

## **Vantia Therapeutics Appoints Andrew Crockett as Vice President Business Development**

**Southampton, UK, 26th August 2009** – Vantia Therapeutics, a company developing novel small molecule drugs targeting large underserved medical markets, today announces the appointment of Andrew Crockett as Vice President Business Development.

Andrew joins Vantia from the US specialty pharma company ZARS Pharma where he was most recently Vice President Business Development. During his career he has identified, negotiated and executed strategic corporate transactions on a global basis, including merger and acquisitions, national and international product licences, IP and technology licences, and R&D alliances.

Andrew has studied at Harvard Business School and also holds an MBA from The Wharton School, University of Pennsylvania, with a major in Finance. He has served as an advisor to various investment groups for the medical device and pharmaceutical industries and is an advisory board member for US-based start ups.

Dr Jim Phillips, CEO of Vantia Therapeutics, said: “Andrew has broad business development experience and an in-depth knowledge of the global pharmaceutical and biotechnology markets, particularly North America. I look forward to working closely with him to secure partnerships which deliver value to Vantia and provide the platform for successful commercialization of our novel small molecule pipeline.”

Andrew Crockett, VP Business Development, said: “Vantia’s pipeline is advancing rapidly and, in VA111913 for dysmenorrhoea and VA106483 for nocturia, has two truly novel clinical stage product candidates for conditions that together affect many millions of people worldwide and are currently poorly treated. As such they offer potential partners an exceptional opportunity to successfully address very large market opportunities.”

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**Notes to Editors**

**About Vantia Therapeutics:**

Vantia Therapeutics is an emerging pharmaceutical company developing novel, small molecule drugs targeting large, underserved medical markets. Its rapidly advancing clinical pipeline includes VA106483 for nocturia in BPH patients and VA111913 for dysmenorrhoea, product candidates which directly target conditions that together affect many millions of people, are poorly treated and represent billion dollar markets. Vantia was spun out from Ferring Research Ltd in 2008 and its pipeline is driven by the proven small molecule drug discovery and development capabilities of that unit and Vantia's experienced management team. Vantia's strategy is to develop candidates to Phase II proof-of-concept and then commercialise through partnerships. The Company is well-funded and backed by specialist life science investors MVM Life Science Partners, SV Life Sciences and Novo A/S.

[www.vantiatherapeutics.com](http://www.vantiatherapeutics.com).

**About VA106483 and nocturia:**

VA106483 is a novel small molecule drug candidate in Phase II trials to treat nocturia, a common condition that causes sufferers to get up frequently during the night in order to urinate, thus interrupting sleep. VA106483 stimulates kidney function by binding to vasopressin 2 receptors in the kidney and mimicking the action of vasopressin, a hormone involved in regulating water retention. Clinical data to date indicate that VA106483 is well tolerated and efficacious as a potent anti-diuretic that increases urine concentration and reduces output.

Vantia's indication for VA106483 is in nocturia. Nocturia is often associated with benign prostatic hyperplasia (BPH), where it is estimated to affect up to 70% of BPH patients. Positive results from a Phase IIa clinical trial showed that oral VA106483 was successful in producing a predictable and sustained anti-diuretic effect in patients.

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 and estimated to be worth in excess of \$1000m per annum. This market opportunity may also be extended to include nocturia resulting from other conditions such as overactive bladder.

**About VA111913 and dysmenorrhoea:**

VA111913 is an oral small molecule drug candidate in Phase I clinical development for prevention and treatment of dysmenorrhoea, a condition characterized by abnormal contractions of the uterus during menstruation causing severe pain. Dysmenorrhoea is associated with raised vasopressin levels. VA111913 acts by blocking vasopressin 1a receptors in smooth muscle in the uterus wall.. VA111913 has been demonstrated in preclinical trials to normalise smooth muscle contraction in response to vasopressin, thereby offering the potential for it to be the first drug that directly targets the cause of this condition in the uterus.

A Phase I trial with VA111913 has been completed and a Phase II proof of concept study is starting in H2 2009. This is due to complete by H2 2010.

Dysmenorrhoea affects a large number of women for whom there are currently no targeted therapies; treatments that are in common use however include over-the-counter painkillers (e.g. naproxen or ibuprofen) or oral contraceptives used 'off-label'. It is estimated that the market opportunity for a targeted drug for the prophylaxis and treatment of dysmenorrhoea is at least \$1 billion per year.