

For immediate release



IDEA announces new Chief Executive Officer

Munich, Germany – February 5th, 2010. The Supervisory Board of IDEA AG today announced that Prof. Cevc has resigned as Chairman of the Vorstand and Chief Executive officer with immediate effect. Prof. Cevc and the Board have differing views on the future strategic direction of the company and this course of action was agreed as being in the best interests of all parties. The Board thanks Prof. Cevc for his contribution, commitment and leadership over the years and wishes him every success in the future.

The Supervisory Board is pleased to announce that Gosse B. Bruinsma, M.D. has been appointed as Chairman of the Vorstand and Chief Executive Officer, also with immediate effect. Dr. Bruinsma has a distinguished career of over 25 years in medicine and business, having served as Chairman and Chief Executive Officer in several life sciences companies in the USA and Europe.

Dr. Bruinsma, IDEA's new CEO, comments:

"IDEA has an important scientific heretage and sound scientific and development teams which can be aligned to support this new phase of the Company. I am delighted to lead the Company and exploit the larger potential commercial opportunities that IDEA has."

Dr. G.J. Blaker, IDEA's Chairman of the Supervisory Board, adds:

"The Supervisory Board is delighted that Gosse has joined IDEA as CEO and we are confident that his skill set will support the Company during its next phase."

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Notes to editors:

The Company

IDEA is a privately held biopharmaceutical company with headquarters in Munich, Germany. The Company develops and commercialises non-invasive, targeted therapeutics, applied through the skin. The underlying technological platform are the proprietary carriers, the Transfersome[®] vesicles, which are typically applied on open skin surface in a gel or a spray. The carriers can be engineered to achieve high drug concentration at or near the application site, diminish local or systemic adverse side effects, and may even increase drugs potency. Over 110 patents from 9 patent families were issued to IDEA to date, protecting its core technology.

IDEA in-house capabilities range from formulation and small-scale (GMP) manufacturing work to clinical research.

IDEA has an interest in several development products developed from IDEA's proprietary technology platform, including topical treatments for peripheral pain associated with osteoarthritis and certain dermatological diseases.

Osteoarthritis

Osteoarthritis (OA), the clinical syndrome of joint pain and dysfunction caused by joint degeneration, affects more people than any other joint disease. It is one of the leading causes of disability, as by the age of 65 an estimated 85% of the population will have some degree of OA. Oral non-steroidal anti-inflammatory drugs (NSAIDs) are the most commonly used drugs for OA treatment. Although effective, they can cause serious adverse side effects, including gastrointestinal and cardiac problems, and kidney and liver abnormalities. Topical NSAID gels, which are now in the EU markets for several decades, were only approved in the US recently (end of 2007), for the 4 times 4 g daily application. Such products are generally perceived as being safer than oral drugs, but if used less frequently and/or at a lower dose have only limited data available to prove their efficacy beyond a two-week treatment duration (Lin et al., BMJ 2004).

NSAID Market

The estimated worldwide sales of non-steroidal anti-inflammatory drugs amount to €14 billion. Globally, approximately 30 million people take oral NSAIDs daily. The main disadvantage is that all classical oral NSAIDs carry a risk of upper gastrointestinal (GI) side effects, with up to 30% of long-term NSAID users developing gastric problems. Close to 20,000 osteoarthritis patients and 2,000 rheumatoid arthritis patients in the US alone die each year from GI complications associated with oral NSAID usage. Oral NSAIDs are thus increasingly combined with proton pump inhibitors (PPI) to manage the potential gastrointestinal side effects. More selective NSAIDs (so-called COX-2 inhibitors) were moreover developed to inhibit selectively the COX-2 receptor merely, while sparing the COX-1 receptor which is also inhibited by the unspecific NSAIDs. Until recently, COX-2 inhibitors were seen as a relatively safe therapeutic option. However, COX-2 inhibitors can also lead to serious adverse side effects, such as cardiovascular events, and may still cause bleedings in the lower GI tract. In 2004, Merck & Co. announced the world-wide withdrawal of Vioxx[®] (rofecoxib); in 2005, Pfizer Inc. was requested by the FDA to withdraw Bextra[®] (valdecoxib). In April, 2007, the FDA issued a non-approval letter for Arcoxia[®] (etoricoxib), citing the need for additional data in support of the benefit-to-risk profile before an approval. The FDA has mandated black-box warnings on all prescribed NSAIDs and similar labelling changes for comparable over-the-counter medicines.