PRESS RELEASE

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Immunovia holding detailed talks about participation in a large consortium that will address the largest risk group for pancreatic cancer, new diabetic sufferers aged over 50

The best chance to influence the survival of non-hereditary pancreatic cancer patients is to focus on early detection of cases in people aged over 50 who receive their first diagnosis of diabetes. There is now clear unanimity on this, and both public authorities and health institutes focused on the link between diabetes and pancreatic cancer are initiating research programmes on a large scale across several countries in order to identify and assess the best ways to reduce fatality through early detection of pancreatic cancer among the diabetes risk group.

To achieve clear results that establish the benefit of monitoring patients during the three years after they receive a diabetes diagnosis, large studies need to be carried out. This will require collaboration across several hospital networks in order to recruit enough patients. Furthermore, coordination will be required of, and by public authorities, along with access to effective new methods and products for diagnosing patients. Consequently, these are consortium of these participants now being formed. Immunovia currently conducts detailed talks concerning the use of Immunovia's test for early detection of pancreatic cancer, IMMray™ PanCan-d in these consortias.

An extensive study conducted by such a consortium would generate essential data that could support new national guidelines for monitoring pancreatic cancer in diabetes risk groups, drive public authority endorsement in this field and lead to early acceptance and introduction in the participating hospital networks.

Pancreatic cancer has the lowest survival rates among the major forms of cancer. Today it is very clear that the main focus should be early detection of stages I & II pancreatic cancer in order to improve conditions for survival. Around 10% of pancreatic cancer cases have genetic and hereditary causes, and persons in this risk group can be clearly identified for regular monitoring.

The vast majority (90%) of pancreatic cancer cases, however, do not have the hereditary link and because the entire population cannot be monitored regularly, a first selection must be made. Patients aged over 50 suffering from diabetes are a large group and their risk for developing pancreatic cancer is up to 6-8 times greater than normal.

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About Immunovia

Immunovia AB was founded in 2007 by investigators from the Department of Immunotechnology at Lund University and CREATE Health, the Center for Translational Cancer Research in Lund, Sweden. Immunovia's strategy is to decipher the wealth of information in blood and translate it into clinically useful tools to diagnose complex diseases such as cancer, earlier and more accurately than previously possible. Immunovia´s core technology platform, IMMray™, is based on antibody biomarker microarray analysis. The company is now performing clinical validation studies for the commercialization of IMMray™ PanCan-d that could be the first blood based test for early diagnosis of pancreatic cancer. In the beginning of 2016, the company started a program focused on autoimmune diseases diagnosis, prognosis and therapy monitoring. The first test from this program, IMMray™ SLE-d, is a biomarker signature derived for differential diagnosis of lupus, now undergoing evaluation and validation. (Source: www.immunovia.com)

Immunovia's shares (IMMNOV) are listed on Nasdaq First North in Stockholm and Wildeco is the company's Certified Adviser. For more information, please visit www.immunovia.com.

About Pancreatic Cancer

Pancreatic Cancer is one of the most deadly and difficult to detect cancers, as the signs and symptoms are diffuse and similar to other diseases. There are more than 40,000 deaths and over 50,000 new cases diagnosed each year in the U.S. alone, and the five-year survival rate for pancreatic cancer is currently 4-6%. It is predicted to become the second leading cause of cancer death by 2020. However, because resection is more successful in stage I/II, can significantly improve pancreatic cancer patients' 5-year survival rates from 4-6% to potentially 50-60%.

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