

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF DELAWARE

SHIRE VIROPHARMA INCORPORATED, )  
)  
Plaintiff, )  
)  
v. ) C.A. No. 17-414 (MSG)  
) CONSOLIDATED  
CSL BEHRING LLC and )  
CSL BEHRING GmbH, ) **JURY TRIAL DEMANDED**  
)  
Defendants. )

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SHIRE VIROPHARMA INCORPORATED, )  
)  
Plaintiff, )  
)  
v. ) C.A. No. 18-1476 (MSG)  
)  
CSL BEHRING LLC and )  
CSL BEHRING GmbH, ) **JURY TRIAL DEMANDED**  
)  
Defendants. )

**SECOND AMENDED COMPLAINT<sup>1</sup>**

Plaintiff Shire ViroPharma Incorporated (“Shire”), by its undersigned attorneys, brings this action against defendants CSL Behring LLC and CSL Behring GmbH (collectively, “CSL” or “Defendants”) and hereby alleges as follows:

**NATURE OF THE ACTION**

1. This action for patent infringement is brought pursuant to the patent laws of the United States, 35 U.S.C. § 1 *et seq.* Shire seeks judgment that Defendants are directly infringing, inducing others to infringe, and contributorily infringing U.S. Patent No. 10,080,788 (the “‘788 Patent”), U.S. Patent No. 10,105,423 (the “‘423 Patent”), and U.S. Patent No. 10,130,690 (the

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<sup>1</sup> This Second Amended Complaint pertains to C.A. No. 18-1476 (MSG), which has been consolidated with C.A. No. 17-414 (MSG). (D.I. 126).

“‘690 Patent”), and U.S. Patent No. 10,201,595 (the “‘595 Patent”), attached hereto as Exhibits 1-4 (together, the “Asserted Patents”).

2. This action is related to a previous action filed by Shire against CSL. In that action (the “First-Filed Action”), Shire alleges that CSL infringes U.S. Patent No. 9,616,111. This action has been consolidated with the First Filed Action. *See* D.I. 126.

### **PARTIES**

3. Plaintiff Shire ViroPharma Incorporated is a Delaware corporation, with a principal place of business located at 300 Shire Way, Lexington, MA 02421.

4. Shire is a global biotechnology company focused, *inter alia*, on serving people with rare diseases and other highly specialized conditions.

5. CSL Behring LLC is a Delaware limited liability company, with its principal place of business located at 1020 First Avenue, King of Prussia, PA 19406.

6. CSL Behring GmbH is a German company with its principal place of business at Emil-von-Behring-Strasse 76, Marburg, Hessen, 35041 Germany, and is a corporate affiliate of CSL Behring LLC.

7. Defendants are in the business of developing, manufacturing, and marketing pharmaceutical drug products and biologics and selling them throughout the United States and the world.

### **JURISDICTION AND VENUE**

8. This Court has subject matter jurisdiction over this action, pursuant to 28 U.S.C. §§ 1331 and 1338(a) because the action arises under the patent laws of the United States.

9. This Court has general personal jurisdiction over Defendants because CSL Behring LLC is incorporated in Delaware and because Defendants knowingly transact business

in Delaware and, on information and belief, have engaged in infringing conduct in Delaware. CSL has also not objected to subject matter or personal jurisdiction in the First-Filed Action, which concerns the same infringing product and a related patent. This case has been consolidated with the First-Filed Action.

10. Venue is proper in this Court as to CSL Behring LLC pursuant to 28 U.S.C. § 1400(b) because CSL Behring LLC is incorporated in Delaware and, thus, resides in Delaware.

11. Venue is proper in this Court as to CSL Behring GmbH under 28 U.S.C. §1391(c)(3) because CSL Behring GmbH is not resident in the United States. CSL has also not objected to venue in the First-Filed Action. This case has been consolidated with the First-Filed Action.

### **SHIRE'S ASSERTED PATENTS**

12. Hereditary angioedema (“HAE”) is a rare genetic disorder causing insufficient natural production of functional or adequate amounts of a protein called C1 esterase inhibitor. This protein is needed to help regulate several complex processes involved in immune system function (complement, contact system) and fibrinolytic system function (blood clotting, bleeding). The main function of C1 esterase inhibitor is to prevent the spontaneous activation of the complement system, which can cause local or systemic inflammation. Patients suffering from HAE experience symptoms including unpredictable, recurrent attacks of swelling commonly affecting the hands, feet, arms, legs, face, abdomen, tongue, genitals, and larynx.

13. HAE can be treated by administering to patients with the disorder a drug product containing a C1 esterase inhibitor in order to restore the levels of C1 esterase inhibitor to levels sufficient to prevent or reduce the frequency or severity of HAE attacks.

14. Shire, including through corporate affiliates, makes and sells products for the treatment of HAE, including CINRYZE, FIRAZYR, KALBITOR, and TAKHZYRO, along with other products in development, including a product currently known as SHP616.

15. CINRYZE contains a human plasma-derived C1 esterase inhibitor as its active ingredient. CINRYZE is a C1 esterase inhibitor replacement therapy approved by the United States Food and Drug Administration (the “FDA”) for routine prophylactic treatment of angioedema attacks in pediatric, adolescent, and adult patients with HAE. It is indicated for intravenous (“IV”) administration at a concentration of 100 U/mL of human C1 esterase inhibitor. CINRYZE is sold by plaintiff Shire.

16. FIRAZYR is a peptide drug product approved for subcutaneous administration to treat acute attacks of HAE.

17. KALBITOR is a subcutaneously administered plasma kallikrein inhibitor indicated for treatment of acute attacks of HAE.

18. TAKHZYRO is a subcutaneously administered monoclonal antibody indicated for prophylactic treatment of HAE that the FDA approved for commercial marketing on August 23, 2018.

19. Shire and its affiliates are in the process of developing certain other products for the treatment of HAE, including a prophylactic C1 esterase inhibitor treatment to be administered subcutaneously rather than intravenously (known as SHP616).

#### **SHIRE’S ‘788 PATENT**

20. On September 25, 2018, the United States Patent and Trademark Office lawfully issued the ‘788 Patent, entitled “C1-INH Compositions and Methods for the Prevention and Treatment of Disorders Associated With C1 Esterase Inhibitor Deficiency.”

21. The claims of the ‘788 Patent are directed generally to a “method for prophylactic treatment of hereditary angioedema (HAE) comprising subcutaneously administering . . . a pharmaceutical composition comprising C1 esterase inhibitor, sodium citrate, and having a pH ranging from 6.5-8.0, wherein the C1 esterase inhibitor has a concentration of about 500 U/mL . . . .” The administration of the composition “increases the level of the C1 esterase inhibitor in the blood of the subject to at least about 0.4 U/mL,” and the “C1 esterase inhibitor comprises the amino acid sequence of residues 23 to 500 of SEQ ID NO: 1,” which amino acid sequence is identified in the ‘788 Patent.

22. Shire is the assignee and owner of all rights, title, and interest in the ‘788 Patent, and has the right to sue for infringement.

#### **SHIRE’S ‘423 PATENT**

23. On October 23, 2018, the United States Patent and Trademark Office lawfully issued the ‘423 Patent, entitled “C1-INH Compositions and Methods for the Prevention and Treatment of Disorders Associated With C1 Esterase Inhibitor Deficiency.”

24. The claims of the ‘423 Patent are directed generally to a “pharmaceutical composition comprising C1 esterase inhibitor, sodium citrate, and having a pH ranging from 6.5-8.0, wherein the C1 esterase inhibitor has a concentration of about 500 U/mL, and wherein the C1 esterase inhibitor comprises the amino acid sequence of residues 23 to 500 of SEQ ID NO: 1,” which amino acid sequence is identified in the ‘423 Patent.

25. Shire is the assignee and owner of all rights, title, and interest in the ‘423 Patent, and has the right to sue for infringement.

### **SHIRE'S '690 PATENT**

26. On November 20, 2018, the United States Patent and Trademark Office lawfully issued the '690 Patent, entitled "C1-INH Compositions and Methods for the Prevention and Treatment of Disorders Associated With C1 Esterase Inhibitor Deficiency."

27. The claims of the '690 Patent are directed generally to a "pharmaceutical composition comprising C1 esterase inhibitor, sodium citrate, and having a pH ranging from 6.5-8.0, wherein the C1 esterase inhibitor has a concentration of about 400-600 U/mL, and wherein the C1 esterase inhibitor comprises the amino acid sequence of residues 23 to 500 of SEQ ID NO: 1," which amino acid sequence is identified in the '690 Patent.

28. Shire is the assignee and owner of all rights, title, and interest in the '690 Patent, and has the right to sue for infringement.

### **SHIRE'S '595 PATENT**

29. On February 12, 2019, the United States Patent and Trademark Office lawfully issued the '595 Patent, entitled "C1-INH Compositions and Methods for the Prevention and Treatment of Disorders Associated With C1 Esterase Inhibitor Deficiency."

30. The claims of the '595 Patent are directed generally to a "method for prophylactic treatment of hereditary angioedema (HAE) comprising subcutaneously administering . . . a pharmaceutical composition comprising C1 esterase inhibitor, sodium citrate, and having a pH ranging from 6.5-8.0, wherein the C1 esterase inhibitor has a concentration of about 400-600 U/mL . . . ." The administration of the composition "increases the level of the C1 esterase inhibitor in the blood of the subject to at least about 0.4 U/mL," and the "C1 esterase inhibitor comprises the amino acid sequence of residues 23 to 500 of SEQ ID NO: 1," which amino acid sequence is identified in the '595 Patent.

31. Shire is the assignee and owner of all rights, title, and interest in the ‘595 Patent, and has the right to sue for infringement.

**DEFENDANTS’ MARKETING AND SALE OF HAEGARDA**

32. On or about July 25, 2017, Defendants began to sell in the United States a prophylactic C1 esterase inhibitor treatment for subcutaneous administration. Defendants market the new C1 esterase inhibitor product as “HAEGARDA.” HAEGARDA received FDA approval on June 22, 2017.

**DEFENDANTS’ INFRINGEMENT OF SHIRE’S ‘788 PATENT**

33. Defendants’ manufacture, importation, use, sale, and/or offer to sell HAEGARDA in the United States directly infringes, induces others to infringe, and/or contributorily infringes, either directly or under the doctrine of equivalents, one or more claims of Shire’s ‘788 Patent, including at least claim 1.

34. Shire’s ‘788 Patent claims a method for prophylactic treatment of HAE by subcutaneously administering a composition comprising a C1 esterase inhibitor, sodium citrate, and having a pH ranging from 6.5-8.0, wherein the C1 esterase inhibitor has a concentration of about 500 U/mL, wherein the administration of the composition increases the level of C1 esterase inhibitor in the blood of the subject to at least about 0.4 U/mL, and wherein the C1 esterase inhibitor comprises the amino acid sequence of residues 23 to 500 of SEQ ID NO: 1, as disclosed in the patent.

35. The HAEGARDA product label, on its own and/or in combination with Defendants’ website, press releases, studies, and other promotional materials, directs, instructs, encourages, recommends, and/or promotes that members of the public such as, *inter alia*,

doctors, other medical professionals, and/or patients use, prescribe, administer, and/or provide HAEGARDA in a way that infringes the '788 Patent.

36. In addition, at CSL's direct instruction and in compliance with the HAEGARDA product label, medical professionals and others who are CSL's agents administer HAEGARDA to HAE patients. HAE patients also administer HAEGARDA to themselves, as directed by CSL and its agents, in compliance with the HAEGARDA product label.

37. For example, CSL has entered into a contractual or other relationship with one or more nursing services, whereby the nursing services' employees, operating as CSL's agents and at CSL's direction and control, administer HAEGARDA to patients and teach patients to self-administer in accordance with the HAEGARDA label. On information and belief, the nursing services' employees have administered HAEGARDA to patients in accordance with the label and have taught HAEGARDA patients to self-administer the product in accordance with the label. According to CSL's "HAEGARDA Connect" website, CSL offers to HAEGARDA patients support and resources to begin and continuing administering HAEGARDA, including "Nursing Services for Self-Administration Training." Exhibit 5, HAEGARDA Connect, <http://www.haegarda.com/patient-resources> ("A HAEGARDA nurse will teach you and/or your caregiver how to prepare the medicine and self-administer it correctly . . . Once you've been trained, you can still get more support from a HAEGARDA nurse by phone, video chat, or home visit . . . If preferred, a HAEGARDA nurse can administer the first dose of HAEGARDA in office."). CSL's HAEGARDA Connect Prescription and Service Request Form informs medical professionals prescribing HAEGARDA that "HAEGARDA patients are eligible to receive injection training from company-funded HAEGARDA nurses" and requires prescribing medical professionals to provide a signature "requesting HAEGARDA Connect coordinate a



HAEGARDA nurse to provide HAEGARDA self-administration training for [their HAEGARDA patients].” Exhibit 6, Prescribing HAEGARDA: An Instructional Guide, <https://labeling.cslbehrling.com/PRODUCT-DOCUMENT/US/HAEGARDA/EN/HAEGARDA-Referral-Form.pdf> at p. 2. Thus, CSL has obligated the nursing service employees to perform, and the nursing service employees perform, all of the claimed elements of the ‘788 Patent.

38. The FDA has described HAEGARDA as a treatment for HAE. For example, an FDA press release titled “FDA approves first subcutaneous C1 Esterase Inhibitor to treat rare genetic disease [HAE]” states, “[t]he approval of Haegarda provides a new treatment option for adolescents and adults with Hereditary Angioedema,” said Peter Marks, M.D., Ph.D., director of FDA’s Center for Biologics Evaluation and Research.” Exhibit 7, Press Release, FDA, FDA Approves First Subcutaneous C1 Esterase Inhibitor to Treat Rare Genetic Disease (June 22, 2017).

39. The HAEGARDA product label instructs that “HAEGARDA is a plasma-derived concentrate of C1 Esterase Inhibitor (Human) (C1-INH) indicated for routine prophylaxis to prevent Hereditary Angioedema (HAE) attacks in adolescent and adult patients.” A true copy of the HAEGARDA Prescribing Information is attached hereto as Exhibit 8.

40. The HAEGARDA product label further instructs that HAEGARDA is “intended for self-administration after reconstitution at a dose of 60 International Units (IU) per kg body weight by subcutaneous (S.C.) injection twice weekly (every 3 or 4 days).” Exhibit 8 at p. 2 §2; *see also id.* at p. 4, §2.2 (“Attach the syringe containing the reconstituted HAEGARDA solution to a hypodermic needle or subcutaneous infusion set and administer by subcutaneous injection. . . . Inject in the abdominal area or other subcutaneous injection sites.”).

41. The HAEGARDA product label further instructs that HAEGARDA is “a human plasma-derived, purified pasteurized, lyophilized concentrate of C1-INH to be reconstituted for S.C. administration.” Exhibit 8 at p. 9, §11. The label further instructs that “[r]econstituted HAEGARDA has a concentration of 500 IU/mL C1-INH, 65 mg/mL total protein, 10 mg/mL glycine, 8.5 mg/mL sodium chloride and 2.7 mg/mL sodium citrate.” *Id.*; see also Exhibit 9, Craig Thelwell, et al., *An international collaborative study to establish the 1st WHO International Standards for C1-inhibitor, plasma and concentrate*, World Health Organization Expert Committee on Biological Standardization, Oct. 18-22, 2010, at pp. 2-3 (“Diagnostic plasma samples and purified therapeutic products are currently assigned potency values relative to commercial or internal standards and 1 U is defined as the amount of C1-inh present in 1 ml of normal human plasma. It is therefore proposed that the IU is also defined in this way for continuity and consistency with current labelling practice.”); Exhibit 10, International Patent Application Publication No. WO 2016/131958 (Aug. 25, 2016) at p. 7, lines 25-29 (“In general, U and IU are equivalent.”).

42. HAEGARDA has a pH of 6.5-7.5. See Exhibit 11, Haegarda Safety Data Sheet, <http://labeling.csl.com/SDS/CORE/Haegarda/EN/Haegarda-Safety-Data-Sheet.pdf> at p. 3.

43. The HAEGARDA product label further instructs that administration of HAEGARDA increases the level of C1 esterase inhibitor in the blood of the subject to at least about 0.4 U/mL. Exhibit 8 at p. 11, §12.3 (Table 4 provides “the [pharmacokinetic] parameters of C1-INH following twice weekly subcutaneous 60 IU/kg dosing.”); see also Exhibit 12, H. Longhurst, et al., *Prevention of Hereditary Angioedema Attacks with a Subcutaneous C1 Inhibitor*, N. Engl. J. Med., 376(12):1131 (2017); Exhibit 13, B.L. Zuraw, et al., *Phase II study results of a replacement therapy for hereditary angioedema with subcutaneous C1-inhibitor*

*concentrate*, Allergy 70: 1319, 1323, Figure 2 (2015); Exhibit 14, CSL Limited 2017 Half Year Results at p. 4 (Feb. 15, 2017) (confirming that CSL830 is another name for HAEGARDA). Accordingly, administration of HAEGARDA increases the level of C1 esterase inhibitor in the blood of the subject to at least about 0.4 U/mL, which is 40% of 1 U/mL, the normal level of C1-INH in a typical person.

44. The HAEGARDA product label further instructs that “C1-INH is a soluble single-chain highly glycosylated protein containing 478 amino acid residues which belongs to the serine protease inhibitor (serpin) family.” Exhibit 8 at p. 9, §11; *see also* Exhibit 15, Susan Clark Bock, et al., *Human C1 Inhibitor: Primary Structure, cDNA Cloning, and Chromosomal Localization*, *Biochemistry*, 25(15): 4292 (1986) (establishing the known sequence of human C1-INH, which is the same sequence as provided in the ‘788 Patent).

45. The publicly available information regarding HAEGARDA demonstrates that Defendants’ marketing and sales of HAEGARDA in the United States actively infringes, induces others to infringe, and/or contributorily infringes the ‘788 Patent. In particular, on information and belief, Defendants, through their sales, ongoing marketing, employment of medical professional agents, and patient-training efforts, are infringing the ‘788 patent. CSL is also inducing physicians, other medical professionals, and/or HAE patients to prescribe, use, and/or administer HAEGARDA in accordance with its label and thereby actively inducing others to infringe the ‘788 Patent. Further, HAE patients have taken, and continue to take, HAEGARDA as prescribed for the prophylactic treatment of HAE and thereby have directly infringed, and continue to directly infringe, the ‘788 Patent.

46. According to Paul Perreault, CEO of CSL, HAEGARDA had an “extremely successful launch” -- in fact, the “most successful chronic drug launch in the U.S. in the past 5

years in a competitive market” -- and has “already achieved around a 50% market share of the HAE prophylactic market in the United States.” *See* Exhibit 16, CSL Limited ASX: CSL Full Year 2018 CSL Ltd Earnings Call Transcript at p. 6 (Aug. 15, 2018). CSL expects to retain these newly acquired patients. *Id.* at p. 17 (“[W]e’re adding new patients. I think, even with competition, it doesn’t mean that all new patients go to the competitor’s product just because they launch. . . . So I feel pretty strongly that we’ll be able to hold where we are in terms of where we are and the guidance is there for us to continue to go. And, I think, that when you look at the opportunity to meet over the next 5 years, is still in that range of specialty product portfolio that we talked about, which was guiding to somewhere between \$750 million and \$1 billion in the space. So very bullish on the product.”); *see also* Exhibit 17, CSL Limited FH1 2018 Earnings Call Transcripts at p. 8 (Feb. 14, 2018) (“This has been a highly, highly successful launch, one of the most successful launches in the U.S. in the past 5 years of any product for chronic therapy. . . . But we’re putting patients on as quickly as we can, and we want to make sure when a patient gets on HAEGARDA, they stay on HAEGARDA.”).

47. Defendants have had actual knowledge of the ‘788 Patent and their alleged infringement no later than September 25, 2018, the date the original complaint in this matter was filed and served on Defendants. In addition, the U.S. patent application which matured into the ‘788 Patent, and its file wrapper, have been published and publicly available since December 11, 2017. The invention as claimed in the ‘788 Patent is substantially identical to the invention as claimed in the published patent application U.S. Publication No. 2018/0110843.

48. CSL has been monitoring and has been aware of Shire’s patents during their pendency before the USPTO. CSL has had knowledge of Shire’s related patent, U.S. Patent No.

9,616,111, at least as of April 11, 2017. That related patent is the subject of the First-Filed Action. This case has been consolidated with the First-Filed Action.

49. On information and belief, Defendants (a) had actual knowledge of the application leading to the '788 Patent prior to issuance of the patent; (b) have knowledge of the acts of infringement that will occur and/or are occurring when the HAEGARDA product is administered; and (c) have the specific intent to cause direct infringement when the HAEGARDA product is administered. At CSL's direction, members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients are using, prescribing, administering, and/or providing HAEGARDA in a way that directly infringes the '788 Patent.

50. Defendants have infringed and continue to directly infringe one or more claims of the '788 patent pursuant to 35 U.S.C. § 271(a). Defendants have infringed and continue to indirectly infringe one or more claims of the '788 Patent by actively inducing others to infringe the patent, and/or by contributory infringement, pursuant to 35 U.S.C. §§ 271(b) and (c).

**DEFENDANTS' INFRINGEMENT OF SHIRE'S '423 PATENT**

51. Defendants' manufacture, importation, use, sale, and/or offer to sell HAEGARDA in the United States directly infringes, induces others to infringe, and/or contributorily infringes, either directly or under the doctrine of equivalents, one or more claims of Shire's '423 Patent, including at least claim 1.

52. The claims of the '423 Patent are directed generally to a "pharmaceutical composition comprising C1 esterase inhibitor, sodium citrate, and having a pH ranging from 6.5-8.0, wherein the C1 esterase inhibitor has a concentration of about 500 U/mL, and wherein the C1 esterase inhibitor comprises the amino acid sequence of residues 23 to 500 of SEQ ID NO: 1," as disclosed in the Patent.

53. The HAEGARDA product label, on its own and/or in combination with Defendants' website, press releases, studies, and other promotional materials, directs, instructs, encourages, recommends, and/or promotes that members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients use, prescribe, administer, and/or provide HAEGARDA in a way that infringes the '423 Patent.

54. In addition, at CSL's direct instruction and in compliance with the HAEGARDA product label, medical professionals and others who are CSL's agents administer HAEGARDA to HAE patients. HAE patients also administer HAEGARDA to themselves, as directed by CSL and its agents, in compliance with the HAEGARDA product label.

55. For example, CSL has entered into a contractual or other relationship with one or more nursing services, whereby the nursing services' employees, operating as CSL's agents and at CSL's direction and control, administer HAEGARDA to patients and teach patients to self-administer in accordance with the HAEGARDA label. On information and belief, the nursing services' employees have administered HAEGARDA to patients in accordance with the label and have taught HAEGARDA patients to self-administer the product in accordance with the label. According to CSL's "HAEGARDA Connect" website, CSL offers to HAEGARDA patients support and resources to begin and continuing administering HAEGARDA, including "Nursing Services for Self-Administration Training." Exhibit 5 ("A HAEGARDA nurse will teach you and/or your caregiver how to prepare the medicine and self-administer it correctly . . . Once you've been trained, you can still get more support from a HAEGARDA nurse by phone, video chat, or home visit . . . If preferred, a HAEGARDA nurse can administer the first dose of HAEGARDA in office."). CSL's HAEGARDA Connect Prescription and Service Request Form informs medical professionals prescribing HAEGARDA that "HAEGARDA patients are eligible

to receive injection training from company-funded HAEGARDA nurses” and requires prescribing medical professionals to provide a signature “requesting HAEGARDA Connect coordinate a HAEGARDA nurse to provide HAEGARDA self-administration training for [their HAEGARDA patients].” Exhibit 6 at p. 2. Thus, CSL has obligated the nursing service employees to perform, and the nursing service employees perform, all of the claimed elements of the ‘423 Patent.

56. The HAEGARDA product label instructs that “HAEGARDA is a plasma-derived concentrate of C1 Esterase Inhibitor (Human) (C1-INH) indicated for routine prophylaxis to prevent Hereditary Angioedema (HAE) attacks in adolescent and adult patients.” Exhibit 8.

57. The HAEGARDA product label further instructs that HAEGARDA is “a human plasma-derived, purified pasteurized, lyophilized concentrate of C1-INH to be reconstituted for S.C. administration.” Exhibit 8 at p. 9, §11. The label further instructs that “[r]econstituted HAEGARDA has a concentration of 500 IU/mL C1-INH, 65 mg/mL total protein, 10 mg/mL glycine, 8.5 mg/mL sodium chloride and 2.7 mg/mL sodium citrate.” *Id.*; *see also* Exhibit 9 at pp. 2-3 (“Diagnostic plasma samples and purified therapeutic products are currently assigned potency values relative to commercial or internal standards and 1 U is defined as the amount of C1-inh present in 1 ml of normal human plasma. It is therefore proposed that the IU is also defined in this way for continuity and consistency with current labelling practice.”); Exhibit 10 at p. 7, lines 25-29 (“In general, U and IU are equivalent.”).

58. HAEGARDA has a pH of 6.5-7.5. *See* Exhibit 11 at p. 3.

59. The HAEGARDA product label further instructs that “C1-INH is a soluble single-chain highly glycosylated protein containing 478 amino acid residues which belongs to the serine

protease inhibitor (serpin) family.” Exhibit 8 at p. 9, §11; *see also* Exhibit 15 (establishing the known sequence of human C1-INH, which is the same sequence as provided in the ‘423 Patent).

60. The publicly available information regarding HAEGARDA demonstrates that Defendants’ marketing and sales of HAEGARDA in the United States actively infringe, induces others to infringe, and/or contributorily infringes the ‘423 Patent. In particular, on information and belief, Defendants, through their sales, ongoing marketing, employment of medical professional agents, and patient-training efforts, are infringing the ‘423 patent. CSL is also inducing physicians, other medical professionals, and/or HAE patients to prescribe, use, and/or administer HAEGARDA in accordance with its label and thereby actively inducing others to infringe the ‘423 Patent. Further, HAE patients have taken, and continue to take, HAEGARDA as prescribed for the prophylactic treatment of HAE and thereby have directly infringed, and continue to directly infringe the ‘423 Patent.

61. On information and belief CSL makes, uses, and/or sells products that infringe the claims of the ‘423 Patent. CSL and its agents have administered, and HAE patients have taken, and continue to take, HAEGARDA as prescribed for the prophylactic treatment of HAE and thereby have directly infringed, and continue to directly infringe the ‘423 Patent.

62. According to Paul Perreault, CEO of CSL, HAEGARDA had an “extremely successful launch” -- in fact, the “most successful chronic drug launch in the U.S. in the past 5 years in a competitive market” -- and has “already achieved around a 50% market share of the HAE prophylactic market in the United States.” *See* Exhibit 16 at p. 6. CSL expects to retain these newly acquired patients. *Id.* at p. 17 (“[W]e’re adding new patients. I think, even with competition, it doesn’t mean that all new patients go to the competitor’s product just because they launch. . . . So I feel pretty strongly that we’ll be able to hold where we are in terms of



where we are and the guidance is there for us to continue to go. And, I think, that when you look at the opportunity to meet over the next 5 years, is still in that range of specialty product portfolio that we talked about, which was guiding to somewhere between \$750 million and \$1 billion in the space. So very bullish on the product.”); *see also* Exhibit 17 at p. 8 (“This has been a highly, highly successful launch, one of the most successful launches in the U.S. in the past 5 years of any product for chronic therapy. . . . But we’re putting patients on as quickly as we can, and we want to make sure when a patient gets on HAEGARDA, they stay on HAEGARDA.”).

63. Defendants have had actual knowledge of the application that matured into the ‘423 Patent and their alleged infringement no later than September 25, 2018, the date the original complaint in this matter was filed and served on Defendants. In addition, the U.S. patent application which matured into the ‘423 Patent, and its file wrapper, have been published and publicly available since December 11, 2017. The invention as claimed in the ‘423 Patent is substantially identical to the invention as claimed in the published patent application U.S. Publication No. 2018/0085441. Defendants had actual knowledge of the ‘423 Patent at least by November 20, 2018.

64. CSL has been monitoring and has been aware of Shire’s patents during their pendency before the USPTO. CSL has had knowledge of Shire’s related patent, U.S. Patent No. 9,616,111, at least as of April 11, 2017. That related patent is the subject of the First-Filed Action. This case has been consolidated with the First-Filed Action.

65. On information and belief, Defendants (a) had actual knowledge of the application leading to the ‘423 Patent prior to issuance of the patent; (b) have knowledge of the acts of infringement that will occur and/or are occurring when the HAEGARDA product is administered; and (c) have the specific intent to cause direct infringement when the

HAEGARDA product is administered. At CSL's direction, members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients are using, prescribing, administering, and/or providing HAEGARDA in a way that directly infringes the '423 Patent.

66. Defendants have infringed and continue to directly infringe one or more claims of the '423 patent pursuant to 35 U.S.C. § 271(a). Defendants have infringed and continue to indirectly infringe one or more claims of the '423 Patent by actively inducing others to infringe the patent, and/or by contributory infringement, pursuant to 35 U.S.C. § 271(b) and (c).

**DEFENDANTS' INFRINGEMENT OF SHIRE'S '690 PATENT**

67. Defendants' manufacture, importation, use, sale, and/or offer to sell HAEGARDA in the United States directly infringes, induces others to infringe, and/or contributorily infringes, either directly or under the doctrine of equivalents, one or more claims of Shire's '690 Patent, including at least claim 1.

68. The claims of the '690 Patent are directed generally to a "pharmaceutical composition comprising C1 esterase inhibitor, sodium citrate, and having a pH ranging from 6.5-8.0, wherein the C1 esterase inhibitor has a concentration of about 400-600 U/mL, and wherein the C1 esterase inhibitor comprises the amino acid sequence of residues 23 to 500 of SEQ ID NO: 1," as disclosed in the patent.

69. The HAEGARDA product label, on its own and/or in combination with Defendants' website, press releases, studies, and other promotional materials, directs, instructs, encourages, recommends, and/or promotes that members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients use, prescribe, administer, and/or provide HAEGARDA in a way that infringes the '690 Patent.

70. In addition, at CSL's direct instruction and in compliance with the HAEGARDA product label, medical professionals and others who are CSL's agents administer HAEGARDA to HAE patients. HAE patients also administer HAEGARDA to themselves, as directed by CSL and its agents, in compliance with the HAEGARDA product label.

71. For example, CSL has entered into a contractual or other relationship with one or more nursing services, whereby the nursing services' employees, operating as CSL's agents and at CSL's direction and control, administer HAEGARDA to patients and teach patients to self-administer in accordance with the HAEGARDA label. On information and belief, the nursing services' employees have administered HAEGARDA to patients in accordance with the label and have taught HAEGARDA patients to self-administer the product in accordance with the label. According to CSL's "HAEGARDA Connect" website, CSL offers to HAEGARDA patients support and resources to begin and continuing administering HAEGARDA, including "Nursing Services for Self-Administration Training." Exhibit 5 ("A HAEGARDA nurse will teach you and/or your caregiver how to prepare the medicine and self-administer it correctly . . . Once you've been trained, you can still get more support from a HAEGARDA nurse by phone, video chat, or home visit . . . If preferred, a HAEGARDA nurse can administer the first dose of HAEGARDA in office."). CSL's HAEGARDA Connect Prescription and Service Request Form informs medical professionals prescribing HAEGARDA that "HAEGARDA patients are eligible to receive injection training from company-funded HAEGARDA nurses" and requires prescribing medical professionals to provide a signature "requesting HAEGARDA Connect coordinate a HAEGARDA nurse to provide HAEGARDA self-administration training for [their HAEGARDA patients]." Exhibit 6 at p. 2. Thus, CSL has obligated the nursing service

employees to perform, and the nursing service employees perform, all of the claimed elements of the '690 Patent.

72. The HAEGARDA product label instructs that "HAEGARDA is a plasma-derived concentrate of C1 Esterase Inhibitor (Human) (C1-INH) indicated for routine prophylaxis to prevent Hereditary Angioedema (HAE) attacks in adolescent and adult patients." Exhibit 8.

73. The HAEGARDA product label further instructs that HAEGARDA is "a human plasma-derived, purified pasteurized, lyophilized concentrate of C1-INH to be reconstituted for S.C. administration." Exhibit 8 at p. 9, §11. The label further instructs that "[r]econstituted HAEGARDA has a concentration of 500 IU/mL C1-INH, 65 mg/mL total protein, 10 mg/mL glycine, 8.5 mg/mL sodium chloride and 2.7 mg/mL sodium citrate." *Id.*; *see also* Exhibit 9 at pp. 2-3 ("Diagnostic plasma samples and purified therapeutic products are currently assigned potency values relative to commercial or internal standards and 1 U is defined as the amount of C1-inh present in 1 ml of normal human plasma. It is therefore proposed that the IU is also defined in this way for continuity and consistency with current labelling practice."); Exhibit 10 at p. 7, lines 25-29 ("In general, U and IU are equivalent.").

74. HAEGARDA has a pH of 6.5-7.5. *See* Exhibit 11 at p. 3.

75. The HAEGARDA product label further instructs that "C1-INH is a soluble single-chain highly glycosylated protein containing 478 amino acid residues which belongs to the serine protease inhibitor (serpin) family." Exhibit 8 at p. 9, §11; *see also* Exhibit 15 (establishing the known sequence of human C1-INH, which is the same sequence as provided in the '690 Patent).

76. The publicly available information regarding HAEGARDA demonstrates that Defendants' marketing and sales of HAEGARDA in the United States actively infringe, induces others to infringe, and/or contributorily infringes the '690 Patent. In particular, on information

and belief, Defendants, through their ongoing sales, marketing, employment of medical professional agents, and patient-training efforts, are infringing the ‘690 patent. CSL is also inducing physicians, other medical professionals, and/or HAE patients to prescribe, use, and/or administer HAEGARDA in accordance with its label and thereby actively inducing others to infringe the ‘690 Patent. Further, HAE patients have taken, and continue to take, HAEGARDA as prescribed for the prophylactic treatment of HAE and thereby have directly infringed, and continue to directly infringe the ‘690 Patent.

77. On information and belief CSL makes, uses, and/or sells products that infringe the claims of the ‘690 Patent. CSL and its agents have administered, and HAE patients have taken, and continue to take, HAEGARDA as prescribed for the prophylactic treatment of HAE and thereby have directly infringed, and continue to directly infringe the ‘690 Patent.

78. According to Paul Perreault, CEO of CSL, HAEGARDA had an “extremely successful launch” -- in fact, the “most successful chronic drug launch in the U.S. in the past 5 years in a competitive market” -- and has “already achieved around a 50% market share of the HAE prophylactic market in the United States.” *See* Exhibit 16 at p. 6. CSL expects to retain these newly acquired patients. *Id.* at p. 17 (“[W]e’re adding new patients. I think, even with competition, it doesn’t mean that all new patients go to the competitor’s product just because they launch. . . . So I feel pretty strongly that we’ll be able to hold where we are in terms of where we are and the guidance is there for us to continue to go. And, I think, that when you look at the opportunity to meet over the next 5 years, is still in that range of specialty product portfolio that we talked about, which was guiding to somewhere between \$750 million and \$1 billion in the space. So very bullish on the product.”); *see also* Exhibit 17 at p. 8 (“This has been a highly, highly successful launch, one of the most successful launches in the U.S. in the past 5

years of any product for chronic therapy. . . . But we're putting patients on as quickly as we can, and we want to make sure when a patient gets on HAEGARDA, they stay on HAEGARDA.”).

79. Defendants have had actual knowledge of the application that matured into the ‘690 Patent and their alleged infringement no later than September 25, 2018, the date the original complaint in this matter was filed and served on Defendants. In addition, the U.S. patent application which matured into the ‘690 Patent, and its file wrapper, have been published and publicly available since December 11, 2017. The invention as claimed in the ‘690 Patent is substantially identical to the invention as claimed in the published patent application U.S. Publication No. 2018/0153972. Defendants had actual knowledge of the ‘690 Patent at least by November 20, 2018.

80. CSL has been monitoring and has been aware of Shire's patents during their pendency before the USPTO. CSL has had knowledge of Shire's related patent, U.S. Patent No. 9,616,111, at least as of April 11, 2017. That related patent is the subject of the First-Filed Action. This case has been consolidated with the First-Filed Action..

81. On information and belief, Defendants (a) had actual knowledge of the application leading to the ‘690 Patent prior to issuance of the patent; (b) have knowledge of the acts of infringement that will occur and/or are occurring when the HAEGARDA product is administered; and (c) have the specific intent to cause direct infringement when the HAEGARDA product is administered. At CSL's direction, members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients are using, prescribing, administering, and/or providing HAEGARDA in a way that directly infringes the ‘690 Patent.

82. Defendants have infringed and continue to directly infringe one or more claims of the ‘690 Patent pursuant to 35 U.S.C. § 271(a). Defendants have infringed and continue to

indirectly infringe one or more claims of the '690 Patent by actively inducing others to infringe the patent, and/or by contributory infringement, pursuant to 35 U.S.C. § 271(b), and (c).

**DEFENDANTS' INFRINGEMENT OF SHIRE'S '595 PATENT**

83. Defendants' manufacture, importation, use, sale, and/or offer to sell HAEGARDA in the United States directly infringes, induces others to infringe, and/or contributorily infringes, either directly or under the doctrine of equivalents, one or more claims of Shire's '595 Patent, including at least claim 1.

84. Shire's '595 Patent claims a method for prophylactic treatment of HAE by subcutaneously administering a composition comprising a C1 esterase inhibitor, sodium citrate, and having a pH ranging from 6.5-8.0, wherein the C1 esterase inhibitor has a concentration of about 400-600 U/mL, wherein the administration of the composition increases the level of C1 esterase inhibitor in the blood of the subject to at least about 0.4 U/mL, and wherein the C1 esterase inhibitor comprises the amino acid sequence of residues 23 to 500 of SEQ ID NO: 1, as disclosed in the patent.

85. The HAEGARDA product label, on its own and/or in combination with Defendants' website, press releases, studies, and other promotional materials, directs, instructs, encourages, recommends, and/or promotes that members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients use, prescribe, administer, and/or provide HAEGARDA in a way that infringes the '595 Patent.

86. In addition, at CSL's direct instruction and in compliance with the HAEGARDA product label, medical professionals and others who are CSL's agents administer HAEGARDA to HAE patients. HAE patients also administer HAEGARDA to themselves, as directed by CSL and its agents, in compliance with the HAEGARDA product label.

87. For example, CSL has entered into a contractual or other relationship with one or more nursing services, whereby the nursing services' employees, operating as CSL's agents and at CSL's direction and control, administer HAEGARDA to patients and teach patients to self-administer in accordance with the HAEGARDA label. On information and belief, the nursing services' employees have administered HAEGARDA to patients in accordance with the label and have taught HAEGARDA patients to self-administer the product in accordance with the label. According to CSL's "HAEGARDA Connect" website, CSL offers to HAEGARDA patients support and resources to begin and continuing administering HAEGARDA, including "Nursing Services for Self-Administration Training." Exhibit 5 ("A HAEGARDA nurse will teach you and/or your caregiver how to prepare the medicine and self-administer it correctly . . . Once you've been trained, you can still get more support from a HAEGARDA nurse by phone, video chat, or home visit . . . If preferred, a HAEGARDA nurse can administer the first dose of HAEGARDA in office."). CSL's HAEGARDA Connect Prescription and Service Request Form informs medical professionals prescribing HAEGARDA that "HAEGARDA patients are eligible to receive injection training from company-funded HAEGARDA nurses" and requires prescribing medical professionals to provide a signature "requesting HAEGARDA Connect coordinate a HAEGARDA nurse to provide HAEGARDA self-administration training for [their HAEGARDA patients]." Exhibit 6 at p. 2. Thus, CSL has obligated the nursing service employees to perform, and the nursing service employees perform, all of the claimed elements of the '595 Patent.

88. The FDA has described HAEGARDA as a treatment for HAE. For example, an FDA press release titled "FDA approves first subcutaneous C1 Esterase Inhibitor to treat rare genetic disease [HAE]" states, "[t]he approval of Haegarda provides a new treatment option for



adolescents and adults with Hereditary Angioedema,’ said Peter Marks, M.D., Ph.D., director of FDA’s Center for Biologics Evaluation and Research.” Exhibit 7.

89. The HAEGARDA product label instructs that “HAEGARDA is a plasma-derived concentrate of C1 Esterase Inhibitor (Human) (C1-INH) indicated for routine prophylaxis to prevent Hereditary Angioedema (HAE) attacks in adolescent and adult patients.” Exhibit 8.

90. The HAEGARDA product label further instructs that HAEGARDA is “intended for self-administration after reconstitution at a dose of 60 International Units (IU) per kg body weight by subcutaneous (S.C.) injection twice weekly (every 3 or 4 days).” Exhibit 8 at p. 2 §2; *see also id.* at p. 4, §2.2 (“Attach the syringe containing the reconstituted HAEGARDA solution to a hypodermic needle or subcutaneous infusion set and administer by subcutaneous injection. . . . Inject in the abdominal area or other subcutaneous injection sites.”).

91. The HAEGARDA product label further instructs that HAEGARDA is “a human plasma-derived, purified pasteurized, lyophilized concentrate of C1-INH to be reconstituted for S.C. administration.” Exhibit 8 at p. 9, §11. The label further instructs that “[r]econstituted HAEGARDA has a concentration of 500 IU/mL C1-INH, 65 mg/mL total protein, 10 mg/mL glycine, 8.5 mg/mL sodium chloride and 2.7 mg/mL sodium citrate.” *Id.*; *see also* Exhibit 9 at pp. 2-3 (“Diagnostic plasma samples and purified therapeutic products are currently assigned potency values relative to commercial or internal standards and 1 U is defined as the amount of C1-inh present in 1 ml of normal human plasma. It is therefore proposed that the IU is also defined in this way for continuity and consistency with current labelling practice.”); Exhibit 10 at p. 7, lines 25-29 (“In general, U and IU are equivalent.”).

92. HAEGARDA has a pH of 6.5-7.5. *See* Exhibit 11, Haegarda Safety Data Sheet, <http://labeling.csl.com/SDS/CORE/Haegarda/EN/Haegarda-Safety-Data-Sheet.pdf> at p. 3.

93. The HAEGARDA product label further instructs that administration of HAEGARDA increases the level of C1 esterase inhibitor in the blood of the subject to at least about 0.4 U/mL. Exhibit 8 at p. 11, §12.3 (Table 4 provides “the [pharmacokinetic] parameters of C1-INH following twice weekly subcutaneous 60 IU/kg dosing.”); *see also* Exhibit 12 at 1131; Exhibit 13 at 1323, Figure 2; Exhibit 14 at p. 4 (confirming that CSL830 is another name for HAEGARDA). Accordingly, administration of HAEGARDA increases the level of C1 esterase inhibitor in the blood of the subject to at least about 0.4 U/mL, which is 40% of 1 U/mL, the normal level of C1-INH in a typical person.

94. The HAEGARDA product label further instructs that “C1-INH is a soluble single-chain highly glycosylated protein containing 478 amino acid residues which belongs to the serine protease inhibitor (serpin) family.” Exhibit 8 at p. 9, §11; *see also* Exhibit 15 (establishing the known sequence of human C1-INH, which is the same sequence as provided in the ‘595 Patent).

95. The publicly available information regarding HAEGARDA demonstrates that Defendants’ marketing and sales of HAEGARDA in the United States actively infringes, induces others to infringe, and/or contributorily infringes the ‘595 Patent. In particular, on information and belief, Defendants, through their sales, ongoing marketing, employment of medical professional agents, and patient-training efforts, are infringing the ‘595 patent. CSL is also inducing physicians, other medical professionals, and/or HAE patients to prescribe, use, and/or administer HAEGARDA in accordance with its label and thereby actively inducing others to infringe the ‘595 Patent. Further, HAE patients have taken, and continue to take, HAEGARDA as prescribed for the prophylactic treatment of HAE and thereby have directly infringed, and continue to directly infringe, the ‘595 Patent.

96. According to Paul Perreault, CEO of CSL, HAEGARDA had an “extremely successful launch” -- in fact, the “most successful chronic drug launch in the U.S. in the past 5 years in a competitive market” -- and has “already achieved around a 50% market share of the HAE prophylactic market in the United States.” *See* Exhibit 16 at p. 6. CSL expects to retain these newly acquired patients. *Id.* at p. 17 (“[W]e’re adding new patients. I think, even with competition, it doesn’t mean that all new patients go to the competitor’s product just because they launch. . . . So I feel pretty strongly that we’ll be able to hold where we are in terms of where we are and the guidance is there for us to continue to go. And, I think, that when you look at the opportunity to meet over the next 5 years, is still in that range of specialty product portfolio that we talked about, which was guiding to somewhere between \$750 million and \$1 billion in the space. So very bullish on the product.”); *see also* Exhibit 17 at p. 8 (“This has been a highly, highly successful launch, one of the most successful launches in the U.S. in the past 5 years of any product for chronic therapy. . . . But we’re putting patients on as quickly as we can, and we want to make sure when a patient gets on HAEGARDA, they stay on HAEGARDA.”).

97. Defendants have had actual knowledge of the application that matured into the ‘595 Patent and their alleged infringement no later than September 25, 2018, the date the original complaint in this matter was filed and served on Defendants. In addition, the U.S. patent application which matured into the ‘595 Patent, and its file wrapper, have been published and publicly available since December 11, 2017. The invention as claimed in the ‘595 Patent is substantially identical to the invention as claimed in the published patent application U.S. Publication No. 2018/0110844.

98. CSL has been monitoring and has been aware of Shire’s patents during their pendency before the USPTO. CSL has had knowledge of Shire’s related patent, U.S. Patent No.

9,616,111, at least as of April 11, 2017. That related patent is the subject of the First-Filed Action. This case has been consolidated with the First-Filed Action.

99. On information and belief, Defendants (a) had actual knowledge of the application leading to the '595 Patent prior to issuance of the patent; (b) have knowledge of the acts of infringement that will occur and/or are occurring when the HAEGARDA product is administered; and (c) have the specific intent to cause direct infringement when the HAEGARDA product is administered. At CSL's direction, members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients are using, prescribing, administering, and/or providing HAEGARDA in a way that directly infringes the '595 Patent.

100. Defendants have infringed and continue to directly infringe one or more claims of the '595 patent pursuant to 35 U.S.C. § 271(a). Defendants have infringed and continue to indirectly infringe one or more claims of the '595 Patent by actively inducing others to infringe the patent, and/or by contributory infringement, pursuant to 35 U.S.C. §§ 271(b) and (c).

**COUNT I**  
**(Infringement of U.S. Patent No. 10,080,788)**

101. Shire re-alleges, and incorporates herein by reference, the allegations of the preceding paragraphs of this Second Amended Complaint as if fully set forth herein.

102. Defendants, directly or through intermediaries, are making, importing, using, selling, and/or offering HAEGARDA for sale in the United States.

103. CSL directly infringes the '788 Patent, either literally or under the doctrine of equivalents, by the use, prescribing, administering, and/or providing of HAEGARDA by CSL and/or CSL's agents who use and/or administer HAEGARDA.

104. The '788 Patent is also directly infringed by members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients. Through its product label, website,

press releases, and/or other promotional materials and actions, Defendants instruct, direct, encourage, recommend, and/or promote members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients to use, prescribe, administer, and/or provide HAEGARDA in a manner that infringes the '788 Patent. CSL has publicly touted the fact that doctors and other medical professionals have in fact prescribed, administered, and/or provided HAEGARDA to patients since HAEGARDA launched in July 2017.

105. Defendants are infringing, are inducing others to infringe, and/or are contributorily infringing the '788 Patent, either literally or under the doctrine of equivalents, by making, importing, using, selling and/or offering for sale HAEGARDA for use in the methods claimed in the '788 Patent.

106. The use, prescribing, administering, and/or providing of HAEGARDA as instructed, directed, encouraged, recommended, and/or promoted by Defendants constitutes infringement of at least claim 1 of the '788 Patent. Defendants are currently, and/or will actively induce that infringement, with specific intent to induce and encourage such infringement, or at a minimum with willful blindness to the known risk of such infringement.

107. CSL Behring is selling or offering to sell within the United States and/or importing into the United States a component (namely, HAEGARDA) of the method claimed in the '788 Patent, knowing that component to be especially made or especially adapted for use in an infringement of the '788 Patent.

108. HAEGARDA has no substantial non-infringing use.

109. For at least the reasons cited herein, each and every element in at least claim 1 is infringed by Defendants.

110. Defendants have not obtained a license to the '788 Patent.

111. Unless Defendants are permanently enjoined by this Court from making, importing, using, selling, and/or offering for sale its HAEGARDA product for use in the methods claimed in the '788 Patent, Shire will be substantially and irreparably harmed by Defendants' infringing conduct.

112. Shire seeks damages in an amount adequate to compensate Shire for Defendants' infringement and a permanent injunction barring Defendants from inducing others to infringe and/or contributorily infringing Shire's '788 Patent.

**COUNT II**  
**(Infringement of U.S. Patent No. 10,105,423)**

113. Shire re-alleges, and incorporates herein by reference, the allegations of the preceding paragraphs of this Second Amended Complaint as if fully set forth herein.

114. Defendants, directly or through intermediaries, are making, importing, using, selling, and/or offering HAEGARDA for sale in the United States.

115. CSL directly infringes the '423 Patent, either literally or under the doctrine of equivalents, by the importing, selling, offering for sale, use, prescribing, administering, and/or providing of HAEGARDA by CSL and/or CSL's agents who use and/or administer HAEGARDA.

116. The '423 Patent is also directly infringed by the use, prescribing, administering, and/or providing of HAEGARDA by members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients. Through its product label, website, press releases, and/or other promotional materials, and actions, Defendants instruct, direct, encourage, recommend, and/or promote members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients to use, prescribe, administer, and/or provide HAEGARDA in a manner that infringes the '423 Patent. CSL has publicly touted the fact that doctors and other medical

professionals have in fact prescribed, administered, and/or provided HAEGARDA to patients since HAEGARDA launched in July 2017.

117. The use, prescribing, administering, and/or providing of HAEGARDA as instructed, directed, encouraged, recommended, and/or promoted by Defendants constitutes infringement of at least claim 1 of the '423 Patent. Defendants are currently actively inducing that infringement, with specific intent to induce and encourage such infringement, or at a minimum with willful blindness to the known risk of such infringement.

118. HAEGARDA has no substantial non-infringing use.

119. For at least the reasons cited herein, each and every element in at least claim 1 of the '423 Patent is infringed by Defendants.

120. Defendants have not obtained a license to the '423 Patent.

121. Unless Defendants are permanently enjoined by this Court from making, importing, using, selling, and/or offering for sale its HAEGARDA product as the composition claimed in the '423 Patent, Shire will be substantially and irreparably harmed by Defendants' infringing conduct.

122. Shire seeks damages in an amount adequate to compensate Shire for Defendants' infringement and a permanent injunction barring Defendants from infringing, inducing others to infringe and/or contributorily infringing Shire's '423 Patent.

**COUNT III**  
**(Infringement of U.S. Patent No. 10,130,690)**

123. Shire re-alleges, and incorporates herein by reference, the allegations of the preceding paragraphs of this Second Amended Complaint as if fully set forth herein.

124. Defendants, directly or through intermediaries, are making, importing, using, selling, and/or offering HAEGARDA for sale in the United States.

125. CSL directly infringes the '690 Patent, either literally or under the doctrine of equivalents, by the importing, selling, offering for sale, use, prescribing, administering, and/or providing of HAEGARDA by CSL and/or CSL's agents who use and/or administer HAEGARDA.

126. The '690 Patent is directly infringed, either literally or under the doctrine of equivalents, by the use, prescribing, administering, and/or providing of HAEGARDA by members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients. Through its product label, website, press releases, and/or other promotional materials, and actions, Defendants instruct, direct, encourage, recommend, and/or promote members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients to use, prescribe, administer, and/or provide HAEGARDA in a manner that infringes the '690 Patent. CSL has publicly touted the fact that doctors and other medical professionals have in fact prescribed, administered, and/or provided HAEGARDA to patients since HAEGARDA launched in July 2017.

127. The use, prescribing, administering, and/or providing of HAEGARDA as instructed, directed, encouraged, recommended, and/or promoted by Defendants constitutes infringement of at least claim 1 of the '690 Patent. Defendants are currently actively inducing that infringement, with specific intent to induce and encourage such infringement, or at a minimum with willful blindness to the known risk of such infringement.

128. HAEGARDA has no substantial non-infringing use.

129. For at least the reasons cited herein, each and every element in at least claim 1 of the '690 Patent is infringed by Defendants.

130. Defendants have not obtained a license to the '690 Patent.



131. Unless Defendants are permanently enjoined by this Court from making, importing, using, selling, and/or offering for sale its HAEGARDA product as the composition claimed in the '690 Patent, Shire will be substantially and irreparably harmed by Defendants' infringing conduct.

132. Shire seeks damages in an amount adequate to compensate Shire for Defendants' infringement and a permanent injunction barring Defendants from infringing, inducing others to infringe and/or contributorily infringing Shire's '690 Patent.

**COUNT IV**  
**(Infringement of U.S. Patent No. 10,201,595)**

133. Shire re-alleges, and incorporates herein by reference, the allegations of the preceding paragraphs of this Second Amended Complaint as if fully set forth herein.

134. Defendants, directly or through intermediaries, are making, importing, using, selling, and/or offering HAEGARDA for sale in the United States.

135. CSL directly infringes the '595 Patent, either literally or under the doctrine of equivalents, by the use, prescribing, administering, and/or providing of HAEGARDA by CSL and/or CSL's agents who use and/or administer HAEGARDA.

136. The '595 Patent is also directly infringed by members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients. Through its product label, website, press releases, and/or other promotional materials and actions, Defendants instruct, direct, encourage, recommend, and/or promote members of the public such as, *inter alia*, doctors, other medical professionals, and/or patients to use, prescribe, administer, and/or provide HAEGARDA in a manner that infringes the '595 Patent. CSL has publicly touted the fact that doctors and other medical professionals have in fact prescribed, administered, and/or provided HAEGARDA to patients since HAEGARDA launched in July 2017.

137. Defendants are infringing, are inducing others to infringe, and/or are contributorily infringing the '595 Patent, either literally or under the doctrine of equivalents, by making, importing, using, selling and/or offering for sale HAEGARDA for use in the methods claimed in the '595 Patent.

138. The use, prescribing, administering, and/or providing of HAEGARDA as instructed, directed, encouraged, recommended, and/or promoted by Defendants constitutes infringement of at least claim 1 of the '595 Patent. Defendants are currently, and/or will actively induce that infringement, with specific intent to induce and encourage such infringement, or at a minimum with willful blindness to the known risk of such infringement.

139. CSL Behring is selling or offering to sell within the United States and/or importing into the United States a component (namely, HAEGARDA) of the method claimed in the '595 Patent, knowing that component to be especially made or especially adapted for use in an infringement of the '595 Patent.

140. HAEGARDA has no substantial non-infringing use.

141. For at least the reasons cited herein, each and every element in at least claim 1 is infringed by Defendants.

142. Defendants have not obtained a license to the '595 Patent.

143. Unless Defendants are permanently enjoined by this Court from making, importing, using, selling, and/or offering for sale its HAEGARDA product for use in the methods claimed in the '595 Patent, Shire will be substantially and irreparably harmed by Defendants' infringing conduct.

144. Shire seeks damages in an amount adequate to compensate Shire for Defendants' infringement and a permanent injunction barring Defendants from inducing others to infringe and/or contributorily infringing Shire's '595 Patent.

**JURY DEMAND**

Shire hereby demands a jury trial pursuant to Fed. R. Civ. P. 38(b) of all issues so triable.

**PRAYER FOR RELIEF**

WHEREFORE, the plaintiffs respectfully request:

- (a) That the Court determine that Defendants are infringing, inducing others to infringe, and/or are contributorily infringing, one or more claims of each of the Asserted Patents;
- (b) That the Court enter a permanent injunction precluding Defendants, and all persons in active concert or participation with them, from making, importing, using, selling, or offering to sell in the United States a product that infringes and/or necessarily is administered to patients in a way that infringes one or more claims of the Asserted Patents;
- (c) That the Court determine the amount of damage caused to Shire by Defendants' unlawful conduct and enter judgment for Shire in the amount of its damages, plus interest and the costs of this action;
- (d) That the Court award Shire enhanced damages under 35 U.S.C. § 284 for Defendants' willful infringement of the Asserted Patents;
- (e) That the Court award Shire provisional remedies under 35 U.S.C. § 154(d);
- (f) That the Court determine that this case is exceptional, within the meaning of 35 U.S.C. § 285, and order Defendants to pay Shire's reasonable attorneys' fees pursuant to 35 U.S.C. § 285; and
- (g) That the Court grant such other and further relief as it deems appropriate.

MORRIS, NICHOLS, ARSHT & TUNNELL LLP

*/s/ Karen Jacobs*

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**CERTIFICATE OF SERVICE**

I hereby certify that on February 12, 2019, I caused the foregoing to be electronically filed with the Clerk of the Court using CM/ECF, which will send notification of such filing to all registered participants.

I further certify that I caused copies of the foregoing document to be served on February 12, 2019, upon the following in the manner indicated:

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