

May 21, 2018

SEIKAGAKU CORPORATION
(Securities Code: TSE 4548)

Seikagaku Initiates a Clinical Trial for SI-449, an Adhesion Barrier

Seikagaku Corporation (Tokyo, Japan; “Seikagaku”) announced today that it will initiate a clinical trial (pilot study) in Japan for SI-449, an adhesion barrier for use in surgery.

SI-449 is a powdered adhesion barrier whose main ingredient is cross-linked chondroitin sulfate developed using Seikagaku’s own glycosaminoglycan¹ cross-linking technology. SI-449, which has the property of absorbing moisture and swelling, is expected to prevent or mitigate post-operative adhesion formation² by forming a barrier between the surgical wound site and surrounding tissues after application.

SI-449 consists of substances naturally present in the body, including the cross-linking agent, and is thought to be highly biocompatible. Since SI-449 is a powdered formulation, it adheres well to uneven tissue surfaces, and is thought to offer excellent utility in laparoscopic surgery, a common surgical procedure.

SI-449 is being developed as a Class IV specially controlled medical device, and the objective of the pilot study in Japan is to exploratively examine utility and safety. Seikagaku is considering introducing SI-449 not only in Japan, but in global.

Seikagaku engages in the research and development of new products, focusing on the field of glycoscience. With SI-449, Seikagaku aims to reduce the risk of complications arising from post-operative adhesion formation and contribute to a healthy and fulfilling quality of life for patients.

There is no change to the forecast of consolidated financial results for the fiscal year ending March 31, 2019 because of this matter.

Reference Information

*1 Glycosaminoglycans (GAGs) are a major component of glycoconjugates. Chondroitin sulfate and hyaluronic acid are GAGs.

*2 Post-operative adhesion formation is a phenomenon by which a surgical wound site and surrounding tissues that are normally separated adhere together in the healing process of sites where tissue loss or damage has occurred in surgery (open abdominal surgery, laparoscopic surgery, etc.). The incidence of post-operative adhesions is 50% to 90% when no treatment is performed, and adhesions are a major cause of postsurgical complications (intestinal blockage, chronic abdominal pain, infertility, etc.) in abdominal or gynecological surgery. Sheet or gel products are currently used as adhesion barriers.

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