Melinta Therapeutics to Participate in Two Upcoming Investor Conferences

NEW HAVEN, Conn., Sept. 22, 2017 -- <u>Melinta Therapeutics</u>, a privately held commercial-stage company developing novel antibiotics to treat serious bacterial infections, announced that it will be presenting at the following upcoming investor conferences:

- Ladenburg Thalmann 2017 Healthcare Conference at 10:00 a.m. on September 26, 2017.
- Cantor Fitzgerald Global Healthcare Conference at 8:00 a.m. on September 27, 2017.

At each conference, Melinta's executive team, including Eugene Sun, MD, CEO, Paul Estrem, CFO, and John Temperato, President and COO, will provide an update that includes the recent FDA approval of Baxdela™ (delafloxacin) for the treatment of ABSSSI (acute bacterial skin & skin structure infections), research and development pipeline, and the previously announced merger with a subsidiary of Cempra, Inc. (NASDAQ:CEMP). The Cempra management team will also be in attendance. For information on one-on-one meetings with the Melinta team, please contact your Ladenburg Thalmann or Cantor Fitzgerald representative.

About Baxdela

Baxdela (delafloxacin) tablets and intravenous injection are approved for the treatment of ABSSI (Acute Bacterial Skin and Skin Structure Infections). Baxdela was given priority review by the FDA due to its designation as a Qualified Infectious Disease Product (QIDP) under the Generating Antibiotic Incentives Now (GAIN) Act of 2012. The QIDP designation qualifies Baxdela for certain incentives related to the development of new antibiotics, including a five-year extension of any non-patent exclusivity period awarded to the drug.

INDICATION & USAGE

Baxdela is indicated in adults for the treatment of acute bacterial skin and skin structure infections (ABSSSI) caused by susceptible isolates of the following:

<u>Gram-positive organisms:</u> Staphylococcus aureus (including methicillin-resistant [MRSA] and methicillin-susceptible [MSSA] isolates), Staphylococcus haemolyticus, Staphylococcus lugdunensis, Streptococcus agalactiae, Streptococcus anginosus group (including Streptococcus anginosus, Streptococcus intermedius, and Streptococcus constellatus), Streptococcus pyogenes, and Enterococcus faecalis;

<u>Gram-negative organisms:</u> Escherichia coli, Enterobacter cloacae, Klebsiella pneumoniae, and Pseudomonas aeruginosa.

IMPORTANT SAFETY INFORMATION:

WARNING: SERIOUS ADVERSE REACTIONS INCLUDING TENDINITIS, TENDON RUPTURE, PERIPHERAL NEUROPATHY, CENTRAL NERVOUS SYSTEM EFFECTS, AND EXACERBATION OF MYASTHENIA GRAVIS

Fluoroquinolones have been associated with disabling and potentially irreversible serious adverse reactions that have occurred together, including:

- Tendinitis and tendon rupture
- Peripheral neuropathy
- Central nervous system effects

Discontinue Baxdela immediately and avoid the use of fluoroquinolones, including Baxdela, in patients who experience any of these serious adverse reactions.

Fluoroquinolones may exacerbate muscle weakness in patients with myasthenia gravis. Avoid Baxdela in patients with known history of myasthenia gravis.

Contraindications

Baxdela is contraindicated in patients with known hypersensitivity to Baxdela or other fluoroquinolones.

Warnings and Precautions

Risk of tendinitis, tendon rupture, peripheral neuropathy and central nervous system effects is increased with use of fluoroquinolones. Discontinue Baxdela immediately at the first signs or symptoms of any of these serious adverse reactions.

Avoid Baxdela in patients with known history of myasthenia gravis.

Hypersensitivity Reactions may occur after first or subsequent doses of Baxdela. Discontinue Baxdela at the first sign of hypersensitivity.

Clostridium difficile-associated diarrhea has been reported in users of nearly all systemic antibacterial drugs, including Baxdela. Evaluate if diarrhea occurs.

Prescribing Baxdela in the absence of a proven or strongly suspected bacterial infection is unlikely to provide benefit to the patient and increases the risk of the development of drug-resistant bacteria.

Adverse Reactions

The most common adverse reactions in patients treated with Baxdela were nausea (8%), diarrhea (8%), headache (3%), transaminase elevations (3%), and vomiting (2%).

Use in Specific Populations

In patients with severe renal impairment (eGFR of 15-29 mL/min/1.73 m²) dosing of Baxdela should be dosed at 200 mg IV every 12 hours or 450 mg orally every 12 hours. Baxdela is not recommended in patients with End Stage Renal Disease [ESRD] (eGFR of <15 mL/min/1.73 m²) due to insufficient information to provide dosing recommendations.

About Melinta Therapeutics

Melinta Therapeutics, Inc. is dedicated to saving lives threatened by the global public health crisis of bacterial infections, through the development and commercialization of novel antibiotics that provide new and better therapeutic solutions. Melinta's lead product is Baxdela, an antibiotic approved for use in the treatment of acute bacterial skin and skin structure infections (ABSSSI). Melinta is also committed to developing, through the application of Nobel Prize-winning science, a new class of antibiotics designed to overcome the multi- and extremely-drug-resistant pathogens for which there are few to no options, known collectively as ESKAPE pathogens (*Enterococcus faecium*, *Staphylococcus aureus*, *Klebsiella pneumoniae*, *Acinetobacter baumannii*, *Pseudomonas*

aeruginosa, Enterobacter species and Escherichia coli), which cause the majority of life-threatening hospital infections.

Melinta Therapeutics is privately held and backed by Vatera Healthcare Partners (www.vaterahealthcare.com) and Malin Corporation plc (www.malinplc.com), among other private investors. In August, Melinta announced its entry into a merger agreement with Cempra, Inc. (Nasdaq:CEMP). The company is headquartered in New Haven, CT with offices in Lincolnshire, IL. Visit www.melinta.com for more information.

For More Information:

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