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**NEW STUDY PUBLISHED IN JOURNAL *UROLOGY* DEMONSTRATES RAPID,  
HIGH RATE OF RETURN TO SEXUAL FUNCTION AFTER CRYOABLATION**

*Minimally-Invasive Therapy, Post-Treatment Rehabilitation Regimen Keys to Regaining Potency*

IRVINE, CA (March 15, 2007) . . . Endocare, Inc. (OTCBB: ENDO), an innovative medical device company focused on the development of minimally invasive technologies for tissue and tumor ablation, announced today that a new study published in the February edition of the journal *Urology* demonstrates that cryoablation is not only an effective primary treatment for localized prostate cancer but that post-treatment sexual function can be rapidly and substantially increased if accompanied by a penile rehabilitation regimen. All 416 patients who took part in the study chose cryoablation after being offered several other options including radical prostatectomy and radiation therapy.

The study, led by David S. Ellis, M.D., was conducted at United States Medical Development Hospital and Arlington Memorial Hospital, both in Arlington, Texas, and Baylor University Medical Center in Dallas. The mean patient age was 69.4 years and mean follow-up of the entire patient group was 20.4 months. All the patients who were potent before the treatment were strongly encouraged to begin the penile rehabilitation regimen six weeks after the cryoablation therapy.

Dr. Ellis noted that the study directly links potency rates with a rehabilitation regimen after the cryoablation therapy. A total of 29.1 percent of the patients who were potent before cryoablation and underwent penile rehabilitation after the treatment regained potency in one year and 51.3 percent were potent four years later.

“This study demonstrated a substantially greater return to potency than in any series published to date,” Dr. Ellis said. “We believe the reason for this rapid and high rate of return to sexual function was threefold: First, cryoablation is a minimally invasive therapy; second, the patients were told that there was a good chance that they would regain potency, which created a hopeful atmosphere; and finally, the regular rehabilitation program after cryoablation therapy effectively expedited the return to erectile function.”

Dr. Ellis also noted that studies of men who have undergone focal cryoablation, a procedure in which only the diseased portion of the prostate is frozen, demonstrated post-treatment potency rates between 78 and 85 percent.

All the patients were treated with an Endocare Cryocare<sup>®</sup> System, which non-surgically freezes and destroys the cancerous tumors in the prostate gland.

“It is important for patients to understand that the treatment of prostate cancer, particularly when they choose a minimally invasive therapy such as cryoablation, does not necessarily mean the end of their sexual potency, even when the entire gland is aggressively treated,” said Endocare President, Chairman and CEO Craig T. Davenport. “This study demonstrates that cryoablation will effectively destroy the cancer in the prostate but also, if patients take charge of their post-treatment therapy and take on a rehabilitation regimen, there is a good chance that they may regain potency.”

**MORE-MORE-MORE**

**About Endocare**

Endocare, Inc. ([www.endocare.com](http://www.endocare.com)) is an innovative medical device company focused on the development of minimally invasive technologies for tissue and tumor ablation. Endocare has initially concentrated on developing technologies for the treatment of prostate cancer and believes that its proprietary technologies have broad applications across a number of markets, including the ablation of tumors in the kidney, lung and liver.

*Statements contained in this release that are not historical facts are forward-looking statements that involve risks and uncertainties. Among the important factors that could cause actual results to differ materially from those in the forward-looking statements include, but are not limited to, those discussed in "Risk Factors" in the Company's Forms 10-K, Forms 10-Q and other filings with the Securities and Exchange Commission. Such risk factors include, but are not limited to, the following items: we have a limited operating history with significant losses and expect losses to continue for the foreseeable future; we may require additional financing to sustain our operations and without it we may not be able to continue operations; we expect that, despite our financing arrangements with Fusion Capital and Silicon Valley Bank, our independent auditor will issue a qualified opinion, to the effect that there is a substantial doubt about our ability to continue as a going concern; the sale of our common stock to Fusion Capital may cause dilution and the sale of the shares of common stock acquired by Fusion Capital could cause the price of our common stock to decline; our business may be materially and adversely impacted by the loss of our largest customer or the reduction, delay or cancellation of orders from this customer or if this customer delays payment or fails to make payment; we may be required to make state and local tax payments that exceed our settlement estimates; we may incur significant expenses in the future as a result of our obligation to pay legal fees for and otherwise indemnify former officers and former directors in connection with the ongoing governmental proceedings involving them; uncertainty relating to third party reimbursement; uncertainty regarding the ability to convince health care professionals and third party payers of the medical and economic benefits of our products; the risk that intense competition and rapid technological and industry change may make it more difficult for us to achieve significant market penetration; and uncertainty regarding the ability to secure and protect intellectual property rights relating to the Company's technology. The actual results that the Company achieves may differ materially from any forward-looking statements due to such risks and uncertainties. The Company undertakes no obligation to revise, or update publicly, any forward-looking statements for any reason.*

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