FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	. OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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 and Address of Reporting Person* SQUINTO STEPHEN P					AI	2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC [alxn]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 11/16/2004									X Officer (give title Officer (specify below) below) EVP, Head of Research						
(Street)				_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
CHESH	IRE C	Γ	06410											X		-		orting Person One Repo	
(City)	(S	tate)	(Zip)		-										Persor	1			
		Tab	le I - No	n-Deriv	ative	Se	curit	ies Ac	quired	, Dis	posed o	of, or Be	nefici	ially	Owned	l			
Da		Date			2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Di		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4		and 5) Securiti Benefic Owned		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	:	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock, par value \$.0001			11/16	5/2004	2004			М		1,875	5 A :		375	30,001			D		
Common Stock, par value \$.0001			11/16	5/2004				M		3,125	A	\$2.	375	33	3,126		D		
Common Stock, par value \$.0001			11/16	/2004				S		1,700	1,700 D		l.17	31,426			D		
Common Stock, par value \$.0001 11/16				5/2004	2004			S		1,964	1,964 D \$2).84	29,462			D		
Common Stock, par value \$.0001 11/16			11/16	5/2004	2004		S		336 D		\$20).82	29,126			D			
Common Stock, par value \$.0001 11/16/						S		,		\$21		<u> </u>			D				
		7	Table II -								osed of converti				wned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/D		n Date, Transacti Code (Ins			ion of E		Expiratio	6. Date Exercisak Expiration Date (Month/Day/Year)		Amount of Securities Underlying Derivative	7. Title and Amount of Securities Junderlying Jerivative Security Instr. 3 and 4)		Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amour or Number of Shares	er					
Option to Purchase Common Stock, par value \$.0001	\$2.375	11/16/2004			M			1,875	02/10/19	99	02/10/2005	Common Stock, par value \$.0001	1,87	5	\$0	0		D	
Option to Purchase Common Stock, par value \$.0001	\$2.375	11/16/2004			М			3,125	05/01/19	99 (05/01/2005	Common Stock, par value \$.0001	3,12	5	\$0	13,125	5	D	

Explanation of Responses:

Remarks:

The sales reported by this Form 4 are made pursuant to the terms of a Sales Plan designed to meet the requirements of Rule 10b5-1(c)(1) of the Securities Exchange Act.

/s/ Stephen P. Squinto 11/18/2004

** Signature of Reporting Person Date

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

- * 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.