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LENALIDOMIDE MARKETING AUTHORIZATION APPLICATION ACCEPTED BY EMEA FOR REVIEW

Lenalidomide is Being Evaluated by the EMEA as Oral Therapy for Treatment
for Patients with Relapsed or Refractory Multiple Myeloma

NEUCHÂTEL, SWITZERLAND – (April 7, 2006) – Celgene International Sàrl, a wholly owned subsidiary of Celgene Corporation (NASDAQ: CELG), announced that the European Medicines Agency (EMA) has accepted for review the Company’s Marketing Authorization Application (MAA) for LENALIDOMIDE – CELGENE EUROPE (lenalidomide), submitted in February 2006. The application is based upon the safety and efficacy results of two large randomized pivotal Phase III special protocol assessment trials, North American Trial MM-009 and International Trial MM-010, evaluating lenalidomide plus dexamethasone in multiple myeloma patients that have received at least one prior therapy. Based on a pre-specified interim analysis, both studies achieved the primary endpoint of time-to-disease progression (TTP) with combination therapy of lenalidomide and dexamethasone over that of placebo and dexamethasone.

Lenalidomide has been designated as an Orphan Medicinal Product in the EU for the treatment of multiple myeloma (MM) and myelodysplastic syndromes (MDS). In September 2005, an MAA seeking authorization to market lenalidomide with the trade name REVLIMID[®] as a treatment for low- to intermediate-1-risk MDS associated with a deletion 5q cytogenetic abnormality with or without additional cytogenetic abnormalities was accepted by the EMA and is currently under review.

“Celgene looks forward to working with the EMA as it begins the review process for lenalidomide as a potential treatment for patients with relapsed or refractory multiple myeloma. We appreciate the efforts of all the people who made this filing possible, and acknowledge the commitment from all participants in these multiple myeloma studies, who helped lenalidomide get to this stage in the European regulatory process,” said Graham Burton, M.D., Sr.VP, Regulatory Affairs and Pharmacovigilance for Celgene Corporation.

SAFETY NOTICE:

REVLIMID[®] (lenalidomide) Capsules 5 mg & 10 mg

WARNINGS:**1. POTENTIAL FOR HUMAN BIRTH DEFECTS.**

LENALIDOMIDE IS AN ANALOGUE OF THALIDOMIDE. THALIDOMIDE IS A KNOWN HUMAN TERATOGEN THAT CAUSES SEVERE LIFE-THREATENING HUMAN BIRTH DEFECTS. IF LENALIDOMIDE IS TAKEN DURING PREGNANCY, IT MAY CAUSE BIRTH DEFECTS OR DEATH TO AN UNBORN BABY. FEMALES SHOULD BE ADVISED TO AVOID PREGNANCY WHILE TAKING REVLIMID[®] (lenalidomide).

2. HEMATOLOGICAL TOXICITY**(NEUTROPENIA AND THROMBOCYTOPENIA)**

REVLIMID[®] (lenalidomide) IS ASSOCIATED WITH SIGNIFICANT NEUTROPENIA AND THROMBOCYTOPENIA. PATIENTS SHOULD HAVE THEIR CBC CHECKED WEEKLY FOR THE FIRST 8 WEEKS OF REVLIMID[®] (lenalidomide) TREATMENT AND AT LEAST MONTHLY THEREAFTER TO MONITOR FOR CYTOPENIAS. MOST DELETION 5q MDS PATIENTS STUDIED REQUIRED A DOSE ADJUSTMENT FOR NEUTROPENIA AND/OR THROMBOCYTOPENIA.

3. DEEP VEIN THROMBOSIS AND PULMONARY EMBOLISM

REVLIMID[®] (lenalidomide) HAS DEMONSTRATED SIGNIFICANT RISK OF DEEP VEIN THROMBOSIS AND PULMONARY EMBOLISM IN SOME PATIENTS WITH CERTAIN MEDICAL CONDITIONS.

IMPORTANT SAFETY INFORMATION

Hypersensitivity: REVLIMID[®] (lenalidomide) is contraindicated in any patients who have demonstrated hypersensitivity to the drug or its components.

Other adverse events: Other most frequently reported adverse events were diarrhea, pruritis, rash, fatigue, constipation, nausea, nasopharyngitis, arthralgia, pyrexia, back pain, peripheral edema, cough, dizziness, headache, muscle cramp, dyspnea, and pharyngitis. REVLIMID[®] (lenalidomide) is substantially excreted by the kidney, so the risk of toxic reactions may be greater in patients with impaired renal function.

About REVLIMID[®]

REVLIMID, an IMiDs[®] drug, is a member of our proprietary type of novel immunomodulatory compounds. Celgene continues to evaluate REVLIMID in a broad range of hematology and oncology conditions. The IMiDs[®] pipeline, including REVLIMID, is covered by a comprehensive intellectual property estate of U.S. and foreign issued and pending patent applications including composition-of-matter and use patents.

REVLIMID is approved by the Food and Drug Administration (FDA) for treatment of patients with transfusion-dependent anemia due to low- or intermediate-1-risk myelodysplastic syndromes (MDS) associated with a deletion 5q cytogenetic abnormality with or without

additional cytogenetic abnormalities. REVLIMID is not approved by the EMEA or any other regulatory agencies as a treatment for any other indication and is currently being evaluated in clinical trials for efficacy and safety for future regulatory applications.

About Multiple Myeloma

Multiple myeloma (also known as myeloma or plasma cell myeloma) is a cancer of the blood in which malignant plasma cells are overproduced in the bone marrow. Plasma cells are white blood cells that help produce antibodies called immunoglobulins that fight infection and disease. However, most patients with multiple myeloma have cells that produce a form of immunoglobulin called paraprotein (or M protein) that does not benefit the body. In addition, the malignant plasma cells replace normal plasma cells and other white blood cells important to the immune system. Multiple myeloma cells can also attach to other tissues of the body, such as bone, and produce tumors. The cause of the disease remains unknown. In the year 2005, there were approximately 200,000 people worldwide suffering from multiple myeloma. An estimated 74,000 new cases of multiple myeloma are expected in 2006. The estimated number of deaths from multiple myeloma expected in 2006 is approximately 60,000 worldwide.

About Myelodysplastic Syndromes

Myelodysplastic syndromes (MDS) are a group of hematologic malignancies that affect approximately 300,000 people worldwide. Myelodysplastic syndromes occur when blood cells remain in an immature or “blast” stage within the bone marrow and never develop into mature cells capable of performing their necessary functions. Eventually, the bone marrow may be filled with blast cells suppressing normal cell development. According to the American Cancer Society, 10,000 to 20,000 new cases of MDS are diagnosed each year in the United States, with mean survival rates ranging from approximately six months to six years for the different classifications of MDS. MDS patients must often rely on blood transfusions to manage symptoms of anemia and fatigue and may develop life-threatening iron overload and/or toxicity from frequent transfusions, thus underscoring the critical need for new therapies targeting the cause of the condition rather than simply managing its symptoms.

About Deletion 5q Chromosomal Abnormality

Chromosomal (cytogenetic) abnormalities are detected in more than half of patients with myelodysplastic syndrome (MDS), and involve a deletion in all or part of one or more specific chromosomes. The most common cytogenetic abnormalities in MDS are deletions in the long arm of chromosomes 5, 7, and 20. Another common abnormality is an extra copy of chromosome 8. A deletion involving the 5q chromosome may be involved in 20 percent to 30 percent of all MDS patients. The World Health Organization has also recently identified a unique subset of MDS patients with a “5q- Syndrome” where the only chromosomal abnormality is a specific portion of the 5q chromosome.

About EMEA

The European Medicines Agency (EMA) is the European regulatory body responsible for the authorization and supervision of medicinal products for human and veterinary use in member European countries, approximately 15 to date. The agency has four key objectives: (1) To protect public health by mobilizing the best scientific resources existing within the European Union; (2) To promote health care through the effective regulation of new pharmaceuticals and better

information for users and health professionals; (3) To facilitate quicker access and the free circulation of pharmaceuticals within the European single market; and (4) to support the European pharmaceutical research and development industry by developing efficient, effective and responsive operating procedures.

About Celgene

Celgene Corporation, headquartered in Summit, New Jersey, is an integrated global pharmaceutical company engaged primarily in the discovery, development and commercialization of innovative therapies for the treatment of cancer and inflammatory diseases through gene and protein regulation. For more information, please visit the Company's website at www.celgene.com.

Celgene International Sàrl, located in Neuchâtel, Switzerland, is a wholly owned subsidiary and international headquarters of Celgene Corporation.

This release contains forward-looking statements which are subject to known and unknown risks, delays, uncertainties and other factors not under the Company's control, which may cause actual results, performance or achievements of the Company to be materially different from the results, performance or other expectations expressed or implied by these forward-looking statements. These factors include results of current or pending research and development activities, actions by the FDA and other regulatory authorities, and other factors described in the Company's filings with the Securities and Exchange Commission such as our 10K, 10Q and 8K reports.

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