



**Science For A Better Life**



**2<sup>nd</sup> Sal. Oppenheim European Healthcare  
Investors Conference 2007**

**Prof. Dr. Andreas Busch  
Bayer HealthCare AG**

**September 4, 2007**

# Important Information



This presentation contains forward-looking statements based on current assumptions and forecasts made by Bayer Group management. Various known and unknown risks, uncertainties and other factors could lead to material differences between the actual future results, financial situation, development or performance of the company and the estimates given here. These factors include those discussed in our public reports filed with the Frankfurt Stock Exchange and with the U.S. Securities and Exchange Commission (including our Form 20-F). The company assumes no liability whatsoever to update these forward-looking statements or to conform them to future events or developments.



- Global leader in specialty pharmaceuticals and consumer care
- Focussed R&D strategy
- Nexavar – A franchise building opportunity
- Rivaroxaban – A new oral anticoagulant



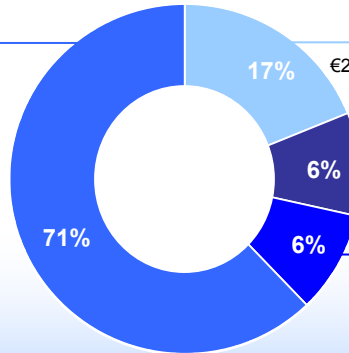
- Global Leader in Specialty Pharmaceuticals and Consumer Care

## Global Leader in Specialty Pharmaceuticals and Consumer Health



### Pharmaceuticals

€10.2bn (pro forma)  
Rx specialty pharmaceuticals,  
# 6 with leading positions in key therapeutic categories



### Consumer Care

€2.5bn OTC pharmaceuticals; # 2 with some of the world's most recognized brands

### Diabetes Care

€0.8bn blood glucose meters  
# 3-4 with new and improved products

### Animal Health

€0.9bn veterinary medicines  
# 4 leading growth and profitability

**HealthCare €14.4bn  
2006 pro-forma sales**

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## All Businesses Outperformed Their Markets in Fiscal 2006

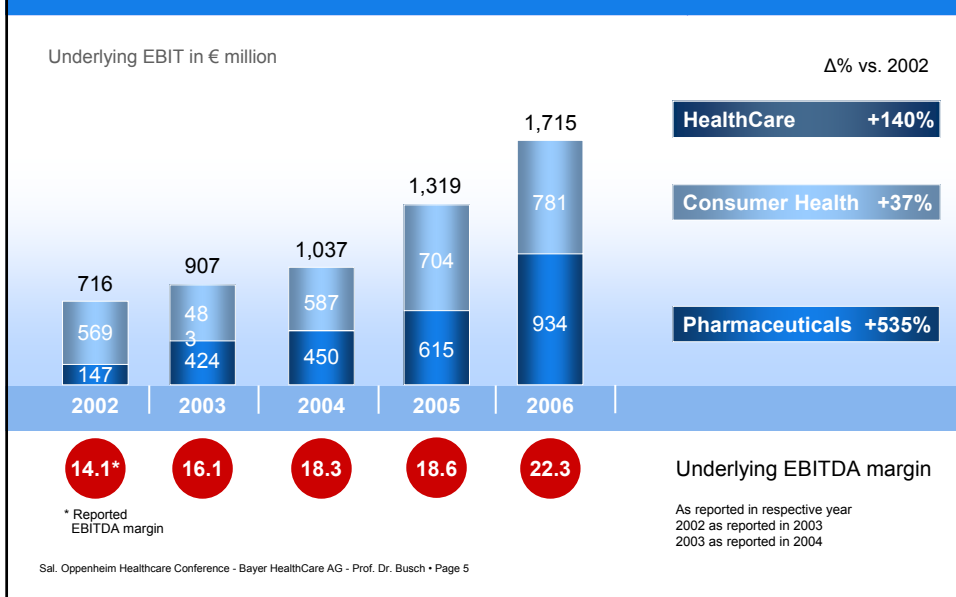


	2006 Sales	Δ %yoy*	2006 market growth	Bayer growth vs. market
Pharmaceuticals (pro-forma)	10.2bn	10%	7%	+ 3pp
Animal Health	0.9bn	6%	4%	+ 2pp
Consumer Care	2.5bn	8%	4%	+ 4pp
Diabetes Care	0.8bn	13%	6%	+ 7pp
<b>Total HealthCare</b>	<b>11.7bn</b>	<b>10%</b>	<b>6%</b>	<b>+ 4pp</b>

\*currency and portfolio adjusted

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## Substantial Improvement in Profitability in Both Pharma and Consumer Health Businesses



## HealthCare – Strategic Objectives



- Successfully **integrate Schering** and build a world-leading specialty pharmaceutical business
- Fully exploit commercial **potential of leadership positions** of key products and brands
- Maximize value of **key pipeline assets**, especially Nexavar and Rivaroxaban
- **Increase return on R&D investments** through improved productivity, higher quality and focus on fewer therapeutic research areas and assets
- Further **invest** in our high growth **Consumer Health** business
- Pursue **external growth opportunities** to complement pipeline and portfolio and to strengthen HealthCare overall

**Build on the successful growth momentum and achieve an underlying EBITDA margin of around 28 percent by 2009**



## ■ Focussed R&D strategy

## Our R&D Strategy Addresses Key Factors for Success



### 1 ... more focus:

4 therapeutic research areas with activities from target discovery up to launch

### 2 ... higher productivity:

increase in development candidate output at decreased cost per NME

### 3 ... better quality:

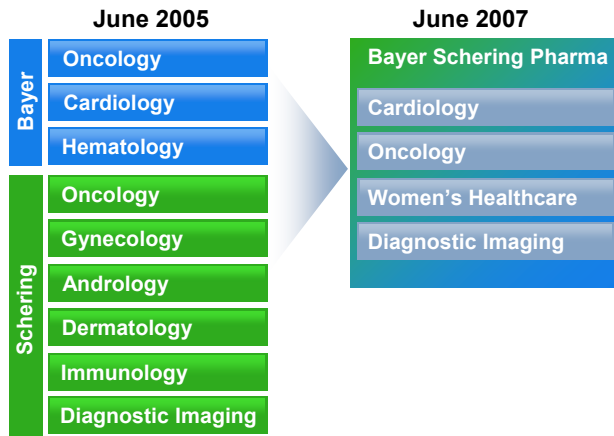
PoC concept and strict progression criteria in research

### 4 ... value maximization:

common mechanism approach, prioritization across whole portfolio and flexible resource allocation

PoC: Proof of Concept  
NME: New Molecular Entity

# Focus on Four Therapeutic Research Areas



## Focus based on

- Therapeutic research area assessment
- Competitive resources (internal & external)
- Synergies across therapeutic areas
- Business alignment: continued applied research and life cycle management in hemophilia, MS and dermatology

## Leveraging our learnings in improving R&D efficiency

# Our R&D Pipeline Provides a Balanced Mix of NME and LCM Opportunities



As of August 2007	Phase I	Phase II	Phase III	Submitted
No. of projects	14	17	20	9
	<ul style="list-style-type: none"> <li>HT / HF sGC Stimulator</li> <li>PH in COPD Elastase Inhibitor</li> <li>Pancreatic Cancer L19-Interleukin 2</li> <li>Cancer L19-SIP</li> <li>Cancer L19-TNF</li> <li>Cancer DAST Inhibitor</li> <li>Menopausal Management ERB Agonist</li> <li>Hypogonadism Treatment of Men</li> <li>Gastro IBD Lipoxin</li> <li>DME VEGF Trap-Eye</li> <li>Alzheimer PET Imaging AV127</li> <li>ACS Aspirin I.v.</li> <li>Fast Dissolving Tablet Levitra</li> <li>Lung Infection Cipro Inhaler</li> </ul>	<ul style="list-style-type: none"> <li>A/Ib / Stable Angina Adenosine A1 Agonist</li> <li>Acute Heart Failure sGC Activator</li> <li>Pulmonary Hypertension sGC Stimulator</li> <li>ACS Rivaroxaban</li> <li>RCC 1st / 3rd line L19-Interleukin 2</li> <li>Breast Cancer ZK-PR4</li> <li>Lung / Ovar / Breast / Prostate Sagopilone (ZK-EPO)</li> <li>Parkinson's Disease Spheramine</li> <li>Gram-neg. VA Pneumonia Amikacin inhale (NKTR-061)</li> <li>Liposomal Formulation Kogonate</li> <li>Breast Cancer Nexavar</li> <li>Additional Indications Nexavar</li> <li>Fertility Control FC Patch Fidencia</li> <li>Fertility Control Valette low</li> <li>Multiple Sclerosis Alemtuzumab</li> <li>MRI (USA, J)</li> <li>Gadovist</li> <li>New Indications Levitra</li> </ul>	<ul style="list-style-type: none"> <li>VTE Prevention Rivaroxaban</li> <li>SPAF Rivaroxaban</li> <li>DVT Treatment Rivaroxaban</li> <li>wet AMD VEGF Trap-Eye</li> <li>Melanoma Nexavar</li> <li>NSCLC Nexavar</li> <li>Ind. / aggr. NHL, 1st line Zevatin</li> <li>CLL 2nd line Campath</li> <li>Bone Metast. Prevent. (Breast Ca.) Bonafos</li> <li>Dysmenorrhea (J) YAZ</li> <li>Fertility Control YAZ Flex</li> <li>FC / Meno Bleeding DUB-OC (E2/DNG)</li> <li>Menorrhagia Mirena</li> <li>Menopausal Management Angeliq low-low</li> <li>Endometriosis Vioanna</li> <li>Fertility Control Yasmin plus / YAZ plus</li> <li>Fertility Control LCS (L19-LNG)</li> <li>MS Treatment Betaferon high dose (BEYOND)</li> <li>CT Ultravist 370</li> <li>New Indications (US) Avelox</li> </ul>	<ul style="list-style-type: none"> <li>CKD (J) Fosrenol</li> <li>Bleeding control rThrombin</li> <li>HCC Nexavar</li> <li>CLL 1st line Campath</li> <li>VMS Menostar transdermal</li> <li>HRT (J) E2 / LNG</li> <li>MRA Magnevist MRA</li> <li>MRI (US, J) Primosist</li> <li>PID / New Indications (EU) Avelox</li> </ul>
				<ul style="list-style-type: none"> <li><span style="color: blue;">■</span> New Molecular Entities (NME)</li> <li><span style="color: grey;">■</span> Life Cycle Management (LCM)</li> </ul>

# We have a Promising Oncology Pipeline



As of August 2007	Phase I	Phase II	Phase III	Submitted
No. of projects	14	17	20	9
	HT / HT sGC Stimulator PH in COPD  <b>Pancreatic Cancer L19-Interleukin 2</b>  <b>Cancer L19-SIP</b>  <b>Cancer L19-TNF</b>  <b>Cancer DAST Inhibitor</b>  or -ment Castra 100 Lipoxin DME VEGF Trap-Eye Alzheimer PET Imaging AV123K ACS Aspirin I.V. Fast Dissolving Tablet Levitra Lung Infection Cipro Inhaler	A10 / 1000s Arginine Adenosine A1 Agonist  Acute Heart Failure sGC Activator  Pulmonary Hypertension sGC Stimulator ACS  <b>RCC 1st / 3rd line L19-Interleukin 2</b>  <b>Breast Cancer ZK-PRA</b>  <b>Lung / Ovar / Breast / Prostate Sagopilone (ZK-EPO)</b>  Alveolar cancer (NAX1-061) Liposomal Formulation  <b>Breast Cancer Nexavar</b>  <b>Additional Indications Nexavar</b>  Fertility Control Valette low Multiple Sclerosis Alemtuzumab MRI (USA, J) Gadovist New Indications Levitra	L19 Invention Rivaroxaban SPAF Rivaroxaban   <b>Melanoma Nexavar</b>  <b>NSCLC Nexavar</b>  Ind. / aggr. NHL 1st line <b>Zevalin</b>  CLL 2nd line <b>Campath</b>  Bone Metast. Prevent. (Breast Ca.) <b>Bonafos</b>  DUS-02 (E2DNG) Menopausa Marvent Menopausal Management Angeliq low-low Endometriosis Yasmin Fertility Control Yasmin plus / YAZ plus Fertility Control LCS (L19-LNG) MS Treatment Bataferon high dose (BEYOND) CT Ultravist 370 New Indications (US) Avelox	SRD (J) Fosrenol Bleeding control rThrombolin  <b>HCC Nexavar</b>  <b>CLL 1st line Campath</b>  MRI (J) EZ / LNG MRA Magnevist MRA MRI (US, J) Primovist PID / New Indications (EU) Avelox
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■ Nexavar – A franchise building opportunity

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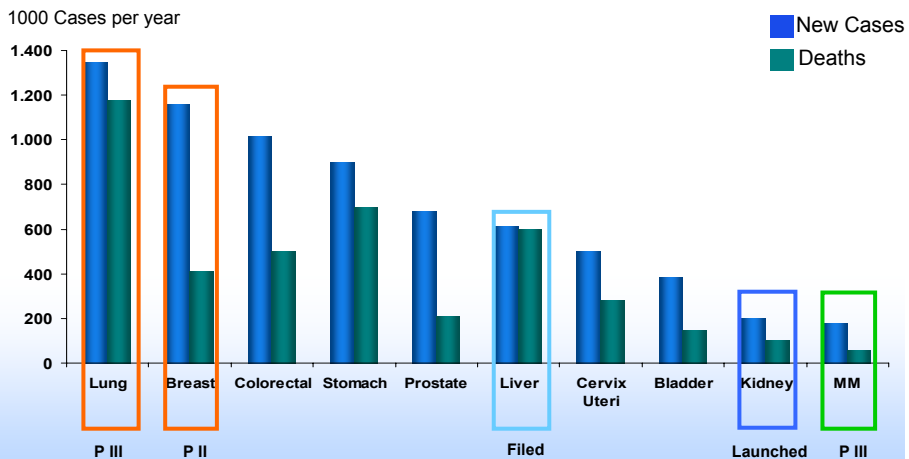


# Nexavar – A Franchise Building Opportunity



- Established global brand in kidney cancer (€130m sales in 1st year after launch, 1H'07 €107m sales))
- Dual mechanism – antiangiogenic & antiproliferative
- Established efficacy in more than one tumor type
- Unprecedented results in HCC
- Approved for treatment of RCC in more than 50 countries
- Submitted for approval in hepatocellular carcinoma (liver cancer)
- Manageable side-effect profile
- >170 clinical studies ongoing

# Expanding Nexavar's Reach Into Large Tumor Types



Source: Globocan 2002, ranked by incidence

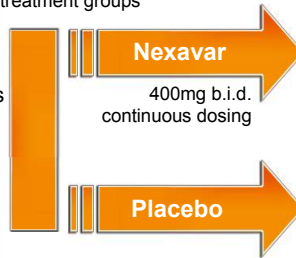
# Investigating Nexavar in Hepatocellular Carcinoma (HCC) – The SHARP Trial



- HCC is the fifth most common malignancy worldwide: about 600,000 new cases/year
- HCC treatment needs highly unmet, no approved treatment for unresectable advanced HCC in U.S. or EU
- Randomized placebo-controlled phase III study in patients with advanced HCC:

(1:1) Randomization ratio between treatment groups

- 602 advanced HCC pts
- Child Pugh A status
- ECOG PS: 0,1,2



### Primary Endpoints

- Overall Survival (OS) (40% improvement) or
- Time To Symptom Progression (TTSP) (30% improvement)

### Secondary Endpoints

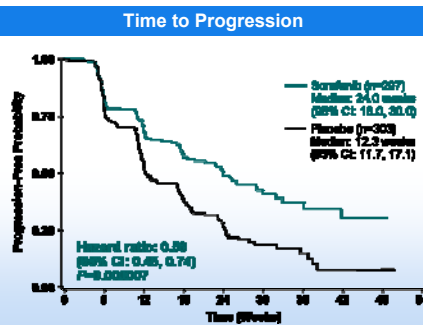
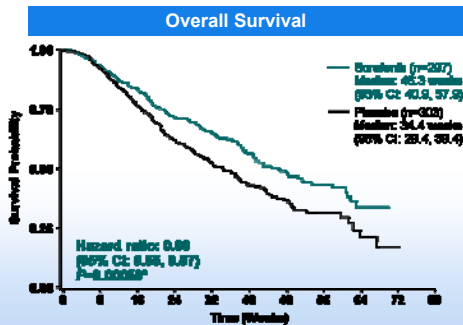
- Time To Progression (TTP) (67% improvement)
- Overall Disease Control rate
- Quality of Life (QoL)

# Nexavar is the First Drug to Demonstrate Overall Survival Benefit in HCC



	Hazard ratio	Sorafenib Median	Placebo Median
Overall survival (44% improvement)*	0.69	46.3 weeks	34.4 weeks
Time to progression (73% prolongation)†	0.58	24.0 weeks	12.3 weeks

Sorafenib vs placebo: \*P=0.0006; †P=0.00007



Nexavar bears the potential to become the new standard of care in patients with unresectable liver cancer

## Nexavar is Significantly Ahead of Competition in HCC



### Targeted cancer therapies in clinical development for treatment of HCC

Launched	No approved agent for unresectable disease in U.S. or EU
Filed	Nexavar
Phase III	-
Phase II	Avastin Tarceva Sutent Other

- Nexavar's SHARP trial demonstrated 44% improvement in overall survival in HCC
- Nexavar expected to become the reference standard of care for the 1st line treatment of HCC
- No current standard of care in HCC defined; only few chemotherapies demonstrated meaningful activity
- Submitted in EU, U.S. and China – potential market entry in early 2008
- Overexpression of Raf in HCC patients favors Nexavar's mode of action

## Nexavar in NSCLC and Melanoma: Late-Stage Clinical Program Progressing



### Non-Small Cell Lung Cancer (NSCLC)

- Phase III trial (ESCAPE) in combination with carboplatin/paclitaxel in 1st-line setting in patients with NSCLC (all histology types) completed enrollment of approx. 900 patients
- Additional phase III initiated with gemcitabine and cisplatin +/- Nexavar in 1st-line treatment of NSCLC currently underway. Expected to enroll approx. 350 patients
- Other/additional drug combinations under assessment
- Data expected to mature in 2008. Launch of Nexavar in NSCLC planned for 2009

### Malignant Melanoma

- Phase II study (1st-line) with DTIC +/- Nexavar showed positive trend in progression free survival at tolerable toxicity. Median PFS: 21.1 weeks in the Nexavar arm vs. 11.7 weeks in the placebo arm
- Phase III trial (1st-line) investigating Nexavar in combination with paclitaxel/carboplatin ongoing (ECOG trial). Data expected to mature in late 2008

# Metastatic Breast Cancer May Add Significantly to the Potential of Nexavar



1st-line Therapy	1st-/2nd-line Therapy
Nexavar in combination with <ul style="list-style-type: none"> <li>Paclitaxel</li> <li>Docetaxel or Letrozole</li> <li>Paclitaxel or Bevacizumab</li> </ul>	Nexavar in combination with <ul style="list-style-type: none"> <li>Gemcitabine</li> <li>Capecitabine or Letrozole</li> <li>Letrozole or Anastrozole or Exemestane</li> </ul>

- Metastatic breast cancer is the most common form of female cancer with approx. 180,000 new cases estimated in the U.S. for 2007
- Multiple international phase II protocols investigating Nexavar under way
- Initiation of phase III planned for late 2009
- Potential launch in 2013
- Nexavar peak sales potential in breast cancer: >€ 750 million

# We have a Promising CV Pipeline



As of August 2007	Phase I	Phase II	Phase III	Submitted
No. of projects	14	17	20	9
	HT / HF <b>sGC Stimulator</b> PH in COPD <b>Elastase Inhibitor</b> Cancer L19-SIP Cancer L19-TNF Cancer DAST Inhibitor Menopausal Management ER6 Agonist Hypogonadism Treatment sF-Ment Crohn's IBD Lipoxin DME VEGF Trap-Eye Alzheimer PET Imaging ACS Aspirin i.v. Fast Dissolving Tablet Levitra	A'fib / Stable Angina <b>Adenosine A1 Agonist</b> Acute Heart Failure <b>sGC Activator</b> Pulmonary Hypertension <b>sGC Stimulator</b> ACS <b>Rivaroxaban</b> Sagopilone (ZK-EPO) Parkinson's Disease Spheramine Gram-neg. VA Pneumonia Amikacin analog (NKTR-061) Liposomal Formulation Kogonate Breast Cancer Nexavar Additional Indications Nexavar Fertility Control FC Patch Fildencia Fertility Control Vallette low Multiple Sclerosis Alendronate MRI (USA) Gadoxetate New Indications Levitra	VTE Prevention <b>Rivaroxaban</b> SPAF <b>Rivaroxaban</b> DVT Treatment <b>Rivaroxaban</b> Nexavar Ind. / aggr. NHL, 1st line Zevatin CLL 2nd line Campath Bone Metast. Prevent. (Breast Ca.) Bonafos Dimerin/axosol (J) YAZ Fertility Control YAZ Plus T-Cell Disease Bleeding DUB-OC (E2/DNG) Menopausal Marava Menopausal Management Angeliq low-low Endometriosis Valsartan Fertility Control Yasmin plus / YAZ plus Fertility Control LCS (GLP-1/NG) MS Treatment Betaferon high dose (BEYOND) CT Ultravist 370 New Indications (US) Avetex	SRD (p) Fosrenol Bleeding control rThrombin RCC Nexavar CLL 1st line Campath VMS Menostar transdermal MRI (J) E2 / LNG MRA Magnevist MRA MRI (US, J) Primovist PIG / New Indications (EU) Avetox
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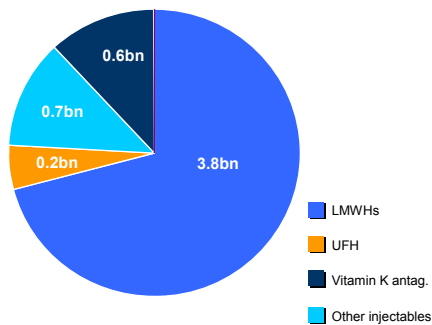
## ■ Rivaroxaban – A new oral anticoagulant

## Anticoagulants – A Large Unmet Medical Need



Market 2006 \$5.3bn

Medical Need



- Approximately 6.5 million people worldwide are affected annually by venous thromboembolism (VTE)
- Up to 600,000 people are hospitalized in the U.S. each year for deep vein thrombosis (DVT)
- Approx. 8.5 million AFIB patients in Europe, Japan and U.S. (prevalence)
- AFIB patient has a 5-fold higher risk of stroke events

Source: IMS Health

## An Ideal Anticoagulant Should Have ...



### Rivaroxaban has:

<b>Oral administration</b>	Convenient use both in and out of hospital	✓
<b>Once daily dosing</b>	Key issue to enhance compliance in the target population	✓
<b>Predictability</b>	Safe and effective regulation of coagulation from the first dose and throughout therapy	✓
<b>Wide therapeutic window</b>	Broad safety margin at a wide range of effective doses	✓
<b>Minimal food/drug interactions</b>	Ease of use with concomitant medication and diet	✓
<b>No monitoring</b>	No need for laboratory monitoring saves healthcare costs through fewer hospital / physician visits and patients' time	✓

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... based on current knowledge

## Rivaroxaban: Comprehensive Late-Stage Development Program in Place



Trial status	Indication	Trial design	Dosing	Guidance
Phase III <b>RECORD</b>	VTE Prevention in patients undergoing major orthopedic surgery	>10,000 pts, hip replacement or knee replacement vs. standard treatment (enoxaparin)	10mg once daily for 5 weeks (hip) or 14 days (knee)	Regulatory filing planned in EU in late 2007, in U.S. 2008
Phase III <b>ENIGMA</b>	VTE treatment and long-term secondary prevention	~7,500 pts, vs. standard treatment	20mg once daily main dose, treatment duration up to 12 months and beyond	Regulatory filing expected in 2010
Phase III <b>ROCKET AF</b>	Prevention of stroke in patients with atrial fibrillation (SPAF)	~14,000 pts, non-inferiority vs. standard treatment (Warfarin)	20mg once daily main dose, treatment duration 12-24 months	Regulatory filing expected in 2010
Phase II <b>ALIAS</b>	Secondary prevention of fatal and non-fatal cardiovascular events in patients with acute coronary syndrome (ACS)	~3,500 pts, on top of standard treatment	Dose finding study, twice and once daily dosing for up to 6 months	Regulatory filing currently expected in 2012

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## Rivaroxaban: Results and Conclusions from the RECORD 3 Study



**RECORD 3**

Published at ISTH in July, 2007

- Double-blind, randomized, controlled **Phase III study for VTE Prevention in elective total knee replacement patients**
- Multiregional study with **2,531 patients at 147 sites in 19 countries**
- **Primary endpoint** (composite DVT, PE and all-cause mortality): demonstrated **superior efficacy** vs. enoxaparin (49% rel. risk reduction (RRR);  $p < 0.001$ )
- **Secondary endpoint** (major VTE, symptomatic VTE): **superior efficacy** vs. enoxaparin (62% RRR;  $p = 0.01$ / 64% RRR;  $p = 0.006$ )
- Rivaroxaban had **comparable safety versus enoxaparin** (major bleedings rates low and similar in both groups), no evidence of liver safety issues attributable to rivaroxaban, no evidence of reactivation of coagulation after treatment cessation
- Presentation of full data set of additional RECORD program targeted for a major scientific congress

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## Our Pharma Pipeline Has the Potential to Transform the Business



Project	Indication	Estimated launch	Peak sales potential (in €m)
Nexavar	Renal Cell Cancer	Launched	} 500
	Hepatocellular Cancer	Filing June 2007	
	Melanoma	> 2008	} >750
	Non-Small Cell Lung Cancer	2009	
	Breast Cancer	2013	
Rivaroxaban	VTE Prevention	2009	} >2,000
	DVT Treatment	2011	
	Stroke Prevention in AFIB	2011	
	Acute Coronary Syndrome	2013	
Betaseron incl. Life Cycle Mgmt.	Multiple Sclerosis incl. BENEFIT incl. BEYOND	Launched 2008	>1,000
Yasmin/Yaz incl. Life Cycle Mgmt.	Oral contraception; PMDD; Acne	Launched	>1,000
Kogenate incl. Life Cycle Mgmt.	Hemophilia A incl. Kogenate Liposomal	Launched 2011/2012	>1,000

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## Summary



- Remain committed to further strengthening our HealthCare business, focusing on specialty pharmaceuticals and consumer OTC
- Increase return on R&D investments through improved productivity, higher quality and focus on fewer therapeutic research areas and assets
- Nexavar – A new franchise building opportunity
- Presented new and exciting data for Rivaroxaban further confirming its potential



**A pharma pipeline with the potential to transform the business**

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## ■ Appendix

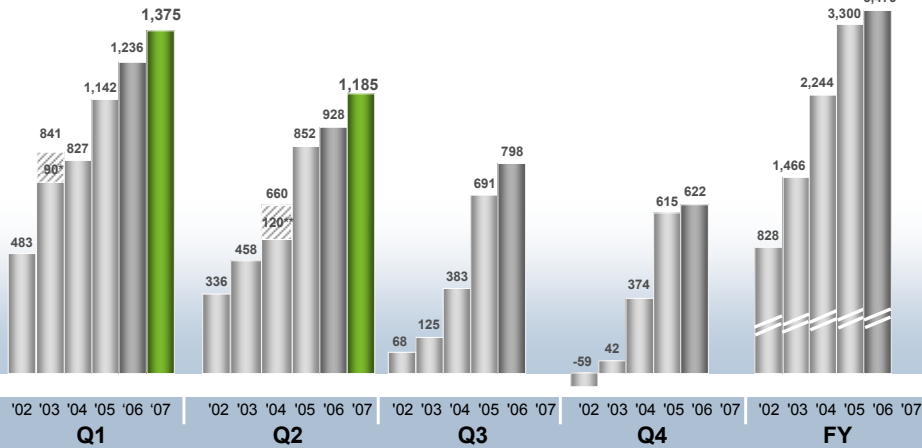
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# 18 Consecutive Quarters With Y-o-Y Underlying EBIT Improvement



Underlying EBIT in € million



2002 underlying EBIT as reported in FY 2003  
 2003 underlying EBIT as restated in 2004  
 2004 underlying EBIT as reported in 2004  
 2005 underlying EBIT as reported in 2005  
 2006 underlying EBIT as reported in 2006

\* Including €90m EBIT from divested products  
 \*\* Including €120m reversal of pension provisions

## Q2 – Financial Highlights

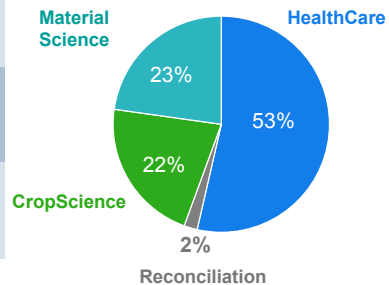


### Key Figures

### Underlying EBITDA by Subgroup

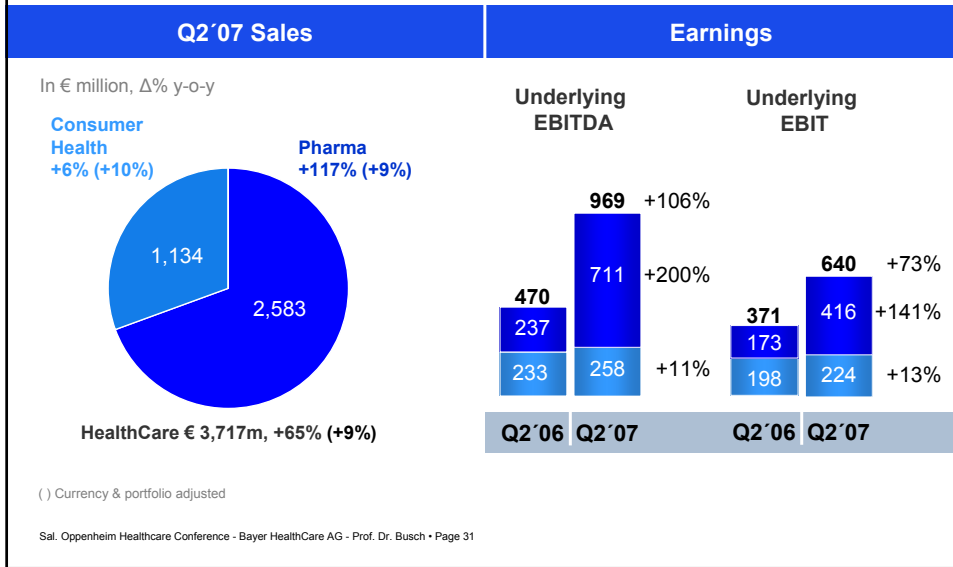
In € million, Δ% y-o-y

	Sales	EBITDA*	EBIT*	Core EPS
	8,217	1,806	1,185	€1.03
Δ%	+ 22%	+ 39%	+ 30%	+ 39%
Δ% Adj. **	+ 5%			

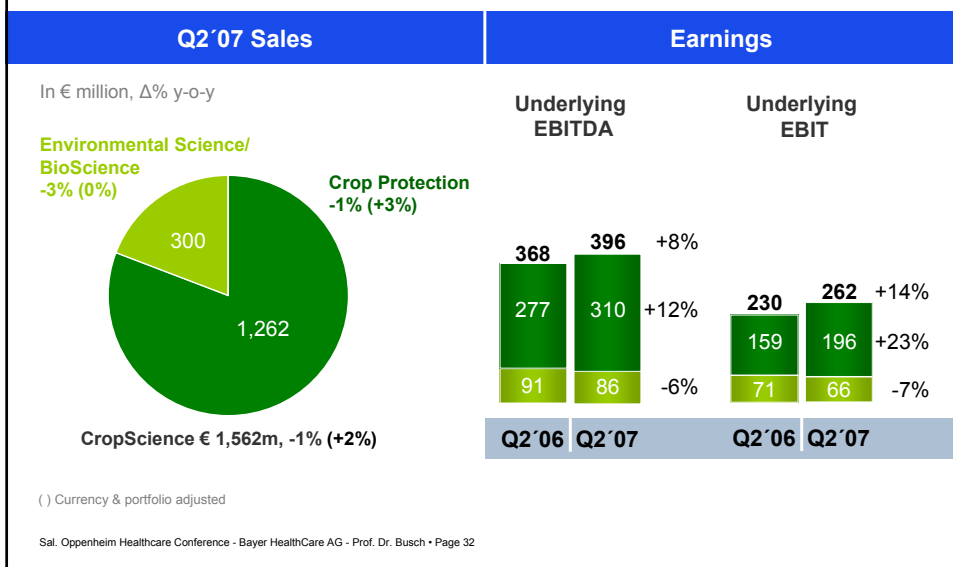


\* Before special items  
 \*\* Currency & portfolio adjusted

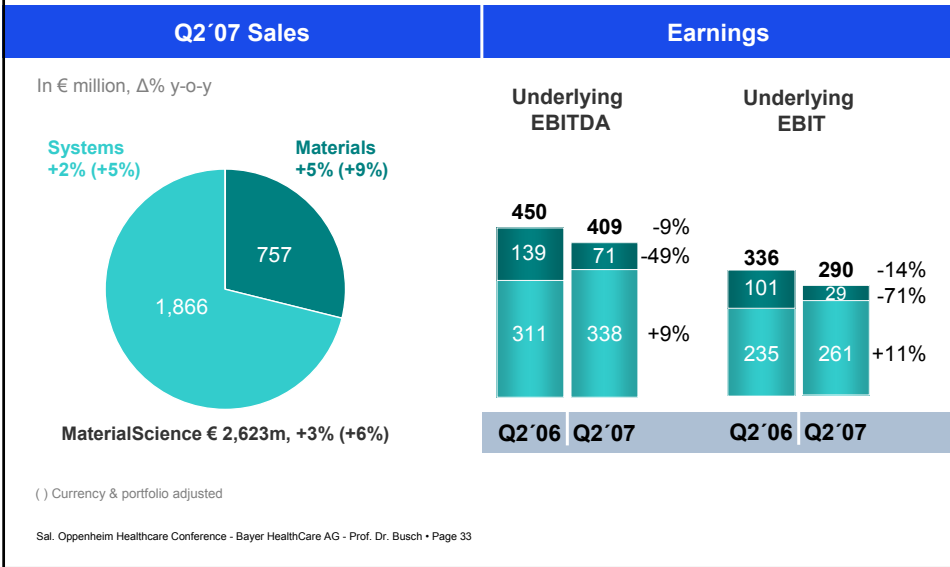
# HealthCare – Earnings Jump on Schering Acquisition and Performance



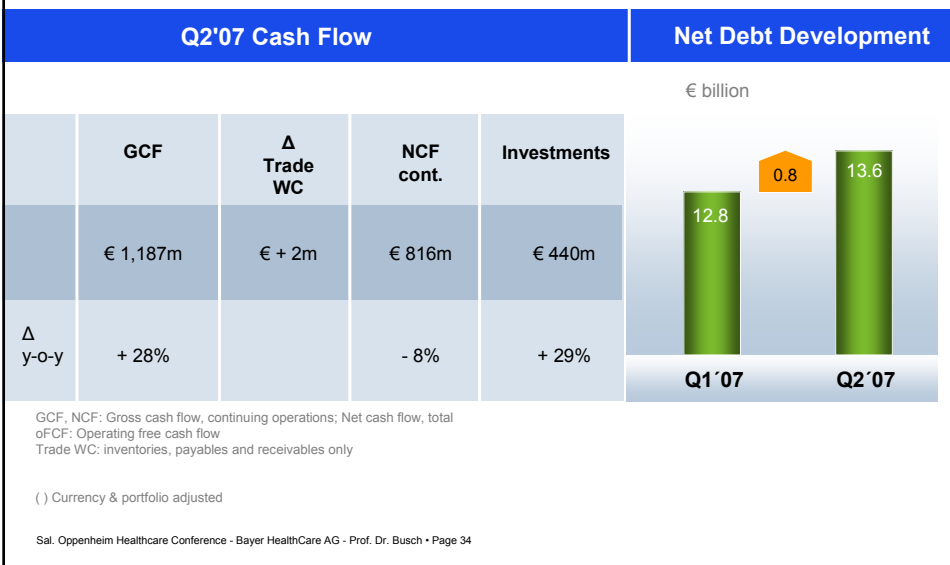
# CropScience – Earnings up on Higher Volumes and Savings



# MaterialScience – Robust Volume Growth



# NCF Impacted by Incentive Payments, Taxes and Restructuring Disbursements



## Outlook for FY 2007 Raised in June



### Group

- **Increase sales by >10%**
- **Underlying EBITDA by >10%**
- **Margin\* above 20% (raised in June)**

### Subgroups

- **HealthCare** (raised in June)  
Growth in all divisions at or above market.  
Margin\* at 25%.
- **CropScience** (up-dated)  
Sales above previous year's 2nd half.  
Margin\* above 22%.
- **MaterialScience** (up-dated)  
Higher volumes and good, value-creating earnings level. Q3 underlying EBITDA roughly on par with Q2.

\* Underlying EBITDA margin

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## Mid-term Financial Targets



### Underlying EBITDA margin

**Bayer HealthCare**



around 28% in 2009 (previously: 27%)

**Bayer CropScience**



approximately 25% in 2009

**Bayer MaterialScience**



>18% under favorable economic conditions



**Group exceed 22% in 2009** (previously: approx. 22%)

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