FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES 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* BELL LEONARD						2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN								5. Relationship of Report (Check all applicable) X Director			rting Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 11/08/2004									X Officer (give title below) Other (specify below) Chief Executive Officer				
——————————————————————————————————————						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CHESHIRE CT 06410					_										X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(S	tate)	(Zip)												Person				
		Tak	le I - Noi	า-Deriง	vativ	e Se	curi	ties Ac	quired	, Dis	sposed o	of, or Be	enefic	ially	Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D							2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. r) 8)					and Securities Beneficially Owned Follo		s ally following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) (D)	r Pric	ce	Reported Transact (Instr. 3 a	ion(s)		1	Instr. 4)
Common Stock, par value \$.0001 11/08/							2004				11,95	2 A	\$2	.375	261	1,612		D	
Common Stock, par value \$.0001 11/08/						4					1,50	1,501 A		.375	263,113			D	
Common Stock, par value \$.0001 11/08/						2004			S		7,80	7,801 D \$		9.94	255,312			D	
		-	Table II -								osed of converti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 3)		5. Number of Of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		:e	and 7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)		Derivativ Security		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	oer					
Option to Purchase Common Stock, par value \$.0001	\$2.375	11/08/2004			М			11,952	02/10/1	999	02/10/2005	Common Stock, par value \$.0001	11 9	52	\$0	0		D	
Option to Purchase Common Stock, par value	\$2.375	11/08/2004			М			1,501	05/01/1	999	05/01/2005	Common Stock, par value \$.0001	1 50	01	\$0	67,708	3	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.

11/09/2004 Dr. Leonard Bell

** 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.