Studies of Nipent(R) in Combination Cancer Therapies for Treatment of Chronic Lymphocytic Leukemia and Graft-versus Host Disease (GVHD) Presented at American Society of Hematology Annual Meeting

DUBLIN, Calif., Dec. 9 /PRNewswire-FirstCall/ -- SuperGen, Inc. (Nasdaq: SUPG) announced that abstracts from five studies of its anticancer drug Nipent® (pentostatin for injection) will be presented this week during the proceedings of the 47th American Society Hematology (ASH) Annual Meeting in Atlanta, Georgia. In addition, five other related abstracts appear in the November issue of Blood.

The five abstracts, which will be presented during the General Poster Sessions, discuss the investigational use of Nipent in combination with other chemotherapeutic agents, to treat chemotherapy-naïve B-cell Chronic Lymphocytic Leukemia and steroid-refractory graft-versus-host disease (GVHD).

A combination regimen of pentostatin, cyclophosphamide and rituximab (PCR) is suggested to have comparable activity to fludarabine, cyclophosphamide, and rituximab (FCR) but may be better-tolerated and less toxic in patients with previously treated B-cell chronic lymphocytic leukemia. The response frequencies were virtually identical in both treatment groups with responses seen in 75% of PCR treated patients and 73% of FCR treated patients and a complete response (CR) achieved in 25% in both studies. In terms of toxicity, however, PCR compares favorably to FCR in the following categories: Grade 3/4 neutropenia PCR 53% versus FCR 81% (P=0.0007), thrombocytopenia PCR 16% versus FCR 34% (P=0.04), anemia PCR 9% versus FCR 24% (P=0.06), and grade 3/4 infections (including fever of unknown origin) PCR 28% versus FCR 47% (P=0.05).

In addition, abstracts will be presented that suggest that pentostatin may be beneficial in the treatment of children and adolescents with chronic graft versus host disease (cGVHD). The therapy was well-tolerated with infections, such as mucormycosis, pneumonia, disseminated fungal infection and fungal pneumonia, being the main concern.

All ten of the abstracts referring to pentostatin are available online at http://www.hematology.org and appear in Blood, Volume 106, issue 11, November 16, 2005.

Nipent® is currently approved as a single-agent treatment for patients with hairy cell leukemia and is not approved as either a single agent or as part of a combination regimen for treatment for any other indication.

Posters presented at ASH

1. Abstract #937 Enhanced Safety and Tolerability of Dose Intensive Pentostatin and Rituximab in Patients with CLL or Low-Grade B-Cell NHL.
   Presentation -- Poster Session I, Saturday, December 10, 2005 at 6:00 p.m. ET

   Presentation -- Poster Session II, Sunday, December 11, 2005 at 6:00 p.m. ET

3. Abstract #2127 Pentostatin, Cyclophosphamide, and Rituximab (PCR) Has Comparable Activity but Appears To Be Better Tolerated Than Fludarabine, Cyclophosphamide, and Rituximab (FCR) in Patients with Previously Treated Chronic Lymphocytic Leukemia
   Presentation -- Poster Session II, Sunday, December 11, 2005 at 6:00 p.m. ET

4. Abstract #2916 Influence of Allele Level HLA Typing on Unrelated Donor (UD) Transplantation for High Risk Myeloid Leukemias
5. Abstract #3671 Nonmyeloablative Allogeneic Stem Cell Transplantation (NST) for Hematologic Malignancies (HM) Using Pentostatin/Low-Dose Total Body Irradiation (TBI)

Abstracts for publication only in Blood

1. Abstract #4750 A Multi-Center, Open-Label Study To Evaluate the Safety and Efficacy of Pentostatin, Cytoxan, and Rituxan (PCR) in the Treatment of Previously Untreated or Treated Bulky Stage II or Stage III or IV, Low-Grade B-Cell NHL

2. Abstract #5024 Combined Therapy with Alemtuzumab and Pentostatin Is Feasible and Effective in T- Lymphoproliferative Disorders

3. Abstract #5042 Pentostatin Is a Safe and Active Agent in Chronic Lymphocytic Leukemia (CLL) with Minimal Toxicity

4. Abstract #5045 A Multi-Center, Open-Label Study To Evaluate the Safety and Efficacy of Pentostatin, Cytoxan, and Rituxan (PCR) in the Treatment of Previously Untreated or Treated, Stage III or IV, Low Grade CLL

5. Abstract #5417 Extracorporeal Photopheresis, Pentostatin, and TBI for Reduced-Intensity Preparation: Adaptation of the Tufts Experience at a Single Transplant Center

About SuperGen

Based in Dublin, California, SuperGen is a pharmaceutical company dedicated to the acquisition, rapid development and commercialization of therapies for solid tumors, hematological malignancies and blood disorders. SuperGen’s product portfolio includes Nipent® (pentostatin for injection); Mitomycin (generic brand of Mutamycin®); and SurfaceSafe® cleaner.

For more information about SuperGen, please visit http://www.supergen.com

Contacts:
Timothy L. Enns
SuperGen, Inc.
Tel: (925) 560-0100 x111
E-mail: tenns@supergen.com

Sharon Weinstein
Noonan Russo
Tel: (212) 845-4271
E-mail: sharon.weinstein@eurorscg.com