# PRESS RELEASE

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## Biacore's SPR Technology to Play Critical Role in La Jolla Pharmaceutical's Phase III Trial of Lupus Therapeutic

### Use of Pharmacoproteomics Assay Presented at JP Morgan H & Q Healthcare Conference

**San Francisco, January 10, 2001** -- Biacore International AB (SSE: BCOR; Nasdaq: BCOR) and La Jolla Pharmaceutical Company (Nasdaq: LJPC) announced today at the JP Morgan H & Q Healthcare Conference the first use of a surface plasmon resonance (SPR)-based pharmacoproteomics assay in clinical development. The assay will be used to identify the target patient population for the Phase III clinical evaluation of LJP 394, La Jolla Pharmaceutical's therapeutic for the treatment of lupus kidney disease. It is believed that this approach will help increase the cost effectiveness of clinical development. Specifically, the assay will be used to determine which lupus patients with renal disease have high-affinity antibodies to LJP 394 and who therefore may benefit most from drug treatment.

“We are delighted that La Jolla Pharmaceutical has developed this novel assay using our SPR technology to support the clinical development of LJP 394,” said Ulf Jonsson, President of Biacore. “This is the first time our technology has played such an important role in the clinical development of a novel therapeutic product. We hope that La Jolla’s approach will encourage other companies to develop pharmacoproteomic assays based on SPR technology.”

“A pharmacoproteomics approach allows us to match the right patients with the right drug. We believe that the affinity assay will help us to identify patients that are most likely to respond to drug treatment. This discovery has provided us with a significant advantage in selecting patients in our Phase III trial,” said Steven Engle, Chairman and CEO of La Jolla Pharmaceutical.

La Jolla Pharmaceutical (LJP) developed the blood test to measure the strength of binding between a patient's antibodies to double-stranded DNA and the Company's lupus drug candidate, LJP 394. In a Phase II/III trial, LJP 394-treated patients that had high-affinity antibodies to the drug had only one-third as many renal flares and less than one-half as many treatments with high dose corticosteroids and/or cyclophosphamide as placebo-treated patients. In that trial, 89% of patients had high-affinity antibodies to LJP 394.

This assay is based on Biacore’s unique surface plasmon resonance technology. It is able to generate real time binding measurements of biomolecules such as antibodies, without radioactive labelling. Studies conducted by LJP’s scientists showed that the SPR-based assay was able to measure the average binding affinity of polyclonal antibodies to LJP 394 in a repeatable manner.

At the scientific level, binding affinity drives the mechanism of action underlying LJP’s therapeutic approach. LJP 394 is designed to reduce the level of antibodies to double-stranded DNA that are believed to promote kidney disease, a primary cause of morbidity and mortality in lupus patients. When the drug binds to B cells that produce antibodies to double-stranded DNA, this action delivers a specific signal that arrests antibody production.

Based on results from the Phase II/III trial for LJP 394, patients identified using Biacore's technology should be more likely to respond to drug treatment.

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**Notes To Editors:**

**Lupus** is a life-threatening autoimmune disease afflicting about one million people in the United States and Europe. Half of the patients have renal disease and 90% are female. In lupus patients, renal flares lead to a loss of kidney function, kidney failure, and the need for long-term dialysis. In the U.S., lupus patients on dialysis incur annual costs in excess of $40,000. Current therapies -- high doses of corticosteroids and chemotherapy drugs -- have increased 10-year patient survival, but the toxic effects of these drugs have made them a major cause of morbidity and mortality in lupus patients.

**Biacore International AB** is the global market leader in SPR technology with its own operations in the U.S., across Europe, Japan, Australia and New Zealand. A strong patent portfolio protects Biacore's technology. Target groups for the Company's systems consist primarily of medical and life science research laboratories and pharmaceutical and biotechnology companies all over the world. Biacore is focusing on drug discovery as its prime area for future growth. Based in Uppsala, Sweden, the Company is listed on the OM Stockholm Exchange and Nasdaq in the U.S. www.biacore.com

***Biacore's Safe Harbor Statement:*** *This press release contains certain forward-looking statements within the meaning of the United States Private Securities Litigation Reform Act of 1995 which, by their nature, involve risk and uncertainty because they relate to events and depend on circumstances that will occur in the future. There are a number of factors that could cause actual results and developments to differ materially from those expressed or implied by these forward-looking statements.*

**La Jolla Pharmaceutical Company** (LJP) is a San Diego-based biotechnology company developing therapeutics for antibody-mediated diseases, such as lupus and stroke, which afflict several million people in the United States and Europe. La Jolla Pharmaceutical's drug candidates, known as Toleragens® are designed to arrest the production of disease-causing antibodies without suppressing the healthy functions of the immune system. The Company is also developing drugs for antibody-mediated stroke, heart attack and deep-vein thrombosis, and other antibody-mediated diseases. The Company's common stock trades on The Nasdaq Stock Market under the symbol LJPC. For more information about the Company, visit its web site: www.ljpc.com.

***LJP's Safe Harbor Statement:*** *Except for historical statements, this press release contains forward-looking statements, including without limitation statements regarding the analysis of results from preclinical and clinical studies as well as La Jolla Pharmaceutical's drug candidates and drug development plans. These forward-looking statements involving risks and uncertainties, and a number of factors, both foreseen and unforeseen, could cause actual results to differ materially from those anticipated. Clinical results for LJP 394 are derived from a trial that was terminated prior to completion, and certain data are incomplete. Future analyses of clinical trial results may not necessarily support conclusions to date. The Company's blood test to measure binding affinity for LJP 394 is experimental and has not been validated by independent laboratories. Tolerance, or the specific inactivation of pathogenic B cells, is a new technology that has not been proven. The Company's ability to develop and sell its products in the future may be affected by the intellectual property rights of third parties. Future clinical trials of the Company's drug candidates may have negative or inconclusive results. Future clinical trials of the Company's drug candidates may not support results of preclinical or other prior trials and pre IND studies of the Company's new candidate for treating antibody-mediated thrombosis may reveal a potential safety issue requiring the development of a new*

*candidate. Any delays in testing of the Company's drug candidates and/or termination of development by the Company would result in delays or lack of government approval to market the compound. The development of drug candidates involves many risks and uncertainties, including, without limitation, whether the drug can provide a meaningful clinical benefit, and any positive results observed to date may not be indicative of future results. La Jolla Pharmaceutical's other potential drug candidates, including its Toleragen candidate for xenotransplantation, which have not progressed to clinical trials, involve comparable risks. Interested parties are urged to review the risks detailed from time to time in La Jolla Pharmaceutical Company's Securities and Exchange Commission (SEC) filings, including the report on Form 10-K for the year ended December 31, 1999 and in Form 10-Q for the quarter ended September 30, 2000.*