Amarin Corporation

Amarin's John Thero Awarded EY Entrepreneur of The Year® 2019 Life Sciences National Award

November 18, 2019

This National-Level Recognition Follows EY's New Jersey Regional Entrepreneur of The Year® Award Earlier in 2019 and Reflects Amarin's Tremendous Business Growth While Helping to Improve Patient Healthcare

DUBLIN, Ireland and BRIDGEWATER, N.J., Nov. 18, 2019 (GLOBE NEWSWIRE) -- Amarin Corporation plc (NASDAQ:AMRN), a pharmaceutical company focused on improving cardiovascular health, announced today that John F. Thero, president and chief executive officer of Amarin, has been named EY's 2019 Entrepreneur of The Year National Award® for Life Sciences. The global business leader awards program, founded in 1986, recognizes entrepreneurs who are excelling in areas such as innovation, financial performance and personal commitment to their businesses and communities. Mr. Thero was named EY's Entrepreneur of The Year 2019 Award for Life Sciences in the New Jersey Region in June 2019, thus placing him in the running for the national award.

"This award is a great honor, especially in light of the many outstanding people, and the achievements of their companies, that were considered," stated Mr. Thero. "The award is a tribute to the significant pioneering progress made by Amarin's dedicated employees in advancing cost-effective preventative care solutions for reducing the risk of cardiovascular disease, which is on the rise in the United States. Breakthroughs in preventative cardiovascular care are rare and greatly needed. Hopefully this award will bring added attention to Amarin's efforts in developing an innovative treatment option for high risk patients that reduces cardiovascular risk beyond cholesterol management."

Mr. Thero was presented with this award Saturday, Nov. 16, at Ernst & Young's annual Strategic Growth Forum. The selection of Mr. Thero for this award was made by a panel of independent judges consisting of prior award winners, and civic and community leaders not affiliated with EY.

Becoming chief executive officer in 2014, Mr. Thero led, together with Amarin's employees, consultants and advisors, the transformation of Amarin from a company with its survival in question to a company with robust compounded commercial business growth and game-changing scientific achievement. For example, in late 2018, Amarin completed the REDUCE-IT® cardiovascular outcomes study, which many leading physicians have characterized as one of the most significant breakthroughs in decades for preventative cardiovascular care. Mr. Thero credits Amarin's diverse and talented team of employees and believes that Amarin is just getting started on a path to helping improve health for millions of people.

Investor Webcast on November 18, 4:30 p.m., Eastern U.S. Time Recapping Data Presented at the American Heart Association 2019 Scientific Sessions

Amarin will host a webcast at 4:30 p.m. Eastern U.S. Time, November 18, 2019. The webcast will be accessible through the investor relations section of the company's website at <u>www.amarincorp.com</u>. The webcast can also be heard via telephone by dialing 877-407-8033. A replay of the webcast will be available for two weeks following the webcast. To hear a replay of the webcast, dial 877-481-4010 (inside the United States) or 919-882-2331 (outside the United States). A replay of the webcast will also be available through the company's website shortly after the webcast. For both dial-in numbers please use conference ID 55923.

About Amarin

Amarin Corporation plc. is a rapidly growing, innovative pharmaceutical company focused on developing therapeutics to improve cardiovascular health. Amarin's product development program leverages its extensive experience in polyunsaturated fatty acids and lipid science. *Vascepa*® (icosapent ethyl) is Amarin's first FDA-approved drug and is available by prescription in the United States, Lebanon and the United Arab Emirates. Amarin's commercial partners are pursuing additional regulatory approvals for *Vascepa* in Canada, China and the Middle East. For more information about Amarin, visit www.amarincorp.com.

REDUCE-IT Study

REDUCE-IT, an 8,179-patient cardiovascular outcomes study, was completed in 2018.¹ REDUCE-IT was the first multinational cardiovascular outcomes study that evaluated the effect of prescription pure EPA therapy as an add-on to statins in patients with high cardiovascular risk who, despite stable statin therapy, had elevated triglyceride levels (at least 135 mg/dL). A large portion of the male and female patients enrolled in this outcomes study were diagnosed with type 2 diabetes.

More information on the REDUCE-IT study results can be found at <u>www.amarincorp.com</u>.

About Cardiovascular Disease

The number of deaths in the United States attributed to cardiovascular disease continues to rise.^{1,2} There are 605,000 new and 200,000 recurrent heart attacks per year (approximately 1 every 40 seconds), in the United States. Stroke rates are similar, accounting for 1 of every 19 U.S. deaths (approximately 1 every 40 seconds).³

Controlling bad cholesterol, also known as LDL-C, is one way to reduce a patient's risk for cardiovascular events. However, even with the achievement of target LDL-C levels, millions of patients still have significant and persistent risk of cardiovascular events, especially those patients with high triglycerides, a type of fat in the blood. Statin therapy has been shown to control LDL-C, thereby reducing the risk of cardiovascular events by 25-35% – but that still leaves a 65-75% risk remaining.⁴ People with high triglycerides have 35% more cardiovascular events compared to people with normal (in range) triglycerides taking stains.^{5,6,7,8}

About VASCEPA (icosapent ethyl) Capsules

Vascepa (icosapent ethyl) capsules are a single-molecule prescription product consisting of the omega-3 acid commonly known as EPA in ethyl-ester form (known as icosapent ethyl or IPE). Vascepa is not fish oil, but is derived from fish through a stringent and complex FDA-regulated manufacturing process designed to effectively eliminate impurities and isolate and protect the single molecule active ingredient from degradation. Vascepa, known in scientific literature as AMR101, has been designated a new chemical entity by the FDA. Amarin has been issued multiple patents internationally based on the unique clinical profile of Vascepa, including the drug's ability to lower triglyceride levels in relevant patient populations without raising LDL-cholesterol levels.

The FDA has not reviewed the information herein or determined whether to approve Vascepa for use to reduce the risk of major adverse cardiovascular events as studied in REDUCE-IT.

Indication and Usage Based on Current FDA-Approved Label (not including REDUCE-IT results)

- Vascepa (icosapent ethyl) is indicated as an adjunct to diet to reduce triglyceride (TG) levels in adult patients with severe (≥500 mg/dL) hypertriglyceridemia.
- The effect of Vascepa on the risk for pancreatitis and cardiovascular mortality and morbidity in patients with severe hypertriglyceridemia has not been determined.

Important Safety Information for Vascepa Based on Current FDA-Approved Label (not including REDUCE-IT results) (Includes Data from Two 12-Week Studies (n=622) (MARINE and ANCHOR) of Patients with Triglycerides Values of 200 to 2000 mg/dL)

- Vascepa is contraindicated in patients with known hypersensitivity (e.g., anaphylactic reaction) to Vascepa or any of its components.
- In patients with hepatic impairment, monitor ALT and AST levels periodically during therapy.
- Use with caution in patients with known hypersensitivity to fish and/or shellfish.
- The most common reported adverse reaction (incidence >2% and greater than placebo) was arthralgia (2.3% for *Vascepa*, 1.0% for placebo). There was no reported adverse reaction >3% and greater than placebo.
- Adverse events and product complaints may be reported by calling 1-855-VASCEPA or the FDA at 1-800-FDA-1088. Patients receiving treatment with Vascepa and other drugs affecting coagulation (e.g., anti-platelet agents) should be monitored periodically.
- Patients should be advised to swallow Vascepa capsules whole; not to break open, crush, dissolve, or chew Vascepa.

FULL VASCEPA PRESCRIBING INFORMATION CAN BE FOUND AT WWW.VASCEPA.COM.

Important Safety Information for Vascepa based on REDUCE-IT, as previously reported in The New England Journal of Medicine publication of the primary results of the REDUCE-IT study:

- Excluding the major adverse cardiovascular events (MACE) results described above, overall adverse event rates in REDUCE-IT were similar
 across the statin plus VASCEPA and the statin plus placebo treatment groups.
- There were no significant differences between treatments in the overall rate of treatment emergent adverse events or serious adverse events leading to withdrawal of study drug.
- There was no serious adverse event (SAE) occurring at a frequency of >2% which occurred at a numerically higher rate in the statin plus *Vascepa* treatment group than in the statin plus placebo treatment group.
- Adverse events (AEs) occurring in 5% or greater of patients and more frequently with Vascepa than placebo were:
 - peripheral edema (6.5% Vascepa patients versus 5.0% placebo patients), although there was no increase in the rate of heart failure in Vascepa patients
 - constipation (5.4% Vascepa patients versus 3.6% placebo patients), although mineral oil, as used as placebo, is known to lower constipation, and
 - atrial fibrillation (5.3% Vascepa patients versus 3.9% placebo patients), although there were reductions in rates of cardiac arrest, sudden death and myocardial infarctions observed in Vascepa patients
- There were numerically more SAEs related to bleeding in the statin plus Vascepa treatment group although overall rates were low with no fatal bleeding observed in either group and no significant difference in adjudicated hemorrhagic stroke or serious central nervous system or gastrointestinal bleeding events between treatments.
- In summary, Vascepa was well tolerated with a safety profile generally consistent with clinical experience associated with omega-3 fatty acids and current FDA-approved labeling of such products.

Forward-Looking Statements

This press release contains forward-looking statements, including statements related to the potential for improving patient care and creating future company growth. These forward-looking statements are not promises or guarantees and involve substantial risks and uncertainties. Among the factors that could cause actual results to differ materially from those described or projected herein include the following: uncertainties associated generally with research and development, clinical trials and related regulatory submissions, reviews and approvals; the risk that data interpretations or other information from third parties, the regulatory review process, regulatory authorities and in connection with an advisory committee could be made public that are negative or may delay approval or limit *Vascepals* marketability; the risk that special protocol assessment (SPA) agreements with the FDA are not a guarantee that FDA will approve a product candidate; the risk associated with the FDA's rescinding the REDUCE-IT SPA agreement; the risk related to FDA advisory committee meetings; and the risk that the FDA may not complete its review of the REDUCE-IT sNDA within the timing expected. A further list and description of these risks, uncertainties and other risks associated with an investment in Amarin can be found in Amarin's filings with the U.S. Securities and Exchange Commission, including its most recent Quarterly Report on Form 10-Q. Existing and prospective investors are cautioned not to place undue reliance on these forward-looking statements, which speak only as of the date hereof. Amarin undertakes no obligation to update or revise the information contained in this press release, whether as a result of new information, future events or circumstances or otherwise.

Availability of Other Information About Amarin

Investors and others should note that Amarin communicates with its investors and the public using the company website http://www.amarincorp.com/), including but not limited to investor presentations and investor FAQs, Securities and Exchange Commission filings, press releases, public conference calls and webcasts. The information that Amarin posts on these channels and websites could be deemed to be material information. As a result, Amarin encourages investors, the media, and others interested in Amarin to review the information that is posted on these channels, including the investor relations website, on a regular basis. This list of channels may be updated from time to time on Amarin's investor relations website and may include social media channels. The contents of Amarin's website or these channels, or any other website that may be accessed from its website or these channels, shall not be deemed incorporated by reference in any filing under the Securities Act of 1933.

Amarin Contact Information

Investor Inquiries:

Elisabeth Schwartz Investor Relations Amarin Corporation plc In U.S.: +1 (908) 719-1315 investor.relations@amarincorp.com

Lee M. Stern Solebury Trout In U.S.: +1 (646) 378-2992 Istern@soleburytrout.com

Media Inquiries:

Gwen Fisher Corporate Communications Amarin Corporation plc In U.S.: +1 (908) 325-0735 pr@amarincorp.com

References

¹ American Heart Association. Heart Disease and Stroke Statistics – 2019 Update: A Report from the American Heart Association. Published January 31, 2019.

² American Heart Association / American Stroke Association.. 2017. Cardiovascular disease: A costly burden for America projections through 2035.

³ American Heart Association: Heart Disease and Stroke Statistics -- 2019 At-a-Glance.

⁴ Ganda OP, Bhatt DL, Mason RP, et al. Unmet need for adjunctive dyslipidemia therapy in hypertriglyceridemia management. J Am Coll Cardiol. 2018;72(3):330-343.

⁵ Budoff M. Triglycerides and triglyceride-rich lipoproteins in the causal pathway of cardiovascular disease. Am J Cardiol. 2016;118:138-145.

⁶ Toth PP, Granowitz C, Hull M, et al. High triglycerides are associated with increased cardiovascular events, medical costs, and resource use: A real-world administrative claims analysis of statin-treated patients with high residual cardiovascular risk. J Am Heart Assoc. 2018;7(15):e008740.

⁷ Nordestgaard BG. Triglyceride-rich lipoproteins and atherosclerotic cardiovascular disease - New insights from epidemiology, genetics, and biology. Circ Res. 2016;118:547-563.

⁸ Nordestgaard BG, Varbo A. Triglycerides and cardiovascular disease. Lancet. 2014;384:626–635.