



## **Vantia Therapeutics progresses clinical development of its lead drug candidates**

### ***VA106483 starts Phase II and VA111913 enters clinic, VA118020 in preclinical development***

**Southampton, UK, 03 November 2008** – Vantia Therapeutics, a UK-based R&D company focusing on novel first-in-class therapies for unmet medical needs, has started Phase II trials of its lead product, VA106483 for the treatment of nocturia. This is an increasingly prevalent condition in the ageing population, commonly associated with benign prostatic hypertrophy (BPH). In addition, VA111913 for the treatment of dysmenorrhoea has entered Phase I, with the kallikrein inhibitor VA118020 now in preclinical development. This progress has added significant value to the company's pipeline since its spin-out from Ferring Pharmaceuticals in March 2008.

Dosing has started in the UK Phase IIa trial of VA106483, a vasopressin agonist, which will involve 27 patients. In the dose-ranging study, which is expected to report results in the first half of 2009, the men will be randomised to one of three doses of VA106483 or placebo. In previous studies the product has been shown to be well tolerated in adults and children, with an antidiuretic effect. While nocturia in BPH is believed to represent a potential market in excess of \$1bn, VA106483's potential in follow-on indications such as overactive bladder and general nocturia could add significant extra value.

The Phase I trial for VA111913, Vantia's second clinical candidate, has started following approval of the UK clinical trial application in September. The study will involve 121 volunteers and will investigate single as well as multiple ascending doses, with the trial data expected to be available in H1 2009. VA111913 is a vasopressin antagonist for the treatment of dysmenorrhoea (painful menstruation), believed to represent a multibillion dollar market for which there is currently no targeted therapy.

The kallikrein inhibitor candidate VA118020 has moved into preclinical development and is expected to begin clinical trials in the second half of next year with an initial focus on respiratory diseases such as allergic rhinitis, asthma and COPD. Other candidates from Vantia's kallikrein platform are believed to have additional potential in other inflammatory disease such as ulcerative colitis and Crohn's. Kallikreins are a group of serine proteases which are thought to play a role in a variety of inflammatory conditions and cancer.

Dr Jim Phillips, CEO of Vantia Therapeutics, said 'We are delighted to have made such significant pipeline progress with our internally generated candidates since inception only a few months ago. Development of our lead products is on track and we look forward to being able to provide updates on these and our preclinical pipeline in due course. These assets are already attracting the interest of possible pharmaceutical partners'.

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**Notes to Editors**

**About Vantia Therapeutics:**

Vantia Therapeutics is a UK-based R&D company focused on novel first-in-class therapies for recognised markets which are underserved by current therapies. Formed in 2008 as a spin-out of Ferring Research Ltd's small molecule R&D, it has two clinical phase products, VA106483 for the treatment of nocturia in BPH patients and VA111913 for the treatment of dysmenorrhoea, as well as preclinical and discovery programmes based on protease inhibition with potential in the areas of oncology and inflammation. The company's investors include MVM Life Science Partners, SV Life Sciences and Novo A/S and it expects to have by the end of the year more than 20 employees, most of whom have moved from Ferring Research Ltd as part of the spin-out. Vantia Therapeutics is situated on Southampton Science Park, UK, where it occupies 10,000 sq ft of chemistry and biology facilities. For further information, please go to [www.vantiatherapeutics.com](http://www.vantiatherapeutics.com).

**About nocturia:**

While benign prostatic hypertrophy (BPH) and nocturnal polyuria (defined as two or more voids/night) are independent conditions, around 70% BPH patients also have nocturnal polyuria, and the condition increases markedly with age. Nocturia is believed to be inadequately treated by the standard BPH therapies of alpha blockers and 5-alpha reductase inhibitors, with over 80% of those on alpha blockers still complaining of nocturnal polyuria and only 5 experiencing normal night-time output. With estimates putting the number of BPH/nocturia sufferers at 55 million in the seven largest markets world wide, and only 10% of these believed to be receiving any kind of treatment, it is a clear area of unmet medical need estimated to be worth in excess of \$500m. The hormone vasopressin is involved in the regulation of the body's water content and as a vasopressin agonist VA106483 has been shown to act as an anti-diuretic.

**About dysmenorrhoea:**

Current treatments for dysmenorrhoea include over-the-counter (OTC) painkillers such as the NSAIDs naproxen and ibuprofen. Similar approaches are also taken by GPs and obstetrician/gynaecologists, as well as the off-label use of oral contraceptives. Vasopressin levels are raised in women with dysmenorrhoea, with an abundance of V1a receptors at in the uterus, and it is believed that as a vasopressin antagonist VA111913 decreases abnormal smooth muscle contractility. There is the potential for VA111913 to be used both as a treatment for dysmenorrhoea and for prevention.