THOMAS EKLUND NEW CHAIRMAN OF PHARMALINK

Stockholm, August 24, 2017. The Swedish specialty pharmaceutical company Pharmalink AB today announced the appointment of Thomas Eklund as new Chairman of the board.

Thomas Eklund joined the board on August 15, 2017.

“We are very happy to have Thomas on board as we prepare for taking our lead candidate drug Nefecon through a clinical Phase 3 study for patients with primary IgA nephropathy. Thomas’s broad knowledge and long experience from both the healthcare industry and the financial sector will be a welcome addition to the team”, said Bengt Julander, founder and outgoing Chairman of Pharmalink.

Thomas has extensive experience from the pharmaceutical and medtech industry, as well as the financial sector where he has held different leading positions, including CEO and Head of Europe at Investor Growth Capital AB. Other previous positions include Investment Director at Alfred Berg ABN AMRO Capital Investment AB and Vice President at Handelsbanken Markets. He is currently Chairman of the board of Moberg Pharma AB and Itrim AB, and board member of Boule Diagnostics AB, Biotage AB, Neoventa Medical AB, Memira AB, and Rodebjer Form AB.

For further information, please contact:

Pharmalink AB:
Renee Aguiar-Lucander, Chief Executive Officer, +46 (0)72 252 1006
Email: renee.lucander@pharmalink.se

Mikael Widell, Head of Communications, +46 (0)70 311 9960
Email: mikael.widell@pharmalink.se

www.pharmalink.se

Notes to Editors

About Pharmalink AB
Pharmalink is a specialty pharmaceutical company developing high value products for patients with significant unmet medical needs. With a highly experienced, dynamic management team, Pharmalink draws on its extensive experience of pharmaceutical development and marketing to efficiently identify and progress valuable and de-risked products. Visit www.pharmalink.se for further information.

About Nefecon
Nefecon is an investigational treatment for patients with primary IgA nephropathy (IgAN) at risk of developing end-stage renal disease (ESRD). Nefecon has successfully completed a randomized, placebo-controlled Phase 2b study in 149 primary IgAN patients (full analysis set) at risk of developing ESRD, under standardized rigorous blood pressure control with an angiotensin-converting enzyme inhibitor (ACEI) and/or angiotensin II receptor blocker (ARB). A Phase 3 registration trial is being planned.

Nefecon is an oral, targeted-release and locally acting formulation of the potent corticosteroid, budesonide, that down-regulates the disease process in the kidney through suppression of the gastrointestinal immune system thus exploiting the pivotal role the gastrointestinal tract plays in the overall immune response. Promising results indicate that treatment with Nefecon may provide clinical benefits to primary IgAN patients at risk of progressing to ESRD, and provide an alternative to dialysis and transplantation. Nefecon has received orphan drug designation in primary IgAN by the US Food and Drug Administration (FDA) and the European Medicines Agency (EMA).

About IgA Nephropathy (IgAN)
IgAN is the most common form of glomerulonephritis (inflammation of the kidney glomeruli). The disease is characterized by deposits, predominantly containing polymeric IgA antibody, in the kidney that cause inflammation and renal damage.

IgAN can occur at any age, but the clinical onset is commonly during the second or third decades of life. It has been estimated that up to 40% of patients with primary IgAN progress to renal failure, often referred to as ESRD, within 5-30 years following diagnosis. This patient population is estimated to at least 200,000 in major markets.

Patients suffering renal failure require dialysis or kidney transplantation. Primary IgAN accounts for 10% of renal transplants among patients with primary glomerulonephritis in the US and between 7-20% of patients in Europe and Australia in long-term dialysis and renal transplantation programs.