FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OWR APPRO	VAL			
	OMB Number:	3235-0287			
l	Estimated average burd	en			
l	hours per response:	0.5			

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name an Coissac (Last) C/O ALE 352 KNC	3. D. 10/3	Susuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN] 3. Date of Earliest Transaction (Month/Day/Year) 10/31/2012 4. If Amendment, Date of Original Filed (Month/Day/Year)								(Che	Office below	olicable) ctor er (give title w) & Pres. AI		Owner (specify) Int'l				
(Street) CHESHIRE CT 06410 (City) (State) (Zip)													X	Forn	Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired	, Dis	sposed o	f, or I	Bene	ficially	/ Own	ed		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day							Execution Date,		3. 4. Securition Disposed Code (Instr.						Secur	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	Amount	(A) (D)	or Pi	ice	Trans	action(s) 3 and 4)	tion(s)					
Common	Stock, par v	value \$.0001 per	2012	012		S		33,546	Г) \$	90.8(1)	5	52,336	D				
Common	Stock, par v	2012	012		S		39,188	Г	\$	\$91.15(2)		13,148	D					
Common	2012	.012		S		12,030	Γ	\$	92.18 ⁽³		1,118	D						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	ative Conversion or Exercise Price of Derivative Security Date (Month/Day/Year) Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Signature Conversion or Exercise (Month/Day/Year)			4. Transa Code (I 8)		5. Nu of Deriv Secul Acqu (A) or Dispo of (D) (Instrand 5	rative rities ired r osed)	Expirati (Month/	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Exercisable		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. This transaction was executed in multiple trades through a broker-dealer at prices ranging from \$90.00 \$90.99. The price reported in this column reflects the weighted average sales price. Upon request, the reporting person will provide to the SEC staff full information regarding the number of shares sold at each price.
- 2. This transaction was executed in multiple trades through a broker-dealer at prices ranging from \$91.00 \$91.99. The price reported in this column reflects the weighted average sales price. Upon request, the reporting person will provide to the SEC staff full information regarding the number of shares sold at each price.
- 3. This transaction was executed in multiple trades through a broker-dealer at prices ranging from \$92.00 \$92.99. The price reported in this column reflects the weighted average sales price. Upon request, the reporting person will provide to the SEC staff full information regarding the number of shares sold at each price.

/s/ Patrice Coissac 11/02/2012

** Signature of Reporting Person Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly.$

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.