Guerbet Celebrates 100 Years of Innovation in Medical Imaging

Special 100th anniversary exhibit to premier at RSNA Nov 29-Dec 3

Princeton, NJ, November 23, 2026 – Guerbet, a global specialist in contrast media and solutions for medical imaging, is celebrating its 100th anniversary this fall, marking a century of pioneering research in contrast media and medical imaging solutions. Founded in France in 1926, Guerbet has dedicated its business exclusively to medical imaging, building on its expertise in contrast media to develop medical devices and imaging solutions that help healthcare professionals diagnose and treat patients around the world.

Guerbet's history dates back to 1901, when French pharmacist Marcel Guerbet developed Lipiodol ® (ethiodized oil), an iodinated oil that would later play an important role in contrast-enhanced imaging. In 1926, Guerbet Laboratories was established in France, beginning a century of scientific innovation.

"For 100 years, Guerbet has been dedicated to advancing medical imaging and helping physicians around the world provide better care of their patients through our contrast media and imaging solutions," said Karim Boussebaa, Chief Executive Officer of Guerbet, "The United States has become an important part of our history, and as we celebrate this milestone, we see significant opportunities to continue growing our presence and strengthening our relationships."

As part of its centennial celebration, Guerbet will commemorate its history at the Radiological Society of North America's (RSNA) 2026 Annual meeting in Chicago, November 29-December 3. Attendees are encouraged to visit Booth #3100 to explore a timeline highlighting key milestones from the company's history.

Guerbet first entered the United States in 2002 and has continued to expand its operations and presence over the years. In 2013, the company received FDA approval for Dotarem® (gadoterate meglumine), strengthening its position in the US imaging market. Guerbet estimates that Dotarem is now used in an MRI procedure every three seconds worldwide.

In 2015, Guerbet acquired Liebel-Flarsheim Company, a global contrast media and delivery systems business, significantly expanding its US operations and global reach. The acquisition brought Liebel-Flarsheim Company, a manufacturer of medical imaging equipment, and manufacturing facilities in Cincinnati, Ohio, and Raleigh, North Carolina, into Guerbet's operations. This strategic expansion further strengthened Guerbet's

unique industrial footprint, making it one of the very few companies in the contrast media industry with vertically integrated manufacturing capabilities spanning active pharmaceutical ingredients, finished contrast agents, and delivery systems. This distinctive industrial model provides a significant competitive advantage through enhanced quality control, supply chain resilience, innovation capabilities, and reliable delivery to healthcare providers worldwide.

In 2022, Guerbet received FDA approval to manufacture Elucirem™ (gadopiclenol) injection at its Raleigh facility, marking another milestone in its US operations. Today, the company maintains its US headquarters in Princeton, New Jersey and has nearly 90 employees nationwide. Located in one of the country's leading life science hubs, Guerbet's New Jersey headquarters serves as a base for its U.S. business and its relationships with healthcare professionals across the country.

As imaging volumes grow and healthcare providers face increasing demands, Guerbet is focused on strengthening its relationships with US customers and expanding its role in supporting radiology departments.

"One of our greatest strengths is our ability to stay close to our customers, understand the challenges they're facing and respond to their needs," said Jim Patterson, General Manager, U.S, and Canada, Guerbet. "We have a dedicated team here in the U.S., supported by the expertise of our global colleagues and we're committed to building on those relationships as we look toward the future."

About Guerbet

At Guerbet, we build lasting relationships so that we enable people to live better. That is our purpose. We are a global leader in medical imaging, offering a comprehensive range of pharmaceutical products, medical devices, and digital and AI solutions for diagnostic and interventional imaging. As pioneers in contrast products for 100 years, with 2,746 employees worldwide, we continuously innovate and devote 10% of our revenue to Research and Development in four centers in France and the United States. Guerbet (GBT) is listed in Compartment B of Euronext Paris and generated revenue of €786 million in 2025. For more information, please visit www.guerbet.com.

Forward-looking statements

Certain information contained in this press release is not historical data but constitutes forward-looking statements. These forward-looking statements are based on estimates,

forecasts and assumptions including, without limitation, assumptions regarding the Group's current and future strategy and the economic environment in which the Group operates. They involve known and unknown risks, uncertainties and other factors, which may result in a significant difference between the Group's actual performance and results and those presented explicitly or implicitly in these forward-looking statements.

These forward-looking statements are only valid as of the date of this press release and the Group expressly disclaims any obligation or commitment to issue an update or revision of the forward-looking statements contained in this press release to reflect changes in the assumptions, events, conditions or circumstances on which such forward-looking statements are based. Forward-looking statements contained in this press release are for illustrative purposes only. Forward-looking statements and information are not guarantees of future performance and are subject to risks and uncertainties that are difficult to predict and generally beyond the control of the Group.

These risks and uncertainties include, but are not limited to, uncertainties inherent in research and development, future clinical data and analyses, including post-marketing analyses, decisions by regulatory authorities, such as the Food and Drug Administration or the European Medicines Agency, whether or not to approve, and when, the application for a drug, process or biological product for one of these candidate products, as well as their labeling decisions and other factors that may affect the availability or commercial potential of these candidate products. A detailed description of the risks and uncertainties related to the Group's activities can be found in chapter 4.8 "Risk factors" of the Group's Universal Registration Document registered by the AMF under number D.25-0220 on April 3, 2025, available on the Group's website (www.guerbet.com).

ELUCIREM™ (gadopiclenol) injection Important Safety Information

WARNING: RISK ASSOCIATED WITH INTRATHECAL USE and NEPHROGENIC SYSTEMIC FIBROSIS (NSF)

Risk Associated with Intrathecal Use

Intrathecal administration of gadolinium-based contrast agents (GBCAs) can cause serious adverse reactions including death, coma, encephalopathy, and seizures. ELUCIREM is not approved for intrathecal use.

Nephrogenic Systemic Fibrosis

GBCAs increase the risk for NSF among patients with impaired elimination of the drugs. Avoid use of ELUCIREM in these patients unless the diagnostic information is essential and not available with non-contrasted MRI or other modalities. NSF may result in fatal or debilitating fibrosis affecting the skin, muscle and internal organs. The risk for NSF appears highest among patients with:

- **Chronic, severe kidney disease (GFR <30 mL/min/1.73 m^2), or**
- **Acute kidney injury.**

Screen patients for acute kidney injury and other conditions that may reduce renal function. For patients at risk for chronically reduced renal function (for example, age >60 years, hypertension or diabetes), estimate the glomerular filtration rate (GFR) through laboratory testing.

For patients at highest risk for NSF, do not exceed the recommended ELUCIREM dose and allow a sufficient period of time for elimination of the drug from the body prior to any re-administration.

Indications and Usage

ELUCIREM™ (gadopiclenol) injection is indicated in adult and pediatric patients, including term neonates for use with magnetic resonance imaging (MRI) to detect and visualize lesions with abnormal vascularity in the central nervous system (brain, spine, and associated tissues), and the body (head and neck, thorax, abdomen, pelvis, and musculoskeletal system).

Contraindications

Contraindicated in patients with history of hypersensitivity reactions to ELUCIREM.

Warnings and Precautions

- **Risk Associated with Intrathecal Use**: Intrathecal administration of GBCAs can cause serious adverse reactions including death, coma, encephalopathy, and seizures. The safety and effectiveness of ELUCIREM have not been established with intrathecal use. ELUCIREM is not approved for intrathecal use.
- **Nephrogenic Systemic Fibrosis:** GBCAs increase the risk for NSF among patients with impaired elimination of the drugs. Avoid use of ELUCIREM among these patients unless the diagnostic information is essential and not available with non-contrast MRI or other modalities.
- **Hypersensitivity Reactions:** With GBCAs, serious hypersensitivity reactions have occurred. Before ELUCIREM administration, assess all patients for any history of a reaction to contrast media, bronchial asthma and/or allergic disorders.

- **Gadolinium Retention:** Gadolinium is retained in the body for months or years in several organs. While clinical consequences of gadolinium retention have not been established in patients with normal renal function, certain patients might be at higher risk. These include patients requiring multiple lifetime doses, pregnant and pediatric patients, and patients with inflammatory conditions. Minimize repetitive GBCA imaging studies, particularly closely spaced studies when possible.
- **Acute Kidney Injury:** In patients with chronically reduced renal function, acute kidney injury requiring dialysis has occurred with the use of GBCAs.
- **Extravasation and Injection Site Reactions:** Injection site pain have been reported in the clinical studies with ELUCIREM. Extravasation during ELUCIREM administration may result in tissue irritation. Ensure catheter and venous patency before the injection of ELUCIREM.
- **Interference with Visualization of Lesions Visible with Non-Contrast MRI**: As with any GBCA, ELUCIREM may impair the visualization of lesions seen on non-contrast MRI.

Adverse Reactions:
In clinical trials, the most frequent adverse reactions that occurred in > 0.2% of patients who received ELUCIREM included: injection site pain, headache, nausea, injection site warmth, injection site coldness, dizziness, localized swelling and erythema.
Postmarketing Experience with use of ELUCIREM or other GBCAs: Acute pancreatitis, acute respiratory distress syndrome, pulmonary edema.

Use in Specific Populations

- **Pregnancy:** GBCAs cross the human placenta and result in fetal exposure.
- **Lactation:** There are no data on the presence of ELUCIREM in human milk, the effects on the breastfed infant, or the effects on milk production.
- **Pediatric Use:** The safety and effectiveness of ELUCIREM for use with MRI to detect and visualize lesions with abnormal vascularity have been established in pediatric patients including term neonates. The safety of ELUCIREM has not been established in preterm neonates.
- **Geriatric Use:** Elucirem is known to be substantially excreted by the kidney, and the risk of adverse reactions may be greater in patients with impaired renal function.
- **Renal Impairment:** Avoid use of GBCAs among patients with renal impairment unless the diagnostic information is essential and not available with non-contrast MRI or other modalities

For more information, see Full Prescribing Information.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

Please see the full Prescribing Information, including the Medication Guide, for additional important safety information.

Dotarem (gadoterate meglumine) injection Important Safety Information

WARNING: RISK ASSOCIATED WITH INTRATHECAL USE and NEPHROGENIC SYSTEMIC FIBROSIS (NSF)

Risk Associated with Intrathecal Use

Intrathecal administration of gadolinium-based contrast agents (GBCAs) can cause serious adverse reactions including death, coma, encephalopathy, and seizures. DOTAREM is not approved for intrathecal use.

Nephrogenic Systemic Fibrosis

GBCAs increase the risk for NSF among patients with impaired elimination of the drugs. Avoid use of DOTAREM in these patients unless the diagnostic information is essential and not available with non-contrasted MRI or other modalities. NSF may result in fatal or debilitating fibrosis affecting the skin, muscle and internal organs.

The risk for NSF appears highest among patients with:

- **Chronic, severe kidney disease (GFR < 30 mL/min/1.73m^2), or**
- **Acute kidney injury.**

Screen patients for acute kidney injury and other conditions that may reduce renal function. For patients at risk for chronically reduced renal function (e.g. age > 60 years, hypertension, diabetes), estimate the glomerular filtration rate (GFR) through laboratory testing.

For patients at highest risk for NSF, do not exceed the recommended DOTAREM dose and allow a sufficient period of time for elimination of the drug from the body prior to any re-administration.

Indications and Usage

DOTAREM® (gadoterate meglumine) injection is a prescription gadolinium-based contrast agent indicated for intravenous use with magnetic resonance imaging (MRI) in brain (intracranial), spine and associated tissues in adult and pediatric patients (including term neonates) to detect and visualize areas with disruption of the blood brain barrier (BBB) and/or abnormal vascularity.

Contraindications

History of clinically important hypersensitivity reactions to DOTAREM.

Warnings and Precautions

- **Risk Associated with Intrathecal Use:** Intrathecal administration of GBCAs can cause serious adverse reactions including death, coma, encephalopathy, and seizures. The safety and effectiveness of

DOTAREM have not been established with intrathecal use. DOTAREM is not approved for intrathecal use.

- **Nephrogenic Systemic Fibrosis:** GBCAs increase the risk for NSF among patients with impaired elimination of the drugs. Avoid use of DOTAREM among these patients unless the diagnostic information is essential and not available with non-contrast MRI or other modalities.

- **Hypersensitivity Reactions:** Anaphylactic and anaphylactoid reactions have been reported with DOTAREM, involving cardiovascular, respiratory, and/or cutaneous manifestations. Some patients experienced circulatory collapse and died.
- Before DOTAREM administration, assess all patients for any history of a reaction to contrast media, bronchial asthma and/or allergic disorders. These patients may have an increased risk for a hypersensitivity reaction to DOTAREM.
- **Gadolinium Retention:** Gadolinium is retained for months or years in several organs. The highest concentrations have been identified in the bone, followed by other organs (e.g. brain, skin, kidney, liver and spleen). While clinical consequences of gadolinium retention have not been established in patients with normal renal function, certain patients might be at higher risk. These include patients requiring multiple lifetime doses, pregnant and pediatric patients, and patients with inflammatory conditions Minimize repetitive GBCA imaging studies, particularly closely spaced studies when possible.

Dotarem (gadoterate meglumine) injection Important Safety Information

- **Acute Kidney Injury**: In patients with chronically reduced renal function, acute kidney injury requiring dialysis has occurred with the use of GBCAs. The risk of acute kidney injury may increase with increasing dose of the contrast agent; administer the lowest dose necessary for adequate imaging.
- **Extravasation and Injection Site Reactions:** Ensure catheter and venous patency before the injection of DOTAREM. Extravasation into tissues during DOTAREM administration may result in tissue irritation.

Adverse Reactions

- In clinical trials, the most frequent adverse reactions that occurred in > 0.2% of patients who received Dotarem included: nausea, headache, injection site pain, injection site coldness and rash.
- Serious adverse reactions in the Postmarketing experience have been reported with use of DOTAREM or other GBCAs. Serious adverse reactions include but are not limited to arrhythmia, cardiac arrest, respiratory arrest, pharyngeal edema, laryngospasm, bronchospasm, coma, convulsion, acute pancreatitis, acute respiratory distress syndrome, pulmonary edema.

Use in Specific Populations

- **Pregnancy:** GBCAs cross the human placenta and result in fetal exposure and gadolinium retention. Use only if imaging is essential during pregnancy and cannot be delayed.
- **Lactation:** There are no data on the presence of gadoterate in human milk, the effects on the breastfed infant, or the effects on milk production. However, published lactation data on other GBCAs indicate that 0.01 to 0.04% of the maternal gadolinium dose is present in breast milk.
- **Pediatric Use:** The safety of DOTAREM has not been established in preterm neonates. No dosage adjustment according to age is necessary in pediatric patients.

- **Geriatric Use:** use of DOTAREM in elderly patients should be cautious, reflecting the greater frequency of impaired renal function and concomitant disease or other drug therapy. No age-related dosage adjustment is necessary.
- **Renal Impairment:** No DOTAREM dosage adjustment is recommended for patients with renal impairment.

For more information, see Full Prescribing Information.

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Please see the full Prescribing Information, including the Medication Guide, for additional important safety information.

Lipiodol (ethiodized oil) injection Important Safety Information

WARNING: FOR INTRALYMPHATIC, INTRAUTERINE AND SELECTIVE HEPATIC INTRA-ARTERIAL USE ONLY

Pulmonary and cerebral embolism can result from inadvertent intravascular injection or intravasation of Lipiodol. Inject Lipiodol slowly with radiologic monitoring; do not exceed recommended dose.

Indication and Usage

LIPIODOL® (ethiodized oil) injection is a prescription oil-based radio-opaque contrast agent indicated for:

- hysterosalpingography in adults
- lymphography in adult and pediatric patients
- selective hepatic intra-arterial use for imaging tumors in adults with known hepatocellular carcinoma (HCC)

Contraindications

LIPIODOL® is contraindicated in patients with hypersensitivity to LIPIODOL®, hyperthyroidism, traumatic injuries, recent hemorrhage or bleeding.

- LIPIODOL® Hysterosalpingography is contraindicated in pregnancy, acute pelvic inflammatory disease, marked cervical erosion, endocervicitis and intrauterine bleeding, in the immediate pre- or postmenstrual phase, and within 30 days of curettage or conization or patients with known or suspected reproductive tract neoplasia due to the risk of peritoneal spread of neoplasm.
- LIPIODOL® Lymphography is contraindicated in patients with a right to left cardiac shunt, advanced pulmonary disease, tissue trauma or hemorrhage, advanced neoplastic disease with expected lymphatic obstruction, previous surgery interrupting the lymphatic system, radiation therapy to the examined area.
- LIPIODOL® Selective Hepatic Intra-arterial Injection is contraindicated in the presence of dilated bile ducts unless external biliary drainage was performed before injection.

Warnings and Precautions

- Pulmonary and cerebral embolism may occur immediately or after a few hours to days from inadvertent systemic vascular injection or intravasation of LIPIODOL®. Avoid use in patients with severely impaired lung function, cardiorespiratory failure or right-sided cardiac overload.

- Anaphylactoid and anaphylactic reactions with cardiovascular, respiratory or cutaneous manifestations, ranging from mild to severe, including death, have uncommonly occurred following LIPIODOL® Avoid use in patients with a history of sensitivity to other iodinated contrast agents, bronchial asthma or allergic disorders because of an increased risk of a hypersensitivity reaction to LIPIODOL®.
- LIPIODOL® hepatic intra-arterial administration can exacerbate chronic liver disease.
- Iodinated contrast media can affect thyroid function because of the iodide content and can cause hyperthyroidism or hypothyroidism.

Adverse Reactions

- Hysterosalpingography – Abdominal pain, foreign body reactions, exacerbation of pelvic inflammatory disease, salpingitis or pelvic peritonitis have been reported after the examination in case of latent infection.
- Lymphography – Lymphangitis, thrombophlebitis, edema or exacerbation of preexisting lymphedema, dyspnea and cough, iodism, allergic dermatitis, lipogranuloma, delayed healing at the site of incision.
- Selective Hepatic Intra-arterial Injection – Abdominal pain, nausea, and vomiting are the most common reactions; other reactions include hepatic vein thrombosis, hepatic ischemia, liver enzymes abnormalities, transitory decrease in liver function, liver decompensation and renal insufficiency. Procedural risks include vascular complications and infections.

Use in Specific Populations

- Pregnancy: The use of LIPIODOL® before or during pregnancy may interfere with thyroid function in both the pregnant woman and her fetus and may affect fetal development. Untreated hypothyroidism in pregnancy is associated with adverse perinatal outcomes, such as spontaneous abortion, preeclampsia, preterm birth, abruptio placentae, and fetal death. The use of LIPIODOL® before or during pregnancy causes iodide transfer across the placenta which may interfere with fetal thyroid function and may affect fetal development. Untreated hypothyroidism is also associated with increased fetal risk of low birth weight, fetal distress, and impaired neuropsychological development. Consider thyroid function testing during pregnancy if a woman was exposed to LIPIODOL® either before or during pregnancy, and also in infants whose mothers were exposed to LIPIODOL® before and during pregnancy or if clinically indicated.
- Pregnancy Testing: Confirm that the patient has a negative pregnancy test within 24 hours before LIPIODOL® administration for hysterosalpingography. Lactation: The use of LIPIODOL®

may increase the concentration of iodide in human milk and may interfere with the thyroid function of the breastfed infant. Consider thyroid function testing in a breastfed infant whose mother was exposed to LIPIODOL® or if clinically indicated.

- Pediatric: For lymphography use a dose of minimum of 1 mL to a maximum of 6 mL according to the anatomical area to be visualized. Do not exceed 0.25 mL/kg. Administer the smallest possible amount of LIPIODOL® according to the anatomical area to be visualized.
- Geriatric: There are no studies conducted in geriatric patients.
- Renal Impairment: Prior to an intra-arterial administration of LIPIODOL® screen all patients for renal dysfunction by obtaining history and/or laboratory tests. Consider follow-up renal function assessments for patients with a history of renal dysfunction.

For more information, see Full Prescribing Information.

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