Novel Therapeutic Agent for Allergic Disorders Discovered in Collaboration with AstraZeneca Progresses to Clinical Development Stage

Dainippon Sumitomo Pharma (Headquarter: Osaka, President: Kenjiro Miyatake) announces the commencement of clinical development of a novel therapeutic agent for allergic disorders in collaboration with AstraZeneca (AZ, Headquarter: England, CEO: David Brennan).

Inflammation/allergy is one of the DSP’s focused research areas and we have been undertaking drug discovery research for therapeutic agent with a novel mechanism of action targeting for allergic disorders. From the discovery research, we have identified series of promising compounds. With this as a turning point, we entered into a research collaboration with AZ in 2004, on novel therapeutic agents for allergic disorders, and the two companies have succeeded in finding a drug candidate as an outcome of the collaboration.

This drug candidate is an immune response modifier with agonistic activity against Toll-like receptor 7 (TLR7). It is expected to become a therapeutic agent providing long-term disease remission in allergic disorders such as bronchial asthma and allergic rhinitis.

Under the development and marketing agreement between the two companies, DSP will retain development and commercialization right for the products arising from the collaboration in Japan, China, South Korea and Taiwan, and option right to co-promote in the US and major European countries. AZ will retain development and commercialization right worldwide excluding the four countries. After the launch of the product, AZ will pay running royalties to DSP on the product sales.

AZ has started phase I clinical studies in Europe, and DSP is preparing for phase I clinical studies in Japan. The two companies will continue development collaboratively and rapidly. We hope to successfully develop an innovative therapeutic agent that can relieve the patients, suffering from asthma or allergic rhinitis, of long-term medication and enable them to enjoy a normal life.