NEWS RELEASE

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For Immediate Release:

New Online Commentary in UroToday on Fexapotide BPH Clinical Trial Results Publication in World Journal of Urology

HASBROUCK HEIGHTS, NJ (April 10, 2018) A new online published commentary about Nymox's (NASDAQ: NYMX) Fexapotide 2018 clinical trial results publication in World Journal of Urology has newly appeared today on UroToday in its "Beyond the Abstract" section, along with the abstract of the World Journal of Urology article. The additional commentary was authored by Dr. Neal Shore, lead author of the peer review World Journal article, and Dr. Ronald Tutrone, the first co-author of the article. The Beyond the Abstract commentary is entitled "Fexapotide Triflutate: Results of Long-Term Safety and Efficacy Trials of A Novel Injectable Therapy For Symptomatic Prostate Enlargement - Beyond the Abstract". The World Journal of Urology article is entitled "Fexapotide Triflutate: Results of Long-Term Safety and Efficacy Trials of A Novel Injectable Therapy For Symptomatic Prostate Enlargement" (https://doi.org/10.1007/s00345-018-2185-y).

According to the new "Beyond the Abstract" commentary, "Fexapotide triflutate (FT) is a first in class protein injectable designed for safe and relatively painless office treatment of BPH. It works by selective promotion of apoptosis in prostate glandular cells. FT is administered under transrectal ultrasound visualization using a standard 22 gauge needle. Over 1700 patients and controls have been injected with FT since the first U.S. clinical trials in 2002, and there have been no molecular related adverse events described. There is no need for a urinary catheter or anesthesia. Clinically significant improvements from baseline symptoms may occur within 1-2 weeks."

The commentary concludes, "Regarding a molecular therapy for BPH, there continues to exist an unmet need for patient treatment whereby symptoms can be effectively treated while avoiding associated sexual dysfunction, catheterization and significant anesthetic requirements. FT is in late stage development and has potential to be a fundamentally new addition to office based treatment for BPH patients."

The new commentary also features a review and illustration Figures.

The World Journal of Urology article was also co-authored by Mitchell Efros, MD, FACS (Accumed Research, Garden City, NY); Mohamed Bidair, MD (San Diego Clinical Trials, San Diego, CA); Barton Wachs, MD (Atlantic Urology Medical Group, Long Beach, CA); Susan Kalota, MD (Urological Associates of Southern Arizona, Tucson, AZ); Sheldon Freedman, MD, FACS (Freedman Urology, Las Vegas, NV); James Bailen, MD, FACS (First Urology, Louisville, KY); Richard Levin, MD, FACS (Chesapeake Urology Research Associates, Towson, MD); Stephen Richardson, MD (Jean Brown Research, Salt Lake City, UT); Jed Kaminetsky, MD, FACS (University Urology, New York, NY); Jeffrey Snyder, MD, FACS (Genitourinary Surgical Consultants, Denver, CO); Barry Shepard, MD, FACS (Urological Surgeons of Long Island, Garden City, NY); Kenneth Goldberg, MD, FACS (U T Southwestern Dept of Urology, Lewisville, TX); Alan Hay, MD, FACS (Willamette Urology, Salem, OR); Steven Gange, MD, FACS (Summit Urology Group, Salt Lake City, UT); Ivan Grunberger, MD, FACS (Brooklyn Urology, Brooklyn, NY).

Nymox's lead drug Fexapotide has been in development for over 10 years and has been tested by expert clinical trial investigative teams in over 70 distinguished clinical trial centers throughout the US, and has been found after 7 years of prospective placebo controlled double blind studies of treatment of 995 U.S. men with prostate enlargement to not only show clinically meaningful and durable relief of BPH symptoms, but also to show a major reduction in the incidence of prostate cancer, compared to placebo and compared to the known and expected normal incidence of the disease. The same clinical program has also shown in a long-term blinded placebo group study an 82-95% reduction in the number of these patients who required surgery after they received Fexapotide in

the trial, as compared to patients who did not receive Fexapotide but instead later received conventional approved BPH treatments (p<.0001).

For more information please contact info@nymox.com or 800-936-9669.

Forward Looking Statements

To the extent that statements contained in this press release are not descriptions of historical facts regarding Nymox, they are forward-looking statements reflecting the current beliefs and expectations of management made pursuant to the safe harbor provisions of the Private Securities Litigation Reform Act of 1995, including statements regarding the need for new options to treat BPH and prostate cancer, the potential of Fexapotide to treat BPH and prostate cancer and the estimated timing of further developments for Fexapotide. Such forward-looking statements involve substantial risks and uncertainties that could cause our clinical development program, future results, performance or achievements to differ significantly from those expressed or implied by the forward-looking statements. Such risks and uncertainties include, among others, the uncertainties inherent in the clinical drug development process, including the regulatory approval process, the timing of Nymox's regulatory filings, Nymox's substantial dependence on Fexapotide, Nymox's commercialization plans and efforts and other matters that could affect the availability or commercial potential of Fexapotide. Nymox undertakes no obligation to update or revise any forward looking statements. For a further description of the risks and uncertainties that could cause actual results to differ from those expressed in these forward-looking statements, as well as risks relating to the business of Nymox in general, see Nymox's current and future reports filed with the U.S. Securities and Exchange Commission, including its Annual Report on Form 20-F for the year ended December 31, 2017, and its Quarterly Reports.