



News Release

On World AIDS Day, Merck Sharp & Dohme Highlights More than 20 Years of Commitment and Accountability to Fighting HIV/AIDS; Salutes Efforts of its Partners to Combat Pandemic

Keeping the Promise: More than 20 years of research, access and commitment to Stopping AIDS.

Dec. 1, 2006 (World AIDS Day 2006) - For more than 20 years, Merck Sharp & Dohme (MSD)¹ has been a global leader in combating the greatest public health pandemic in a generation – HIV/AIDS. MSD continues to be in the forefront of the discovery and development of new anti-AIDS medicines and vaccines, as well as engaging in innovative global partnerships to improve the delivery of life-saving medicines to those living with the disease.

In 2006, various MSD initiatives played a significant role in advancing the global struggle against the world's leading infectious disease, and will continue to contribute in 2007. Highlights from 2006 include:

- ATRIPLA™, a once-daily single tablet combination regimen for the treatment of HIV infection, was approved by the U.S. Food & Drug Administration in July²; Merck & Co., Inc. (Whitehouse Station, N.J.) and Gilead Sciences have established an agreement for the distribution of ATRIPLA in certain developing countries
- MSD's investigational HIV/AIDS integrase inhibitor – MK-0518 – continues to show promising results in Phase II and III trials
- MSD's HIV/AIDS vaccine candidate -- MRKAd5 trivalent vaccine – has entered a Phase II "Proof of Concept" clinical trial
- In March 2006, MSD further reduced the price of its 600 mg and 200 mg formulations of STROCRIN® (efavirenz), a non-nucleoside reverse transcriptase inhibitor, by 20 percent and 22 percent, respectively, in the world's poorest countries and those hardest hit by the HIV epidemic

¹ MSD operates as Merck & Co., Inc. in the United States.

² In the United States, the product is commercialized by Bristol-Myers Squibb and Gilead Sciences through the companies' joint venture.

- MSD continued to support existing partnerships and fund new projects throughout the world.

For more information, please review the highlights below.

APPENDIX: 2006 HIGHLIGHTS

ATRIPLA™, a once-daily single tablet combination regimen for the treatment of HIV infection

ATRIPLA™ (efavirenz 600 mg/ emtricitabine 200 mg/ tenofovir disoproxil fumarate 300 mg), a once-daily single tablet, received U.S. Food and Drug Administration approval on July 12, 2006, for the treatment of HIV-1 infection in adults for use either as a stand-alone therapy or in combination with other antiretroviral agents. In the United States, the product will be commercialized by Bristol-Myers Squibb and Gilead Sciences through the companies' joint venture. On August 11, Merck & Co., Inc. (Whitehouse Station, N.J.) and Gilead Sciences established an agreement for the distribution of ATRIPLA in certain developing countries. On October 9, Merck & Co., Inc. (Whitehouse Station, N.J.), along with Bristol-Myers Squibb Company and Gilead Sciences, submitted a Marketing Authorisation Application for ATRIPLA in the European Union to the European Medicines Agency. Merck & Co., Inc. (Whitehouse Station, N.J.) and Gilead continue to work together to submit regulatory applications for the product in more than 90 developing countries.

ATRIPLA contains 600 mg of efavirenz, a non-nucleoside reverse transcriptase inhibitor (NNRTI), 200 mg of emtricitabine and 300 mg of tenofovir disoproxil fumarate, both nucleoside reverse transcriptase inhibitors (NRTIs). Efavirenz is marketed by Bristol-Myers Squibb under the tradename SUSTIVA® in the United States, Canada and six European countries (France, Republic of Ireland, Germany, Italy, Spain and the United Kingdom). In other territories, including all other countries of the European Union, efavirenz is commercialized by Merck & Co., Inc. (also known as MSD outside of the United States and Canada) and is marketed in most of these countries under the tradename Stocrin®. Emtricitabine and tenofovir disoproxil fumarate are commercialized by Gilead Sciences under the tradenames Emtriva® and Viread®, respectively. The compounds are commonly prescribed together as a once-daily, fixed-dose tablet, marketed under the tradename Truvada® for use as part of combination therapy.

HIV/AIDS Integrase Inhibitor – MK-0518

MSD continues Phase III clinical studies for MK-0518, which belongs to a new class of investigational antiretroviral therapy agents called integrase inhibitors that inhibit the insertion of the HIV viral DNA into human DNA. Inhibiting integrase from performing this essential function

blocks the ability of the virus to replicate and infect new cells. There are drugs in use that inhibit the other two enzymes involved in viral replication – protease and reverse transcriptase – but there are no approved drugs that inhibit integrase.

Research presented from ongoing Phase II clinical trials at the 2006 Interscience Conference on Antimicrobial Agents and Chemotherapy³ showed that MK-0518, when used in combination with optimized background therapy (OBT) in patients with advanced HIV infection, significantly reduced HIV viral load by 1.7 to 2.2 log (approximately 98%) when compared to placebo plus OBT. While the initial results show promise in rapidly reducing HIV viral load, additional research is required. In 2006, MSD also announced a worldwide expanded access program for MK-0518 for HIV/AIDS patients with limited or no treatment options.

HIV/AIDS Vaccine Candidate – MRKAd5 Trivalent Vaccine

MSD's lead investigational HIV/AIDS vaccine candidate, known as the MRKAd5 trivalent vaccine, is in a Phase II "proof of concept" trial in partnership with the HIV Vaccine Trials Network (HVTN). This proof of concept study will evaluate the ability of this vaccine approach to either prevent infection with HIV, and/or to maintain a lower average viral load compared with placebo in individuals who are at risk of contracting HIV during the course of the study. The ongoing study will include 3,000 volunteers located in North America, South America, the Caribbean and Australia.

Access to Medicines Initiatives

MSD continues to work to expand access to HIV/AIDS medicines – particularly to the world's poorest countries and those hardest hit by the pandemic. Today, MSD programs and partnerships around the world are helping to prevent and treat HIV/AIDS, expand health care capacity, foster greater disease awareness and acceptance and provide support for people living with HIV/AIDS, their families and communities.

- **MSD's HIV/AIDS Pricing Policy: STOCRIN Price Reduction**

In March 2006, MSD further reduced the price of its 600 mg and 200 mg formulations of STOCRIN[®] (efavirenz), a non-nucleoside reverse transcriptase inhibitor, by 20 percent and 22 percent, respectively, in the world's least developed countries and those with an

³ The median duration for prior use of ARTs was approximately nine years for all groups, mean baseline HIV viral load ranged from 4.6 to 4.8 log₁₀ copies/mL and mean baseline CD4 cell counts ranged from 220 to 274 cells/mm³. The regimen of MK-0518 (at all doses studied) plus OBT was generally well tolerated and comparable to the tolerability of placebo plus OBT. The most commonly reported study therapy-related side effects (occurring in at least five percent of patients in at least one treatment group) were diarrhea, nausea, fatigue, headache and itching. Four patients discontinued treatment due to adverse experiences.

HIV/AIDS adult prevalence rate of 1 percent or greater. This price reduction is in keeping with MSD's long-standing practice of providing its current HIV/AIDS medicines to the world's poorest countries and those hit hardest by the pandemic at no-profit prices. For medium HDI countries with an adult HIV prevalence of less than 1 percent, our two HIV/AIDS medicines are available at significantly reduced prices. Nearly 500,000 patients in 76 developing countries are currently being treated with regimens containing either STOCRIN or CRIXIVAN[®] (indinavir sulfate).

- **Development of Microbicides to reduce HIV transmission**

Merck & Co., Inc. (Whitehouse Station, N.J.) has licensed an investigational compound (a CCR5 blocker known as CMPD167) at no cost to the International Partnership for Microbicides for development, manufacture and distribution of the compound (for use in developing countries) as a microbicide to assist in the prevention of HIV transmission. CMPD167 is part of a new class of antiretroviral drugs known as "entry inhibitors," which are designed to prevent HIV infection by thwarting the virus' efforts to enter host cells. If developed and approved for use, a microbicide of this type, which could take the form of a gel, cream, film, suppository, sponge or vaginal ring, may have the potential to reduce transmission of HIV to women during sexual intercourse. According to UNAIDS, about half of the 40 million adults living with HIV/AIDS are women.

- **African Comprehensive HIV/AIDS Partnerships (ACHAP)**

The African Comprehensive HIV/AIDS Partnerships (ACHAP) is a public-private partnership between the Bill & Melinda Gates Foundation, Merck & Co. Inc. /The Merck Company Foundation and The Government of Botswana established in 2000 to enhance and support Botswana's national HIV/AIDS program through a comprehensive approach to HIV/AIDS prevention, treatment, care and support. As part of the partnership, each Foundation initially committed \$50 million and Merck is donating its antiretroviral medicines, CRIXIVAN and STOCRIN, for use in the national ARV program for the duration of the partnership. A revision of the strategy in 2004 highlighted the need for ACHAP to continue beyond 2005 and the partners agreed to extend their commitment by a further \$6.5 million each to the partnership to 2009.

As of August 2006, 63,085 patients are enrolled in Botswana's national ARV treatment program. An additional 8,550 patients are receiving treatment from the private sector, for a total of more than 71,000 patients receiving ARV treatment in Botswana -- an increase from the just over 3,000 who were receiving treatment at the end of 2002.

- **China-MSD HIV/AIDS Partnership**

Merck continues to expand the public-private partnership with China's Ministry of Health to provide HIV/AIDS prevention, patient care, treatment and support. Merck has committed \$30 million over five years to the project—the largest of its kind in China. Program interventions are being introduced initially in three counties of Liangshan Prefecture, Sichuan Province, where HIV/AIDS is primarily driven by injection drug use and commercial sex work.

About Merck & Co., Inc.

Merck & Co., Inc. is a global research-driven pharmaceutical company dedicated to putting patients first. Established in 1891, the Company currently discovers, develops, manufactures and markets vaccines and medicines to address unmet medical needs. The Company devotes extensive efforts to increase access to medicines through far-reaching programs that not only donate Company medicines but help deliver them to the people who need them. The Company also publishes unbiased health information as a not-for-profit service. For more information, visit www.merck.com.

Merck & Co., Inc. Forward-Looking Statement

This press release contains "forward-looking statements" as that term is defined in the Private Securities Litigation Reform Act of 1995. These statements are based on management's current expectations and involve risks and uncertainties, which may cause results to differ materially from those set forth in the statements. The forward-looking statements may include statements regarding product development, product potential or financial performance. No forward-looking statement can be guaranteed, and actual results may differ materially from those projected. The Company undertakes no obligation to publicly update any forward-looking statement, whether as a result of new information, future events, or otherwise. Forward-looking statements in this press release should be evaluated together with the many uncertainties that affect the company's business, particularly those mentioned in the cautionary statements in Item 1 of Merck & Co., Inc.'s Form 10-K for the year ended Dec. 31, 2005, and in its periodic reports on Form 10-Q and Form 8-K, which the Company incorporates by reference.

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