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PRESS RELEASE

FOR IMMEDIATE RELEASE

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American Regent announces the availability of Progesterone Injection, USP in Sesame Oil

Shirley, NY – (September 29, 2010): American Regent, Inc. purchased PharmaForce Inc. (Columbus, OH) on December 29, 2009 and is pleased to announce that Progesterone Injection, USP in Sesame Oil is now available under the American Regent label with a new NDC.

Product	Strength	NDC Number	Shelf Pack
Progesterone Injection, USP in Sesame Oil	50 mg/mL (500 mg/10 mL) Multiple Dose Vial	**0517-0750-01** Previous NDC: 40042-050-10	1

It is "AO" rated (pharmaceutically and therapeutically equivalent) to Watson Pharma's Progesterone Injection, USP in Sesame Oil and is Latex Free.

Headquartered in Shirley, NY, American Regent, Inc., distributes over 80 pharmaceutical products under the PharmaForce or their own label, including Venofer (iron sucrose injection, USP) the #1 selling IV iron therapy in the U.S. For more information about this product or other American Regent or PharmaForce products, please contact our customer service department at 1-800-645-1706.

Source: American Regent, Inc.

See accompanying Important Safety Information and Full Prescribing Information

IMPORTANT SAFETY INFORMATION

FOR INTRAMUSCULAR USE ONLY. Progesterone injection in sesame oil is contraindicated in patients with current or past history of thrombophlebitis, thromboembolic disorders, or cerebral apoplexy; liver dysfunction or disease; known or suspected malignancy of breast or genital organs; undiagnosed vaginal bleeding; missed abortion; and known sensitivity to progesterone injection in sesame oil.

The physician should be alert to the earliest manifestations of thrombotic disorders (thrombophlebitis, cerebrovascular disorders, pulmonary embolism, and retinal thrombosis). Should any of these occur or be suspected, the drug should be discontinued immediately. Medication should be discontinued pending examination if there is a sudden partial or complete loss of vision, or if there is a sudden onset of proptosis, diplopia or migraine. If examination reveals papilledema or retinal vascular lesions, medication should be withdrawn.

Because progestational drugs may cause some degree of fluid retention, conditions which might be influenced by this condition, such as epilepsy, migraine, asthma, cardiac, or renal dysfunction, require careful observation. Patients who have a history of psychotic depression should be carefully observed and the drug discontinued if the depression recurs to a serious degree. There are possible risks which may be associated with the use of progestin treatment, including adverse effects on carbohydrate and lipid metabolism. A decrease in glucose tolerance has been observed in a small percentage of patients on estrogen-progestin combination treatment. For this reason, diabetic patients should be carefully observed while receiving such therapy. Progesterone at high doses is an antifertility drug and high doses would be expected to impair fertility until the cessation of treatment.

A statistically significant association has been demonstrated between use of estrogen- progestin combination drugs and pulmonary embolism and cerebral thrombosis and embolism. For this reason patients on progestin therapy should be carefully observed. There is also evidence suggestive of an association with neuro-ocular lesions, e.g., retinal thrombosis and optic neuritis.

Adverse events associated with use of Progesterone injection in sesame oil include breakthrough bleeding; spotting; change in menstrual flow; amenorrhea; edema; change in weight (increase or decrease); changes in cervical erosion and cervical secretions; cholestatic jaundice; breast tenderness and galactorrhea; pain, irritation, and/or redness at the injection area; skin sensitivity reactions consisting of urticaria, pruritus, edema and generalized rash; acne, alopecia and hirsutism; rash (allergic) with and without pruritus; anaphylactoid reactions; mental depression; pyrexia; insomnia; nausea; and somnolence.

Because laboratory results may be altered by the use of estrogen-progestin combination drugs, pathologists should be advised of progestin therapy when specimens are submitted.