



Prolacta Bioscience® to Present at the 2017 RBC Capital Markets Healthcare Conference on February 22, 2017

DUARTE, Calif. Feb. 17, 2017 – Prolacta Bioscience, the nation’s leading provider of human milk-based neonatal nutritional products, announced today that it will present at the 2017 RBC Capital Markets Healthcare Conference in New York, NY. Scott Elster, Prolacta’s President and Chief Executive Officer, is scheduled to present on Wednesday, February 22, 2017 at 11:20 AM EST.

When used as part of an exclusive human milk diet (EHMD)¹, Prolacta Bioscience’s neonatal nutritional products are clinically proven to improve health outcomes^{2,3,4} and reduce hospital costs^{5,6} for critically ill, extremely premature infants in the neonatal intensive care unit (NICU) weighing between 500-1,250g at birth, as compared to cow milk-based fortifier or preterm formula.

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 An EHMD is when 100% of the protein, fat and carbohydrates in an infant’s intake are derived solely from human milk.

² Sullivan S, et al. “An Exclusively Human Milk-Based Diet is Associated with a Lower Rate of Necrotizing Enterocolitis than a Diet of Human Milk and Bovine Milk-Based Products.” *The Journal of Pediatrics*. April 2010. 156(4):562-567. doi: 10.1016/j.jpeds.2009.10.040. The randomized study of 207 infants weighing 500-1,250g compared the benefits of an exclusive human milk diet with a diet of both human milk-based and cow milk-based products.

³ Cristofalo EA, et al. “Randomized Trial of Exclusive Human Milk versus Preterm Formula Diets in Extremely Premature Infants.” *The Journal of Pediatrics*. December 2013. 163(6):1592-1595. doi: 10.1016/j.jpeds.2013.07.011. The multicenter randomized controlled study examined 53 extremely premature infants weighing 500-1250g who were fed either a bovine milk-based preterm formula or an exclusive human milk diet, comparing the duration of parenteral nutrition, growth and morbidity.

⁴ Abrams SA, et al. "Greater Mortality and Morbidity in Extremely Preterm Infants Fed a Diet Containing Cow Milk Protein Products." *Breastfeeding Medicine*. June 2014. 9(6): 281-0285. doi:10.1089/bfm.2014.0024. This cohort study included 260 extremely preterm infants born weighing less than 1,250g who received a diet that ranged from 100% cow milk to 100% human milk.

⁵ Ganapathy V, et al. "Costs of Necrotizing Enterocolitis and Cost-Effectiveness of Exclusively Human Milk-Based Products in Feeding Extremely Premature Infants." *Breastfeeding Medicine*. February 2012. 7(1):29-37. doi: 10.1089/bfm.2011.0002. This cost-effectiveness analysis of 2,560 extremely premature infants less than 28 weeks gestational age in 257 hospitals nationwide, comparing the impact of an exclusive human milk diet composed of mother's milk fortified with a human milk-based fortifier versus mother's milk fortified with cow milk-based fortifier.

⁶Assad M, et al. "Decreased Cost and Improved Feeding Tolerance in VLBW Infants Fed an Exclusive Human Milk Diet." *Journal of Perinatology*. March 2016. 36:216-220. doi: 10.1038/jp.2015.168. The study retrospectively looked at 293 preterm infants between gestational ages of 23 to 34 weeks and birth weights between 490-1,700g in the Level III NICU. The study compared the clinical and financial impacts between infants that were fed an exclusive human milk diet; cow milk-based fortifier and maternal milk; mixed combination of maternal milk, cow milk-based fortifier and cow milk-based formula; and formula between March 2009 and March 2014.