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## Emerging Company Profile

### Vantia: New irons in the fire

By Mike Flanagan  
Senior Writer

**Vantia Therapeutics Ltd.** spun out of **Ferring Pharmaceuticals A/S** with a portfolio of small molecules that includes a pair of vasopressin receptor modulators with disease-modifying potential. The company believes its lead program, a vasopressin 2 agonist in Phase II testing to treat nocturia, a urinary disorder, will complement drugs marketed for benign prostatic hyperplasia.

A second compound, VAI11913, could replace hormone therapies for dysmenorrhea, a condition characterized by severe uterine pain during menstruation.

CEO Jim Phillips said Vantia was born out of an R&D review at Ferring, in which the company decided to focus on peptides and biologics, leaving the small molecules up for grabs.

In March, a syndicate of investors led by MVM and joined by SV Life Sciences and Novo A/S provided the newco with £19 million (\$38.4 million). Ferring retains a minority stake.

"The things that excited me about this company were the strong research capabilities and huge library of characterized and targeted small molecules against an array of hormones and serine proteases, which means we have the potential to partner our lead programs and still have plenty more to bring forward," said Phillips, who was CEO at Talisker Pharmaceuticals Ltd., a neurology-play acquired by **EUSA Pharma Inc.** in 2006.

Vantia's lead compound, VAI06483 (formerly VT483), is an oral vasopressin 2 (V2) receptor agonist that works directly on the kidneys, where the receptors are concentrated, causing a decrease in urine production. Earlier this month, the company started a U.K. Phase IIa trial to treat nocturia, which is the frequent need to urinate often associ-

#### Vantia Therapeutics Ltd.

Southampton, U.K.

Technology: Small molecule modulators of hormones and proteases

Disease focus: Genitourinary, inflammation

Clinical status: Phase II

Founded: 2007 as a spinout of Ferring Pharmaceuticals A/S

University collaborators: University of Southampton

Corporate partners: None

Number of employees: 20

Funds raised: £19 million (\$38.4 million)

Investors: MVM Life Science Partners, SV Life Sciences and Novo A/S

CEO: Jim Phillips

Patents: Eight issued, including six covering vasopressin receptor modulation and two covering kallikrein modulation

ated with BPH.

Drugs on the market to treat BPH include Avodart dutasteride, a 5-alpha reductase inhibitor from **GlaxoSmithKline plc**, and Flomax tamsulosin, an adrenergic receptor alpha 1 antagonist from **Astellas Pharma Inc.** and **Boehringer Ingelheim GmbH**.

However, according to Phillips, these drugs only work to shrink the prostate and do not provide relief for many patients. "Our agent targets the kidneys to relieve the primary symptoms of nocturia, which occurs in nine out of 10 men with BPH, and is designed to be complementary to the current BPH drugs," he said.

VAI06483 did not show safety signals in adults or children in Phase I testing, and a clear pharmacodynamic effect emerged. The

company is hoping to settle on a once-daily dosing regimen in its ongoing Phase IIa trial, with data expected at the end of next quarter, in time to begin a three-month Phase IIb trial in 2H09.

Vantia also intends to evaluate VAI06483 in overactive bladder (OAB) and nocturia in children.

Another V2 agonist that had moved into Phase I testing for nocturia, SOU-003 from **Sosei Group Corp.**, was recently discontinued for undisclosed reasons. Phillips said that left Vantia with a first-mover advantage in the space.

The company has little interest in commercializing VAI06483 itself, which would require calling on primary care doctors, and instead plans to find a pharma partner before moving into Phase III.

Next in line is VAI11913 (VT913), a vasopressin 1a (V1a) receptor antagonist which began Phase I testing this month for dysmenorrhea. Phillips said unlike NSAIDs or off-label oral contraceptives, which don't act directly on the womb, VAI11913 blocks the V1a receptors in the smooth muscle cells lining the uterus that are responsible for painful contractions.

There is some precedent for the approach. At least one other V1a receptor antagonist is in the clinic: SRX251 from **Azevan Pharmaceuticals Inc.**, which completed a Phase I trial in dysmenorrhea earlier this year and is scheduled to enter a Phase II trial this year.

**sanofi-aventis Group** also had moved its reclovaptan (SR 49059) V1a inhibitor into Phase II testing in dysmenorrhea. The compound "showed good efficacy but seems to have had some liver toxicity issues" that caused the pharma to shelve it, according to Phillips.

He does not expect to have the same problem: "The chemistry of our agent is far

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removed from the sanofi compound, and it has shown a clean profile in preclinical testing and high bioavailability," said Phillips.

Vantia plans to move into a proof-of-concept Phase IIa trial next year before finding a partner for Phase III testing and commercialization.

In addition to its two lead programs, which were in or near the clinic when Vantia spun out of Ferring, the company also has advanced a portfolio of small molecule inhibitors of kallikreins, a family of serine proteases involved in inflammatory responses.

The most advanced of these is VAI 18020, a first-in-class tissue kallikrein (KLK1) inhibitor in preclinical testing for asthma and rhinitis. Vantia hopes to be ready to begin Phase I testing by YE09.

The £19 million raised earlier this year should provide the company with two years of runway, said Phillips.

**COMPANIES AND INSTITUTIONS MENTIONED**

**Astellas Pharma Inc.** (Tokyo:4503), Tokyo, Japan

**Azevan Pharmaceuticals Inc.**, Bethlehem, Pa.

**Boehringer Ingelheim GmbH**, Ingelheim, Germany

**EUSA Pharma Inc.**, King of Prussia, Pa.

**Ferring Pharmaceuticals A/S**, Copenhagen, Denmark

**GlaxoSmithKline plc** (LSE:GSK; NYSE:GSK), London, U.K.

**Sosei Group Corp.** (Tokyo:4565), Tokyo, Japan

**Vantia Therapeutics Ltd.**, Southampton, U.K.

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