

John P. Donoghue Honored for Cyberkinetics' Groundbreaking BrainGate(TM) Brain-Computer Interface at the 'Popular Mechanics 2005 Breakthrough Awards
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Cyberkinetics' Founder Selected Based On Potential of Innovative BrainGate(TM) System to Improve Lives of Motor-Impaired People

FOXBOROUGH, Mass.--(BUSINESS WIRE)--Sept. 30, 2005-- Cyberkinetics Neurotechnology Systems, Inc. (OTCBB: [CYKN](#); Cyberkinetics) announced today that John P. Donoghue, Ph.D., the Company's Chief Scientific Officer and Professor and Chairman of the Department of Neuroscience at Brown University, was named as one of ten individuals and teams honored at the first annual 'Popular Mechanics Breakthrough Awards' ceremony held last night in New York City. Dr. Donoghue was recognized, along with others, for innovations in diverse fields such as robotics, medicine, aeronautics and chemistry. Popular Mechanics is a well-respected, monthly men's magazine focused on technology innovation.

Dr. Donoghue, a founder of Cyberkinetics, was selected for the award based on his work in the field of brain-computer interfaces, including development of the BrainGate(TM) System and the potential, practical benefits that may be derived from his innovative work. Cyberkinetics' BrainGate(TM) System is being designed to give severely paralyzed individuals, as well as individuals with motor impairment from a variety of causes, a long-term, direct brain-computer interface for the purpose of communication and control of a computer, assistive devices, and, ultimately, their own limbs.

"The Breakthrough Awards are about recognizing brilliant work that can also improve people's lives and Dr. Donoghue's BrainGate(TM) combines the two perfectly," said Jim Meigs, editor-in-chief, Popular Mechanics. "The idea of brain-computer interface sounds like the stuff of science fiction. But previously announced results indicate that a person with severe paralysis can control a computer cursor in order to operate external devices, as well as to operate a prosthetic hand. And, most importantly, it is our opinion that there is promise it may transform the day-to-day lives of the victims of paralysis and disease and give them a measure of autonomy they'd never otherwise have."

"John has led the pioneering work to change the lives of people who are paralyzed, and we are very pleased that the panel and editors have recognized him for that effort," added Timothy R. Surgenor, President and Chief Executive Officer of Cyberkinetics Neurotechnology Systems, Inc. "Our goal for this ground-breaking technology is, ultimately, to enable paralyzed people to move their own limbs and to communicate simply by thinking."

In selecting candidates and winners of the 2005 Breakthrough Awards, editors of Popular Mechanics canvassed a broad, diverse group of experts and academics that recommended a list of nominees for the award. In addition, the magazine assembled a 10-person advisory panel comprised of outstanding scientists, engineers, authors and innovators

from a variety of fields. Panel members included Dr. William A. Wulf, President of the National Academy of Engineering, and Donald Keck of the National Inventors Hall of Fame. The advisory panel and the editorial board of Popular Mechanics voted on the final winners. A complete report of the Breakthrough Awards will be included in the November 2005 issue of Popular Mechanics that will be published on October 11, 2005.

Leigh R. Hochberg, M.D., Ph.D., accepted the Award for Dr. Donoghue. He is the Principal Investigator for Cyberkinetics' trial of the BrainGate(TM) System for people with ALS (amyotrophic lateral sclerosis or Lou Gehrig's disease) currently underway at Massachusetts General Hospital in Boston. Dr. Hochberg is an Instructor of Neurology at Harvard Medical School, a member of the Neurology staff at Massachusetts General Hospital and Brigham and Women's Hospital, and a Consultant in Neurology at The Spaulding Rehabilitation Hospital.

About the BrainGate(TM) System

The BrainGate(TM) Neural Interface System is a proprietary, investigational brain-computer interface (BCI) that consists of an internal sensor to detect brain cell activity and external processors that convert these brain signals into a computer-mediated output under the person's own control. The sensor is a tiny silicon chip about the size of a baby aspirin with one hundred electrodes, each thinner than a human hair, that can detect the electrical activity of neurons. The sensor is implanted on the surface of the area of the brain responsible for movement, the motor cortex. A small wire connects the sensor to a pedestal that is placed on the skull, extending through the scalp. An external cable connects the pedestal to a cart containing computers, signal processors and monitors that enable the study operators to determine how well study participants can control devices driven by their neural output - that is, by thought alone. The ultimate goal of the BrainGate(TM) System development program is to create a safe, effective and unobtrusive universal operating system that will enable those with motor impairments resulting from a variety of causes to quickly and reliably control a wide range of devices, including computers, assistive technologies and medical devices, simply by using their thoughts.

Cyberkinetics is currently conducting two pilot clinical trials of the BrainGate(TM) System. A pilot clinical study of the BrainGate(TM) System for those with severe paralysis resulting from spinal cord injury (SCI), muscular dystrophy, or with "locked-in" syndrome (tetraplegia and the inability to speak) secondary to stroke is underway at three clinical sites. Enrollment for the BrainGate(TM) SCI study is open through the Spaulding Rehabilitation Hospital, the Rehabilitation Institute of Chicago and the Sargent Rehabilitation Center. To date, two participants have received BrainGate(TM) implants in this study, one of whom recently completed one year in the trial. Previously published results from this study of the BrainGate(TM) System have demonstrated that a person with severe paralysis can control a computer cursor in order to operate external devices, as well as to operate a prosthetic hand.

In August 2005, Cyberkinetics received regulatory clearance to conduct a pilot clinical trial for those with progressive motor neuron diseases, including ALS. Enrollment for the ALS study is open through the Massachusetts General Hospital (MGH) in Boston.

About Cyberkinetics Neurotechnology Systems, Inc.

Cyberkinetics Neurotechnology Systems, a leader in brain interface technology, is developing products to treat nervous system diseases and disorders by bringing together advances in neuroscience, computer science and engineering. Cyberkinetics' products are based on over ten years of technology development and cutting-edge neuroscience research at leading academic institutions such as Brown University, the Massachusetts Institute of Technology, Emory University, and the University of Utah.

Cyberkinetics has received FDA clearance to market the NeuroPort(TM) System, a neural monitor designed for acute inpatient applications and labeled for temporary (less than 30 days) recording and monitoring of brain electrical activity. The NeuroPort(TM) System can contribute to the diagnosis and treatment of neurological conditions in patients who have undergone a craniotomy by providing neurologists and neurosurgeons a new resource to detect, transmit and analyze neural activity.

More information is available at www.cyberkineticsinc.com. For specific information about BrainGate(TM) clinical trials please send an email to braingateinfo@cktrial.com.

Forward Looking Safe Harbor Statement

This announcement contains forward-looking statements, including statements about Cyberkinetics' product development plans and progress, potential development of proprietary inventions and benefits that may be realized by certain research programs. These statements are made pursuant to the safe harbor provisions of the Private Securities Litigation Reform Act of 1995, and can be identified by the use of forward-looking terminology such as "may," "will," "believe," "expect," "anticipate" or other comparable terminology. Forward-looking statements involve risks and uncertainties that could cause actual results to differ materially from those projected in forward-looking statements and reported results shall not be considered an indication of our future performance. Factors that might cause or contribute to such differences include our limited operating history; our lack of profits from operations; our ability to successfully develop and commercialize our proposed products; a lengthy approval process and the uncertainty of FDA and other governmental regulatory requirements; clinical trials may fail to demonstrate the safety and effectiveness of our products; the degree and nature of our competition; our ability to employ and retain qualified employees; compliance with recent legislation regarding corporate governance, including the Sarbanes-Oxley Act of 2002; as well as those risks more fully discussed in our public filings with the Securities and Exchange Commission, all of which are difficult to predict and some of which are beyond our control.

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