

Umecrine Cognition announces a Notice of Allowance from USPTO for a patent protecting a pharmaceutical formulation of its proprietary lead compound golexanolone

STOCKHOLM. Umecrine Cognition AB, a Karolinska Development (NASDAQ Stockholm: KDEV) portfolio company, today announced that the United States Patent and Trademark Office (USPTO) has issued a Notice of Allowance for a patent protecting a pharmaceutical formulation of its lead candidate drug golexanolone, currently in clinical Phase 2a development for hepatic encephalopathy. Upon issuance, the granted patent will expire in 2038.

The allowed claims protect a pharmaceutical formulation which enables oral administration of the company's lead compound golexanolone (aka GR3027), presently in clinical phase 2a development for hepatic encephalopathy (HE) in patients with cirrhosis. A corresponding International Patent Application is also pending, which will be pursued in key markets worldwide.

Golexanolone is a GABAA receptor modulating steroid antagonist and belongs to a novel class of neurosteroid based drugs for oral administration. Enhanced GABAA receptor signaling is implicated in key neurological symptoms associated with HE, such as impaired cognitive- and motor functions. Golexanolone has been shown to reverse these neurological symptoms in animal models of HE and to have promising therapeutic properties in humans. Golexanolone is currently the only drug in development for HE directly targeting the central nervous system.

"This invention is important since it enables oral administration of the drug and we are therefore very pleased to have achieved this major milestone, comments Magnus Doverskog, CEO at Umecrine Cognition." This patent will be a significant addition to Umecrine Cognition's growing patent portfolio for golexanolone".

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TO THE EDITORS

About Umecrine Cognition AB

Umecrine Cognition, a Karolinska Development (Nasdaq Stockholm: KDEV) portfolio company, is developing a potential therapy that represents a new target class relevant for several major CNS-related disorders. The primary focus is to develop a treatment for life-threatening overt hepatic encephalopathy and long-term treatment in minimal hepatic encephalopathy in patients with liver disease, a growing area with high unmet medical need. The current lack of therapeutics that



directly addresses the neurocognitive signs and symptoms of hepatic encephalopathy makes a novel treatment likely to become a major contribution for the treatment of this disorder. For more information, please visit www.umecrinecognition.com.