



## **Funding from Major US Granting Agency Initiated FOR IMMEDIATE RELEASE**

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Australian healthcare company Stirling Products Limited (ASX: STI) is pleased to announce that a grant from the US Civilian Research & Development Foundation (CRDF) to conduct a double-blind, placebo-controlled clinical trial of its botanical immunomodulator ImmunoXel has been activated this month.

Recognition through this major US granting agency marks an important milestone in the development of ImmunoXel – Stirling's flagship product for the treatment of TB and AIDS.

The U.S. Civilian Research & Development Foundation (CRDF) is a non-profit organization authorized by the U.S. Congress and established in 1995 by the National Science Foundation. This unique public-private partnership promotes international scientific and technical collaboration through grants, technical resources, and training. The CRDF had initiated the STEP Business Partnership Grant (BPG) competition so that scientists from Ukraine can continue their work on technology commercialization. As reported in a release to market last year, the international panel of judges at the CRDF Innovation Forum in Kiev had selected the ImmunoXel proposal as one of the Forum's top priority projects. This decision culminated several months of critical evaluation of two dozen proposals by peer reviewers in the USA and Ukraine. Since this grant is considered a federal grant it took an additional six months to receive ethical clearance from the Office for Human Research Protections, of the U.S. Department of Health and Human Services in order that the trial could commence.

The CRDF award is recognition of the potential of ImmunoXel especially in terms its immunomodulating property as an adjunct for treatment of HIV and TB.

In earlier published clinical trials, the oral immunomodulating supplement ImmunoXel has been shown to be very safe and highly effective as an immune adjuvant in TB patients including patients with multi-drug (MDR-TB) and extensively drug resistant TB (XDR-TB). Similar benefits were observed in patients with TB who were also dually infected with HIV (TB/HIV). While these results were published in at least a dozen of peer-reviewed medical journals, no double-blind, placebo-controlled clinical trials have been conducted to date. The CRDF grant will allow trial investigators to carry out such a trial, the results of which are expected to become public toward the end of this year.



The WHO estimates that globally, about one-third of the world's population is infected with the Mycobacterium tuberculosis bacteria that cause TB, and each year approximately 9 million people become ill with the disease, and 2 million of those die. TB patients with HIV are 30 times more likely to die and treatment options for them are limited. The WHO's annual report on TB issued on March 24, 2009 – the World TB day – indicated that one in four tuberculosis deaths is HIV related, which is twice as many as had been recognized previously. In addition about half a million people had multidrug-resistant TB in 2007 for which treatment can be costly, (US\$15,000 and US\$30,000) and complicated. Further, as has been reported through the media in the past weeks there is also concern of the resurgence of TB and especially Extremely Drug Resistant TB in the US as well as in Australia.

Unfortunately, the treatment options for TB and HIV patients in many countries, particularly those Africa, are still very limited.

**For further information see [www.stirlingproducts.net](http://www.stirlingproducts.net) or contact:**

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