Table of Contents

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM 8-K

CURRENT REPORT

Pursuant to Section 13 or 15(d) of the Securities and Exchange Act of 1934

Date of Report (Date of earliest event reported): January 9, 2009

REGENERON PHARMACEUTICALS, INC.

(Exact name of registrant as specified in its charter)

New York	**000-19034**	**13-3444607**
(State or other jurisdiction of incorporation)	(Commission File Number)	**(I.R.S. Employer Identification Number)**

777 Old Saw Mill River Road, Tarrytown, New York	**10591-6707**
(Address of principal executive offices)	**(Zip Code)**

(914) 347-7000
(Registrant's telephone number, including area code)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of registrant under any of the following provisions:

o Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

o Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

o Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

o Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

TABLE OF CONTENTS

Item 7.01 Regulation FD Disclosure

Attached as Exhibit 99(a) are slides that Regeneron Pharmaceuticals, Inc. intends to use in conjunction with meetings with investors at the J.P. Morgan 27th Annual Healthcare Conference in San Francisco on January 12-15, 2009.

Item 9.01 Financial Statements and Exhibits

(c) Exhibits

99(a) Slides that Regeneron Pharmaceuticals, Inc. intends to use in conjunction with meetings with investors at the J.P. Morgan 27th Annual Healthcare Conference in San Francisco on January 12-15, 2009.

Pursuant to the requirements of the Securities and Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

REGENERON PHARMACEUTICALS, INC.

Dated: January 9, 2009

By: /s/ Stuart Kolinski
Stuart Kolinski
Senior Vice President and General Counsel

Exhibit Index

Number	Description
99(a)	Slides that Regeneron Pharmaceuticals, Inc. intends to use in conjunction with meetings with investors at the J.P. Morgan 27th Annual Healthcare Conference in San Francisco on January 12-15, 2009.


REGENERON
27th Annual J. P. Morgan
Healthcare Conference
January 2009

Safe Harbor Statement

Except for historical information, the matters contained in this presentation may constitute forward-looking statements that involve risks and uncertainties, including uncertainties related to product development and clinical trials, unforeseen safety issues resulting from the administration of products in patients, uncertainties related to the need for regulatory and other government approvals, risks related to third party patents and proprietary technology, the need for additional capital, uncertainty of market acceptance of Regeneron's product candidates, the receipt of future payments, the continuation of business partnerships, and additional risks detailed from time to time in Regeneron's filings with the Securities and Exchange Commission (SEC). Please refer to Regeneron's recent Forms 10-K, 10-Q, and 8-K for additional information on the uncertainties and risk factors related to our business.

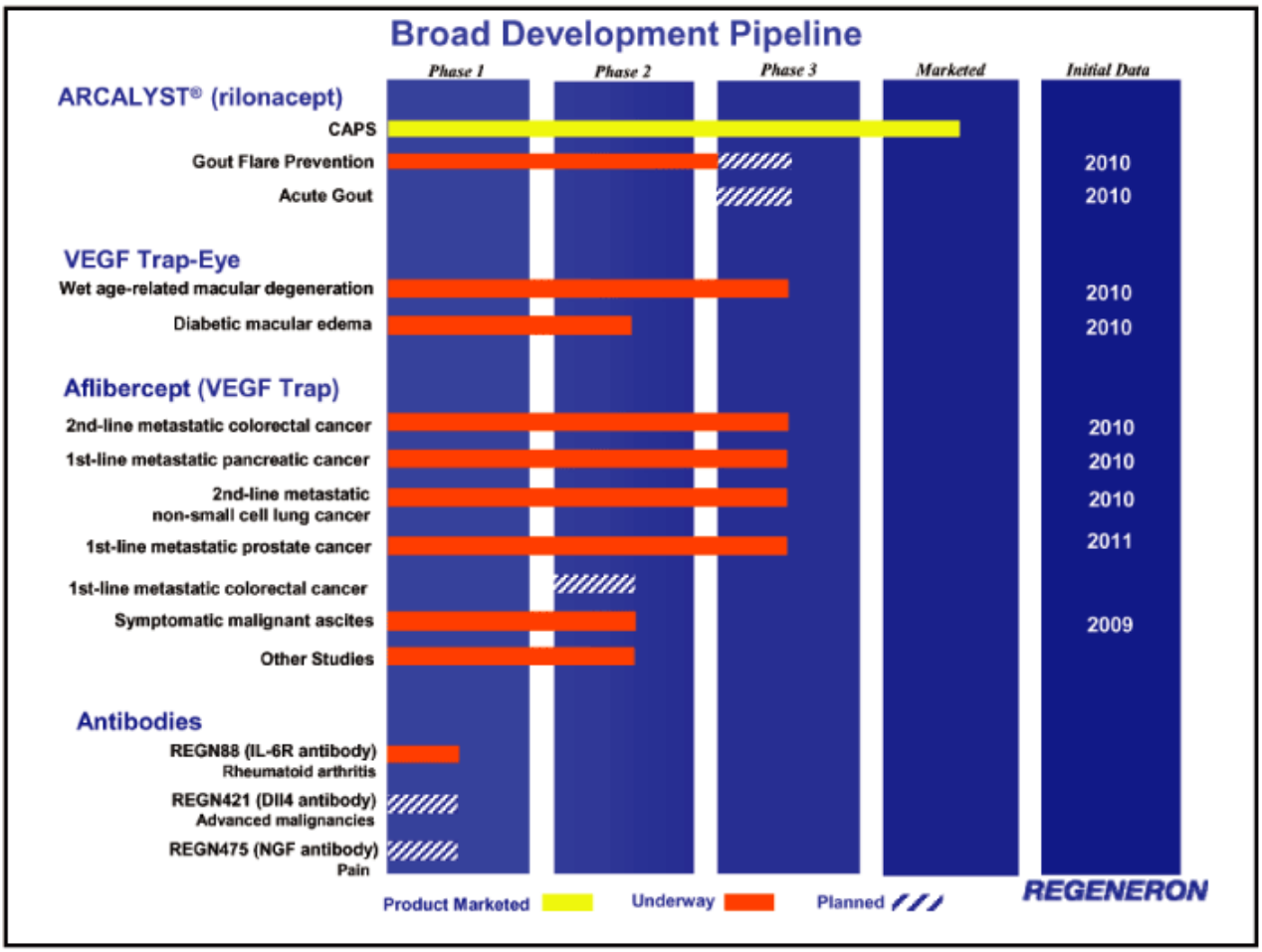
Because forward-looking statements involve risks and uncertainties, actual results may differ materially from current results expected by Regeneron. Regeneron is providing this information as of the original date of this presentation and expressly disclaims any duty to update any information contained in these materials.

REGENERON

Regeneron Overview

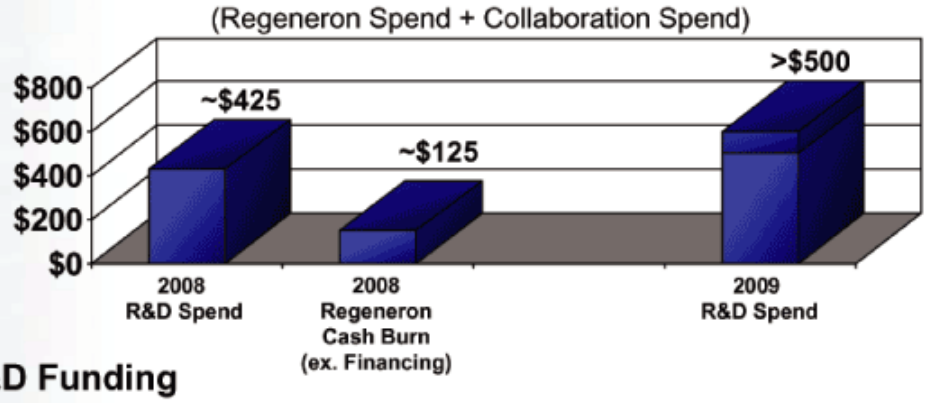
- **ARCALYST® (rilonacept) marketed for treatment of orphan auto-inflammatory disease (CAPS)**
- **Broad Development Pipeline – 9 Phase 3 trials by mid-2009**
  - **Oncology** – Symptomatic malignant ascites data in mid-2009; 4 Phase 3 programs enrolling patients
  - **Eye Disease** – Phase 3 program in wet AMD planned to complete enrollment this year; Phase 2 program in DME initiated
  - **Inflammatory Disease** – Phase 3 program in gout to begin 1Q09
- ***VelocImmune®* Antibody Platform**
  - One Phase 1 trial in rheumatoid arthritis plus 2 INDs filed December 2008
  - Target 2-3 new antibody INDs per year
- **Strong Financial Position**
  - 2008 year-end cash and securities of ~$528MM; no debt
  - Significant funding from collaborations with sanofi-aventis and Bayer HealthCare

REGENERON


Broad Development Pipeline
Phase 1
Phase 2
Phase 3
Marketed
Initial Data
ARCALYST® (rilonacept)
CAPS
Gout Flare Prevention
2010
Acute Gout
2010
VEGF Trap-Eye
Wet age-related macular degeneration
2010
Diabetic macular edema
2010
Aflibercept (VEGF Trap)
2nd-line metastatic colorectal cancer
2010
1st-line metastatic pancreatic cancer
2010
2nd-line metastatic non-small cell lung cancer
2010
1st-line metastatic prostate cancer
2011
1st-line metastatic colorectal cancer
Symptomatic malignant ascites
2009
Other Studies
Antibodies
REGN88 (IL-6R antibody)
Rheumatoid arthritis
REGN421 (Dll4 antibody)
Advanced malignancies
REGN475 (NGF antibody)
Pain
Product Marketed
Underway
Planned
REGENERON

R&D Investment Leverage

Total Estimated R&D Spend on Regeneron Programs ($MM)



- **R&D Funding**
  - Aflibercept: 100% funded by sanofi-aventis*
  - Antibody Discovery: $75MM in 2008 and $100MM/year in 2009-12 funded by sanofi-aventis
  - Antibody Development: 100% funded by sanofi-aventis*
  - VEGF Trap-Eye: 50% funded by Bayer HealthCare*

* 50% repayment from profits

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REGENERON
ARCALYST® (rilonacept)

ARCALYST® (rilonacept)
Approved and Launched in 2008

- **ARCALYST® (rilonacept) is the only therapy approved for treatment of Cryopyrin-Associated Periodic Syndromes (CAPS)**
  - Rare, inherited, auto-inflammatory diseases
    - Familial Cold Auto-inflammatory Syndrome (FCAS)
    - Muckle-Wells Syndrome (MWS)
  - Approved for adults and children age 12 and older
  - Full prescribing information available at regeneron.com
- **Patients with CAPS experience ongoing lifelong symptoms**
  - Intermittent, debilitating exacerbations or flares can be triggered at any time by exposure to cooling temperatures
  - Symptoms include rash, fever/chills, joint pain, eye redness/pain and fatigue
  - Patients often adopt a compromised lifestyle
- **2008 shipments ~$11MM; 2009 estimate ~$20-24MM**

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Rilonacept in Gout

- **Unmet medical need**
  - 1% of US population suffers from gout – one of the most painful rheumatic diseases
  - > 750,000 gout patients start on allopurinol each year to lower uric acid levels; during first months of therapy many experience acute flares of joint pain and inflammation
  - 1.4MM people treated for acute gout attacks each year – 20% in hospital ER's
- **Phase 2 trial completed in prevention of allopurinol-induced gout flares**
  - **Met primary and secondary endpoints**
  - **No serious drug-related adverse events**

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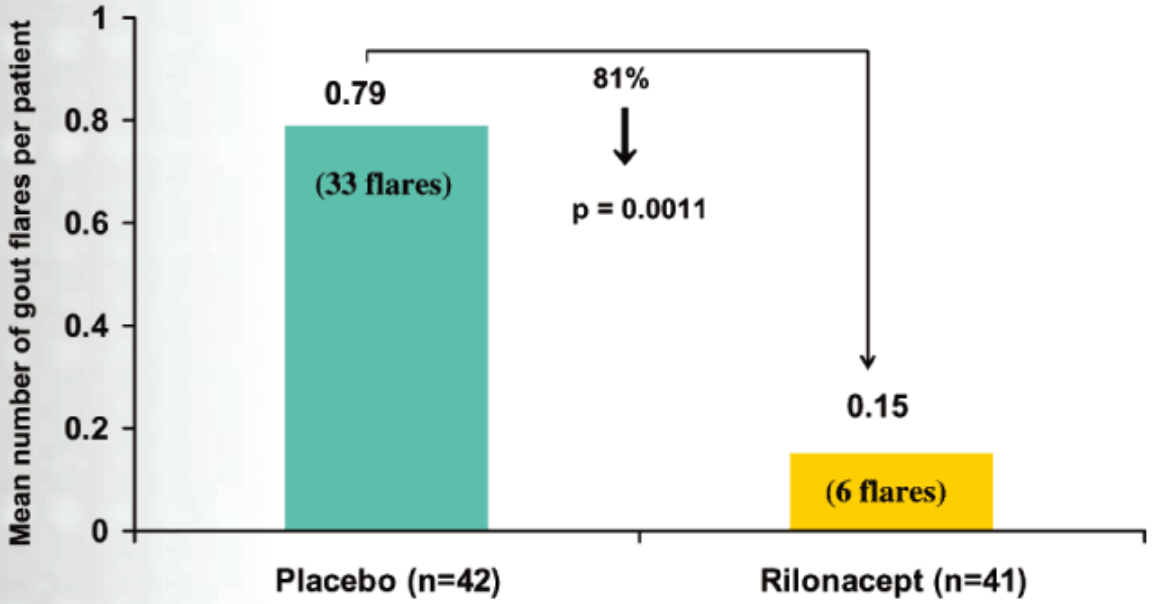
Phase 2 Primary Endpoint: Mean Number of Gout Flares per Patient through Week 12



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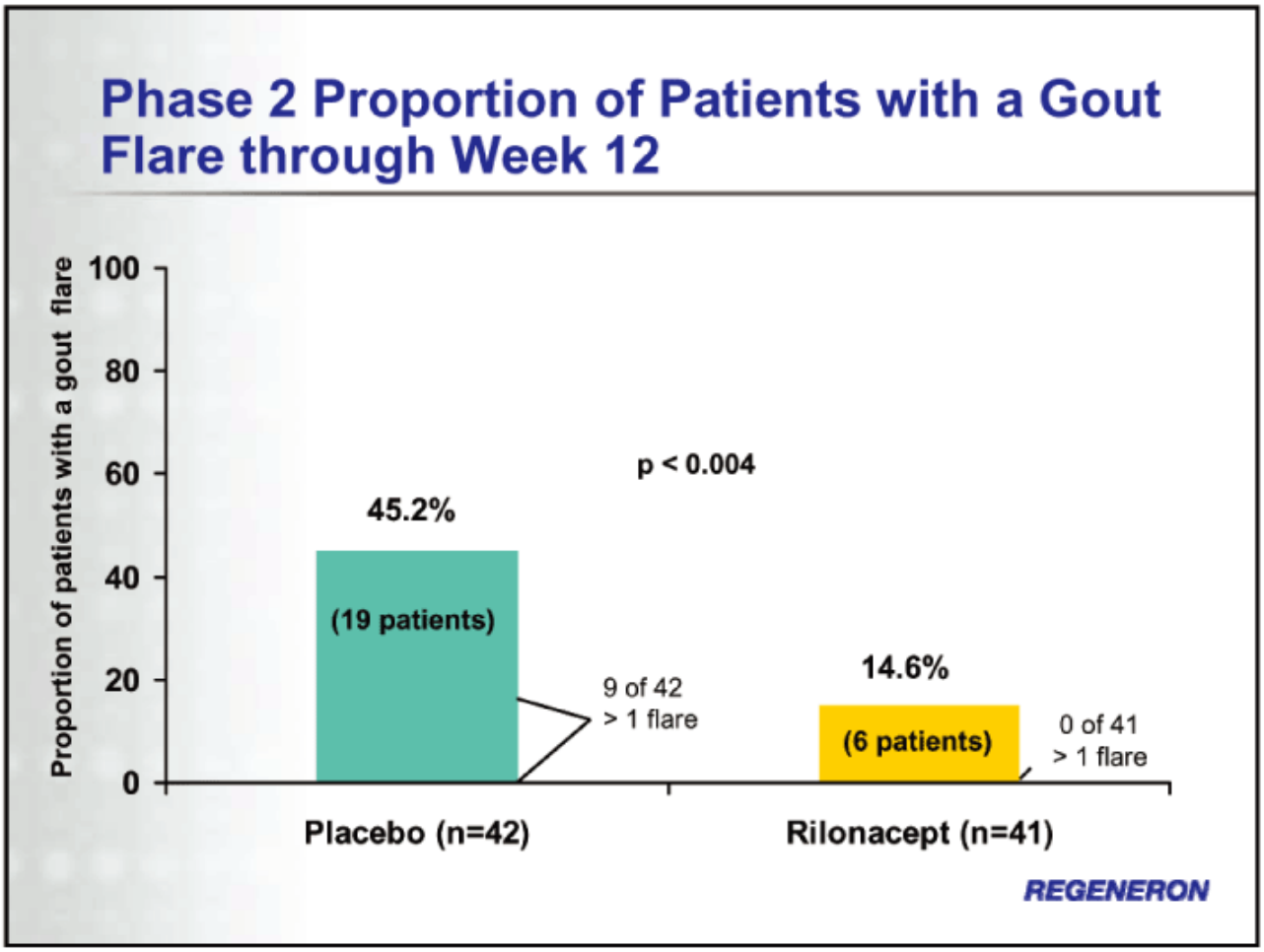
Phase 2 Proportion of Patients with a Gout Flare through Week 12
Proportion of patients with a gout flare
100
80
60
40
20
0
p < 0.004
45.2%
(19 patients)
9 of 42
> 1 flare
14.6%
(6 patients)
0 of 41
> 1 flare
Placebo (n=42)
Rilonacept (n=41)
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Phase 3 Rilonacept Program in Gout

- Gout flares induced by urate-lowering drugs
  - Two studies: rilonacept vs. placebo
- Acute gout
  - rilonacept vs. NSAIDs vs. NSAIDs plus rilonacept
- Safety study
- Program to start 1Q09

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Aflibercept (VEGF Trap)

Aflibercept (VEGF Trap)
Phase 3 Oncology Program

- All studies approximately 1/3 enrolled
- Each study monitored by Independent Data Monitoring Committee

	Total Number of Patients to be Enrolled	Initial Data Expected
VELOUR study: 2nd line metastatic colorectal cancer (+ folinic acid, 5-FU & irinotecan)	1200	2010
VANILLA study: 1st line metastatic pancreatic cancer (+ gemcitabine)	630	2010
VITAL study: 2nd line non-small cell lung cancer (+ Taxotere®)	900	2010
VENICE study: 1st line metastatic hormone resistant prostate cancer (+ Taxotere®)	1240	2011

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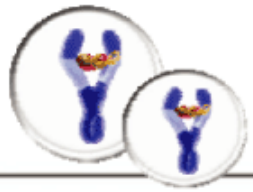
Aflibercept Single-Agent Phase 2 - SMA



- **Symptomatic Malignant Ascites (SMA) in Advanced Ovarian Cancer (AOC)**
  - Condition in which fluid containing cancer cells collects in the abdomen
  - Treated by paracentesis – procedure in which fluid is directly drained from the abdomen
- **Randomized, placebo-controlled study**
  - **Fully enrolled**
  - **Data expected mid-2009**

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Aflibercept Summary

- **SMA target enrollment reached**
  - Data expected mid-2009
- **4 Phase 3 studies approximately 1/3 enrolled**
  - Initial data expected 2010
- **Additional studies**
  - Colorectal cancer Phase 2 study: First line treatment with FOLFOX6+/- aflibercept recruiting patients
- **Over 1600 patients treated with aflibercept in clinical trials**

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VEGF Trap-Eye

VEGF Trap-Eye – The Opportunity

- **Potential differentiation relative to standard of care being explored in patients with neovascular form of age-related macular degeneration (wet AMD)**
  - Possible visual acuity gains
  - Possible less frequent dosing with similar gain in vision
  - Potential maintenance of visual acuity gain with as-needed dosing
- **Development Program**
  - Phase 2 study in wet AMD completed
  - Two Phase 3 studies in wet AMD enrolling patients
  - Phase 2 study in diabetic macular edema (DME) initiated in 4Q08

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Ranibizumab Findings in Wet AMD

Monthly Dosing

	12-Month Change in Visual Acuity vs. Baseline (Letters)
ANCHOR Phase 3	
Monthly dosing	
0.3 mg	+8.5
0.5 mg	+11.3
MARINA Phase 3	
Monthly dosing	
0.3 mg	+6.5
0.5 mg	+7.2

Infrequent Dosing

	12-Month Change in Visual Acuity vs. Baseline (Letters)
SAILOR Phase 3b	
3 monthly doses followed by PRN dosing	
0.3 mg	+0.5
0.5 mg	+2.3
PIER Phase 3b	
3 monthly doses followed by quarterly dosing	
0.3 mg	-1.6
0.5 mg	-0.2

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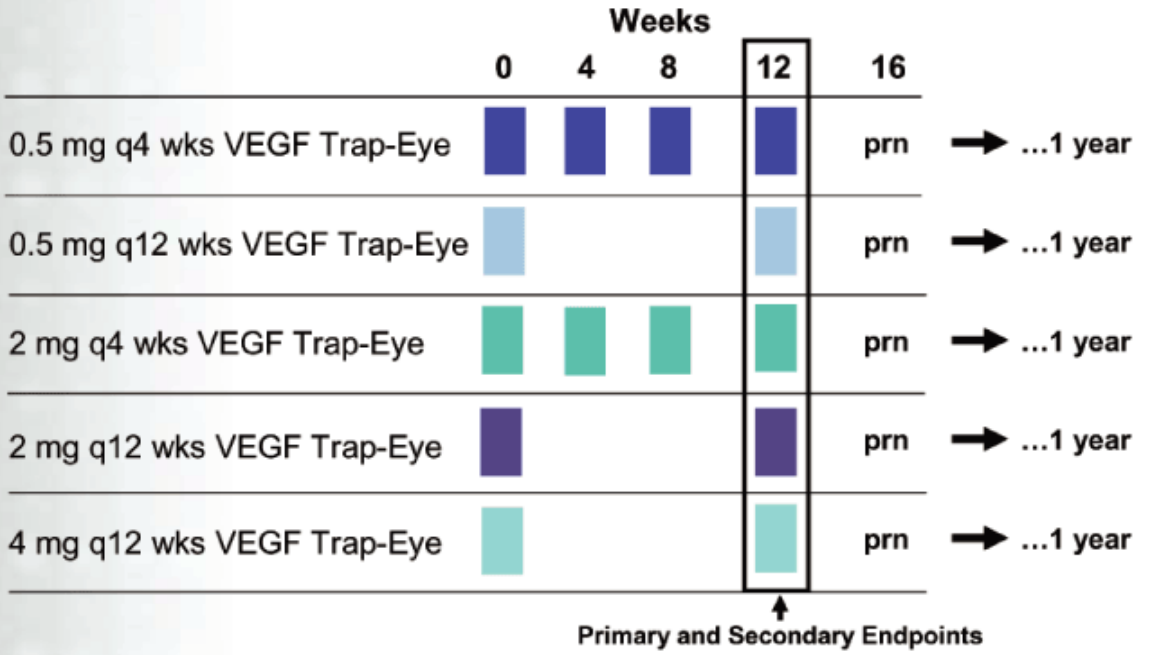
CLEAR-IT 2: Phase 2 Study Design



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Encouraging 52-Week Phase 2 Results for VEGF Trap-Eye in Wet AMD

- Significant improvements in visual acuity and retinal thickness through one year
- 9.0 letter average gain for 2.0 mg q4 week dose at 52 weeks
- After week 12, patients from all dose groups, on average, required only two additional injections over the following 40-week PRN (as-needed) dosing phase
- Treatment through week 48 associated with reduction in size of choroidal neovascular membrane (CNV), the lesion known to be the underlying cause of vision loss in wet AMD
- VEGF Trap-Eye was generally well tolerated with no serious drug-related adverse events

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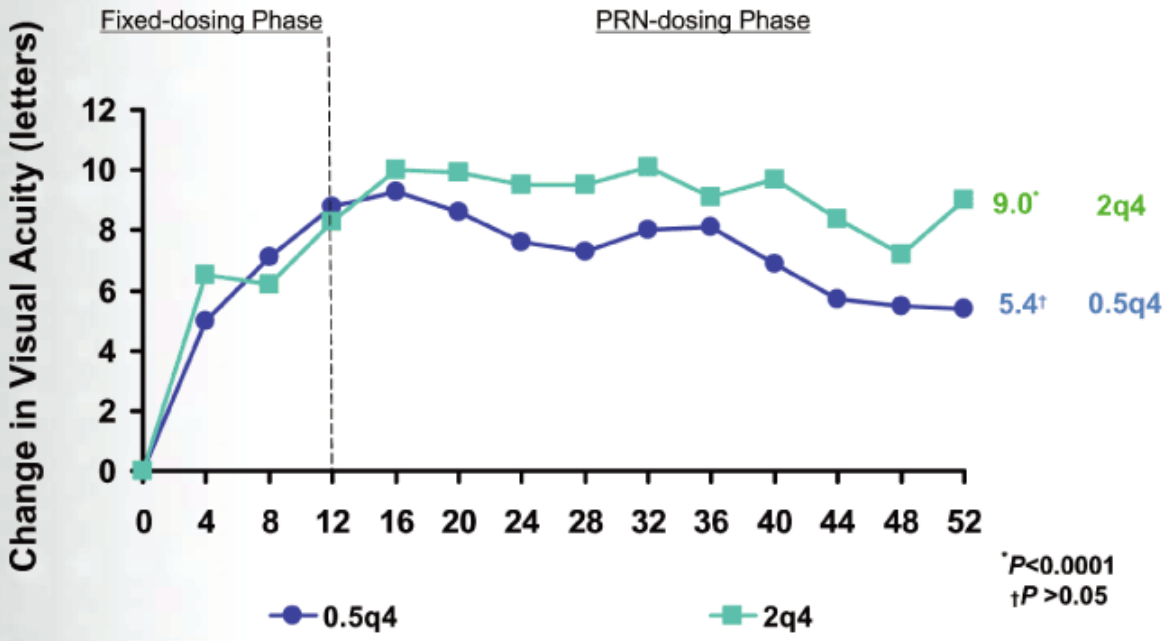
VEGF Trap-Eye Phase 2 Study
52-Week Mean Change in Visual Acuity



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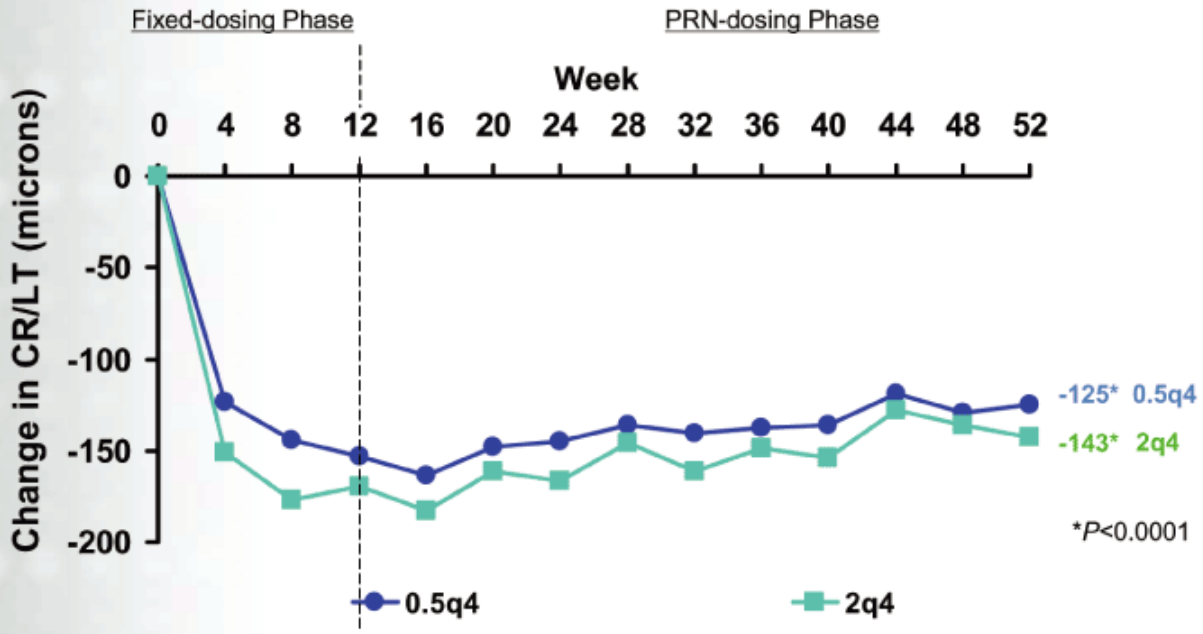
LOCF analysis; paired t-test. 0.5q4 : n=32; 2q4: n=31

VEGF Trap-Eye Phase 2 Study
52-Week Mean Change in Retinal Thickness



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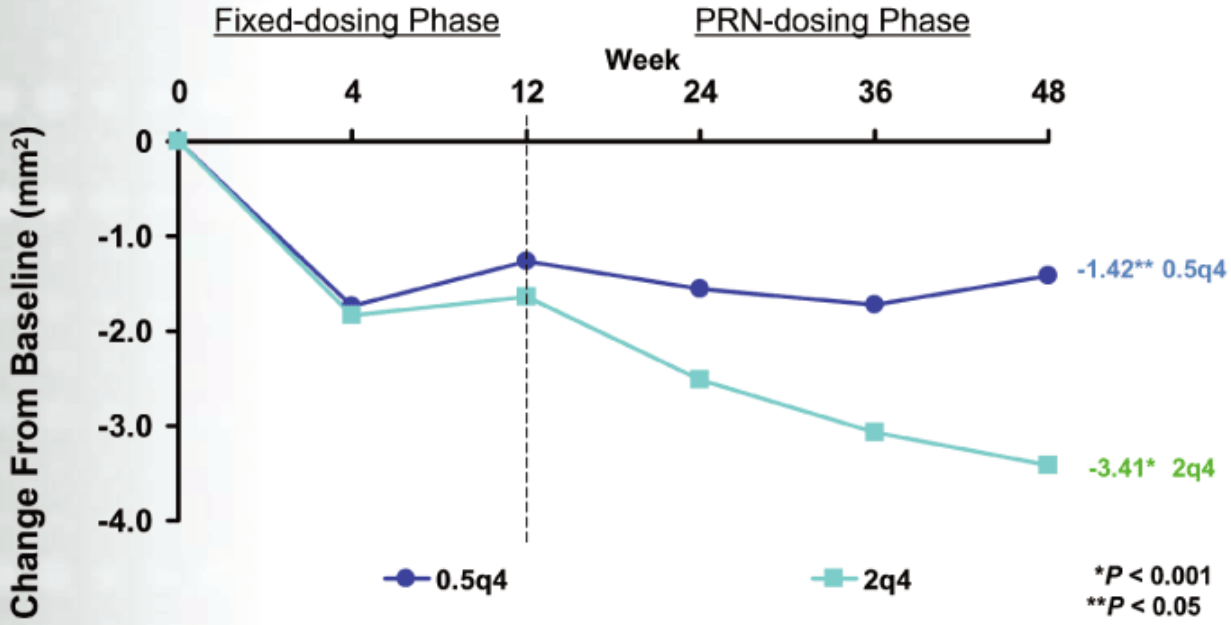
Posterior Pole Scans, LOCF analysis. 0.5q4: n=32; 2q4: n=31

Mean Change in Total Active CNV Size through 48 weeks by Fluorescein Angiography



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Mandatory FA only; LOCF analysis; 0.5q4: n=32; 2q4: n=31

VEGF Trap-Eye
Phase 3 Program in Wet AMD

- **VIEW 1 enrolling 1200 patients in U.S. and Canada**
- **VIEW 2 enrolling 1200 patients in rest of world**
- **4 arms in both trials**
  - **VEGF Trap-Eye**
    - 0.5 mg q4 weeks
    - 2.0 mg q4 weeks
    - 2.0 mg q8 weeks (after 3 monthly doses)
  - **ranibizumab**
    - 0.5 mg q4 weeks
- **Fixed dosing for 52 weeks (primary endpoint measurement) followed by PRN dosing for 44 weeks**
- **Initial data for primary endpoint expected 2010**

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VEGF Trap-Eye
Phase 2 Program in DME

- Double-masked, randomized, controlled study
- 5 arms: 4 VEGF Trap-Eye regimens vs. laser treatment
- Enrolling approximately 200 patients in U.S., Canada, EU and Australia
- 52 weeks of treatment with 6 month additional safety follow-up
- Primary efficacy endpoint: Change in best corrected visual acuity (BCVA) from baseline to week 24

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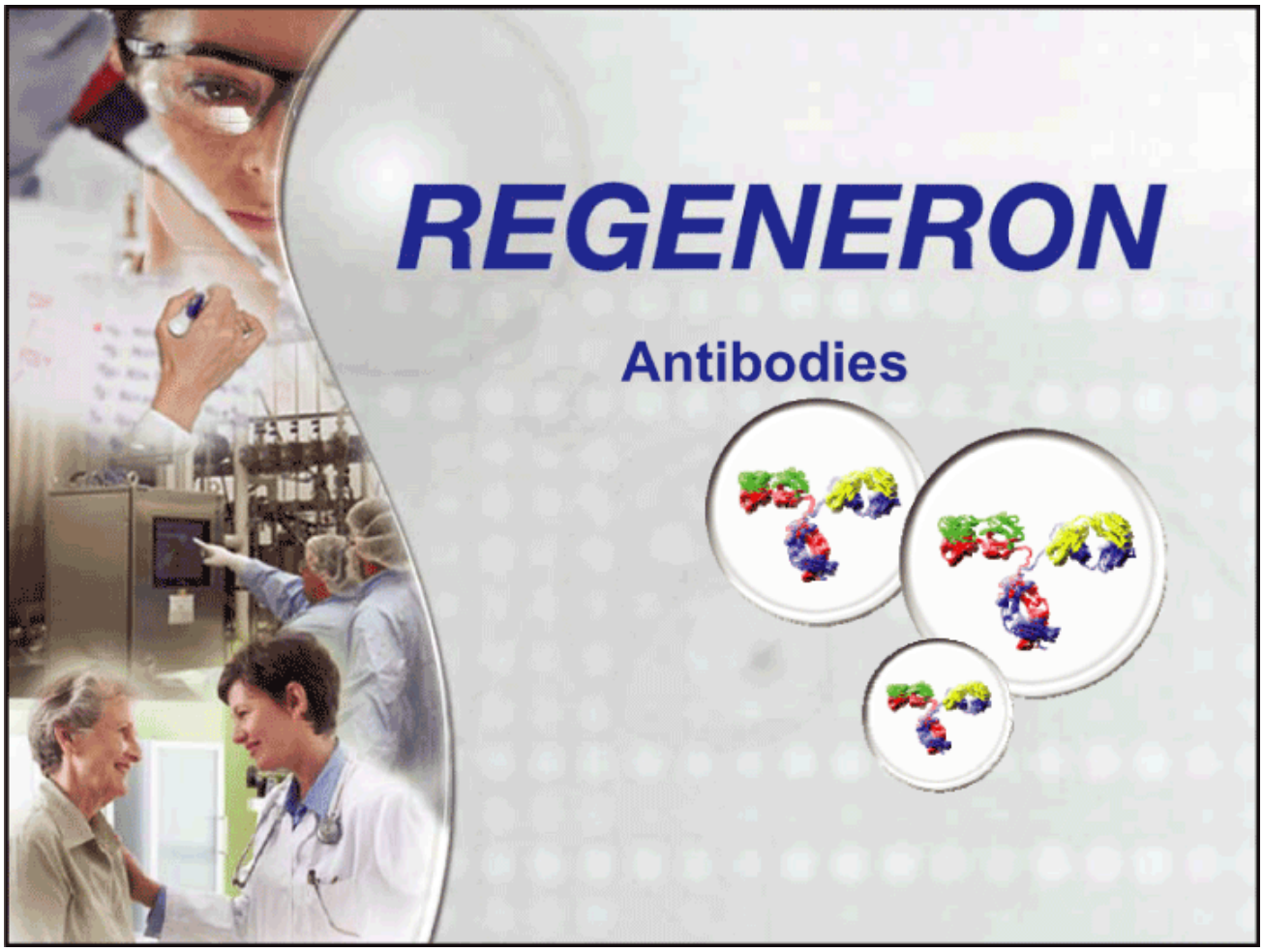
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Antibodies

VelociSuite of Technologies: Target Identification and Validation

VelociGene®

High-throughput generation of almost any desired genetic alteration in mouse embryonic stem cells

VelociMouse®

High-throughput generation of mouse models directly from embryonic stem cells containing genetically altered target genes

Together, used to identify and validate drug targets:

- Rapidly replaces gene with reporter to see where gene is active
- Shows the result of deleting or adding extra copies of genes
- Allows direct testing in mammalian models of whether the gene product is an important target in a disease setting and for therapeutic intervention
- Selected to play major role in NIH Knockout Mouse Project

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VelociSuite of Technologies: Human Antibody Generation and Manufacturing

VelocImmune®

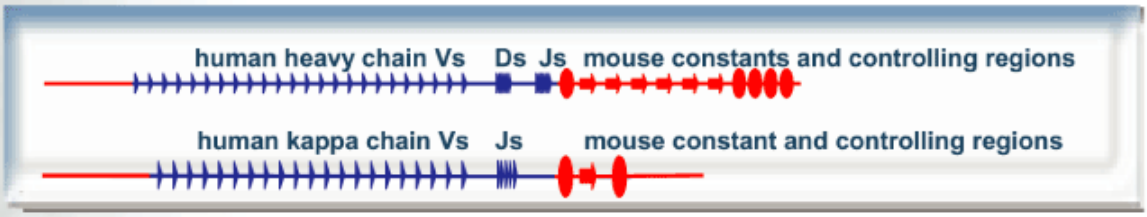
Rapid generation of high-quality, fully human antibodies

- Genetically humanized over 6 megabases of mouse immune genome
- *VelocImmune* mice mount a robust immune response and generate antibodies as efficiently as normal mice

VelociMab™

High-throughput antibody screening and selection and high-expression, manufacturing cell line development

- Antibodies with most desirable therapeutic characteristics are identified
- Antibodies cloned into high-expression manufacturing cell lines, suitable for clinical and commercial use



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Sanofi-Aventis Antibody Collaboration

- Global collaboration to discover, develop, and commercialize therapeutic human antibodies
- Sanofi-aventis funds $475 million of discovery research over five years through 2012
- Sanofi-aventis funds 100% of development costs for collaboration antibodies
- Goal is to bring average of 2 to 3 new antibodies into clinical development each year
- One antibody in Phase 1 plus two more INDs filed

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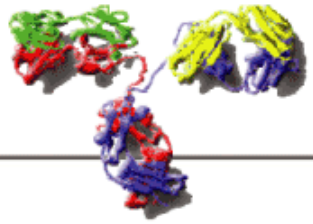
REGN88: IL-6R Antibody



- Phase 1 trial initiated in rheumatoid arthritis
- IL-6 plays important role in regulation of inflammatory and immune responses
- Clinical proof-of-concept for IL-6R antibody in rheumatoid arthritis demonstrated by Roche's tocilizumab
  - FDA approval pending
- Regeneron antibody is highly potent, fully human IL-6R blocking antibody with potential advantages (including subcutaneous delivery) over competitors

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REGN421: Dll4 Antibody

- Delta-like ligand 4 inhibition being studied for its role in anti-angiogenesis
- IND filed December 2008
- Phase 1 single-agent, dose-ranging study to begin in patients with advanced malignancies

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REGN475: Selective Anti-NGF Antibody

- Clinical proof-of-concept for nerve growth factor (NGF) inhibition in treatment of pain demonstrated by Pfizer's tanezumab, currently in Phase 3 trials for osteoarthritis
- Challenge: Obtain an antibody that binds NGF selectively without cross-reacting, even at high concentrations, with other members of neurotrophin family (e.g., NT-3, NT-4)
- Solution: *VelocImmune*® technology yields highly selective anti-NGF antibody
- IND for REGN475 filed in December 2008
- Phase 1 dose-ranging trial to begin in healthy volunteers

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REGENERON
Growth

Expanding Research and Development, Clinical, and Manufacturing

- Regeneron's headquarters and research laboratories located in Tarrytown, NY
- 230,000 SF of world-class lab and office space under construction
- Expected occupancy in mid-2009

- Biologics manufacturing capacity being expanded from 22,000 to 50,000 liters at our Rensselaer, NY facility
- Additional 272,000 SF building purchased in late 2007 suitable for manufacturing and warehouse space

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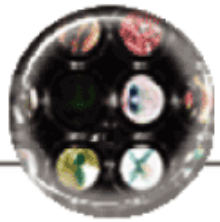
Strong Financial Position

- Year-end 2008 cash and securities: ~$528MM
- No debt: In 2008, retired $200MM of convertible notes

REGENERON

Monetizing Technology



- *VelociGene*® **Knock-Out and Transgenic Models**
  - sanofi-aventis (August 2008)
  - Terms: $4.3MM/year for 5 years
- *VelocImmune*® **Technology Licenses**
  - **Corporate**
    - Astellas Pharma (March 2007) and AstraZeneca/Cambridge Antibody Technology (February 2007)
    - Terms:
      - $20MM/year each for up to 6 years (minimum 4 years)
      - Mid-single-digit royalty on antibody sales
  - **Academic**
    - Columbia University (September 2008)
    - Terms: Regeneron has exclusive option to license antibodies for development and commercialization

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Collaboration Agreements

	Oncology	Eye Disease	Antibodies	Inflammation
	sanofi-aventis	Bayer HealthCare	sanofi-aventis	–
Upfront/milestone payments	$130MM	$95MM	$85MM	–
Development costs paid by partner *	100%	~50%	100%**	–
Profit split – Regeneron share				
US	50%	100%	50%	100%
Japan	~35% royalty	50%	35-45%	100%
ROW	50%	50%	35-45%	100%
Milestones remaining				
Regulatory	$400MM	$90MM	–	–
Sales	–	$135MM	$250MM	–

* 50% repayment from profits ** plus $475MM of research funding over 5 years

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27th Annual J.P. Morgan Healthcare Conference

January 2009