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PRESS RELEASE

IPSOGEN TO PRESENT TWO STUDIES ON THE GENOMIC GRADE TEST

AT ASCO 2011 IN CHICAGO, ILL, USA

Marseille, France, May 30, 2011 - IPSOGEN SA (Alternext: ALIPS) today announces that two studies on the Genomic Grade test will be presented at the American Society for Clinical Oncology (ASCO) Annual Meeting, that will take place June 3-7, 2011, in Chicago, Ill, USA. The Genomic Grade test (GG), a multi-gene expression test, improves tumor grading, long term prognostication, and consequently treatment decisions for women with early invasive hormone receptor positive breast cancer.
The first study has been run prospectively with a network of 8 Belgian breast cancer centres. The second study, focusing on lobular carcinoma, results from a collaboration with Institut Jules Bordet, and St Luc Hospital, Belgium, and Institut Paoli-Calmettes, France. Both studies, developed in different settings, provide additional evidence for the added value of the Genomic Grade test for tumor grading and, consequently, long term prognosis evaluation.

Poster Presentation: Genomic grade: Feasibility in routine practice and influence on treatment decision in early breast cancer (Abstract #606)

- **Lead Author**: O. Metzger, Be
- **June 6**, 1:00 pm to 5:00 pm
- **Location:** McCormick Place Hall A

Poster Presentation and Discussion: Use of genomic grade index to improve tumor grading of invasive lobular breast carcinoma (Abstract #535)

- **Lead Author**: D. Fumagalli, Be
- **June 7**, 8:00 am to 12:00 pm
- **Discussion Time**: Tuesday June 7, 11:30 AM to 12:30 PM
- **Location**: McCormick Place E450a

Both abstracts are available on ASCO's website, www.asco.org or www.abstract.asco.org.

About Genomic Grade

The value of tumor grade as one of the key drivers for long term prognosis of hormone receptor positive early invasive breast cancer has been widely documented over the last decade and tumor grade is part of all current treatment guidelines and decision algorithms. However, assessment of tumor grade, measured to date by histology, suffers two limitations: 1/variability of assessment across pathology labs, and 2/presence of an intermediate category, histologic grade 2, which can represent as much as 50% of tumors and has a limited informative power for treatment decision making.
The Genomic Grade is addressing these 2 limitations. Proliferation genes are the main component of the selected gene signature. The added value of Genomic Grade to identify high and low grade tumors,

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esp. in histologic grade 2 tumors, has been documented on 3 000 cases. Moreover, Genomic Grade is able to separate Luminal A and Luminal B tumors.
Genomic Grade is currently available in Europe as Map*Quant*™, an Affymetrix micro-array based assay. A PCR version of the test, adapted to formalin fixed-parafin embedded specimens, is under development and should be available end 2011.

About Invasive Lobular Carcinoma

Invasive lobular carcinoma, which represents approx. 10% of invasive breast carcinoma, is the second most common histologic type after ductal carcinoma. Its management and treatment modalities are similar to those of ductal carcinoma.

However, because of the specific abnormalities characteristising lobular carcinoma cells, it is particularly difficult to reliably measure tumor grade with the standard histologic tools. Moreover, up to 80% of lobular carcinoma are classified as histologic grade 2, an intermediate grade category of limited informative value. It is therefore difficult to apply the well-validated treatment decision algorithms –most of them incorporating tumor grade– for this category of breast carcinoma.

About IPSOGEN

IPSOGEN, cancer profiler, develops and markets molecular diagnostic tests that help to map diseases and guide patients and oncologists' decisions along their therapeutic path.
With more than 80 tests already used routinely worldwide for the diagnosis, prognosis and follow-up of thousands of patients with leukemia, IPSOGEN is now targeting breast cancer with the aim of providing currently inaccessible diagnostic information.
Strengthened by its scientific, clinical and technological partnerships, and by its multidisciplinary team in France and the USA, IPSOGEN intends to become a world leader in the molecular profiling of cancers, and to continue the development and promotion of best-in-class diagnostic references that have a significant impact on patients, medical professionals and society.
The company headquartered in Marseille, France has a subsidiary in the USA. For further information, visit www.ipsogen.com

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