

New Recombinant Lipase Compound that came out of the French Wine and Cheese Industry offering Hope to Patients with Cystic Fibrosis and Pancreatitis in the Digestion of Fats**Thijs Spoor**
President**AzurRx BioPharma, Inc.**
(Nasdaq:AZRX)
www.azurrx.com**Contact:**
Martin Krusin
(646) 699-7855
mkrusin@azurrx.com**Interview conducted by:**
Lynn Fosse, Senior Editor
CEOCFO Magazine**CEOCFO: Mr. Spoor, what is the concept behind AzurRx BioPharma?**

Mr. Spoor: AzurRx BioPharma started with the premise that we want to look at non-systemic pharmaceuticals. Drugs are categorized into two really broad categories, large molecule and small molecule. Large molecules tend to be proteins and complex structures and it is really tough for them to be absorbed and there are often problems with having them formulated for delivery to patients. Small molecules are things like aspirin or Tylenol which are small chemicals are more easily absorbed into the blood from the stomach and then go throughout the body. AzurRx BioPharma wants to focus on things that are non-systemic, things that only stay in the parts of the body that you want them to go into. If you swallow our drug, it stays in the stomach and does not go anywhere else but the gastrointestinal system. Then it leaves the body after it does what it is supposed to do. Our origins are from research in the French wine and cheese industry, but at this point, we are focusing on making gastrointestinal drugs better.

CEOCFO: What is wrong with what we have now? Where is there room for improvement in the gastrointestinal industry?

Mr. Spoor: The company focuses on two major opportunities to improve patient care. The first is gastrointestinal and the second is anti-infective. Across medicine, I think there are always places where there is room for improvement. In some cases, the room for it is extraordinary and in some cases it is very minor. In our case, we are looking at patients with cystic fibrosis and patients whose pancreas has shut down. The current standard of care involves a massive pill burden that has problems with stability in the gastrointestinal system. We are busy trying to improve the standard of care for patients in a disease that impacts the thirty thousand patients with cystic fibrosis and chronic pancreatitis affects another 120 to 200,000 adult patients with pancreatic disorders. In those cases when the pancreas is not working, you need to have a way to give a chemical called a lipase to these patients. When we talk about patients who have a lipase deficiency this means they are missing the enzymes that help them digest fat. In the 1890s, the first way to serve these patients was when physicians and pharmacists started using ground up pig pancreas to treat patients with this disorder. The theory was that if the missing enzymes are from your pancreas, then you go to the closest omnivore to a human, which is a pig, to replace what is missing in these humans. The premise was very sound and it ended up working in these patients prompting other companies to develop their own versions of pancreatic extract. Amazingly enough, 130 years later, Abbvie, J&J and Allergan share a billion dollar US market of pig pancreas extract that is served, sold and used by all these patients. We think we can go and make a big improvement in the technology.