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Cerecor Announces Appointment of H. Jeffery Wilkins MD as Chief Development Officer

ROCKVILLE, Md., March 06, 2020 (GLOBE NEWSWIRE) -- Cerecor Inc. (NASDAQ: CERC), a biopharmaceutical company focused on becoming a leader in development and commercialization of treatments for rare pediatric and orphan diseases, today announced that Jeff Wilkins, MD has joined the Company as its Chief Development Officer, with a specific focus on CERC-002, CERC-006 and CERC-007 clinical development programs.

"We are delighted to welcome Dr. Wilkins to the organization," said Mike Cola, Chief Executive Officer. "With his experience in discovery, leading new product development programs and bringing products to market, Dr. Wilkins is a key addition for the Company. We believe he will provide valuable patient insights and clinical guidance as we continue to progress our programs in auto-immune/ inflammatory diseases and complex lymphatic malformations."

Dr. Wilkins brings over 19 years of clinical research experience to the Company, most recently serving as Chief Medical Officer of Zyla Life Sciences. Previously, he held position of Chief Medical Officer at Onspira Therapeutics, Lycera, and Ceptaris Therapeutics, Inc., where he led clinical programs from IND Phase I trials to regulatory approval (including Valchlor[®]). Prior to this, Dr. Wilkins was Vice President, Worldwide Clinical Research, Inflammation/Oncology at Cephalon Inc., where he led clinical development, medical affairs and business development efforts in both therapy areas. Previously, he was Senior Vice President of Clinical Development with Ception Therapeutics, where he headed a successful program in eosinophilic asthma prior to the company's acquisition by Cephalon. Dr. Wilkins entered the pharmaceutical industry with GlaxoSmithKline, where he rose to become Vice President of Discovery Medicine for GSK's Center of Excellence in External Drug Discovery. He also served as Group Director of GSK's urology franchise, responsible for Levitra[®] and the launch of VESIcare[®]. Earlier in his career as a practicing primary care physician, Dr. Wilkins was Co-Founder and Chief Executive Officer of TriValley Primary Care, a large multi-center primary care group in Southeastern Pennsylvania.

Dr. Wilkins received his M.D. from Temple University School of Medicine and his B.S. from Bucknell University.

"I am excited for the opportunity to be part of the Cerecor management team and to lead the development programs across three of our clinical assets," said Dr. Wilkins. "I look forward to applying my program management and clinical development skills to guide the development of CERC-002 in Pediatric-onset Crohn's Disease, CERC-006 for complex Lymphatic Malformations and CERC-007 for Adult Onset Still's Disease (AOSD) and

Multiple Myeloma (MM)."

About CERC-002

CERC-002 (formerly AEVI-002) is an anti-LIGHT (Lymphotoxin-like, exhibits Inducible expression, and competes with HSV Glycoprotein D for HVEM, a receptor expressed by Tlymphocytes (part of the Tumor Necrosis Super Family 14)), fully human, monoclonal antibody being developed as a treatment for Pediatric Crohn's Disease.

About CERC-006

CERC-006 (formerly AEVI-006) is a dual mTOR inhibitor (a class of drugs that inhibit the mammalian target of rapamycin) being developed as a treatment for complex Lymphatic Malformations (LM). LM patients often have activating mutations along the PI3K/AKT/mTOR pathway; sirolimus, an mTORC1 inhibitor, has demonstrated clinical utility in LM. CERC-006 has the potential to improve upon both the safety and efficacy of mTOR inhibition in LM.

About CERC-007

CERC-007 (formerly AEVI-007) is a fully human, anti-IL-18 monoclonal antibody with the potential to address multiple auto-inflammatory diseases, including Adult Onset Still's Disease (AOSD) and Multiple Myeloma (MM). IL-18 is a pro-inflammatory cytokine that stimulates the production of interferon gamma; patients with ASOD and MM show elevated serum levels of IL-18.

About Cerecor

Cerecor is a biopharmaceutical company focused on becoming a leader in development and commercialization of treatments for rare pediatric and orphan diseases. The Company is advancing an emerging clinical-stage pipeline of innovative therapies. The Company's pediatric rare disease pipeline is led by CERC-801, CERC-802 and CERC-803 ("CERC-800 programs"), which are therapies for inborn errors of metabolism, specifically disorders known as Congenital Disorders of Glycosylation ("CDGs"). The FDA granted Rare Pediatric Disease Designation and Orphan Drug Designation ("ODD") to all three CERC-800 programs, thus potentially qualifying the Company to receive a Priority Review Voucher ("PRV") upon approval of a new drug application ("NDA"). The Company is also developing CERC-002, CERC-006 and CERC-007. CERC-007 is an anti-IL-18 monoclonal antibody being developed for autoimmune inflammatory diseases such as Adult Onset Still's Disease (AOSD) and Multiple Myeloma. CERC-006 is a dual mTOR inhibitor targeted towards complex Lymphatic Malformations, also with initial proof-of-concept in patients expected in 2021. CERC-002 is an anti-LIGHT monoclonal antibody currently in a Phase 1 clinical trial.

For more information about Cerecor, please visit www.cerecor.com.

Forward-Looking Statements

This press release may include forward-looking statements made pursuant to the Private Securities Litigation Reform Act of 1995. Forward-looking statements are statements that are not historical facts. Such forward-looking statements are subject to significant risks and uncertainties that are subject to change based on various factors (many of which are beyond Cerecor's control), which could cause actual results to differ from the forward-looking

statements. Such statements may include, without limitation, statements with respect to Cerecor's plans, objectives, projections, expectations and intentions and other statements identified by words such as "projects," "may," "will," "could," "would," "should," "continue," "seeks," "aims," "predicts," "believes," "expects," "anticipates," "estimates," "intends," "plans," "potential," or similar expressions (including their use in the negative), or by discussions of future matters such as: the integration of new personnel; the development of product candidates or products; timing and success of trial results and regulatory review; potential attributes and benefits of product candidates; and other statements that are not historical. These statements are based upon the current beliefs and expectations of Cerecor's management but are subject to significant risks and uncertainties, including: risks related to reliance on and integration and retention of key personnel, including Dr. Wilkins and staff generally subsequent to the recent merger with Aevi Genomics; drug development costs, timing and other risks, including reliance on investigators and enrollment of patients in clinical trials; regulatory risks; Cerecor's cash position and the need for it to raise additional capital; and those other risks detailed in Cerecor's filings with the Securities and Exchange Commission. Actual results may differ from those set forth in the forward-looking statements. Except as required by applicable law, Cerecor expressly disclaims any obligations or undertaking to release publicly any updates or revisions to any forward-looking statements contained herein to reflect any change in Cerecor's expectations with respect thereto or any change in events, conditions or circumstances on which any statement is based.

For media and investor inquiries

James Harrell,
Investor Relations
Chief Commercial Officer
Cerecor Inc.
jharrell@cerecor.com
623.439.2220 *office*



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