

SynAct Pharma strengthens its patent portfolio for AP1189 following an Intention to Grant from the European Patent Office

SynAct Pharma AB (“SynAct”) today announced that the European Patent Office (EPO) has issued an Intention to Grant for the company’s European patent application covering AP1189 in methods of treating arthritic diseases.

SynAct has received information that an Intention to Grant has been issued concerning its European patent application 20723141.6 (EP publication 3773558). The European patent, when granted, will provide protection until 2040 for the use of SynAct’s lead compound AP1189 in combination with methotrexate in methods of treating arthritic disease, including Rheumatoid Arthritis, as in the recently completed BEGIN study where AP1189 given in combination with methotrexate gave a significant reduction in disease activity. Importantly, the patent application among other also covers the use of combination treatment in other arthritic diseases, such as Psoriatic Arthritis and Ankylosing Spondylitis.

In brief, an “Intention to grant” means that the EPO intends to grant a European patent based on the patent application as currently on file and a final decision to grant will be issued by the EPO when all formalities are adhered to.

“This is another important step in our construction of a strong and robust portfolio of patents covering AP1189,” said SynAct’s CSO Thomas Jonassen.

The information was submitted, through the agency of the contact person below, for publication on December 1, 2021

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About SynAct Pharma AB

SynAct Pharma AB conducts research and development in inflammatory diseases. The company has a platform technology based on a new class of drug candidates aimed at acute deterioration in chronic inflammatory diseases with the primary purpose of stimulating natural healing mechanisms. For more information: www.synactpharma.com.

About AP1189

The mechanism of action of SynAct Pharma’s lead compound AP1189 is to promote resolution of inflammation through selective activation of melanocortin receptors 1 and 3.

These receptors are located on all immune cell types including macrophages and neutrophils. Activation of these receptors results in two direct anti-inflammatory effects: it turns these cells to produce less pro-inflammatory molecules and also to switching them to perform inflammation “clean-up”, known as efferocytosis (J Immun 2015, 194:3381-3388). This effect has shown to be effective in disease models of inflammatory and autoimmune diseases and the clinical potential of the approach is currently tested in clinical programs in patients with rheumatoid arthritis (RA), nephrotic syndrome (NS) and COVID-19. The safety and efficacy of AP1189 is being tested and has not been reviewed by any regulatory authority worldwide.