New Data Demonstrating the Impact of Opioid-Related Adverse Events on Total Hospital Cost Presented at American Society of Health-System Pharmacists Meeting

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Research Utilizing National and Regional Health System Databases Presented

PARSIPPANY, N.J., Dec. 5, 2011 /PRNewswire/ -- Pacira Pharmaceuticals, Inc. (Nasdaq: PCRX) today announced new data gleaned from a national database of patients from 381 U.S. hospitals who underwent common hospital-based surgical procedures and received opioids for postsurgical pain management. The data demonstrate that opioid-related adverse events (ORAEs) are associated with more than a $1,000 increase in hospitalization cost and more than a day increase in length of hospital stay (LOS). These findings will be presented at 2 p.m. CST today during a poster session at the 2011 Midyear Clinical Meeting of the American Society of Health-Systems Pharmacists (ASHP) in New Orleans.

In this retrospective analysis, researchers utilized Premier's database, the nation's most comprehensive repository of clinical, financial and outcomes information, to identify adult patients who underwent common soft tissue and orthopedic surgical procedures and received opioids from September 2008 to August 2010. All opioids consumed were converted to morphine-equivalent doses. Approximately 20 percent of surgical patients—or roughly one in five—were identified as experiencing an ORAE.

Researchers compared the mean total hospitalization cost and LOS between those patients who experienced an ORAE and those patients who did not. Key findings included:

- Patients experiencing an ORAE had a 1.1-day increase in mean LOS compared to patients who did not (P<0.0001).
- Patients experiencing an ORAE had a $1,028 mean increase from the baseline hospitalization cost compared to patients who did not (P<0.0001).

"Opioids have long been associated with a range of unwanted side effects in postsurgical patients, from nausea, vomiting and constipation to urinary retention, pruritus and respiratory depression, some of which, such as respiratory depression, can be severe and life threatening," said Gary Oderda, PharmD, MPH, professor in the Department of Pharmacy Practice and director of the Utah Pharmacotherapy Outcomes Research Center at the University of Utah College of Pharmacy, who will present the poster. "In addition to the negative impact these events have on patients' recovery, these data indicate they place a significant economic burden on hospitals and health care systems, as well."

Dr. Oderda conducted this research in conjunction with TJ Gan, M.D., MHS, professor and vice chair, Department of Anesthesiology at Duke University Medical Center, and in collaboration with Premier Research Services, part of the Premier Healthcare Alliance. The research was supported by Pacira Pharmaceuticals, Inc.

"These data not only demonstrate the strong correlation between total opioid consumption, opioid-related adverse events and cost, but also highlight the value of a multimodal, opioid-sparing approach to postsurgical pain management," said Dr. Gan. "By utilizing a combination of therapeutics, surgeons can provide effective analgesia while limiting the adverse events associated with opioids, which could provide significant benefits to both patients and hospital economics."

A regional health system analysis conducted by Barnabas Health will also be presented at 2 p.m. CST today during a poster session at ASHP. The research was supported by Pacira Pharmaceuticals, Inc. This analysis identified patients undergoing total abdominal hysterectomy (TAH) in one of Barnabas Health's six hospitals from January 2007 to December 2010 in order to identify any relationship between opioid use and increased LOS and overall cost in patients undergoing TAH.

The 97 TAH patients with the longest LOS, termed "outliers," were matched to a control group of TAH surgical patients in the database. Medical records from both groups were reviewed for total opioid use, incidence of ORAEs and total cost of hospitalization.

Total opioid consumption in the outlier group was more than double that of the control group (150 mg vs 74 mg; P<0.01); additional findings include:

- Respiratory ORAEs occurred 12 times more often in patients in the outlier group than in the control group (12% vs 1%; P<0.01); gastrointestinal ORAEs occurred more than twice as often (44% vs 19%; P<0.01)
- Total hospitalization cost was more than $8,500 higher in the outlier group compared to the control group ($14,275 vs $5,745)

"We are pleased to see large health systems and major healthcare alliances such as Premier and Barnabas Health provide health outcomes and financial analysis to continue to quantify and address the costs of opioid use in postsurgical care in U.S. hospitals," said Dave Stack, president and CEO of Pacira Pharmaceuticals, Inc. "As hospitals continue to strive for economic efficiency and increased patient satisfaction, these data provide insight into areas where the current standard of care may benefit from a critical review and further investigation regarding economic impact."

About Pacira

Pacira Pharmaceuticals, Inc. (Nasdaq: PCRX) is an emerging specialty pharmaceutical company focused on the clinical and commercial development of new products for postsurgical pain management that meet the needs of acute care practitioners and their patients. Three commercially available products utilize the Pacira proprietary product delivery technology DepoFoam®, a unique platform that encapsulates drugs without altering their molecular structure and then releases them over a desired period of time. Additional information about Pacira is available at www.pacira.com.

Forward Looking Statements

This press release contains forward-looking statements, within the meaning of Section 21E of the Securities Exchange Act of 1934 (collectively, forward-looking statements), about our business, including statements related to the future development of product candidates and the timing thereof, the timing and results of our clinical trials, potential indications for our product candidates, the timing and likelihood of the commercialization of additional products and future financial results. Biopharmaceutical development inherently involves significant risks and uncertainties, the risks outlined under "Risk Factors" and elsewhere in the final prospectus related to our public offering filed with the Securities and Exchange Commission on November 16, 2011, and in other filings that we periodically make with the SEC. Our actual results may differ materially from our expectations due to these risks and uncertainties, including risks related to, sales of EXPAREL, manufacturing of our products, competition, market acceptance of our products, results of our clinical trials, intellectual property matters, ongoing regulatory oversight, reimbursement, our ability to raise sufficient capital and other matters. These forward-looking statements are made pursuant to the safe-harbor provisions of the Private Securities Litigation Reform Act of 1995. Pacira Pharmaceuticals, Inc. undertakes no duty or obligation to update any forward-looking statements contained in this presentation as a result of new information, future events or changes in Pacira Pharmaceuticals' expectations.

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