen citrate	21 A. Not in the solid sense.			
22 salt, correct?	22 Q. Turning back to the '334 patent and			
30	32			
1 A. Yes.	1 looking at those claims again, the molecular			
2 Q. This is not the molecular structure of	2 structure depicted in Claim 1 depicts endoxifen			
3 endoxifen free base, correct?	3 that could be a polymorphic endoxifen compound,			
4 A. That's that's correct, yes.	4 correct?			
5 Q. Would a compound and a solvate of a	5 A. Yes.			
6 compound have the same chemical formula?	6 Q. And the molecular structure depicted in			
7 A. No.	7 Claim 1 depicts endoxifen that could be a			
8 Q. Would a compound and a salt of a	8 co-crystal form of endoxifen, correct?			
9 compound be made up of be made up of the same	9 MR. MENCHACA: Objection.			
10 atoms?	10 Foundation.			
11 A. Well, the active moiety, yes. But the	11 THE WITNESS: This this really			
12 salt portion is additional to the active moiety.	12 isn't my area of expertise. But as you've			
Q. So just to make sure I get an answer to	said, there's there's a wavy line there			
14 that question, would a compound and a salt of the	and it could be one of one of two forms.			
15 compound be made up of the same atoms?	15 BY MS. KRUMPLITSCH			
MR. MENCHACA: Objection. Asked and	16 Q. The molecular structure depicted in			
answered.	17 Claim 1 does not include any atoms of a salt,			
THE WITNESS: To an extent, yes.	18 correct?			
19 BY MS. KRUMPLITSCH	19 A. It simply shows the active moiety			
Q. What do you mean by "to an extent"?	20 portion of a drug.			
1 XX 11 A A A A A A A A A A A A A A A A				

21

A. Well, there's the active moiety of the

22 drug with a salt portion on it. Now, the salt

Q. What basis are you relying on to

22 conclude that the molecular structure in compound

36

Conducted on April 12, 2024

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3

1 1	only	shows	the	active	moiety?
-----	------	-------	-----	--------	---------

- A. Well, the patent suggests that's the active molecule.
 - Q. Where does the patent suggest that?
- 5 A. Right at the beginning it talks about 6 endoxifen as being useful for the treatment of
- 7 breast cancer at the start of the patent.
- 8 (Stenographer clarification.)
- 9 THE WITNESS: At the beginning of
- the patent, it talks about the usefulness
- of endoxifen for the treatment of breast
- 12 cancer, et cetera.
- 13 BY MS. KRUMPLITSCH:
- 14 Q. Is it your understanding that the
- 15 molecular structure depicted in Claim 1 is not the 16 entire compound?
- 17 A. This -- this is the active compound.
- 18 And, you know, as a formulation scientist and
- 19 anybody in pharmaceutics would realize that
- 20 oftentimes active compounds are made into salts to
- 21 help with solubility, for example, or stability.
- 22 And this is an active compound depicted. And when
- 1 you have -- if you have a salt form, for example,
- 2 you would still have this active compound
- 3 available in a formulation.
- Q. Is this active compound here in Claim 1
- 5 depicted as a salt form?
- 6 A. It's not depicted as a salt form right
- 7 here.
- 8 Q. Do you --
- 9 A. I mean, it -- but Claim 1 talks about
- 10 an endoxifen composition comprising a compound of 10 obvious to me.
- 11 that formula.
- 12 Q. And why is that important?
- 13 A. Well, because that's the active portion
- 14 of, you know, a free base or it could be the
- 15 active portion of a salt, in my opinion.
- 16 Q. Endoxifen in a salt form has one more 17 hydrogen than the free base form, correct?
- 18 A. Well, in the solid sense possibly, yes.
- 19 Q. Possibly?
- 20 A. I guess dependent on the salt. I
- 21 haven't looked at all salt forms.
- 22 Q. The molecular structure depicted in

- 1 Claim 1 does not include any atoms of a solvate,
- 2 correct?
- 3 A. It would appear that way, yes.
- 4 Q. Now, looking at your declaration, if
- 5 you could turn to page 13, we're going to focus on
- 6 paragraphs 28 and 29.
 - Are you there?
- 8 A. Sorry. Did you say 28?
 - Q. Yeah, 28 and 29 on page 13.
- 10 A. Yeah.
- 11 Q. So you did not at the time you wrote
- 12 your declaration identify "compound of formula 3
- 13 is (Z)-endoxifen" as a phrase that needed to be 14 construed, correct?
- 15 A. I did not I assumed, you know, plain 16 and ordinary meaning.
- 17 Q. What did you understand the plain and 18 ordinary meaning of "compound of formula 3 is 19 (Z)-endoxifen" to encompass?
- 20 A. Anything that could yield that active 21 molecule as a formulation strategy.
- 22 Q. So this interpretation of the phrase
- 1 "compound of formula 3 is (Z)-endoxifen" is not
- 2 reflected anywhere in your declaration, correct?
 - A. Sorry. Could you repeat that?
- Q. Your interpretation of this phrase,
- 5 "the compound of formula 3 is (Z)-endoxifen," that
- 6 understanding, which you testified is "anything
- 7 that could yield an active molecule," that is not
- 8 reflected anywhere in your declaration; is it?
- 9 A. That's just what I take as pretty 10 obvious to me.
- 11 Q. And that is not reflected anywhere in 12 your declaration, correct?
- 13 A. If it's not there, it's a general 14 assumption.
- 15 Q. So the phrase "salt form of endoxifen" 16 does not appear anywhere in your declaration, 17 correct?
- 18 A. I'm not sure. I'd have to look through
- 19 to to see if I could find that. But I as I
- 20 sit here today, I can't remember whether I
- 21 referred specifically to a salt form anywhere. I
- 22 think I have endoxifen citrate listed somewhere

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1 within my report.

- Q. And the phrase "solvate form" does not 3 appear in your declaration, correct?
- A. Again, same thing. I'd have to read 4 5 through. It wasn't something I was focusing on
- 6 when I was reviewing it.
- Q. So in your declaration at paragraph 18
- on page 6 -- I'll give you a second to get there.
- A. Okav.
- 10 Q. So you identify endoxifen as
- 11 4-hydroxy-N-des-methyl tamoxifen, correct?
- 12 A. Correct.
- Q. At the time you wrote your declaration, 13
- 14 what did you understand 4-hydroxy-N-des-methyl 15 tamoxifen to encompass?
- 16 A. The active portion of the molecule.
- 17 Q. I want to make sure I understand your 18 testimony here, Dr. McConville.
- You're saying that the chemical name, 20 4-hydroxy-N-des-methyl tamoxifen, only refers to 21 the active moiety?
- 22 A. I – that's what I think, yeah.
- Q. So if you had a salt form, would you
- 2 also call it 4-hydroxy-N-des-methyl tamoxifen?
- 3 A. I mean, if I was referring to the
- 4 active portion of it, I would highlight that. But
- 5 I would state that it's the salt version of the
- 6 form depending on the salt.
- Q. So if you could turn back to the
- 8 Zonalta label, please, which is Exhibit 1014.
- 9 A. Okay.
- Q. And we're going back to -- I apologize
- 11 because it really is in small print -- the
- 12 description with the chemical structure.
- 13 Do you see that on page 2?
- 14
- 15 Q. What is the chemical name that Intas 16 uses to refer to the citrate salt form of 17 endoxifen?
- A. Well, they refer to that active 19 component of it.
- Q. Dr. McConville, do you see the 21 recitation of the chemical name there?
- 22 A. Well, in the first line, yeah,

1 4-hydroxy-N-des-methyl tamoxifen.

- Is that what you're talking about?
- Q. If you could go to the third line that
- starts with "the chemical name is."
- A. Oh, yeah, yeah.
 - Q. Do you want to read it? Or I can.
- A. I mean, do I have to, really? I see --
- 8 I see what you mean. There's an extended name
- 9 with citrate on the end as the salt, yeah.
- 10 Q. So would you agree with me that Intas
- 11 itself when describing a citrate salt of endoxifen
- 12 uses a different chemical name than
- 13 4-hydroxy-N-des-methyl tamoxifen?
- A. Right. But the active moiety, you 15 know, turns out to be the same compound.
- Q. Going back to your description of
- 17 endoxifen as 4-hydroxy-N-des-methyl tamoxifen and
- 18 your testimony that that only refers to active
- 19 moiety, would tamoxifen be included in Claim 1?
- A. Well, I mean, that's -- I'm not so
- 21 sure. I haven't really thought about that as much
- 22 as, you know, the active component being endoxifen

38

- 1 as a -- as a salt and then the salt cleaving off and that being the active portion.
- 3 I hadn't really thought about it in
- 4 terms of the metabolism that could occur to
- 5 tamoxifen to convert it to endoxifen. It's a bit
- 6 more straightforward with a salt form. It's just
- 7 dissolution.
- Q. So can you answer whether or not
- 9 tamoxifen would be included in Claim 1 given your 10 interpretation?
- A. As I say, it's something I'd have to 12 think about a little more.
- So you can't answer that sitting here 13 Q. 14 today?
- A. I I wouldn't like to. It would take 15 16 a while for me to really consider my -- it's not 17 something I've looked at specifically, no.
- Q. Would you expect endoxifen free base 19 and an endoxifen salt to have the same 20 pharmacokinetic profile?
- 21 A. Could you repeat that?
- 22 Would you expect endoxifen free base

PLANET DEPOS

41

and an endoxifen salt to have the same

2 pharmacokinetic profile?

4

- 3 A. In -- in what sense do you mean?
 - Q. Let's take a step back.

Do you understand when I use the term 6 "pharmacokinetic profile" what I'm referring to?

- 7 A. I mean, there's several aspects of the 8 pharmacokinetic profile to consider. One thing 9 that is very important is the elimination rate of 10 a drug, in which case I would consider that to be 11 the same.
- 12 Q. What other aspects of pharmacokinetic 13 profile are there besides elimination rate?
- 14 A. Absorption rate, for example. That's 15 that is something that could vary possibly, 16 depending on the solubility well, dissolution, 17 let's say, the ionization state of the molecule in 18 the gut. Where in the gut it's being absorbed. 19 There's many factors that affect absorption. The 20 elimination rate of the drug molecule would be the 21 same.
- 22 Q. So we're still talking -- okay. Thank

42

1 you.

2 For a pharmacokinetic profile, we have 3 absorption, elimination.

What else, what other pharmacokinetic primers are there?

- 6 A. Well, I mean, those two aspects really 7 dictate the Tmax, the time to maximum
- 8 concentration, the Cmax, of course, the
- 9 concentration at which you reach when it gets to 10 the Tmax, and that area under curve.
- 11 Q. Just want to be clear, though. Your 12 testimony is that only absorption and elimination 13 are the -- those are the only two elements of a 14 pharmacokinetic profile?
- 15 A. No, no, there's more things to consider 16 as well. You know, volume and distribution, 17 clearance, and other things related to the 18 molecule.
- 19 But given physiochemical properties of 20 the molecule, some of those pharmacokinetic 21 elements would be the same.
- 22 Q. I believe you testified that

1 elimination might be the same between a free base

- 2 and a citrate salt; is that correct?
- 3 A. I don't see any reason why it wouldn't 4 be the same.
- 5 Q. +but you also testified, correct, that 6 absorption would be different between the two, 7 correct?
- 8 A. No. It could be. I don't know whether
 9 it is. It's something that would need to be
 10 tested. You know, normally if you compare one
 11 type of, let's say, a salt against a free base,
 12 for example, you would use exactly the same
 13 formulation to do that comparison. So that—
 14 that would be a study that should really be
 15 conducted, I suppose, to compare that absorption
 16 rate.
- 17 Q. Did you do any studies comparing the 18 absorption rate between endoxifen free base and 19 endoxifen citrate salt?
- 20 A. No. I'm simply stating the type of 21 study that would be suitable for that sort of 22 analysis.

1 Q. You testified that the absorption rate 2 could vary depending on the solubility, correct?

3 A. Well, solubility and dissolution,4 concentration. You know, there are various things

that can affect the absorption. And the window ofabsorption in the gastrointestinal tract as well,pH.

- 8 Q. Do you have an understanding as to 9 whether the solubility of the salt versus the free
- 10 base form of endoxifen are -- is the same?
- 11 A. Sorry. Can you repeat that?
- 12 Q. That was a horrible question.
- 13 Is the solubility of the salt form of 14 endoxifen the same as the solubility of the free 15 base form of endoxifen?
- 16 A. I don't know.
- 17 Q. Okay. Do you have any understanding as 18 to whether a POSA would be motivated to make the 19 salt form of a drug?
- 20 A. One of the things that a person of21 ordinary skill looks at is the solubility of a22 molecule, as well as potentially the stability of

44

PLANET DEPOS

48

1 a molecule. And that might lead them to think

- 2 about making a salt or -- or not.
- Q. So is it fair to say a POSA would want
- 4 to make a drug that has better solubility?
- A. Well, it really depends on whether
- 6 there's an issue with solubility, absorption, the
- bio classification system of the that's used
- 8 for a particular drug.
- 9 Let me think. What else?
- 10 Oh, and that stability issue as well.
- 11 You know, that would be taken into account unless
- 12 there's other ways of overcoming it. A person of
- 13 ordinary skill would like to use the easiest route 14 possible.
- Q. Why is stability important to a person 16 of ordinary skill in the art?
- A. I mean, for example, in the worst-case 18 scenario, if a drug isn't stable for, you know, 19 more than a few days in its solid form, then 20 there's an issue with thinking about making a 21 formulation later on for -- for use.
- 22 When you testified that a person of
- 1 ordinary skill would like to use the easiest route
- 2 possible with respect to stability, would a POSA
- 3 want to formulate the most stable compound?
- A. Well, it depends on what the most
- 5 appropriate method of delivery might be as well.
- 6 I mean, as a person of ordinary skill, you have a
- 7 new chemical entity, let's say, a drug. You would
- 8 want to think about maybe one of two routes of
- 9 administration to begin with. Intravenous is the
- 10 easiest. Or oral drug delivery, which is the most
- 11 convenient and profitable. And also it's usually
- 12 one of the most stable forms to make.
- 13 So those two things would spring to 14 mind immediately. But obviously there are 15 different routes of administration. And depending 16 on the drug itself, it could be a topical, it 17 could be inhaled, or other route.
- Q. So let's just restrict it to oral --
- 19 solid oral dosage forms.
- 20 A. Yeah.
- 21 Q. Would a POSA look to formulate the most
- 22 stable form of that compound in a solid oral

- 1 dosage form?
 - A. Well, again, there's other factors that
- 3 come into it. The most stable might not
- 4 necessarily be necessary depending on the turnover
- rate of the compound, storage, packaging. You can
- 6 offset stability issues sometimes with packaging.
- MS. KRUMPLITSCH: So, Dr. McConville,
- 8 I'm going to hand you what has been marked as
- 9 Exhibit 1003 in this proceeding.
- 10 (Deposition Exhibit 1003 was
- 111 introduced for identification.)
- 12 BY MS. KRUMPLITSCH
- Q. And do you recognize Exhibit 1003? 13
- 14 A.
- 15 Q. And this is a patent by Ahmad, correct?
- 16 A. Yes.
- 17 Q. And it's U.S. Patent No. 9,333,190?
- A. Yes. 18
- Q. Is it okay with you if I refer to this 19
- 20 as the Ahmad patent?
- A. Yes. 21
- When did you last review the Ahmad 22 O.
- 1 patent?

- A. This I think when I was preparing my
- 3 report around that time. It -- it wasn't
- 4 something I brought with me to look at. So it was
- 5 previous.
- Q. Okay. And were you familiar with the
- 7 Ahmad patent before working on this case?
- A. Not that I recall. I don't recall
- 9 coming across this patent.
- 10 Q. How did you learn about the Ahmad 11 patent?
- 12 A. It -- it has, you know, obviously
- 13 relevance to this given the date of issuance of
- 14 this patent. It's prior art to the '334 patent. 15 Was this patent provided to you or is
- 16 this something that you went out and found on your 17 own?
- A. I think I was provided this to look at 18 19 as prior art. I don't -- I mean, I remember 20 searching at the time. I think this was provided 21 to me at that time.
- 22 Are you familiar with Dr. Ahmad?

A. Not personally, no. But which you mean

2 the — the first inventor obviously?

- Q. That's a good point. Yes, the first
- 4 inventor.
- A. Okay. None of them anyway on this
- 6 particular. I do know some Ahmads but I don't
- think it's the same.
- Q. None of the -- do you know any of the
- 9 named inventors?

10 A. No, not that I am aware. It's possible 11 I've met them.

- Q. Okay. And so we're going to keep the
- 13 Ahmad patent and your declaration out. So if you
- 14 can turn to page 15 of your declaration.
- A. Okay. 15
- 16 Q. And we're going to look at
- 17 paragraph 33.
- A. Okav. 18
- Q. So you state in paragraph 33 (as read): 19
- 20 In sum, Ahmad teaches the use of enteric coated
- 21 capsules of highly pure (Z)-endoxifen to treat
- 22 breast cancer and other diseases.
- 50

Correct?

- 2 A. Yes.
- Q. Do you stand by that statement today?
- 4
- Q. Looking at the Ahmad patent, do you
- 6 agree with me that the only disclosure of
- 7 90 percent pure endoxifen is at columns 12, lines
- 8 14 to 17, correct?
- 9 A. Yes, I believe that's a reference to 10 it.
- 11 Let me see. Hang on. Give me a 12 moment.
- I mean, also in Claim 1 it mentions at 14 least 80 percent, which would encompass as well 1590 percent plus.
- Q. But, again, my question was: The only 17 disclosure of -- only mention of 90 percent pure 18 endoxifen verbatim is at column 12, lines 14 to 19 17?
- A. I mean, yes, but obviously as I've 21 said, anything over 80 percent also encompasses 22 90 percent.

- Q. And column 12, lines 14 to 17, Ahmad
- 2 states (as read): One object of the present
- invention is to provide (E)-endoxifen or
- 4 (Z)-endoxifen with at least 80 percent purity,
- 5 such as at least 90 percent pure or at least
- 95 percent pure...
- And it goes on.
- 8 Do you see that?
- 9 A. Yes.
- 10 O. So Ahmad is describing (E)-endoxifen or
- 11 (Z)-endoxifen at these purity levels?
- 12 A. Correct, yes.
- 13 Q. And you pointed out the claims of
- 14 Ahmad. If you can turn to those, the one claim on
- 15 the last page.
- 16 A. Right. 17 Q. You would agree with me that Ahmad is
- 18 claiming an endoxifen in the form of a citrate
- 19 salt that is at least 80 percent (Z)-endoxifen?
- A. Yeah, in part 2, that's right, of 20 21 Claim 1.
- Q. And Ahmad is not claiming an 80 percent
- 1 pure (Z)-endoxifen free base, correct?
 - A. I I see what you mean, yes. But as
 - 3 I mentioned before, upon dissolution you obtain
 - 4 the free base anyway. So to me as a formulation
 - 5 scientist, it doesn't make any difference
 - 6 necessarily to have a salt or or not in terms
 - 7 of the active component.
 - Q. So it's your testimony as a POSA that
 - 9 the words of the claim don't matter?
 - 10 A. Oh, of course they do. It's given in a 11 citrate salt. But I'm just reiterating that once
 - 12 the citrate salt is dissolved, you're left with,
 - 13 you know, at least 80 percent (Z)-endoxifen.
 - Q. So is it your testimony as a POSA
 - 15 interpreting the claim of Ahmad that Claim 1 would
 - 16 encompass endoxifen free base?
 - 17 A. In terms of the preparation of the
 - 18 citrate salt, of course. I mean, you can't 19 immediately synthesize the citrate salt. So of
 - 20 course it encompasses the free base as a precursor
 - 22

21 at least to forming the citrate salt.

52.

So your testimony as you sit here today

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- 1 as a POSA, that Ahmad Claim 1 covers an 80 percent 2 pure endoxifen free base?
- 2 pure endoxinen nec base:
- 3 A. As part 1, yes. And then the salt is
- 4 prepared, yes, in part 2 of the claim. I mean,
- 5 you can't synthesize the citrate salt immediately.
- 6 You have to synthesize the free base form of
- 7 (Z)-endoxifen in this case and then make the salt.
- 8 So of course the patent as a whole teaches the
- 9 formation of (Z)-endoxifen as a free base.
- 10 O. So, Dr. McConville, with all due
- 11 respect, my question is what is claimed in Ahmad.
- 12 It's not what the patent teaches.
- 13 And your testimony -- I just want to
- 14 make sure I understand -- is that Claim 1 claims
- 15 an endoxifen free base?
- 16 A. Oh, no. I didn't say that. It does 17 encompass a citrate salt. But my I'm just 18 describing that of course to get to Claim 1 and 19 have a citrate salt, the patent teaches the 20 formation (Z)-endoxifen pre-base.
- 21 Q. And my question is limited to what's 22 being claimed here. But let's move on.
- 1 When (Z)-endoxifen citrate dissolves,
- 2 will it always be a free base?
- 3 A. Once dissolution has occurred, the
- 4 (Z)-endoxifen is released as for absorption,
- 5 yes. And, you know, depending on where it is in
- 6 the stomach will depend on its ionization state -
- 7 sorry, sorry, gastrointestinal tract, not stomach,
- 8 because obviously we have an enteric coating.
- 9 Q. Do you agree that the dissolution of 10 (Z)-endoxifen citrate to a free base is dependent 11 on pH?
- 12 A. That's that's a factor involved, 13 ves.
- 14 Q. Do you know at what -- above what pH 15 the free base is available?
- 16 A. I'm not sure.
- 17 Q. Dr. McConville, I want to make sure I 18 understand your interpretation of Ahmad. Correct 19 me if I'm wrong here.
- Is it your testimony that Ahmad
- 21 necessarily encompasses endoxifen free base
- 22 because it claims an endoxifen citrate salt?

- A. So the the claim itself, part 1,
- 2 says synthetic preparation of endoxifen is at
- 3 least 80 percent (Z)-endoxifen. That -- that's
- 4 the free base. And then part 2 of that Claim 1
- 5 said synthetic preparation of endoxifen is in the
- 6 form of citrate salt. Then obviously the citrate
- 7 salt is formed. So you end up with a citrate salt
- 8 of (Z)-endoxifen.
- 9 Q. When you take a free base of endoxifen 10 and add citric acid, isn't it true that you both 11 (Z)- and (E)-endoxifen?
- 12 A. I can't comment on that. That's not my 13 area of expertise.
- 14 Q. Would we put that question to the 15 chemists?
- 16 A. Probably a good idea.
- 17 Q. Ahmad does not provide any working 18 example of the synthetic methods that would work 19 to produce a composition with at least 90 percent 20 endoxifen, correct?
- 21 A. Again, that's more of a chemistry 22 question, for different experts. It tells us that

1 greater than 80 percent endoxifen can be produced.

2 It's in the claim.

- Q. Would you have the same answer if I
- 4 asked whether you agree with the statement that
- 5 Ahmad does not provide any working examples of a
- 6 crystallization parameters that would work to
- 7 produce a composition with at least 90 percent
- 8 (Z)-endoxifen?
- 9 A. Yeah, I would give you the same answer.
- 10 Q. You'd ask a chemist?
- 11 A. I think that's the best option. I
- 12 don't want to guess at what's going on here.
- 13 Q. And would you give me the same answer
- 14 if I asked you to agree with the statement that
- 15 Ahmad does not include any working example
- 16 demonstrating that Ahmad ever possessed a
- 17 composition with at least 90 percent pure
- 18 (Z)-endoxifen?
- 19 A. I mean, Ahmad describes the preparation 20 of at least 90 percent endoxifen. So I -- this is
- 21 an issued patent. I have to assume this is
- 22 correct.

59

60

15 (57 to 60)

1	Q.	Would you point us to where Ahmad
2	describ	es the preparation of at least 90 percent
3	endoxif	en?

A. Yes, yes, I mean, you had pointed me out to that. I think it's column -

- Q. 12.
- A. -12, yes. 7
- So it describes the objective of the 9 present invention. So – and then at Claim 1 it 10 describes greater than 80 percent, which

11 encompasses those ranges listed in that column 12.

- Q. Would you agree with me,
- 13 Dr. McConville, that that passage at column 1,
- 14 lines 14 to 17, does not include any description
- 15 of the synthetic methods that Ahmad would have 16 used to generate a 90 percent pure (Z)-endoxifen?

17 A. Not specifically, no.

- MS. KRUMPLITSCH: We've been going 18
- about an hour. Can we take a short break 19
- 20 or do you want to keep going?
- 21 THE WITNESS: That's fine. Take a
- 22 break.

58

- THE STENOGRAPHER: We're off the
- 2 record at 10:02.
- 3 (Whereupon, a recess was taken
- 4 from 10:02 a.m. to 10:19 a.m.)
- 5 THE STENOGRAPHER: We're back on the
- record at 10:19 a.m.
- BY MS. KRUMPLITSCH:
- O. So Dr. McConville, let's turn back to
- 9 the Ahmad patent that we were looking at.

10 A. Okav.

- Q. And looking at Claim 1 that we were 11
- 12 talking about right before the break. And I just
- 13 want to make sure I understand your testimony.
- You're looking at Claim 1 and you said,
- 15 you know, part 1 of Claim 1 is Ahmad making the
- 16 free base and part 2 is making the citrate salt
- 17 from that free base; is that correct?

18 A. That's how I interpret it, yes.

- Q. Is the synthetic preparation of the 20 citrate salt described anywhere in the Ahmad 21 patent?
- 22 A. I can't recall. I'd have to look

1 through to see.

- O. Is that another one where we would look to a chemist?
- 4 A. I mean, I – I can't remember all the
- 5 examples that are in here. But in general we
- 6 could see if a citrate salt is described, I guess.
- 7 But if in doubt, it would be better to ask the 8 chemist, ves.
- Q. And I know your expertise is in 10 pharmaceutics and pharmaceutical formulation.
- Would you yourself know how to 12 formulate a citrate salt from the free base of 13 endoxifen?

14 A. That's -- that's a chemistry issue.

- 15 Q. And do you know in forming a citrate 16 salt from a free base what isomeric purity you 17 would get?
- 18 A. Again, I would have to refer to the 19 chemistry expert on that.
- 20 Q. And then also looking at Claim 1 of
- 21 Ahmad, I believe you testified that because the
- 22 claim recites synthetic preparation of endoxifen

1 that is at least 80 percent (Z)-endoxifen, it's

- your testimony that that encompasses 80 percent
- and above?
- 4 A. Yes.
 - Q. All the way to 100 percent?
- A. That's -- that's how I interpret it. 6
- 7 At least 80 percent, yes.
- Q. Do you have understanding -- do you
- 9 have understanding of whether Ahmad teaches how to 10 actually prepare a 90 percent (Z)-endoxifen?
- A. As I said before, it describes that it
- 12 that's one of the objectives. And I assume
- 13 that it can be prepared just because it's in the 14 claim language.
- 15
- Q. Did you do any investigation into the 16 specification of Ahmad to see whether or not the 17 synthetic steps described in the spec would result 18 in a 90 percent (Z)-endoxifen?
- 19 A. Again, that's a very specific chemistry 20 oriented question.
- Q. Do you know if it's possible to produce 22 a 100 percent pure (Z)-endoxifen?

64

61

1 A. I don't know. I suspect that it's

2 possible. But again, it's a chemistry issue.

- Q. So is it your testimony that -- let me withdraw that.
- So the claim of Ahmad is at least
- 6 80 percent and it's your testimony that that
- 7 includes 80 percent and above, all the way to 100.

8 A. Yes, that's fair.

- 9 Q. If the claim said at least 50 percent 10 (Z)-endoxifen, is it your testimony that that 11 would include 50 percent all the way to 100?
- 12 A. That's a bit more of a stretch. It's 13 more specific at being 80 percent. It's very much 14 closer to 90 and 100 than 50 50 is yeah, 15 that's very too broad, I think.
- 16 Q. What -- is there a point in your mind 17 where it's too broad or appropriate? Would it be 18 75 percent? 60 percent?

19 A. I can't comment on that. I see 20 80 percent and I think that's pretty pure.

21 Q. I want to circle back to one other 22 point that you testified about earlier today, the

1 steps described in Ahmad, correct?

2 A. That's correct.

- Q. Would you agree with me that different
- 4 synthetic pathways can result in different
- 5 impurity profiles?

A. It seems reasonable, yes.

- Q. Did you compare the synthetic pathways
- 8 disclosed in Ahmad and the synthetic pathway
- 9 disclosed in the '334 patent?

10 A. I didn't think that that was relevant.

- 11 Q. Do you have -- do you have any 12 understanding as to whether or not they are the
- 13 same or different?

14 A. I can't recall. I didn't really go 15 through step by step. And even doing so, I'm not 16 an expert on that.

- 17 Q. If I represent to you that the
- 18 synthetic pathways of Ahmad and the '334 are
- 19 different, would you expect that these two
- 20 different synthetic pathways would result in
- 21 different impurity profiles?
- 22 A. I really don't know. I can't comment

1 active moiety.

- 2 Do you remember our discussion about
- 3 that?

4 A. Yes.

- Q. Do you have an understanding of whether
- 6 the active moiety of the endoxifen free base has
- 7 one less hydrogen than the active moiety of the
- 8 citrate salt form?
- 9 A. So you're just talking really about 10 ionization state. And it just it's the same 11 molecule. It just depends on the ionization 12 state.
- 13 Q. Right. And that ionization state 14 requires one additional hydrogen, correct?
- 15 A. It's either protonated or unprotonated,16 which is the general term for this ionization.17 It's a base molecule so it can be protonated.
- 18 Q. With the hydrogen atom?
- 19 A. That's what a proton is, a hydrogen 20 atom, yes, missing an electron.
- Q. Okay. Your declaration does not22 contain any analysis of the synthetic chemistry

1 on that. It could be the same profile. I don't

2 know. Just depends on what you end up with.

- Q. If we wanted to know the answer to that
- 4 question, would we ask a chemist?

A. I think that that would be fair, yes.

- 6 Q. Doctor, I'm handing you what has been 7 marked as Exhibit 1004.
- 8 A. Thank you.
 - (Deposition Exhibit 1004 was
- introduced for identification.)
- 11 BY MS. KRUMPLITSCH:
- 12 Q. Do you recognize Exhibit 1004?
- 13 A. Yes.
- 14 Q. And this is a patent application that
- 15 bears Publication No. WO 2017/070651, correct?
- 16 A. That's correct.
- 17 Q. And the first inventor is Liu, L-i-u.
- Do you see that?
- 19 A. Yes.
- 20 Q. So for brevity sake, can we refer to
- 21 this Exhibit 1004 as the Liu application or Liu?
- 22 A. That's fine.

62.

5

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

66

Q. Did you review the synthetic pathway 1

2 described in Liu?

- 3 A. From a thousand feet, yes.
- 4 Q. What does that mean?
- 5 A. Just a broad overview. I was more 6 interested in the claims of this patent.
- Q. Do you have any understanding whether or not the synthetic pathway described in Ahmad is different than the synthetic pathway described in Liu?
- 11 A. They possibly are, yes.
- 12 Q. And would you agree that if these two 13 synthetic pathways are different, this would 14 result in different impurity profiles between 15 Ahmad and Liu?
- 16 A. Again, I'm not sure about that. It 16 all drugs. That's of 17 depends on what you end up with. So, for example, 17 standard analysis.
- 18 if both ended up with 100 percent (Z)-endoxifen, 19 then I would say there's no difference.
- 20 Q. Do you know whether or not you could 21 end up with 100 percent (Z)-endoxifen by following 22 the synthetic pathway in Liu?

A. I'm not sure. This is a chemist question again.

- Q. And do you know if you would end up with 100 percent (Z)-endoxifen by following the synthetic steps in Ahmad?
- A. Same same answer, really. I mean,
 Ahmad obviously points to it being greater than
 80 percent pure.
- 9 Q. And the same question with respect to 10 the '334 patent: Do you know if by following the 11 steps laid out in the '334 if you'd end up with 12 100 percent (Z)-endoxifen?
- 13 A. Again, not sure. There's there's 14 many references in the '334 patent to previous 15 methods of production as well. So there's a lot 16 to look at there.
- 17 Q. When we talk about the impurity profile 18 -- let me take a step back.
- What are some of the things that you as 20 a formulation expert are thinking about when you 21 look at the impurity profile of a compound?
- 22 A. I guess in in this instance we're

1 looking for perhaps the amount of (Z)-endoxifen in

2 there relative to the -- the mass of the material

3 you end up with.

4 Q. What else besides the amount of 5 (Z)-endoxifen would you be concerned with if 6 you're looking at the impurity profile?

7 A. Yeah, I really don't know. I would 8 refer that to the chemist as well because I 9 suppose, depending on the method of production, 10 there's the potential for, you know, the 11 (E)-endoxifen to be there or solvents or, you

12 know, other parts of material – chemicals that 13 are used in the process.

14 Q. So residual solvents?

15 A. Probably, yeah. I mean, that's with 16 all drugs. That's considered to be a – a 17 standard analysis.

- 18 Q. And would you agree with me that for a 19 pharmaceutical formulation it's important to know 20 the impurity profile of that composition?
- 21 A. Yeah. Specifically for formulation,22 one would want the drug molecule to comply with

1 the United States Pharmacopeia standards if the2 drug is going to be approved by the FDA.

Q. Are there residual solvents that are not compatible with drug pharmaceutical formulation?

6 A. Again, it would depend on the United 7 States Pharmacopeia specification if the drug's 8 for U.S. use.

9 Q. So let's say the drug is for U.S. use 10 and we're focused on the U.S. Pharmacopeia.

11 Are the residual solvents not 12 compatible with pharmaceutical drug formulation?

13 A. We would have to look at the specific 14 monograph in the USP to determine that.

15 Q. Sitting here today, can you tell me any 16 residual solvents that would not be permitted or 17 compatible with drug formulation?

18 A. I -- I -- sorry. If I looked at the 19 USP monograph for this, I can't recall what it may 20 have said about residual solvents.

Q. Is it fair to say that a person ofordinary skill in the art in drug formulation

PLANET DEPOS

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

Conducted on April 12, 2024				
69	71			
1 would consult the USP to evaluate whether or not	1 Do you see that?			
2 certain residual solvents are compatible with a	2 A. Yes.			
3 pharmaceutical formulation?	3 Q. Could you read that sentence out loud,			
4 A. Yes, and possibly other sources as	4 please?			
5 well. I would suspect during the drug approval	5 A. (As read): From a regulatory			
6 process there are toxicology studies done. And	6 perspective, it is essential to know the exact			
7 again, that's somebody else's area.	7 composition of pharmaceutical formulations through			
8 Q. Sure.	8 throughout the entire lifecycle of the product			
9 (McConville Deposition Exhibit 2	9 and also exact characterization of residual			
10 was marked for identification.)	10 solvents is essential.			
11 BY MS. KRUMPLITSCH:	11 Q. And did you believe that sentence to be			
12 Q. Dr. McConville, the court reporter has	12 true when you published this paper in 2020?			
13 just handed you what's been marked as Exhibit	13 A. Yes.			
14 No. 2 to your deposition.	14 Q. And do you still believe that to be			
15 A. Yes.	15 true?			
16 Q. I'll give you a second to take a look	16 A. Yes.			
17 at it. I can represent to you this was not cited	17 Q. Okay. We're going to turn back to the			
18 in your declaration.	18 Ahmad patent.			
19 A. Yes.	So do you have the Ahmad patent back in			
20 Q. Do you recognize this exhibit?	20 front of you?			
21 A. Yes.	21 A. Yes. The '190, yes, got it.			
Q. And are you the Jason T. McConville	Q. Could you turn to column 25, Example 4?			
70	72			
1 who's the second author here?	1 A. Okay.			
2 A. Yes.	2 Q. So I'll just give you a second to take			
Q. Did you co-author this paper?	3 a look at Example 4. Let me know when you have			
4 A. Yes.	4 had a chance to refresh your memory.			
5 Q. Do you need a moment to look through it	5 (Witness reviewing document.)			
6 or do you remember this paper?	6 THE WITNESS: Okay.			
7 A. Well, I guess – I more or less	7 BY MS. KRUMPLITSCH:			
8 remember it. If you want to direct me to a	8 Q. Do you understand that Example 4 here			
9 specific section. If you want me to read through,	9 is describing adding ethyl acetate to the crude			
10 I can. It's a hearty paper.	10 solid product and heating until the solid			
11 Q. No. You are welcome to but I don't	11 dissolves?			
12 think you need to do that for the question I'm	12 A. I'm not sure what you mean by "crude			
13 going to ask.	13 solid product."			
14 If you could just read to yourself the	14 Q. Well, let's take a step back.			
15 introduction on page 1. We don't need to go past	Do you understand that Example 4			
16 page 1.	16 describes adding ethyl acetate?			
17 (Witness reviewing document.)	17 A. I see that it says (as read): Ethyl			
18 THE WITNESS: Okay.	18 acetate (50 mL) was added.			
19 BY MS. KRUMPLITSCH:	19 Q. And what was it added to?			
20 Q. So in the second column, lines nine	20 A. I think possibly – this refers to a			
21 lines down, there's a sentence that starts "from a	21 gummy residue.			
22 regulatory perspective."	22 Q. Do you have an understanding as to			

Conducted on April 12, 2024

1 whether (E)-endoxifen is more soluble in ethyl

2 acetate than (Z)-endoxifen?

A. You best ask the chemist about that.

- Q. If I represent to you that
- (Z)-endoxifen is more stable -- let me withdraw
- that.
- 7 If I represent to you that
- 8 (Z)-endoxifen is more soluble in ethyl acetate
- 9 than (E)-endoxifen, would you agree with me that a 10 crystallization in ethyl acetate would result in a 11 preferential crystallization of the (E)-form?

A. I better not answer that. It's been a 13 long time since I've done recrystallizations 14 methods.

Q. So we would consult a chemist to 16 understand the effects of adding ethyl acetate?

A. I think that would be appropriate. 17

- Q. At the end of this step, Example 4, do 18 19 you agree with me that Ahmad does not provide any 20 guidance as to the expected isomeric ratio that 21 would result between the (Z)- and the (E)-forms?
- 22 A. It doesn't state that here, no.

Q. And do you -- I suspect I know what the 2 answer is but I'm going to ask.

Do you agree with me that Ahmad does 4 not provide any method for producing a

- 5 (Z)-endoxifen enriched filtrate and subsequent
- 6 crystallization? Correct?
- A. Sorry. Please repeat.
- Q. Do you agree with me that Ahmad does 9 not provide any method for producing a
- 10 (Z)-endoxifen enriched filtrate and subsequent 11 crystallization. Correct?
- A. Again, I would have to refer to 12 13 somebody that's got expertise in that area, a 14 chemist.
- 15 Q. Can you answer whether or not Ahmad 16 provides a working example of enriching the 17 mixture in (Z)-endoxifen?
- A. I mean, Ahmad Ahmad states that he 19 can get greater than 80 percent - at least 20 80 percent purity in the claims.
- Q. Did you go back and do any analysis of 22 the synthetic methods provided in Ahmad to see if

that would, in fact, result in 80 percent purity

at least?

A. I did not, no.

- Q. And, again, would you rely on the 4
- 5 chemists to do that analysis of the synthetic
- 6 steps in Ahmad?

7 A. It would definitely be more appropriate 8 than me doing the analysis.

- Q. And do you have an understanding of 10 whether Ahmad provides a working example of 11 obtaining a composition with at least 90 percent 12 (Z)-endoxifen?
- 13 A. Well, as I said in the claims, 1490 percent is encompassed within that claim. So 15 Ahmad says he can do it. And it's an issued 16 patent. I have no reason to doubt that at this 17 point.
- Q. But you yourself did not go back and 18 19 look at the synthetic steps described in Ahmad to 20 see whether or not you could actually obtain a 21 90 percent pure (Z)-endoxifen?
- 22 A. That's correct.

Q. Does Ahmad provide any working examples

of an enteric coated 90 percent (Z)-endoxifen

composition?

74

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A. So just looking through to confirm 5 whether it's possible -- whether it is -- if you

6 just repeat the question again. Sorry. Yeah.

Q. Sure. Yeah.

Does Ahmad provide any working example 9 of an enteric coated 90 percent (Z)-endoxifen 10 composition?

A. I'm not sure whether the enteric 12 coating is mentioned specifically in this example 13 - sorry, in this exhibit. I'd have to, you know, 14 go through it a little more thoroughly to refresh 15 my memory on it. But I do know that the prior art 16 does mention enteric coated formulations using 17 (Z)-endoxifen. Not the capsules mentioned here.

18 Whether or not enteric coating is 19 described earlier, I think it might be. I would 20 have to look a little bit further in this - yeah, 21 I mean, column 18 mentions enteric coating of 22 capsules. On line 27, I believe, through 29

- 1 mentions they're known in the art. At this time,
- 2 of course, enteric coated capsules were routinely
- 3 used for anything that could be degraded in the
- 4 stomach by the stomach acid.
- So since it's mentioned in the patent,
- 6 I think it's not difficult to think about it. And
- 7 then of course at the end of Claim 1, mentions
- 8 that enteric coated tablets, enteric coated
- 9 capsule as well.
- 10 But in terms of working example, it's 11 not a difficult leap to get to.
- Q. So is it your testimony that a person 13 of ordinary skill in the art would know how to 14 enterically coat -- let me withdraw that.
- Is it your testimony that a person of 16 ordinary skill in the art would be able to make an 17 enteric coated capsule of (Z)-endoxifen without 18 too much experimentation?
- 19 A. So either an enteric coated capsule or 20 an inherently enteric capsule. I don't think it's 21 too difficult to try that formulation in any way.
- 22 Okay.

78

- 1 A. It's a very standard test.
- Q. We'll get back to the enteric coating
- 3 questions in a bit.
- If you have your declaration out, let's
- look at page 8, paragraph 23. I'll give you a
- 6 second to read that. It's the paragraph we looked at earlier.
- A. Okav.
- Q. So I want to focus on that first
- 10 sentence. You write (as read): Some drugs,
- 11 including endoxifen, are subject to acid catalyzed
- 12 degradation in the low pH acidic conditions of the
- 13 stomach.
- 14 Correct?
- 15 A. Yes.
- 16 Q. What does endoxifen degrade to?
- 17 A. This is something I think the chemist
- 18 would be more appropriately commenting on. But
- 19 any type of degradation from the low pH conditions
- 20 of the stomach can be easily avoided with 21 protection using an enteric system.
- And are you familiar with the term 22

- "acid-promoted isomerization"?
- A. I've been made aware of it in this 2
- case. I guess it's -- it could be considered a
- form of degradation.
- 5 Q. That was my next question.
- 6 A. Okay.
 - The degradation -- the degradation you
- 8 describe in paragraph 23, is that different than
- acid-promoted isomerization?
- 10 A. Possibly could include it. It's -
- 11 from my point of view, any issue with the low pH 12 of the stomach could be avoided. I'm not sure of
- 13 the exact type of issue associated with the drug 14 molecule.
- 15 Q. Do you understand that (Z)-endoxifen is 16 prone to isomerize to (E)-endoxifen under acidic 17 conditions?
- A. Sorry. Was there a question? 18
- 19 Q. Do you understand that to be true?
- 20 A. Yes, I think that that's been made
- 21 aware to me. And so, great, use an enteric coated
- 22 system to prevent that because the prior art tells

1 us that (Z)-endoxifen is more effective than

- (E)-endoxifen. And so we don't want the formation
- of (E)-endoxifen, I suppose.
- Q. Okay. My question really wasn't about 4 enteric coatings.
- I just want to make sure you understand 6
- 7 and agree with me that (Z)-endoxifen is prone to
- 8 isomerize to (E)-endoxifen under acidic
- 9 conditions; yes or no?
- A. No. The pH of the stomach is very low 11 and it's - it's very acidic. And so I would say
- 12 that in that example with such a low pH that that
- 13 could be the case, yeah. It's more likely to be
- 14 in such a low pH environment, yes.
- 15 Q. And do you have understanding at the pH 16 of the stomach, which is what?
- A. I mean, it can vary from individual to 18 individual. Standard models put it somewhere 1 19 to 3.
- Let's just choose 2 in the middle 20 O.
- 21 there.
- 22 Strange one to choose. But yeah, okay.

84

81

- 1 Q. So at the pH in the stomach, would --
- 2 and we're not talking about enteric coating, just
- 3 the (Z)-endoxifen in a low pH, would that result
- 4 in an equilibrium between the (Z)- and the
- 5 (E)-forms?
- 6 A. That's -- that's -- I mean, you're
- 7 going to have to talk to the chemists about that.
- 8 I'm not sure whether equilibrium is the right
- 9 consideration there. So best to talk to the 10 chemists.
- 11 Q. Okay. Does Ahmad -- so we're going to
- 12 look at the Ahmad patent -- actually, we are
- 13 looking at the Ahmad patent -- describe anywhere
- 14 the difference in solubility between (Z)- and
- 15 (E)-endoxifen?
- 16 A. I didn't see any specification related 17 to the solubilities, no.
- 18 Q. Would a POSA generally expect
- 19 stereoisomers to have similar solubilities?
- 20 A. In in all media or any specific 21 media?
- 22 Q. Let's start with all media.

- Q. Do you agree that it would be
- 2 impossible to predict prior to experimentation the
- 3 exact crystallization conditions that would lead
- 4 to a desired ratio of isomers?
- 5 A. I don't know. There's -- there's some
- 6 predictive tools for many of these sorts of
- 7 processes, I think. So, again, chemists would
- 8 have a better idea than me.
- 9 Q. So if we wanted to have an
- 10 understanding of the challenges in crystallizing
- 11 and recrystallizing, we would talk to a chemist?
- 12 A. They would have more insight than I do, 13 yes.
- 14 Q. Do you have an understanding as to
- 15 whether using a different solvent type would
- 16 result in different ratios of stereoisomers?
- 17 A. Again, it's very specific. Chemistry 18 question.
- 19 Q. I'm going to ask you a number of these 20 just so we have it on the record.
- What about using a different ratio of
- 22 solvents, would that result in a different ratio

82

- A. Obviously they can be separated
- 2 somehow. So I would imagine, you know, that -
- 3 that there could be differences, slight
- 4 differences, in solubility that could be exploited
- 5 in extraction techniques such as column
- 6 extraction.
- Q. Do you agree with me that the more
- 8 similar the solubilities are between
- 9 stereoisomers, the more difficult it is to
- 10 separate them using crystallization?
- 11 A. Oh, you better talk to the chemists 12 about that one.
- 13 Q. Okay. Do you have an understanding as
- 14 to whether if one wanted to achieve different
- 15 ratios of isomers, one could alter the
- 16 recrystallization conditions?
- 17 A. That's again a very specific chemistry 18 oriented question.
- 19 Q. Do you agree with me that there are 20 many different crystallization parameters that
- 22 A. I suppose so.

21 could be altered?

1 of stereoisomers?

- A. Better talk to the chemists.
- Q. What about a different maximum
- 4 temperature to promote dissolution?
- A. Temperature would increase the
- 6 solubility -- that's as much as I know -- in
- 7 probably all cases. So better talk to the
- 8 chemists about that.
- 9 Q. How about using a different minimum
- 10 temperature to promote crystallization?
- 11 A. The same answer as last time.
- 12 Q. How about using different
- 13 concentrations of starting materials?
- 14 A. Of course there's a solubility limit 15 with solvents and that would affect things, I 16 believe. But better ask the chemists.
- 17 Q. And what if you change the rate of 18 solvent addition?
- 19 A. I don't know.
- 20 Q. And changing the rate of increasing the 21 temperature of the solution?
- 22 A. I don't know.

PLANET DEPOS

88

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

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1 Q. Is crystallization impacted by impurity 2 profiles?

3 A. You know, from my basic understanding,

4 different materials within a recrystallization

5 system can impact rates of crystallization, types

6 of crystal form. But it's a very limited

7 understanding I have.

8 Q. So for all these we would ask the 9 chemists?

10 A. I think that that's the best thing, 11 ves.

12 Q. Is crystallization impacted by residual 13 solvents?

14 A. I imagine so, yes.

15 Q. Do you have an understanding as to 16 whether Ahmad describes a crystallization method 17 to generate 90 percent (Z)-endoxifen?

18 A. As I've said, Ahmad -- the '190 patent?

19 Q. Uh-huh.

20 A. Yeah, Ahmad does describe that at least

21 90 percent (Z)-endoxifen can be achieved, which 22 encompasses greater than 90 percent as well.

Q. But sitting here you can't point to any

2 specific crystallization parameters that Ahmad

3 disclosed that would result in the greater than

4 80 percent?

5 A. I better not. It would be guesswork.

6 Q. So do you have an understanding as to 7 whether Ahmad describes which solvents to use to 8 generate this greater than 80 percent?

9 A. Not specifically no.

10 Q. Do you have understanding of whether or 11 not Ahmad describes the ratio of solvents used to 12 generate 80 percent?

13 A. No.

14 Q. What about the ratio of solvents to use 15 to generate 90 percent?

16 A. Same as before.

17 Q. Do you have an understanding as to 18 whether Ahmad describes the appropriate 19 temperature to generate 90 percent pure 20 (Z)-endoxifen?

21 A. I do not.

22 Q. And how about whether or not Ahmad

1 describes the rate of solvent addition to generate

2 90 percent pure (Z)-endoxifen?

A. I do not.

Q. Do you have understanding as to whether

5 Ahmad describes the concentration of starting

6 materials to generate 90 percent pure

7 (Z)-endoxifen?

A. No.

Q. What about the concentration of

10 starting materials to generate --

11 (Stenographer clarification.)

12 BY MS. KRUMPLITSCH:

Q. What about the concentration for

14 starting materials to generate 80 percent

15 (Z)-endoxifen?

16 A. No.

17 Q. And any understanding as to whether 18 Ahmad identifies the crystallization parameters

19 required to achieve 80 percent (Z)-endoxifen?

20 A. No.

21 Q. Does Ahmad disclose the crystallization 22 parameters required to achieve 90 percent

86

1 (Z)-endoxifen?

2 A. Same – same answer as before. It –

3 the claims indicate that at least 80 percent can

4 be obtained. So I have no reason to doubt what's

5 in the claims.

6 Q. And we would look to a chemist to 7 actually go through the specification?

8 A. Yes.

9 Q. And in your work -- your research, your

10 -- in your research, do you use -- do you use

11 fractional crystallization to separate

12 stereoisomers?

13 A. I do not.

14 Q. If you could turn in your declaration

15 to page 14, paragraph 31. I'll give you a second

16 to read that paragraph.

17 A. 31?

18 Q. 31 on page 14.

19 A. Okay.

20 Q. So in paragraph 31 you state that,

21 second-to-last sentence, (as read): Ahmad teaches

22 that this purification can be accomplished by

PLANET DEPOS

92

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

1 using crystallization or chromatography.

2 Do you see that? Third line from the

3 bottom of paragraph 31.

4 A. Paragraph 31?

Q. Yes. It's down near the bottom. It's second-to-last sentence.

7 A. Could you just repeat what you...

8 Q. Sure. Do you see in that

9 second-to-last sentence you state that (as read):

10 Ahmad teaches that this purification can be

11 accomplished by using crystallization or

12 chromatography?

13 A. Oh, there's a – okay. Yes. Sorry.
14 It's just the fact that 61 was on the left there.
15 It threw me a little. I was thinking numbering
16 went off.

17 Right. Yeah. I see that, yes.

18 Q. Okay. So we just spent some time 19 talking about crystallization and you suggested 20 that we would consult with a chemist to understand 21 what Ahmad does and does not describe with respect 22 to crystallization.

Do you have an understanding as to

2 whether Ahmad identifies the chromatography

3 parameters required to identify 90 percent

4 (Z)-endoxifen?

5 A. Again, that — that would be the

6 chemist to look at that.

Q. And do you have an understanding as to8 whether or not Ahmad provides a working example of

9 purified (Z)- and (E)-endoxifen using

10 chromatography?

11 A. Same issue.

12 Q. Do you recall seeing any chromatography 13 data in Ahmad quantifying the isomer purity of 14 endoxifen?

15 A. Let me see. I didn't think so, no.
16 But just checking the figures in there. I don't
17 know if there's anything hidden in the text. But
18 I don't see any particular figures associated with
19 that.

20 Q. So now we're going to flip to page 25 21 of your declaration, please, and paragraph -- oh, 22 sorry. It's page 26, paragraph 56. I'll give you 1 a second to read paragraph 56.

2 A. Okay.

(Witness reviewing document.)

4 THE WITNESS: Okay.

5 BY MS. KRUMPLITSCH:

Q. So do you see you state kind of in themiddle of that paragraph (as read): A POSA would

8 have been motivated to include the pure form of

9 (Z)-endoxifen manufactured using well-known

10 methods.

11 And then you cite examples -- sorry,

12 Exhibits 1004 and 1005.

13 A. Yes.

14 Q. So 1004 is Liu, the Liu reference that

15 we looked at earlier.

16 A. Yes.

17 Q. And let me give you 1005.

18 (Deposition Exhibit 1005 was

introduced for identification.)

20 BY MS. KRUMPLITSCH:

21 Q. Dr. McConville, I'm handing you what

22 has been marked previously in this proceeding as

90 1 Exhibit 1005.

3

2 A. Thank you. Okay.

Q. And Exhibit 1005 is International

4 Patent Application WO 2012/050263 and the first

5 inventor is Song, S-o-n-g.

6 Do you agree with that?

7 A. Yes.

Q. Is it okay if I refer to Exhibit 1005

9 as Song?

10 A. Yes, that's fine.

11 Q. Did you review the -- let me withdraw.

12 You understand Song provides a

13 synthetic -- describes a synthetic pathway?

14 A. Yes

15 Q. Did you review that synthetic pathway?

16 A. Again, just an overview. Really was 17 interested in the claims at the end with what was 18 claimed to be produced, yes.

19 Q. Okay. Did you compare the synthetic 20 pathway in Song to the synthetic pathway described 21 in Ahmad?

22 A. I did not.

96

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

- Q. And did you compare the synthetic
- 2 pathway in Song to the synthetic pathway described
- 3 in the '334 patent?
- 4 A. I did not.
- Q. Do you have understanding as to whether
- 6 Song teaches the use of ethyl acetate for
- fractional crystallization?
- 8 A. I can't recall that.
 - Q. Do you recall whether Song
- 10 characterized the results of -- characterized the
- 11 resulting endoxifen product using NMR?
- A. Yes. I'm aware of that, yes. 12
- 13 Q. Did you review the NMR data?
- A. Not thoroughly, no. 14
- 15 Q. And did you compare the NMR data in 16 Song to NMR data in other references?
- A. Well, only after I read Dr. Davies' -17 18 Dr. Davies' or Davis' report, Davies.
- Q. So after you read Dr. Davies' report, 20 did you then compare the NMR data in Song to the 21 NMR data in other references?
- 22 A. Just with respect to what Davies had

94

18

- 1 written. And he indicates that Song had some
- 2 errors in the NMR interpretation. And so as a
- 3 result obviously, you know, Song is not to be
- 4 relied upon in my opinion because I agree with
- 5 Dr. Davies in that respect.
- I think, though, that the '334 patent 6
- 7 also cites Song as an other publication somewhere. 7
- 8 So they made the same mistake as I did, I suppose.
- 9 Q. Would you also agree with me that Song 10 does not teach an endoxifen composition to be used
- 11 in a pharmaceutical formulation?
- 12 A. Say that again, please.
- Q. Song does not teach endoxifen
- 14 composition to be used in pharmaceutical
- 15 formulations, correct?
- A. Well, sort of disagree with that. I 17 think that in the background art obviously it 18 describes breast cancer. I can't think of any 19 other way to administer endoxifen to treat a
- 20 condition other than with a pharmaceutical
- 21 formulation.

16

22 When you were reviewing Song, did you

- see any reference to solid oral dosage forms, for
- example?
- A. Well, as I've -- as I've said, I think
- 4 from a person of ordinary skill in the art
- presented with a compound, it's the go-to thing,
- 6 really, the solid oral dosage form.
- 7 I'm not sure whether Song mentions it
- 8 specifically. But, you know, with any patent
- 9 that's producing a therapeutic compound, that's
- 10 one thing on the table, I think. Now, it's not 11 necessarily a formulation patent, per se, though.
- Q. Looking at the Liu application, which 13 is Exhibit 1004.
- 14 A. Okay. Yeah. Sorry.
- 15 Q. You agree with me that the claims of 16 the Liu application are directed to processes for
- 17 preparing (Z)-endoxifen?
- 19 Q. And there are no claims to a

A. In general, yes.

- 20 pharmaceutical formulation?
- A. Well, not explicitly stating that, so 21
- 22 correct. I again, I would suggest that
- 1 obviously it's an active compound and the -- in
- the background of the patent, obviously there was
- 3 a description of what this could be used to treat.
- 4 And from that point of view, obviously an active
- 5 compound does form part of a pharmaceutical
- 6 formulation. Doesn't explicitly state what that
 - formulation is.
- Q. Okay. And if we wanted to understand
- 9 whether or not the reagents used by Liu are
- 10 different or the same as that used in the '334
- 11 patent, would we ask the chemists?
- 12 A. You mean in terms of the synthesis of 13 the molecule?
- 14 Q. Yes.
- 15 A. Yeah, I think that's fair.
- Q. And if we wanted to understand whether 16
- 17 the use of different reagents would result in a
- 18 different impurity profile between Liu and the
- 19 '334 patent, would we ask -- rely on a chemist?
- 20 A. Yes.
- 21 MS. KRUMPLITSCH: I think we've been
- 22 going another hour. Do you want to take

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

another short break? A. Well, I mean, I can't comment on -- on 1 2 MR. MENCHACA: Sure. 2 that. I mean, I don't know to what extent Song 3 THE STENOGRAPHER: We're off the thought they were making (Z)-endoxifen or not. 4 4 It's really to you a chemist, you know. Endoxifen record at 11:12. 5 is a term used for (Z) and (E) in my opinion. (Whereupon, a recess was taken 6 from 11:12 a.m. to 11:36 a.m.) Okay. Q. THE STENOGRAPHER: We're back on the 7 A. Sometimes interchangeably. record at 11:36. Q. I also want to circle back to something 9 BY MS. KRUMPLITSCH: 9 you said earlier. We talked a lot about the Q. Dr. McConville, when we broke, we were 10 claims of Ahmad -- the claim, sorry, the single 11 talking about the Song reference. 11 claim. And we spent some time going through the 12 synthetic pathways that are described in Ahmad. 12 A. Yes. 13 Q. And you mentioned that you agreed with A. Well --13 14 Dr. Davies that Song misinterpreted the NMR data. Q. And you said that you would rely on a A. I'm -- I'm -- you know, he's an expert 15 chemist to really go through those in detail, 16 in that field. And so I - I believe that he's 16 correct? 17 right in pointing out those disparities, yeah. 17 A. Yes. Q. And then do you also recall testifying 18 O. And you also made the statement that 19 you assume that the specification teaches you how 19 before the break that the '334 patent made the 20 same mistake in relying on Song? 20 to make the claimed invention, correct? A. I believed so. I thought I saw A. I have no reason to doubt that Ahmad -21 22 somewhere in there that there was a reference to 22 Ahmad -- Ahmad's claim is valid. 100 1 Song. But, you know, I could be mistaken on that. Q. And you're relying on the presumption 2 I thought I had seen it somewhere. that Ahmad is an issued patent? Q. Well, let me point to you the '334 3 A. Yes. 4 patent, column 18. Q. And did you do any of your own investigation to see whether or not Ahmad actually A. Okav. does enable a POSA to make the claimed invention? 6 Q. And it's column 18, starts at line --7 the paragraph that starts at line 23 that starts 7 A. That's really chemist's field. with "several methods." Okay, Dr. McConville, I'm handing you 9 what has previously been marked as Exhibit 1008 in 9 A. Yes. 10 this proceeding. Q. And you'll see that Song is referred --11 I'll let you read that paragraph, but Song is the (Deposition Exhibit 1008 was 11 12 very last reference in that paragraph. So take a introduced for identification.) 12 13 second and read that paragraph. 13 BY MS. KRUMPLITSCH: A. Yes, yes. No, that's -- that's exactly 14 Q. I'll give you a chance to look at that. 15 where I recall seeing it. 15 A. Yes. Okay. Q. So do you agree with me here that the Q. Is it okay with you if we refer to 16 17 Exhibit 1008 as the Cole reference? 17 '334 patent is citing Song as describing a method 18 for the synthetic preparation of endoxifen? A. Yes. 18 Q. And do you agree with me that Cole 19 A. Yes. 20 Q. And the '334 patent is not citing Song 20 describes enteric coating of capsules containing 21 for methods of purifying (Z)-endoxifen. 21 paracetamol?

22

A.

Yes.

Do you agree with that?

104

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

4

01 12, 2

- 1 Q. Do you have an understanding of the 2 solubility of paracetamol?
- 3 A. I can't recall what it is. It's
- 4 possibly mentioned in here somewhere. It's
- 5 something I have looked at in the past. But I
- 6 can't remember what the solubility of paracetamol, 6
- 7 acetaminophen, is.
- Q. Do you have an understanding of whetheror not paracetamol is highly soluble as comparedto endoxifen?
- 11 A. I haven't got the numbers in front of 12 me. I wouldn't like to say.
- 13 Q. But a POSA could look up those numbers, 14 the solubility of each compound, correct?
- 15 A. They they could. But I mean in 16 general this paper is about stopping drug release 17 in the stomach, at least. You know, and doesn't 18 really matter what the solubility of the drug is. 19 It could be any solubility whatsoever. It's just 20 not being released in the stomach area.
- 21 Q. Okay. Cole does not describe using an 22 enterically coated capsule to control other delay

- 1 have been very routine to take endoxifen as made
- 2 by Ahmad and formulate it in a -- in an enteric
 - capsule.
 - Do you stand by that statement?
 - A. It's not necessarily referring to
 Ahmad, my statement. But any method of
 synthesizing endoxifen and incorporating it into
 an enteric capsule would be reasonable, I believe.
- 9 Q. So when you are formulating a compound, 10 can you choose any enteric coating?
- 11 A. Depending on, for example, where you
 12 would like the drug to release, you'd have a
 13 choice of different enteric coatings. The Cole
 14 article, for example, indicates the use of
 15 Eudragit, a polymethacrylate copolymer. There are
 16 other choices for enteric coating that you could
 17 use. So there's options out there for enteric.
 18 It's not limited to anything in particular.
- 19 Q. Okay. When designing a formulation or 20 dosage form, can you take a compound and choose 21 any capsule formulation?
- 22 A. Sure. Again, there's lots of different

102

- 1 disintegration and absorption of endoxifen
- 2 compositions, correct?
- 3 A. Could you repeat?
- Q. Yep. Cole does not describe using an
- 5 enterically coated capsule to control or delay
- 6 disintegration and absorption of endoxifen in the 7 GI tract?
- 8 A. Cole describes the use of paracetamol,
 9 which it could have been any drug that Cole
 10 describes, really, as far as I'm concerned in
 11 terms of where it's released. So yes, I agree
 12 that endoxifen is not referred to in Cole's
 13 article. But a standard drug like paracetamol is
 14 well known as a model drug for market purposes
 15 possibly.
- 16 Q. Cole does not describe whether an 17 enteric coated endoxifen capsule would provide a 18 sustained action over a longer period of time, 19 correct?
- 20 A. That's correct, yes.
- 21 Q. And so in your declaration at
- 22 paragraph 71 on page 31 you state that it would

- 1 options for capsules you can choose from. So...
 - Q. What are some of those options?
- 3 A. Gelatin, HPMC, enteric polymers 4 themselves, insoluble polymers as well, time 5 delayed.
- Q. What factors would you consider indetermining what type of capsule you would use?
- 8 A. That's a very broad answer, I'm afraid
 9 to tell you. But you might look at cost, you
 10 might look first first, let's just say if
 11 you want to protect it from the stomach, the first
 12 port of call would probably be the Eudragit
 13 polymethacrylate copolymers. They're commonly
 14 used, easy to get ahold of. There's articles
 15 indicating their use. So that would be the first
 16 thing you'd probably try.
- 17 Q. When making an enteric capsule 18 formulation, would a POSA consider interactions 19 between the enteric material and residual 20 solvents?
- 21 A. So this just to clarify, this is for 22 human use or?

108

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

7

O. Yes, for human use.

2 A. Well, one would hope the endoxifen, for 3 example, if that's the drug you're using is -- is

- 4 passes the muster in terms of the Pharmacopeia
- 5 standards. And so then, no, a POSA would assume 5
- 6 that we're in good shape with that drug.
- Q. So assuming the residual solvents that 8 are present are safe for human dosing I guess, so 9 assuming we pass that hurdle, would you then
- 10 consider interactions between the enteric material
- 11 and the residual solvents?
- A. I think I just answered that, that 13 everything should be fine at that point with the 14 drug itself and I don't think residual solvents 15 would come into this.
- Q. When making an enteric capsule 17 formulation, would a POSA consider interactions 18 between the enteric material and impurities?
- 19 A. I mean, it depends on I guess testing 20 results that one might see. If everything seems 21 to release correctly and the analytical data comes 22 back fine from the in vitro testing initially, I

106

- 1 suppose there's not -- nothing to worry about.
- 2 But if there's some unknown reason why
- 3 concentrations might be lower, for example, and
- 4 then it's a fair game to look at the drug
- 5 composition and make sure that there's no
- 6 interactions from anything that may be there. But
- 7 as I said, if it conforms to monograph
- 8 specifications that is it shouldn't be a
- 9 consideration.
- 10 Q. When making an enteric capsule
- 11 formulation, would a POSA consider interactions
- 12 between the enteric material and a charged
- 13 compound?
- A. Do you mean electrostatically charged 15 or -- how do you mean?
- Q. Electrostatically charged, let's start 17 with that.
- A. Mainly for aerosol formulations. 18
- That's when --19 Q.
- A. Sorry. You did specify enteric. So 21 yeah, I guess you wouldn't use enteric for an 22 aerosol formulation. That would be a bit silly.

It shouldn't -- shouldn't be an issue

2 once dissolution occurs, electrostatic charging, I

- wouldn't suspect.
- Q. Would -- when making an enteric capsule 4 formulation, would a POSA consider interactions
- between the enteric material and an unstable drug?
 - A. So the drug itself is unstable?
- 8 Q. Correct.
- 9 A. What - so I'm not sure - I guess if 10 the enteric coating - I mean, if it's an enteric 11 coating, this is what we're talking about, this is 12 removed from the drug itself. So there's a 13 barrier in the way with whatever the capsule is 14 made of. The capsule is coated -- we're talking 15 about a capsule still, right?
- 16 Q. Yes.
- 17 We're not talking about a tablet, are 18 we?
- 19 Q. Enteric capsule formulation.
- A. Okay. There's there's something 20 21 between the drug and the enteric coating. So I'm 22 not sure it's too much of an issue.

- Q. So we talked about some of the factors
- a POSA would consider when choosing an enteric
- coating. You mentioned cost. Maybe availability.
- 4 A. Uh-huh.
- Q. Are there other factors that might come into play?
- A. Well, the key factor that one would think about is where we want this to start
- 9 dissolving in the gastrointestinal tract.
- Q. Any other factors besides those three 10 11 that you can think of?
- 12 A. Nothing springs to mind right now. But 13 I'm sure there may be other factors.
- 14 Q. Do you know if HPMC carries a charge?
- 15 A. What type of charge do you mean?
- Q. An electrostatic charge. 16
- 17 A. It can, yes.
- Q. And do you know whether enteric 18
- 19 materials generally carry a charge?
- 20 So HPMC is not an enteric material.
- 21 Q. Right. Sorry. It's a separate

22 question.

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

111 A. So the question is do enteric materials 1 procedure that's used for enteric formulations 2 carry an electrostatic charge or -- there's -irrespective of the drug used. And in this case okav. the brand name Nexium is used in their test 4 Q. Yes. analysis. 5 A. They can. 5 But, you know, as pointed out in the MS. KRUMPLITSCH: Let's put that 6 concluding statement just before the references in 6 the Benameur paper it indicates (as read): The exhibit away. I'm handing you what has been marked as 8 capsules trials are underway to further evaluate Exhibit 1010 in this proceeding. 9 the technology's range and application, including (Deposition Exhibit 1010 was 10 normal biopharmaceutical products, vaccines, and 10 introduced for identification.) 11 oral peptide products from preclinical to Phase 11 12 III. 12 BY MS. KRUMPLITSCH: Q. Are you familiar with Exhibit 1010? So it just shows a broad range of 13 13 14 things that can be put into the capsule. And in 14 15 Q. Is this one of the documents you 15 this example they're showing a small molecule drug 16 reviewed in preparing for this deposition? 16 that they obviously showed that it could be used 17 for macro molecules and really anything that could 17 A. Again, this is something I looked at 18 be subject to an issue with the acidity of the 18 prior. Didn't look at it recently, no. 19 stomach. Q. And is it fair to say -- do you need a 20 minute to look through Exhibit 1010 again? 20 Q. I am going to break this down. 21 A. I can skim through it, yeah, sure. 21 So esomeprazole is Nexium, correct? 22 (Witness reviewing document.) 22 Α. Yeah. 110 112 THE WITNESS: Okay. Q. And esomeprazole is known to be 2 BY MS. KRUMPLITSCH: 2 sensitive to acidity in the stomach? Q. So first of all, is it okay with you if 3 A. I believe so, yes. I refer to Exhibit 1010 as Benameur? Q. And do you know if Nexium or A. Yes. esomeprazole is positively or negatively charged? 5 6 Q. So Benameur describes enteric capsule 6 A. In what conditions? drug delivery tested in esomeprazole, correct? Q. As it is formulated in this enteric 8 A. So -capsule drug delivery technology. Q. And I can point you to page 3. 9 A. Yeah. I'm -- I'm not sure. So the 10 10 esomeprazole – let me – if I can just take a A. Okav. Q. Okay. "The Human Biostudy Results," do 11 look through, if that's okay, for a second. 11 12 you see that heading right there? (Witness reviewing document.) 12 13 13 THE WITNESS: So I'm not sure in A. Yeah. Q. So do you agree with me that Benameur 14 this case because I think they refer to 15 is testing esomeprazole with these enteric capsule 15 Nexium quite a lot. And my issue is that 16 drug delivery system? 16 I'm not sure which type, whether it's OTC 17 17 form --A. Yes. Q. And Benameur does not describe using (Stenographer clarification.) 18 18 19 enteric capsule drug delivery technology to 19 THE WITNESS: -- over-the-counter, 20 control or delay disintegration and absorption of 20 OTC, or whether it's prescription form. So 21 endoxifen in the GI tract, correct? I can't tell just by looking at it as we 21 22 Again, it's a standard testing 22 sit here. Yeah, sorry. I just can't glean

Conducted on April 12, 2024

	April 12, 2024			
113	115			
1 it by looking at that right now.	1 A. And when you refer to sustained action,			
2 BY MS. KRUMPLITSCH:	2 you're talking about the pharmacodynamics, the			
3 Q. Okay. If you look at the if you	3 efficacy of the drug over time for an extended			
4 look at the first sentence of introduction I'll	4 period –			
5 give you a second.	5 Q. Yes, for endoxifen.			
6 Do you have a second to read that first	6 A following absorption?			
7 sentence?	7 Oh, endoxifen?			
8 A. Oh, yeah. Sorry. I was waiting on	8 Q. Yes, endoxifen.			
9 you.	9 A. So it talks — so this paper with the			
10 Q. Ready for lunch soon.	10 example of Nexium does show — and I'm looking			
So you agree with me that Benameur is	11 just above the summary section on page 3.			
12 describing this enteric capsule drug delivery	12 Q. I'm there.			
13 technology that provides full enteric protection	13 A. It shows overall bioavailability was			
14 and rapid release in the upper GI tract?	14 increased with a Cmax and AUC increased by			
15 A. Yes.	15 56 percent and 32 percent for the example drug			
16 Q. And Benameur does not describe using	16 shown. And so for that example drug, one might			
17 this enteric capsule drug delivery technology to	17 think that the increase in Cmax could potentially			
18 control or delay disintegration and absorption of				
1	18 lead to an increased effectiveness, especially			
19 endoxifen compositions in the GI tract?	19 with the increased AUC shown as well.			
20 A. I mean, it talks about drug delivery.	20 And from that you might think other			
21 It would infer that — you know, that first	21 drugs could perhaps follow suit if they're			
22 sentence there talks about full enteric protection	22 protected substantially from the gastric acid.			
114	116			
1 and rapid release in the upper gastrointestinal	1 Q. You would need to test that for			
2 tract, small intestine. It doesn't go into any	2 endoxifen, though, correct?			
3 particular example of drug at that point.	3 A. For for any other drug you would			
4 Q. And Benameur does not describe whether	4 look at the pharmacokinetics, of course.			
5 or not an enteric capsule drug delivery technology	5 MS. KRUMPLITSCH: Can we go off the			
6 sorry. Let me withdraw that.	6 record for a second?			
7 If you formulated endoxifen using this	7 THE STENOGRAPHER: We're off the			
8 enteric capsule drug delivery technology, Benameur	8 record at 12:09.			
9 does not describe whether that would provide a	9 (Whereupon, a lunch recess was taken			
10 sustained action over a longer period of time,	10 from 12:09 p.m. to 1:06 p.m.)			
11 correct?	111			
12 A. Just reviewing the results a bit, if	12			
13 you don't mind.	13			
14 Q. No problem.	14			
15 (Witness reviewing document.)	15			
16 THE WITNESS: So can you repeat your	16			
17 question again? Sorry.	17			
18 BY MS. KRUMPLITSCH:	18			
10 DT MD. KKUMI LITSCII.				
10 O Panamaur door not tooch that the use of	110			
19 Q. Benameur does not teach that the use of	19			
20 this enteric capsule drug delivery technology	20			

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

Conducted on April 12, 2024				
1 AFTERNOON SESSION	119 1 gelatin capsule is enterically coated or not for			
2 THE STENOGRAPHER: The time is	2 immediate release?			
3 1:06 p.m.	3 A. They could be, yes.			
JASON T. MCCONVILLE, PH.D.,	4 Q. And Stegemann does not describe using			
5 having been previously duly sworn was examined and	5 any excipient in an enterically coated capsule			
6 testified further as follows:	6 with respect to endoxifen compositions, correct?			
7 RESUMED EXAMINATION	7 A. Stegemann lays the foundation for use			
8 BY MS. KRUMPLITSCH:	8 of any drug in capsules such as represented in			
9 Q. Dr. McConville, I'm going to hand you	9 Table 4.			
10 what has previously been marked as Exhibit 1011.	10 Q. And Stegemann does not describe whether			
11 A. Thank you.	11 any particular excipient would impact the			
12 (Deposition Exhibit 1011 was	12 stability of a 90 percent pure (Z)-endoxifen			
introduced for identification.)	13 composition?			
14 BY MS. KRUMPLITSCH:	14 A. Stegemann really outlines excipient			
15 Q. And is it okay with you if I refer to	15 choices that can be used in combination for any			
16 Exhibit 1011 as Stegemann?	16 drug. It doesn't doesn't specify any drug in			
17 A. Yes.	17 particular with respect to that table.			
18 Q. I'll give you a second to look at that.	18 Q. And is it your let me withdraw that.			
19 (Witness reviewing document.)	Would a POSA how would a POSA decide			
20 THE WITNESS: Okay.	20 which excipients to use in an endoxifen			
21 BY MS. KRUMPLITSCH:	21 composition?			
22 Q. And Stegemann describes hard gelatin	22 A. I suppose one of the first things to			
118 1 capsules, correct?	120 1 think about is — well, there's a few moving parts			
A. Yes. Q. And you cite to Stegemann, Table 4, on				
4 page 8 7. It says page 7 of 23, but it's	3 is powder flowability, whether the drug itself can4 flow properly or not.			
5 page 8 of the document.	5 In a — in an automated process to make			
6 A. Okay. Yeah.	6 many capsules, you want a nice powder flowability.			
7 Q. If you want to follow along, it's in	7 However, on a research scale you can sort of			
8 your declaration at page 22.	8 bypass that by dispensing a known amount in each			
9 A. Got it.	9 capsule rather than relying on powder flow.			
10 Q. And these are this Table 4 is a list	10 That's one thing.			
11 of excipients used in the formulations of	Other things might be related to the			
12 immediate release hard gelatin capsules?	12 dose you want to put in a capsule of a given size.			
13 A. Yes, that's correct.	13 So along with powder flow you possibly choose a			
14 Q. And Stegemann does not describe using	14 diluent that was suitable. Those are the first			
15 any excipient in an enterically coated capsule,	15 sort of considerations, I think.			
16 correct?	16 Q. Would you give any consideration to any			
17 A. Yeah, if the capsule is coated, one of	17 potential interactions between the (Z)-endoxifen			
18 the — the capsule could be comprised of gelatin	18 and any of the excipients?			
19 hard gelatin in exactly the same way, just on	19 A. For – for any drug you would consider			

20 the outside of the capsule has a coating.

Q. So is it your testimony that the

22 excipients could be the same whether the hard

20 if there was any potential interaction, yes.

22 marked previously as Exhibit 1012.

Q. I'm going to hand you what has been

123

A. Thank you.

- 2 (Deposition Exhibit 1012 was
- 3 introduced for identification.)
- BY MS. KRUMPLITSCH:
- Q. Dr. McConville, is it okay with you if
- I refer to Exhibit 1012 as the HPE?
- A. Yes.
- Q. Now, you included this exhibit with
- 9 your declaration.
- 10 And this exhibit is just an index,
- 11 correct?
- A. Yes, but the index is used with the 12 13 book as a whole.
- Q. So is it your intention to incorporate 15 the teachings of the entire book or just the 16 index?
- A. I mean, the index represents a specific 17 18 citation within the book itself. So I don't see 19 any problem with including the entire book from 20 this point of view. Obviously we don't have that 21 with us. But a particular excipient is listed. 22 There's more details than just the listing, of

121

- 1 obviously the 2006 edition. I can't remember off
- 2 the top of my head. There's editions pretty
- much every revision, there's additional excipients
- added, so it's big.
 - Q. So a big -- a big book?
- 6 A. Yes.
- Q. Did you review the entirety of that for
- 8 this proceeding?
- A. No. I've looked at a lot of the book 10 over several years. For this proceeding I did not 11 look at the entirety of the book. I wanted to 12 point out that, you know, one could easily look in 13 the index and find a particular category of 14 excipient would be useful, you know, for an 15 intended use such as capsules or -- or whatnot.
- Q. Okay. Do you know whether the HPE 17 describes using any particular excipient with an 18 endoxifen composition?
- A. Like all like the previous exhibits, 20 it's a general guide for excipient use for a wide 21 array of drugs. In some instances the excipients, 22 the monographs listed will indicate certain drugs

122

1 course.

- Q. And you cite the HPE. And in your
- declaration it's paragraphs 50 and 51 if you want
- 4 to look at that.
- You cite this as an index that provides
- 6 a list of excipients by category, directing those
- 7 in the art to information about how to use that
- 8 excipient for its intended purpose, right?
- A. Yes, as a quick reference somebody can 10 look through the index at a particular use. For
- 11 example, I guess the third page you can look under
- 12 where it says disinfectants. And it lists a whole
- 13 slew of different excipients used as
- 14 disinfectants. And then obviously you can hone in
- 15 on a particular excipient by going to the exact
- 16 page within the excipient handbook -- handbook and 17 pharmaceutical excipients.
- Q. Dr. McConville, are you aware -- did
- 19 you review the entire -- let me withdraw that.
- How many pages or how big is this
- 21 handbook? Couple hundred?
- 22 That's a very good question. This is

- 1 and whether or not the excipient is suitable for
 - 2 use with that particular drug. I can't comment on
 - 3 whether endoxifen is listed anywhere in the
 - handbook because it's a big volume.
 - So, for example, looking at this index,
 - 6 and I'm at page 5 of 8, if you wanted an
 - emulsifying agent you could look in this index
 - under emulsifying agents and there are -- I'm not
 - 9 going to count them but there are a long list of
 - 10 emulsifying agents, correct?
 - 11 A. Yes.
 - 12 O. And one skilled in the art would have 13 to go through and identify which emulsifying agent 14 had the correct properties for what they were 15 trying to formulate; is that right?
 - A. Maybe not the entire list. A person of 17 ordinary skill in the art may have an idea which 18 excipient might be suitable for their particular 19 application and so might have a shorter list than 20 the entirety to - to focus on.
 - Okay. Let's -- I'm going to hand you 22 what has been marked as Exhibit 1006 in this

Transcript of Jason T. McConville, Ph.D.

Conducted on April 12, 2024		
125	127	
1 proceeding.	1 chemist for, if they have any other information	
2 A. Thank you.	2 related to the endoxifen citrate that was used in	
3 (Deposition Exhibit 1006 was4 introduced for identification.)	3 the study.Q. A POSA would understand that the PK	
4 introduced for identification.) 5 BY MS. KRUMPLITSCH:		
	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Q. And if it's okay with you,Dr. McConville, can I refer to Exhibit 1006 as		
8 Ahmad 2010?	8 A. You have to repeat that again.	
9 A. Yes.	9 Q. Well, let me just ask: Would the PK	
10 Q. Do you need a minute to review Ahmad	10 parameters of an endoxifen citrate vary depending	
11 2010?	11 on the ratio of (Z)- to (E)-isomers in the	
12 A. I'll just — I'm just reminding myself	12 composition?	
13 as to what I have used it for.	13 A. The pharmacokinetics?	
14 Q. Sure.	14 Q. Yes.	
15 A. If you don't mind.	15 A. I'm not sure that they would vary.	
16 (Witness reviewing document.)	16 Q. Did you do any investigation to	
17 THE WITNESS: Okay.	17 understand whether or not they would?	
18 BY MS. KRUMPLITSCH:	18 A. I can't think of a reason why there	
19 Q. And your discussion of Ahmad 2010 is	19 would be much variability in pharmacokinetics for	
20 it's on page 16. So it's on page 16 of your	20 (Z) or (E) since just that endoxifen is measured	
21 declaration.	21 in this article. It that's the compound which	
22 A. Okay.	22 is analyzed by I think they used some sort of	
126	128	
1 Q. So Ahmad 2010 describes a safety study	1 HPLC method.	
2 comparing endoxifen citrate to tamoxifen, correct?	2 If I can just yes, so	
3 A. Yes.	3 chromatographic method to analyze endoxifen. So	
4 Q. Ahmad 2010 does not describe the level	4 we as established, we don't know the difference	
5 of purity of the endoxifen citrate that was	5 in (Z) or (E), whether there even would be one in	
6 administered, correct?	6 terms of pharmacokinetics. But this is measuring	
7 A. So this is — if you wouldn't mind just	7 for endoxifen as a whole.	
8 repeating that again.	8 Q. And to be precise, it's measuring	
9 Q. Sure. Ahmad 2010 does not describe the	9 endoxifen citrate, correct?	
10 level of purity of the endoxifen citrate that was	10 A. It's a pharmacokinetic analysis. So	
11 administered, correct?	11 it's not measuring the citrate salt. This is	
12 A. It just refers to as endoxifen citrate.	12 blood samples of endoxifen in the body.	
13 So that's as far as it goes, yeah.	Q. But you'd agree with me that what was	
14 Q. And so we don't know the ratio of (Z)-	14 administered to the patient was endoxifen citrate?	
15 to (E)-isomers of endoxifen citrate that was	15 A. Correct, yes.	
16 administered?	16 Q. And so I just want to make sure I	
17 A. Not precisely, no.	17 understand your testimony, that you believe the	
18 Q. Were you able to confirm or study or	18 pharmacokinetic properties of endoxifen and	
19 understand the ratio of (Z)- to (E)-isomers that 20 were administrated was administered in Ahmad	19 endoxifen citrate would be the same?20 Actually, let me withdraw that.	

21

21 2010?

It's possibly something to refer to the

You believe that the pharmacokinetics 22 of endoxifen free base and endoxifen citrate would

132

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

3

129

1 be the same?

- 2 A. The pharmacokinetic properties, yes.
 - Q. A POSA would understand that the
- 4 (Z)-form of endoxifen is more active, correct?
- 5 A. Yes.
- 6 Q. So is it your understanding that -- let 7 me withdraw that.
- 8 Would the bioavailability of
- 9 (Z)-endoxifen citrate vary depending on the ratio 10 of (Z)- to (E)-isomers?
- 11 A. I don't see why it would.
- 12 Q. So is there any correlation in your
- 13 mind between the higher active (Z)-form and
- 14 bioavailability?
- 15 A. Not to my understanding. Just that,
 16 you know, pharmacokinetics is the -- to put it
 17 bluntly, is the study of concentrations of a
 18 molecule in the body. And pharmacodynamics is the
 19 study on the activity in the body. So they're
 20 distinct.
- 21 Q. So is it your -- would a POSA 22 understand that the pharmacodynamics of
- 1 (Z)-endoxifen citrate would vary depending on the
- 2 ratio of (Z) to (E)?
- 3 A. That's a possibility. It doesn't tell
- 4 us anything about the bioavailability or
- 5 pharmacokinetics, of course. It's distinct. It's
- 6 different.
- 7 Q. Okay. So I just want to make sure that
- 8 I understand your testimony here.
- 9 Is it your testimony that a POSA would 10 understand that the pharmacokinetic properties of 11 an endoxifen citrate composition and an endoxifen 12 free base would be identical?
- 13 A. The only thing that could be changed is 14 potentially the rate of absorption due to the 15 formulation. But the molecule itself, endoxifen, 16 whether it's liberated from a citrate salt or it's 17 from the free base, would behave the same 18 pharmacokinetically.
- 19 Q. Right. But that wasn't my question.
- 20 So if you're administering a
- 21 pharmaceutical composition comprised of endoxifen
- 22 citrate, would you expect to have the same PK

- 1 parameters as a pharmaceutical composition
- 2 administering an endoxifen free base?
 - A. If it was exactly the same
- pharmaceutical composition, I would expect to see
- 5 the same pharmacokinetic behavior.
- 6 Q. And if it's not the same pharmaceutical
- 7 formulation, you would expect a different
- 8 pharmacokinetic behavior?
- 9 A. Not necessarily.
- 10 Q. But it could be?
- 11 A. You would have to test them. It could 12 be. It might not be.
- 13 Q. So you couldn't assume one way or 14 another that it would be the same or not the same?
- 15 You'd have to test it?
- 16 A. Normally so, for example, if there's
- 17 a generic version of a product, any any drug,
- 18 let's say, paracetamol, for example, there would
- 19 have to be bioequivalence demonstrated. And so
- 20 the generic formulation should have some
- 21 similarity to the brand formulation potentially.
- 22 From batch to batch variability for a brand
- 130 1 product, they'd have to test using exactly the
 - 2 same composition formulation, otherwise the
 - 3 pharmacokinetic parameters would be different.
 - 4 So if I had a capsule containing
 - 5 paracetamol and it was coated in some way in one
 - 6 batch and then the next batch produced the
 - 7 following day had a slightly thicker coating on
 - 8 it, then that would affect the absorption
 - 9 potentially of the drug. So there wouldn't be
 - 10 bioequivalency there. So we have to be careful
 - 11 when we're testing things to have the same
 - 12 pharmaceutical product for comparison.
 - 13 Q. Have you conducted any tests comparing 14 the absorption rate of endoxifen citrate as
 - 15 compared to an endoxifen free base?
 - 16 A. No.
 - 17 Q. Would a POSA need to perform that
 - 18 comparison, comparative study, to draw the
 - 19 conclusion that you're drawing, that they'd be 20 identical?
 - 21 A. What what would be identical?
 - 22 Q. That the absorption rates would be

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

1 identical.

- 2 A. So once the citrate's dissolved, it's
- 3 available for absorption in much the same way the
- 4 non-salted form is. And so, yeah, I would agree
- 5 that it the best thing would be to test those.
- 6 But in terms of pharmacokinetic parameters,
- 7 following absorption, which is pretty much reliant
- 8 on the formulation itself, pharmacokinetics should
- 9 be exactly the same.
- 10 O. So the area under the curve would be 11 exactly the same?
- A. Given dose equivalency, I would suspect 12 13 so.
- Q. Would the area under the curve be the 15 same for an endoxifen citrate composition with a 16 different portion of (Z) to (E)?
- A. I don't think so, no. 17
- 18 Q. So as you change the proportion of (Z)-19 to (E)-isomer in your endoxifen citrate 20 composition, the area under the curve would 21 change?
- 22 A. I don't think so. For example, in the

1 administered to the patients, correct?

- Yes.
- Q. And this paper does not distinguish 4 between the (Z) and the (E), so we don't know the
- level of purity that was administered to these
- patients, correct?
- A. Well, we know that a certain bar was 8 met in terms of it being safe enough to administer
- 9 to patients. So not sure what you mean by purity. 10 I'm guessing you mean (Z) to (E) ratio. And I
- 11 think they're distinct things. So I think from a
- 12 purity point of view to give to an individual, it
- 13 relies on meeting a monograph, which this has met.
- Q. But -- thank you for that
- 15 clarification. So let's talk about isomeric
- 16 purities, so a certain percentage of (Z) to (E).
- 17 A. Yeah.
- O. And Ahmad 2010 doesn't tell us what 18 19 that isomeric -- of the endoxifen citrate that was 20 given to the patients; is that correct?
- A. That is correct, yes. I mean, it tells
- 22 us a range of endoxifen, not knowing the (Z) or

1 paper we're looking at, the Ahmad 2010, the

- 2 analysis is for endoxifen. It doesn't
- 3 discriminate between the (Z) or the (E). So the
- 4 only -- the only thing I can think of is that
- 5 endoxifen behaves as endoxifen, whether it's
- 6 (Z) or (E).
- Q. Did you look at any other studies to
- confirm that the (Z)- and (E)-forms behaved the
- 9 same?
- A. I didn't look at any other studies to
- 11 look at that. This is not something that I've
- 12 ever seen, that you would look at different
- 13 pharmacokinetics behavior of a different isomer.
- 14 I'm not aware of any. I know you can have
- 15 different forms of many drugs. But I'm not aware
- 16 of any reported differences in pharmacokinetic
- 17 parameters as such, but widely varying
- 18 pharmacodynamics for different types of drugs, of
- 19 course, and toxicities profiles.
- Q. So I think you've pointed out a few 21 times that this Ahmad 2010 paper just refers to
- 22 endoxifen and the fact that endoxifen citrate was

- 1 (E) ratios, and it describes it as being an
- effective amount for therapeutic use.
- 3 Q. When you say range, you mean a dosing
- 4 range?

134

- A. There are different doses, yeah, given
- 6 in Table 1, 0.5 to 4. Sorry. And, you know, the
- 7 form of the gram, for example, gives us a Cmax of
- 15.1-nanograms per mL and an AUC of 801 nanogram
- hours per mL and that is a therapeutically
- 10 effective amount according to Ahmad.
 - MS. KRUMPLITSCH: I'm going to give you
- 12 what has been marked 1007 in this proceeding.
- 13 (Deposition Exhibit 1007 was
- 14 introduced for identification.)
- 15 BY MS. KRUMPLITSCH:
- Q. Dr. McConville, is it okay with you if
- 17 I refer to Exhibit 1007 as Ahmad 2012?
- A. Yes. 18
- Q. I'll give you a second to look at that. 19
- 20 (Witness reviewing document.)
- 21 THE WITNESS: Okay.
- 22

135

140

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

5

137

1 BY MS. KRUMPLIT	12	CH:
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- 2 Q. So one question: If we're talking
- 3 about the effective amount of a drug, would that
- 4 be its pharmacodynamics?
- 5 A. There's a dose/response relationship.
- 6 And so the pharmacokinetics should refer to be
- 7 proportional to a pharmacodynamic response
- 8 ideally. Not the case for all drugs. But in this
- 9 case I think there is a good dose/response 10 relationship from what I've seen.
- 11 Q. What did you look at to establish that?
- 12 A. Well, I this particular article
- 13 describes multiple daily doses being efficient for
- 14 -- being sufficient for effective therapy. So
- 15 whatever they are administering here at the steady
- 16 state is an effective therapy. Sorry. Between 4 17 and 8 specifically, 4 and 8-milligrams exposure.
- 18 Q. And so the record is clear, you are 19 looking at Ahmad 2012?
- 20 A. Yes.
- 21 Q. I want to take a step back.
- So we agree that the (Z)-isomer is more

- 1 Q. Okay. And so the effective dose for
 - 2 whatever composition was administered in Ahmad may
 - 3 not be the same effective dose if the ratio of (Z)
- 4 to (E) were different.
 - Is that fair to say?

A. Could you repeat that, please?

- Q. Maybe. Okay. So we don't know what
- 8 the effective dose is -- sorry. Let me withdraw
- that.
- We don't know the ratio of (Z) to (E)
- 11 in Ahmad 2012, correct?

12 A. That's correct.

- 13 Q. So we cannot say that the dose that was 14 administered in Ahmad 2012 is the effective dose
- 15 for any composition of endoxifen.
- 16 You can't generalize that, right, you
- 17 would need to know the ratio of (Z) to (E)?

18 A. I mean, if it is all (Z), this is the 19 effective dose. If it has a different ratio of

- 20 (Z) to (E), it's an effective dose. I mean, it's
- 21 an effective dose. I -- I can't tell -- it
- 22 doesn't specify here what (Z) to (E) is. But it's

1 active, right?

2 A. Yeah.

- Q. So if you formulate an endoxifen
- 4 citrate with 50/50 (Z) to (E), you would expect
- 5 that to be less effective than an endoxifen
- 6 citrate with 80/20 (Z) to (E), right?
- 7 A. Well, it depends on the therapeutic
- 8 endpoint that you are looking for. So I don't
- 9 know. 50/50 might be suitable. 80/20 might be
- 10 suitable. It's really difficult to say what 11 threshold is effective necessarily. Clearly in
- 12 the art it was recognized that (Z) is the goal to
- 13 have an effective therapy.
- 14 Q. And we've established that at least in
- 15 Ahmad 2010, we don't know what the ratio of (*Z*) to 16 (E) was, right?
- 17 A. Yes.
- 18 Q. And Ahmad 2012 we don't know what the 19 ratio of (Z) to (E) is, correct?
- 20 A. Yes.
- 21 Q. We do know the ratio or we don't?
- 22 A. No, you're correct.

1 an effective dose.

138

- Q. Right. And if you were comparing the
- 3 results in Ahmad to another endoxifen citrate
- 4 composition that had a different ratio of (Z) to
- 5 (E), it's possible that you would have a different
- 6 effective dose, correct?
 - A. I mean, I think this is -- I think this
- 8 is the same Ahmad, the 190-pound. I think so
- 9 because -- anyway, the point is that prior to 2012
- 10 Ahmad and Ahmad -- which I think is the same one,
- 11 not 100 percent -- anyway, an Ahmad described (Z)
- 12 as being effective stereoisomer of endoxifen.
- 13 And so putting those two things
- 14 together, one could assume that given a pure -- a
- 15 pure (Z)-form, or purer (Z)-form, the ratio being
- 16 leaning to (Z) for this, would be an effective
- 17 dose. Whatever they've used is effective dose.
- 18 And you know, there's previous description of
- 19 greater than 90 percent of (Z) being a target for
- 20 synthesis.
- Q. When you say there is a greater than
- 22 90 percent target for synthesis, you're referring

143

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

1	to that statement in the Ahmad patent that said
2	one object was to achieve 90 percent purity of
3	(Z)?

4 A. Yes. That's right, yes.

- Q. But you don't have any indication in the actual composition that was administered in Ahmad 2012 as to what the purity level is -- or was, correct?
- **9 A.** It doesn't explicitly state it. That's 10 right, in terms of (Z) to (E). You know, just 11 getting back to the purity thing, obviously the 12 endoxifen is safe for human use.
- 13 Q. Right. When I say purity, I'm 14 referring to isomeric purity here.

15 A. Yes.

- 16 Q. And do you agree with me that Ahmad 17 2012 describes the administration of endoxifen 18 citrate composition similar or the same as Ahmad 19 2010?
- 20 A. It's a little it's a little short on
 21 details. I can't be sure that that's necessarily
 22 the case. It just says endoxifen.
- 1 Q. If you -- I'm going to ask you to 2 compare two things. See if this helps shed some 3 light on this question.
- 4 If you could -- so we're going to look 5 at that table in Ahmad 2012. And if you could
- 6 compare that to the Zonalta label that we looked
- 7 at earlier, that tiny print. And on the back of
- 8 that you'll see a table with some pharmacokinetic
- 9 parameters. It's that bottom table there.

10 A. Yes.

- 11 Q. And if you compare the numbers, they 12 look to be identical?
- 13 A. Well, they do. But as I've stated, 14 pharmacokinetics shouldn't be an issue with either 15 the citrate or the endoxifen without a citrate. 16 These values are based on the measurements of 17 endoxifen, not endoxifen citrate.
- 18 Q. So you would expect each one of these 19 parameters to be absolutely identical even to the 20 level of standard deviation between endoxifen and 21 endoxifen citrate?
- 22 A. It doesn't say that this does it

1 cite this paper in the label? If it does, then

- 2 that's fine. I don't know if it's just my -- my
- 3 the small print but I do not see that it
- 4 necessarily cites this article.
- Q. It might be a combination of the small print and just what's in the label itself. The
- 7 label itself is also not dated so that doesn't
- 8 help us much there.
- 9 So you give no import to the fact that 10 the table -- these two tables have identical data?
- 11 A. I mean, on face value they have the 12 same numbers, of course. So, you know, just if 13 one is endoxifen citrate and one is not endoxifen 14 citrate, it's just endoxifen, then, I mean, that 15 would be outstandingly good for my analysis of the 16 pharmacokinetic parameters that one might expect 17 comparing the salt to the non-salt.
- 18 I mean, if one is citrate and the other 19 is citrate, that's okay, too, because obviously I 20 have my opinion about the pharmacokinetics 21 associated with both.
- 22 O. Would an endoxifen salt have the same

1 solubility as an endoxifen free base?

2 A. I haven't looked at those numbers. I 3 don't know.

- Q. Does solubility impact
- 5 pharmacokinetics?

142

- A. With respect to the rate of absorption, yes. But once absorption has occurred, then pharmacokinetic parameters are governed by
- 9 elimination processes, which are the same.10 MS. KRUMPLITSCH: I think we can go
- off the record.
- 12 THE STENOGRAPHER: Off the record at
- 13 1:52 p.m.
- Whereupon, a recess was taken
 - from 1:52 p.m. to 2:00 p.m.)
- 16 THE STENOGRAPHER: It's 2:00 p.m.
- 17 MS. KRUMPLITSCH: Thank you,
- 18 Dr. McConville. We have no further
- 19 questions.
- 20 THE WITNESS: Thank you.
- 21 MR. MENCHACA: No questions.
- THE STENOGRAPHER: We are concluded

144

15

Transcript of Jason T. McConville, Ph.D. Conducted on April 12, 2024

Conducted or	April 12, 2024
145	147
at 2:00 o'clock p.m.	1 marriage, I am not employed by or an attorney to
2 (Time concluded: 2:00 p.m.)	2 any of the parties to this action, and that I am
3	3 in no way interested, financially or otherwise, in
4	4 the outcome of this matter.
5	5
6	6
7	7 IN WITNESS WHEREOF, I have hereunto
8	8 set my hand and this 16th day of
9	9 April, 2024.
10	_
	10
11	11 Janice yn Hocek
12	
13	My commission expires:
14	14 12/18/24
15	15 NOTARY PUBLIC IN AND FOR THE
16	16 STATE OF ILLINOIS
17	17
18	18
19	19
20	20
21	21
22	
	22
146 1 CERTIFICATE OF SHORTHAND REPORTER - NOTARY PUBLIC	
2 I, Janice M. Kocek, Certified Shorthand	
3 Reporter, Certified LiveNote Reporter, and	
4 Notary Public within and for the State of Illinois,	
5 do hereby certify:	
6 That Jason T. McConville, Ph.D., the	
7 witness whose deposition is hereinbefore set	
8 forth, was duly sworn by me before the	
9 commencement of such deposition and that such	
10 deposition was taken before me and is a true	
11 record of the testimony given by such witness.	
12 I further certify that the adverse	
13 party, Intas Pharmaceuticals, Inc., was represented	
14 by counsel at the deposition.	
15 I further certify that the deposition	
16 of Jason T. McConville, Ph.D., occurred at the	
17 offices of McAndrews, Held & Malloy, Ltd., at	
18 500 West Madison Street, Chicago, Illinois, on the	
19 12th day of April, 2024, commencing at 8:56 a.m.20 CST to 2:00 p.m. CST.	
20 CS1 to 2:00 p.m. CS1. 21 I further certify that I am not related	
22 to any of the parties to this action by blood or	
22 to any or the parties to this action by blood of	
1	I and the second

A	42:3, 42:12,	action	126:16, 126:20,
a1	43:6, 43:15,	102:18, 114:10,	128:14, 135:1,
5:17, 5:18	43:18, 44:1,	114:21, 115:1,	135:5, 139:2,
able	44:5, 44:6,	146:22, 147:2	139:14, 141:6
	45:6, 54:4,	active	administering
77:16, 126:18	102:1, 102:6,	16:4, 30:11,	130:20, 131:2,
about	110:20, 113:18,	30:12, 30:21,	137:15
8:15, 15:15,	115:6, 130:14,	31:1, 31:4,	administrated
16:15, 24:9,	132:8, 132:14,	31:6, 31:15,	126:20
25:1, 31:4,	132:22, 133:3,	32:19, 33:1,	administration
33:5, 33:10,	133:7, 144:6,	33:3, 33:17,	46:9, 46:15,
34:9, 39:2,	144:7	33:20, 33:22,	141:17
39:21, 40:3,	academic	34:2, 34:4,	
40:12, 45:2,	12:12		adverse
45:20, 46:8,		34:13, 34:15,	146:12
48:10, 57:19,	accomplished	35:20, 36:7,	aerosol
58:12, 61:22,	88:22, 89:11	37:16, 37:21,	14:17, 106:18,
62:2, 62:9,	according	38:4, 38:18,	106:22
65:16, 66:17,	136:10	39:14, 39:18,	affect
66:20, 68:20,	account	39:22, 40:2,	17:14, 41:19,
73:3, 77:6,	45:11	52:7, 62:1,	44:5, 84:15,
80:4, 81:2,	accurate	62:6, 62:7,	132:8
81:7, 82:12,	13:3, 14:2,	96:1, 96:4,	afraid
83:21, 84:3,	14:3, 18:7,	129:4, 129:13,	104:8
84:8, 84:9,	19:12, 20:6,	138:1	after
84:12, 86:14,	22:7	activity	93:17, 93:19
86:22, 87:9,	acetaminophen	129:19	afternoon
87:13, 89:19,	101:7	actual	117:1
97:11, 99:9,	acetate	141:6	again
101:16, 106:1,	72:9, 72:16,	actually	32:1, 37:4,
107:11, 107:15,	72:18, 73:2,	60:10, 75:20,	47:2, 50:16,
107:17, 107:13,	73:8, 73:10,	81:12, 88:7,	55:21, 59:18,
108:8, 113:20,	73:16, 93:6	100:5, 128:20	60:19, 61:2,
	achieve	add	•
113:22, 115:2,	82:14, 87:19,	55:10	65:16, 66:2,
120:1, 120:2,	87:22, 141:2	added	66:13, 68:6,
122:7, 130:4,	achieved	72:18, 72:19,	69:7, 74:12,
135:15, 137:3,			75:4, 76:6,
143:20	85:21	123:4 adding	82:17, 83:7,
above	acid	_	83:17, 90:5,
26:21, 54:14,	55:10, 77:4,	72:9, 72:16,	92:16, 94:12,
60:3, 61:7,	78:11, 115:22	73:16	95:22, 103:22,
115:11	acid-promoted	addition	109:17, 109:20,
absolutely	79:1, 79:9	84:18, 87:1	110:22, 114:17,
142:19	acidic	additional	126:8, 127:8
absorbed	78:12, 79:16,	30:12, 62:14,	against
41:18	80:8, 80:11	123:3	43:11
absorption	acidity	administer	agent
41:14, 41:19,	111:18, 112:2	94:19, 135:8	4:5, 124:7,
	across	administered	124:13
	48:9	126:6, 126:11,	

agents	139:18	40:8, 40:13,	139:15, 141:5,
124:8, 124:10	along	56:3, 56:9,	146:22, 147:2
ago	118:7, 120:13	56:13, 64:3,	anybody
1 -	•		
9:6	also	66:6, 73:12,	33:19
agree	4:3, 7:19, 9:8,	74:2, 74:15,	anyone
26:7, 26:16,	18:5, 26:11,	84:11, 88:2,	9:9
27:6, 39:10,	38:2, 43:5,	104:8	anything
50:6, 51:17,	46:11, 50:13,	answered	10:2, 31:6,
54:9, 56:4,	50:21, 59:20,	30:17, 105:12	35:20, 36:6,
•		any	
56:14, 57:12,	71:9, 94:7,		50:21, 77:3,
63:3, 65:12,	94:9, 97:18,	8:16, 8:17,	90:17, 103:18,
67:18, 73:9,	99:8, 99:18,	9:18, 10:18,	106:6, 111:17,
73:19, 74:3,	143:7	14:1, 17:5,	130:4
74:8, 80:7,	alter	17:16, 17:19,	anyway
82:7, 82:19,	82:15	19:5, 20:1,	49:5, 52:4,
83:1, 92:6,	altered	20:18, 22:2,	
		32:17, 35:1,	140:9, 140:11
94:4, 94:9,	82:21		anywhere
95:15, 98:16,	alto	43:3, 43:17,	36:2, 36:8,
98:22, 100:19,	3:14	44:17, 49:8,	36:11, 36:16,
102:11, 110:14,	always	52:5, 55:17,	36:21, 58:20,
113:11, 128:13,	54:2	56:5, 56:15,	81:13, 124:3
133:4, 137:22,	amenchaca@mcandr-	57:14, 60:15,	apologize
141:16	ews-ip	62:22, 63:11,	27:16, 38:10
agreed		65:7, 68:15,	appeal
97 : 13	3:9	73:19, 74:4,	
	amount	74:9, 74:21,	1:3
ahmad's	67:1, 67:4,	76:1, 76:8,	appear
99:22	120:8, 136:2,		35:3, 36:16,
ahmads	136:10, 137:3	77:21, 78:19,	37 : 3
49:6	analysis	79:11, 81:16,	appears
ahold	43:22, 62:22,	81:20, 86:1,	13:18
104:14	67:17, 74:21,	87:17, 90:12,	appendix
al	75:5, 75:8,	90:18, 94:18,	12:19
5:20, 5:22, 6:5		95:1, 95:8,	
	111:4, 128:10,	100:4, 101:19,	application
albeit	134:2, 143:15	102:9, 103:6,	64:14, 64:21,
16:7	analytical	103:10, 103:21,	92:4, 95:12,
alejandro	105:21		95:16, 111:9,
3:8	analyze	108:10, 114:2,	124:19
alex	128:3	116:3, 118:15,	appreciate
9:11	analyzed	119:5, 119:8,	25 : 3
all	127:22	119:11, 119:15,	approached
8:7, 27:17,	another	119:16, 120:16,	23:10, 23:15,
		120:18, 120:19,	
34:21, 53:10,	14:17, 14:18,	120:20, 121:19,	24:12, 24:20
59:4, 60:5,	59:2, 96:22,	123:17, 127:1,	appropriate
61:7, 61:11,	97:1, 131:14,	127:16, 129:12,	46:5, 61:17,
67:16, 81:20,	140:3	131:17, 132:13,	73:17, 75:7,
81:22, 84:7,	answer	134:7, 134:10,	86:18
85:8, 110:3,	8:7, 8:8, 8:17,		appropriately
123:19, 137:8,	21:3, 30:13,	134:14, 134:16,	78:18

approval	41:12, 42:6	avoided	58:16, 58:17,
69:5	associate	78:20, 79:12	59:12, 59:16,
approved	14:6, 17:22,	aware	62:6, 62:17,
68:2	19:7	22:16, 23:11,	128:22, 130:12,
april	associated	24:6, 24:13,	130:17, 131:2,
1:17, 2:7,	79:13, 90:18,	24:21, 49:10,	132:15, 144:1
146:19, 147:9	143:21	79:2, 79:21,	based
area	assume	93:12, 122:18,	11:22, 142:16
21:17, 32:12,	8:10, 56:21,	134:14, 134:15	basic
42:10, 55:13,	60:12, 99:19,	away	85 : 3
69:7, 74:13,	105:5, 131:13,	16:15 , 109:7	basis
101:20, 133:10,	140:14	В	32:21
133:14, 133:20	assumed	b2	batch
areas	35:15	5:14, 5:16	131:22, 132:6
14:13	assuming	back	bears
around	105:7, 105:9	12:1, 12:2,	64:15
12:11, 24:1,	assumption	25:21, 31:22,	because
48:3	36:14	38:7, 38:10,	31:14, 34:13,
arrangement	atom	39:16, 41:4,	38:11, 54:8,
26:9, 27:3	62:18, 62:20	58:5, 58:8,	54:22, 59:21,
array	atoms	61:21, 66:18,	60:13, 67:8,
123:21	27:3, 30:10,	71:17, 71:19,	79:22, 94:4,
art	30:15, 31:1,	72:14, 74:21,	112:14, 124:4,
45:16, 48:14,	31:9, 31:12,	75:18, 78:2,	140:9, 143:19
48:19, 68:22,	31:14, 31:20,	97:7, 99:8,	been
76:15, 77:1,	32:17, 35:1	105:22, 137:21,	7:3, 11:6,
77:13, 77:16,	atossa	141:11, 142:7	19:17, 21:21,
79:22, 94:17,	1:8, 4:8, 10:19	background	22:19, 24:3,
95:4, 122:7,	attached	13:2, 94:17,	27:13, 47:8, 57:18, 64:6,
124:12, 124:17,	12:19, 25:18	96:2	69:13, 73:12,
138:12 article	attorney	bar	79:2, 79:20,
	24:4, 147:1	135:7	91:8, 91:22,
5:11, 5:20, 5:22, 6:4, 6:7,	attorneys	barrier	96:21, 100:9,
6:8, 102:13,	9:12, 9:19, 10:1, 12:1	107:13	102:9, 103:1,
103:14, 127:21,	auc	base	109:8, 117:5,
137:12, 143:4	115:14, 115:19,	30:3, 34:14,	117:10, 120:21,
articles	136:8	34:17, 40:18,	124:22, 136:12
104:14	author	40:22, 43:1, 43:11, 43:18,	before
asked	70:1	44:10, 44:15,	1:3, 7:9, 8:18,
30:16, 56:4,	automated	52:1, 52:4,	23:10, 23:13,
56:14	120:5	52:16, 52:20,	24:5, 24:12,
asking	availability	53:2, 53:6,	24:17, 24:20,
31:3, 31:4	108:3	53:9, 53:15,	28:3, 28:5,
aspect	available	54:2, 54:10,	48:7, 52:3,
21:15	34:3, 54:15,	54:15, 54:21,	58:12, 60:11,
aspects	133:3	55:4, 55:9,	86:16, 88:2,
18:4, 41:7,	avenue	, ,	97:19, 111:6,
	3:18		

146:8, 146:10	besides	blood	
begin			C
46:9	41:13, 67:4, 108:10	128:12, 146:22	calendar
		bluntly	12:12
beginning	best	129:17	california
12:9, 33:5,	56:11, 73:3,	board	3:14
33:9	81:9, 85:10,	1:3	call
behave	133:5	body	9:20, 38:2,
130:17	better	16:7, 128:12,	104:12
behaved	45:4, 59:7,	129:18, 129:19	called
134:8	73:12, 82:11,	book	7:3
behaves	83:8, 84:2,	121:13, 121:15,	calls
134:5	84:7, 84:16,	121:18, 121:19,	9:18
behavior	86:5	123:5, 123:9,	came
131:5, 131:8,	between	123:11	12:1, 21:22
134:13	16:2, 17:8,	bornem	can't
being	43:1, 43:6,	6:9	23:17, 24:18,
11:1, 33:6,	43:18, 65:14,	both	24:19, 28:3,
39:22, 40:2,	73:21, 81:4,	26:12, 55:10,	36:20, 40:13,
41:18, 53:22,	81:14, 82:8,	65:18, 143:21	52:18, 53:5,
61:13, 66:7,	96:18, 104:19,	bottom	55:12, 58:22,
101:20, 135:8,	105:10, 105:18,	89:3, 89:5,	59:4, 61:19,
136:1, 137:13,	106:12, 107:6,	142:9	63:14, 63:22,
137:14, 140:12,	107:21, 120:17,	brand	68:19, 86:1,
140:15, 140:19	129:13, 134:3,	111:3, 131:21,	93:8, 94:18,
believe	135:4, 137:16,	131:22	99:1, 101:3,
24:1, 26:5,	142:20	break	101:6, 112:21,
42:22, 50:9,	big	8:14, 8:16,	112:22, 123:1,
59:21, 71:11,	20:12, 122:20, 123:4, 123:5,	8:18, 57:19,	124:2, 127:18,
71:14, 76:22,	124:4	57:22, 58:12,	139:16, 139:21,
84:16, 97:16,	bio	97:1, 97:19,	141:21
103:8, 112:3,	45:7	111:20	cancer
128:17, 128:21		breast	33:7, 33:12,
believed	bioavailability	33:7, 33:11,	49:22, 94:18
97:21	115:13, 129:8, 129:14, 130:4	49:22, 94:18	cannot
ben	bioequivalence	brevity	139:13
24:3	131:19	64:20	capsugel
benameur	bioequivalency	broad	6:8
6:7, 110:4,	132:10	15:12, 15:13,	capsule
110:6, 110:14,	biopharmaceutical	61:15, 61:17,	6:6, 20:10,
110:18, 111:7,	111:10	65:5, 104:8,	20:12, 21:22,
113:11, 113:16,		111:13	77:9, 77:17,
114:4, 114:8,	biostudy 110:11	broke	77:19, 77:20,
114:19 bench	110:11 bit	97:10	101:22, 102:5,
21:6, 21:7	15:15, 40:5,	brought	102:17, 103:3,
beneficial	• • • • • • • • • • • • • • • • • • • •	48:4	103:8, 103:21,
8:4	61:12, 76:20, 78:3, 106:22,	bullet-point	104:7, 104:17,
8:4 berkenfeld	114:12	13:7	105:16, 106:10,
5:12	1114.17	bypass	
J:12		120:8	

107:4, 107:13,	135:7, 135:16	chemicals	citation
107:14, 107:15,	certificate	67:12	121:18
107:19, 110:6,	146:1	chemist	cite
110:15, 110:19,	certified	56:10, 59:3,	91:11, 118:3,
111:14, 112:8,	2:3, 2:4,	59:8, 64:4,	122:2, 122:5,
113:12, 113:17,	146:2, 146:3	66:1, 67:8,	143:1
114:5, 114:8,	certify	73:3, 73:15,	cited
114:20, 118:15,	146:5, 146:12,	74:14, 78:17,	10:18, 10:19,
118:17, 118:18,	146:15, 146:21	83:11, 88:6,	28:11, 69:17
118:20, 119:1,	cetera	89:20, 90:6,	cites
119:5, 120:9,	25:7, 33:12	96:19, 99:4,	94:7, 143:4
120:12, 132:4	challenges	99:15, 127:1	citing
capsules	83:10	chemist's	98:17, 98:20
49:21, 76:17,	chance	100:7	citrate
76:22, 77:2,	72:4, 100:14	chemistry	29:5, 29:21,
100:20, 104:1,	change	16:22, 17:3,	36:22, 38:16,
111:8, 118:1,	16:17, 84:17,	18:11, 18:14,	39:9, 39:11,
118:12, 119:8,	133:18, 133:21	55:21, 59:14,	43:2, 43:19,
120:6, 123:15	changed	59:19, 60:19,	51:18, 52:11,
captures	130:13	61:2, 62:22,	52:12, 52:18,
13:8	changes	82:17, 83:17	52:19, 52:21,
career	19:16	chemists	53:5, 53:17,
22:8	changing	55:15, 75:5,	53:19, 54:1,
careful	16:6, 84:20	81:7, 81:10,	54:10, 54:22,
132:10	characterization	82:11, 83:7,	55:6, 55:7,
carries	71:9	84:2, 84:8,	58:16, 58:20,
108:14	characterized	84:16, 85:9,	59:6, 59:12,
carry		96:11	59:15, 62:8,
108:19, 109:2	93:10	chicago	126:2, 126:5,
case	charge	2:6, 3:6,	126:10, 126:12,
1:11, 23:11,	108:14, 108:15,	146:18	126:15, 127:2,
23:14, 23:16,	108:16, 108:19,	choice	127:5, 127:10,
24:6, 24:13,	109:2	103:13	128:9, 128:11,
24:17, 24:21,	charged	choices	128:14, 128:19,
25:6, 29:3,	106:12, 106:14,	103:16, 119:15	128:22, 129:9,
41:10, 48:7,	106:16, 112:5	choose	130:1, 130:11,
53:7, 79:3,	charging	80:20, 80:22,	130:16, 130:22,
80:13, 111:2,	107:2	103:10, 103:20,	132:14, 133:15,
112:14, 137:8,	checking	104:1, 120:13	133:19, 134:22,
137:9, 141:22	90:16	choosing	135:19, 138:4,
cases	chemical	108:2	138:6, 140:3,
7:13, 84:7	26:1, 27:2,		141:18, 142:15,
catalyzed	27:10, 29:16,	chromatographic	142:17, 142:21,
78:11	30:6, 37:19,	128:3	143:13, 143:14,
	38:12, 38:15,	chromatography	143:13, 143:14,
category	38:21, 39:4,	89:1, 89:12,	citrate's
17:12, 122:6,	39:12, 46:7	90:2, 90:10,	133:2
123:13	chemically	90:12	citric
certain	18:17	circle	
69:2, 123:22,		61:21, 99:8	55:10

	Conducted on 1	1 /	
claim	clearance	cole's	comparing
25:11, 25:14,	42:17	102:12	43:17, 126:2,
32:2, 32:7,	clearly	collaborative	132:13, 140:2,
32:17, 33:15,	138:11	14:22	143:17
34:4, 34:9,	cleaving	column	comparison
35:1, 39:19,	40:1	29:13, 50:18,	43:13, 132:12,
40:9, 50:13,	clinical	51:1, 57:5,	132:18
51:14, 51:21,	5:21	57:11, 57:13,	compatible
52:9, 52:15,	closer	70:20, 71:22,	68:4, 68:12,
53:1, 53:4,	61:14	76:21, 82:5,	68:17, 69:2
53:14, 53:18,	clr	98:4, 98:6	compensated
55:1, 55:4,	1:21	columns	11:1
56:2, 57:9,	cmax	50:7	complete
58:11, 58:14,	42:8, 115:14,	com	19:19
58:15, 59:20,	115:17, 136:7	3:9, 3:17, 3:22	complex
59:22, 60:14,	co-author	combination	21:13
61:5, 61:9,	70:3	119:15, 143:5	complexities
75:14, 77:7,		come	21:20
99:10, 99:11,	co-crystal	25:2, 47:3,	comply
99:22	32:8	105:15, 108:5	67:22
claimed	coat	comes	
53:11, 53:22,	77:14	105:21	<pre>component 31:15, 38:19,</pre>
92:18, 99:20,	coated		·
100:6	49:20, 76:2,	coming	39:22, 52:7
claiming	76:9, 76:16,	28:2, 48:9	composition
51:18, 51:22	77:2, 77:8,	commencement	34:10, 55:19,
claims	77:17, 77:19,	146:9	56:7, 56:17,
25:9, 32:1,	79:21, 101:22,	commencing	67:20, 71:7,
51:13, 53:14,	102:5, 102:17,	2:6, 146:19	75:11, 76:3,
54:22, 65:6,	107:14, 118:15,	comment	76:10, 94:10,
74:20, 75:13,	118:17, 119:1,	55:12, 61:19,	94:14, 106:5,
88:3, 88:5,	119:5, 132:5	63:22, 99:1,	119:13, 119:21,
92:17, 95:15,	coating	124:2	123:18, 127:5,
95:19, 99:10	54:8, 76:12,	commenting	127:7, 127:12,
clarification	76:18, 76:21,	78:18	130:11, 130:21,
33:8, 87:11,	78:2, 81:2,	commission	131:1, 131:4,
112:18, 135:15	100:20, 103:10,	147:13	132:2, 133:15,
clarify	103:16, 107:10,	commonly	133:20, 139:2,
8:12, 104:21	107:11, 107:21,	104:13	139:15, 140:4,
class	108:3, 118:20,	comparative	141:6, 141:18
18:11, 18:14,	132:7	132:18	compositions
18:16, 18:20,	coatings	compare	102:2, 113:19,
19:1	80:5, 103:13	43:10, 43:15,	119:6
classes	cole	63:7, 92:19,	compound
18:8	6:5, 100:17,	93:1, 93:15,	24:6, 27:9,
classification	100:19, 101:21,	93:20, 142:2,	27:10, 30:5,
45:7	102:4, 102:8,	142:6, 142:11	30:6, 30:8,
clear	102:9, 102:16,	compared	30:9, 30:14,
42:11, 137:18	103:13	101:9, 132:15	30:15, 31:5,
72.11, 13/:10			

31:7, 31:8,	conducted	convert	139:12, 140:6,
31:19, 31:20,	17:5, 43:15,	40:5	141:8
32:3, 32:22,	132:13	copolymer	corrections
33:16, 33:17,	conducting	103:15	12:3
33:22, 34:2,	16:21, 17:2	copolymers	correctly
34:4, 34:10,	confirm	104:13	105:21
35:12, 35:18,	76:4, 126:18,	copy	correlate
36:1, 36:5,	134:8	11:14, 13:22	10:13
39:15, 46:3,	conforms	correct	correlation
46:22, 47:5,	106:7	7:20, 8:21,	129:12
66:21, 95:5,	connected	14:9, 20:10,	cost
95:9, 96:1,	25:18	27:4, 29:8,	104:9, 108:3
96:5, 101:14,	connection	29:22, 30:3,	could
103:9, 103:20,	7:17	30:4, 32:4,	12:14, 13:11,
106:13, 127:21	consider	32:8, 32:18,	15:5, 21:17,
compounds	40:16, 41:8,	34:17, 35:2,	21:21, 22:12,
18:18, 27:1,	41:10, 42:15,	35:14, 36:2,	25:8, 26:11,
33:20	104:6, 104:18,	36:12, 36:17,	32:3, 32:7,
comprised	105:10, 105:17,	37:3, 37:11,	32:14, 34:14,
118:18, 130:21	106:11, 107:5,	37:12, 43:2,	35:5, 35:20,
comprising	108:2, 120:19	43:5, 43:7,	36:3, 36:7,
34:10	consideration	44:2, 47:15,	36:19, 38:7,
concentration	81:9, 106:9,	50:1, 50:8,	39:3, 40:4,
42:8, 42:9,	120:16	51:12, 52:1,	40:21, 41:15,
44:4, 87:5,	considerations	54:18, 55:20,	43:8, 44:2,
87:9, 87:13	120:15	56:22, 58:17,	46:16, 46:17,
concentrations	considered	62:14, 63:1,	59:6, 64:1,
84:13, 106:3,	67:16, 79:3	63:2, 64:15,	65:20, 70:14,
129:17	construed	64:16, 74:6,	71:3, 71:22,
concerned	35 : 14	74:11, 75:22,	75:20, 77:3,
67:5, 102:10	consult	78:14, 94:15,	79:3, 79:10,
conclude	69:1, 73:15,	95:22, 99:16,	79:12, 80:13,
32:22	89:20	99:20, 101:14,	82:3, 82:4,
concluded	contacted	102:2, 102:19,	82:15, 82:21,
144:22, 145:2	24:2, 24:5	102:20, 107:8,	88:14, 89:7,
concluding	contain	110:7, 110:21,	96:3, 98:1,
111:6	62 : 22	111:21, 114:11,	101:13, 101:15,
conclusion	contained	116:2, 118:1,	101:19, 102:3,
132:19	25 : 14	118:13, 118:16,	102:9, 103:16,
condition	containing	119:6, 121:11,	111:16, 111:17,
94:20	100:20, 132:4	124:10, 124:14,	115:17, 115:21,
conditions	continued	126:2, 126:6,	118:18, 118:22,
78:12, 78:19,	4:1	126:11, 127:7,	119:3, 123:12,
79:17, 80:9,	control	128:9, 128:15,	124:7, 130:13,
82:16, 83:3,	101:22, 102:5,	129:4, 135:1,	131:10, 131:11,
112:6	110:20, 113:18	135:6, 135:20,	139:6, 140:14,
conduct	convenient	135:21, 138:19,	142:4, 142:5
14:10	46:11	138:22, 139:11,	couldn't
	10 • 11		131:13

_			
counsel	cst	declaration	18:5, 20:9,
146:14	1:18, 2:7,	6:13, 10:1,	20:19, 21:8,
count	146:20	10:8, 10:13,	22:3, 46:5,
124:9	current	10:15, 10:19,	46:10, 110:7,
couple	15:7, 16:16	10:21, 10:22,	110:16, 110:19,
7:15, 9:12,	currently	11:8, 11:14,	112:8, 113:12,
9:13, 9:14,	14:6, 14:14,	12:7, 12:15,	113:17, 113:20,
19:18, 122:21	16:21, 17:2	13:2, 18:6,	114:5, 114:8,
course	curriculum	19:12, 20:5,	114:20
21:20, 22:8,	5:8	22:6, 23:6,	demonstrated
31:14, 42:8,	curve	26:12, 26:14,	131:19
52:10, 52:18,	42:10, 133:10,	26:19, 28:4,	demonstrating
52:20, 53:8,		28:7, 35:4,	56:16
	133:14, 133:20	35:12, 36:2,	depend
53:18, 77:2,	CV	36:8, 36:12,	54:6, 68:6
77:7, 84:14,	12:18, 12:21,	36:16, 37:3,	•
116:4, 122:1,	13:6, 13:17,	37:7, 37:13,	dependent
130:5, 134:19,	13:18, 13:20,	49:13, 49:14,	34:20, 54:10
143:12	14:3, 15:5,	· · · · · · · · · · · · · · · · · · ·	depending
courses	19:16, 19:19,	62:21, 69:18,	38:6, 41:16,
18:3, 18:4,	22:12	78:4, 88:14,	44:2, 46:15,
19:5	D	90:21, 102:21,	47:4, 54:5,
court	daily	118:8, 121:9,	67:9, 103:11,
7:20, 8:4,	137:13	122:3, 125:21	127:6, 127:10,
13:15, 69:12	data	define	129:9, 130:1
covers	90:13, 93:13,	26:22	depends
13:5, 15:14,		definitely	21:15, 45:5,
53:1	93:15, 93:16,	75 : 7	46:4, 62:11,
cross-examined	93:20, 93:21,	definition	64:2, 65:17,
7:16	97:14, 105:21,	27:6, 31:7	105:19, 138:7
crude	143:10	degradation	depicted
72:9, 72:12	date	78:12, 78:19,	32:2, 32:6,
crystal	14:4, 23:18,	79:4, 79:7	32:16, 33:15,
85:6	48:13	degrade	33:22, 34:5,
	dated	78 : 16	34:6, 34:22
crystallization	143:7	degraded	depicts
56:6, 73:10,	davies	77:3	32:2, 32:7
73:11, 74:6,	10:16, 10:21,		
74:11, 82:10,	93:17, 93:18,	delay	deposition
82:20, 83:3,	93:19, 93:22,	101:22, 102:5,	1:15, 2:1, 8:1,
84:10, 85:1,	94:5, 97:14	110:20, 113:18	9:1, 9:10, 10:3,
85:5, 85:12,	davis	delayed	11:10, 13:12,
85:16, 86:2,	93:18	15:22, 20:10,	13:16, 22:21,
87:18, 87:21,	day	21:22, 104:5	27:19, 47:10,
88:11, 89:1,	9:16, 132:7,	deliver	64:9, 69:9,
89:11, 89:19,	146:19, 147:8	15:20	69:14, 91:18,
89:22, 93:7	days	delivery	100:11, 109:10,
crystallizing	45:19	14:17, 14:18,	109:16, 117:12,
83:10	decide	14:19, 15:12,	121:2, 125:3,
csr		15:16, 16:6,	136:13, 146:7,
1:21	119:19		

146:9, 146:10,	detail	84:3, 84:9,	dispensing
146:14, 146:15	99:15	84:12, 85:4,	120:8
describe	detailed	96:10, 96:17,	dissertation
79:8, 81:13,	22:11	96:18, 103:13,	20:16
85:20, 89:21,	details	103:22, 122:13,	dissolution
101:21, 102:4,	121:22, 141:21	130:6, 131:7,	31:13, 31:18,
102:16, 110:18,	determine	132:3, 133:16,	40:7, 41:16,
113:16, 114:4,	68:14	134:12, 134:13,	44:3, 52:3,
114:9, 118:14,	determining	134:15, 134:18,	54:3, 54:9,
119:4, 119:10,	104:7	136:5, 139:4,	84:4, 107:2
126:4, 126:9	development	139:19, 140:4,	dissolved
described	20:9	140:5	52:12, 133:2
15:10, 58:20,	deviation	difficult	dissolves
59:6, 60:17,	142:20	77:6, 77:11,	31:12, 54:1,
63:1, 65:2,	diagram	77:21, 82:9,	72:11
65:8, 65:9,	25 : 18	138:10	dissolving
75:19, 76:19,	diastereomer	diluent	108:9
92:20, 93:2,	17:9	120:14	distinct
99:12, 140:11	diastereomers	direct	129:20, 130:5,
describes	17:20, 19:2	70:8	135:11
56:19, 57:2,	dictate	directed	distinguish
57:8, 57:10,	42:7	95:16	135:3
60:11, 72:16,	dictation	directing	distribution
85:16, 86:7,	12:1	122:6	42:16
86:11, 86:18,	differ	disagree	district
87:1, 87:5,	26:8	94:16	7:20
92:13, 94:18,	difference	disclose	dla
100:20, 102:8,	17:8, 26:5,	87 : 21	3:12, 4:5
102:10, 110:6,	52:5, 65:19,	disclosed	doctor
117:22, 123:17,	81:14, 128:4	63:8, 63:9,	64:6
126:1, 136:1,	differences	86:3	document
137:13, 141:17	17:13, 82:3,	disclosure	23:2, 70:17,
describing	82:4, 134:16	50:6, 50:17	72:5, 91:3,
39:11, 51:10,	different	discriminate	109:22, 112:12,
53:18, 72:9,		134:3	114:15, 117:19,
98:17, 113:12	13:19, 16:13,	discussed	118:5, 125:16,
description	16:14, 17:10, 21:21, 27:2,	11:20, 19:4	136:20
5:7, 6:2, 13:1,	31:1, 31:12,	discussion	documents
20:6, 20:19,	39:12, 43:6,	62:2, 125:19	26:13, 109:15
22:2, 22:7,	46:15, 55:22,	diseases	doing
22:11, 29:16,	63:3, 63:4,	49:22	14:15, 21:4,
38:12, 39:16,	63:13, 63:19,	disinfectants	63:15, 75:8
57:14, 96:3,	63:20, 63:21,	122:12, 122:14	done
140:18	65:9, 65:13,	disintegration	21:17, 69:6,
designing	65:14, 79:8,	102:1, 102:6,	73:13
21:10, 103:19	82:14, 82:20,	110:20, 113:18	dosage
desired	83:15, 83:16,	disparities	22:8, 22:15,
83:4	83:21, 83:22,	97:17	46:19, 47:1,
		- · • - ·	

	Conducted on 1		
95:1, 95:6,	16:14, 16:19,	146:8	easy
103:20	18:4, 18:5,	during	104:14
dose	20:9, 20:19,	69:5	edition
120:12, 133:12,	21:8, 22:3,	E	6:11, 123:1
137:5, 137:9,	28:19, 28:21,	e	editions
139:1, 139:3,	29:6, 29:11,		123:2
139:8, 139:13,	30:22, 32:20,	99:5, 127:20,	education
139:14, 139:19,	41:10, 41:20,	128:5, 130:2, 133:16, 134:3,	13:1
139:20, 139:21,	44:19, 45:4,	134:6, 135:4,	effect
140:1, 140:6,	45:8, 45:18,	135:10, 135:16,	16:16
140:17	46:7, 46:10,	136:1, 138:4,	effective
doses	46:16, 67:22,	138:6, 138:16,	80:1, 136:2,
136:5, 137:13	68:2, 68:4,		136:10, 137:3,
dosing	68:9, 68:12,		137:14, 137:16,
105:8, 136:3	68:17, 68:22,		138:5, 138:11,
doubt	69:5, 79:13,	,	138:13, 139:1,
59:7, 75:16,	101:16, 101:18,	/	139:3, 139:8,
88:4, 99:21	102:9, 102:13,	26:17, 51:3,	139:14, 139:19,
down	102:14, 103:12,	51:10, 55:11,	139:20, 139:21,
21:20, 29:15,	105:3, 105:6,	67:11, 73:1,	140:1, 140:6,
70:21, 89:5,	105:14, 106:4,	73:9, 79:16,	140:12, 140:16,
111:20	107:6, 107:7,	80:2, 80:3,	140:17
dr	107:12, 107:21,	80:8, 81:15,	effectiveness
7:7, 10:16,	110:7, 110:16,	90:9	115:18
13:15, 22:18,	110:19, 111:2,	e)-form	effects
27:12, 37:18,	111:15, 112:8,	73:11	73:16
38:20, 47:7,	113:12, 113:17,	e)-forms	efficacy
48:22, 53:10,	113:20, 114:3,	•	17:15, 115:3
54:17, 57:13,	114:5, 114:8,	24:22, 73:21, 81:5, 134:8	efficient
58:8, 69:12,	114:20, 115:3,	e)-isomer	137:13
91:21, 93:17,	115:15, 115:16,	133:19	either
93:18, 93:19,	116:3, 119:8,	e)-isomers	62:15, 77:19,
94:5, 97:10,	119:16, 120:3,	•	142:14
97:14, 100:8,	120:19, 124:2,	126:15, 126:19,	electron
117:9, 121:5,	131:17, 132:9,	127:7, 127:11, 129:10	62:20
122:18, 125:7,	137:3	each	electrostatic
136:16, 144:18	drug's		107:2, 108:16,
draft	68:7	8:3, 101:14, 120:8, 142:18	109:2
11:21	drugs	earlier	electrostatically
draw	15:4, 17:11,	61:22, 76:19,	106:14, 106:16
132:18	67:16, 78:10,	-	elements
drawing	115:21, 123:21,	78:7, 91:15, 99:9, 142:7	42:13, 42:21
132:19	123:22, 134:15,	easiest	elimination
drug	134:18, 137:8	45:13, 46:1,	41:9, 41:13,
14:17, 14:18,	due	45:13, 46:1, 46:10	41:20, 42:3,
14:19, 15:12,	53:10, 130:14	easily	42:12, 43:1,
15:16, 15:20,	duly	_	144:9
16:6, 16:10,	7:3, 117:5,	78:20, 123:12	else
			10:2, 21:17,
			⊥∪•∠, ∠⊥•⊥/,

		<u>-</u>	_
22:1, 42:4,	77:17, 77:19,	esomeprazole	exactly
45:9, 67:4	77:20, 78:2,	110:7, 110:15,	10:9, 12:8,
else's	78:21, 79:21,	111:21, 112:1,	31:2, 43:12,
69 : 7	80:5, 81:2,	112:5, 112:10	98:14, 118:19,
employed	100:20, 102:17,	especially	131:3, 132:1,
147:1	103:2, 103:8,	115:18	133:9, 133:11
emulsifying	103:10, 103:13,	esq	examination
124:7, 124:8,	103:16, 103:17,	3:8, 3:16, 3:21	5:4, 7:5, 117:7
124:10, 124:13	104:3, 104:17,	essential	examined
enable	104:19, 105:10,	71:6, 71:10	7:4, 117:5
100:6	105:16, 105:18,	essentially	example
enantiomer	106:10, 106:12,	9:5, 15:14	33:21, 34:1,
17:9	106:20, 106:21,	establish	41:14, 43:12,
enantiomers	107:4, 107:6,	137:11	45:17, 55:18,
	107:10, 107:19,		56:15, 65:17,
17:17, 18:21	107:21, 108:2,	established	71:22, 72:3,
encompass	108:18, 108:20,	128:4, 138:14	
35:19, 37:15,	109:1, 110:6,	et	72:8, 72:15,
50:14, 52:16,	110:15, 110:19,	5:20, 5:22,	73:18, 74:16,
53:17	111:1, 112:7,	6:5, 25:7, 33:12	75:10, 76:8,
encompassed	113:12, 113:13,	ethyl	76:12, 77:10,
75:14	113:17, 113:13,	25:18, 26:9,	80:12, 90:8,
encompasses	114:5, 114:8,	72:9, 72:16,	95:2, 103:11,
50:21, 52:20,	114:20	72:17, 73:1,	103:14, 105:3,
54:21, 57:11,	enterically	73:8, 73:10,	106:3, 111:15,
60:2, 85:22		73:16, 93:6	114:3, 115:10,
end	77:14, 101:22,	eudragit	115:15, 115:16,
39:9, 55:7,	102:5, 118:15,	103:15, 104:12	122:11, 124:5,
64:2, 65:17,	119:1, 119:5	evaluate	131:16, 131:18,
65:21, 66:3,	entire	69:1, 111:8	133:22, 136:7
66:11, 67:3,	33:16, 71:8,	even	examples
73:18, 77:7,	121:15, 121:19,	17:15, 63:15,	56:5, 59:5,
92:17	122:19, 124:16	128:5, 142:19	76:1, 91:11
ended	entirety	ever	excipient
65:18	123:7, 123:11,	17:5, 18:10,	16:17, 16:18,
endpoint	124:20	18:13, 18:16,	118:15, 119:5,
138:8	entitled	18:20, 19:1,	119:11, 119:14,
enough	15:7, 29:15	19:4, 22:14,	121:21, 122:8,
135:8	entity	56:16, 134:12	122:15, 122:16,
enriched	46:7	every	123:14, 123:17,
74:5, 74:10	environment	123:3	123:20, 124:1,
enriching	80:14	everything	124:18
74:16	equilibrium	105:13, 105:20	excipients
enteric	81:4, 81:8	evidence	6:11, 15:19,
49:20, 54:8,	equivalency	25:7	16:4, 16:5,
76:2, 76:9,	133:12	exact	16:9, 16:13,
76:11, 76:16,	erin	71:6, 71:9,	118:11, 118:22,
76:18, 76:21,	4:4	79:13, 83:3,	119:20, 120:18,
77:2, 77:8,	errors	122:15	122:6, 122:13,
,,.2, ,,.0,	94:2	± 2 2 • ± 0	
			l

	ı	î ·	
122:17, 123:3,	130:22, 131:4,	108:5, 108:10,	105:13, 105:22,
123:21	131:7, 138:4,	108:13	143:2
exhibit	142:18, 143:16	fair	first
5:7, 5:8, 5:10,	expected	21:13, 22:10,	7:3, 23:15,
5:13, 5:15,	73:20	23:21, 24:16,	23:19, 23:22,
5:17, 5:18,	experience	45:3, 61:8,	38:22, 49:2,
5:19, 5:21, 6:2,	17:16, 17:19	64:5, 68:21,	49:3, 64:17,
6:3, 6:6, 6:8,	experimentation	96:15, 106:4,	78:9, 92:4,
6:10, 6:12,	77:18, 83:2	109:19, 139:5	104:10, 104:11,
6:13, 11:7,	expert	fall	104:15, 110:3,
11:10, 11:13,	6:13, 7:10,	17:11	113:4, 113:6,
11:15, 11:18,	7:19, 23:11,	familiar	113:21, 119:22,
13:11, 13:12,	59:19, 63:16,	48:6, 48:22,	120:14
13:16, 15:6,	66:20, 97:15	78:22, 109:13	flip
22:19, 22:21,	expertise	far	90:20
27:14, 27:19,	32:12, 55:13,	102:10, 126:13	floor
27:22, 28:12,	59:9, 74:13	fda	3:5
28:19, 38:8,	experts	68:2	flow
47:9, 47:10,	55:22	feet	120:4, 120:9,
47:13, 64:7,		65 : 3	120:4, 120:9,
64:9, 64:12,	expires		flowability
64:21, 69:9,	147:13	few	_
69:13, 69:20,	explicitly	19:20, 45:19,	120:3, 120:6
76:13, 91:18,	95:21, 96:6,	120:1, 134:20	focus
92:1, 92:3,	141:9	field	10:8, 25:11,
	exploited	15:12, 16:22,	35:5, 78:9,
92:8, 95:13,	82:4	17:3, 97:16,	124:20
100:9, 100:11,	exposure	100:7	focused
100:17, 109:7,	137:17	fifth	68:10
109:9, 109:10,	extended	3:18, 6:11	focusing
109:13, 109:20,	39:8, 115:3	figure	37 : 5
110:4, 117:10,	extent	26:22	follow
117:12, 117:16,	30:18, 30:20,	figures	115:21, 118:7
120:22, 121:2,	99:2	90:16, 90:18	following
121:6, 121:8,	extraction	files	65:21, 66:4,
121:10, 124:22,		23:19	66:10, 115:6,
125:3, 125:7,	82:5, 82:6	fill	132:7, 133:7
136:13, 136:17	F		follows
exhibits	face	13:22	
9:8, 10:2,	143:11	film	7:4, 27:1,
10:5, 10:7,	fact	14:18	117:6
10:11, 10:18,	25:5, 75:1,	filtrate	form
28:2, 91:12,	89:14, 134:22,	74:5, 74:10	22:15, 32:8,
123:19	143:9	financially	34:1, 34:5,
exists	factor	147:3	34:6, 34:16,
	54:12, 108:7	find	34:17, 36:15,
24:21, 25:3	factors	36:19, 123:13	36:21, 37:2,
expect		fine	38:1, 38:6,
40:18, 40:22,	41:19, 47:2,	8:16, 57:21,	38:16, 40:6,
63:19, 81:18,	104:6, 108:1,	64:22, 92:10,	44:10, 44:13,
		01.22, 02.10,	

	ı	<u>^ </u>	
44:15, 44:19,	96:7, 103:19,	further	78:5, 88:15,
45:19, 46:22,	103:21, 104:18,	76:20, 111:8,	90:22, 91:17,
47:1, 51:18,	105:17, 106:11,	117:6, 144:18,	100:14, 113:5,
53:6, 55:6,	106:22, 107:5,		117:18, 120:16,
•	•	146:12, 146:15,	•
62:8, 79:4,	107:19, 130:15,	146:21	135:12, 136:11,
85:6, 91:8,	131:7, 131:20,	G	136:19, 143:9
95:6, 96:5,	131:21, 132:2,	gaffney	given
103:20, 112:17,	133:8	4:4	40:9, 42:19,
112:20, 133:4,	formulations	game	48:13, 52:10,
136:7	15:21, 21:11,	1 –	120:12, 133:12,
formation	71:7, 76:16,	106:4	135:20, 136:5,
53:9, 53:20,	94:15, 106:18,	gastric	140:14, 146:11
80:2	111:1, 118:11	115:22	gives
		gastrointestinal	, -
formed	forth	44:6, 54:7,	136:7
55:7	12:3, 146:8	108:9, 114:1	glean
forming	found	gatekeepers	112:22
52:21, 59:15	13:18, 48:16	16:10	go
forms	foundation		8:15, 23:18,
22:8, 32:14,	32:10, 119:7	gelatin	25:21, 39:3,
34:21, 46:12,	fractional	104:3, 117:22,	63:14, 70:15,
46:19, 95:1,	88:11, 93:7	118:12, 118:18,	74:21, 75:18,
134:15	free	118:19, 119:1	
		general	76:14, 88:7,
formula	30:3, 34:14,	36:13, 59:5,	99:15, 114:2,
27:2, 27:10,	34:17, 40:18,	62:16, 95:18,	116:5, 124:13,
30:6, 34:11,	40:22, 43:1,	101:16, 123:20	144:10
35:12, 35:18,	43:11, 43:18,	generalize	go-to
36:1, 36:5	44:9, 44:14,	1 -	95:5
formulate	52:1, 52:4,	139:16	goal
46:3, 46:21,	52:16, 52:20,	generally	138:12
59:12, 103:2,	53:2, 53:6,	81:18, 108:19	goes
	The state of the s	generate	1
124:15, 138:3	53:9, 53:15,	57:16, 85:17,	51:7, 126:13
formulated	54:2, 54:10,	86:8, 86:12,	going
112:7, 114:7	54:15, 54:21,	86:15, 86:19,	11:6, 12:12,
formulating	55:4, 55:9,	87:1, 87:6,	25:11, 26:12,
103:9	58:16, 58:17,		27:17, 35:5,
formulation	59:12, 59:16,	87:10, 87:14	38:10, 39:16,
14:15, 15:12,	62:6, 128:22,	generic	47:8, 49:12,
21:9, 33:18,	130:12, 130:17,	131:17, 131:20	49:16, 56:12,
34:3, 35:21,	131:2, 132:15,	getting	57:18, 57:20,
•	144:1	141:11	68:2, 70:13,
43:13, 45:21,	friday	gi	·
52:4, 59:10,	_	102:7, 110:21,	71:17, 74:2,
66:20, 67:19,	1:17, 2:7	113:14, 113:19	81:7, 81:11,
67:21, 68:5,	front	give	83:19, 90:20,
68:12, 68:17,	71:20, 101:11	, -	96:22, 99:11,
68:22, 69:3,	full	16:15, 28:9,	111:20, 117:9,
77:21, 94:11,	113:13, 113:22	37:8, 50:11,	120:21, 122:15,
94:21, 95:11,	functionality	56:9, 56:13,	124:9, 124:21,
95:20, 96:6,	16:17	69:16, 72:2,	136:11, 142:1,
	· · · /		, ,

	Conducted on 1	* '	
142:4	hand	52:22, 53:22,	hpmc
good	11:6, 11:21,	54:19, 56:12,	104:3, 108:14,
7:7, 7:8,	47:8, 117:9,	59:5, 68:15,	108:20
28:17, 49:3,	120:21, 124:21,	70:1, 72:8,	human
55:16, 105:6,	147:8	73:22, 76:17,	104:22, 105:1,
122:22, 137:9,	handbook	86:1, 98:16,	105:8, 110:11,
143:15	6:10, 122:16,	101:4, 112:22,	141:12
governed	122:21, 124:4	130:8, 137:15,	hundred
144:8	handed	139:22, 141:14	122:21
gram	69:13	hereby	hurdle
136:7	handing	146:5	105:9
great	22:18, 27:12,	herein	hydrogen
79:21	64:6, 91:21,	7:3	34:17, 62:7,
greater	100:8, 109:8	hereinbefore	62:14, 62:18,
56:1, 57:10,	hang	146:7	62:19
66:7, 74:19,	50:11	hereunto	I
85:22, 86:3,	hanover	147:7	idea
86:8, 140:19,	3:13	hidden	55:16, 83:8,
140:21	hard	90:17	124:17
ground	117:22, 118:12,	higher	ideally
7:22	118:19, 118:22	129:13	137:8
group	harwood	highlight	ideas
5:19, 25:18,	3:21	38:4	11:22
25:20, 26:9	harwood@dlapiper	highlights	identical
guess	3:22	13:5	130:12, 132:20,
11:22, 17:14,	head	highly	132:21, 133:1,
34:20, 56:12,	123:2	49:21, 101:9	142:12, 142:19,
59:6, 66:22,	heading	hone	143:10
70:7, 79:3,	15:7, 110:12	122:14	identification
105:8, 105:19,	heard	hope	11:11, 13:13,
106:21, 107:9,	24:9, 24:16	105:2	22:22, 27:20,
122:11	hearty	hopefully	47:11, 64:10,
guessing	70:10	16:8	69:10, 91:19,
135:10	heating	horrible	100:12, 109:11,
guesswork	72:10	44:12	117:13, 121:3,
86:5	held	hour	125:4, 136:14
guidance	2:5, 3:4,	2:7, 8:15,	identifies
73:20	146:17	11:5, 57:19,	87:18, 90:2
guide	help	96:22	identify
123:20	33:21, 143:8	hours	35:12, 37:10,
gummy	helps	9:13, 9:14,	90:3, 124:13
72:21	142:2	136:9	iii
gut	here	however	111:12
41:18	9:12, 19:17,	120:7	illinois
Н	24:4, 25:14,	hpe	2:5, 2:6, 3:6,
half	28:2, 34:4,	121:6, 122:2,	146:4, 146:18,
23:22	34:7, 36:20,	123:16	147:16
	37:18, 40:13,	hplc	
		128:1	

imagine	incorporate	insoluble	117:13, 121:3,
82:2, 85:14	121:14	104:4	125:4, 136:14
immediate	incorporating	instance	introduction
15:21, 118:12,	103:7	66:22	70:15, 113:4
119:2	increase	instances	invention
immediately	84:5, 115:17	123:21	51:3, 57:9,
46:14, 52:19,	increased	intas	99:20, 100:6
53:5	115:14, 115:18,	1:5, 28:22,	inventor
impact	115:19	29:2, 38:15,	49:2, 49:4,
85:5, 119:11,	increasing	39:10, 146:13	64:17, 92:5
144:4	84:20	intended	inventors
impacted	index	122:8, 123:15	49:9
85:1, 85:12	121:10, 121:12,	intention	investigation
impacts	121:16, 121:17,	121:14	60:15, 100:5,
16:19	122:5, 122:10,	interaction	127:16
import	123:13, 124:5,	15:18, 16:1,	involve
143:9	124:7	16:3, 120:20	18:4
important	indicate	interactions	involved
34:12, 41:9,	88:3, 123:22	104:18, 105:10,	21:20, 54:12
45:15, 67:19	indicates	105:17, 106:6,	ionization
impossible	94:1, 103:14,	106:11, 107:5,	41:17, 54:6,
83:2	111:7	120:17	62:10, 62:11,
impurities	indicating	interchangeably	62:13, 62:16
105:18	104:15	99:7	ipr
impurity	indication	interested	13:19
63:5, 63:21,	141:5	65:6, 92:17,	ipr-type
65:14, 66:17,	individual	147:3	7:13
66:21, 67:6,	21:21, 80:17,	interests	irrespective
67:20, 85:1,	80:18, 135:12	15:7, 15:9	111:2 isomer
96:18	infer	international	
<pre>inactive 15:19</pre>	113:21 information	5:10, 6:3, 92:3	90:13, 134:13 isomeric
inc	12:4, 14:1,	<pre>interpret 58:18, 60:6</pre>	59:16, 73:20,
1:8, 146:13	122:7, 127:1	interpretation	135:15, 135:19,
include	ingredients	35:22, 36:4,	133:13, 133:19,
	15:19, 16:4	40:10, 54:18,	isomerically
20:18, 22:2, 31:5, 32:17,	inhaled	94:2	18:17
35:1, 56:15,	46:17	interpreting	isomerization
57:14, 61:11,	inherently	52 : 15	79:1, 79:9
79:10, 91:8	77:20	intestine	isomerize
included	initial	114:2	79:16, 80:8
39:19, 40:9,	23:18	intravenous	isomers
121:8	initially	46:9	24:22, 25:3,
includes	105:22	introduced	82:15, 83:4
61:7	inserted	11:11, 22:22,	issuance
including	12:3	27:20, 47:11,	48:13
78:11, 111:9,	insight	64:10, 91:19,	issue
121:19	83:12	100:12, 109:11,	45:6, 45:10,
		·	·

```
45:20, 59:14,
                     39:15, 39:22,
                                          11:12, 13:10,
                                                               later
61:2, 79:11,
                     42:16, 43:8,
                                          13:14, 22:17,
                                                               45:21
                     43:10, 44:4,
                                          23:1, 27:16,
79:13, 90:11,
                                                               lays
107:1, 107:22,
                     44:16, 45:11,
                                          27:21, 30:19,
                                                               119:7
                     45:18, 48:12,
                                          31:16, 32:15,
111:18, 112:15,
                                                               lead
142:14
                                          33:13, 47:7,
                     49:6, 49:8,
                                                               45:1, 83:3,
                     52:13, 54:5,
                                          47:12, 57:18,
issued
                                                               115:18
                     54:14, 58:15,
                                          58:7, 64:11,
56:21, 75:15,
                                                               leaning
                     59:9, 59:11,
                                          69:11, 70:19,
100:2
                                                               140:16
                     59:15, 60:21,
                                          72:7, 87:12,
issues
                                                               leap
                     61:1, 63:22,
                                          91:5, 91:20,
11:21, 47:6
                                                               77:11
                     64:2, 64:3,
                                          96:21, 97:9,
iterations
                                                               learn
                     65:20, 66:3,
                                          100:13, 109:6,
12:2
                                                               25:5, 48:10
                     66:10, 67:7,
                                          109:12, 110:2,
itself
                                                               least
                     67:10, 67:12,
                                          113:2, 114:18,
39:11, 46:16,
                                                               50:14, 51:4,
                     67:19, 71:6,
                                          116:5, 117:8,
55:1, 105:14,
                                                               51:5, 51:19,
                     72:3, 74:1,
                                          117:14, 117:21,
107:7, 107:12,
                                                               52:13, 52:21,
                     76:13, 76:15,
                                          121:4, 125:5,
120:3, 121:18,
                                                               55:3, 55:19,
                     77:13, 82:2,
                                          125:18, 136:11,
130:15, 133:8,
                                                               56:7, 56:17,
                     83:5, 84:6,
                                          136:15, 137:1,
143:6, 143:7
                                                               56:20, 57:2,
                                          144:10, 144:17
                     84:19, 84:22,
         J
                                                               60:1, 60:7,
                     85:3, 90:17,
                                          krumplitsch@dlap-
                                                               61:5, 61:9,
janice
                     94:3, 95:8,
                                          iper
                                                               74:19, 75:2,
1:21, 2:2,
                     97:15, 98:1,
                                          3:17
                                                               75:11, 85:20,
146:2
                     99:2, 99:4,
                                                   L
                                                               88:3, 101:17,
jason
                     101:17, 108:14,
                                          l-i-u
                                                               138:14
1:16, 2:1, 5:3,
                     108:18, 111:5,
                                                               left
5:9, 6:14, 7:2,
                                          64:17
                     112:4, 113:21,
                                                               52:12, 89:14
                                          label
69:22, 117:4,
                     123:12, 123:14,
                                          28:19, 29:11,
                                                               less
146:6, 146:16
                     123:16, 126:14,
                                                               8:2, 62:7,
                                          38:8, 142:6,
doŗ
                     128:4, 129:16,
                                                               70:7, 138:5
                                          143:1, 143:6,
1:22
                     134:14, 135:4,
                                                               let's
                                          143:7
journal
                     135:7, 136:6,
                                                               19:22, 25:21,
                                          laboratory
5:10, 5:21, 6:3
                     138:9, 138:15,
                                                               41:4, 41:17,
                                          17:16, 17:19
         K
                     138:18, 138:21,
                                                               43:11, 46:7,
                                          laid
                     139:7, 139:10,
keep
                                                               46:18, 53:22,
                                          66:11
                     139:17, 140:18,
49:12, 57:20
                                                               58:8, 68:9,
                                          lamprecht
                     141:10, 143:2,
key
                                                               72:14, 78:4,
                                          5:12
                     143:12, 144:3
16:5, 108:7
                                                               80:20, 81:22,
                                          language
                     knowing
kind
                                                               104:10, 106:16,
                                          60:14
                     135:22
91:6
                                                               109:6, 124:21,
                                          last
                     known
know
                                                               131:18, 135:15
                                          12:9, 13:21,
                     77:1, 102:14,
8:11, 8:12,
                                                               level
                                          19:17, 19:18,
                     112:1, 120:8
13:6, 15:19,
                                                               126:4, 126:10,
                                          19:21, 23:17,
                     kocek
17:10, 23:20,
                                                               135:5, 141:7,
                                          23:22, 25:9,
                     1:21, 2:3,
24:15, 33:18,
                                                               142:20
                                          47:22, 51:15,
34:14, 35:15,
                     146:2
                                                               levels
                                          84:11, 98:12
                     krumplitsch
                                                               51:11
                     3:16, 5:4, 7:6,
```

		<u>* </u>	
liberated	91:14, 95:12,	91:15, 101:5,	madison
130:16	95:16, 96:9,	109:17, 123:9,	2:6, 3:5,
license	96:18	142:6, 144:2	146:18
2:3	live	looking	mahon
lifecycle	11:5	10:12, 15:17,	24:3
71:8	livenote	21:16, 25:6,	mainly
light	2:4, 146:3	29:10, 32:1,	106:18
142:3	llp	35:4, 50:5,	make
likely	3:12	58:9, 58:11,	30:13, 37:17,
80:13	logistics	58:14, 59:20,	44:18, 45:4,
limit	9:21	67:1, 67:6,	46:12, 52:5,
84:14	long	76:4, 81:13,	53:7, 53:14,
limited	10:10, 10:12,	95:12, 112:21,	54:17, 58:13,
53:21, 85:6,	11:17, 20:15,	113:1, 115:10,	77:16, 80:6,
103:18	21:2, 73:13,	124:5, 134:1,	99:20, 100:6,
line	124:9	137:19, 138:8	106:5, 120:5,
25:17, 25:22,	longer	looks	128:16, 130:7
32:13, 38:22,	102:18, 114:10,	13:20, 44:21	making
39:3, 76:22,	114:21	lot	45:2, 45:20,
89:2, 98:6, 98:7	look	9:21, 12:12,	58:15, 58:16,
lines	22:12, 23:19,	14:15, 66:15,	99:3, 104:17,
50:7, 50:18,	26:12, 36:18,	99:9, 112:15,	105:16, 106:10,
51:1, 57:14,	46:21, 48:4,	123:9	107:4
70:20, 70:21	48:18, 49:16,	lots	malloy
list	58:22, 59:2,	103:22	3:4, 146:17
13:7, 19:19,	66:16, 66:21,	loud	manufactured
118:10, 122:6,	68:13, 69:16,	71:3	91:9
124:9, 124:16,	70:5, 72:3,	low	many
124:19	75:19, 76:20,	78:12, 78:19,	41:19, 66:14,
listed	78:5, 81:12,	79:11, 80:10,	82:20, 83:6,
10:7, 36:22,	88:6, 90:6,	80:12, 80:14,	120:6, 122:20,
57:11, 121:21,	100:14, 101:13,	81:3	134:15
123:22, 124:3	104:9, 104:10,	lower	mark
listing	106:4, 109:18,	106:3	13:11
121:22	109:20, 112:11,	lunch	marked
lists	113:3, 113:4,	113:10, 116:9	11:7, 13:13,
122:12	116:4, 117:18,	М	13:16, 22:19,
litigation	122:4, 122:10,	macro	27:13, 47:8,
7:20	122:11, 123:11,	111:17	64:7, 69:10,
little	123:12, 124:7,	made	69:13, 91:22,
9:3, 15:15,	134:7, 134:10,	12:3, 30:9,	100:9, 109:8,
40:12, 76:14,	134:11, 134:12,	30:15, 31:9,	117:10, 120:22,
76:20, 89:15,	136:19, 137:11,	31:20, 33:20,	124:22, 136:12
141:20	142:4, 142:12	79:2, 79:20,	market
liu	looked	94:8, 97:19,	102:14
64:17, 64:21,	9:7, 19:16,	99:18, 103:1,	marriage
65:2, 65:10,	34:21, 40:17,	107:14	147:1
65:15, 65:22,	68:18, 78:6,		mass
1			67 : 2

material	50:20, 52:2,	31:10, 32:9,	131:12, 138:9,
25:6, 67:2,	52:18, 53:4,	97:2, 144:21	143:5, 143:16
67:12, 104:19,	56:19, 57:4,	mention	mind
1	59:4, 65:4,	50:17, 76:16	
105:10, 105:18,			46:14, 61:16,
106:12, 107:6,	66:6, 67:15,	mentioned	108:12, 114:13,
108:20	72:12, 74:18,	52:3, 76:12,	125:15, 126:7,
materials	76:21, 80:17,	76:17, 77:5,	129:13
84:13, 85:4,	81:6, 96:12,	97:13, 101:4,	minimum
87:6, 87:10,	99:1, 99:2,	108:3	84:9
87:14, 108:19,	101:15, 105:19,	mentions	minute
109:1	106:14, 106:15,	50:13, 76:21,	109:20, 125:10
matter	107:10, 108:15,	77:1, 77:7, 95:7	misinterpreted
11:21, 52:9,	113:20, 121:17,	met	97:14
	135:9, 135:10,		
101:18, 147:4		9:11, 49:11,	missing
maximum	135:21, 136:3,	135:8, 135:13	14:1, 19:20,
42:7, 84:3	139:18, 139:20,	metabolism	62:20
maybe	140:7, 143:11,	40:4	mistake
15:8, 17:15,	143:14, 143:18	metabolite	94:8, 97:20
46:8, 108:3,	meaning	24:14	mistaken
124:16, 139:7	35:16 , 35:18	method	98:1
mcandrews	measured	46:5, 67:9,	mixture
	127:20		
3:4, 146:17	measurements	74:4, 74:9,	74:17
mcconville		85:16, 98:17,	ml
1:16, 2:1, 5:3,	142:16	103:6, 128:1,	72:18, 136:8,
5:9, 5:12, 6:14,	measuring	128:3	136:9
7:2, 7:7, 13:11,	128:6, 128:8,	methods	modality
13:12, 13:15,	128:11	55:18, 57:15,	16:6
22:18, 27:12,	media	66:15, 73:14,	model
37:18, 38:20,	81:20, 81:21,	74:22, 91:10,	102:14
47:7, 53:10,	81:22	98:8, 98:21	
54:17, 57:13,	medical	methyl	models
	14:22		80:18
58:8, 69:9,		25:20	moiety
69:12, 69:22,	medicinal	mexico	30:11, 30:12,
91:21, 97:10,	17:3, 18:13	14:8	30:21, 31:1,
100:8, 117:4,	meet	middle	31:4, 31:6,
117:9, 121:5,	9:9	80:20, 91:7	32:19, 33:1,
122:18, 125:7,	meeting	midway	37:21, 39:14,
136:16, 144:18,	9:19, 9:22,	29 : 15	39:19, 62:1,
146:6, 146:16	135:13	might	62:6, 62:7
mean	meetings		•
7:12, 24:8,	11:19	14:1, 17:14,	molecular
30:20, 34:9,		19:20, 43:1,	25:14, 29:20,
	melissa	45:1, 46:5,	29:21, 30:2,
38:3, 39:7,	3:21, 3:22	47:3, 76:19,	32:1, 32:6,
39:8, 39:20,	memory	104:9, 104:10,	32:16, 32:22,
41:3, 41:7,	9:7, 72:4,	105:20, 106:3,	33:15, 34:22
42:6, 45:17,	76:15	108:5, 115:16,	molecule
46:6, 48:19,	menchaca	115:20, 120:11,	15:2, 15:4,
49:1, 50:13,	3:8, 30:16,	124:18, 124:19,	33:3, 35:21,
	, ,	,	,,
	l	l	

		Γ ,	
36:7, 37:16,	motivated	70:5, 70:12,	144:2
41:17, 41:20,	44:18, 91:8	70:15, 109:19,	0
42:18, 42:20,	move	116:1, 125:10,	o'clock
44:22, 45:1,	53:22	132:17, 139:17	145:1
62:11, 62:17,	moving	needed	oath
67:22, 79:14,	120:1	35:13	8:21
96:13, 111:15,	much	negatively	object
129:18, 130:15	11:4, 16:15,	112:5	
molecules	24:9, 39:21,	new	51:2, 141:2 objection
111:17	61:13, 77:18,	14:8, 21:10,	30:16, 31:10,
moment	84:6, 107:22,	46:7	30:16, 31:10,
15:17, 16:8,	123:3, 127:19,	nexium	objective
50:12, 70:5	133:3, 133:7,	111:3, 111:21,	57:8
monograph	143:8	112:4, 112:15,	objectives
68:14, 68:19,	multiple	115:10	60:12
106:7, 135:13	137:13	next	obtain
monographs	muster	79:5, 132:6	
123:22	105:4	nice	52:3, 75:20 obtained
month	myself	120:6	88:4
12:5	125:12	nine	
months	N N	70:20	<pre>obtaining 75:11</pre>
9:6, 20:17,	name	nmr	obvious
20:22, 21:5	19:14, 37:19,	93:11, 93:13,	36:10
more	38:15, 38:21,	93:15, 93:16,	obviously
8:2, 13:7,	39:4, 39:8,	93:20, 93:21,	46:14, 48:12,
15:8, 15:21,	39:12, 111:3	94:2, 97:14	49:2, 50:20,
22:11, 34:16,	named	non-salt	54:8, 55:6,
40:6, 40:12,	49:9	143:17	66:7, 82:1,
42:15, 45:19,	nanogram	non-salted	94:3, 94:17,
55:21, 61:12,	136:8	133:4	96:1, 96:2,
61:13, 65:5,	nanograms	none	96:4, 111:16,
70:7, 73:1,	136:8	49:5, 49:8	121:20, 122:14,
73:5, 73:8,	nature	normal	123:1, 141:11,
75:7, 76:14,	5:19	111:10	143:19
78:18, 80:1,	near	normally	occur
80:13, 82:7,	89:5	43:10, 131:16	40:4
82:9, 83:12,	necessarily	notary	occurred
121:22, 129:4,	47:4, 52:6,	2:4, 146:1,	31:13, 54:3,
137:22	54:21, 95:11,	146:4, 147:15	144:7, 146:16
morning	103:5, 131:9,	nothing	occurs
7:7, 7:8	138:11, 141:21,	106:1, 108:12	107:2
most	143:4	number	offering
13:5, 13:8,	necessary	19:13, 83:19	8:20
15:3, 46:3,	47:4	numbering	office
46:4, 46:10,	need	89:15	1:1, 9:12
46:12, 46:21, 47:3	8:7, 8:14,	numbers	offices
mostly	8:16, 43:9,	101:11, 101:13,	146:17
16:17		142:11, 143:12,	
± 0 • ± /			
		1	1

66 1	105 15 105 00	00 5 140 00	
offset	125:17, 125:22,	99:5, 143:20	out
47:6	130:7, 136:16,	option	21:22, 26:12,
oftentimes	136:21, 139:1,	56:11	39:15, 48:16,
33:20	139:7, 143:19	options	49:13, 51:13,
oh	once	103:17, 104:1,	57:5, 66:11,
11:9, 39:5,	7:18, 31:13,	104:2	71:3, 78:4,
45:10, 52:10,	52:11, 54:3,	oral	97:17, 103:17,
53:16, 82:11,	107:2, 133:2,	14:19, 15:16,	111:5, 123:12,
89:13, 90:21,	144:7	21:8, 21:10,	134:20
113:8, 115:7	oncology	22:7, 22:14,	outcome
okay	5:21	46:10, 46:18,	147:4
7:16, 8:19,	one	46:19, 46:22,	outlines
11:9, 12:22,	8:15, 9:16,	95:1, 95:6,	119:14
13:20, 22:17,	14:16, 14:20,	111:11	outside
23:7, 25:10,	16:17, 16:18,	ordinary	118:20
25:12, 26:15,	19:15, 19:22,	35:16, 35:18,	outstandingly
28:6, 28:8,	25:21, 28:1,	44:21, 45:13,	143:15
28:10, 28:16,	32:14, 34:16,	45:16, 46:1,	over
28:17, 28:18,	41:8, 43:10,	46:6, 68:22,	8:3, 10:12,
29:1, 29:7,	44:20, 46:8,	77:13, 77:16,	19:18, 22:8,
29:12, 37:9,	46:12, 51:2,	95:4, 124:17	50:21, 102:18,
38:9, 41:22,	51:14, 59:2,	organic	114:10, 114:21,
44:17, 47:19,	60:12, 61:21,	16:22, 18:11,	115:3, 123:10
48:6, 49:5,	62:7, 62:14,	18:17	over-the-counter
49:12, 49:15,	67:22, 80:22,	oriented	112:19
49:18, 58:10,	82:12, 82:14,	60:20, 82:18	overall
62:21, 70:18,	82:15, 95:10,	otc	115:13
71:17, 72:1,	105:2, 105:20,	112:16, 112:20	overcoming
72:6, 77:22,	108:7, 109:15,	other	45:12
78:8, 79:6,	115:16, 118:17,	7:10, 8:3,	overview
80:4, 80:22,	119:22, 120:2,	9:12, 9:19,	65:5, 92:16
81:11, 82:13,	120:10, 123:12,	9:22, 10:18,	own
88:19, 89:13,	124:12, 128:5,	14:20, 41:12,	48:17, 100:4
89:18, 91:2,	131:13, 132:5,	42:4, 42:17,	owner
91:4, 92:2,	137:2, 140:10,	45:12, 46:17,	1:9, 3:11
92:8, 92:19,	140:14, 141:2,	47:2, 49:22,	P
95:14, 96:8,	142:18, 143:13,	61:21, 67:12,	
98:5, 99:6,	143:16, 143:18	69:4, 93:16,	packaging
100:8, 100:15,	online	93:21, 94:7,	47:5, 47:6
100:16, 101:21,	13:18	94:19, 94:20,	page
103:19, 107:20,	only	101:22, 103:16,	5:3, 5:7, 6:2,
109:3, 110:1,	26:8, 33:1,	108:5, 108:10,	12:15, 15:6,
110:3, 110:10,	37:20, 39:18,	108:13, 115:20,	18:7, 19:12,
110:11, 112:11,	42:12, 42:13,	116:3, 120:11,	20:5, 22:6,
113:3, 117:15,	50:6, 50:16,	127:1, 134:7,	26:13, 28:7,
117:20, 118:6,	50:17, 93:17,	134:10, 143:18	28:13, 28:15,
121:5, 123:16,	130:13, 134:4	otherwise	29:11, 35:5,
124:21, 125:6,	opinion	132:2, 147:3	35:9, 37:8,
	34:15, 94:4,	,	

		1 /	
38:13, 49:14,	86:2, 87:18,	50:5, 53:8,	56:20, 57:2,
51:15, 70:15,	87:22, 90:3,	53:12, 53:19,	57:10, 57:16,
70:16, 78:5,	127:5, 127:10,	56:21, 58:9,	60:1, 60:2,
88:15, 88:18,	131:1, 132:3,	58:21, 63:9,	60:5, 60:7,
90:20, 90:22,	133:6, 134:17,	64:14, 65:6,	60:10, 60:18,
102:22, 110:9,	142:9, 142:19,	66:10, 66:14,	60:22, 61:6,
115:11, 118:4,	143:16, 144:8	71:18, 71:19,	61:7, 61:9,
118:5, 118:8,	part	75:16, 77:5,	61:11, 61:13,
122:11, 122:16,	51:20, 53:3,	81:12, 81:13,	61:18, 61:20,
124:6, 125:20	53:4, 55:1,	85:18, 92:4,	65:18, 65:21,
pages	55:4, 58:15,	93:3, 94:6,	66:4, 66:8,
25:9, 122:20	58:16, 96:5	95:8, 95:11,	66:12, 74:19,
palo	particular	96:2, 96:11,	74:20, 75:1,
3:14	13:22, 45:8,	96:19, 97:19,	75:11, 75:14,
paper	49:6, 90:18,	98:4, 98:17,	75:21 , 76:2 ,
70:3, 70:6,	103:18, 114:3,	98:20, 100:2,	76:9, 85:17,
70:10, 71:12,	119:11, 119:17,	141:1	85:21, 85:22,
101:16, 111:7,	121:21, 122:10,	patent-in-suit	86:4, 86:8,
115:9, 134:1,	122:15, 123:13,	23:5	86:12, 86:15,
134:21, 135:3,	123:17, 124:2,	pathway	86:19, 87:2,
143:1	124:18, 137:12	63:8, 65:1,	87:6, 87:14,
papers	parties	65:8, 65:9,	87:19, 87:22,
19:9, 20:1	146:22, 147:2	65:22, 92:13,	88:3, 90:3,
paracetamol	parts	92:15, 92:20,	115:15, 119:12,
100:21, 101:2,	67:12, 120:1	93:2	140:11, 140:19,
101:6, 101:9,	party	pathways	140:22, 141:2
102:8, 102:13,	146:13	63:4, 63:7,	percentage
131:18, 132:5	pass	63:18, 63:20,	135:16
paragraph	105:9	65:13, 99:12	perform
12:15, 18:6,	passage	patient	132:17
19:11, 20:4,	57:13	128:14	perhaps
20:5, 22:5,	passes	patients	14:3, 67:1,
26:21, 28:7,	105:4	135:1, 135:6,	115:21
28:12, 28:14,	past	135:9, 135:20	period
29:15, 37:7,	70:15, 101:5	pending	102:18, 114:10,
49:17, 49:19,	patent	8:17	114:22, 115:4
78:5, 78:6,	1:1, 1:3, 1:9,	peptide	permitted
79:8, 88:15,	1:12, 3:11, 4:5,	111:11	68:16
88:16, 88:20,	5:13, 5:15,	percent	person
89:3, 89:4,	23:8, 23:12,	50:7, 50:14,	44:20, 45:12,
90:21, 90:22,	25:8, 31:22,	50:15, 50:17,	45:15, 45:22,
91:1, 91:7,	33:2, 33:4,	50:21, 50:22,	46:6, 68:21,
98:7, 98:11,	33:7, 33:10,	51:4, 51:5,	77:12, 77:15,
98:12, 98:13,	47:15, 47:17,	51:6, 51:19,	95:4, 124:16
102:22	47:20, 48:1,	51:22, 52:13,	personally
paragraphs	48:7, 48:9,	53:1, 55:3,	49:1
35:6, 122:3	48:11, 48:14,	55:19, 56:1,	perspective
parameters	48:15, 49:13,	56:7, 56:17,	70:22, 71:6
56:6, 82:20,			

	T	<u>î</u>	
petitioner	131:8, 132:3,	86:1, 96:4,	61:2, 76:5,
1:6, 3:3, 29:3	133:6, 134:16,	98:3, 105:13,	140:5
•			
pgr	142:8, 143:16,	110:9, 114:3,	possibly
1:11	144:8	121:20, 123:12,	34:18, 34:19,
ph	pharmacokinetica-	135:12, 140:9	41:15, 65:11,
1:16, 2:2,	lly	pointed	69:4, 72:20,
3:21, 4:4, 4:7,	130:18	51:13, 57:4,	79:10, 101:4,
5:3, 5:9, 6:14,	pharmacokinetics	111:5, 134:20	102:15, 120:13,
	, -	•	·
7:2, 20:6, 44:7,	18:5, 116:4,	pointing	126:22
54:11, 54:14,	127:13, 127:19,	97:17	potential
78:12, 78:19,	128:6, 128:21,	points	67:10, 120:17,
79:11, 80:10,	129:16, 130:5,	66:7	120:20
80:12, 80:14,	133:8, 134:13,	polymers	potentially
80:15, 81:1,	137:6, 142:14,	104:3, 104:4	13:22, 17:14,
81:3, 117:4,	143:20, 144:5	polymethacrylate	44:22, 115:17,
The state of the s	· ·		130:14, 131:21,
146:6, 146:16	pharmacopeia	103:15, 104:13	
pharmaceutical	68:1, 68:7,	polymorphic	132:9
6:10, 59:10,	68:10, 105:4	32:3	pound
67:19, 68:4,	phase	port	140:8
68:12, 69:3,	111:11	104:12	powder
71:7, 94:11,	phone	portion	120:3, 120:6,
94:14, 94:20,	9:18, 9:20	30:12, 30:22,	120:9, 120:13
95:20, 96:5,	phrase	•	pre-base
	l 	31:1, 32:20,	-
122:17, 130:21,	35:13, 35:22,	34:13, 34:15,	53:20
131:1, 131:4,	36:4, 36:15,	37:16, 38:4,	pre-cancerous
131:6, 132:12	37 : 2	40:2, 133:16	14:21
pharmaceuticals	physiochemical	posa	precise
1:5, 19:8,	42:19	44:18, 45:3,	128:8
28:22, 146:13	piper	46:2, 46:21,	precisely
pharmaceutics	3:12, 4:5	52:8, 52:14,	126:17
5:11, 6:4,	pk	53:1, 81:18,	preclinical
14:7, 14:11,	l -		_
18:1, 33:19,	127:4, 127:9,	91:7, 100:6,	111:11
	130:22	101:13, 104:18,	precursor
59:10	plain	105:5, 105:17,	52:20
pharmacodynamic	35:15, 35:17	106:11, 107:5,	predict
137:7	play	108:2, 119:19,	83:2
pharmacodynamics	108:6	127:4, 129:3,	predictive
115:2, 129:18,	please	129:21, 130:9,	83:6
129:22, 134:18,	38:8, 71:4,	132:17	preferential
137:4		positively	-
pharmacokinetic	74:7, 90:21,	112:5	73:11
I -	94:12, 139:6		preparation
40:20, 41:2,	plus	possessed	52:17, 55:2,
41:6, 41:8,	50:15	56:16	55:5, 56:19,
41:12, 42:2,	point	possibility	57:2, 58:19,
42:4, 42:14,	12:9, 28:6,	130:3	59:22, 98:18
42:20, 128:10,	49:3, 57:1,	possible	prepare
128:18, 129:2,	61:16, 61:22,	45:14, 46:2,	9:1, 9:4, 9:9,
130:10, 131:5,	75:17, 79:11,	49:10, 60:21,	
, , , , , , , , , , , , , , , , , , , ,	/J·1/ , /3:11 ,	10.10, 00.21,	10:2, 12:5,
	1		

18:17, 60:10	104:16	42:14, 64:1,	provided
prepared	problem	66:17, 66:21,	48:15, 48:18,
9:6, 11:22,	114:14, 121:19	67:6, 67:20,	48:20, 74:22
13:4, 23:6,	procedure	96:18	provides
53:4, 60:13	- 111:1	profiles	74:16, 75:10,
preparing	proceeding	63:5, 63:21,	90:8, 92:12,
48:2, 95:17,	7:9, 11:7,	65:14, 85:2,	113:13, 122:5
109:16	13:19, 22:20,	134:19	ptab
prescription	27:13, 47:9,	profitable	7:10
112:20	91:22, 100:10,	46:11	public
present	109:9, 123:8,	project	2:5, 146:1,
4:3, 26:18,	123:10, 125:1,	14:16, 14:17,	146:4, 147:15
51:2, 57:9,	136:12	14:18, 14:20,	publication
105:8	proceedings	15:15	19:17, 64:15,
presented	7:10, 7:17	projects	94:7
95:5	process	22:12	publications
presumption	67:13, 69:6,	promote	19:13, 19:20
100:1	120:5	84:4, 84:10	publish
pretty	processes	prone	19:8
36:9, 61:20,	83:7, 95:16,	79:16, 80:7	published
123:2, 133:7	144:9	properly	20:1, 71:12
prevent	produce	120:4	publishing
79:22	55:19, 56:7,	properties	5:19
previous	60:21	42:19, 124:14,	pulsed
48:5, 66:14,	produced	128:18, 129:2,	20:8
•	56:1, 92:18,	130:10	
123:19, 140:18	132:6	proportion	pulsed-release
previously	producing	133:18	21:8
22:19, 27:13,	74:4, 74:9,	proportional	pure
91:22, 100:9,	95:9	137:7	18:17, 49:21,
117:5, 117:10,	product		50:7, 50:17,
120:22		protect	51:5, 51:6,
primers	71:8, 72:10,	104:11	52:1, 53:2,
42:5	72:13, 93:11,	protected	56:17, 57:16,
print	131:17, 132:1, 132:12	115:22	60:22, 61:20,
27:17, 38:11,	production	protection	66:8, 75:21,
142:7, 143:3,	1 •	78:21, 113:13,	86:19, 87:2,
143:6	66:15, 67:9	113:22	87:6, 91:8,
printed	products	proton	119:12, 140:14,
15:18	111:10, 111:11	62:19	140:15
prior	professional	protonated	purer
28:2, 48:14,	13:2	62:15, 62:17	140:15
48:19, 76:15,	professor	provide	purification
79:22, 83:2,	14:7, 17:22,	51:3, 55:17,	88:22, 89:10
109:18, 140:9	19:7	56:5, 73:19,	purified
probably	profile	74:4, 74:9,	90:9
21:18, 23:14,	40:20, 41:2,	76:1, 76:8,	purifying
55:16, 67:15,	41:6, 41:8,	102:17, 114:9,	98:21
84:7, 104:12,	41:13, 42:2,	114:21	purities
			135:16

		* :	
purity	quite	71:3, 71:5,	recess
51:4, 51:11,	15:11, 21:2,	72:17, 78:6,	58:3, 97:5,
59:16, 74:20,	24:18, 112:15	78:10, 88:16,	116:9, 144:14
75:1, 90:13,	R	88:21, 89:9,	recitation
126:5, 126:10,		91:1, 91:7,	38:21
135:5, 135:9,	range	93:17, 93:19,	recites
135:12, 141:2,	111:9, 111:13,	98:11, 98:13,	59:22
141:7, 141:11,	135:22, 136:3,	111:7, 113:6	recognize
141:13, 141:14	136:4	ready	
-	ranges	113:10	11:13, 23:2,
purpose	57 : 11		27:22, 47:13,
122:8	rapid	reagents	64:12, 69:20
purposes	113:14, 114:1	96:9, 96:17 realize	recognized
102:14	rate		138:12
pursuing	41:9, 41:13,	33:19	record
14:14	41:14, 41:20,	really	58:2, 58:6,
put	43:16, 43:18,	10:8, 16:5,	83:20, 97:4,
24:15, 55:14,	44:1, 47:5,	16:9, 17:12,	97:8, 116:6,
80:18, 109:6,	84:17, 84:20,	23:20, 32:11,	116:8, 137:18,
111:14, 120:12,	87:1, 130:14,	38:11, 39:7,	144:11, 144:12,
129:16	132:14, 144:6	39:21, 40:3,	146:11
putting	rates	40:16, 42:6,	recrystallization
140:13	16:14, 85:5,	43:14, 45:5,	82:16, 85:4
Q	132:22	62:9, 63:14,	recrystallizatio-
quantifying	rather	63:22, 66:6,	ns
90:13	15:13, 120:9	67:7, 80:4,	73:13
quay	ratio	92:16, 95:6,	recrystallizing
4:7	73:20, 83:4,	99:4, 99:15,	83:11
question	83:21, 83:22,	100:7, 101:18,	refer
8:18, 30:14,	86:11, 86:14,	102:10, 111:17,	23:7, 38:16,
31:3, 31:17,	126:14, 126:19,	119:14, 138:10	38:18, 47:19,
44:12, 50:16,	127:6, 127:11,	reason	59:18, 64:20,
53:11, 53:21,	129:9, 130:2,	43:3, 75:16,	67:8, 74:12,
55:14, 55:22,	135:10, 138:15,	88:4, 99:21,	92:8, 100:16,
60:20, 64:4,	138:19, 138:21,	106:2, 127:18	110:4, 112:14,
66:2, 66:9,	139:3, 139:10,	reasonable	115:1, 117:15,
70:12, 76:6,	139:17, 139:19,	63:6, 103:8	121:6, 125:7,
79:5, 79:18,	140:4, 140:15	recall	126:22, 136:17,
80:4, 82:18,	ratios	10:5, 19:6,	137:6
83:18, 108:22,	82:15, 83:16,	23:18, 24:18,	reference
109:1, 114:17,	136:1	24:19, 28:3,	12:18, 50:9,
122:22, 130:19,	reach	48:8, 58:22,	91:14, 95:1,
137:2, 142:3	42:9	63:14, 68:19,	97:11, 97:22,
questions	read	90:12, 93:8,	98:12, 100:17,
8:8, 8:11,	9:5, 27:1,	93:9, 97:18,	122:9
78:3, 144:19,	37:4, 39:6,	98:15, 101:3	references
144:21	49:19, 51:2,	receive	66:14, 93:16,
quick	70:9, 70:14,	12:21	93:21, 111:6
122:9	/ · · · / · · · · · · · · · · · · · · ·	recently	referred
122.7		109:18	36:21, 98:10,
			, , , , ,

Transport Tran	102:12	relevant	146:13	83:16, 83:22,
1813., 41:6, reliant 25:19, 26:5, 96:17 103:5, 140:22, 133:7 relied require 93:11 resulting resulting 93:11 resulting 73:12, 16:14 117:7 resulting 73:14 73:15 73:14 7				
103:5, 140:22, 133:7 relied require 93:11 resulting 93:12 relied require 93:10, 105:20, 105:20, 39:18, relies required 93:10, 105:20, 105:21, 134:21 rely 90:3 140:14 140:14 140		•	_	
refers 25:7, 94:4 require 93:11 results 93:10, 105:20, 136:12, 136:12 rely 90:3 required 93:10, 105:20, 136:12 rely 90:3 requires required 93:10, 105:20, 136:11 rely 90:3 reflected 28:3, 75:4, requires resumed 117:7 results 76:14 research relying refresh 32:21, 97:20, 14:10, 14:13, 23:19 reflected 28:3, 75:4, requires resumed 12:14 relying refresh 32:21, 97:20, 14:10, 14:13, 23:19 reflected 28:3, 75:4, results 76:14 research retained refresh 32:21, 97:20, 14:10, 14:13, 23:19 results 76:14 remember 15:9, 16:7, review 76:14 remember 15:9, 16:7, review 76:14 regards 70:6, 70:8, 19:8, 20:1, 28:5, 47:22, 71:2 regards 70:6, 70:8, 19:8, 20:1, 22:15, 93:13, 31:17 rol:6, 123:1 20:15, 20:21, 122:19, 123:7, requilatory reminding 21:6, 21:7, 125:10 results 70:22, 71:5 residual reviewed 22:11, 88:9, 10:6, 28:2, 107:12 relate repeat residual reviewing 17:12 relate repeat residual reviewing 18:14, 10:10, 12:14, 14:16, 12:14, 14:16, 16:21, 14:16, 16:21, 14:16, 10:23, 14:16, 10:31, 10:37:5, 137:10 residual reviewing 19:5, 10:13, 26:18 residual reviewing 19:5, 10:13, 26:18 residual reviewing 19:5, 10:13, 26:11, 10:11, 10:10, 12:12, 14:16, 12:13, 12:13, 14:16, 12:13, 14:16, 12:13, 13:15, 137:10 residual reviewing 19:5, 10:13, 23:14:16, 10:11, 10:10, 12:11, 10:1				
refers 25:7, 94:4 14:1 results 37:20, 39:18, relies required 93:10, 105:20, 110:11, 114:12, 134:21 134:21 rely 90:3 140:3 reflected 28:3, 75:4, 96:19, 99:14 62:14 resumed 36:2, 36:8, 96:19, 99:14 62:14 117:7 76:11 relyging research retained refresh 32:21, 97:20, 15:3, 15:7, review 76:14 remember 15:9, 16:7, 10:15, 10:18, 10:18, 10:16, 16:21, 12:3, 15:7, 10:15, 10:18, 10:16, 16:21, 10:15, 10:18, 10:16, 16:21, 10:15, 10:18, 10:16, 12:3:1 20:15, 20:21, 12:19, 92:11, 10:15, 10:18, 10:16, 12:3:1 20:15, 20:21, 12:19, 12:3:7, 10:16, 12:3:1 20:15, 20:21, 12:19, 12:3:7, 10:16, 12:3:1 20:15, 20:21, 12:19, 12:3:7, 12:10 70:5, 70:8, 10:18, 20:15, 20:21, 12:19, 12:3:7, 12:10 70:5, 70:8, 10:18, 10:15, 10:18, 10:16, 10:10			-	_
37:20, 39:18, relies required 93:10, 105:20,			_	
72:20, 126:12, 135:13		-		
reflected 36:2, 36:8, 96:19, 99:14 36:21 relying research retained 36:2, 36:8, 32:21, 97:20, 14:10, 14:13, 23:19 9:7, 72:4, 100:1, 120:9 15:3, 15:7, review 76:14 remember 15:9, 16:7, 10:15, 10:18, 16:14, 16:21, 28:5, 47:22, 7:12 7:12 59:4, 62:2, 17:2, 17:5, 65:1, 92:11, regards 70:6, 70:8, 19:8, 20:1, 92:15, 93:13, 13:17 101:6, 123:1 20:15, 20:21, 122:19, 123:7, redulatory reminding 21:6, 21:7, 125:10 70:22, 71:5 125:12 21:14, 21:17, reviewed reiterating removed 22:11, 88:9, 10:6, 28:2, 10:12, 12:18 107:12 88:10, 120:7 109:16 relate repeat residual reviewing 17:12 36:3, 40:21, 67:14, 68:3, 10:14, 10:10, 28:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 11:21, 14:16, 76:6, 89:7, 71:9, 85:12, 94:22, 109:22, 11:21, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 127:2, 146:21 126:8 residue 125:16, 136:20 relationship report 7:21 respect 123:3 reported 89:21, 93:22, 26:21, 33:5, 71:48:3, 23:16, 46:2, right 7:21, 13:14, 66:19, 20:9, reported 89:21, 93:22, 26:21, 33:5, 7elease 13:15, 54:4, 63:17, 69:17, 63:20, 66:12, 7esponse 13:15, 54:4, 63:17, 69:17, 63:20, 66:12, 7esponse 13:15, 54:4, 63:17, 69:17, 63:20, 66:14, 13:16, 51:20, response 13:17, 26:3, 63:17, 69:17, 63:20, 66:14, 13:16, 51:20, response 13:17, 26:3, 63:17, 69:17, 63:20, 66:14, 13:16, 51:20, response 13:17, 26:3, 63:17, 69:17, 63:20, 66:14, 133:19, 133:11, 7espesente 13:17, 26:3, 63:10, 73:21, 7espesente 12:21, 13:14, 13:15, 54:4, 63:17, 69:17, 63:20, 66:14, 133:19, 133:11, 7espesente 7esponse 13:10, 73:21, 139:16, 140:2, represente 7esponse 7esponse 7esponse 13:17, 26:3, 63:10, 73:21, 7espesente 7esponse 7esponse 7esponse 13:17, 26:3, 63:10, 73:21, 7espesente 7esponse 7esponse 7esponse 13:17, 26:3, 63:10, 73:21, 7espesente 7esponse 7esponse 7esponse 13:17, 26:3, 63:10, 73:21, 7esponse 7esponse 7esponse 13:17, 26:3, 63:17, 69:17, 60:17, 63:20, 66:14, 138:16, 139:16, 140:2, 7esponse 7esp	•		-	
reflected 28:3, 75:4, 96:19, 99:14 requires resumed 36:11 relying research retained refresh 32:21, 97:20, 14:10, 14:13, 23:19 23:19 9:7, 72:4, 100:1, 120:9 15:3, 15:7, review 76:14 remember 15:9, 16:7, 10:18, 10:18, 10:18, 10:18, 10:18, 10:18, 10:18, 10:18, 10:18, 10:18, 10:18, 10:18, 10:19, 10:19, 10:18, 10:19,			· · · · · · · · · · · · · · · · · · ·	
36:2, 36:8, 96:19, 99:14 62:14 117:7 36:11 relying research retained refresh 32:21, 97:20, 14:10, 14:13, 23:19 9:7, 72:4, 100:1, 120:9 15:3, 15:7, 10:15, 10:18, regard 36:20, 48:19, 16:16, 16:21, 28:5, 47:22, 7:12 59:4, 62:2, 17:2, 17:5, 65:1, 92:11, 93:13, 17:7 regards 70:6, 70:8, 19:8, 20:1, 92:15, 93:13, 31:17 regulatory reminding 21:6, 21:7, 125:10 related repeat residual reviewing 17:12 88:10, 120:7 109:16 related 44:11, 74:7, 68:11, 68:16, 37:6, 70:17, 12:12, 14:16, 76:6, 89:7, 68:20, 69:2, 42:1, 122:12, 114:12, 14:16, 122:13, 127:8, 139:6 104:19, 105:7, 112:12, 114:12, 127:2, 146:21 repeating repeating 105:11, 105:14 relates repeating 105:11, 105:14 relationship report 72:21 revision 123:3 relative 37:1, 48:3, 23:6, 46:2, right 66:2, 93:18, 93:19 53:11, 66:9, 7:11, 26:10, repeating 105:11, 105:14 relative 137:1, 48:3, 23:6, 46:2, right 137:5, 137:10 reported 89:21, 93:22, 26:21, 33:5, 93:14, 16:19, 20:9, reported 89:21, 93:22, 26:21, 33:5, 93:14, 16:19, 20:9, reporter response 58:12, 62:13, 13:14, 16:19, 105:21, 113:14, 13:15, 69:12, 137:9 97:17, 107:15, 119:2 released 13:17, 26:3, 31:17, 26:3,		_		
36:11 relying research 23:19 9:7, 72:4, 100:1, 120:9 15:3, 15:7, review 76:14 remember 15:9, 16:7, 10:15, 10:18, 76:14 remember 15:9, 16:7, 10:15, 10:18, regard 36:20, 48:19, 16:16, 16:21, 28:5, 47:22, 7:12 59:4, 62:2, 17:2, 17:5, 65:1, 92:11, regards 70:6, 70:8, 19:8, 20:1, 92:15, 93:13, 31:17 101:6, 123:1 20:15, 20:21, 122:19, 123:7, regulatory reminding 21:6, 21:7, 125:10 70:22, 71:5 125:12 21:14, 21:17, reviewed 70:22, 71:5 125:12 21:14, 88:9, 10:6, 28:2, 70:12 88:10, 120:7 109:16 reviewed relate repeat residual reviewing 17:12 36:3, 40:21, 67:14, 68:3, 10:1, 109:16 related repeat residual reviewing 17:12, 14:16, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3,			•	
refresh 32:21, 97:20, 14:10, 14:13, 23:19 9:7, 72:4, 100:1, 120:9 15:3, 15:7, review 76:14 remember 15:9, 16:7, 10:15, 10:18, regard 36:20, 48:19, 16:16, 16:21, 28:5, 47:22, 7:12 59:4, 62:2, 17:2, 17:5, 65:1, 92:11, regards 70:6, 70:8, 19:8, 20:1, 92:15, 93:13, 31:17 101:6, 123:1 20:15, 20:21, 122:19, 123:7, regulatory reminding 21:6, 21:7, 125:10 70:22, 71:5 125:12 21:14, 21:17, reviewed reiterating removed 22:11, 88:9, 10:6, 28:2, feilde repeat residual reviewed 17:12 36:3, 40:21, 67:14, 68:3, 10:1, 10:10, related 44:11, 74:7, 68:11, 68:16, 37:6, 70:17, 11:21, 14:16, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3, 14:20, 42:17, 127:8, 139:6 10:19, 105:7, 112:12, 114:12, 14:17, 14:18, 102:1, 105:14 <th></th> <th></th> <th></th> <th></th>				
9:7, 72:4, 76:14 remember 76:14 remember 15:9, 16:7, 76:2, 7:12 59:4, 62:2, 17:2, 17:5, 66:1, 92:11, regards 70:6, 70:8, 19:8, 20:1, 10:15, 10:18, 19:8, 20:1, 10:15, 93:13, 13:17 regulatory reminding 21:6, 21:7, 125:10 70:22, 71:5 125:12 21:14, 21:17, reviewed 10:16, 123:1 10:16, 123:1 10:16, 23:1, 10:16, 21:7, 125:10 reminding 21:6, 21:7, 125:10 reiterating removed 22:11, 88:9, 10:6, 28:2, 10:12 relate repeat 10:12 36:3, 40:21, 67:14, 68:3, 10:1, 10:10, 10:17, 11:21 36:3, 40:21, 68:10, 120:7 109:16 reviewing 17:12 36:3, 40:21, 68:10, 120:7 109:16 reviewing 17:14 11:21, 14:16, 10:10				
76:14 remember 15:9, 16:7, 10:15, 10:18, regard 36:20, 48:19, 16:16, 16:21, 28:5, 47:22, 7:12 59:4, 62:2, 17:2, 17:5, 65:1, 92:11, regards 70:6, 70:8, 19:8, 20:1, 92:15, 93:13, 31:17 101:6, 123:1 20:15, 20:21, 122:19, 123:7, regulatory reminding 21:6, 21:7, 125:10 70:22, 71:5 125:12 21:14, 21:17, reviewed 70:21 88:10, 120:7 109:16 reviewing 70:12 36:3, 40:21, 67:14, 68:3, 10:1, 10:10, reviewing 71:21 36:3, 40:21, 68:10, 69:2, 72:5, 91:3, 72:5, 91:3, 72:5, 91:3, 72:5, 91:3				
regard 36:20, 48:19, 16:16, 16:21, 28:5, 47:22, 7:12 59:4, 62:2, 17:2, 17:5, 65:1, 92:11, regards 70:6, 70:8, 19:8, 20:1, 92:15, 93:13, 31:17 101:6, 123:1 20:15, 20:21, 122:19, 123:7, regulatory remidding 21:6, 21:7, 125:10 70:22, 71:5 125:12 21:14, 21:17, reviewed reiterating removed 22:11, 88:9, 10:6, 28:2, 52:11 107:12 88:10, 120:7 109:16 relate repeat residual reviewing 17:12 36:3, 40:21, 67:14, 68:3, 10:1, 10:10, related 44:11, 74:7, 68:10, 68:16, 37:6, 70:17, 11:21, 14:16, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3, 14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:20, 42:17, 127:8, 139:6 104:19, 105:7, 112:12, 114:12, 14:10, 12:1, repeating 105:11, 105:14 114:15, 117:19, 127:2, 146:21 report residue 125:16, 136:20 relative	•	•		
7:12				
regards 70:6, 70:8, 19:8, 20:1, 92:15, 93:13, 31:17 101:6, 123:1 20:15, 20:21, 122:19, 123:7, regulatory reminding 21:6, 21:7, 125:10 70:22, 71:5 125:12 21:14, 21:17, reviewed reiterating removed 22:11, 88:9, 10:6, 28:2, 52:11 107:12 88:10, 120:7 109:16 relate repeat residual reviewing 17:12 36:3, 40:21, 67:14, 68:3, 10:1, 10:10, related 44:11, 74:7, 68:11, 68:16, 37:6, 70:17, 11:21, 14:16, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3, 14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:10, 120:11, repeating 105:11, 105:14 112:12, 114:12, 127:2, 146:21 126:8 residue 125:16, 136:20 relationship report 72:21 revision 137:5, 137:10 9:5, 10:13, respect 123:3 relacese reported 89:21, 93:22, 26:21, 33:5, 15:21, 15:22, 1:20, 2:2,	II —			•
31:17 101:6, 123:1 20:15, 20:21, 125:10 122:19, 123:7, 125:10 70:22, 71:5 125:12 21:14, 21:17, reviewed reiterating removed 22:11, 88:9, 10:6, 28:2, 109:16 52:11 107:12 88:10, 120:7 109:16 relate repeat residual reviewing 17:12 36:3, 40:21, 67:14, 68:1, 68:16, 37:6, 70:17, 11:21, 14:16, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3, 14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:20, 42:17, 127:8, 139:6 104:19, 105:7, 112:12, 114:12, 114:15, 117:19, 127:2, 146:21 12:14, 120:11, repeating 105:11, 105:14 114:15, 117:19, 127:2, 146:21 137:5, 137:10 9:5, 10:13, respect 123:3 137:5, 137:10 9:5, 10:13, respect 123:3 137:5, 12:22, 93:18, 93:19 53:11, 66:9, 7:11, 26:10, release 67:2 93:18, 93:19 53:11, 66:9, 7:11, 26:10, release 15:21, 15:22, 12:20, 22:2, 94:5, 119:6, 34:6, 39:14, 119:17, 144:6 51:16, 51:20, response 16:10, 16:14, 134:16 119:17, 144:6 51:16, 51:20, response 16:10, 16:14, 134:16 119:17, 144:6 51:16, 51:20, response 105:21, 113:14, 118:12, 146:1, 146:3 response 58:12, 62:13, 81:4, 89:17, 107:15, 113:14, 118:12, 146:1, 146:3 105:20, 102:11 73:4, 73:7 63:20, 65:14, 138:16, 138:16, 138:16, 138:16, 140:2, 100:12, 1138:1, 100:12, 1138:1, 100:12, 1138:1, 100:12, 1138:1, 100:12, 114:14				
regulatory reminding 21:6, 21:7, 125:10 70:22, 71:5 125:12 21:14, 21:17, reviewed reiterating removed 22:11, 88:9, 10:6, 28:2, 52:11 107:12 88:10, 120:7 109:16 relate repeat residual reviewing 17:12 36:3, 40:21, 41:1, 68:14, 68:3, 76:70:17, 68:12, 72:5, 91:3, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3, 71:4; 11.10:10, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3, 71:3, 71:4; 11.10:10, 71:9, 85:12, 71:5, 91:3, 71:3, 71:10, 71:9, 85:12, 71:10:13, 71:10, 71:9, 85:12, 71:10:13, 71:10, 71:10:10, 71:10:10, 71:10:10, 71:10:10, 71:10:10, 71:10:10, 71:10:10, 71:10:10, 71:10:10, 71:10:10, 71:10:10, 71:1	_			
70:22, 71:5 125:12 21:14, 21:17, 21:17, 10:6, 28:2, 10:6, 28:2, 10:1, 88:9, 10:6, 28:2, 10:16 relate repeat residual reviewing 17:12 36:3, 40:21, 67:14, 68:3, 10:1, 10:10, 70:17, 70:12 36:3, 40:21, 68:16, 37:6, 70:17, 70:17, 70:17, 70:6, 89:7, 68:20, 69:2, 72:5, 91:3, 70:17, 71:21, 14:18, 10:23, 114:16, 71:9, 85:12, 94:22, 109:22, 14:20, 42:17, 127:8, 139:6 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 114:12, 114:12, 114:12, 114:16, 120:11, 105:11, 105:11, 105:14 114:15, 117:19, 125:16, 136:20 relationship report 72:21 revision 137:5, 137:10 9:5, 10:13, respect 123:3 relative 37:1, 48:3, 23:6, 46:2, 7:11, 26:10, 7:11, 26		•		
reiterating removed 22:11, 88:9, 10:6, 28:2, 52:11 107:12 88:10, 120:7 109:16 repeat residual reviewing 17:12 36:3, 40:21, 67:14, 68:3, 10:1, 10:10, related 44:11, 74:7, 68:11, 68:16, 37:6, 70:17, 11:21, 14:16, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3, 14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:10, 10:10, repeating 104:19, 105:7, 112:12, 114:12, 14:16, 12:0:11, repeating 105:11, 105:14 114:15, 117:19, 127:2, 146:21 126:8 residue 125:16, 136:20 relationship report 72:21 revision 137:5, 137:10 9:5, 10:13, respect 123:3 release repo		_		
52:11 107:12 88:10, 120:7 109:16 repeat residual reviewing 17:12 36:3, 40:21, 67:14, 68:3, 10:1, 10:10, related 44:11, 74:7, 68:11, 68:16, 37:6, 70:17, 11:21, 14:16, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3, 14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:20, 42:17, 127:8, 139:6 104:19, 105:7, 112:12, 114:12, 81:16, 120:11, repeating 105:11, 105:14 114:15, 117:19, 127:2, 146:21 126:8 residue 125:16, 136:20 relationship report 72:21 revision 137:5, 137:10 9:5, 10:13, respect 123:3 relative 37:1, 48:3, 23:6, 46:2, right 67:2 93:18, 93:19 53:11, 66:9, 7:11, 26:10, release reported 89:21, 93:22, 26:21, 33:5, 15:21, 15:22, 1:20, 2:2, 94:5, 119:6, 34:6, 39:14, 16:19, 20:9, reporter response<	•			10:6, 28:2,
relate repeat residual reviewing 17:12 36:3, 40:21, 67:14, 68:3, 10:1, 10:10, related 44:11, 74:7, 68:11, 68:16, 37:6, 70:17, 11:21, 14:16, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3, 14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:20, 42:17, 127:8, 139:6 104:19, 105:7, 112:12, 114:12, 81:16, 120:11, repeating 105:11, 105:14 114:15, 117:19, 127:2, 146:21 report 72:21 revision 137:5, 137:10 9:5, 10:13, respect 123:3 137:5, 137:10 9:5, 10:13, respect 123:3 relative 37:1, 48:3, 23:6, 46:2, right 67:2 93:18, 93:19 53:11, 66:9, 7:11, 26:10, release reported 89:21, 93:22, 26:21, 33:5, 15:21, 15:22, 1:20, 2:2, 94:5, 119:6, 34:6, 39:14, 16:19, 20:9, reporter response 58:12, 62:13, 101:16, 103:12, <t< th=""><th>· · · · · · · · · · · · · · · · · · ·</th><th></th><th>88:10, 120:7</th><th>109:16</th></t<>	· · · · · · · · · · · · · · · · · · ·		88:10, 120:7	109:16
17:12 36:3, 40:21, 67:14, 68:3, 10:1, 10:10, related 44:11, 74:7, 68:11, 68:16, 37:6, 70:17, 11:21, 14:16, 76:6, 89:7, 68:20, 69:2, 72:5, 91:3, 14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:20, 42:17, 127:8, 139:6 104:19, 105:7, 112:12, 114:12, 11:16, 120:11, repeating 105:11, 105:14 114:15, 117:19, 127:2, 146:21 126:8 residue 125:16, 136:20 relationship report 72:21 revision 137:5, 137:10 9:5, 10:13, respect 123:3 67:2 93:18, 93:19 53:11, 66:9, right 67:2 93:18, 93:19 53:11, 66:9, 7:11, 26:10, release reported 89:21, 93:22, 26:21, 33:5, 15:21, 15:22, 1:20, 2:2, 94:5, 119:6, 34:6, 39:14, 16:10, 16:14, 134:16 119:17, 144:6 51:16, 51:20, 16:19, 20:9, reporter response 58:12, 62:13, 101:16, 103:12, 2:4, 8:4, 137:5, 137:7, 81:8, 89:17, 105:21, 113:14, 13:15, 69:12, 137:9 97:17, 107:15, 14:4:1, 118:12, 146:1, 146:3 restrict 108:12	relate		residual	reviewing
11:21, 14:16,	17:12	_	67:14, 68:3,	10:1, 10:10,
14:17, 14:18, 102:3, 114:16, 71:9, 85:12, 94:22, 109:22, 14:20, 42:17, 127:8, 139:6 104:19, 105:7, 112:12, 114:12, 81:16, 120:11, repeating 105:11, 105:14 114:15, 117:19, 127:2, 146:21 126:8 residue 125:16, 136:20 relationship report 72:21 revision 137:5, 137:10 9:5, 10:13, respect 123:3 relative 37:1, 48:3, 23:6, 46:2, right 67:2 93:18, 93:19 53:11, 66:9, right 75:21, 15:22, 1:20, 2:2, 94:5, 119:6, 34:6, 39:14, 16:10, 16:14, 134:16 119:17, 144:6 51:16, 51:20, 16:19, 20:9, reporter response 58:12, 62:13, 101:16, 103:12, 2:4, 8:4, 137:5, 137:7, 81:8, 89:17, 105:21, 113:14, 13:15, 69:12, 137:9 97:17, 107:15, 114:10, 114:13, 146:1, 146:3 restrict 108:12, 108:21, 119:2 represent 46:18 10:12, 113:1, 115:5, 54:4, 63:17, 69:17, 63:20, 65:14, 139:16, 140:2,	related	44:11, 74:7,	· · · · · · · · · · · · · · · · · · ·	
14:20, 42:17, 127:8, 139:6 104:19, 105:7, 112:12, 114:12, 81:16, 120:11, repeating 105:11, 105:14 114:15, 117:19, 127:2, 146:21 126:8 residue 125:16, 136:20 relationship report 72:21 revision 137:5, 137:10 9:5, 10:13, respect 123:3 relative 37:1, 48:3, 23:6, 46:2, right 67:2 93:18, 93:19 53:11, 66:9, 7:11, 26:10, release reported 89:21, 93:22, 26:21, 33:5, 15:21, 15:22, 1:20, 2:2, 94:5, 119:6, 34:6, 39:14, 16:10, 16:14, 134:16 119:17, 144:6 51:16, 51:20, 16:19, 20:9, reporter response 58:12, 62:13, 101:16, 103:12, 2:4, 8:4, 137:5, 137:7, 81:8, 89:17, 105:21, 113:14, 13:15, 69:12, 137:9 97:17, 107:15, 114:1, 118:12, 146:1, 146:3 restrict 108:12, 108:21, 119:2 represent 46:18 10:12, 113:1, 122:8, 124:15, 33:4, 73:7 63:20, 65:14, 138:6, 138:16, <td< th=""><th>11:21, 14:16,</th><th>76:6, 89:7,</th><th></th><th></th></td<>	11:21, 14:16,	76:6, 89:7,		
81:16, 120:11, repeating 105:11, 105:14 114:15, 117:19, 127:2, 146:21 126:8 residue 125:16, 136:20 relationship report 72:21 revision 137:5, 137:10 9:5, 10:13, 23:6, 46:2, right 67:2 93:18, 93:19 53:11, 66:9, 7:11, 26:10, release reported 89:21, 93:22, 26:21, 33:5, 15:21, 15:22, 1:20, 2:2, 94:5, 119:6, 34:6, 39:14, 16:10, 16:14, 134:16 119:17, 144:6 51:16, 51:20, 16:19, 20:9, reporter response 58:12, 62:13, 101:16, 103:12, 2:4, 8:4, 137:5, 137:7, 81:8, 89:17, 105:21, 113:14, 13:15, 69:12, 137:9 97:17, 107:15, 114:1, 118:12, represent 46:18 108:12, 108:21, 119:2 represent 46:18 108:12, 113:1, 12:8, 124:15, 31:15, 54:4, 63:17, 69:17, 60:17, 63:4, 130:19, 138:1, 101:20, 102:11 73:4, 73:7 63:20, 65:14, 139:16, 140:2, 12:8, 124:15, 139:16, 140:2,	14:17, 14:18,	102:3, 114:16,		
127:2, 146:21 126:8 residue 125:16, 136:20 relationship report 72:21 revision 137:5, 137:10 9:5, 10:13, 23:6, 46:2, right 67:2 93:18, 93:19 53:11, 66:9, 7:11, 26:10, release reported 89:21, 93:22, 26:21, 33:5, 15:21, 15:22, 1:20, 2:2, 94:5, 119:6, 34:6, 39:14, 16:10, 16:14, 134:16 119:17, 144:6 51:16, 51:20, 16:19, 20:9, reporter response 58:12, 62:13, 101:16, 103:12, 2:4, 8:4, 137:5, 137:7, 81:8, 89:17, 105:21, 113:14, 13:15, 69:12, 137:9 97:17, 107:15, 114:1, 118:12, 146:1, 146:3 restrict 108:12, 108:21, 119:2 represent 46:18 110:12, 113:1, 12:8, 124:15, 13:17, 26:3, 60:17, 63:4, 130:19, 138:1, 31:15, 54:4, 63:17, 69:17, 63:20, 65:14, 138:6, 138:16, 101:20, 102:11 73:4, 73:7 63:20, 65:14, 139:16, 140:2,		127:8, 139:6		
relationship 137:5, 137:10 9:5, 10:13, relative 37:1, 48:3, 67:2 93:18, 93:19 15:21, 15:22, 1:20, 2:2, 16:10, 16:14, 134:16 119:17, 144:6 119:17, 144:6 119:17, 144:6 119:2 113:14, 119:17 113:14, 119:17 113:14, 119:2 release 13:17, 26:3, 31:15, 54:4, 101:20, 102:11 represented 72:21 respect 123:3 respect 124:10, 126:10, 126:10, 126:11, 126:10, 126:11, 136:21, 139:14, 131:16, 126:10, 126:10, 126:10, 126:10, 126:10, 126:10, 126:10, 126:11, 136:16, 136:11, 136:11, 136:12, 136:12, 136:14, 136:14, 138:16, 138:16, 139:16, 140:2, 140:12, 140:				
Telative 37:1, 48:3, 23:6, 46:2, 7:11, 26:10, 23:11, 66:9, 7:11, 26:10, 26:21, 15:22, 1:20, 2:2, 24:5, 119:6, 16:19, 20:9, 70:116, 103:12, 105:21, 113:14, 13:15, 69:12, 114:1, 118:12, 146:1, 146:3		126:8		
relative 37:1, 48:3, 93:18, 93:19 release reported 15:21, 15:22, 1:20, 2:2, 16:10, 16:14, 134:16 response 101:16, 103:12, 105:21, 113:14, 13:15, 69:12, 14:1, 118:12, 146:1, 146:3 released 13:17, 26:3, 13:15, 54:4, 101:20, 102:11 relevance 37:1, 48:3, 23:6, 46:2, 7:11, 26:10,	_			
67:2 93:18, 93:19 53:11, 66:9, 7:11, 26:10, release reported 89:21, 93:22, 26:21, 33:5, 15:21, 15:22, 1:20, 2:2, 94:5, 119:6, 34:6, 39:14, 16:10, 16:14, 134:16 119:17, 144:6 51:16, 51:20, 16:19, 20:9, reporter response 58:12, 62:13, 101:16, 103:12, 2:4, 8:4, 137:5, 137:7, 81:8, 89:17, 105:21, 113:14, 13:15, 69:12, 137:9 97:17, 107:15, 14:1, 118:12, 146:1, 146:3 restrict 108:12, 108:21, 19:2 represent 46:18 10:12, 113:1, released 13:17, 26:3, result 130:19, 138:1, 31:15, 54:4, 63:17, 69:17, 63:4, 130:19, 138:1, 101:20, 102:11 73:4, 73:7 63:20, 65:14, 139:16, 140:2, relevance represented 73:10, 73:21, 139:16, 140:2,	•			
release reported 89:21, 93:22, 26:21, 33:5, 15:21, 15:22, 1:20, 2:2, 94:5, 119:6, 34:6, 39:14, 16:10, 16:14, 134:16 119:17, 144:6 51:16, 51:20, 16:19, 20:9, reporter response 58:12, 62:13, 101:16, 103:12, 2:4, 8:4, 137:5, 137:7, 81:8, 89:17, 105:21, 113:14, 13:15, 69:12, 137:9 97:17, 107:15, 14:1, 118:12, 146:1, 146:3 restrict 108:12, 108:21, 119:2 represent 46:18 110:12, 113:1, released 13:17, 26:3, result 122:8, 124:15, 31:15, 54:4, 63:17, 69:17, 60:17, 63:4, 130:19, 138:1, 101:20, 102:11 73:4, 73:7 63:20, 65:14, 139:16, 140:2, represented 73:10, 73:21, 139:16, 140:2,				
15:21, 15:22, 16:10, 16:14, 134:16 reporter 101:16, 103:12, 13:15, 69:12, 13:15, 54:4, 101:20, 102:11 relevance 1:20, 2:2, 119:17, 144:6 119:17, 144:6 51:16, 51:20, 58:12, 62:13, 137:5, 137:7, 137:9 97:17, 107:15, 108:12, 108:21, 110:12, 113:1, 12:8, 124:15, 13:15, 54:4, 101:20, 102:11 relevance 1:20, 2:2, 119:6, 119:17, 144:6 51:16, 51:20, 58:12, 62:13, 137:5, 137:7, 137:9 97:17, 107:15, 108:12, 108:21, 108:12, 113:1, 108:12, 113:1, 108:12, 113:1, 110				
16:10, 16:14, 16:19, 20:9, 101:16, 103:12, 105:21, 113:14, 119:17, 144:6 response 17:16, 51:20, 18:12, 62:13, 18:18, 89:17, 18:11, 18:12, 18:12, 62:13, 18:18, 89:17, 18:18, 89:18, 18:18, 89:17, 18:18, 89:18, 18:18, 89:18, 18:18, 89:18, 18:		_		
16:19, 20:9, reporter 58:12, 62:13, 101:16, 103:12, 2:4, 8:4, 137:5, 137:7, 81:8, 89:17, 105:21, 113:14, 13:15, 69:12, 97:17, 107:15, 114:1, 118:12, 146:1, 146:3 108:12, 108:21, 119:2 represent 10:12, 113:1, released 13:17, 26:3, result 122:8, 124:15, 31:15, 54:4, 63:17, 69:17, 60:17, 63:4, 130:19, 138:1, 101:20, 102:11 73:4, 73:7 63:20, 65:14, 138:6, 138:16, relevance represented 73:10, 73:21, 139:16, 140:2,				
101:16, 103:12, 2:4, 8:4, 137:5, 137:7, 97:17, 107:15, 137:9, 14:1, 118:12, 146:1, 146:3 restrict 108:12, 108:21, 119:2 represent 46:18 110:12, 113:1, 12:8, 12:8, 124:15, 131:15, 54:4, 63:17, 69:17, 63:20, 65:14, 138:6, 138:16, 139:16, 140:2, represent 73:10, 73:21, 139:16, 140:2, 141:10				•
105:21, 113:14, 13:15, 69:12, 137:9 97:17, 107:15, 146:1, 146:1, 146:3 restrict 108:12, 108:21, 119:2 represent 46:18 110:12, 113:1, 12:8, 124:15, 131:15, 54:4, 63:17, 69:17, 60:17, 63:4, 130:19, 138:1, 131:20, 102:11 73:4, 73:7 relevance represented 73:10, 73:21, 139:16, 140:2, 141:10			_	
114:1, 118:12, 146:1, 146:3 restrict 108:12, 108:21, 119:2 represent 46:18 110:12, 113:1, 12:8, 124:15, 131:15, 54:4, 63:17, 69:17, 60:17, 63:4, 130:19, 138:1, 130:20, 102:11 73:4, 73:7 relevance represented 73:10, 73:21, 139:16, 140:2, 141:10	•			
119:2 represent 46:18 110:12, 113:1, released 13:17, 26:3, 122:8, 124:15, 31:15, 54:4, 63:17, 69:17, 60:17, 63:4, 130:19, 138:1, 101:20, 102:11 73:4, 73:7 63:20, 65:14, 138:6, 138:16, relevance represented 73:10, 73:21, 139:16, 140:2,		•		
released 13:17, 26:3, result 122:8, 124:15, 31:15, 54:4, 63:17, 69:17, 60:17, 63:4, 130:19, 138:1, 101:20, 102:11 73:4, 73:7 63:20, 65:14, 138:6, 138:16, relevance 73:10, 73:21, 139:16, 140:2,		•		
31:15, 54:4, 101:20, 102:11 relevance 13:17, 20:3, 60:17, 63:4, 63:20, 65:14, 73:4, 73:7 represented 130:19, 138:1, 138:6, 138:16, 139:16, 140:2,		. •		
101:20, 102:11 73:4, 73:7 63:20, 65:14, 138:6, 138:16, 139:16, 140:2, 139:16, 140:2,				
relevance 73:10, 73:21, 139:16, 140:2,				
141 4 141 10	•	•		
		_		
	10.10	20.10, 117.0,	,	

	Conducted on 1	1 /	
141:13	34:21, 36:15,	130:17, 130:22,	searching
right-hand	36:21, 38:1,	131:3, 131:5,	48:20
29:13	38:5, 38:6,	131:6, 131:14,	seattle
role	38:16, 39:9,	132:2, 132:11,	3:19
14:10, 17:22,	39:11, 40:1,	133:3, 133:9,	second
19:7	40:6, 40:19,	133:11, 133:15,	28:9, 29:11,
route	41:1, 43:2,	134:9, 139:3,	
	43:11, 43:19,	140:8, 140:10,	37:8, 69:16,
45:13, 46:1,	44:9, 44:13,	141:18, 143:12,	70:1, 70:20,
46:17	44:19, 45:2,	143:22, 144:9	72:2, 78:6,
routes	51:19, 52:6,	samples	88:15, 91:1,
46:8, 46:15	52:11, 52:12,	128:12	98:13, 112:11,
routine	52:18, 52:19,	saw	113:5, 113:6,
103:1	52:21, 53:3,	97:21	116:6, 117:18,
routinely	53:5, 53:7,		136:19
77:2		say	second-to-last
rules	53:17, 53:19, 54:22, 55:6,	14:2, 19:22,	88:21, 89:6,
7:22		21:13, 22:10,	89:9
S	55:7, 58:16,	23:21, 24:16,	section
s	58:20, 59:6,	35:8, 40:11,	70:9, 115:11
3:1, 4:1	59:12, 59:16,	41:17, 43:11,	see
s-o-n-g	62:8, 128:11,	45:3, 46:7,	12:18, 15:6,
92:5	130:16, 143:17,	53:16, 65:19,	16:18, 25:22,
safe	143:22	68:9, 68:21,	28:1, 28:11,
105:8, 135:8,	salts	80:11, 94:12,	28:16, 29:18,
141:12	33:20	101:12, 104:10,	36:19, 38:13,
safety	same	109:19, 131:18,	38:20, 39:7,
126:1	21:18, 27:2,	136:3, 138:10,	39:8, 43:3,
said	27:10, 29:2,	139:5, 139:13,	50:11, 51:8,
15:14, 19:15,	30:6, 30:9,	140:21, 141:13,	52:2, 59:1,
26:4, 32:13,	30:15, 31:2,	142:22	59:6, 60:16,
50:21, 55:5,	31:9, 31:10,	saying	61:19, 64:18,
	31:14, 31:20,	37:19	71:1, 72:17,
58:14, 60:11,	37:4, 39:15,	says	74:22, 75:20,
61:9, 68:20,	40:19, 41:1,	55:2, 72:17,	81:16, 89:2,
75:13, 85:18,	41:11, 41:21,	75:15, 118:4,	89:8, 89:17,
95:3, 99:9,	42:21, 43:1,	122:12, 141:22	90:15, 90:18,
99:14, 106:7,	43:4, 43:12,	scale	91:6, 95:1,
141:1	44:10, 44:14,	120:7	98:10, 100:5,
sake	49:7, 56:3,	scenario	105:20, 110:12,
64:20	56:9, 56:13,	45:18	121:18, 129:11,
salt	62:10, 63:13,	school	131:4, 142:2,
27:9, 29:22,	64:1, 66:6,	14:22	142:8, 143:3
30:8, 30:12,	66:9, 84:11,	science	seeing
30:14, 30:22,	86:16, 88:2,	15:13	90:12, 98:15
31:8, 32:17,	90:11, 94:8,	scientist	seems
34:1, 34:5,	96:10, 97:20,	33:18, 52:5	63:6, 105:20
34:6, 34:15,	118:19, 118:22,	se	seen
34:16, 34:20,	128:19, 129:1,	95:11	23:13, 28:3,
			!
			Ī

		1 /	
98:2, 134:12,	133:8, 137:6	skim	solvents
137:10	shouldn't	109:21	67:11, 67:14,
sense	106:8, 107:1,	slew	68:3, 68:11,
13:6, 31:21,	142:14	122:13	68:16, 68:20,
34:18, 41:3	show	slight	69:2, 71:10,
sensitive	115:10	82:3	83:22, 84:15,
112:2	showed	slightly	85:13, 86:7,
sentence	111:16	132:7	86:11, 86:14,
70:21, 71:3,	showing	small	104:20, 105:7,
71:11, 78:10,	111:15	15:2, 15:4,	105:11, 105:14
88:21, 89:6,	shown	27:17, 38:11,	some
89:9, 113:4,	115:16, 115:19	111:15, 114:2,	9:7, 10:1,
113:7, 113:22	shows	143:3, 143:5	12:9, 42:20,
separate	32:19, 33:1,	sold	49:6, 66:19,
18:21, 19:2,	111:13, 115:13	28:21	78:10, 83:5,
82:10, 88:11,	signature-mig2k	solid	89:18, 94:1,
108:21	147:11	22:7, 22:14,	99:11, 104:2,
separated	silly	31:21, 34:18,	106:2, 108:1,
82:1	106:22	45:19, 46:19,	123:21, 127:22,
separating	similar	46:22, 72:10,	131:20, 132:5,
17:17, 17:20	81:19, 82:8,	72:13, 95:1,	142:2, 142:8
serve	141:18	95:6	somebody
23:10	similarity	solubilities	21:17, 22:1,
served	131:21	81:17, 81:19,	69:7, 74:13,
7:9, 7:19		82:8	122:9
session	simply	solubility	somehow
117:1	32:19, 43:20	33:21, 41:16,	82:2
set	since	44:2, 44:3,	something
	73:13, 77:5,	44:2, 44:3, 44:9, 44:13,	37:5, 40:11,
146:7, 147:8	127:20	44:14, 44:21,	40:17, 41:15,
several	single	45:4, 45:6,	43:9, 48:4,
9:6, 12:2,	99:10	81:14, 82:4,	48:16, 78:17,
41:7, 98:8, 123:10	sit	84:6, 84:14,	99:8, 101:5,
	36:20, 52:22,	101:2, 101:6,	107:20, 109:17,
shape 105:6	112:22	101:14, 101:18,	126:22, 134:11
	sitting	101:14, 101:18,	sometime
shed	40:13, 68:15,	144:4	23:17
142:2	86:1	soluble	sometimes
short	situation	73:1, 73:8,	47:6, 99:7
21:2, 57:19,	16:9	101:9	somewhere
97:1, 141:20	size	solution	12:11, 24:1,
shorter	120:12	84:21	36:22, 80:18,
124:19	skill	solvate	94:7, 97:22,
shorthand	44:21, 45:13,	30:5, 31:19,	98:2, 101:4
2:3, 146:1,	45:16, 46:1,	30:5, 31:19, 35:1, 37:2	song
146:2	46:6, 68:22,	solvent	92:5, 92:9,
should	77:13, 77:16,		92:12, 92:20,
21:3, 43:14,	95:4, 124:17	83:15, 84:18, 87:1	93:2, 93:6,
105:13, 131:20,	skilled	0 / : 1	
	124:12		
	I		

02 0 02 16	01 16 00 7	F4 6 60 10	
93:9, 93:16,	81:16, 88:7,	54:6, 62:10,	stereoisomer
93:20, 94:1,	99:19	62:12, 62:13,	26:22, 27:7,
94:3, 94:7,	specifications	73:22, 88:20,	140:12
94:9, 94:13,	106:8	89:9, 91:6,	stereoisomers
94:22, 95:7,	specify	96:6, 102:22,	17:11, 25:19,
97:11, 97:14,	106:20, 119:16,	137:16, 141:9,	26:6, 26:8,
97:20, 98:1,	139:22	146:4, 147:16	26:17, 27:1,
98:10, 98:11,	spend	stated	81:19, 82:9,
98:17, 98:20,	10:10, 11:17,	142:13	83:16, 84:1,
99:2	20:15	statement	88:12
soon	spent	15:13, 50:3,	steven
113:10	89:18, 99:11	56:4, 56:14,	4:7
sorry	spring	99:18, 103:4,	still
10:14, 16:11,	46:13	103:6, 111:6,	27:6, 34:2,
28:13, 35:8,	springs	141:1	41:22, 71:14,
36:3, 44:11,	108:12	states	107:15
54:7, 68:18,	squint	1:1, 5:13,	stomach
74:7, 76:6,	27:18	5:15, 51:2,	54:6, 54:7,
76:13, 79:18,	stability	68:1, 68:7,	77:4, 78:13,
89:13, 90:22,	17:15, 33:21,	74:18	78:20, 79:12,
91:11, 95:14,	44:22, 45:10,	stating	80:10, 80:16,
99:10, 106:20,	45:15, 46:2,	43:20, 95:21	81:1, 101:17,
108:21, 112:22,	47:6, 119:12	steady	101:20, 104:11,
113:8, 114:6,	stable	137:15	111:19, 112:2
114:17, 136:6,	45:18, 46:3,	stegemann	stopping
137:16, 139:8	46:12, 46:22,	6:9, 117:16,	101:16
sort	47:3, 73:5	117:22, 118:3,	storage
14:19, 43:21,	stand	118:14, 119:4,	47 : 5
94:16, 120:7,	50:3, 103:4	119:7, 119:10,	straightforward
120:15, 127:22	standard	119:14	40:6
sorts	67:17, 78:1,	stenographer	strange
83:6	80:18, 102:13,	33:8, 58:1,	80:22
sources	110:22, 142:20	58:5, 87:11,	strategy
69:4	standards	97:3, 97:7,	35 : 21
spec	68:1, 105:5	112:18, 116:7,	street
60:17	start	117:2, 144:12,	2:6, 3:5, 3:13,
specific	12:6, 33:7,	144:16, 144:22	146:18
14:13, 60:19,	81:22, 106:16,	stenographically	stretch
61:13, 68:13,	108:8	2:2	61:12
70:9, 81:20,	starting	step	structural
82:17, 83:17,	84:13, 87:5,	25:21, 41:4,	17:13
86:2, 121:17		63:15, 66:18,	structure
specifically	87:10, 87:14 starts	72:14, 73:18,	25:14, 26:1,
36:21, 40:17,		137:21	•
57:17, 67:21,	39:4, 70:21,	steps	29:16, 29:20,
76:12, 86:9,	98:6, 98:7	60:17, 63:1,	29:21, 30:2,
95:8, 137:17	state	66:5, 66:11,	32:2, 32:6,
specification	2:5, 38:5,	75:6, 75:19	32:16, 32:22,
60:16, 68:7,	41:17, 49:19,	, 5.0, , 5.19	33:15, 34:22,

38:12	summary	synthesis	57:19, 57:21,
structures	15:8, 18:7,	96:12, 140:20,	66:18, 69:16,
26:18	19:13, 115:11	140:22	72:2, 72:14,
studies	summer	synthesize	96:22, 98:12,
14:16, 43:17,	12:9, 12:10	52:19, 53:5,	103:1, 103:20,
69:6, 134:7,	supervisor	53:6	112:10, 137:21
134:10	21:18	synthesizing	taken
study	suppose	103:7	45:11, 58:3,
14:22, 16:1,	21:22, 43:15,	synthetic	97:5, 116:9,
16:3, 43:14,	67:9, 80:3,	16:22, 18:10,	144:14, 146:10
43:21, 126:1,			talk
126:18, 127:3,	82:22, 94:8,	55:2, 55:5,	8:3, 66:17,
	106:1, 119:22	55:18, 57:15,	81:7, 81:9,
129:17, 129:19,	sure	58:19, 59:22,	
132:18	12:8, 13:9,	60:17, 62:22,	82:11, 83:11,
studying	13:21, 21:1,	63:4, 63:7,	84:2, 84:7,
16:11	21:3, 23:13,	63:8, 63:18,	135:15
subject	30:13, 36:18,	63:20, 65:1,	talked
78:11, 111:18	37:17, 39:21,	65:8, 65:9,	99:9, 108:1
submitted	53:14, 54:16,	65:13, 65:22,	talking
13:19	54:17, 58:13,	66:5, 74:22,	39:2, 41:22,
subsequent	65:16, 66:1,	75:5, 75:19,	58:12, 62:9,
74:5, 74:10	66:13, 69:8,	92:13, 92:15,	81:2, 89:19,
subsequently	72:12, 76:7,	92:19, 92:20,	97:11, 107:11,
25:2	76:11, 79:12,	93:1, 93:2,	107:14, 107:17,
substantially	80:6, 81:8,	98:18, 99:12	115:2, 137:2
115:22	89:8, 95:7,	system	talks
subtle	97:2, 103:22,	45:7, 78:21,	33:5, 33:10,
17:13	106:5, 107:9,	79:22, 85:5,	34:9, 113:20,
succinct	107:22, 108:13,	110:16	113:22, 115:9
15:8	109:21, 112:9,	Т	tamoxifen
sufficient	112:13, 112:16,	table	24:10, 24:14,
137:14	125:14, 126:9,	95:10, 118:3,	37:11, 37:15,
suggest	127:15, 128:16,	118:10, 119:9,	37:20, 38:2,
33:4, 95:22	130:7, 135:9,	119:17, 136:6,	39:1, 39:13,
suggested	141:21	142:5, 142:8,	39:17, 39:19,
89:19	susan	142:9, 143:10	40:5, 40:9,
suggests	3:16, 3:17	tables	126:2
33:2	suspect	143:10	target
suit	61:1, 69:5,	tablet	140:19, 140:22
115:21	74:1, 107:3,	107:17	taught
suitable	133:12	tablets	18:10, 18:13,
43:21, 120:14,	sustained	6:12, 14:19,	18:16, 18:20,
	15:22, 102:18,		19:1
124:1, 124:18,	114:10, 114:21,	15:18, 77:8 take	teach
138:9, 138:10	115:1	8:14, 20:22,	18:1, 18:2,
suite	sworn	· · · · · · · · · · · · · · · · · · ·	18:3, 18:8,
3:13, 3:18	7:1, 7:4, 8:21,	36:9, 40:15,	19:5, 94:10,
sum	117:5, 146:8	41:4, 55:9,	94:13, 114:19
49:20	,		,

teaches	testified	therapy	83:7, 85:10,
49:20, 53:8,	7:4, 36:6,	14:21, 137:14,	90:15, 94:6,
53:12, 53:19,	42:22, 43:5,	137:16, 138:13	94:17, 94:18,
60:9, 88:21,	44:1, 45:22,	thesis	95:3, 95:10,
89:10, 93:6,	59:21, 61:22,	20:6, 20:8,	96:15, 96:21,
99:19	117:6	20:18, 20:21,	105:12, 105:14,
teachings	testifying	22:2	108:8, 108:11,
121:15	11:2, 97:18	they'd	112:14, 115:17,
teams	testimony	132:1, 132:19	115:20, 120:1,
11:20	8:21, 11:5,	thicker	120:2, 120:15,
techniques	28:5, 37:18,	132:7	127:18, 127:22,
82:5	39:18, 42:12,	thin	133:17, 133:22,
	52:8, 52:14,		134:4, 134:20,
technology		14:18	135:11, 137:9,
6:6, 110:19,	52:22, 53:13,	thing	140:7, 140:8,
112:8, 113:13,	54:20, 58:13,	14:20, 20:12,	140:10, 144:10
113:17, 114:5,	60:2, 61:3,	37:4, 41:8,	thinking
114:8, 114:20	61:6, 61:10,	85:10, 95:5,	
technology's	77:12, 77:15,	95:10, 104:16,	45:20, 66:20,
111:9	118:21, 128:17,	120:10, 130:13,	89:15
tell	130:8, 130:9,	133:5, 134:4,	third
15:15, 17:8,	146:11	141:11	39:3, 89:2,
68:15, 104:9,	testing	things	122:11
112:21, 130:3,	105:19, 105:22,	17:14, 42:15,	thoroughly
135:18, 139:21	110:15, 110:22,	42:17, 44:4,	76:14, 93:14
tells	132:11	44:20, 46:13,	thought
55:22, 79:22,	tests	66:19, 84:15,	20:11, 24:9,
135:21	132:13	111:14, 119:22,	25:1, 39:21,
temperature	text	120:2, 120:11,	40:3, 97:21,
84:4, 84:5,	90:17	132:11, 135:11,	98:2, 99:3
84:10, 84:21,	th	140:13, 142:2	thousand
86:19	3:5, 146:19,	think	65 : 3
term	147:8	7:18, 9:20,	three
26:22, 41:5,	thank	11:19, 12:4,	20:17, 20:22,
62:16, 78:22,	8:19, 11:9,	12:8, 21:1,	21:4, 108:10
99:5	27:15, 41:22,	23:17, 24:3,	three-dimensional
terms	64:8, 92:2,	24:8, 24:9,	26:8, 27:3
40:4, 52:6,	117:11, 121:1,	36:22, 37:22,	threshold
52:17, 77:10,	125:2, 135:14,	40:12, 45:1,	138:11
96:12, 102:11,	144:17, 144:20	45:9, 46:8,	threw
	themselves	48:2, 48:18,	89:15
105:4, 128:6,	104:4	48:20, 49:7,	through
133:6, 135:8,		56:11, 57:5,	
141:10	therapeutic	61:15, 61:20,	9:5, 15:21,
test	95:9, 136:2, 138:7	63:10, 64:5,	36:18, 37:5, 50:1, 63:15
78:1, 111:3,			59:1, 63:15,
116:1, 131:11,	therapeutically	70:12, 72:20,	70:5, 70:9,
131:15, 132:1,	136:9	73:17, 76:19,	71:7, 76:4,
133:5	therapeutics	77:6, 77:20,	76:14, 76:22,
tested	1:8, 4:8	78:17, 79:20,	88:7, 99:11,
43:10, 110:7			

99:15, 109:20,	tract	two	29:4, 33:14,
109:21, 112:11,	44:6, 54:7,	19:16, 19:22,	36:6, 44:8,
122:10, 124:13	102:7, 108:9,	20:17, 20:22,	44:17, 60:8,
throughout	110:21, 113:14,	21:5, 24:22,	60:9, 62:5,
71:8	113:19, 114:2	25:3, 25:9,	63:12, 65:7,
time	trademark	25:19, 26:7,	72:22, 75:9,
8:15, 8:16,	1:1	26:16, 32:14,	80:15, 82:13,
11:2, 12:13,	translate	42:6, 42:13,	83:10, 83:14,
20:9, 20:12,	16:13	43:6, 46:8,	85:3, 85:7,
21:2, 21:22,	translates	46:13, 63:19,	85:15, 86:6,
35:11, 37:13,	16:8	65:12, 140:13,	86:10, 86:17,
42:7, 48:3,	treat	142:2, 143:10	87:4, 87:17,
48:20, 48:21,	49:21, 94:19,	type	90:1, 90:7,
73:13, 77:1,	96:3	43:11, 43:20,	93:5, 101:1,
84:11, 89:18,	treatment	78:19, 79:13,	101:8, 129:6,
99:11, 102:18,	33:6, 33:11	83:15, 104:7,	129:15
104:4, 114:10,	trial	108:15, 112:16	underway
114:22, 115:3,	1:3	types	111:8
117:2, 145:2	trials	18:8, 85:5,	unique
time-delayed	111:8	134:18	21:16, 21:19
20:11	true	U	united
times	55:10, 71:12,	uh-huh	1:1, 5:13,
134:21	71:15, 79:19,	85:19, 108:4	5:15, 68:1, 68:6
tiny	146:10	under	university
142:7	try	8:21, 42:10,	14:7
titled	8:15, 15:20,	79:16, 80:8,	unknown
20:8	77:21, 104:16	122:11, 124:8,	106:2
tmax	trying	133:10, 133:14,	unless
42:7, 42:10	16:16, 124:15	133:20	45:11
today	tuesday	understand	unm
8:21, 9:2,	9:20	7:22, 8:5,	15:1
11:2, 28:5,	turn	8:10, 8:20,	unprotonated
36:20, 40:14,	12:14, 15:5,	25:17, 35:17,	62:15
50:3, 52:22,	25:8, 26:13,	37:14, 37:17,	unstable
61:22, 68:15	29:10, 35:5,	41:5, 53:14,	107:6, 107:7
together	38:7, 49:14,	54:18, 58:13,	until
24:15, 140:14	51:14, 58:8,	72:8, 72:15,	31:11, 72:10
took	71:17, 71:22,	73:16, 79:15,	updated
12:4	88:14	79:19, 80:6,	13:21
tools	turning	89:20, 92:12,	upper
83:6	20:4, 22:5,	96:8, 96:16,	113:14, 114:1
top	31:22	126:19, 127:4,	use
123:2	turnover	127:17, 128:17,	41:5, 43:12,
topical	47:4	129:3, 129:22,	45:13, 45:21,
46:16	turns	130:8, 130:10	46:1, 49:20,
toxicities	39:15	understanding	68:8, 68:9,
134:19	twice	25:13, 28:18,	79:21, 86:7,
toxicology	7:18		86:14, 88:10,
69:6			

93:6, 96:17,	vary	64:3, 82:14,	146:18
102:8, 103:14,	41:15, 44:2,	83:9, 96:8,	whatever
103:17, 104:7,	80:17, 127:6,	96:16, 123:11,	107:13, 137:15,
104:15, 104:22,	127:10, 127:15,	124:6	139:2, 140:17
105:1, 106:21,	129:9, 130:1	washington	whatnot
114:19, 119:7,	varying	3:19	123:15
119:20, 122:7,	134:17	wavy	whatsoever
122:10, 123:15,	verbal	25:17, 25:22,	101:19
123:20, 124:2,	8:8	32:13	whenever
136:2, 141:12	verbatim	way	8:14
useful	50:18	21:19, 35:3,	whereof
33:6, 123:14	version	60:5, 61:7,	147:7
usefulness	38:5, 131:17	61:11, 77:21,	whereupon
33:10	versus	94:19, 107:13,	58:3, 97:5,
uses	44:9	118:19, 131:13,	116:9, 144:14
38:16, 39:12	via	132:5, 133:3,	whether
using	11:19	147:3	21:1, 36:20,
76:16, 78:21,	view	ways	40:8, 43:8,
82:10, 83:15,	79:11, 96:4,	15:20, 45:12	44:9, 44:18,
83:21, 84:9,	121:20, 135:12	we'11	45:5, 56:4,
84:12, 89:1,	vitae	8:14, 78:2	60:9, 60:16,
89:11, 90:9,	5:8	we're	62:5, 63:12,
91:9, 93:11,	vitro	25:11, 26:12,	65:7, 65:20,
101:21, 102:4,	16:7, 16:9,	27:17, 29:10,	69:1, 73:1,
105:3, 110:18,	105:22	35:5, 38:10,	74:15, 75:10,
113:16, 114:7,	volume	41:22, 49:12,	75:20, 76:5,
118:14, 119:4,	42:16, 124:4	49:16, 58:1,	76:11, 76:18,
123:17, 132:1	W	58:5, 66:22,	81:8, 82:14,
usp		68:10, 71:17,	83:15, 85:16,
68:14, 68:19,	waiting	81:2, 81:11,	86:7, 86:10,
69:1	113:8	90:20, 97:3,	86:18, 86:22,
usually	want	97:7, 105:6,	87:4, 87:17,
46:11	37:17, 39:6,	107:11, 107:14,	90:2, 90:8,
	42:11, 45:3,	107:17, 116:7,	93:5, 93:9,
vaccines	46:3, 46:8,	132:11, 134:1,	95:7, 96:9,
111:10	53:13, 54:17,	137:2, 142:4	96:16, 100:5,
valid	56:12, 57:20,	we've	101:8, 102:16,
99:22	58:13, 61:21,	57:18, 96:21,	108:18, 112:16,
value	67:22, 70:8,	138:14	112:20, 114:4,
143:11	70:9, 78:9,	welcome	114:9, 118:22,
values	80:2, 80:6,	70:11	119:10, 120:3,
142:16	96:22, 99:8,	well-known	123:16, 124:1,
variability	104:11, 108:8,	91:9	124:3, 127:17,
127:19, 131:22	118:7, 120:6, 120:12, 122:3,	went	128:5, 130:16,
various	128:16, 130:7,	12:2, 28:15,	134:5
15:18, 15:20,	137:21	48:16, 89:16	whole
16:4, 44:4	wanted	west	21:16, 31:5,
10.1, 11.4	9:6, 22:10,	2:5, 3:5,	53:8, 121:13,
	J.O, ZZ.IO,		
I			

		1 /	
122:12, 128:7	worked	95:14, 96:15,	134:8
wide	22:14, 24:17	97:17, 106:21,	z)-endoxifen
123:20	working	109:21, 110:13,	26:17, 35:13,
widely	12:6, 48:7,	111:22, 112:9,	35:19, 36:1,
134:17	55:17, 56:5,	112:22, 113:8,	36:5, 49:21,
window	56:15, 74:16,	118:6, 118:17,	51:4, 51:11,
44:5	75:10, 76:1,	126:13, 133:4,	51:19, 52:1,
withdraw	76:8, 77:10,	135:17, 136:5,	52:13, 53:7,
16:2, 16:12,	90:8	138:2	53:9, 53:20,
	worry	year	54:1, 54:4,
24:11, 61:4,	106:1	12:9, 19:18,	54:10, 55:3,
73:5, 77:14,		19:21, 23:17	55:8, 56:8,
92:11, 114:6,	worst-case	years	56:18, 57:16,
119:18, 122:19,	45:17	20:17, 20:22,	60:1, 60:10,
128:20, 129:7,	wouldn't	21:5, 123:10	60:18, 60:22,
139:8	40:15, 43:3,		61:10, 65:18,
within	101:12, 106:21,	yep	65:21, 66:4,
16:6, 37:1,	107:3, 126:7,	29:14, 102:4	66:12, 67:1,
75:14, 85:4,	132:9	yesterday	67:5, 73:2,
121:18, 122:16,	write	9:11, 9:19	73:5, 73:8,
146:4	11:15, 78:10	yield	74:5, 74:10,
without	writing	35:20, 36:7	74:17, 75:12,
77:17, 142:15	11:17	yourself	75:21, 76:2,
witness	written	59:11, 70:14,	76:9, 76:17,
7:1, 7:3, 7:10,	13:6, 94:1	75:18	77:17, 79:15,
30:18, 31:11,	wrong	z	80:1, 80:7,
32:11, 33:9,	54:19	z	81:3, 85:17,
57:21, 70:17,	wrote	99:5, 127:20,	85:21, 86:20,
70:18, 72:5,	35:11, 37:13	128:5, 130:2,	87:2, 87:7,
72:6, 91:3,	Y	133:16, 134:3,	87:15, 87:19,
91:4, 109:22,	yeah	134:6, 135:4,	88:1, 90:4,
110:1, 112:12,	7:15, 9:15,	135:10, 135:16,	91:9, 95:17,
112:13, 112:19,	9:17, 12:11,	135:22, 138:4,	98:21, 99:3,
114:15, 114:16,	15:11, 15:14,	138:6, 138:12,	119:12, 120:17,
117:19, 117:20,	19:22, 24:1,	138:15, 138:19,	129:9, 130:1
125:16, 125:17,	24:8, 24:19,	139:3, 139:10,	z)-form
136:20, 136:21,	26:4, 28:10,	139:17, 139:18,	129:4, 129:13,
144:20, 146:7,	28:14, 28:16,	139:20, 139:22,	140:15
146:11, 147:7	35:9, 35:10,	140:4, 140:11,	z)-isomer
WO	37:22, 38:22,	140:16, 140:19,	137:22
5:17, 5:18,	39:5, 39:9,	141:3, 141:10	zonalta
64:15, 92:4	46:20, 51:20,	z)	6:12, 28:19,
words	56:9, 61:14,	24:22, 55:11,	
52:9	67:7, 67:15,	73:21, 81:4,	29:5, 29:11, 38:8, 142:6
work	67:21, 76:6,	81:14, 90:9,	38:8, 142:0 ZOOM
22:7, 23:15,	76:7, 76:20,	126:14, 126:19,	11:20
24:5, 24:12,	80:13, 80:22,	127:6, 127:11,	
24:20, 55:18,	85:20, 89:17,	129:10, 133:18,	\$
56:6, 88:9			\$900
			11:5

1001 1123 138:6, 138:9				
	+	61:14, 65:18,	97:4, 97:6, 97:8	145:1, 145:2,
				•
1001 1223 138:16, 138:9 2006 138:15 1003 6:8 117 123:1 138:16, 138:9 2006 138:15 1003 6:8 2006 138:15 1003 6:8 2006 138:15 1003 6:8 2006 138:15 1003 6:8 2006 138:15 1003 1004 117, 2:7, 125:19, 126:11, 126:21, 134:1, 26:19, 126:11, 126:21, 134:1, 26:19, 126:11, 126:21, 134:1, 26:19, 126:11, 126:12, 134:1, 26:19, 126:11, 126:12, 134:1, 26:19, 126:11, 126:12, 134:1, 26:19, 126:11, 126:12, 134:1, 26:19, 126:12, 134:11, 26:19, 126:12, 134:11, 26:19, 126:12, 134:11, 26:19, 126:12, 134:11, 26:19, 126:12, 136:19, 27:11, 2				
	43:5			
2440 3.15 3.15 3.16 3.16 3.16 3.17 3.17 3.18 3.18 3.18 3.18 3.19 3.19 3.19 3.19 3.19 3.19 3.19 3.19				
3:15		5:13, 22:19,	3:14	2006
.4815 5:15, 47:9, 47:10, 47:13 1:17, 2:7, 125:8, 125:11, 126:21, 134:1, 50:7, 50:18, 51:1, 50:7, 134:21, 135:18, 136:10 .8000 1004 19:11, 50:7, 126:4, 126:9, 126:1, 126:21, 134:1, 57:6, 57:7, 134:21, 135:18, 136:6 0.5 64:21, 91:12, 57:11, 97:4, 138:15, 141:19 136:6 91:14, 95:13 97:6, 116:8, 2012 144:15, 144:16, 5:18, 91:12, 147:14 116:10, 146:19, 5:18, 92:4, 136:17, 137:19, 136:12, 136:12, 136:12, 136:12, 136:12, 136:12, 136:12, 136:12, 136:12, 136:12, 136:13, 136:17 125 1:11 5:19, 124:22, 5:19 142:5 002871 125:3, 136:12, 136:12, 136:13, 136:17 136 2:2, 58:4 136:13, 136:17 5:17, 64:15 050263 1008 14 2023 5:18, 92:4 6:3, 100:9, 50:18, 50:18, 1:11, 12:10, 12:10 5:11, 57:14, 23:22 070651 6:6, 109:9, 15 15:1, 57:14, 23:22 116:10, 117:3 100:10 88:15, 88:18 2024 16:110, 117:3, 1010 88:15, 88:18 2024 16:16:10, 117:3, 1011 16:10, 120:22, 50:18, 50:19, 51:13, 57:14 16:10, 120:22, 50:18, 50:19, 51:3, 118:8 116:10, 117:3, 1014 16:12, 27:14, 28:114, 98:7, 118:4 221 116:10, 117:3, 1014 16:12, 27:14, 28:14, 98:7, 118:4 221 116:10, 120:22, 22:11; 11:18 102 102 102 100:14, 11:13, 11:1		22:21	117	123:1
.4815 .8000 .8000 .1004 .3:7 .5:15, 47:9, .6:17, 64:7, .5:17, 64:7, .5:18, 91:12, .5:18, 91:12, .6:10, 144:15, 144:16, .6:10, 146:19, .6:11, .6:10, 17:3, .6:11, .6:10, 117:3, .6:10, 117:3, .6:10, 117:3, .6:10, 117:3, .6:10, 117:3, .6:10, 117:3, .6:10, 120:22, .6:11, 16:10, .6:11, 16:10, .6:11, 16:10, .6:11, 16:10, .6:11, 16:10, .6:11, 16:10, .6:11, 16:10, .6:11, 16:10, .6:11, 16:11, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:12, 7:14, .6:11, 16:10, .6:11, 16:10, .6:11, 16:10, .7:12, 16:10, .7:12, 16:12, .7:14, .7:12, 16:12, .7:14, .7:12, 16:12, .7:14, .7:12, 16:12, .7:14, .7:12, 16:12, .7:14, .7:12, 16:12, .7:14, .7:12, 16:12, .7:14, .	3:15	1003	6.8	2010
3120	.4815			
1000	3:20			
3:7 0 5:17, 64:7, 64:7, 50:18, 51:1, 126:21, 134:1, 126:21, 134:1, 136:65 0.5 136:6 0.5 136:6 0.7 144:15, 144:16, 5:18, 91:12, 97:6, 116:8, 2012 144:15, 144:16, 5:18, 91:12, 97:6, 116:18, 2012 144:15, 144:16, 5:18, 91:12, 97:6, 116:18, 2012 144:15, 144:16, 5:18, 91:12, 147:14 136:17, 137:19, 145:1, 145:2, 91:17, 91:18, 121 138:18, 139:11, 146:20 00043 1006 1106 125 141:7, 91:18, 92:1, 92:3, 92:8 6:10 139:14, 140:9, 140:9, 142:5 12:3 1007 1:11 5:19, 124:22, 5:19 1022 5:21, 136:12, 136:17 5:21, 136:17, 52:1 5:21, 136:17, 52:1 5:21, 136:17, 52:1 71:12 0200 5:18, 92:4 6:3, 100:9, 50:8, 50:18, 1:11, 12:10, 20:24 5:18, 92:4 6:3, 100:9, 50:8, 50:18, 1:11, 12:10, 20:24 10:10:10, 117:3 10:10 10:10, 117:3 10:10, 117:3, 10:10 11:11, 10:11 136:8 109 1011 136:8 109 1011 136:8 109 1011 136:8 109 1011 136:8 109 1011 136:8 109 1011 136:8 109 1011 136:8 109 1011 136:8 109 1011 136:8 1012 17 22 1012 17 22 1012 17 22 1014 136:13, 11:7, 14:14 18 18 18 18 18 19 19 10:10, 120:22, 50:8, 50:19, 5:13, 118:8 1000				
0 64:19, 64:12, 64:12, 57:6, 57:7, 134:21, 135:18, 64:21, 91:12, 91:14, 95:13 57:6, 57:7, 119:74, 138:15, 141:19 136:6 91:14, 95:13 97:6, 116:8, 2012 100 1005 116:10, 146:19, 136:17, 137:19, 118, 145:1, 145:2, 91:17, 91:18, 92:1, 92:3, 92:8 116:10, 146:19, 136:17, 137:19, 138:18, 139:11, 138:18, 139:11, 138:18, 139:11, 146:20 146:20 92:1, 92:3, 92:8 6:10 139:14, 140:9, 141:7, 141:17				
0.5 64:21, 91:12, 97:11, 97:4, 97:6, 116:8, 116:8, 116:10, 144:16, 91:14, 95:13 97:6, 116:8, 97:6, 116:8, 97:6, 116:10, 146:19, 97:6, 116:8, 97:6, 116:10, 146:19, 97:6, 116:10, 146:19, 97:6, 116:10, 146:19, 97:18, 97:14, 147:14 136:17, 137:19, 136:17, 137:19, 138:18, 139:11, 97:14, 97:14, 97:14, 138:18, 139:11, 97:14, 97:14, 97:11, 97:14, 97:1			50:18, 51:1,	
136:6	0	64:9, 64:12,	57:6, 57:7,	134:21, 135:18,
136:6	0.5	64:21, 91:12,	57:11, 97:4,	138:15, 141:19
1005 144:15, 144:16, 145:1, 145:2, 146:20 1006 1006 1121 1111 15:19, 124:22, 1007 15:23, 125:7 136:12, 136:12, 136:13, 136:17 1008 116:10, 146:19, 117:14 136:17, 137:19, 140:9, 141:7, 141:17				
144:15, 144:16, 5:18, 91:12, 147:14 136:17, 137:19, 145:1, 145:2, 91:17, 91:18, 121 138:18, 139:11, 1000 1006 125 141:7, 141:17, 1:11 5:19, 124:22, 13 2017 2:3 1007 5:8, 35:5, 35:9 5:17, 64:15 02 5:21, 136:12, 136 2020 5:18, 92:4 136:13, 136:17 5:12 71:12 050263 100:11, 100:17 51:1, 57:14, 23:22 116:10, 117:3 100 8:15, 88:18 2024 070651 6:6, 109:9, 15 1:17, 2:8, 5:17, 64:15 109:10, 109:13, 49:14 146:19, 147:9 084 109:10, 109:13, 15:1 206.839 116:8, 116:10 17:12, 117:16 206.839 116:8, 116:10 17:12, 117:16 125:20, 147:8 26:21 1 144:13, 144:15 16 21 10 117:12, 117:16 125:20, 147:8 26:21 10 117:12, 117:16 125:20, 147:8 26:21 10 117:12, 117:16 125:20, 147:8 26:21 10:10 117:12, 117:16 125:20, 147:8 26:21 10:10 117:12, 117:16 125:20, 147:8<				
145:1, 145:2, 146:20 91:17, 91:18, 92:1, 92:3, 92:8 6:10 139:14, 140:9, 141:7, 141:17, 125:5 00043 1006 125 141:7, 141:17, 141:17, 142:5 1:11 5:19, 124:22, 5:19 142:5 002871 125:3, 125:7 13 2017 2:3 1007 5:8, 35:5, 35:9 5:17, 64:15 050263 1008 14 2023 5:18, 92:4 136:13, 136:17 5:21 71:12 050263 1008 14 2023 5:18, 92:4 6:3, 100:9, 50:8, 50:18, 1:11, 12:10, 23:22 11:11, 10:10 106 100:11, 100:17 51:1, 57:14, 23:22 23:22 116:10, 117:3 6:6, 109:9, 109:13, 49:14 146:19, 147:9 146:19, 147:9 084 109:20, 110:4 136:8 3:20 084 109:20, 110:4 136:8 3:20 16:8, 117:10, 116:8, 116:10 166 21 116:10, 117:3, 144:15 10:2 70:8, 50:19, 5:13, 118:8 14:10, 117:3, 144:15 10:2 70:8, 50:19, 5:13, 118:8 16:10, 120:22, 5:14, 21:16 51:1, 57:14 23 16:10, 117:3, 144:15 10:2 50:8, 50:19, 5:13, 118:8 16:10, 120:22, 5:14, 28:14, 58:6 24 10:10 28:7, 28:14, 98:7, 118:4				
146:20 92:1, 92:3, 92:8 6:10 139:14, 140:9, 141:17, 141:17, 141:17, 121:10, 125:3, 125:7 1002871 125:3, 125:7 13 142:5 2:3 1007 5:8, 35:5, 35:9 5:17, 64:15 58:2, 58:4 136:13, 136:17 136 2020 58:18, 92:4 6:3, 100:9, 100:11, 100:17 51:1, 57:14, 23:22 2024 116:10, 117:3 1010 88:15, 88:18 1:11, 12:10, 20:22 070651 6:6, 109:9, 100:10, 109:13, 109:20, 110:4 15:1 206.839 2:3 1011 136:8 3:20 084 109:20, 110:4 15:1 206.839 2:3 1011 136:8 3:20 084 109:20, 110:4 15:1 206.839 2:3 1011 136:8 3:20 0:8, 117:10, 116:8, 116:10 117:12, 117:16 125:20, 147:8 26:21 1 116:10, 117:3, 144:15 16 21 16:10, 120:22, 20:21 50:8, 50:19, 5:13, 118:8 18:1, 57:14 18 78:5, 79:8, 98:7, 118:4 100 18:6; 58:2, 52:19, 38:8 76:21, 98:4, 98:7, 118:4 100 3:13, 6:3, 6:19, 5:11:18 19 71:22, 90:20 1:10, 11:13, 11:10, 11:18, 11:15, 11:18 190 71:22, 90:20				
00043 1006 125 141:7, 141:17, 142:17, 142:5 002871 125:3, 125:7 13 2017 2:3 1007 5:8, 35:5, 35:9 5:17, 64:15 02 5:21, 136:12, 136:17 136 2020 050263 1008 14 2023 5:18, 92:4 6:3, 100:9, 100:17 50:8, 50:18, 1:11, 12:10, 2023 06 100:11, 100:17 51:1, 57:14, 23:22 070651 6:6, 109:9, 15 15 1:17, 2:8, 147:9 084 109:20, 110:4 136:8 3:20 2:3 09 6:8, 117:10, 16 136:8 3:20 16:8, 116:10 117:12, 117:16 125:20, 147:8 26:21 101 101:10, 120:22, 50:8, 50:19, 50:13, 118:8 26:21 101 101:10, 120:22, 50:8, 50:19, 50:13, 118:8 26:21 101 101:10, 120:22, 50:8, 50:19, 50:13, 118:8 26:21 102 103:13, 6:3, 6:12, 72:14, 76:22, 72:14, 76:21, 98:4, 98:7, 118:4 78:5, 79:8, 98:7, 118:4 100 100 1020 98:6, 147:14 25 100 11:10, 11:13, 11:18, 11:18 190 71:22, 90:20 11:15, 11:18 190 71:22, 90:20 10:19, 70:19 71:21, 85:18, 140:19 71:22, 76:22 28:19, 38:8				
1:11 002871 2:3 1007 5:19, 124:22, 125:3, 125:7 1007 5:8, 35:5, 35:9 5:17, 64:15 050263 1008 14 2023 1:11, 100:17 16:10, 117:3 070651 6:6, 109:9, 109:10, 109:13, 109:20, 110:4 12:3 09 116:8, 116:10 1 1 116:10, 117:3, 144:13, 144:15 101 118:6, 58:2, 58:4, 58:6 100 3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 109 100 3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 100 100 3:13, 6:3, 60:6, 60:22, 61:7, 61:11, 100 3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 6:13, 22:5, 2017 5:19 136:20 136 2000 5:17, 64:15 00 116:10, 109:1 14 2023 1:11, 12:10, 100:11 100:17 51:1, 57:14, 23:22 2024 1:11, 12:10, 109:10, 109:13, 136:8 120 206.839 3:20 206.839 3:20 206.839 3:20 206.839 3:20 206.839 3:20 206.839 3:20 206.839 3:20 207 21 21 22 21 21 21 22 22 23 35:13, 118:8 25 38:5, 79:8, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 29:0:22 21 21 21 21 22 28 35:6, 35:8,	146:20			
002871 125:3, 125:7 13 2017 2:3 1007 5:8, 35:5, 35:9 5:17, 64:15 05 5:21, 136:12, 136:17 136 2020 58:2, 58:4 136:13, 136:17 14 2023 5:18, 92:4 6:3, 100:9, 100:17 51:1, 57:14, 23:22 23:22 116:10, 117:3 1010 88:15, 88:18 2024 070651 6:6, 109:9, 109:13, 109:10, 109:13, 109:20, 110:4 15.1 206.839 2:3 1011 136:8 3:20 084 109:20, 110:4 15.1 206.839 2:3 1011 136:8 3:20 09 6:8, 117:10, 116:18 125:20, 147:8 26:21 116:10, 117:3, 117:16 117:12, 117:16 125:20, 147:8 26:21 116:10, 117:3, 144:15 1012 17 22 18:16:10, 120:22, 121:6 51:1, 57:14 23 116:10, 127:3, 121:6 1014 18 78:5, 79:8, 98:7, 118:4 116:10, 117:3, 144:15 1014 18 78:5, 79:8, 98:7, 118:4 116:10, 120:22, 2, 23 28:15, 37:7, 24 24 118:6, 58:2, 2, 28:19, 38:8 76:21, 98:4, 98:4, 147:14 25 100 6:13, 11:7, 11:18 19 71:22, 90:20 11:10, 11:13, 1	00043	1006	125	141:7, 141:17,
002871 125:3, 125:7 136 2017 02 5:21, 136:12, 136:17 136 2020 58:2, 58:4 136:13, 136:17 14 2023 5:18, 92:4 6:3, 100:9, 100:11, 100:17 51:1, 57:14, 23:22 232 16:10, 117:3 1010 88:15, 88:18 2024 070651 6:6, 109:9, 109:13, 109:10, 109:13, 109:20, 110:4 15.1 206.839 2:3 1011 136:8 3:20 084 109:20, 110:4 15.1 206.839 2:3 1011 136:8 3:20 09 6:8, 117:10, 117:12 16 21 116:18, 116:10 101 125:20, 147:8 26:21 101 17:12, 117:16 125:20, 147:8 26:21 102 17 22 6:10, 120:22, 121:6 51:1, 57:14 23 116:10, 117:3, 144:15 1014 18 78:5, 79:8, 98:7, 98:8, 98:7, 98:7, 98:8, 98:7, 118:4 18:6, 58:2, 28:19, 38:8 51:1, 57:14 23 58:4, 58:6 100 102 103 18 78:5, 79:8, 98:7, 118:4 100 102 98:6, 147:14 25 103:13, 6:3, 60:5, 60:22, 61:7, 61:11, 70:11:13, 11:15, 11:18 19 71:22, 90:20 105:6 109	1:11	5:19, 124:22,	5:19	142:5
2:3 1007 5:21, 136:12, 136:12, 136:13, 136:17 5:21 71:12 050263 1008 14 2023 5:18, 92:4 6:3, 100:9, 100:11, 100:17 50:8, 50:18, 1:11, 12:10, 23:22 116:10, 117:3 1010 88:15, 88:18 2024 070651 6:6, 109:9, 5:17, 64:15 109:10, 109:13, 149:14 117, 2:8, 146:19, 147:9 084 109:20, 110:4 136:8 3:20 16:8, 116:10 117:12, 117:16 16 21 116:10, 117:3, 146:13, 144:15 1014 125:20, 147:8 26:21 1014 1014 23 22 6:10, 120:22, 121:6 51:1, 57:14 23 116:10, 117:3, 144:15 1014 18 78:5, 79:8, 98:7, 118:8 100 28:7, 28:14, 98:7, 28:14, 98:7, 118:4 28:7, 28:14, 98:7, 118:4 100 28:6, 38:8 76:21, 98:4, 98:7, 118:4 100 11:10, 11:13, 11:15, 11:18 190 71:22, 90:20 71:21, 85:18, 40:8 28 76:12, 76:22 116:10, 12:25, 6:25 28 35:6, 35:8,	002871	125:3, 125:7	13	2017
02 5:21, 136:12, 136:17 136 2020 58:2, 58:4 136:13, 136:17 71:12 050263 1008 14 2023 5:18, 92:4 6:3, 100:9, 100:11, 100:17 50:8, 50:18, 1:11, 12:10, 23:22 116:10, 117:3 1010 88:15, 88:18 2024 070651 6:6, 109:9, 5:17, 64:15 109:10, 109:13, 149:14 146:19, 147:9 084 109:10, 109:13, 109:20, 110:4 15.1 206.839 2:3 1011 136:8 3:20 09 6:8, 117:10, 117:16 125:20, 147:8 26:21 116:10, 117:3, 116:10 117:12, 117:16 125:20, 147:8 26:21 1012 1014 18 78:5, 79:8, 98:14, 98:7, 118:8 104 6:12, 27:14, 27:12, 21:6 18 78:5, 79:8, 98:7, 118:4 10 18:6, 58:2, 28:14, 38:8 78:5, 79:8, 98:7, 118:4 58:4, 58:6 100 28:13, 31:7, 76:21, 98:4, 98:4, 98:7, 118:4 1000 98:6, 147:14 25 60:5, 60:22, 61:7, 61:11, 109 71:22, 90:20 61:6 100 71:21, 85:18, 66:12, 76:22 10 27 61:7, 61:11, 61:13, 22:5, 66:25, 66:25, 66:25, 66:25, 66:25, 66:25, 66:25, 66:25, 66:27, 76:22 28 10 10 10 10		•	_	5:17. 64:15
58:2, 58:4 136:13, 136:17 5:21 71:12 050263 1008 14 2023 5:18, 92:4 6:3, 100:9, 100:17 50:8, 50:18, 20:18, 23:22 1:11, 12:10, 23:22 116:10, 117:3 1010 88:15, 88:18 2024 070651 6:6, 109:9, 109:13, 109:10, 109:13, 109:20, 110:4 15.1 206.839 5:21 20:24 14:17, 2:8, 14:19 1084 109:10, 109:13, 109:20, 110:4 15.1 206.839 2:3 6:8, 117:10, 16:8 3:20 109 6:8, 117:10, 16:8 21 116:18, 116:10 117:12, 117:16 125:20, 147:8 26:21 1012 17 22 6:10, 120:22, 50:8, 50:19, 51:1, 57:14 23 121:2, 121:6 1014 18 78:5, 79:8, 98:7, 118:8 1014 6:12, 27:14, 28:15, 37:7, 28:19, 27:22, 28:19, 38:8 28:7, 28:14, 98:4, 98:7, 118:4 100 6:13, 11:7, 11:10, 11:13, 11:10, 11:13, 11:10, 11:13, 11:10, 11:13, 11:15, 11:18 19 71:22, 90:20 61:7, 61:11, 61:11, 61:11, 51:11 109 71:21, 85:18, 61:12, 76:22 2 2 28 35:6, 35:8, 35:8, 35:6, 35:8, 35:8, 35:6, 35:8, 35:8				
050263 1008 14 2023 5:18, 92:4 6:3, 100:9, 100:17 50:8, 50:18, 1:11, 12:10, 23:22 116:10, 117:3 1010 88:15, 88:18 2024 070651 6:6, 109:9, 5:17, 64:15 109:10, 109:13, 49:14 146:19, 147:9 084 109:20, 110:4 15.1 206.839 2:3 1011 136:8 3:20 09 6:8, 117:10, 16:8, 117:12, 117:16 125:20, 147:8 26:21 1012 1012 17 22 6:10, 120:22, 121:6 50:8, 50:19, 5:13, 118:8 23 116:10, 117:3, 144:15 1014 18 78:5, 79:8, 98:7, 118:4 100 27:19, 27:24, 28:14, 28:15, 37:7, 28:14, 27:19, 27:22, 28:19, 38:8 28:7, 28:14, 28:15, 37:7, 28:14, 24 24 100 3:13, 6:3, 11:7, 11:10, 11:13, 11:10, 11:13, 11:10, 11:13, 11:10, 11:13, 11:15, 11:18 19 71:22, 90:20 6:17, 61:11, 109 6:6 140:8 27 6:10, 120:25, 2, 11:18 100 90:22 11:10, 11:13, 11:18, 11:18 19 71:22, 90:20 11:15, 11:18 19 71:22, 90:20 11:15, 11:18 19 71:22, 90:20 11:15, 11:18 19 6:12, 76:22 11 6:13, 22:5, 22 28 28 3				
5:18, 92:4 6:3, 100:9, 100:11, 100:17 50:8, 50:18, 23:22 116:10, 117:3 1010 88:15, 88:18 2024 076651 6:6, 109:9, 109:10, 109:13, 109:20, 110:4 15.1 146:19, 147:9 084 109:20, 110:4 15.1 206.839 2:3 1011 136:8 3:20 09 6:8, 117:10, 117:12, 117:16 125:20, 147:8 26:21 1012 1012 22 6:10, 120:22, 121:6 101 50:8, 50:19, 50:19, 51:1, 57:14 23 144:13, 144:15 1014 18 78:5, 79:8,	1			
06 116:10, 117:3 1010 51:1, 57:14, 88:18 2024 070651 6:6, 109:9, 109:13, 109:13, 109:20, 110:4 15.1 146:19, 147:9 084 1011 136:8 3:20 09 6:8, 117:10, 16 21 16:8, 116:10 17:12, 117:16 125:20, 147:8 26:21 1012 17 22 6:10, 120:22, 121:6 51:1, 57:14 23:20 1012 17 22 6:10, 120:22, 121:6 50:8, 50:19, 51:1, 57:14 23 104 18 78:5, 79:8, 98:7, 118:8 105:2, 27:14, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 118:4 24 27:19, 27:22, 28:19, 38:8 76:21, 98:4, 98:7, 118:4 100 98:6, 147:14 25 3:13, 6:3, 60:22, 61:7, 61:11, 6:6 190 71:22, 90:20 6:6 109 71:21, 85:18, 6:12, 76:22 11 6:6 140:8 27 6:13, 22:5, 2 2 28				
116:10, 117:3 1010 88:15, 88:18 2024 070651 6:6, 109:9, 109:13, 109:14 15 1:17, 2:8, 146:19, 147:9 084 109:20, 110:4 15.1 206.839 2:3 1011 136:8 3:20 09 6:8, 117:10, 16 21 117:12, 117:16 125:20, 147:8 26:21 1012 17 22 6:10, 120:22, 121:6 50:8, 50:19, 121:2, 121:6 51:1, 57:14 10 18 78:5, 79:8, 18 1014 18 78:5, 79:8, 98:7, 118:4 6:12, 27:14, 27:19, 27:22, 28:15, 37:7, 28:19, 38:8 24 100 100 98:6, 147:14 25 102 6:13, 11:7, 19 71:22, 90:20 6:13, 11:7, 11:18, 11:18, 11:18, 109 190 71:22, 90:20 6:6 109 71:21, 85:18, 6:12, 76:22 28 27 6:12, 76:22 28 28:6, 35:8,	5:18 , 92:4			
070651 6:6, 109:9, 109:13, 109:20, 110:4 15.1 146:19, 147:9 084 109:20, 110:4 15.1 206.839 2:3 1011 136:8 3:20 116:8, 116:10 117:12, 117:16 125:20, 147:8 26:21 1 1012 17 22 6:10, 120:22, 121:6 50:8, 50:19, 51:1, 57:14 51:1, 57:14 23 144:13, 144:15 1014 18 78:5, 79:8, 98:7, 118:4 10 28:7, 28:14, 27:14, 28:19, 38:8 28:7, 28:14, 28:15, 37:7, 76:21, 98:4, 147:14 25 58:4, 58:6 1020 98:6, 147:14 25 60:5, 60:22, 61:7, 61:11, 61:11, 61:13, 11:18, 109 190 71:22, 90:20 71:21, 85:18, 66:12, 76:22 28 10 27 6:12, 76:22 28 35:6, 35:8,	06	100:11, 100:17	51:1, 57:14,	23:22
070651 6:6, 109:9, 109:13, 109:14 15 1:17, 2:8, 146:19, 147:9 084 109:20, 110:4 15.1 206.839 1011 136:8 3:20 16:8, 116:10 117:12, 117:16 125:20, 147:8 26:21 1012 17 22 6:10, 120:22, 121:6 50:8, 50:19, 121:2, 121:6 51:1, 57:14 23 144:13, 144:15 1014 18 78:5, 79:8, 18 100 28:7, 28:14, 28:14, 27:19, 27:22, 28:15, 37:7, 24 28:19, 38:8 1020 98:6, 147:14 25 100 3:13, 6:3, 60:3, 60:22, 61:7, 61:11, 61:15, 11:18 109 71:22, 90:20 71:22, 90:20 6:6 109 71:21, 85:18, 61:2, 76:22 28 11 6:13, 22:5, 20 140:8 27 6:12, 76:22 28 35:6, 35:8, 35:8, 35:6	116:10, 117:3	1010	88:15, 88:18	2024
5:17, 64:15 109:10, 109:13, 109:14 49:14 146:19, 147:9 084 109:20, 110:4 15.1 206.839 1:6:8, 116:10 16 21 116:8, 116:10 1012 16 21 116:10, 117:3, 144:15 1014 18 78:5, 79:8, 118:8 1014 18 78:5, 79:8, 98:7, 118:4 100 28:19, 38:8 76:21, 98:4, 98:7, 118:4 100 25:13, 118:8 26:12, 98:4, 98:7, 118:4 100 100 102 103:13, 6:3, 60:5, 60:22, 61:7, 61:11, 61:15, 11:18 190 71:22, 90:20 101:10, 120:22, 121:6 1014 18 78:5, 79:8, 98:7, 118:4 100 18 76:21, 98:4, 98:7, 118:4 100 102 147:14 147:14 100 102 103:13, 11:7, 11:18 190 71:22, 90:20 100 109 71:21, 85:18, 14 140:8 27 100 <t< th=""><th></th><th>6:6, 109:9,</th><th></th><th>1:17, 2:8,</th></t<>		6:6, 109:9,		1:17, 2:8,
084 109:20, 110:4 136:8 3:20 09 6:8, 117:10, 16 21 116:8, 116:10 1012 125:20, 147:8 26:21 1 1012 17 22 6:10, 120:22, 121:6 50:8, 50:19, 51:1, 57:14 23 1014 18 78:5, 79:8, 98:7, 118:4 1015 200 200 18:6, 58:2, 58:4, 58:6 200 200 100 200 200 3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 61:11, 61:13, 11:18, 11:15, 11:18 190 100 71:21, 85:18, 12:1, 85:18, 140:8 100 71:21, 85:18, 140:8 100 71:21, 85:18, 140:8 20 21 20 21 20 21 21:21, 117:16 100 21:22, 121:6 101 22:10 11 23:13, 118:8 118:14 23:14 118:18 24 117:11 25 11:11 26:12, 12 11:11 27 11:11 28:13, 30:14 11:11		· · · · · · · · · · · · · · · · · · ·		The state of the s
2:3 1011 136:8 3:20 116:8, 116:10 117:12, 117:16 125:20, 147:8 26:21 1 1012 17 22 6:10, 120:22, 121:6 50:8, 50:19, 51:1, 57:14 23 104 18 78:5, 79:8, 79:	1			
09 6:8, 117:10, 117:12, 117:16 16:21 21 116:8, 116:10 1012 125:20, 147:8 26:21 1 1012 50:8, 50:19, 121:2, 121:6 51:1, 57:14 23 116:10, 117:3, 144:15 1014 18 78:5, 79:8, 18:5, 79:8,				
116:8, 116:10 117:12, 117:16 125:20, 147:8 26:21 1 1012 17 22 6:10, 120:22, 121:6 50:8, 50:19, 51:1, 57:14 23 116:10, 117:3, 144:15 1014 18 78:5, 79:8, 98:7, 118:4 10 28:7, 28:14, 27:19, 27:22, 28:19, 38:8 28:7, 28:14, 28:15, 37:7, 24 100 28:19, 38:8 76:21, 98:4, 147:14 25 100 3:13, 6:3, 60:22, 61:7, 61:11, 10. 11:13, 11:18 190 71:22, 90:20 11:15, 11:18 109 71:22, 90:20 109 71:21, 85:18, 140:8 27 109 71:21, 85:18, 140:8 27 109 71:21, 85:18, 140:8 27 109 71:21, 85:18, 140:8 27 109 71:21, 85:18, 140:8 27 11 20 21 12 28 28:4, 58:6 28:4, 58:6 190 71:22, 90:20 21:21, 85:18, 140:8 140:8 27 28 28 140:8 28:13, 35:6, 35:8,				
1012 17 1 6:10, 120:22, 121:6 50:8, 50:19, 51:1, 57:14 51:1, 57:14 1014 18 78:5, 79:8, 79:8, 78:5, 79:8, 78:5, 79:8, 78:5, 79:8, 78:4, 78:5, 79:8, 78:5, 78	09	-		
1	116:8, 116:10	-		
116:10, 117:3, 1014 10 118:6, 58:2, 58:4, 58:6 100 3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 61:11, 61:7, 61:11, 61:13, 22:5, 121:6 116:10, 117:3, 121:6 1014 6:12, 27:14, 28:7, 28:14, 28:7, 28:14, 28:15, 37:7, 76:21, 98:4, 98:6, 147:14 28:7, 28:19, 38:8 1020 6:13, 11:7, 11:18 190 71:21, 85:18, 61:12, 76:22 28 35:6, 35:8,	1		17	
116:10, 117:3, 1014 10 118:6, 58:2, 58:4, 58:6 100 3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 61:11, 61:7, 61:11, 61:13, 22:5, 121:6 116:10, 117:3, 121:6 1014 6:12, 27:14, 28:7, 28:14, 28:7, 28:14, 28:15, 37:7, 76:21, 98:4, 98:6, 147:14 28:7, 28:19, 38:8 1020 6:13, 11:7, 11:18 190 71:21, 85:18, 61:12, 76:22 28 35:6, 35:8,	1	6:10, 120:22,	50:8, 50:19,	5:13 , 118:8
116:10, 117:3, 144:15 1014 6:12, 27:14, 28:14, 28:15, 37:7, 76:21, 98:4, 58:6 78:5, 79:8, 98:7, 118:4 100 27:19, 27:22, 28:19, 38:8 28:15, 37:7, 76:21, 98:4, 98:6, 147:14 147:14 100 6:13, 11:7, 11:10, 11:13, 11:15, 11:18 19 71:22, 90:20 100 58:4, 58:6 190 90:22 109 71:21, 85:18, 140:8 90:22 109 71:21, 85:18, 140:8 6:12, 76:22 11 6:13, 22:5, 2		121:2, 121:6	51:1, 57:14	
144:13, 144:15 10 18:6, 58:2, 58:4, 58:6 100 6:13, 11:7, 11:10, 11:13, 61:7, 61:11, 6:13, 22:5, 6:14, 27:14, 28:7, 28:14, 28:15, 37:7, 76:21, 98:4, 98:7, 118:4 24 147:14 25 71:22, 90:20 71:21, 85:18, 140:8 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 28:14, 28:7, 118:4 24 147:14 25 71:22, 90:20 71:21, 85:18, 140:8 27 6:12, 76:22 28 35:6, 35:8,		1014		78:5, 79:8,
10 18:6, 58:2, 58:4, 58:6 100 3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 27:19, 27:22, 28:15, 37:7, 76:21, 98:4, 98:6, 147:14 19 58:4, 58:6 190 71:21, 85:18, 109 6:6 11 6:13, 22:5,	II and the second secon	6:12, 27:14,	_ ·	
18:6, 58:2, 58:4, 58:6 100 3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 109 6:6 11 6:13, 12:7, 11:10, 11:13, 11:15, 11:18 109 6:6 11 6:13, 22:5, 76:21, 98:4, 98:6, 147:14 25 71:22, 90:20 26 90:22 27 6:12, 76:22 28 35:6, 35:8,	10			
100 3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 1020 6:13, 11:7, 11:10, 11:13, 11:15, 11:18 109 6:6 11 6:13, 22:5, 98:6, 147:14 19 58:4, 58:6 190 71:21, 85:18, 140:8 2 28 35:6, 35:8,	18:6, 58:2,			
100 3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 6:13, 11:7, 11:10, 11:13, 11:15, 11:18 109 6:6 11 6:13, 22:5, 190 71:22, 90:20 26 90:22 27 6:12, 76:22 28 35:6, 35:8,	58:4, 58:6			
3:13, 6:3, 60:5, 60:22, 61:7, 61:11, 11:10, 11:13, 11:15, 11:18 109 6:6 11 6:13, 22:5, 190 71:21, 85:18, 140:8 206 90:22 27 6:12, 76:22 28 35:6, 35:8,	100		•	
60:5, 60:22, 61:7, 61:11, 11:10, 11:13, 11:15, 11:18 190 71:21, 85:18, 140:8 2 2 11:15, 11:18 190 71:21, 85:18, 228 35:6, 35:8,			19	
11:15, 11:18 109 6:6 11 6:13, 22:5, 190 71:21, 85:18, 140:8 2 2 2 35:6, 35:8,			58:4, 58:6	26
109 6:6 11 6:13, 22:5, 71:21, 85:18, 140:8 2 2 2 2 35:6, 35:8,		11:15, 11:18	190	90:22
6:6 11 6:13, 22:5, 2 2 2 35:6, 35:8,	01:/, 01:11,	109		
11 6:13, 22:5, 2 2 2 35:6, 35:8,		6 : 6		
6:13, 22:5, 2 2 35:6, 35:8,				-
144:15, 144:16,		····/ 22·J/	2	აა:ზ, აა:ზ,
			144:15, 144:16,	

	Conducted on A	.p. 12, 202 .	12
35:9	61:14, 72:18,	80	
29	122:3, 138:4,		
	138:9	50:14, 50:21,	
35:6, 35:9, 76:22	500	51:4, 51:19, 51:22, 52:13,	
	2:5, 3:5,	53:1, 55:3,	
3	2:5, 3:5, 146:18	56:1, 57:10,	
31	51	60:1, 60:2,	
88:15, 88:17,	122:3	60:1, 60:2,	
88:18, 88:20,	122:3 52	61:7, 61:13,	
89:3, 89:4,	144:13, 144:15	61:20, 66:8,	
102:22	144:13, 144:15 529945	74:19, 74:20,	
312.775		75:1, 86:4,	
3:7	1:22 56	86:8, 86:12,	
32		87:14, 87:19,	
115:15	1:18, 2:7,	88:3, 138:6,	
3203	90:22, 91:1,	138:9	
3:13	115:15, 146:19	801	
33	6	136:8	
49:17, 49:19	60	9	
334	61:18		
23:8, 23:11,	60661	9,333,190	
25:8, 31:22,	3:6	5:16, 47:17	
48:14, 63:9,	61	90	
63:18, 66:10,	89:14	50:7, 50:15,	
66:11, 66:14,	64	50:17, 50:22,	
93:3, 94:6,	5:17	51:5, 55:19,	
96:10, 96:19,	650.833	56:7, 56:17,	
97:19, 98:3,	3:15	56:20, 57:2,	
98:17, 98:20	69	57:16, 60:10,	
34	5:10	60:18, 61:14,	
3 : 5	6900	75:11, 75:14,	
36	3:18	75:21, 76:2,	
97:6, 97:8	7	76:9, 85:17,	
3d	701	85:21, 85:22,	
15:17	3:18	86:15, 86:19,	
4	7029	87:2, 87:6,	
4-hydroxy-n-des	3:19	87:22, 90:3,	
methyl	71	119:12, 140:19,	
37:11, 37:14,	102:22	140:22, 141:2 91	
37:20, 38:2,	75		
39:1, 39:13,	61:18	5:18	
39:17		94304	
47	8	3:14	
5 : 15	8	95	
5	1:18, 2:7,	51:6	
	146:19	98104	
50	8-milligrams	3:19	
61:9, 61:11,	137:17		