ADOCIA

innovative medicine
for everyone, everywhere

PRESS RELEASE

Adocia announces the termination by Eli Lilly of the collaboration on BioChaperone Lispro

Lyon, France, January 27, 2017 – Adocia (Euronext Paris : FR0011184241 – ADOC), a clinical stage biopharmaceutical company focused on diabetes treatment with innovative formulations of approved proteins, announces today that it was notified in a letter dated January 26 from Eli Lilly and Company (Lilly, NYSE: LLY) its decision to terminate the December 2014 Collaboration Research and License Agreement for the development of Adocia's ultra-rapid insulin, known as BioChaperone® Lispro, for treatment in people with type 1 and type 2 diabetes. As a consequence of such decision and according to the terms of this agreement, the rights that Adocia has licensed to Lilly will revert to Adocia at no cost.

« We are extremely disappointed and surprised by Lilly's decision to terminate the collaboration on our product which has demonstrated significant improvement in terms of performance vs Humalog® across 6 clinical studies. Based upon this stage of development, we are convinced that BC Lispro can improve the lives of people with diabetes and Adocia will continue to prepare launch of phase 3 clinical trials while looking for a new partner. » said Gérard Soula, Chairman and CEO.

A conference call with Adocia leadership is scheduled on Monday January 30. Details of this call will be provided in a separate release.

About ADOCIA

Adocia is a clinical-stage biotechnology company that specializes in the development of innovative formulations of already-approved therapeutic proteins. Adocia's insulin formulation portfolio, featuring four clinical-stage products and one preclinical product, is among the largest and most differentiated in the industry.

The proprietary BioChaperone® technological platform is designed to enhance the effectiveness and/or safety of therapeutic proteins while making them easier for patients to use. Adocia customizes BioChaperone to each protein for a given application in order to address specific patient needs.

Adocia's clinical pipeline includes four novel insulin formulations for the treatment of diabetes: two ultra-rapid formulations of insulin analogs (BioChaperone Lispro U100 and U200), a rapid-acting formulation of human insulin (HinsBet U100) and a combination of basal insulin glargine and rapid-acting insulin lispro (BioChaperone Combo). Adocia is also developing an aqueous formulation of human glucagon (BioChaperone Human Glucagon), two combinations of insulin glargine with GLP-1s (BioChaperone Glargine Dulaglutide and BioChaperone Glargine Liraglutide), two

combinations of insulin lispro with synergistic prandial hormones (BioChaperone Lispro Pramlintide and BioChaperone Lispro Exenatide), and a concentrated, rapid-acting formulation of human insulin (HinsBet U500), all of which are in preclinical development.

Adocia aims to deliver "Innovative medicine for everyone, everywhere."

To learn more about Adocia, please visit us at www.adocia.com

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This press release contains certain forward-looking statements concerning Adocia and its business. Such forward-looking statements are based on assumptions that Adocia considers to be reasonable. However, there can be no assurance that the estimates contained in such forward-looking statements will be verified, which estimates are subject to numerous risks including the risks set forth in the "Risk Factors" section of the Reference Document filed with the French Autorité des marchés financiers on April 8, 2016 (a copy of which is available on www.adocia.com) and to the development of economic conditions, financial markets and the markets in which Adocia operates. The forward-looking statements contained in this press release are also subject to risks not yet known to Adocia or not currently considered material by Adocia. The occurrence of all or part of such risks could cause actual results, financial conditions, performance or achievements of Adocia to be materially different from such forward-looking statements.