



SYNAGEVA BIOPHARMA HIGHLIGHTS KEY DATA PRESENTATIONS AT UPCOMING LYSOSOMAL DISEASE NETWORK (LDN) WORLD SYMPOSIUM

- Multiple abstracts selected for oral presentations on February 8-10th in San Diego, CA -

LEXINGTON, Mass., January 30, 2012 -- [Synageva BioPharma Corp.](#) ("Synageva") (NASDAQ:GEVA), a clinical stage biopharmaceutical company developing therapeutic products for rare disorders, today announced that three abstracts have been selected for oral presentation at the upcoming LDN WORLD Symposium being held February 8-10th in San Diego, California. Presentations include a review of the interim Phase I/II clinical data for SBC-102 in adults with late onset LAL Deficiency and a review of preclinical data for SBC-103, a recombinant enzyme replacement for Sanfilippo B Syndrome. In addition, an academic group from Yorkhill Hospital in the UK will be presenting an important breakthrough in diagnostic testing for Synageva's lead indication, LAL Deficiency. The titles, dates and times for the oral presentations are:

- Dr. Gregory Enns from Stanford University presents *Initial Human Experience with SBC-102, a Recombinant Enzyme Replacement Therapy in Adults with Lysosomal Acid Lipase Deficiency*, Friday, February 10, 2:30 PM (PST).
- Dr. John Hamilton from Yorkhill Hospital, Glasgow, Scotland, United Kingdom presents *A New Method for the Measurement of Lysosomal Acid Lipase in Dried Blood Spots Using the Inhibitor Lalistat 2*, Thursday, February 9, 2:00 PM (PST).
- Dr. Anthony Quinn from Synageva BioPharma presents *SBC-103, a Recombinant Enzyme Replacement Therapy, Demonstrates Potential for the Treatment of Sanfilippo Type B Syndrome*, Wednesday, February 8, 3:45 PM (PST).

About Synageva's Lead Program

SBC-102 is being developed as an enzyme replacement for Lysosomal Acid Lipase (LAL) Deficiency, a lysosomal storage disorder (LSD), and is a recombinant form of the human LAL enzyme. SBC-102 is currently being evaluated in global clinical trials and has been granted orphan designations by the U.S. Food and Drug Administration ("FDA") and the European Medicines Agency. Additionally, SBC-102 received fast track designation by the FDA.

About LAL Deficiency

Lysosomal Acid Lipase (LAL) Deficiency is a rare, autosomal recessive lysosomal storage disorder (LSD) that is caused by a marked decrease of the lysosomal acid lipase enzyme. Late onset LAL Deficiency, sometimes called Cholesteryl Ester Storage Disease (CESD), affects both children and adults. In these patients, the buildup of fatty material in the liver, spleen and blood vessel walls leads to complications

resulting in significant morbidity and mortality. Early onset LAL Deficiency, sometimes called Wolman Disease, affects infants in the first year of life and is characterized by growth failure, malabsorption, steatorrhea and hepatomegaly and is rapidly fatal, usually within the first year of life.

About the Lysosomal Disease Network WORLD Symposium

The Lysosomal Disease Network (LDN) WORLD Symposium is an ACCME-accredited symposium which includes lectures and poster presentations on basic, translational and clinical research for lysosomal storage disorders. The goal of the meeting is to provide an interdisciplinary forum to explore and discuss specific areas of research and clinical interest related to lysosomal diseases.

About Synageva BioPharma Corp.

Synageva is a clinical stage biopharmaceutical company focused on the discovery, development, and commercialization of therapeutic products for patients with life-threatening rare diseases and unmet medical need. Synageva has several protein therapeutics in its pipeline. The company has assembled a team with a proven record of bringing orphan therapies to patients.

Further information regarding Synageva BioPharma Corp. is available at www.synageva.com.

Forward-Looking Statements

This news release and oral statements made from time to time by Synageva representatives in respect of the same subject matter may contain "forward-looking statements" under the provisions of the Private Securities Litigation Reform Act of 1995. Such statements can be identified by introductory words such as "expects," "plans," "intends," "believes," "will," "estimates," "forecasts," "projects," or words of similar meaning, and by the fact that they do not relate strictly to historical or current facts. Many factors may cause actual results to differ materially from forward-looking statements, including inaccurate assumptions and a broad variety of risks and uncertainties, some of which are known, including those identified under the heading "Risk Factors" in the Company's Registration Statement on Form S-3 filed with the Securities and Exchange Commission (the "SEC") on December 21, 2011 and other filings the Company periodically makes with the SEC, and others of which are not. Synageva cannot be sure when or if it will be permitted by regulatory agencies to undertake additional clinical trials or to commence any particular phase of clinical trials or how quickly patient enrollment in clinical trials will occur. In addition, early clinical results are not necessarily predictive of results that may be achieved from subsequent clinical trials. Because of this, statements regarding the expected timing of clinical trials or ultimate regulatory approval cannot be regarded as actual predictions of when Synageva will obtain regulatory approval for any phase of clinical trials or when it will obtain ultimate regulatory approval by a particular regulatory agency. No forward-looking statement is a guarantee of future results or events, and one should avoid placing undue reliance on such statements. Synageva undertakes no obligation to update publicly any forward-looking statements, whether as a result of new information, future events or otherwise.

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