UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SCHEDULE 13G

Under the Securities Exchange Act of 1934

ALEXION PHARMACEUTICALS, INC. (Name of Issuer)

Common Stock (Title of Class of Securities)

0015351109 (CUSIP Number)

January 29, 1999 (Date of Event which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

- |_| Rule 13d-1 (b)
- |x| Rule 13d-1 (c)
- |_| Rule 13d-1 (d)

* The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter disclosures provided in a prior cover page.

The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

CUSIP No.	0015351109			
(1)	Name of Reporting Person S.S. or I.R.S. Identification No. of Above Person OrbiMed Advisers Inc.			
(2)	Check the	e Appropri	iate Box if a Member of Group (See Instructions)	
	[]	(a)		
	[]			
(3)	SEC Use (
(4)	Citizenship or Place of Organization British Virgin Islands			
Shares		(5)	Sole Voting Power 0	
Benefic Owned D Each	by		Shared Voting Power 750,500	
Report	TIIG			

Sole Dispositive Power

Person

With

(7)

	(8) Shared Dispositive Power 750,500
(9)	Aggregate Amount Beneficially Owned by Each Reporting Person 750,500
(10)	Check if the Aggregate Amount in Row (9) Excludes Certain Shares (See Instructions)
(11)	Percent of Class Represented by Amount in Row (9)
(12)	Type of Reporting Person (See Instructions) IA

CUSIP No. 0015351109 Name of Reporting Person (1) S.S. or I.R.S. Identification No. of Above Person Worldwide Health Sciences Portfolio (2) Check the Appropriate Box if a Member of Group (See Instructions) [] (a) [] (b) ._____ (3) SEC Use Only (4)Citizenship or Place of Organization New York Number of (5) Sole Voting Power 0 Shares _____ Beneficially Shared Voting Power 750,500 Owned by (6) Each _____ Reporting Person (7) Sole Dispositive Power 0 With -----Shared Dispositive Power 750,500 (9) Aggregate Amount Beneficially Owned by Each Reporting Person 750,500 ______ (10)Check if the Aggregate Amount in Row (9) Excludes Certain Shares (See Instructions)

Percent of Class Represented by Amount in Row (9)

Type of Reporting Person (See Instructions) IV

(11)

(12)

CUSIP No. 0015351109 Name of Reporting Person (1) S.S. or I.R.S. Identification No. of Above Person OrbiMed Advisors LLC Check the Appropriate Box if a Member of Group (See Instructions) (2) [] (a) [] (b) ._____ (3) SEC Use Only (4)Citizenship or Place of Organization Delaware Number of (5) Sole Voting Power 0 Shares _____ Beneficially Shared Voting Power 750,500 Owned by (6) Each _____ Reporting Person (7) Sole Dispositive Power 0 With -----Shared Dispositive Power 750,500 (9) Aggregate Amount Beneficially Owned by Each Reporting Person 750,500 ______ (10)Check if the Aggregate Amount in Row (9) Excludes Certain Shares (See Instructions)

Percent of Class Represented by Amount in Row (9)

Type of Reporting Person (See Instructions) CO

(11)

(12)

CUSIP No. 0015351109 Name of Reporting Person (1) S.S. or I.R.S. Identification No. of Above Person Caduceus Capital Trust Check the Appropriate Box if a Member of Group (See Instructions) (2) [] (a) [] (b) ._____ (3) SEC Use Only (4)Citizenship or Place of Organization Bermuda Number of (5) Sole Voting Power 0 Shares _____ Beneficially Shared Voting Power 750,500 Owned by (6) Each _____ Reporting Person (7) Sole Dispositive Power 0 With -----Shared Dispositive Power 750,500 (9) Aggregate Amount Beneficially Owned by Each Reporting Person 750,500 ______ (10)Check if the Aggregate Amount in Row (9) Excludes Certain Shares (See Instructions)

Percent of Class Represented by Amount in Row (9)

Type of Reporting Person (See Instructions) 00

(11)

(12)

CUSIP No. 0015351109 Name of Reporting Person (1) $\ensuremath{\mathsf{S.S.}}$ or I.R.S. Identification No. of Above Person Finsbury Worldwide Pharmaceutical Trust Check the Appropriate Box if a Member of Group (See Instructions) (2) [] (a) [] (b) _____ (3) SEC Use Only (4)Citizenship or Place of Organization United Kingdom Number of (5) Sole Voting Power 0 Shares _____ Beneficially Shared Voting Power 750,500 Owned by (6) Each _____ Reporting Person (7) Sole Dispositive Power With -----Shared Dispositive Power 750,500 (9) Aggregate Amount Beneficially Owned by Each Reporting Person 750,500 ______ (10)Check if the Aggregate Amount in Row (9) Excludes Certain Shares (See Instructions)

Percent of Class Represented by Amount in Row (9)

Type of Reporting Person (See Instructions) 00

(11)

(12)

CUSIP No. 0015351109 Name of Reporting Person (1) S.S. or I.R.S. Identification No. of Above Person PHARMA/wHEALTH (2) Check the Appropriate Box if a Member of Group (See Instructions) [] (a) [] (b) ._____ (3) SEC Use Only (4)Citizenship or Place of Organization Luxembourg Number of (5) Sole Voting Power 0 Shares _____ Beneficially Shared Voting Power 750,500 Owned by (6) Each _____ Reporting Person (7) Sole Dispositive Power 0 With -----Shared Dispositive Power 750,500 (9) Aggregate Amount Beneficially Owned by Each Reporting Person 750,500 ______ (10)Check if the Aggregate Amount in Row (9) Excludes Certain Shares (See Instructions)

Percent of Class Represented by Amount in Row (9)

Type of Reporting Person (See Instructions) 00

(11)

(12)

Item 1. Issuer

- (a) Alexion Pharmaceuticals, Inc.
- (b) 25 Science Park New Haven, CT 06511

Item 2. Persons Filing

(a) Name of Persons Filing:

OrbiMed Advisers Inc.
OrbiMed Advisors LLC
Worldwide Health Sciences Portfolio
Finsbury Worldwide Pharmaceutical Trust
Caduceus Trust
PHARMA/wHEALTH

- (c) Citizenship:

Please refer to Item 4 on each cover sheet for each filing person

(d) Title of Class of Securities:

Common Stock

(e) CUSIP Number: 0015351109

Item 3. Not Applicable

Item 4. Ownership

Please see Items 5, 6, 7, 8, 9, and 11 for each cover sheet for each filing entity.

Item 5. Ownership of Five Percent or Less of a Class

Not applicable.

Item 6. Ownership of More than Five Percent on Behalf of Another Person

Not applicable.

Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on by the Parent Holding Company

Not applicable.

Item 8. Identification and Classification of Members of the Group

Not Applicable.

Item 9. Notice of Dissolution of Group

Not Applicable.

Item 10. Certification

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: February 12, 1999

ORBIMED ADVISERS INC.

By: /s/ Samuel D. Isaly

Name: Samuel D. Isaly

Title: President

ORBIMED ADVISORS LLC

By: /s/ Samuel D. Isaly

Name: Samuel D. Isaly Title: Managing Member

WORLDWIDE HEALTH SERVICES

PORTFOLIO

By: /s/ Samuel D. Isaly

Name: Samuel D. Isaly

Title: Director

CADUCEUS CAPITAL TRUST

By: /s/ Deborah O'Donnel

Name: Deborah O'Donnel

Title: Secretary

FINSBURY WORLDWIDE PHARMACEUTICAL TRUST

By: /s/ Samuel D. Isaly

Name: Samuel D. Isaly Title: Director

PHARMA/wHEALTH

By:/s/ Samuel D. Isaly

Name: Samuel D. Isaly

Title: Director