24 July 2018

**Scancell Holdings Plc**
("Scancell" or the "Company")

**Issue of Equity**

Scancell Holdings plc, ("Scancell" or the "Company") the developer of novel immunotherapies for the treatment of cancer, confirms that further to the announcement made on 18 July 2018 regarding the exercise of share options, the Company has issued, 3,184,620 new ordinary shares ("New Shares").

An application has been submitted to the London Stock Exchange for admission of the New Shares to trading on AIM. It is expected that admission will become effective and the dealings in the New Shares on AIM will commence at 8.00 a.m. on 25 July 2018 ("Admission").

The total number of ordinary shares is 387,796,556 with each ordinary share carrying the right to one vote. The Company has no shares in Treasury; therefore the total number of voting rights in Scancell is 387,796,556. This figure may be used by shareholders as the denominator for the calculations by which they will determine if they are required to notify an interest in, or change to their interest in, the share capital of the Company under the FCA's Disclosure Guidance and Transparency Rules.

The New Shares will be credited as fully paid, and will, on issue, be identical to and rank pari passu in all respects with the existing ordinary shares, including the right to receive all dividends and other distributions thereafter declared, made or paid following the date of admission.

**For Further Information:**

**Scancell Holdings Plc**

| | | |
|---|---|---|
| Dr John Chiplin, Chairman<br>Dr Cliff Holloway, CEO | Scancell Holdings Plc | +44 (0) 20 3727 1000 |
| Freddy Crossley/Emma Earl | Panmure Gordon (UK) Limited | +44 (0) 20 7886 2500 |
| Mo Noonan/Simon Conway | FTI Consulting | +44 (0) 20 3727 1000 |

**About Scancell**

Scancell is developing novel immunotherapies for the treatment of cancer based on its ImmunoBody® and Moditope® technology platforms.

Scancell's first ImmunoBody®, SCIB1 is being developed for the treatment of melanoma. Data from the Phase 1/2 clinical trial demonstrate that SCIB1, when used as monotherapy, has a marked effect on tumour load, produces a melanoma-specific immune response and highly encouraging survival trend without serious side effects. In patients with resected disease there is increasing evidence to suggest that SCIB1 may delay or prevent disease recurrence.

Scancell's ImmunoBody® vaccines target dendritic cells and stimulate both parts of the cellular immune system: the helper cell system where inflammation is stimulated at the tumour site and the cytotoxic T-lymphocyte or CTL response where immune system cells are primed to recognise and kill specific cells.

Pre-clinical data on a combination of SCIB1 or SCIB2 and checkpoint inhibition (blockade of the PD-1 or CTLA-4 immune checkpoint pathways) have shown enhanced tumour destruction and significantly longer survival times than when either treatment was used alone. Experimental data suggests that the high avidity T cells induced by ImmunoBody® vaccines increase expression of PDL-1 on the tumour cell surface, thereby making the tumours more sensitive to checkpoint inhibitor drugs. Re-challenging animals with tumour cells after SCIB1 treatment resulted in 100% survival suggesting that ImmunoBody® induces a powerful memory response. Such an effect has not been observed with checkpoint inhibitors.

Scancell has also identified and patented a series of modified epitopes that stimulate the production of killer CD4+ T cells that destroy tumours without toxicity. The Directors believe that the Moditope® platform could play a major role in the development of safe and effective cancer immunotherapies in the future.