



## **AM-Pharma Announces Appointment of Russell Greig as Chairman**

**Bunnik, The Netherlands, 4 January 2012.** AM-Pharma B.V., a biopharmaceutical company focused on the preclinical and clinical development of recombinant human Alkaline Phosphatase (AP) for treatment of Acute Kidney Injury and Inflammatory bowel diseases, today announced the appointment of Dr Russell Greig as Chairman of the Supervisory Board.

Dr Greig served nearly three decades with pharmaceutical giant GlaxoSmithKline, most recently as President of SR One, GSK's Corporate Venture Group.

Prior to joining SR One, he served as President of GSK's Pharmaceuticals International from 2003 to 2008 and also served on the GSK Corporate Executive Team.

Dr Greig originally joined GSK (then SmithKline & French) in 1980 in the Departments of Tumor and Cell Biology. In 1991, following the merger with Beecham, he was appointed Vice President, Project Management. From 1993 to 1996, he served as Vice President and Director of Advanced Technologies in Genetics with special responsibility for managing collaborations with The Institute of Genomic Research and Human Genome Sciences. In 1996, Dr Greig joined SmithKline Beecham's European Pharmaceutical Operations as Vice President and Director of European Market Development, and was later appointed Managing Director and General Manager of SmithKline Beecham's UK Pharmaceuticals. Following the merger of SmithKline Beecham with GlaxoWellcome in 2000, he returned to the United States as Senior Vice President for Worldwide Business Development.

At the same time, Eric Claassen will step down from the board. Eric Claassen has been chairman of AM-Pharma for more than 10 years and shepherded the company through its initial phase of development, leading to AM-Pharma's D-round. This €29.2m round announced in September 2011 was the largest private financing round in the Netherlands for a biotech firm ever.

Eric Claassen said; "It feels good to hand over the reins of AM Pharma now it is well financed and backed by a broad professional syndicate. The new board will bring AM Pharma to well-deserved success."

Russell Greig, recently appointed Chairman of AM-Pharma commented:

"AM-Pharma is a company that I believe will be "one to watch". They have embarked on a firm strategy to address the unmet medical need of treating Acute Kidney Injury. The positive clinical data and blockbuster market potential coupled with a solid development plan from an

experienced management team, have all convinced me that AM-Pharma is poised to make a real difference in a field that has long been neglected.”

Erik van der Berg, CEO of AM-Pharma, added:

“Russell combines senior level international management expertise with a large pharma network and a dynamic outlook. We are delighted to have someone of this calibre being introduced by the new investors and leading us at this pivotal stage in our corporate development.”

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**Notes for Editors**

**About AM-Pharma** [www.am-pharma.com](http://www.am-pharma.com)

AM-Pharma is a biopharmaceutical company focused on the preclinical and clinical development of Alkaline Phosphatase as protective treatment of severe inflammatory diseases. AM-Pharma is based in Bunnik, The Netherlands.

Based on the strong results of the Phase II trials with bovine Alkaline Phosphatase in Acute Kidney Injury and a Phase II trial in severe Ulcerative Colitis, AM-Pharma will replace bovine Alkaline Phosphatase with its proprietary recombinant form of human Alkaline Phosphatase. This recombinant material will be used in future trials and for commercialization. Following series D fundraising of €29.2M, AM-Pharma will finalize the GMP production of recombinant AP and its further development through phase II in patients.

**About Acute Kidney Injury** Acute Kidney Injury (AKI) involves an inflammatory process in the kidney which can lead to complete loss of renal function. Hospital-acquired AKI affects annually around 2 million patients. It occurs in as many as 4% of hospital admissions and 40% of critical care admissions. Depending on the severity and cause of renal injury, mortality ranges from 10% to as high as 70%. Annually, the deaths of around 700,000 patients in Europe, US and Japan are related to AKI. In the US alone, around USD10 billion is spent each year on managing this big medical problem. The most important causes of AKI are sepsis, cardiovascular surgery, exposure to nephrotoxic drugs and trauma. AKI patients that need dialysis have the worst prognosis. Currently the only treatment option is dialysis and supportive care. No drugs are approved to treat this condition. Typically these patients are treated in Intensive Care, often with support of nephrologists. The incidence is increasing because of an aging population, an increasing exposure to nephrotoxic drugs in hospitals, increasing number of surgical interventions and an

increasing incidence of hospital infections. An effective drug to treat AKI could be commercially very important. Because of the large number of patients suffering from AKI, the high medical need and the lack of competitors, worldwide annual sales of over USD2 billion could be achieved with an effective drug treatment.

**About Alkaline Phosphatase** Alkaline Phosphatase (AP) is an enzyme that is naturally present in humans on epithelial cells of the gastro-intestinal tract, kidney, liver and lungs. An important role of AP is the dephosphorylation of proinflammatory substances like lipopolysaccharides (LPS) and extra-cellular ATP. AM-Pharma has shown that treatment with exogenous AP can reduce local inflammation and protect the kidney against further damage.