**FACETS (AT1001-011),** a Phase 3 clinical trial, studied the safety and effectiveness of the investigational oral pharmacological chaperone migalastat HCl (“migalastat”) for individuals with Fabry disease. The study enrolled both males and females with a specific genetic mutation in the α-Gal A gene that may be addressable (amenable) with migalastat.

**Amenability Changes:** Prior to enrollment each subject’s genetic mutation was tested at study initiation using a clinical trial human embryonic kidney (HEK) cell-based assay developed internally (Clinical Trial HEK Assay). Following completion of patient enrollment, the assay was validated in compliance with current regulatory guidance and relevant Good Laboratory Practice (GLP) regulations (GLP HEK Assay). When moving from the Clinical Trial HEK Assay to the GLP HEK assay, approximately 10% of mutations in the HEK database were re-categorized from “amenable” to “non-amenable”. As a result, there were changes in categorization from amenable to non-amenable in 17 patients enrolled in the FACETS Study. Therefore, the 6-month results were re-evaluated and presented in February 2014 at the Lysosomal Disease Network WORLD Symposium (LDN WORLD). In the second quarter of 2014, the 12- and 24-month study data were reported only from subjects that had an-amenable mutation in the GLP HEK Assay.

**Study Design and Results:** A total of 67 subjects enrolled in FACETS, exceeding the target enrollment of 60. The design began with Stage 1, in which subjects were randomized either to oral migalastat or to oral placebo (sugar pill) for the first 6 months. It was previously reported that in the original Stage 1 analysis that a higher percentage of patients on oral migalastat experienced reductions in kidney interstitial capillary globotriaosylceramide (IC GL-3, the fatty substance that builds up in the tissues of Fabry patients) than those on placebo, but it was not statistically significant. In subsequent analyses of Stage 1, patients with GLP HEK amenable mutations treated with oral migalastat experienced statistically significant reductions in IC GL-3 compared to patients on placebo. These reductions were maintained out to 12 months.

In Stage 2, subjects who were on placebo in Stage 1 switched to migalastat for an additional 6 months. The Stage 2 (12-month) results demonstrated a statistically significant reduction in kidney IC GL-3 in participants with amenable mutations who switched from placebo to migalastat. Migalastat was generally safe and well-tolerated.

After completion of this initial 12-month study, an optional open-label extension study (Study-041) became available for subjects that completed Stage 2. To date, 85% of FACETS amenable participants have enrolled in this extension study.

**THANK YOU TO ALL CLINICAL RESEARCH PARTICIPANTS**

At Amicus, we believe that all clinical trial participants are critical members of the clinical research team and are considered partners in the drug development process. Without their commitment, and the support of their families and friends, Fabry clinical research could not advance. Amicus extends thanks to all involved with the migalastat studies.

— The Patient & Professional Advocacy Team
The ATTRACT Study (AT1001-012) was a Phase 3 clinical trial measuring the safety and efficacy of the oral pharmacological chaperone migalastat compared to the current standard-of-care enzyme replacement therapies (ERTs) for Fabry disease: Fabrazyme® (agalsidase beta) and Replagal® (agalsidase alfa). The study enrolled 60 patients (26 males and 34 females) with amenable mutations who were receiving ERT for at least 12 months prior to the first study visit. The objective of the study was to show comparability of migalastat to ERTs on kidney function in Fabry disease. The co-primary outcome measures to support comparability were the changes in estimated glomerular filtration rate (eGFR) and measured glomerular filtration rate (mGFR) over the 18-month treatment period.

Among those enrolled, 36 patients were switched to migalastat and 24 patients were assigned to remain on ERT for the primary 18-month treatment period. As a result of the transition from the Clinical Trial HEK Assay to the GLP HEK Assay, there were changes in categorization from amenable to non-amenable in four patients enrolled in the ATTRACT Study. Following the 18-month treatment period, 97% of patients with amenable mutations in the migalastat group elected to continue migalastat and 94% of amenable patients in the ERT group elected to switch from ERT to migalastat in the 12-month extension phase. An optional extension (Study-041) is also available for subjects that complete the 12-month treatment extension in ATTRACT.

Summary of the ATTRACT Study (AT1001-012) 18-Month Results:

- Migalastat had a comparable effect to ERT on patients’ kidney function as measured by the changes in eGFR and mGFR.
- Levels of plasma lyso- Gb3, a biomarker of Fabry disease, remained low and stable in patients with amenable mutations who switched from ERT to migalastat.
- Migalastat was generally safe and well-tolerated.
- Of 48 patients with GLP HEK-amenable mutations who completed the ATTRACT Study, 46 (96%) elected to continue with the 12-month treatment extension and 45 remain on oral migalastat today as their only treatment for Fabry disease.

“I believe the results from Study 012 show a positive treatment effect of migalastat in Fabry patients with amenable mutations,” stated Raphael Schiffmann, M.D., M.H.Sc., an investigator with the Institute of Metabolic Disease at Baylor Research Institute in Dallas, TX. “The stabilization of renal function and the maintenance of substrate levels as measured by lyso- Gb3 provide further clinical evidence that supports my experience over the last eight years in treating Fabry patients with migalastat in various clinical studies. When combined with the favorable safety profile, the totality of the data from Study 012 and Study 011 indicate that migalastat should become an important new oral treatment option for Fabry patients,” Dr. Schiffmann concluded.

At the announcement of these positive data in mid-August 2014, John F. Crowley, Chairman and Chief Executive Officer of Amicus Therapeutics, Inc., stated, “…Combined with our previous Phase 3 results from Study 011, we have a compelling and consistent data set from both treatment-naïve and ERT-experienced patients. Given these results and the great need for new and effective medicines, we plan to work with European and U.S. regulators to determine the fastest way to get migalastat approved for all amenable Fabry patients.”

The full results of the ATTRACT Study are scheduled to be presented at the American Society of Nephrology conference in November 2014 in Philadelphia, PA.

For more information about study specifics, please speak with your healthcare provider, or visit www.fabrystudy.com or www.clinicatrials.gov, keyword NCT01218659 or AT1001-012
Recently Amicus investigated if mixing migalastat with ERT into an infusible mixture prior to intravenous administration (termed “co-formulation”), can lead to the binding and stabilization of the recombinant enzyme by the chaperone before delivery into the body, with similar or even larger therapeutic benefits compared to co-administration (tested previously in preclinical studies and in 013). Migalastat co-formulated with a proprietary investigational ERT is in preclinical development.

Amicus completed a Phase 1 study of IV-administered migalastat in healthy volunteers. Results from this study, which are expected during the second half of 2014, will help guide the design and doses of the pharmacological chaperone for the next future combination study.

In alignment with the Company’s mission of developing next-generation therapies for rare and orphan diseases, Amicus acquired Callidus BioPharma, a privately held biologics company, in November 2013. The Callidus novel targeting technology is being evaluated preclinically for use with ERTs to treat LSDs. These ERTs may be further improved through co-formulation with a pharmacological chaperone as a stabilizer with the potential to further enhance tissue uptake and improve tolerability of the ERT. In conjunction with this transaction, Amicus welcomed back Hung Do, PhD, founder and chief scientific officer of Callidus BioPharma. He was appointed as Amicus’ new Senior Vice President, Discovery Biology. Dr. Do, who has approximately 15 years of experience in LSDs and ERTs, said: “I have spent the majority of my professional career trying to understand lysosomal storage disorders and am firmly committed to developing better approaches and treatments for these diseases.”
Courtnay Midkiff kept nearly 100 Amicus employees spellbound with tales of his amazing journey! He trekked across the United States last year - an incredible commitment this 24-year-old Virginian made to himself and his peers in the Fabry community to raise disease awareness from coast to coast. Courtnay’s presentation was a very special Fabry Lunch & Learn hosted by Amicus Patient & Professional Advocacy at the company’s Cranbury, NJ headquarters in November 2013. Courtnay began his quest from the Atlantic Coast on March 1, 2013 and completed it exactly six months later, on September 1, 2013 – his birthday - on the shore of Huntington Beach, CA. During that half-year, he battled physical and mental fatigue.

Excessive heat in the Southern states triggered Fabry symptoms and other Fabry-associated issues, while he chose to forego treatment. He kept an active blog with daily posts and pictures of his experiences at www.fabryswalkabout.com. Courtnay had a great following. People responded on his blog with inspirational quotes and stories to keep him going when things got rough. Toward the end of his trip he posted, “I have felt so good on this trip aside from a few off days; pushing my body to its limit as often as possible. I have noticed a huge decrease in pain, and a huge increase in my energy level. I went from not sweating at all to straight up dripping sweat on a daily basis. That may not sound like much to most people but to someone with Fabry that is a major step in the right direction.”

[The Fabry International Network (FIN) website states that people with Fabry disease can sweat less than people who do not have Fabry. This impairment can result in the patient becoming overheated and having sensitivity to weather extremes. Damage to the nerves and sweat glands are known to cause this symptom.]

Courtnay’s blog contains several posts throughout this trip. He continues to occasionally post his more recent adventures on his blog.

Fabry Disease Foundation (NFDF). In addition to newspaper articles, multiple interviews on local TV news stations helped to heighten awareness of the disease. Courtnay even received a proclamation from the Mayor of Scottsdale, AZ, declaring August 4, 2013, as Fabry Disease Day. Courtnay is an extremely motivated person. On the 1-year anniversary of beginning his trip he posted: “A year ago today I left on a trip that was by far the craziest idea I ever had … Life is cool! Live it!! Massive thanks to everyone that donated to make it possible to raise $16,000 for the NFDF! Planning a new trip now and can’t wait to get back out and experience more.” Courtnay is an inspiration to the Fabry community and beyond. Everyone at Amicus enjoyed meeting Courtnay and looks forward to future visits and learning about his next journey.
AMICUS SUPPORTS FABRY COMMUNITY MEETINGS

The Patient & Professional Advocacy continues to participate in a variety of Fabry medical, professional and patient meetings and conferences.

From January 2014, events supported by Amicus have included:

- 10th Annual LDN WORLD Symposium, San Diego, CA
- FSIG Expert Fabry Conference, San Diego, CA
- Emory University LSD Research meeting for patients, Atlanta, GA
- ACMG Annual Clinical Genetics and Genomics Meeting, Nashville, TN
- FIN Fabry Partners meeting, Amsterdam, The Netherlands
- NFDF Fabry community meetings, Los Angeles, CA; Rochester, NY; Cincinnati, OH
- NORD Portraits of Courage Gala, Washington, DC
- FSIG 1st Fun Run/Walk Event and Fabry community meeting, St. Louis, MO; Fabry community meetings, Kansas City, MO; Chicago, IL; Los Angeles, CA; New York, NY; Jefferson City
- Fabry Support Group Australia (FSGA) 20th Birthday Celebration
- Annual Society of Studies of Inborn Errors of Metabolism (SSIEM), Innsbruck, Austria
- NFDF Victory Junction Charles Kleinschmidt Fabry Family Weekend Camp, Greensboro, NC
- Canadian Fabry Association (CFA) Fabulous Females of Fabry Conference, Nova Scotia, Canada

Upcoming 2014 Fabry community events include:

- NFDF Fabry patient meeting, Grand Rapids, MI; November 5
- FSIG Fabry community meeting, Tuscon, AZ; November 8
- NFDF Fabry patient meetings in Milwaukee, WI and North Carolina; TBD
- First Meeting of Nordic Fabry Expert Group, Copenhagen, Denmark; November 27-28

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For information about clinical trials, visit:

www.clinicaltrials.gov
At the Forefront of Therapies for Rare and Orphan Diseases™

US Fabry Patient Advisory Board
The Amicus US Patient Advisory Board (PAB) convened in February 2014 in San Diego, CA. Through interactive and productive discussions, PAB members gave valuable input on Amicus’ clinical development plan, communications and several other related areas of program operations. The Patient & Professional Advocacy team and their cross-functional colleagues at Amicus are all very grateful to have such dedicated board members who took time from their busy schedules to travel and so actively participate in this meeting.

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