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**SOLIRIS™ (ECULIZUMAB), THE FIRST AND ONLY THERAPY FOR THE TREATMENT
OF PATIENTS WITH PNH, IS NOW AVAILABLE IN CANADA**

Alexion Introduces OneSource™ Program to Support Patients with PNH

Toronto, ON, July 29, 2009 – Alexion Pharma Canada, a newly incorporated division of Alexion Pharmaceuticals, Inc. (NASDAQ: ALXN), today announced the availability in Canada of Soliris™ (eculizumab) for the treatment of patients with paroxysmal nocturnal haemoglobinuria (PNH), an ultra-rare, progressive and life-threatening blood disease characterized by chronic haemolysis, or red blood cell destruction.

Soliris, a first-in-class terminal complement inhibitor, was approved under priority review by Health Canada's Biologics and Genetics Therapeutic Directorate (BGTD) in January 2009. Soliris has been recognized on the international stage for breakthrough scientific innovation and the positive impact the drug is having on the lives of patients with PNH. Soliris received both the 2009 Prix Galien Award in France for the most innovative drug for rare diseases and the 2008 Prix Galien USA Award for Best Biotechnology Product for improving the human condition.

"Soliris has had a life-changing impact on patients with PNH and represents the only effective and safe drug therapy available for their disease," said Dr. Loree M. Larratt, M.D., Department of Medicine, Divisional Director Clinical Hematology, University of Alberta at Edmonton, and one of the researchers who participated in clinical trials of Soliris. "Hemolysis underlies the significant morbidities, shortened life-span and poor quality of life in patients with PNH, and Soliris reduced hemolysis in every patient treated in clinical studies."

Three multi-national clinical trials - TRIUMPH, SHEPHERD and E05-001, the long-term extension trial - found that patients with PNH who received Soliris experienced a number of benefits, including an immediate and sustained reduction in chronic haemolysis in all patients (1, 2), fewer blood clots as compared to the same time period prior to starting Soliris (3), significant improvements in fatigue levels and overall quality of life (1,2) and a significant reduction in the need for transfusions (2). Results from these trials served as the basis for regulatory review and approval of Soliris in Canada.

“The availability of Soliris provides new hope to patients with PNH who, until now, lacked effective treatment options,” declared Durhane Wong-Rieger, Ph.D., President of the Canadian Organization for Rare Disorders. “Patients with rare disorders deserve rapid access to new and highly innovative treatments. We urge formulary bodies in all provinces to provide expedited access to Soliris. We are also encouraged by recent policy initiatives in Ontario, Quebec and Alberta designed to address the specific needs of patients with rare diseases and improve patient access to orphan drugs.”

OneSource™ Program

Alexion Pharma Canada also introduced today the OneSource™ program, a personalized service for patients with PNH and their health care providers. Each patient who enrolls in OneSource™ is assigned a specific OneSource Case Manager who supports the patient immediately and over time, providing a broad range of services from disease education to coordinating care with the physician’s office. Case managers also work with patients and physicians to secure access to Soliris and identify funding options when needed. All case managers are registered nurses who have extensive experience caring for patients. For more information, contact the OneSource™ Program at 1- 888-SOLIRIS (888-765-4747).

“It is our privilege and our responsibility to bring this urgently needed medicine to patients with PNH in Canada,” said John Haslam, General Manager of Alexion Pharma Canada. “Our commitment to the physician and patient community goes beyond Soliris to include disease education, diagnostic support and timely access. Our objective is that every patient with PNH who can benefit from Soliris should have access to Soliris.”

About PNH

Patients with PNH suffer from haemolysis (red blood cell destruction) which leads to thromboses (blood clots), disabling fatigue, anemia, impaired quality of life, pulmonary hypertension, shortness of breath, recurrent pain, kidney disease and intermittent episodes of dark-colored urine (haemoglobinuria). (4,5) PNH is an ultra-rare blood disorder that strikes people of all ages, with an average age of onset in the early 30s. (6) Approximately 10 percent of all patients first develop symptoms at 21 years of age or younger. (4) PNH develops without warning and can occur in men and women of all races, backgrounds and ages. PNH often goes unrecognized, with delays in diagnosis ranging from one to more than 10 years. (7) It is estimated that approximately one-third of patients with PNH do not survive more than five years from the time of diagnosis. (7) PNH has been identified more commonly among patients with disorders of the bone marrow, including aplastic anemia (AA) and myelodysplastic syndromes (MDS). (8,9,10) In patients with thrombosis of unknown origin, PNH may be an underlying cause. (4) More information on PNH is available at www.pnhsource.com.

About Soliris

Soliris is a terminal complement inhibitor that selectively blocks the formation of terminal complement, a component of the normal immune system. Patients with PNH lack naturally occurring proteins that ordinarily prevent terminal complement from causing the red blood cell destruction (haemolysis) that is central to the serious morbidities and mortality associated with PNH.

Soliris has been approved by the U.S. Food and Drug Administration (March 2007), the European Commission (June 2007), Health Canada (January 2009) and Australia's Therapeutic Goods Administration (February 2009) as the first treatment for all patients with PNH, an ultra-rare, debilitating and life-threatening blood disorder defined by haemolysis, or the destruction of red blood cells. All four jurisdictions reviewed and approved their respective marketing applications for Soliris under their priority review or accelerated assessment procedures. The U.S., European Commission and Australian authorities have designated Soliris as an orphan drug. Prior to these approvals, there were no therapies specifically available for the treatment of PNH. PNH treatment was limited to symptom management through periodic blood transfusions, non-specific immunosuppressive therapy and, infrequently, bone marrow transplantations -- a procedure that carries its own substantial risks of mortality and morbidity. Alexion is committed to the objective that every patient with PNH who can benefit from Soliris will have access to Soliris.

Important Safety Information

Soliris is generally well tolerated. The most frequent adverse events observed in clinical studies were headache, nasopharyngitis (a runny nose), back pain and nausea. Treatment with Soliris should not alter anticoagulant management because the effect of withdrawal of anticoagulant therapy during Soliris treatment has not been established. The Canadian product label for Soliris also includes a boxed warning: "Soliris increases the risk of meningococcal infections. Vaccinate patients with a meningococcal vaccine at least two weeks prior to receiving the first dose of Soliris; revaccinate according to current medical guidelines for vaccine use. Monitor patients for early signs of meningococcal infections, evaluate immediately if infection is suspected, and treat with antibiotics if necessary." During clinical studies, two out of 196 vaccinated PNH patients treated with Soliris experienced a serious meningococcal infection. Prior to beginning Soliris therapy, all patients and their prescribing physicians are encouraged to enroll in the global PNH Registry which is part of a long term commitment to improve the understanding of PNH, its diagnosis and treatment.

About Alexion

Alexion Pharma Canada is a division of Alexion Pharmaceuticals, Inc., a biopharmaceutical company working to develop and deliver life-changing drug therapies for patients with serious and life-threatening medical conditions. Alexion is engaged in the discovery, development and commercialization of therapeutic products aimed at treating patients with a wide array of severe disease states, including hematologic and kidney diseases, transplant, cancer, and autoimmune disorders. Soliris is Alexion's first marketed product, approved in the U.S. and Europe in 2007, and Canada and Australia in 2009. Alexion is evaluating other potential indications for Soliris as well as other formulations of eculizumab for additional clinical indications, and is pursuing development of other antibody product candidates in early stages of development. This press release and further information about Alexion Pharmaceuticals, Inc. can be found at: www.alexionpharma.com.

Safe Harbor Statement

This news release contains forward-looking statements, including statements related to potential health and medical benefits from Soliris. Forward-looking statements are subject to factors that may cause Alexion's results and plans to differ from those expected, including for example, decisions of regulatory authorities regarding marketing approval or material limitations on the marketing of Soliris, delays in arranging satisfactory manufacturing capability and establishing

commercial infrastructure, delays in developing or adverse changes in commercial relationships, the possibility that results of clinical trials are not predictive of safety and efficacy results of Soliris in broader patient populations, the possibility that initial results of commercialization are not predictive of future rates of adoption of Soliris, the risk that third parties won't agree to license any necessary intellectual property to Alexion on reasonable terms or at all, the risk that third party payors will not reimburse for the use of Soliris at acceptable rates or at all, the risk that estimates regarding the number of PNH patients are inaccurate and a variety of other risks set forth from time to time in Alexion's filings with the Securities and Exchange Commission, including but not limited to the risks discussed in Alexion's Quarterly Report on Form 10-Q for the period ended March 31, 2009, and in Alexion's other filings with the Securities and Exchange Commission. Alexion does not intend to update any of these forward-looking statements to reflect events or circumstances after the date hereof, except when a duty arises under law.

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