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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

TRICIA M. BARTELT, et al.,
Plaintiffs,
v.
AFFYMAX, INC., et al.,
Defendants.

Case No. 13-cv-01025-WHO

**ORDER GRANTING IN PART AND
DENYING IN PART MOTION TO
DISMISS CONSOLIDATED AMENDED
COMPLAINT**

Re: Dkt. Nos. 47, 48

INTRODUCTION

On July 22, 2013, the plaintiffs filed a Consolidated Amended Complaint against defendants Affymax Inc. and four of its senior executives and directors, John A. Orwin, Herbert C. Cross, Anne-Marie, Duliege, and Jeffrey H. Knapp. Dkt. No. 45. The defendants have moved to dismiss the Consolidated Amended Complaint. Dkt. No. 47. For the reasons stated below, the motion to dismiss is GRANTED IN PART and DENIED IN PART. This order also resolves the defendants' request for judicial notice, as stated below. Dkt. No. 48

BACKGROUND¹

Defendant Affymax is a biopharmaceutical company whose primary product is the drug Omontys. During the relevant period, defendant Orwin served as Affymax's Chief Executive Officer and a director; defendant Cross served as Chief Financial Officer; defendant Duliege

¹ The Court assumes the truth of the allegations in the Consolidated Amended Complaint.

1 served as Chief Medical Officer; and defendant Knapp served as Chief Commercial Officer. The
2 plaintiffs allege that Affymax and the individual defendants violated federal securities laws by
3 making materially false and misleading statements about Omontys, which was eventually recalled
4 in the face of serious safety concerns, causing Affymax’s stock to plummet. The plaintiffs seek to
5 represent a class of all purchasers of Affymax common stock between August 8, 2012 and
6 February 22, 2013 (the “class period”).

7 Omontys is in a class of drugs known as erythropoiesis stimulating agent (“ESAs”). Like
8 other ESAs, Omontys treats anemia by stimulating the production of red blood cells. Other ESAs
9 for treating anemia include Epogen, sold by Amgen, and Procrit, sold by Johnson & Johnson. On
10 March 27, 2012, the Food and Drug Administration (“FDA”) approved Omontys for patients on
11 dialysis for treatment of anemia due to chronic kidney disease. ¶ 63.² Because Omontys is an
12 ESA, the FDA required it to carry a “black-box warning,” the highest level of warning that the
13 FDA can require, which warned of death and other serious risks. *See* 21 C.F.R. 201.57(c)(1.) The
14 “black-box warning” stated:

**WARNING: ESAs INCREASE THE RISK OF DEATH, MYOCARDIAL
INFARCTION, STROKE, VENOUS THROMBOEMBOLISM,
THROMBOSIS OF VASCULAR ACCESS AND TUMOR
PROGRESSION OR RECURRENCE**
See full prescribing information for complete boxed warning.
Chronic Kidney Disease:
• In controlled trials, patients experienced greater risks for
death, serious adverse cardiovascular reactions, and stroke
when administered erythropoiesis-stimulating agents (ESAs)
to target a hemoglobin level of greater than 11 g/dL (5.1).
• No trial has identified a hemoglobin target level, ESA dose, or
dosing strategy that does not increase these risks (5.1).
• Use the lowest OMONTYS dose sufficient to reduce the need
for red blood cell (RBC) transfusions (5.1).

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21 Dkt. No. 49-19 (Kaban Ex. 19).³

22 On July 12, 2012, Affymax issued a press release announcing that it had entered into a
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24 ² Unless otherwise noted, all paragraph citations (¶) are to the Consolidated Amended
Complaint.

25 ³ The Court GRANTS the defendants’ request to take judicial notice of the package insert
26 approved by the FDA for Omontys (Kaban Ex. 19, Dkt. No. 49-19), including the “black-box
27 warning.” Dkt. No. 48. The plaintiffs concede that the “FDA package inserts” (Kaban Exs. 19-
28 21) “are incorporated by reference or relied upon in the CAC.” Dkt. No. 54 at 2. Plaintiffs
therefore “do not object to judicial notice for these [FDA package inserts] for the limited purpose
of what they state and when they were filed.” *Id.* The request for judicial notice is DENIED AS
MOOT to the extent that the exhibits at issue are not cited in this Order.

1 supply agreement with leading dialysis provider Fresenius Medical Care, ending in April 2013.
2 ¶ 69. The press release reported that “Fresenius Medical Care North America has stated that its
3 initial plans are to adopt the product into more than 100 dialysis centers in the U.S. over the next
4 few weeks, and then, based on its experience, evaluate the potential to expand to additional
5 centers.” *Id.* Affymax’s stock price increased 16% after the press release. ¶ 70. The plaintiffs
6 allege that Affmyax’s agreement with Fresenius accounted for the majority of Affymax’s sale of
7 Omontys during the class period. ¶ 3.

8 The plaintiffs allege that “in August, September, and October of 2012, some Affymax
9 sales representatives selling Omontys to dialysis clinics in Texas, Oklahoma, Mississippi,
10 Louisiana, and Alabama filed Adverse Event reports concerning serious reactions with Omontys.”
11 ¶ 76.

12 Affymax held a conference call on August 8, 2012 with investors, analysts and other
13 market participants regarding its Q2 2012 financial results. The individual defendants participated
14 in the conference call where “they reiterated the Company’s Q2 2012 guidance and its continued
15 success with Omontys (and in particular its long-term contracts with Fresenius) due to the
16 product’s safety and efficacy.” ¶ 87. The plaintiffs allege that by this time Affymax and the
17 individual defendants “were already aware of the adverse events caused by their most profitable
18 drug, Omontys. They had already received reports of allergic reactions in patients associated with
19 using the drug which had been forwarded to the FDA.” ¶ 88. The plaintiffs allege that the
20 defendants “failed to report this to the market because they knew of the serious implications this
21 could have on their Company’s ability to operate without the profits from Omontys. They also
22 knew that any reported adverse reactions would affect their long-term relationship with Fresenius
23 who would halt their pilot program and discontinue use of Omontys.” *Id.*

24 In October 2012, Affymax requested a change in Omontys’s label to warn “physicians and
25 patients about the potential for allergic reactions.” ¶ 78. The plaintiffs’ Confidential Witness 2, a
26 Director of Sales Training at Affymax from August 2011 to October 2012, states that Affymax’s
27 Manager of Sales Training and its Vice President of Clinical Development told Affymax
28 employees during a conference call that the label change “was not a big deal.” ¶ 78.

1 Affymax disclosed the proposed label change during an investor conference call on
2 November 8, 2012. ¶ 94. Defendant Orwin, Affymax’s CEO, said:

3 Since launch thousands of patients have received OMONTYS in the
4 post-marketing setting. As anticipated, this broad experience has
5 been helpful in further informing real-world use of the compound
6 where infrequent, but sometimes serious, allergic reactions have
7 been reported. To that end, we have proposed to the FDA, and have
8 now updated our label to include, additional language regarding
9 allergic reactions similar to that which is found in the existing labels
10 for other ESAs. . . . allergic reactions are mentioned [on the original
11 label], but they’re not described in the same sort of wholesome way
12 that they are in other ESAs, which is what led us, based on the
13 experience and reported events, however infrequent, to look at that
14 against what was in the label and decide that it made sense for us to
15 bring the language into our label in line with what exists for the
16 other ESAs.

17 *Id.* Similarly, defendant Duliege, Affymax’s Chief Medical Officer, advised:

18 Now that we have thousands of patients, literally more than 10,000
19 patients, we felt it was prudent to update our label with the new
20 information that we have accumulated as part of our
21 pharmacovigilance severance program.

22 Specifically, the report of allergic reactions that you mentioned in
23 the label continues to be infrequent and a result on treatment.
24 However, some of these reactions have been more serious. Some of
25 the most recent reaction (inaudible) have been more serious and this
26 is what we have included as information in the label to bring, as you
27 said, John, our label in line with the existing label of other ESAs.
28 So, there is now a new contraindication in our label which has been
added and it’s OMONTYS is contraindicated in patients with
serious allergic reactions to OMONTYS. And that’s also reflected in
the warning and precaution sections of our label.

29 *Id.* An investment analyst asked “Just like the Epogen label?” to which Duliege responded
30 “That’s right.” *Id.*

31 The plaintiffs allege that the “Defendants misled analysts and investors by claiming that
32 the requested label change was to keep up with competition; e.g. Epogen’s label, rather than
33 admitting to their own reports of serious allergic reactions causing hospitalizations and death.” ¶
34 95. Specifically, the plaintiffs allege that the defendants “did not disclose the full extent of the
35 serious allergic reactions caused by Omontys, including death; that reports of adverse reactions
36 were mounting; and that Affymax had made a request to the FDA for a label change primarily to
37 warn doctors of serious allergic reactions that could occur with the injection of Omontys rather
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1 than making its label consistent with its competitor’s label. *Id.*

2 The FDA approved Omontys’s label change on December 4, 2012. The new label warned
3 that the use of Omontys could cause Serious Allergic Reactions. The label stated, in part:

4 **Serious Allergic Reactions**

5 Serious allergic reactions, including anaphylactic reactions, hypotension, bronchospasm
6 angioedema and generalized pruritus, may occur in patients treated with OMONTYS.
7 Immediately and permanently discontinue OMONTYS and administer appropriate
8 therapy if a serious allergic reaction occurs.

9 ¶ 100. Affymax did not issue a press release to announce the label change, even though it “had
10 received many reports of adverse reactions by patients, including anaphylactic reactions on the
11 first use of Omontys causing death and other serious injuries requiring hospitalization” by this
12 time. ¶¶ 102-03. As a result, according to the plaintiffs, the “label change was unknown to the
13 market and had no significance to shareholders.” ¶ 102.

14 On February 12, 2013, Affymax and the individual defendants conducted another
15 conference calls with analysts where the defendants “made material representations and omissions
16 . . . continuing to tout the product’s safety and efficacy while omitting to disclose the serious
17 problems it had with Omontys and the imminent recall that was about to occur.” ¶ 106.

18 Defendant Orwin was asked to “provide a little bit more color on the Fresenius agreement, and
19 what kind of information they think they will need in order to make a decision to go wider with
20 Omontys.” *Id.* In response, Orwin stated

21 Obviously, the safety and efficacy were established, and are
22 typically best established in a comparative Phase 3 program.
23 Fortunately for us, we had a very large program, and a very
24 comprehensive evaluation of both safety and efficacy. But I think
25 what they want to see is that they could replicate those kinds of
26 results in their patient population, and that by treating 10,000
27 patients, and looking at patients as their own controls, but also
28 looking at a matched cohort, they could learn a lot about the
29 performance of Omontys in their patient population, before making
30 a decision to utilize the product more broadly. . . . So, I think what
31 they need to see is they need to see how the product performs in
32 their population. Safety and efficacy, of course, always, but even
33 more importantly, the dose efficiency in their population, since
34 safety and efficacy were already fairly well-established.”

35 Opp. at 13 (citing CAC. ¶ 106).

36 The next day, February 13, 2013, Fresenius announced that it would “pause further

1 expansion of the Omontys pilot that began in late July 2012.” ¶ 108. A Form 8-K Affymax filed
2 with the SEC the same day included a letter from Fresenius to Affymax. The letter stated, in part:

3 We are writing to provide an interim update on the status of our pilot
4 to assess the use of Omontys in the [Fresenius] dialysis facilities. . . .
5 The assessment includes efficacy, safety and logistics related to this
6 agent that was approved for use by the Food and Drug
7 Administration at the end of March 2012.

8 We will now pause expansion of the pilot that began in late July
9 2012. We have accumulated experience in more than 56,600
10 administrations in over 18,000 unique patients. . . . To date, we have
11 seen infrequent allergic reactions in our patient population receiving
12 their first dose of Omontys. Most of these reactions have been mild,
13 but a small number have been serious. The rate of allergic reactions
14 has been on the order of 1:1000 patients receiving a first dose of
15 Omontys. The vast majority of patients who are receiving the
16 medication on an ongoing monthly basis are tolerating it well.

17 We are now working to analyze the full set of efficacy and safety
18 profile information and feel that the current scale of our experience
19 with use of the drug is adequate to complete this analysis. . . . For
20 patients on Omontys, we recommend continued use of the agent as it
21 has been providing effective anemia management. We plan to pause
22 the rollout to additional facilities and patients at this time until the
23 analyses are complete and reported to our medical staff. As many of
24 you have become quite comfortable with the medication, physicians
25 and facilities that have been using Omontys who wish to continue
26 prescribing it for new patients may choose to do so.

27 ¶ 108.

28 The plaintiffs allege that the Fresenius pilot program was paused to “investigate the drug’s
safety and efficacy due to patients having serious allergic reactions.” ¶ 12. Affymax stock closed
down approximately 7% on February 14, 2013, following Fresenius’s announcement. ¶ 109. The
plaintiffs allege that “without knowing the full truth about Omontys[’s] lack of safety, analysts
were still positive on the stock.” *Id.* Investment firm Piper Jaffray issued an analyst report on
February 20, 2013 which concluded that the firm “remain[s] bullish that the companies [Affymax
and Fresenius] will sign a meaningfully larger supply agreement, despite the recent pause in
Fresenius’s pilot program.” ¶ 110.

Affymax announced a voluntary recall of Omontys on February 23, 2013. ¶ 111.
Affymax issued a press release stating that it “decided to voluntarily recall all lots of Omontys . . .
as a result of new postmarketing reports regarding serious hypersensitivity reactions, including

1 anaphylaxis, which can be life-threatening or fatal.” ¶ 111. The press release also stated that:

2 To date, fatal reactions have been reported in approximately 0.02%
3 of patients following the first dose of intravenous administration. . . .
4 The rate of overall hypersensitivity reactions reported is
5 approximately 0.2% with approximately a third of these being
6 serious in nature including anaphylaxis requiring prompt medical
7 intervention and in some cases hospitalization. The companies are
8 actively investigating these cases. In the meantime, dialysis
9 organizations are instructed to discontinue use.

10 The Wall Street Journal reported on the recall on February 25, 2013, writing that “Affymax
11 Inc. shares plunged 85% in midday trading Monday after reports of severe allergic reactions in
12 some kidney-disease patients, including at least five deaths, prompted the company to recall its
13 antianemia drug.” ¶ 112. The Wall Street Journal also reported that “Chief Executive John A.
14 Orwin said the company moved to pull the drug, called Omontys, after executives learned of three
15 deaths in February tied to hypersensitivity, a sometimes fatal condition that can arise when the
16 body’s immune system reacts to drugs or other foreign intrusions, like bee stings. Those fatalities
17 followed two earlier deaths that observers had associated more closely with cardiovascular
18 problems rather than allergic reactions.” *Id.* According to the Wall Street Journal, “the recall
19 shocked investors who had seen encouraging signs that the antianemia drug was making inroads
20 as a cheaper and more convenient alternative to Amgen Inc.’s blockbuster Epogen, which holds a
21 virtual monopoly in treating anemia in patients receiving dialysis.” *Id.*

22 The Wall Street Journal also reported that “[t]he drug’s prospects looked far brighter less
23 than two weeks ago, when [Fresenius] sent a letter suggesting that doctors comfortable with the
24 treatment could continue administering it while Fresenius paused a pilot Omontys program to pore
25 over its safety and effectiveness data.” The Wall Street Journal also stated that Fresenius “earlier
26 this month reported a ‘small number’ of allergic reactions but didn’t mention any patient deaths.”

27 According to an analyst from Robert W. Baird—the same analyst that, in November 2012,
28 asked whether the new Omontys label was “[j]ust like the Epogen label”—the number of Omontys
hypersensitivity incidents “was 100-fold greater than Amgen’s Epogen and the death rate was 8.5
times higher.” *Id.*

The plaintiffs allege that Affymax’s and the individual defendants’ rosy statements about

1 Omontys’s outlook, without disclosing the serious adverse reactions associated with Omontys,
2 violated Sections 10(b) of the Exchange Act and SEC Rule 10b-5 (17 C.F.R. §240.10b-5). The
3 plaintiffs also allege that the individual defendants are liable as control persons under Section
4 20(a) for Affymax’s violation of Section 10(b).

5 **LEGAL STANDARD**

6 **A. Federal Rule of Civil Procedure 12(b)(6)**

7 A motion to dismiss for failure to state a claim under Rule 12(b)(6) tests the legal
8 sufficiency of a complaint. *Navarro v. Block*, 250 F.3d 729, 732 (9th Cir. 2001). A complaint
9 “must contain sufficient factual matter, accepted as true, to state a claim to relief that is plausible
10 on its face.” *Ashcroft v. Iqbal*, 556 U.S. 662, 678 (2009). A claim is facially plausible when it
11 “allows the court to draw the reasonable inference that the defendant is liable for the misconduct
12 alleged.” *Id.* In considering whether the complaint is sufficient to state a claim, the court accepts
13 as true all of the factual allegations contained in the complaint. *Id.* However, the court need not
14 “accept as true allegations that contradict matters properly subject to judicial notice or by exhibit”
15 or “allegations that are merely conclusory, unwarranted deductions of fact, or unreasonable
16 inferences.” *In re Gilead Scis. Sec. Litig.*, 536 F.3d 1049, 1055 (9th Cir. 2008) (internal quotation
17 marks and citations omitted).

18 **B. Pleading Requirements in Securities Fraud Actions**

19 Section 10(b) of the Exchange Act makes it unlawful “for any person . . . to use or employ,
20 in connection with the purchase or sale of any security . . . any manipulative or deceptive device or
21 contrivance in contravention of such rules and regulations as the Commission may prescribe[.]” 15
22 U.S.C. § 78j(b). SEC Rule 10b-5, promulgated under the authority of Section 10(b), in turn,
23 provides that “[i]t shall be unlawful for any person . . . (a) To employ any device, scheme, or
24 artifice to defraud, (b) To make any untrue statement of a material fact or to omit to state a
25 material fact necessary in order to make the statements made, in light of the circumstances under
26 which they were made, not misleading, or (c) To engage in any act, practice, or course of business
27 which operates or would operate as a fraud or deceit upon any person, in connection with the
28 purchase or sale of any security.” 17 C.F.R. § 240.10b-5. Thus, the basic elements of a Rule 10b-

1 5 claim are: (1) a material misrepresentation or omission of fact, (2) scienter, (3) a connection with
2 the purchase or sale of a security, (4) transaction and loss causation, and (5) economic loss. *In re*
3 *Daou Systems, Inc.* 411 F.3d 1006, 1014 (9th Cir. 2005).

4 A statement or omission is misleading regarding a material fact “when there is ‘a
5 substantial likelihood that the disclosure of the omitted fact would have been viewed by the
6 reasonable investor as having significantly altered the ‘total mix’ of information made available.”
7 *Matrixx Initiatives, Inc. v. Siracusano*, 131 S. Ct. 1309, 1318 (2011) (citing *Basic Inc. v. Levinson*,
8 485 U.S. 224, 231-32 (1988)). “Scienter may be established, by showing that the defendants knew
9 their statements were false, or by showing that defendants were reckless as to the truth or falsity of
10 their statements.” *Gebhart v. S.E.C.*, 595 F.3d 1034, 1041 (9th Cir. 2010).

11 To establish a prove a prima facie case violation of Section 20(a), plaintiff must prove: (1)
12 a primary violation of federal securities laws and (2) that the defendant exercised actual power or
13 control over the primary violator (*Affymax*). *Howard v. Everex Sys., Inc.*, 228 F.3d 1057, 1065
14 (9th Cir. 2000).

15 **C. Federal Rule of Civil Procedure 9(b) and the PSLRA**

16 Under the Private Securities Litigation Reform Act (“PSLRA”), securities fraud claims
17 must satisfy the heightened pleading standards set forth in Rule 9(b) of the Federal Rules of Civil
18 Procedure and the PSLRA itself. *Zucco Partners, LLC v. Digimarc Corp.*, 552 F.3d 981, 990 (9th
19 Cir. 2009). Rule 9(b) requires a plaintiff alleging fraud or mistake to “state with particularity the
20 circumstances constituting fraud or mistake.” Fed. R. Civ. P. 9(b). The PSLRA requires a
21 plaintiff alleging securities fraud to “plead with particularity both falsity and scienter.” *Zucco*
22 *Partners*, 552 F.3d at 990-91; accord *Tellabs, Inc. v. Makor Issues & Rights, Ltd.*, 551 U.S. 308,
23 314 (2007). With respect to falsity, the complaint must “specify each statement alleged to have
24 been misleading, [and] the reason or reasons why the statement is misleading.” 15 U.S.C. § 78u-
25 4(b)(1). With respect to scienter, the complaint must “state with particularity facts giving rise to a
26 strong inference that the defendant acted with the required state of mind.” 15 U.S.C. § 78u-
27 4(b)(2).

28 To satisfy the requisite state of mind element, “a complaint must allege that the defendant[

1] made false or misleading statements either intentionally or with deliberate recklessness.” *Zucco*,
 2 552 F.3d at 991 (citation omitted). Facts showing mere recklessness, or a motive to commit fraud
 3 and opportunity to do so, provide some reasonable inference of intent, but are not sufficient to
 4 establish a strong inference of deliberate recklessness. *In re VeriFone Holdings, Inc. Sec. Litig.*,
 5 704 F.3d 694, 701 (9th Cir. 2012) (citation omitted). As such, the Court “must consider plausible
 6 nonculpable explanations for the defendant’s conduct, as well as inferences favoring the plaintiff.”
 7 *Tellabs*, 551 U.S. at 323–24. In evaluating whether a complaint satisfies the “strong inference”
 8 requirement, courts must consider the allegations and other relevant material holistically, not
 9 “scrutinized in isolation.” *VeriFone*, 704 F.3d at 701.

10 **DISCUSSION**

11 The plaintiffs allege three categories of misleading statements: statements regarding i)
 12 Fresenius expanding use of Omontys; ii) the safety and efficacy of Omontys; and iii) the reasons
 13 for the change to the label of Omontys. The allegedly misleading statements identified by the
 14 plaintiffs occurred on August 8, 2012 (¶ 87), November 8, 2012 (¶ 94) and February 12, 2013 (¶
 15 106). *See also* Dkt. No. 53 (“Opp.”) at 11-13 (plaintiffs’ opposition brief identifying the
 16 misleading statements). All three categories rely on the allegation that Affymax and the individual
 17 defendants “knew that there were serious adverse reactions to Omontys which negated the
 18 Company’s statements about the drug’s safety and efficacy” but nonetheless “continued to
 19 disseminate materially false and misleading statements regarding Omontys, causing their financial
 20 statements and projections to be materially false and misleading, in violation of the Exchange
 21 Act.” ¶ 10; *see also id.* (“Defendants knew, or recklessly disregarded the fact, that as early as
 22 August 2012, the use of Omontys was linked to allergic reactions and respiratory distress.”). The
 23 substance and materiality of the defendants’ knowledge of adverse reactions associated with
 24 Omontys at the time of the statements identified by the plaintiffs is therefore central to the
 25 plaintiffs’ claims.

26 **A. August 8, 2012 statements**

27 The plaintiffs allege that the defendants’ August 8, 2012 statements mislead the market
 28 about the safety and efficacy of Omontys and about Fresenius’s supposed continuing and

1 expanding adoption of Omontys. ¶¶ 87, 106; Opp. (“Opp.”) at 13. The plaintiffs allege that
2 defendant Duliege’s statement that “we haven’t heard anything of concern back. It continues to
3 progress as planned, so no nothing specific that way,” falsely represented that Omontys did not
4 present any safety concerns, even though “Defendants were well aware that the injection of
5 Omontys caused patients severe allergic reactions, resulting in hospitalization and death.” Opp.
6 at 13 (citing ¶ 87). The plaintiffs likewise allege that defendant Cross mislead investors when he
7 stated “I think the increase in Q2 was very consistent with our expectations and so, I don’t--we
8 don’t have any reason to update our guidance at this point.” *Id.* In addition, according to the
9 plaintiffs, at this time the defendants already knew that Fresenius’s patients would likely convert
10 back to Epogen based on the adverse reactions associated with Omontys and, consequently, the
11 defendants mislead the market by describing Fresenius as “converting” to Omontys, rather than
12 merely considering Omontys on a pilot program basis. ¶¶ 87, 106; Opp. at 11-13.

13 In response, the defendants argue that the first adverse event was reported to the FDA on
14 August 14, 2012—a week after the statements at issue—and, consequently, the plaintiffs do not
15 adequately allege that these statements were false when made or that the defendants had the
16 requisite scienter. Dkt. No. 58 at 4.

17 The Court agrees that the timing of the first reported adverse events precludes plaintiffs’
18 claims based on the August 8, 2012 statements. Exhibit 1 to the plaintiffs’ opposition brief lists
19 the adverse events associated with Omontys reported to the FDA. Dkt. No. 53-1 (the “adverse
20 events report”).⁴ Consistent with the adverse events report (page 4), the parties agree that the first

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22 ⁴ Per 21 C.F.R. Section 314.80(a), after a drug has gone to market, the drug manufacturer
23 is required to report adverse events experienced by patients using the drug to the FDA. Adverse
24 events that are life-threatening or result in death or hospitalization must be reported within 15
25 calendar days (expedited). 21 C.F.R. § 314.80(c). Less serious events must be reported
26 periodically (non-expedited). *Id.* Adverse events must be reported when the adverse events are
27 “associated with the use of a drug in humans, whether or not considered drug related.” 21 C.F.R.
28 § 314.80(a). Accordingly, a reported adverse event does not necessarily signify that the drug
caused the adverse event. *See also* 21 C.F.R. § 314.80 (a reported adverse event “does not
necessarily reflect a conclusion by the applicant or FDA that the report or information constitutes
an admission that the drug caused or contributed to an adverse effect.”).

Plaintiffs attach a 99-page FDA Adverse Event Report as Exhibit 1 to their Opposition,
purportedly obtained by the plaintiffs through a FOIA request. The report lists adverse events
associated with Omontys reported by the manufacturer (Affymax) or health care professionals,
patients or others not associated with Affymax. The defendants argue that “[t]he Court should

1 death associated with Omontys was reported by Affymax to the FDA on August 14, 2012. *See*
 2 *Opp.* at 20 (plaintiffs asserting that “The first death was reported August 14, 2012”); Dkt. No. 58
 3 at 4 (defendants stating: “as Exhibit 1 to the Opposition demonstrates, that [death reported on
 4 August 14, 2012] was the first [serious adverse event] of any type reported”). As the defendants
 5 point out, the death reported on August 14, 2012 is the first report of any adverse event in the
 6 report. A second adverse event was also reported that day of an anaphylactic reaction⁵ and chest
 7 discomfort. The event was deemed life-threatening and required hospitalization. Dkt. No. 53-1 at
 8 5. The Court will not presume, absent specific factual allegations, that the defendants were aware
 9 of the adverse events before they were reported to the FDA.⁶ The plaintiffs have accordingly
 10 failed to allege either falsity or scienter regarding the August 8, 2012 statements.

11 **B. November 8, 2012 statements**

12 The plaintiffs allege that the following statements by defendants Orwin and Knapp on

13
 14 reject any arguments by Plaintiffs based on this exhibit as it is not part of the relevant pleadings.”
 15 Dkt. No. 58 at 4 n.3. The defendants themselves, however, make arguments based on the exhibit,
 16 conceding its authenticity, accuracy and relevance. *See id.* (“as Exhibit 1 to the Opposition
 17 demonstrates, that [death reported on August 14, 2012] was the first [serious adverse event] of any
 18 type reported”); *id.* at 6 n.5 (“Exhibit 1 cited by the Plaintiffs is consistent with this assessment.”).

19 Moreover, the report is referenced extensively in the CAC. *See, e.g.*, ¶ 18 (“Close to 100
 20 ‘adverse events’ tied to the drug were reported to the FDA beginning in August 2012, including 14
 21 deaths by February 22, 2013, the day before the recall.”), ¶ 19 (“There can be no doubt that
 22 Defendant Orwin knew of these adverse event reports as early as August since, by definition,
 23 many of them had to come directly from the manufacturer on an expedited basis.”), ¶ 21 (“The
 24 first adverse event report due to anaphylaxis was received at the FDA in August 2012.”), ¶ 76 (“In
 25 August, September, and October of 2012, some Affymax sales representatives selling Omontys to
 26 dialysis clinics in Texas, Oklahoma, Mississippi, Louisiana, and Alabama filed Adverse Event
 27 reports concerning serious reactions with Omontys.”), ¶¶ 88, 96, 116. As the foregoing
 28 demonstrates, the Adverse Event Report attached as Exhibit 1 to the Opposition is essential to the
 CAC and no party questions its authenticity. The Court therefore may properly consider Exhibit 1
 in connection with this motion to dismiss. *See, e.g., Sanders v. Brown*, 504 F.3d 903, 910 (9th
 Cir. 2007) (“Review [on a motion to dismiss] is generally limited to the contents of the complaint,
 but a court can consider a document on which the complaint relies if the document is central to the
 plaintiff’s claim, and no party questions the authenticity of the document.”).

⁵ Plaintiffs define anaphylaxis as “an acute allergic reaction in which the airways constrict
 and patients struggle to breathe, blood pressure plummets and the heart may beat erratically and be
 unable to pump enough blood.” ¶ 19. The defendants assert that the Mayo Clinic defines
 anaphylaxis as “a severe potentially life-threatening allergic reaction.” Dkt. No. 47 at 5 n.3 (citing
 www.mayoclinic.com/health/anaphylaxis/DS00009).

⁶ At oral argument, counsel for the plaintiffs referred to documentation purportedly
 showing that Affymax was aware of adverse events before August 8, 2012. However, these
 allegations were not included in the Consolidated Amended Complaint and were not properly
 before the Court. The plaintiffs may state these allegations in an amended complaint and the
 Court will review their materiality upon a renewed motion to dismiss.

1 November 8, 2012 “concealed the true economic prospects for Omontys by touting the future
2 success of their relationship [with Fresenius] despite their knowledge that this relationship was in
3 jeopardy”:

- 4
- 5 • [Defendant Orwin] “Fresenius is well underway in gaining clinical
6 and operational experience with converting centers to Omontys and
7 we believe that they are pleased with their overall experience so far.
8 We look forward to potentially expanding our relationship with
9 Fresenius for the longer term, broader contract in the future.”

10 (...)

11 “Yes. And as to what they’re particularly pleased about, I would say
12 that they’ve remarked that they’re pleased with the overall levels
13 experienced,... I will say that I’m very pleased with the customers
14 that we’ve signed so far and with the potential that exists with them
15 for significant uptake of Omontys.”

- 16
- 17 • [Defendant Knapp] “Fresenius to date is treating approximately
18 10,000 patients in this program. It is our expectation that they will
19 continue to treat these patients under our existing supply agreement
20 until this agreement ends or we execute a new agreement. . . . While
21 there is no guarantee of expanded business, we continue to be very
22 encouraged by the ongoing high level of interest and the overall rate
23 of adoption. Over the coming months we expect to see many of the
24 organizations that decided to pilot Omontys begin making their
25 decision to move forward with full or close to full-scale conversions.
26 . . . And I’m -- I feel very confident with what we’ve seen today that
27 there won’t be surprises at the end of this.”

28 (...)

“Yes, this is Jeff. The -- it’s a difficult question to answer, in part
because it really varies from customer to customer and kind of their
confidence in the drug, their just overall level and readiness to try
new things. . . .As you might well know, some of these MDOs that
we announced during our previous quarterly call have now been
using it for a few months and I think are much more closer to
making a decision and I think we’ll see the benefits of that begin
hopefully in this current quarter and certainly well into 2013.” *Id.*

Opp. at 12 (citing ¶ 94).

The plaintiffs argue that, contrary to these statements, by November 8, 2012, the
defendants knew based on the adverse event reports that Affymax’s relationship with Fresenius

1 was in jeopardy that Fresenius’s patients would likely not continue using Omontys. The plaintiffs
2 also assert that the defendants misrepresented that Fresenius’s customers had “converted” to
3 Omontys while Fresenius was in fact assessing Omontys under a pilot program. The plaintiffs
4 argue that the defendants’ statements therefore “concealed the true economic prospects for
5 Omontys.” Opp. at 13.

6 According to the adverse event report, by November 8, 2012, the adverse events associated
7 with Omontys and reported to the FDA included four deaths, three life-threatening events, and six
8 other events requiring hospitalization. However, there is no factual allegation in the Consolidated
9 Amended Complaint from which the Court can conclude that this degree of adverse events
10 concerned Fresenius or otherwise jeopardized the Affymax-Fresenius relationship. On the
11 contrary, three months later (February 13, 2013), when Fresenius announced that it would “pause
12 expansion” of the Omontys pilot program, it acknowledged that it had “seen infrequent allergic
13 reactions” to Omontys, including a “small number [that] have been serious.” ¶ 108. Nonetheless,
14 Fresenius recommended continued use of Omontys “as it has been providing effective anemia
15 management.” *Id.* The letter concluded by noting that “[a]s many of you have become quite
16 comfortable with the medication, physicians and facilities that have been using Omontys who
17 wish to continue prescribing it for new patients may choose to do so.” *Id.*

18 The plaintiffs also argue that the defendants’ proffered reason for seeking to change
19 Omontys’s label in October 2012—“to bring the language into our label in line with what exists
20 for the other ESAs”—misled the market because the change was in fact sought in response to the
21 serious adverse events reported in connection with Omontys.⁷ Opp. at 14 (citing ¶ 94). In their
22 opposition to the motion to dismiss, the plaintiffs identify the following two statements that
23 allegedly misrepresented the reasons for the label change:

- 24 • [Defendant Orwin] “Since launch thousands of patients have
25 received Omontys in the post-marketing setting. As anticipated,
26 this broad experience has been helpful in further informing real-

27 ⁷ The plaintiffs allege that the defendants’ proffered reasoning for the label change was
28 misleading; they do not allege that the new label was not, in fact, “in line with what exists for
other ESAs.”

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world use of the compound where infrequent, but sometimes serious, allergic reactions have been reported. To that end, we have proposed to the FDA, and have now updated our label to include, additional language regarding allergic reactions similar to that which is found in the existing labels for other ESAs. . . . And you're right; allergic reactions are mentioned, but they're not described in the same sort of wholesome way that they are in other ESAs, which is what led us, based on the experience and reported events, however infrequent, to look at that against what was in the label and decide that it made sense for us to bring the language into our label in line with what exists for the other ESAs. But, I'll let Anne-Marie speak specifically to that language."

- [Defendant Duliege] "Now that we have thousands of patients, literally more than 10,000 patients, we felt it was prudent to update our label with the new information that we have accumulated as part of our pharmacovigilance severance program. Specifically, the report of allergic reactions that you mentioned in the label continues to be infrequent and a result on treatment. However, some of these reactions have been more serious. Some of the most recent reaction (inaudible) have been more serious and this is what we have included as information in the label to bring, as you said, John, our label in line with the existing label of other ESA. . . ."

Opp. at 14 (citing ¶ 94).

The defendants respond that the plaintiffs do not adequately allege that the statements were false because the defendants expressly stated that the label change was "prompted" by adverse events associated with Omontys. Dkt. No. 58 at 8. Specifically, defendant Orwin stated that the change was proposed after "infrequent, but sometimes serious, allergic reactions have been reported" and that Affymax was "led" to seek the change "based on the experience and reported events." Similarly, defendant Duliege stated that Affymax "felt it was prudent to update our label with new information that we have accumulated as part of our pharmacovigilance [surveillance] program" and that "[s]ome of the most recent reaction (inaudible) have been more serious." Affymax's Form 10-Q filed the same day likewise stated that "in November 2012, we revised the Omontys label to reflect adverse events from post-marketing spontaneous reports related to serious allergic reactions." Dkt. No. 49-9 at 34 (Kaban Decl., Ex. 9).

In light of the defendants' express disclosures that the label change was sought in response

1 to adverse events associated with Omontys, the Court agrees that the plaintiffs have not adequately
2 alleged that the defendants falsely represented that the label change was sought to make the label
3 consistent with other ESAs.

4 **C. February 12, 2013 statements**

5 The plaintiffs allege that the following February 12, 2013 statements by defendant Orwin
6 during a conference call with investors misrepresented the safety and efficacy of Omontys:

7 And the question was -- to provide a little bit more color on the
8 Fresenius agreement, and what kind of information they think they
9 will need in order to make a decision to go wider with Omontys. . . .
10 Obviously, the safety and efficacy were established, and are
11 typically best established in a comparative Phase 3 program.
12 Fortunately for us, we had a very large program, and a very
13 comprehensive evaluation of both safety and efficacy. But I think
14 what they want to see is that they could replicate those kinds of
15 results in their patient population, and that by treating 10,000
16 patients, and looking at patients as their own controls, but also
17 looking at a matched cohort, they could learn a lot about the
18 performance of Omontys in their patient population, before making
19 a decision to utilize the product more broadly. . . . So, I think what
20 they need to see is they need to see how the product performs in
21 their population. Safety and efficacy, of course, always, but even
22 more importantly, the dose efficiency in their population, since
23 safety and efficacy were already fairly well-established.

24 Opp. at 13 (citing ¶ 106)⁸. The plaintiffs allege that these statements were false “because
25 Defendants gave the market the impression that the real issue [with Fresenius’s pilot assessment of
26 Omontys] was dose efficacy and *not* safety and efficacy, when, by this point in time, Defendants
27 were well aware that the injection of Omontys caused patients severe allergic reactions, resulting
28 in hospitalization and death. Opp. at 13 (citing ¶ 106). The plaintiffs allege that “[o]ver 100
‘adverse events’ tied to the drug were reported to the FDA beginning in August 2012, including 7
deaths prior to this conference call.” *Id.*

In response, the defendants argue that “Plaintiffs fail to establish that Affymax or any

⁸ The plaintiffs’ opposition brief erroneously identifies the February 12, 2013 statement in paragraph 106 of the Consolidated Amended Complaint as occurring on August 8, 2012. *See* Opp. at 13.

1 Defendant had a duty to disclose this information at the time of the statement.”⁹ Dkt. No. 58 at 5.
2 Citing *Matrixx Initiatives, Inc. v. Siracusano*, 131 S. Ct. 1309, 1321 (2011), the defendants argue
3 that the plaintiffs have failed to established “the ‘something more’ that is required before a drug
4 manufacturer has an affirmative duty to disclose post-marketing SAEs.” In support, the
5 defendants argue that four “important, publicly disclosed facts” establish that the adverse events
6 reported do not “var[y] materially (in frequency, severity or some other way) from what would
7 have been expected based on the publicly disclosed information:”

- 8 • The “black box” warning for Omontys, reproduced above, states that “ESAs increase the
9 risk of death, myocardial infarction, stroke, venous thromboembolism, thrombosis of
10 vascular access and tumor progression and recurrence;”
- 11 • The Omontys label “also made clear that, during the Phase 3 clinical trials, 22.8% of the
12 patients receiving OMONTYS either died or suffered heart attacks or other serious adverse
13 cardiovascular events;”
- 14 • In November 2012, Affymax publicly disclosed that it had modified the Omontys label as
15 a result of serious post-marketing allergic reactions; and
- 16 • “the patient population for Omontys is an extremely sick one, suffering from Chronic
17 Kidney Disease and related anemia and requiring dialysis” and the “average life span of all
18 dialysis patients is sadly less than three years.”

17 Dkt. No. 58 at 7.

18 a. Material falsity

19 The Court finds that the plaintiffs have adequately pleaded that defendant Orwin’s
20 statements on February 12, 2013 were misleading and misrepresented the safety of Omontys.
21 Specifically, Orwin represented that the safety of Omontys was already “established,” and
22 therefore not a concern, when he stated that “[o]bviously, the safety and efficacy were established,
23 and are typically best established in a comparative Phase 3 program. Fortunately for us, we had a
24 very large program, and a very comprehensive evaluation of both safety and efficacy.” ¶ 106.

25
26 ⁹ The Court rejects the defendants’ assertion that this statement is not actionable because it
27 “has little to do with the safety of Omontys; rather, it relates to the type of analysis of Omontys
28 Affymax expected Fresenius, a major chain of dialysis centers, to undertake prior to expanding its
use of the drug in additional centers.” Dkt. No. 58 at 5. Even if the statement related to the type
of analysis Affymax expected Fresenius to undertake, the question remains whether the statement
misled the market about the safety of Omontys.

1 Orwin reinforced this impression when he stated that “I think what they [Fresenius] need to see is
2 they need to see how the product performs in their population. Safety and efficacy, of course,
3 always, *but even more importantly, the dose efficiency in their population, since safety and*
4 *efficacy were already fairly well-established.”* *Id.* (emphasis added). Given the serious adverse
5 events reported to the FDA by this time, including, by the Court’s count, nine deaths, four life-
6 threatening events, and sixteen other events requiring hospitalization (Dkt. No. 53-1), the plaintiffs
7 have adequately pleaded that these statements were false.

8 The Court further finds that the misrepresentation was material. In *Matrixx*, the Supreme
9 Court held that “the materiality of adverse event reports cannot be reduced to a bright-line rule and
10 a pharmaceutical manufacturer does not necessarily need to disclose all reports of adverse events.
11 *Matrixx*, 131 S. Ct. at 1313-14, 1321. As the Court explained, “[a]dverse event reports are daily
12 events in the pharmaceutical industry; in 2009, the FDA entered nearly 500,000 such reports into
13 its reporting system” and “[t]he fact that a user of a drug has suffered an adverse event, standing
14 alone, does not mean that the drug caused that event.” *Id.* Rather than a bright-line rule, *Matrixx*
15 instructs that the “question remains whether a *reasonable* investor would have viewed the
16 nondisclosed information as having *significantly* altered the ‘total mix’ of information made
17 available.” *Id.* (emphasis in original and internal punctuation omitted) (citing *Basic*, 485 U.S. at
18 232). Accordingly, “the mere existence of reports of adverse events—which says nothing in and
19 of itself about whether the drug is causing the adverse events—will not satisfy this [total mix of
20 information] standard.” *Id.* Rather, “something more is needed” to make the existence of reports
21 of adverse events something which a reasonable investor would view as significantly altering the
22 ‘total mix’ of information made available. *Id.* “[T]hat something more is not limited to statistical
23 significance and can come from the source, content, and context of the [adverse event] reports. *Id.*
24 (internal punctuation and citation omitted).

25 Notably, the *Matrixx* Court concluded that such a “contextual inquiry may reveal in some
26 cases that reasonable investors would have viewed reports of adverse events as material even
27 though the reports did not provide statistically significant evidence of a causal link. *Id.* In fact,
28 the *Matrixx* Court concluded that it was substantially likely that a reasonable investor would have

1 viewed adverse event reports “about more than 10 patients who had lost their sense of smell after
2 using Zicam” as having significantly altered the total mix of information made available. *Id.* at
3 1322-23.

4 Here, given that Omontys is Affymax’s primary product, the Court further finds it
5 substantially likely that a reasonable investor would have viewed over two dozen fatal, life-
6 threatening and other adverse reactions to Omontys requiring hospitalization as significantly
7 altering the “total mix” of information made available. *See, e.g., id* at 1323 (“Assuming the
8 complaint’s allegations to be true, however, Matrixx had information indicating a significant risk
9 to its leading revenue-generating product.”). The Court accordingly finds the misrepresentations
10 material, notwithstanding the four “important, publicly disclosed facts” identified by the
11 defendants.

12 First, as the defendants recognized when they proposed a label change, the original “black
13 box” warning did not warn of the serious allergic reactions seen in “real-world use” of Omontys.
14 ¶ 94. It is one thing to note generally that a class of drugs, to which Omontys belongs, “increase[]
15 the risk of death, myocardial infarction, stroke, venous thromboembolism, thrombosis of vascular
16 access and tumor progression and recurrence.” It is a wholly different matter to disclose to the
17 market that this particular drug has been linked to over two dozen deaths, life-threatening
18 conditions and other adverse reactions requiring hospitalization.

19 Second, the defendants’ reliance on the label’s package insert is misguided.¹⁰ As an initial
20 matter, the package insert referenced the clinical trials in the context of demonstrating the *safety* of
21 Omontys, not the dangers. *See* Dkt. No. 49-19 (Kaban Decl., Exs. 19 at § 14 (“The efficacy and
22 safety of Omontys in patients with CKD on dialysis were demonstrated in two randomized, active-
23 controlled, open-label, multi-center clinical studies”). Moreover, the defendants themselves
24

25 ¹⁰ The 14-page package insert states, in the portion cited by the defendants, “Studies 1 and
26 2 had a pre-specified, prospective, pooled analysis of a composite cardiovascular safety endpoint
27 consisting of death, myocardial infarction, stroke, or serious adverse events of congestive heart
28 failure, unstable angina or arrhythmia. In patients receiving Omontys, 22.8% experienced one of
these events compared to 24.4% receiving epoetin (hazard ratio 0.95, 95% CI 0.77, 1.17).” Dkt.
No. 49-19 (Kaban Decl., Exs. 19 at § 14).

1 note that “the average life span of all dialysis patients is sadly less than three years.” Nothing in
2 the package insert indicates that 22.8% of patients suffered “serious adverse cardiovascular
3 events” as a result of the Omontys rather than as a result of their medical conditions. Indeed, if
4 Omontys caused serious adverse reactions in over a quarter of its users it presumably would never
5 have been approved by the FDA.

6 Third, while Affymax referred to “serious allergic reactions” when it discussed the
7 proposed label change in November 2012, it emphasized that the reactions were “infrequent” and
8 suggested that the reactions were in line with reactions to other ESAs. Whether or not that was
9 true in November 2012, by February 12, 2013, the deaths, life-threatening reactions and other
10 reactions requiring hospitalization had more than doubled. As stated above, the Court finds that a
11 reasonable investor would have found that the adverse events reported by February 12, 2013
12 significantly altered the total mix of information available. By February 12, 2013, nine deaths,
13 four life-threatening events, and sixteen other events requiring hospitalization had already been
14 reported to the FDA. In the eleven days between February 12 and February 23, when Affymax
15 announced a total recall of Omontys, five additional deaths, one life-threatening reaction and one
16 other reaction requiring hospitalization had been reported to the FDA. If Affymax believed that
17 these additional adverse events warranted a total recall of Omontys, it stands to reason that a
18 reasonable investor would have found that the adverse events reported by February 12, 2013
19 significantly altered the total mix of available information.

20 Fourth, the assertion that the “average life span of all dialysis patients is sadly less than
21 three years” has nothing to do with information linking use of Omontys to deaths and other serious
22 reactions.

23 b. Scienter

24 The Court also finds that the plaintiffs have adequately alleged that Orwin acted with the
25 requisite scienter when he made the misrepresentations discussed above. “[W]hen determining
26 whether the pleaded facts give rise to a ‘strong’ inference of scienter [a required under the
27 PSLRA], the court must take into account plausible opposing inferences.” *Zucco Partners, LLC v.*
28 *Digimarc Corp.*, 552 F.3d 981, 991 (9th Cir. 2009) (citation and internal punctuation omitted). “A

1 court must compare the malicious and innocent inferences cognizable from the facts pled in the
2 complaint, and only allow the complaint to survive a motion to dismiss if the malicious inference
3 is at least as compelling as any opposing innocent inference.” *Id.* “Scienter may be established,
4 by showing that the defendants knew their statements were false, or by showing that defendants
5 were reckless as to the truth or falsity of their statements.” *Gebhart v. S.E.C.*, 595 F.3d 1034,
6 1041 (9th Cir. 2010).

7 Here, as nearly all of the adverse events were reported to the FDA by Affymax there is no
8 dispute that Affymax was aware of the adverse events. Plaintiffs have therefore adequately
9 alleged that Orwin, Affymax’s CEO, knew that his statements that the safety of Omontys had
10 already been “established” were false, or that he was reckless regarding the truth or falsity of those
11 statements. The interference that Orwin acted with the requisite knowledge or recklessness is
12 more compelling than the interference that he did not. Scienter is therefore established.

13 c. Safe harbor for forward-looking statements

14 The PSLRA includes “safe harbor” provisions for forward-looking statements. “The
15 provisions provide that a person shall not be liable for any ‘forward-looking statement’ that is
16 ‘identified’ as such, and is accompanied ‘by meaningful cautionary statements identifying
17 important factors that could cause actual results to differ materially from those in the forward-
18 looking statement.’” *No. 84 Employer-Teamster Joint Council Pension Trust Fund v. Am. W.*
19 *Holding Corp.*, 320 F.3d 920, 936 (9th Cir. 2003) (citing 15 U.S.C. § 78u-5(c)(1)(A)(i)). A
20 “forward-looking statement” is any statement regarding (1) financial projections, (2) plans and
21 objectives of management for future operations, (3) future economic performance, or (4) the
22 assumptions “underlying or related to” any of these issues. *Id.*

23 Orwin’s February 12, 2013 statements are not forward looking because they relate to the
24 “established” safety of Omontys, not projections, plans, objectives, future performance, or the
25 assumptions underlying those issues. The safe harbor provisions therefore do not apply to these
26 statements. *Cf. id.* at 397 (“the statements by America West do not constitute ‘forward-looking’
27 statements. Each is a disclosure of the fine imposed by the settlement agreement for past
28 violations of FAA regulations and a description of the present effects of their imposition on the

1 company”).

2 d. Loss causation

3 To state a Rule 10b–5 claim, “the plaintiff shall have the burden of proving that the act or
4 omission of the defendant alleged to violate this chapter caused the loss for which the plaintiff
5 seeks to recover damages.” *In re Daou Sys.*, 411 F.3d at 1014 (citing 15 U.S.C. § 78u–4(b)(4)).
6 “To establish loss causation plaintiffs must show that the stock price dropped after the truth was
7 ‘revealed.’” *In re LeapFrog Enterprises, Inc. Sec. Litig.*, 527 F. Supp. 2d 1033, 1040-41 (N.D.
8 Cal. 2007). There is no dispute that the stock price of Affymax dropped after the adverse
9 reactions associated with Omontys were revealed when Affymax announced the recall. The
10 plaintiffs have therefore adequately pleaded loss causation regarding the February 12, 2013
11 statements.

12 **D. Violation of Section 20(a)**

13 To establish a prove a prima facie case violation of Section 20(a), plaintiff must prove: (1)
14 a primary violation of federal securities laws and (2) that the defendant exercised actual power or
15 control over the primary violator (Affymax). *Howard v. Everex Sys., Inc.*, 228 F.3d 1057, 1065
16 (9th Cir. 2000).

17 The defendants argue that the section 20(a) claim fails because the Consolidated Amended
18 Complaint “offers only boilerplate allegations of control based on ‘executive status.’” Dkt. No. 47
19 at 25 (citing ¶¶ 130-31). The Court agrees. The plaintiffs have not pleaded any factual allegations
20 from which the Court can conclude that the individual defendants “exercised actual power or
21 control over the primary violator,” notwithstanding their executive status. *See, e.g., Paracor Fin.,*
22 *Inc. v. Gen. Elec. Capital Corp.*, 96 F.3d 1151, 1163 (9th Cir.1996) (“The fact that a person is a
23 CEO or other high-ranking officer within a company does not create a presumption that he or she
24 is a ‘controlling person.’”).

25 **CONCLUSION**

26 The defendants’ motion to dismiss is GRANTED IN PART and DENIED IN PART. The
27 defendants’ motion is GRANTED regarding Count I (violations of Section 10(b) and SEC
28 Rule 10b–5) against individual defendants Cross, Duliege, and Knapp. The motion is GRANTED

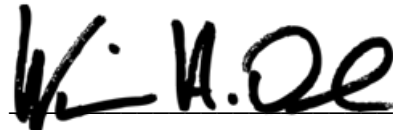
1 regarding Count I (violations of Section 10(b) and SEC Rule 10b-5) against Affymax and
2 individual defendant Orwin based on the August 2012 and November 2012 statements. The
3 motion is GRANTED regarding Count II (violation of Section 20(a)) against all defendants. The
4 Consolidated Amended Complaint is DISMISSED WITHOUT PREJUDICE with regard to the
5 claims identified above. Any amended complaint shall be filed within 30 days of this Order.

6 The motion is DENIED regarding Count I (violations of Section 10(b) and SEC Rule 10b-
7 5) against Affymax and individual defendant Orwin based only on the February 12, 2013
8 statements regarding the safety of Omontys.

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IT IS SO ORDERED.

Dated: January 21, 2014



WILLIAM H. ORRICK
United States District Judge