

Announcement to the Australian Stock Exchange

SUCCESSFUL RESULTS FROM 12 MONTH EVALUATIONS IN HUMAN CLINICAL TRIAL OF CARDIOCEL

- Positive results from 12 month follow-up assessments of CardioCel patients
- No calcification detected by MRI

PERTH, Australia, 8 APRIL 2010: Australian tissue engineering company, bioMD Limited (ASX: BOD), is pleased to announce further 12 month post-operative follow-up results in paediatric patients (children aged from 3 months to 14 years, with a mean age of 3 years and 10 months) who received ADAPT[®] treated CardioCel patches in various cardiac surgical procedures.

Thirty patients were implanted with CardioCel patches between May 2008 and July 2009. CardioCel is a collagenous-based bioprosthesis device, tissue engineered from bovine pericardium and treated with the ADAPT Tissue Engineering Process. It is designed for patients who have been diagnosed with congenital heart disease and require a tissue patch for surgical repairs during major open-heart surgery.

The 12 month clinical evaluations were undertaken at the Universitas Hospital, Bloemfontein, South Africa under the supervision of the Principal Investigator, Professor Francis Smit, and included a general evaluation of each patient's heart condition, a full blood count and an echocardiographic examination.

Echocardiographic assessment was undertaken to evaluate haemocompatibility, the calcification status and the general efficiency of the CardioCel patch.

Additionally, 5 patients to date have been assessed using magnetic resonance imaging (MRI). This is a non-invasive diagnostic technique based on analysis of the absorption and transmission of high-frequency radio waves. Using modern, high-speed computers this analysis can be used to produce images of the tissue and, specifically, the integrity of the CardioCel patch.

Results from the MRI assessments demonstrate that in all cases, no calcification was detected. This is considered a significant result as calcification is a limiting factor in the longevity of biomaterial patches after implantation. Therefore, the requirement for further surgery is significantly reduced.

A summary of the 12 month MRI report data concludes:

- Patient 5 “no signal loss in VSD area – no calcification detected” (“VSD area”, ventricular septal defect repair, or hole in the partition separating the two ventricles of the heart)
- Patient 8 “no abnormal thickening of patch areano signal loss in area of repair which indicates no calcification in that area”
- Patient 13 “high signal without loss in signal strength indicates absence of calcification in that area”
- Patient 14 “repair appears intact on imagesno visible leakage”
- Patient 15 “repair appears intact.....presence of high signal in area indicates absence of calcification”

The implantation phase of the clinical trial has now been completed. The 12 month follow-up examinations will continue until September 2010 and the Principal Investigator’s final report on the clinical trial is expected to be received shortly thereafter.

For more information, please contact:

Robert Towner - Executive Director Tel: +61 8 9262 6777 or 0414 594 868

Michael Bennett - Managing Director Tel: +61 8 9262 6777 or 0419 944 567

About bioMD Limited

bioMD (ASX: BOD) is an Australian company commercialising innovative tissue engineering technology for use in cardiothoracic and abdominal surgery. The ADAPT technology offers significant improvements to current tissue processing technologies in terms of immunogenicity and tissue durability. Its lead product, CardioCel, continues to be evaluated in a Phase II human trial in South Africa for various cardiac repair procedures. bioMD is currently maximising shareholder value via pursuit of corporate partnerships, successful completion of clinical milestones and rapid commercialisation strategies.

About the ADAPT Tissue Engineering Process

ADAPT Tissue Engineering Process (TEP) produces a bioprosthetic scaffold (extracellular matrix) made from animal tissue. Depending on the site of implantation, the patient’s own cells will migrate into the matrix and stimulate site specific controlled remodelling. At the same time, new blood vessels are formed in the matrix and they deliver appropriate cells that lead to a functional tissue repair. The implanted extracellular matrix is gradually remodelled and replaced by the body’s own new tissue structures.