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Quest PharmaTech Completes Patient Enrollment in Phase IIb Study of Oregovomab for the Immunotherapy of Ovarian Cancer

EDMONTON, ALBERTA, June 9, 2014 – Quest PharmaTech Inc. (TSX-V: QPT) (“Quest” or the “Company”), a pharmaceutical company developing and commercializing products for the treatment of cancer, reports today that patient enrollment has been completed in the Company’s Phase IIb clinical trial of its lead immunotherapy product candidate Oregovomab for the treatment of Ovarian Cancer.

“I am pleased that we have reached this important milestone in our clinical program” said Dr. Madi Madiyalakan, CEO of Quest. “I would like to thank everyone involved in the trial that helped to realize this significant Company objective.”

This clinical study is the first of three clinical trials that the Company is conducting for its lead immunotherapy product Oregovomab in conjunction with preclinical studies dissecting combinatorial immunotherapy. It is a Phase IIb study with 80 patients for assessing the safety and bioactivity of combination chemo-immunotherapy of advanced ovarian cancer using standard front line carboplatin paclitaxel chemotherapy in combination with the anti-CA125 antibody Oregovomab relative to chemotherapy alone. Thirteen clinical centers in Italy and the U.S are participating in the study with Professor Angioli at University Campus Bio Medico in Rome, Italy as the principal investigator. The objective of this study is to confirm the specific immune response seen in the combination front line setting (Braly 2009) in a population with more favorable surgical debulking. The enrolled patients will complete the treatment schedule and be followed up for long term disease outcomes. Immunology data for all patients who completed the treatment phase will be analyzed and evaluated while the final survival data is being collected.

“Quest is focusing on combination strategies to improve the demonstrated power of the immune system to control cancer”, commented Dr. Christopher Nicodemus, M.D. FACP, Chairman of the Company’s clinical advisory board. “Recent advances with checkpoint blockade have revolutionized this field, and antibody directed stimulation of specific immunity in conjunction with newly established approaches has the potential to raise the bar still higher”.

The Company is also studying Oregovomab clinically in combination with chemotherapy and radiotherapy in CA125 positive pancreatic cancer patients, and plans a combinatorial study with the immune stimulator, Hiltonol™ (a TRL3 agonist) in conjunction with standard chemotherapy in ovarian cancer patients. Quest anticipates the completion of these clinical studies and associated preclinical studies further exploring combinations with immune regulators will not only serve to validate the superiority of the combinatorial approach but will also establish a definitive registration path for the Company’s portfolio of antigen specific antibody products.

About Quest PharmaTech Inc.

Quest PharmaTech is a publicly traded, Canadian based clinical stage company developing a portfolio of product candidates for the treatment of cancer by combining immunotherapeutic antibodies with chemotherapy, immune-adjuvants and photodynamic therapy. Quest has a body of clinical experience and a new appreciation of the obstacles and potential of combinatorial immunotherapeutic approaches to cancer by using either immunoglobulin G or E as immune modulators to enhance tumor specific immunity and clinical outcome.

The most advanced of its product candidates is Oregovomab, an anti-CA125 monoclonal antibody, in combination with front-line chemotherapy for the treatment of advanced ovarian cancer which is currently undergoing a Phase IIb clinical trial in 13 centers in Italy and the U.S. The Company's MUC1 program that has already undergone a Phase I clinical trial has the potential to permit tumor specific immunization in more than 70% of all cancers that kill. Quest is also conducting a Phase I clinical trial for the treatment of prostate cancer, with its photosensitizer, SL052.

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