

XOMA Initiates Pilot Trial Studying Gevokizumab in Patients With Pyoderma Gangrenosum

SERVIER to Pursue Schnitzler Syndrome Indication

BERKELEY, Calif., June 13, 2013 (GLOBE NEWSWIRE) -- XOMA Corporation (Nasdaq:XOMA), a leader in the discovery and development of therapeutic antibodies, today announced it has opened enrollment in a pilot study to determine gevokizumab's potential to treat acute inflammatory pyoderma gangrenosum. Pyoderma gangrenosum (PG) is one of the several rare diseases that are classified under the broader cluster of neutrophilic dermatoses. XOMA's pilot study is designed to enroll up to eight patients who are experiencing acute inflammatory PG. An inflammatory episode of PG is characterized by recently developed active ulcers and ulcer-related pain.

"We had previously indicated that XOMA and our partner SERVIER would evaluate the potential to test gevokizumab in a couple of rare disease areas, neutrophilic dermatosis and Schnitzler syndrome. Since the majority of Schnitzler patients are in Western Europe, SERVIER has been actively exploring the potential to pursue this indication in this orphan disease while we have been working with the experts in the neutrophilic dermatosis field to identify which subset of this rare disease class might respond best to gevokizumab. They believe acute inflammatory pyoderma gangrenosum is an ideal candidate, as a significant number of the patients tend to have an underlying inflammatory disease that results in PG's hallmark skin lesions," stated John Varian, Chief Executive Officer of XOMA. "We sought FDA's input on PG prior to deciding if this disease condition should be pursued. Our pilot study will help us understand gevokizumab's ability to treat these patients. With positive results from a small pilot study in PG, we believe we will be able to have a productive End of Phase 2 meeting with FDA to finalize the design of a potential pivotal program."

XOMA's pilot study is designed to enroll up to eight patients who are experiencing acute inflammatory PG. The study is designed to evaluate the response in the first four patients and be able to make decisions to continue the study with a higher dosing regimen. Patients will be assessed on Day 28 to determine gevokizumab's efficacy in controlling the acute inflammatory symptoms of PG, and on Day 84 to determine gevokizumab's longer-term effect on skin ulcers. Both investigator and patient global assessments will be evaluated throughout the study.

About Pyoderma Gangrenosum

Pyoderma Gangrenosum (PG), an inflammatory disease, is one of the several rare diseases that are classified under the broader neutrophilic dermatosis indication. PG typically begins

with the formation of sterile pustules that evolve into painful ulcers of varying sizes and depths. These episodes may be mild or malignant, chronic or relapsing, and they can be permanently disfiguring. Patients typically are treated with high-dose corticosteroids and immunosuppresants to stop the progression of the ulcers. The lesions can take several weeks to months to heal, leaving the patient at elevated risk for infection.

Annually, there are three to ten PG cases per one million people. The disease typically presents between the ages of 20 and 50, and there is a higher incidence in women. 50-70 percent of the cases are associated with systemic diseases, particularly inflammatory bowel disease, ulcerative colitis or Crohn's disease, rheumatic arthritis, monoclonal gammopathy, and internal malignancy.

About Gevokizumab

Gevokizumab is a potent monoclonal antibody with unique allosteric modulating properties and the potential to treat patients with a wide variety of inflammatory and other diseases. Gevokizumab binds strongly to interleukin-1 beta (IL-1 beta), a pro-inflammatory cytokine that has been shown to be involved in non-infectious uveitis, including Behçet's uveitis, cardiovascular disease, and other auto-inflammatory diseases. By binding to IL-1 beta, gevokizumab inhibits the activation of the IL-1 receptor, thereby modulating the cellular signaling events that produce inflammation. Gevokizumab has been studied in over 500 patients, with approximately 300 patients on treatment for six months, and has been shown to be well-tolerated. Information about gevokizumab clinical studies can be found at www.clinicaltrials.gov and www.clinicaltrialsregister.eu.

About XOMA

XOMA is a biotechnology company focused on advancing its portfolio of innovative therapeutic antibodies, both in late-stage clinical development and in preclinical research. Its antibody research and development centers on allosteric modulation, which offers opportunities for new classes of therapeutic antibodies to treat a wide range of human diseases. XOMA is developing its lead product candidate, gevokizumab (IL-1 beta modulating antibody), with SERVIER through a global Phase 3 program in non-infectious uveitis and ongoing proof-of-concept studies in other IL-1-mediated diseases. XOMA's scientific discoveries led to establishment of the XMet program, which consists of three classes of preclinical antibodies, including Selective Insulin Receptor Modulators (SIRMs), that could have a major effect on the treatment of insulin-related diseases.

More detailed information can be found at www.xoma.com.

About SERVIER

SERVIER is a privately run French research-based pharmaceutical company. Current therapeutic domains for SERVIER medicines are cardiovascular, metabolic, neurological, psychiatric and bone and joint diseases, as well as oncology. SERVIER is established in 140 countries worldwide with over 20,000 employees and a 2012 turnover of €3.9 billion. SERVIER invests 25% of its turnover in R&D.

More information is available at: www.servier.com

Forward-Looking Statements

Certain statements contained in this press release including, but not limited to, statements related to XOMA's Phase 2 POC program, the data generated by studies in that program and the indications of future Phase 3 studies on gevokizumab, or that otherwise relate to future periods are forward-looking statements within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. These statements are based on assumptions that may not prove accurate, and actual results could differ materially from those anticipated due to certain risks inherent in the biotechnology industry and for companies engaged in the development of new products in a regulated market. Potential risks to XOMA meeting these expectations are described in more detail in XOMA's most recent filing on Form 10-K and in other SEC filings. Consider such risks carefully when considering XOMA's prospects. Any forward-looking statement in this press release represents XOMA's views only as of the date of this press release and should not be relied upon as representing its views as of any subsequent date. XOMA disclaims any obligation to update any forward-looking statement, except as required by applicable law.

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