



World-Renowned Neonatal Experts Gather for Research Symposium on the Use of an Exclusive Human Milk Diet in the NICU

CITY OF INDUSTRY, Calif., May 25, 2016 – Prolacta Bioscience®, the pioneer in human milk-based neonatal nutritional products, announced today that it sponsored a symposium titled, "The Four Pillars for Using an Exclusive Human Milk Diet in Premature Neonates in the NICU" in Baltimore, MD earlier this month. Bringing together world-renowned neonatologists and authorities on pediatric nutrition, the symposium presented research supporting an exclusive human milk diet (EHMD)¹ as a valuable therapeutic nutritional resource for premature infants and how to optimize outcomes for these critically ill babies in the NICU.

During the symposium, experts explored evidence around four pillars that support an EHMD for premature infants including: safety, clinical results, short term benefits and long term benefits such as neurodevelopmental improvements and cardiovascular effects.

Symposium presenters included:

- Alan Lucas, MD (Chair), Institute of Child Health, London, UK: "Beyond the Clinical Laboratory: Clinical Benefits Observed in Practice"
- Cynthia Blanco, MD, University of Texas, San Antonio, Texas: "Beyond NEC: Dose Response and Short Term Benefits"
- Barry T. Bloom, MD, University of Kansas School of Medicine, Wichita, Kansas: "Retrospective Safety Analysis of Donor and Human Milk Screening and Monitoring"
- Amy B. Hair, MD, Baylor College of Medicine and Texas Children's Hospital, Houston, Texas: "Long Term Benefits of Human Milk Fortified Human Donor Milk"

"I was honored to chair this year's symposium and join my fellow colleagues as we take a comprehensive look at the expansive science that is revealing the benefits of an Exclusive Human Milk Diet for preemies," said Dr. Lucas. "With so much irrefutable science supporting the health benefits of an EHMD, as opposed to cow milk-based nutrition or formula, we focused on four pillars for implementing best practices in the NICU."

A 2016 retrospective cohort analysis published in the journal *Breastfeeding Medicine* found that premature infants weighing less than 1250g at birth fed an EHMD not only showed a "significantly lower incidence of necrotizing enterocolitis (NEC) and mortality," but also a reduction in late-onset sepsis, retinopathy of prematurity (which can lead to blindness) and bronchopulmonary dysplasia, a form of chronic lung disease in infants.² NEC is one of the leading causes of mortality among preterm babies.³

When used as part of an "Exclusive Human Milk Diet" (EHMD), Prolacta Bioscience's neonatal nutritional products are clinically proven to improve health outcomes^{4,5,6} and reduce hospital costs^{7,8} for critically ill, extremely premature infants in the NICU weighing between 500 and 1250g at birth, as compared to cow milk- based fortifier or preterm formula.

"Prolacta has a deep commitment to research, development and innovation, and a big part of that is ensuring leading authorities in human milk have the opportunity to share their expertise with their fellow neonatologists and premature infant caregivers," said Scott Elster, president and CEO of Prolacta Bioscience

About Prolacta Bioscience

Prolacta Bioscience, Inc. is a privately-held life sciences company dedicated to Advancing the Science of Human Milk®. The company pioneered the development of human milk-based Neonatal Nutritional Products to meet the needs of critically ill, premature infants in the NICU. Prolacta leads the industry in the quality and safety of nutritional products made from breast milk and operates the first and only pharmaceutical-grade manufacturing facility for the processing of human breast milk.

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¹ Exclusive Human Milk Diet (EHMD) means that 100 percent of the protein, fat and carbohydrates are derived solely from human milk. In the NICU, an EHMD typically comprises of 1) mother's own milk or donor milk; 2) Prolact+ H2MF™ fortifier, which is a "nutritional fortifier" made from human donor milk; 3) Prolact CR™, a caloric fortifier, which is added in some cases to mother's or donor milk to achieve 20 calories per ounce; or 4) in lieu of the above, when mother's milk is not available, Prolact RTF™ 100 percent human milk-based preterm infant formula, which is prescribed as primary nutrition in the NICU.

² Hair A, et al., "Beyond Necrotizing Enterocolitis Prevention: Improving Outcomes with an Exclusive Human Milk-Based Diet." *Breastfeeding Medicine*. 2016; 0:1-5 This study compared more than 1500 infants who received a diet of mother's milk fortified with a cow milk-based fortifier and/or preterm formula, to infants who received an EHMD, including mother's own or donor milk fortified with a human milk- derived fortifier.

³ Ganapathy V, et al., "Costs of Necrotizing Enterocolitis and Cost Effectiveness of Exclusively Human Milk-Based Products in Feeding Extremely Premature Infants." *Breastfeeding Medicine*. 2012;7(1):29- 37

⁴ Sullivan S, et al., "An Exclusive Human Milk-Based Diet is Associated with a Lower Rate of Necrotizing Enterocolitis than a Diet of Human Milk and Bovine Milk-Based Products." *Journal of Pediatrics*. 2010;156(4):562-567

⁵ Cristofalo E, et al., "Randomized Trial of Exclusive Human Milk versus Preterm Formula Diets in Extremely Premature Infants." *Journal of Pediatrics*. 2013;163(6):1592-1595

⁶ Abrams S, et al., "Greater Mortality and Morbidity in Extremely Preterm Infants Fed a Diet Containing Cow Milk Protein Products." *Breastfeeding Medicine*. 2014;9(6):281-285

⁷ Ganapathy V, et al., "Costs of Necrotizing Enterocolitis and Cost Effectiveness of Exclusively Human Milk-Based Products in Feeding Extremely Premature Infants." *Breastfeeding Medicine*. 2012;7(1):29- 37

⁸ Assad M, et al., "Decreased Cost and Improved Feeding Tolerance in VLBW Infants Fed an Exclusive Human Milk Diet." *Journal of Perinatology*. 2015;1-5