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DRAFT

Cell>Point Completes Phase 2 of Cancer Diagnostic Phase 2/3 Trial

CENTENNIAL, Colo., June 25, 2010—Cell>Point announced today that it has closed the Phase 2 portion of its Phase 2/3 trial of ^{99m}Tc-EC-G in evaluating patients with non-small cell lung cancer (NSCLC).

The Phase 2/3 clinical trial compares the efficacy and safety of ^{99m}Tc-EC-G administered and then imaged with a SPECT (Single Photon Emission Computed Tomography)/CT camera to ¹⁸F-FDG administered and then imaged with a PET (Positron Emission Tomography)/CT camera in the evaluation of patients with confirmed non-small cell lung cancer (NSCLC). The Phase 2 trial endpoint is that diagnosing the presence of NSCLC with ^{99m}Tc-EC-G and SPECT/CT will not be “inferior to” ¹⁸F-FDG and PET/CT.

¹⁸F-FDG is FluoroDeoxyGlucose. It is the current standard for diagnosing and staging lung cancers.

“We are very encouraged by the favorable trends observed in imaging the primary tumor in our Phase 2 study and therefore have closed the trial. We are looking forward to completing the Phase 3 trial this year. Some of the Phase 2 images will be included in the Phase 3 trial,” said David Rollo, M.D., Ph.D., Cell>Point President.

Cancer diagnostic imaging agents, like Cell>Point's, that leverage the large installed base of SPECT and CT or SPECT/CT cameras should help increase access to cancer imaging. SPECT and CT or SPECT/CT cameras are found in over 97% of U.S. hospitals whereas PET or PET/CT cameras are in approximately 5% percent of U.S. hospitals. PET/CT systems can cost from \$1.5 million to as much as \$2.5 million while SPECT/CT cameras cost from \$500-\$650 thousand or approximately one-quarter the cost of the more expensive PET/CT systems.

Phase 2/3 "combined" trials are aimed at determining the presence as well as extent of the cancer (cancer spread to other parts of the body) to allow physicians to determine the optimal treatment to patients earlier and more efficiently. The Phase II trial is designed to be adaptive and consists of learning and confirming the optimal protocol to obtain the best possible images for diagnosing the presence and location of a patient's cancer (for example, dose level or alteration of imaging parameters).

Cell>Point will next submit a report to the Food and Drug Administration ("FDA") summarizing the Phase 2 data seeking agreement with the FDA on how to proceed with the final Phase 3 portion of the trial.

Phase 2 trial sites included: Montefiore Medical Center, University of Chicago Medical Center, Johns Hopkins University, Mayo Clinic, Baptist Health South Florida, Decatur Memorial Hospital, and British Columbia Medical Center in North Vancouver, Canada.

Cell>Point intends to perform additional clinical trials for several cancer types to include: breast, prostate, colon, non-Hodgkin's Lymphoma, and head/neck cancers.

More information on the trial can be found at www.clinicaltrials.gov. Trial identifier is NCT00865319.

About ^{99m}Tc-EC-G

^{99m}Tc-EC-G is the company's cancer and cardiovascular diagnostic imaging agent, an acronym for ^{99m}Technetium-EthylenediCysteine-Glucosamine. It is the first product stemming from Cell>Point's EC Technology drug platform.

More information on ^{99m}Tc-EC-G and EC Technology can be found at the Cell>Point website (www.cellpointweb.com) under Technology/Pipeline.

About Cell>Point

Cell>Point is a clinical-stage biopharmaceutical company developing universal molecular imaging agents and molecular therapeutics for the diagnosis, treatment and treatment monitoring of cancer, heart, and other diseases. Cell>Point has exclusive license to five drug-development platforms, all from The University of Texas M. D. Anderson Cancer Center in Houston, a world leader in cancer research and care. Information on Cell>Point's drug candidates, recent press releases, and patents and patent filings can be obtained through its website at www.cellpointweb.com. The company is headquartered in Centennial, Colo.

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