

Vivendy's Treatment for Morbus Morquio (MPS IVA) Granted Orphan Drug Designation by FDA

Basel, Switzerland, Sept 17, 2008 – Vivendy Therapeutics Ltd. today announced that its enzyme replacement therapy (ERT) for Mucopolysaccharidosis IVA, (MPS IVA-Morbus Morquio) has been granted Orphan Drug designation by the United States Food and Drug Administration (FDA). This designation, following potential marketing approval in the future will give Vivendy seven years of market exclusivity and could facilitate the recovery of certain regulatory filing fees.

"This approval is an important regulatory step in the development of our unique modified enzyme treatment for Morquio patients", said Dr. Roland Toder, Vivendy's Chief Executive Officer, "We look forward to a timely execution of our development program".

About Vivendy's Enzyme Replacement Therapy (ERT)

Vivendy's seeks to replace the lack of or deficient activity of the N-acetylgalactosamine-6- sulfatase (GALNS) enzyme in MPS IVA by administering a recombinant human GALNS enzyme that has been specifically modified – potentially enhancing the efficacy of the therapy in MPS IVA significantly. Compared to the native enzyme, Vivendy believes that the modification has the potential to maximize the delivery of the enzyme to efficiently clear the storage materials in target tissues and organs.

About Mucopolysaccharidosis (MPS) IVA

Mucopolysaccharidosis (MPS) IVA (MPS IVA, also known as Morbus Morquio A) is a rare lysosomal storage disease characterized by a gene mutation that causes a lack or deficient activity of the N-acetylgalactosamine-6- sulfatase (GALNS) enzyme. This in turn causes excessive lysosomal storage of keratin sulfate (KS) and Chondroitin-6-Sulfate (C6S) which leads to multiple systemic skeletal, spine and joint abnormalities as well as malformations of the chest. Additionally, patients may suffer hearing loss, vision impairment, and heart valve disease. Accurate epidemiological data regarding the rate of incidence of MPS IVA is only sporadically available, but estimates vary between 1 in 250,000 live births to 1 in 500,000 live births.