

3 December 2014

The Manager Companies
ASX Limited
20 Bridge Street
SYDNEY NSW 2000

(2 pages by email)

Dear Madam

Biotron Completes Enrolment in Phase 2 Hepatitis C Trial of BIT225

- *Recruitment now closed with 60 patients recruited at 6 trial sites.*
- *First three month dosing study of BIT225 in HCV genotypes 1 and 3 patients, using new capsule formulation.*
- *Preliminary interim data expected late Q12015.*

Sydney, Australia, 3 December 2014: Australian drug development company Biotron Limited (ASX:BIT) has completed patient enrolment in a key Phase 2 trial evaluating lead compound BIT225 as a potential new therapy for the treatment of Hepatitis C virus (HCV) infection.

A total of 60 patients infected with HCV genotypes 1 or 3 (G1, G3) have now been recruited at six established trial sites in Thailand for the randomised, placebo controlled three-month dosing study (Protocol BIT225-008). The trial was designed to extend efficacy data against HCV G1 and G3, and to provide further confirmation of BIT225's safety and tolerability profile in longer term dosing using the new capsule formulation of the drug.

Managing Director Dr Michelle Miller said this trial was a key study for the Company, as previous data was based on four week dosing regimes.

She commented: "It is important we provide further safety and efficacy data that demonstrates further safety and tolerability over 12 weeks. If successfully developed, BIT225 will most likely be used in combination with other new classes of direct-acting antiviral (DAA) drugs, which currently require a minimum dosing period of 12 weeks.

Safety and antiviral efficacy data to date has been extremely encouraging and we are confident this will be replicated in an extended dosing regime."

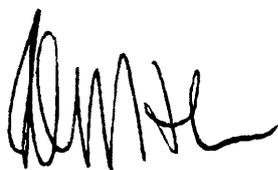
Under trial protocols, patients are receiving 200 mg of BIT225 twice daily for three months in combination with current standard of care therapies – pegylated interferon alfa 2b (IFN) and ribavirin (RBV) before continuing to receive standard of care out to 24 weeks (genotype 3) or 48 weeks (genotype 1).

A previous Phase 2a study demonstrated that 100% of HCV G1 patients who received BIT225 (400 mg) over four weeks in conjunction with standard of care therapies had undetectable levels of virus at the 48 week follow up. This was compared to 75% of patients who received standard of care alone.

BIT225 also showed good efficacy in a Phase 2 trial of BIT225/IFN/RBV in patients co-infected with HIV and HCV G3, with all patients who completed treatment having undetectable levels of HCV 12 weeks after ceasing all treatment, which is an indication that they were cured of HCV infection.

Dr Miller further commented; "Despite recent advances in treatment of HCV, significant treatment gaps remain, in particular for genotype 3. We look forward to progressing commercialisation of BIT225 as a valuable new therapy that will work in combination with current and future treatment strategies."

Yours sincerely



Peter J. Nightingale
Company Secretary

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Enquiries

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About Biotron and BIT225

Biotron Limited is engaged in the research, development, and commercialisation of drugs targeting significant viral diseases with unmet medical need, with a major focus on HIV and HCV. The Company has BIT225 in clinical development for both HCV and HIV, and also has several earlier stage preclinical and research programs for several other viral infections including Dengue.

BIT225 has recorded encouraging data against HCV in clinical trials. A phase 2a trial in HCV demonstrated that 100% of HCV genotype 1 infected patients receiving BIT225 (400 mg) in combination with current standard of care therapies interferon and ribavirin had undetectable virus after 48 weeks. A phase 2 trial in HIV/HCV co-infected patients showed that all HCV genotype 3 patients completing 28 days of treatment with BIT225 in combination with interferon and ribavirin achieved SVR12, with undetectable HCV 12 weeks after completing all therapy.

BIT225 is also in development for treatment of HIV, and is the first in a new class of antiviral drugs that may provide a new approach to eradication of this virus. It has shown clinical efficacy against HIV in reservoir cells, and has the potential to be combined with new or existing anti-retroviral drugs to eradicate long-lived pools of virus that are not eliminated with current treatments.