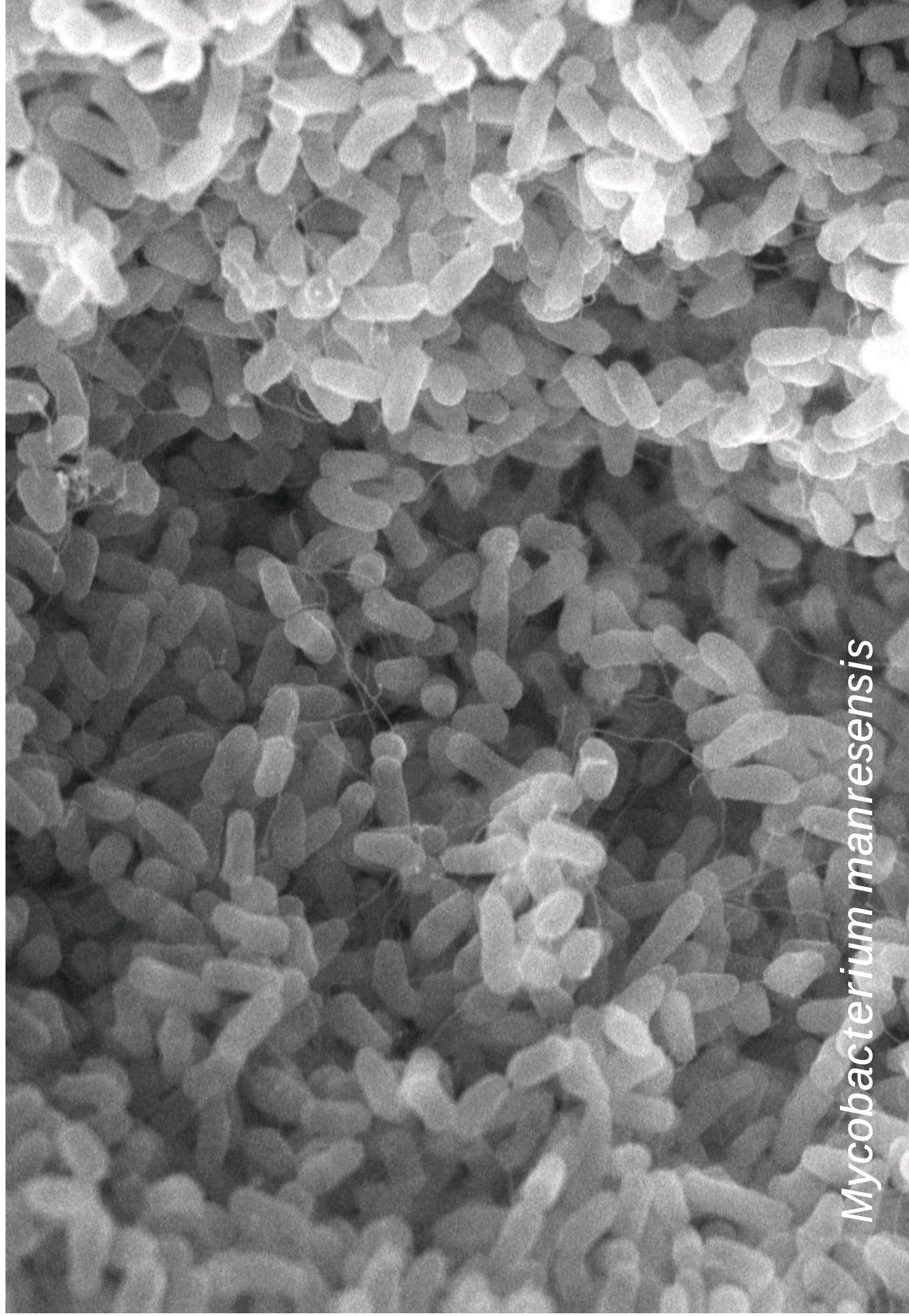




Nutraceuticals are part of the
future? The case of Nyaditum
resae®



Mycobacterium manresensis

2 μm^*

EHT = 20.00 kV

WD = 6.5 mm

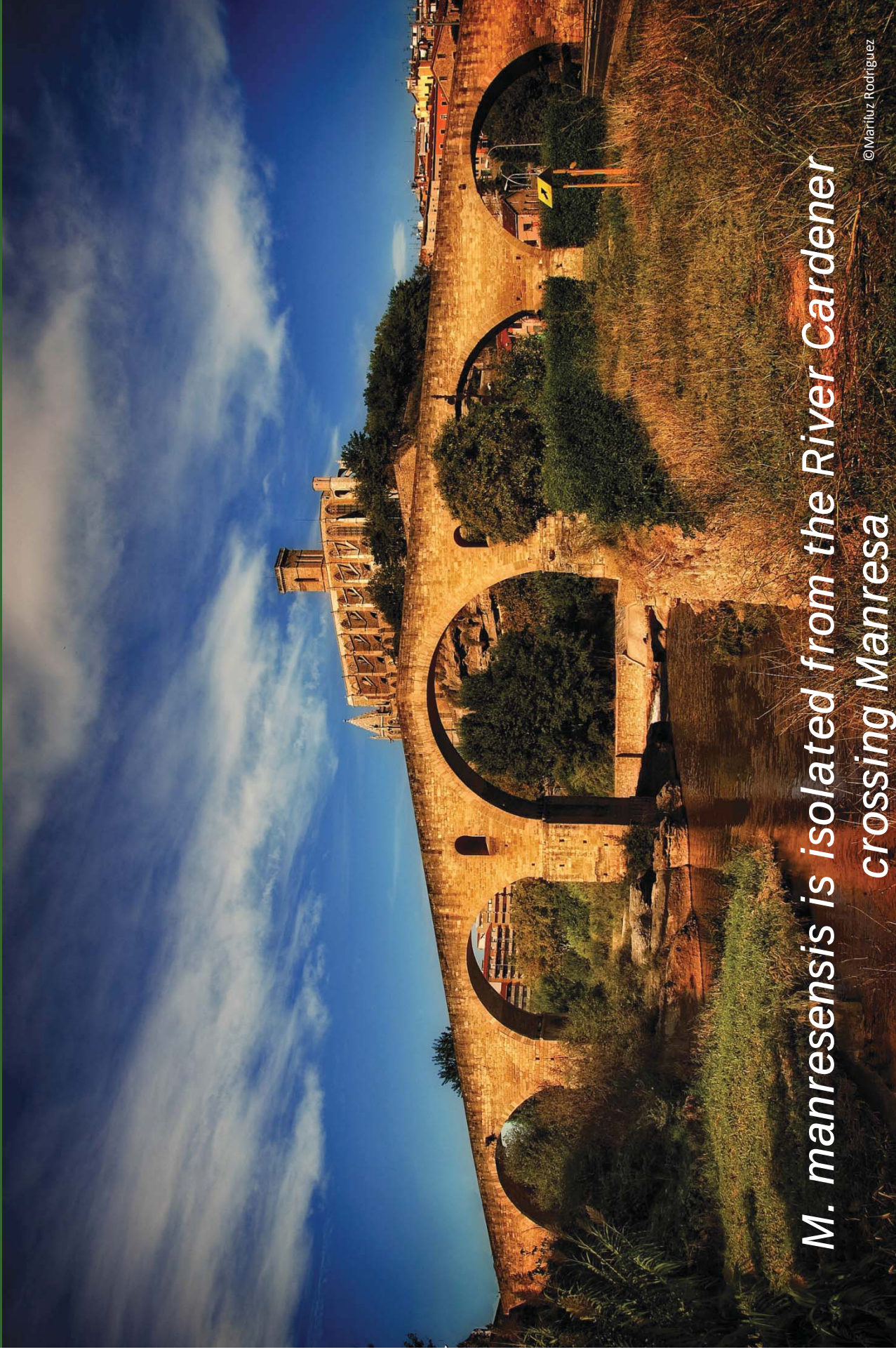
Signal A = SE1

Mag = 20.00 K X

File Name = UTE_IGTP_32.tif

M. manresensis is isolated from the River Cardener
crossing Manresa

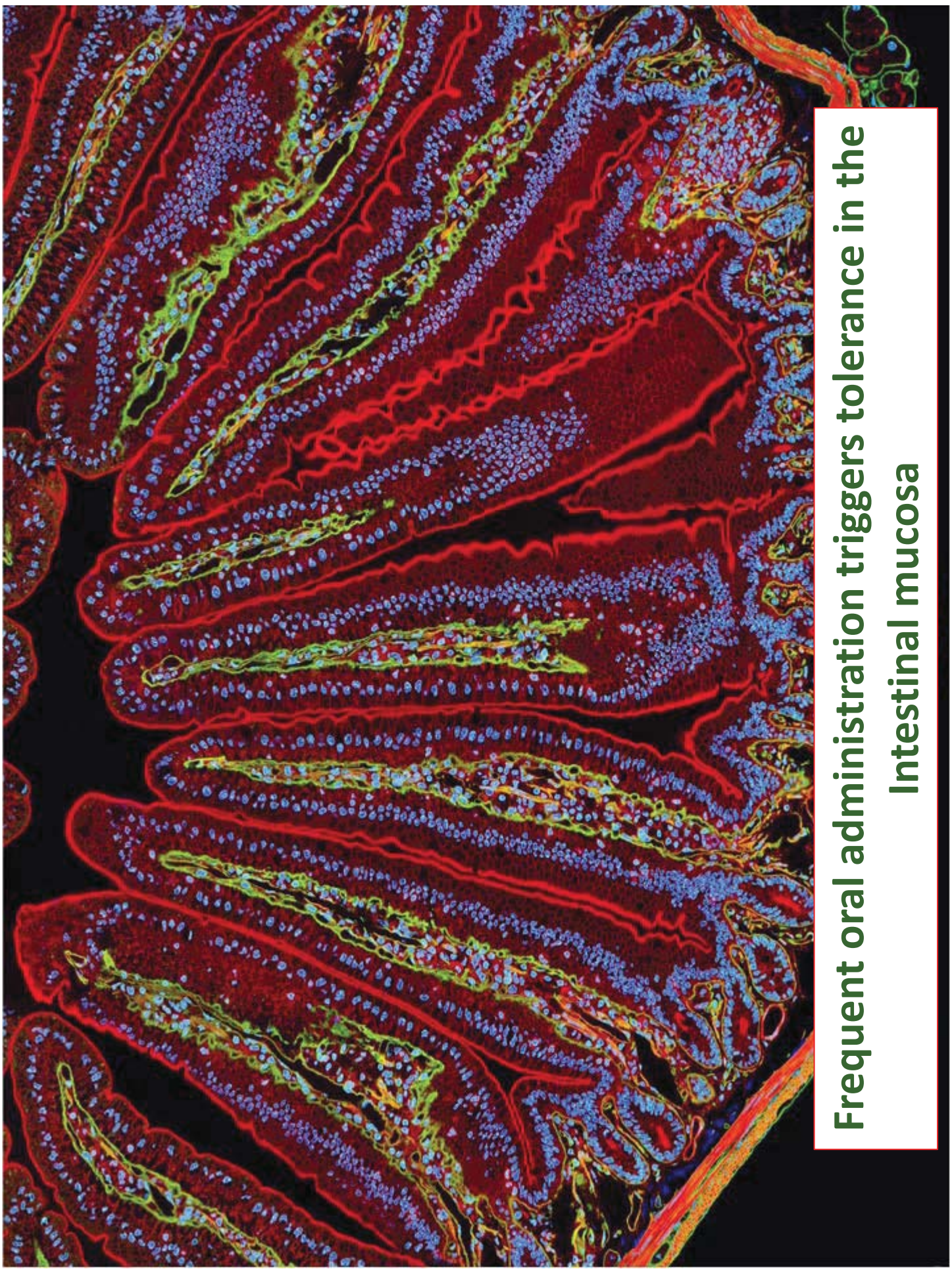
© Martiuz Rodriguez





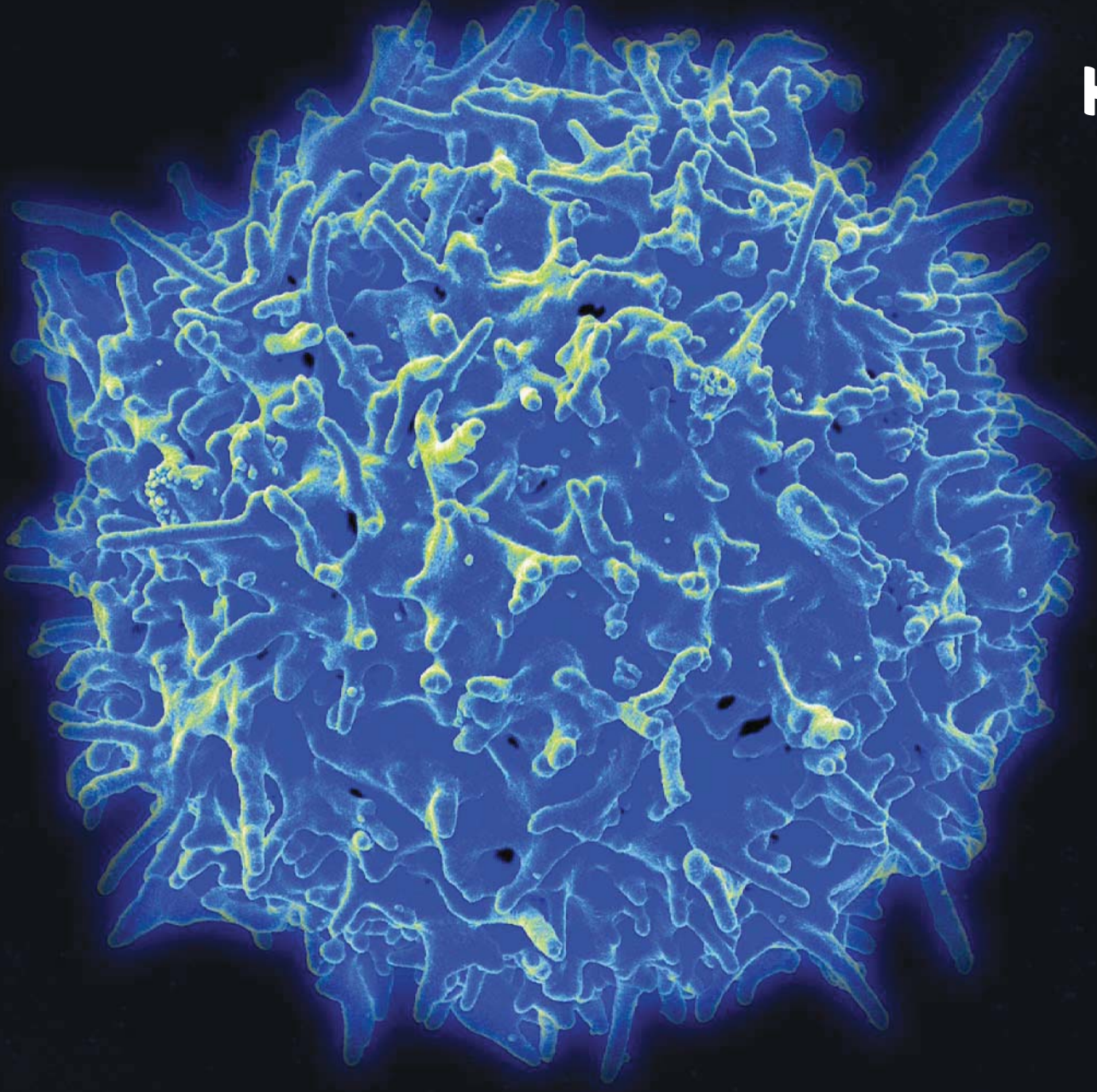
Mycobacterium manresensis is in the potable water

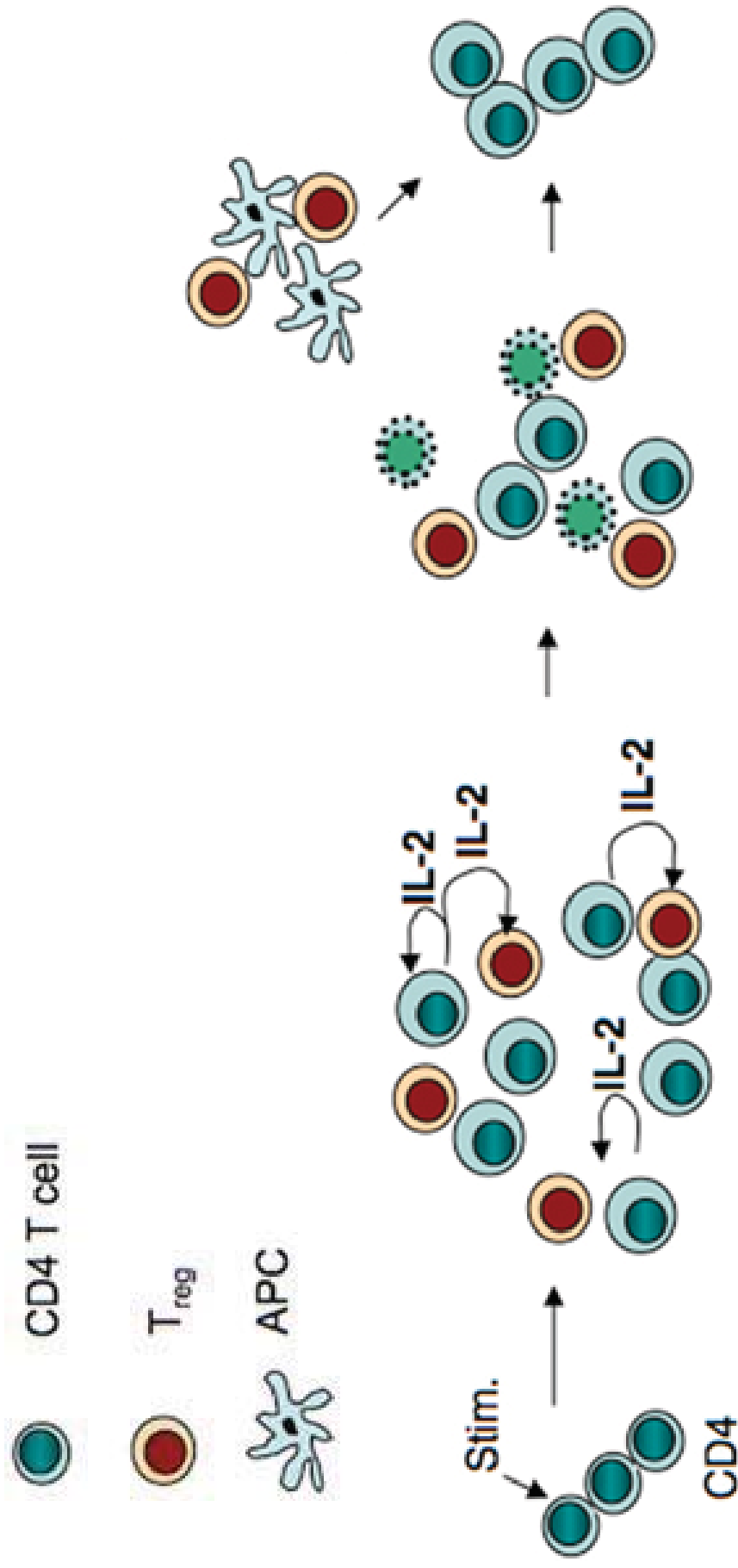
Why is that interesting?



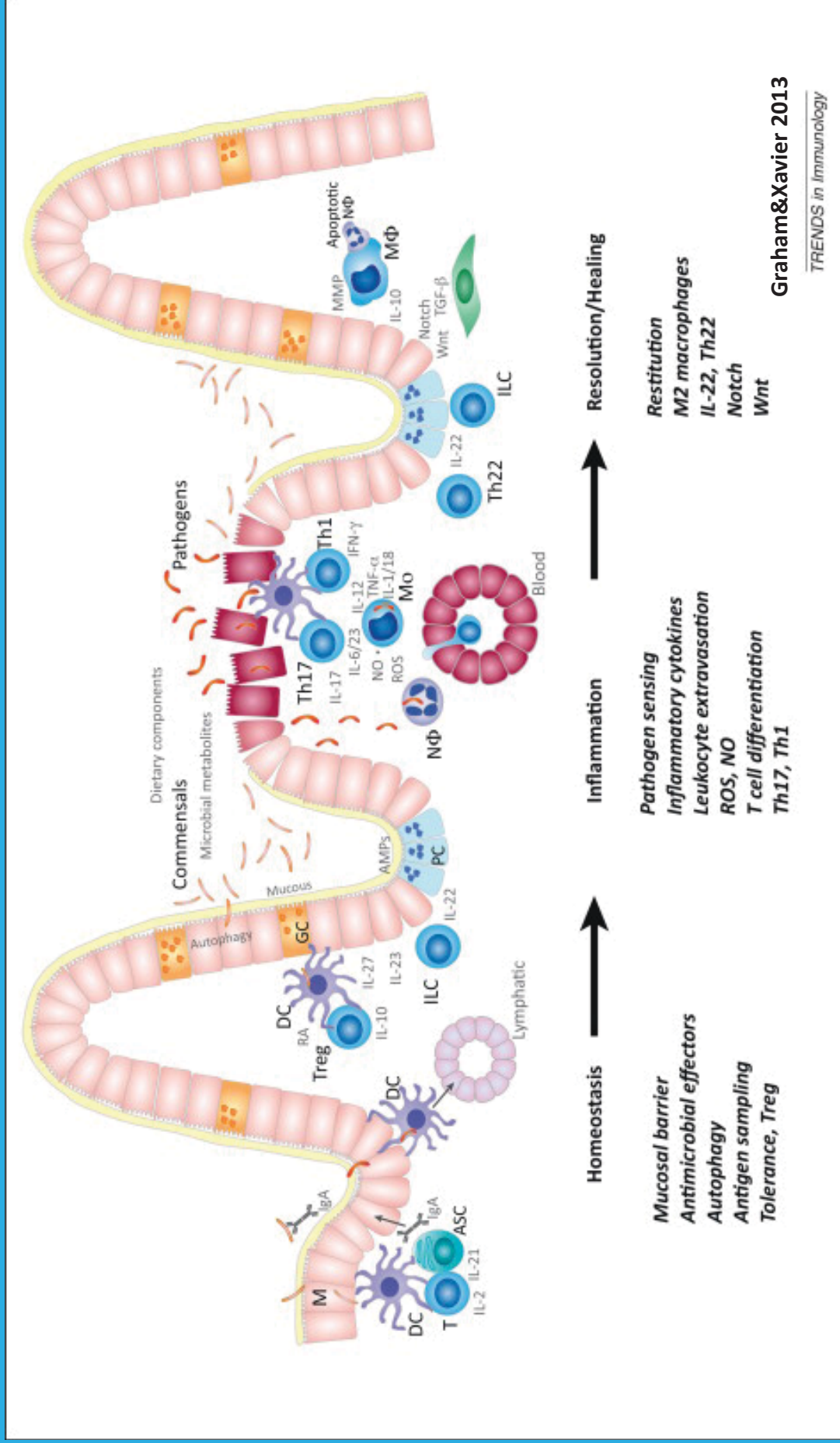
**Frequent oral administration triggers tolerance in the
Intestinal mucosa**

This is mediated by the proliferation of *Tregs*





Tregs modulate exaggerated immune responses

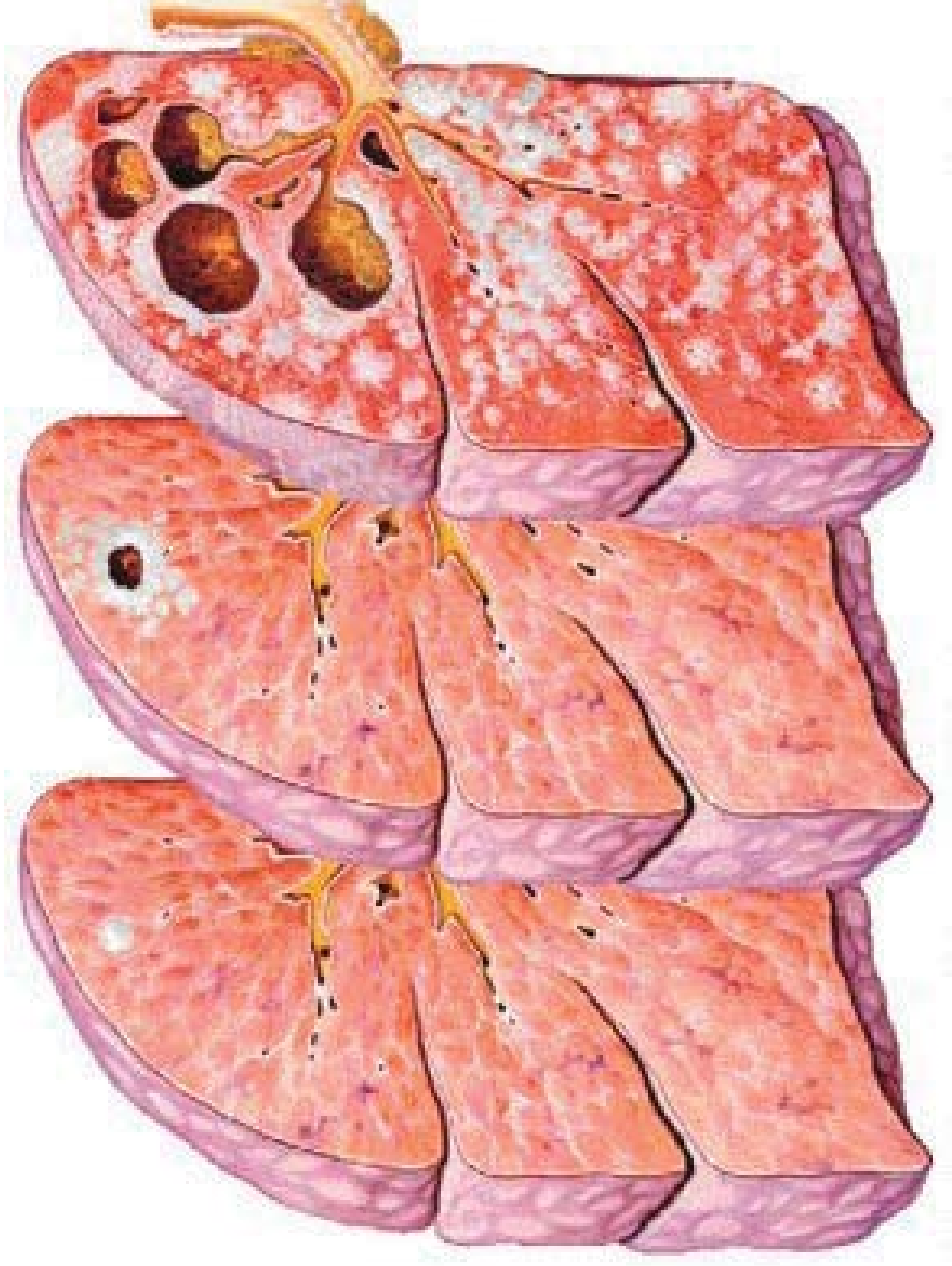


Graham&Xavier 2013

TRENDS in Immunology

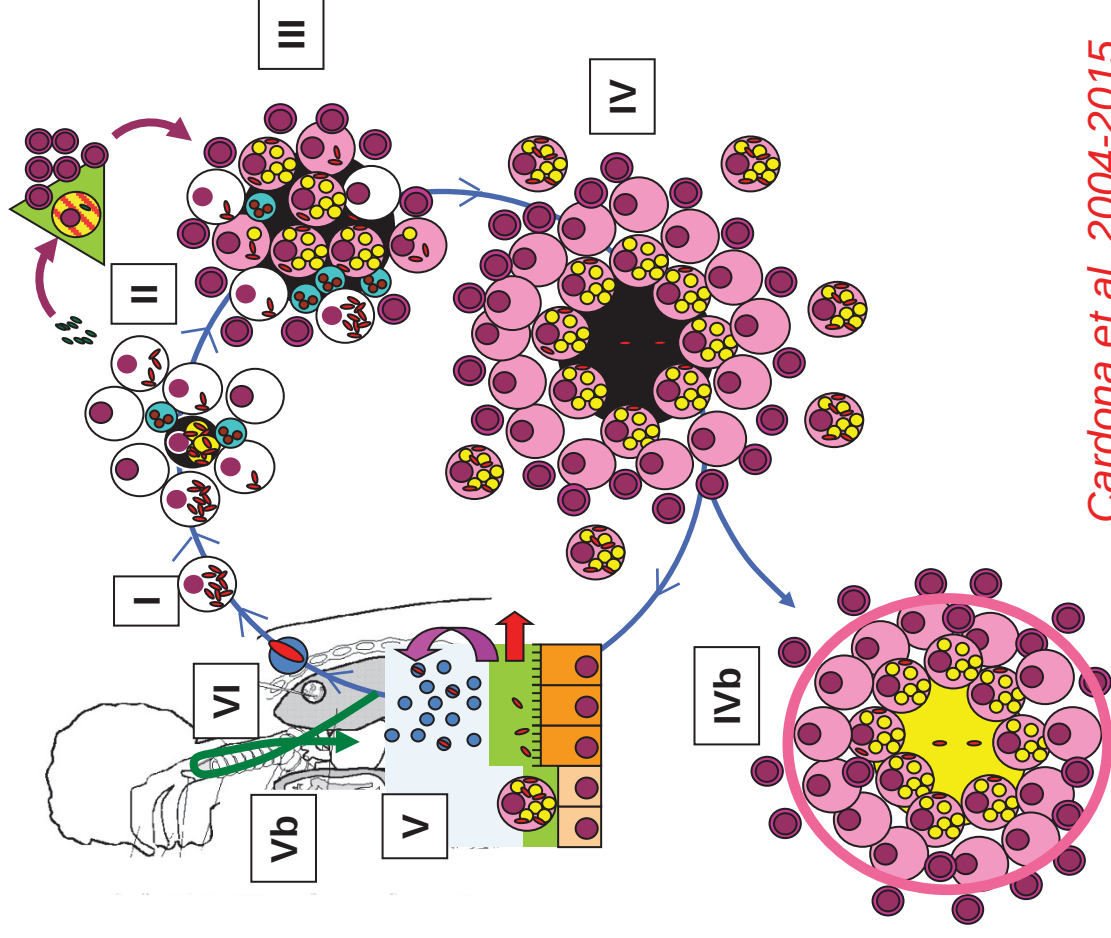
Tregs modulate exaggerated immune responses:
This is well known in intestinal inflammatory disease

**What's the relation of Tregs induction
and
Tuberculosis risk reduction?**



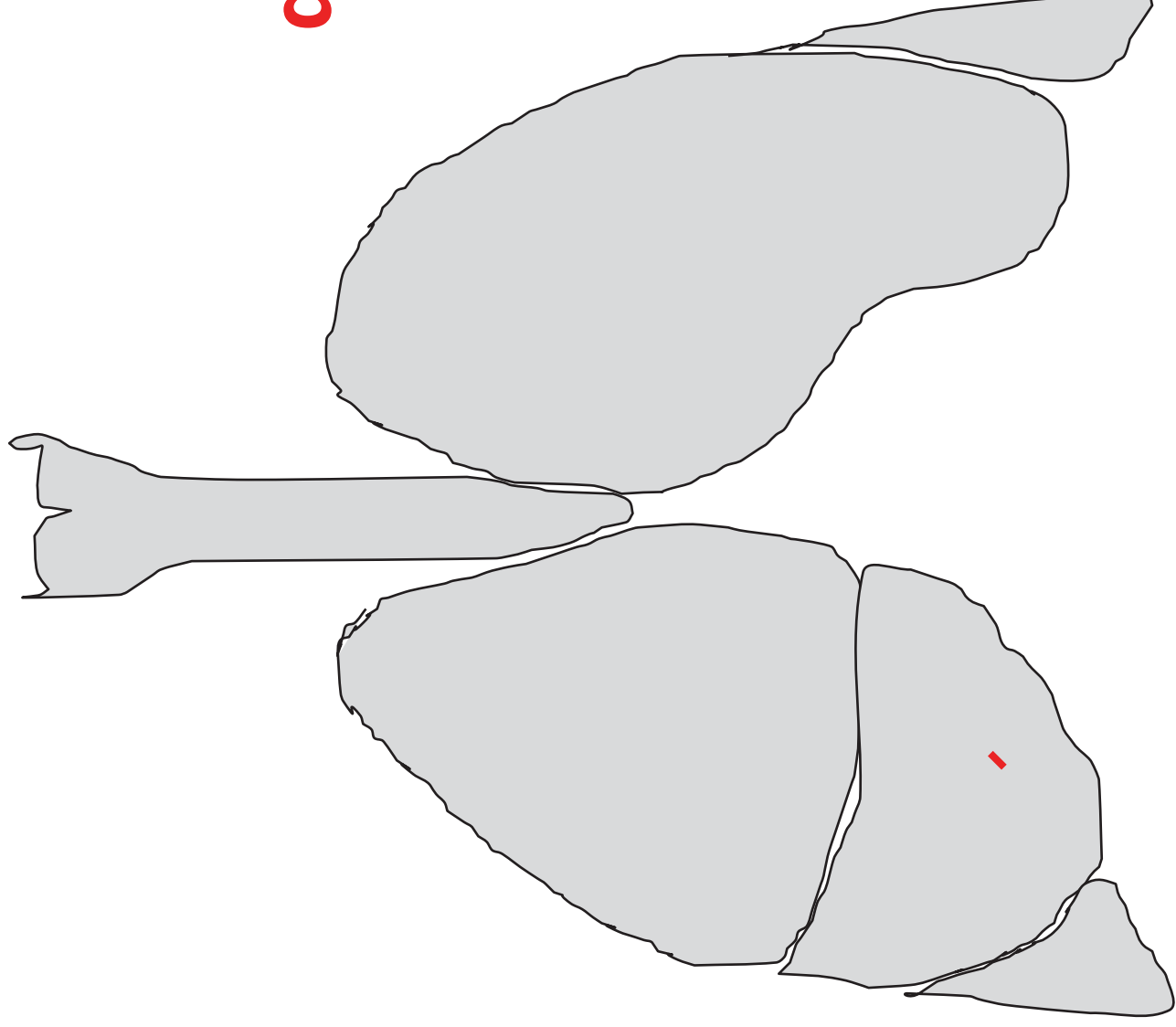
**Tuberculosis is characterized by a massive destruction of
The lung after a period of latent infection**

M. tuberculosis causes a latent infection that last for years thanks to a constant reinfection.



U†E

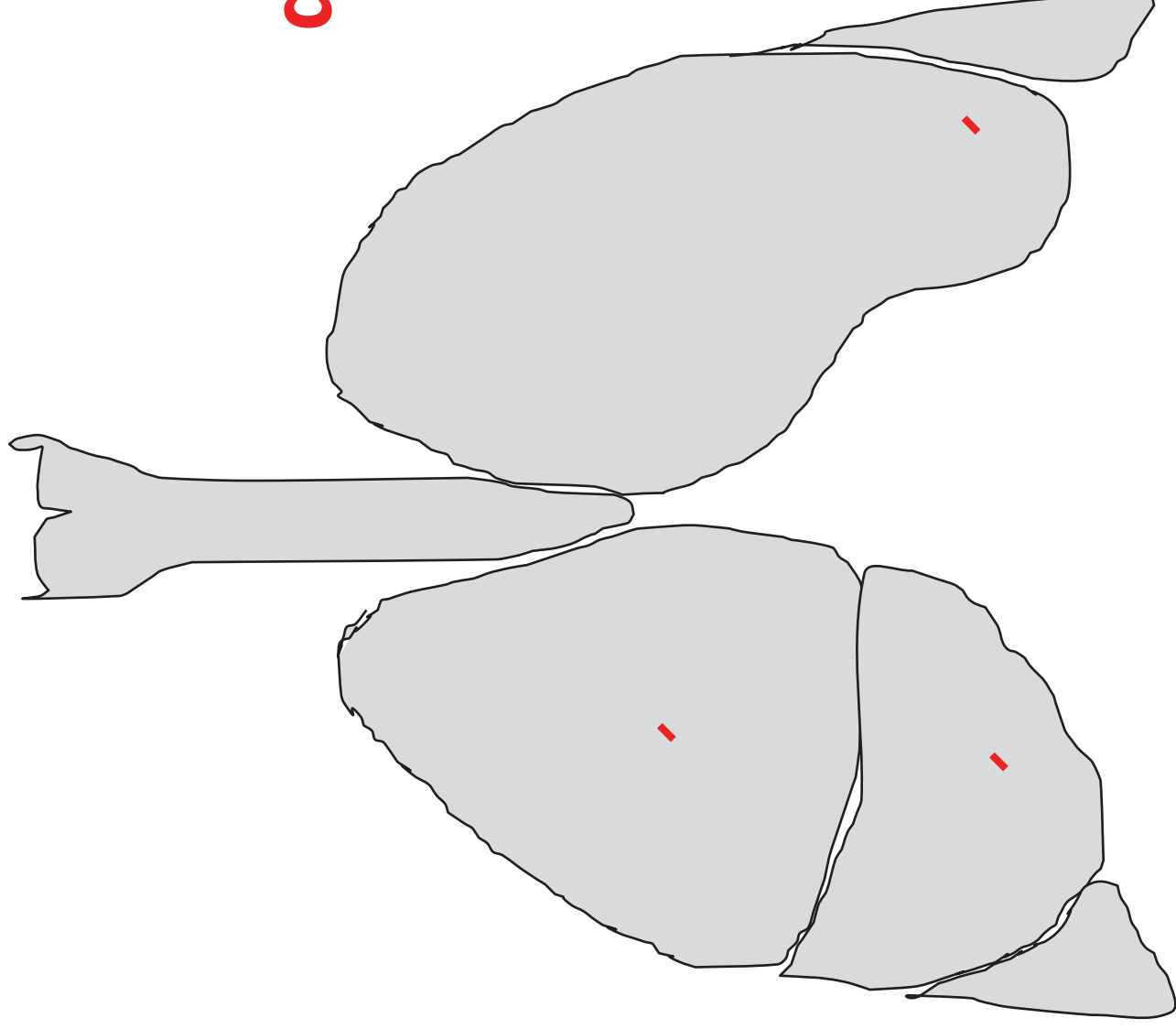
d0



Cardona PJ 2015

U†E

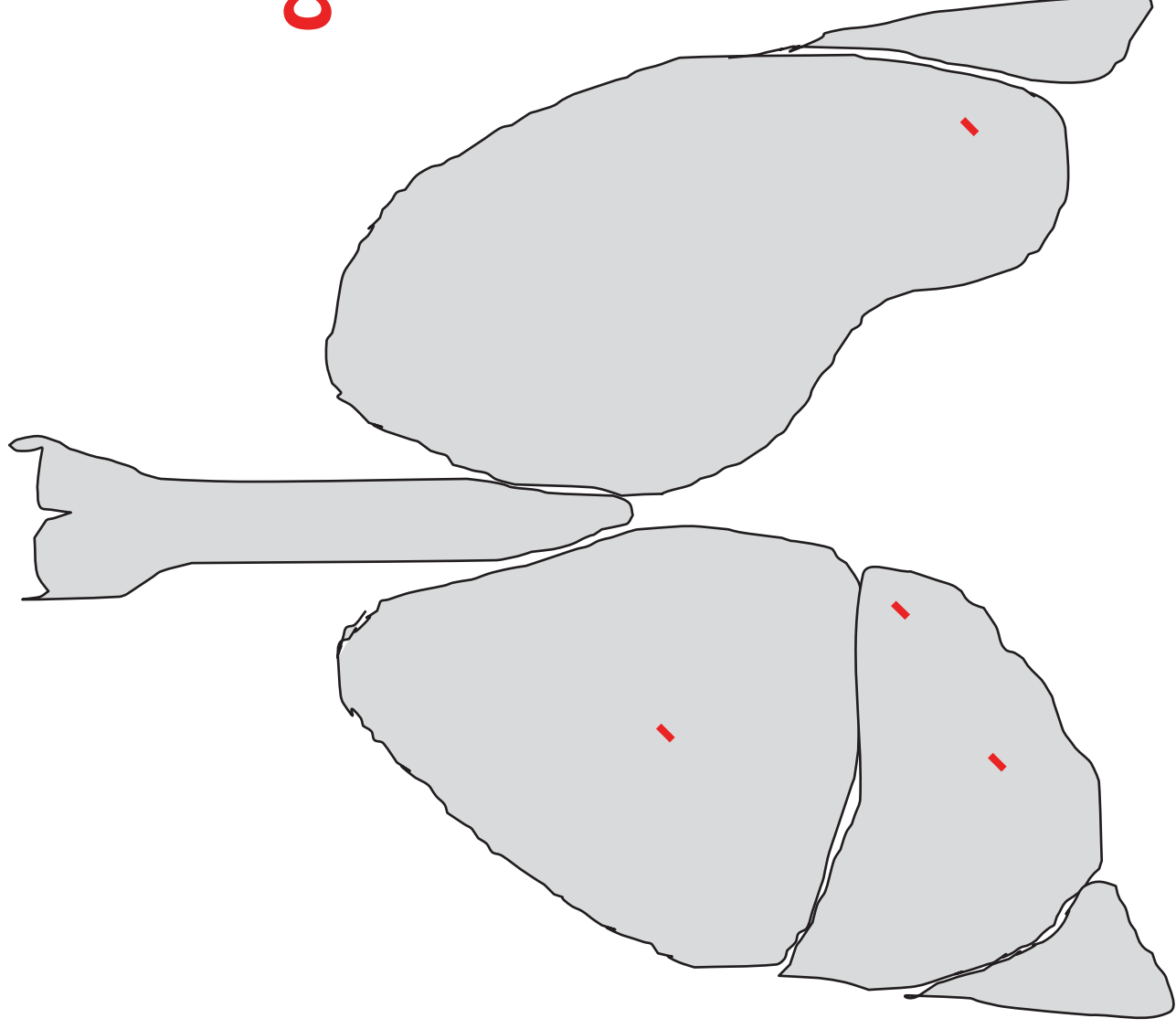
d2



Cardona PJ 2015

U†E

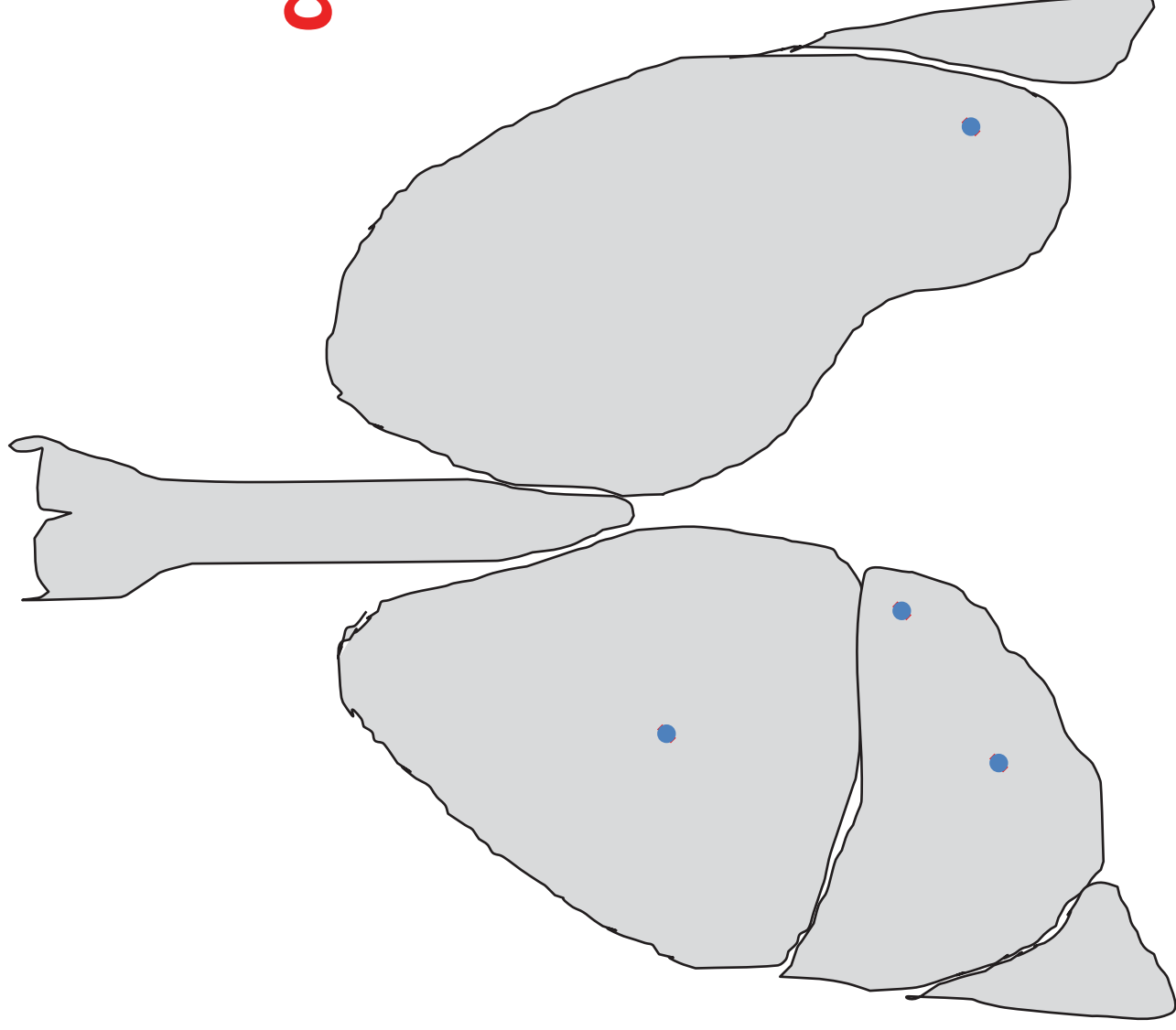
d3



Cardona PJ 2015

U†E

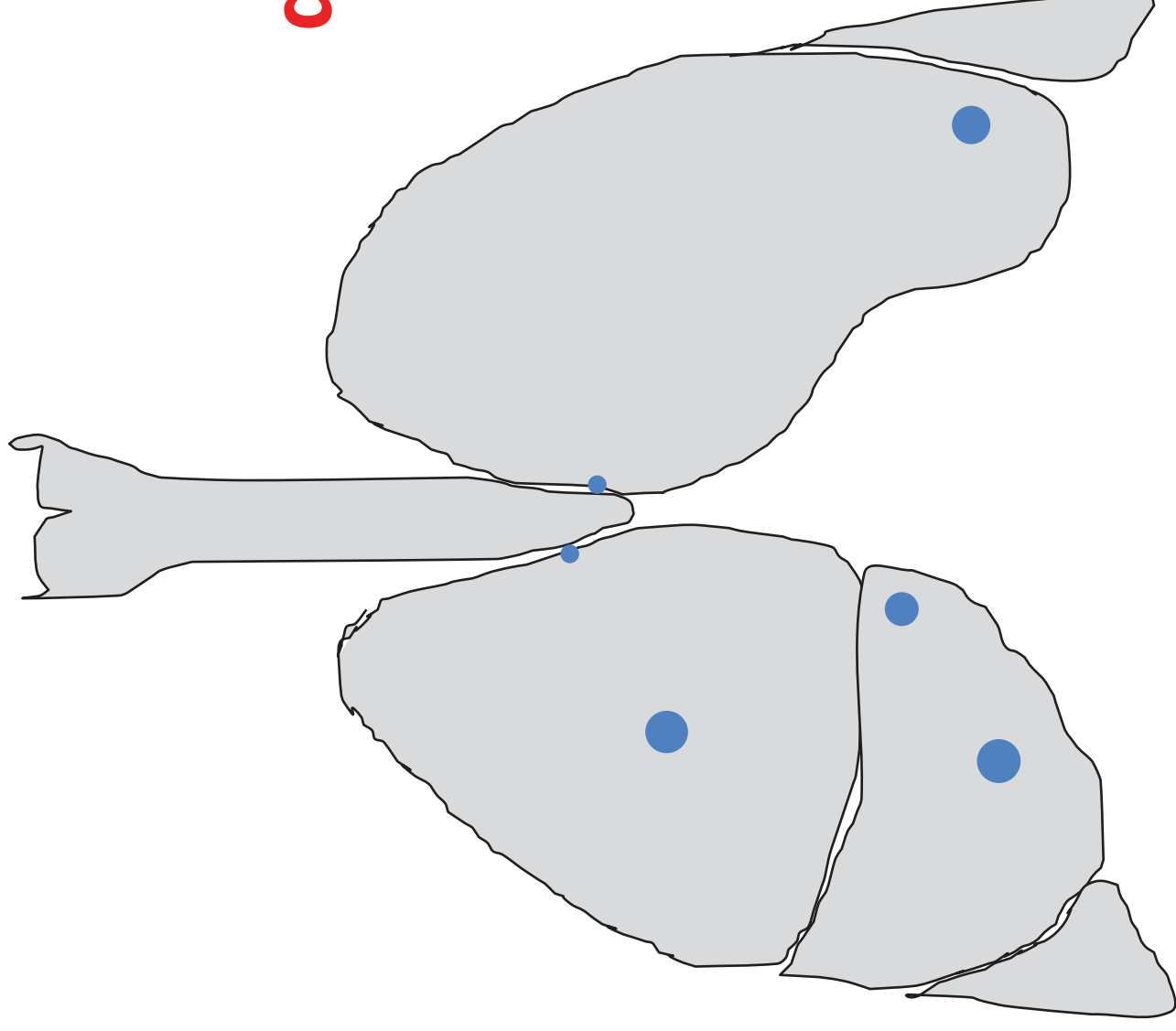
d15



Cardona PJ 2015

U†E

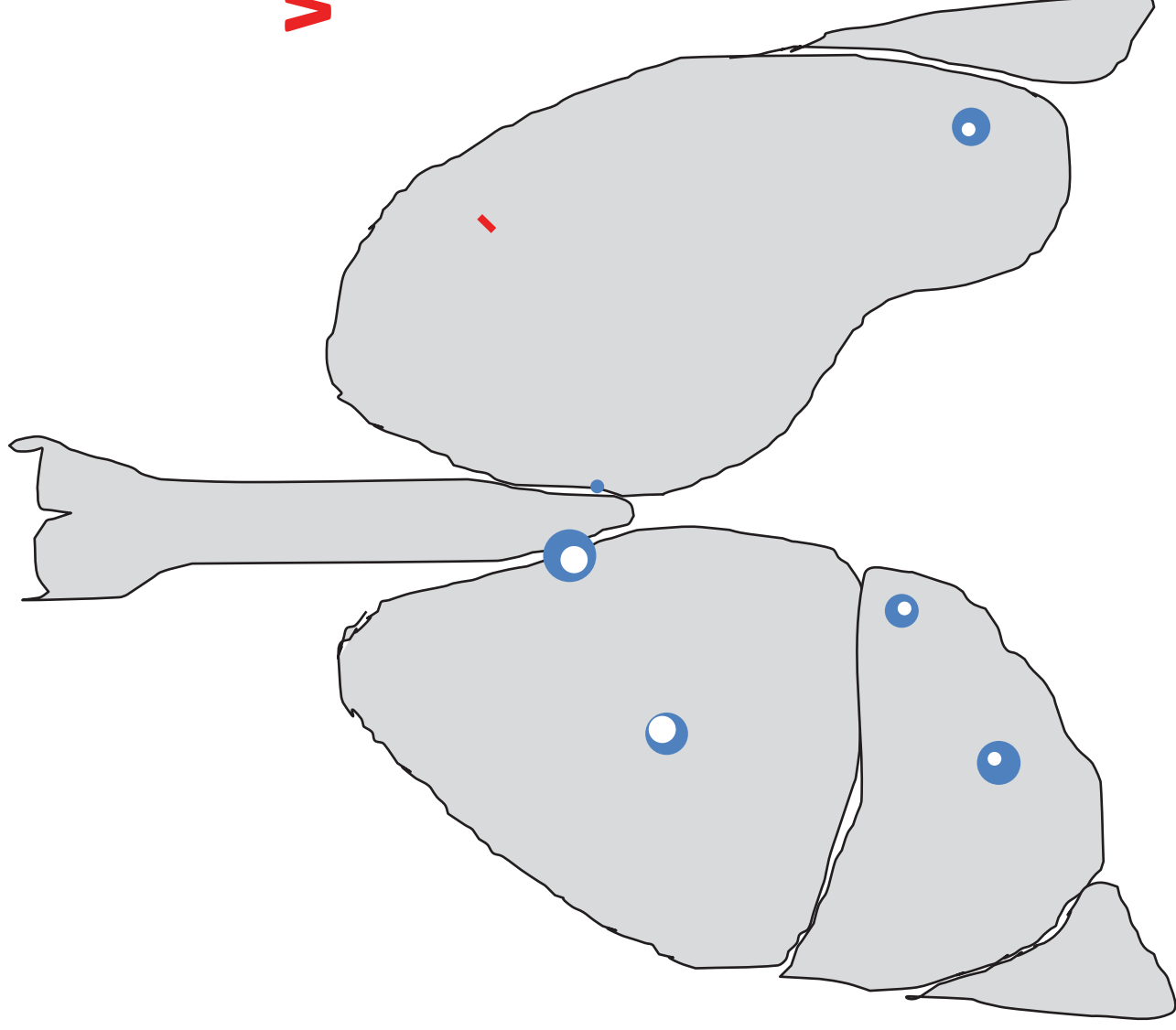
d21



Cardona PJ 2015

U†E

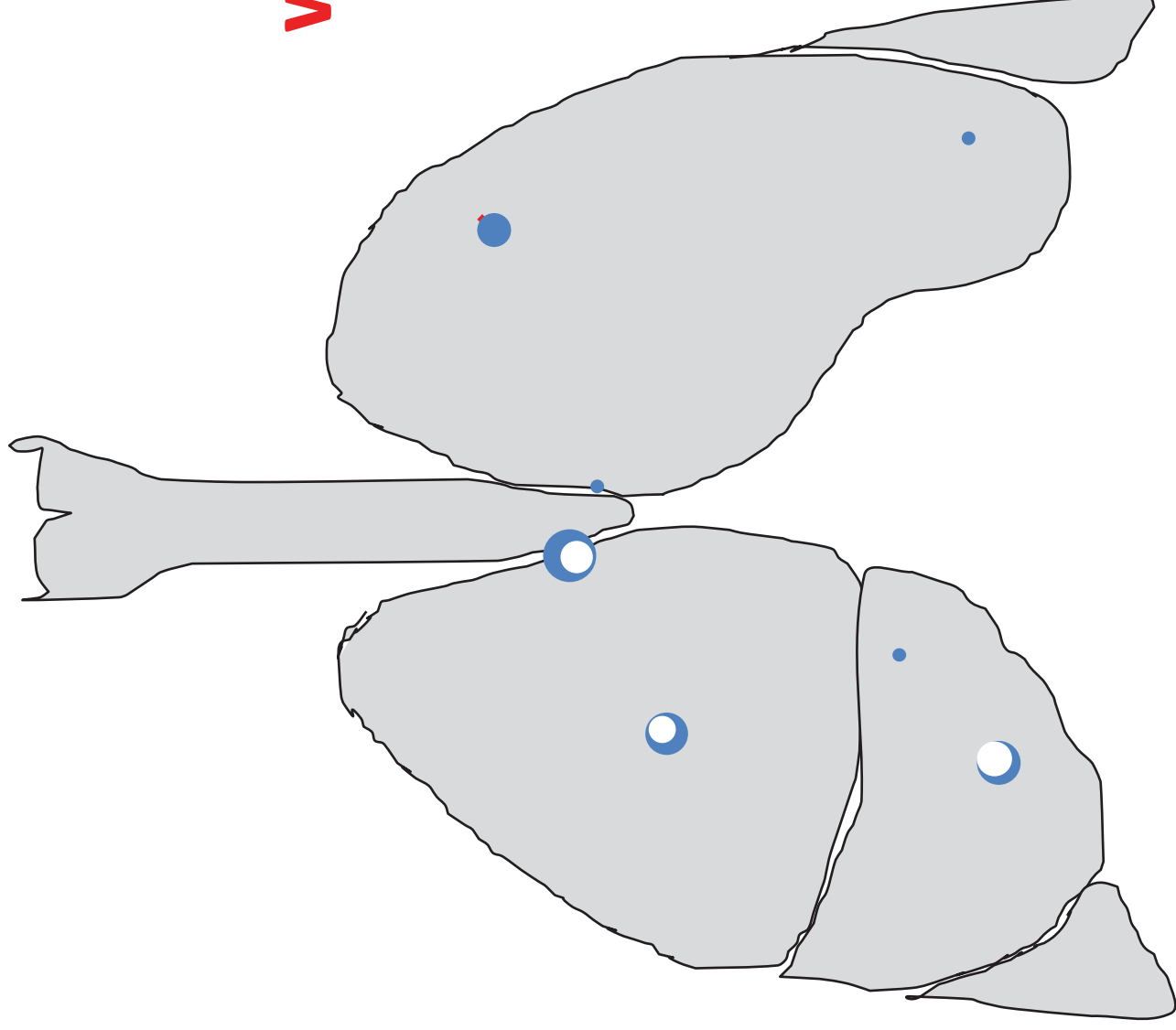
w6



Cardona PJ 2015

U†E

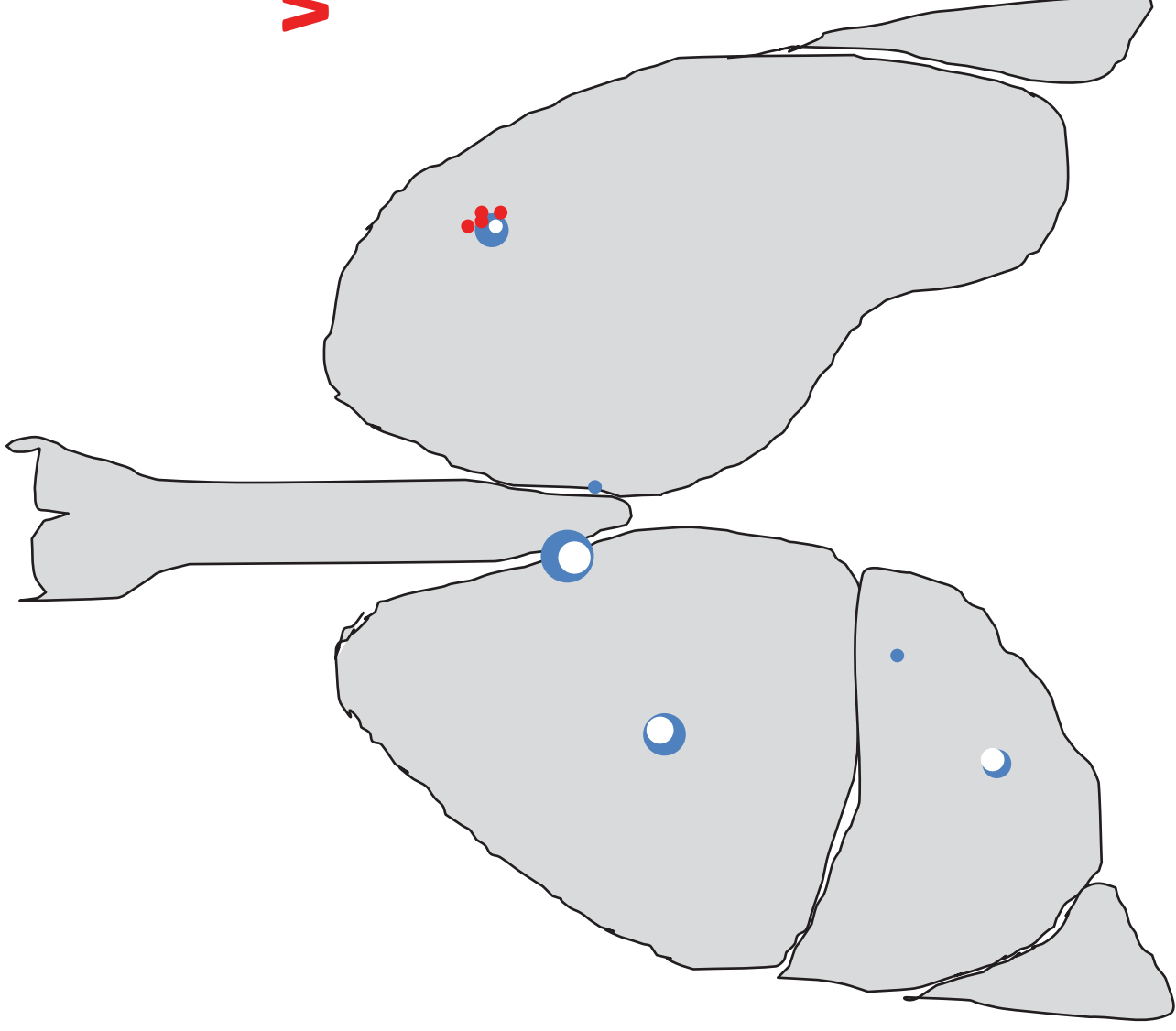
w8



Cardona PJ 2015

$U^\dagger E$

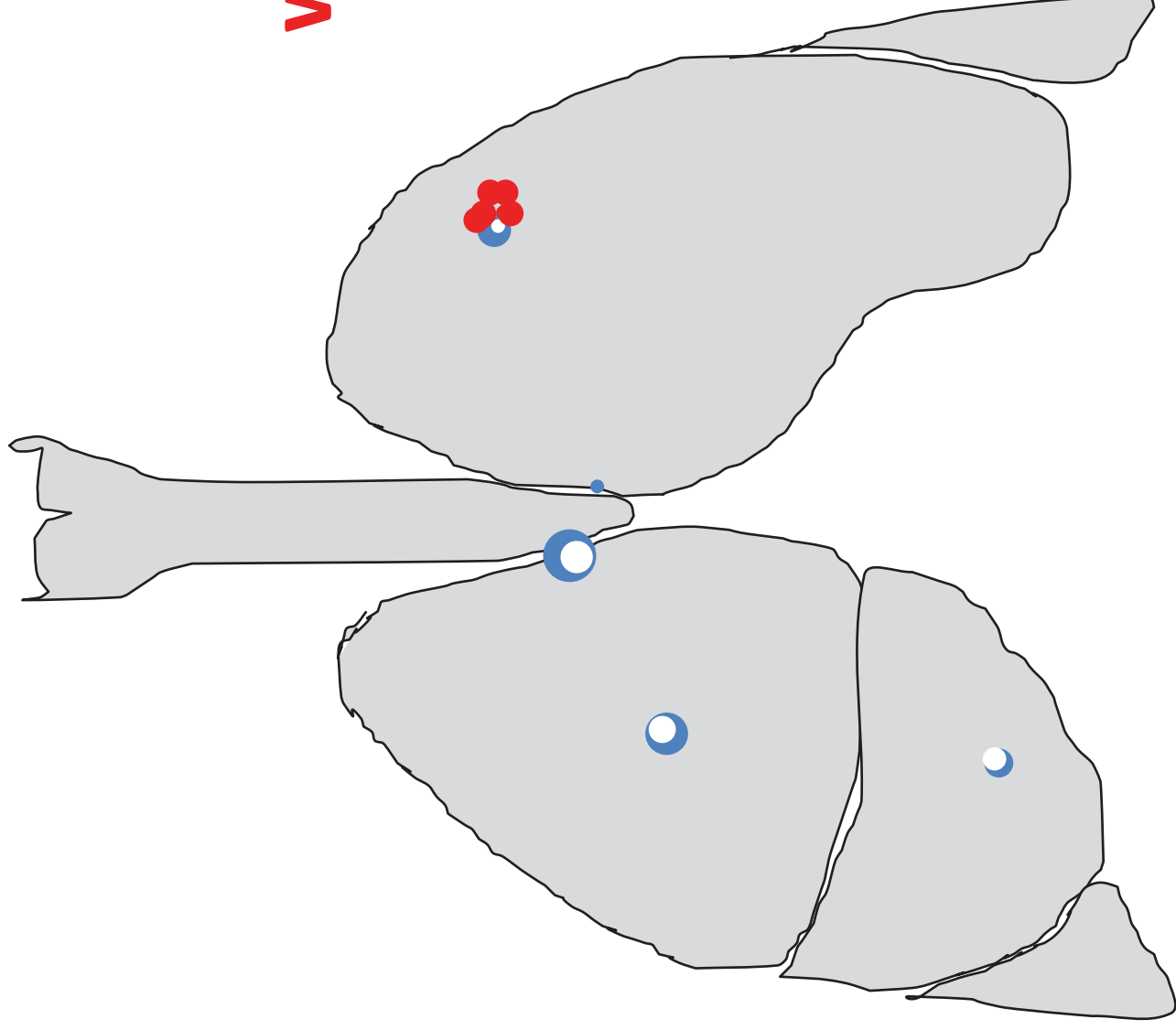
w_{10}



Cardona PJ 2015

U†E

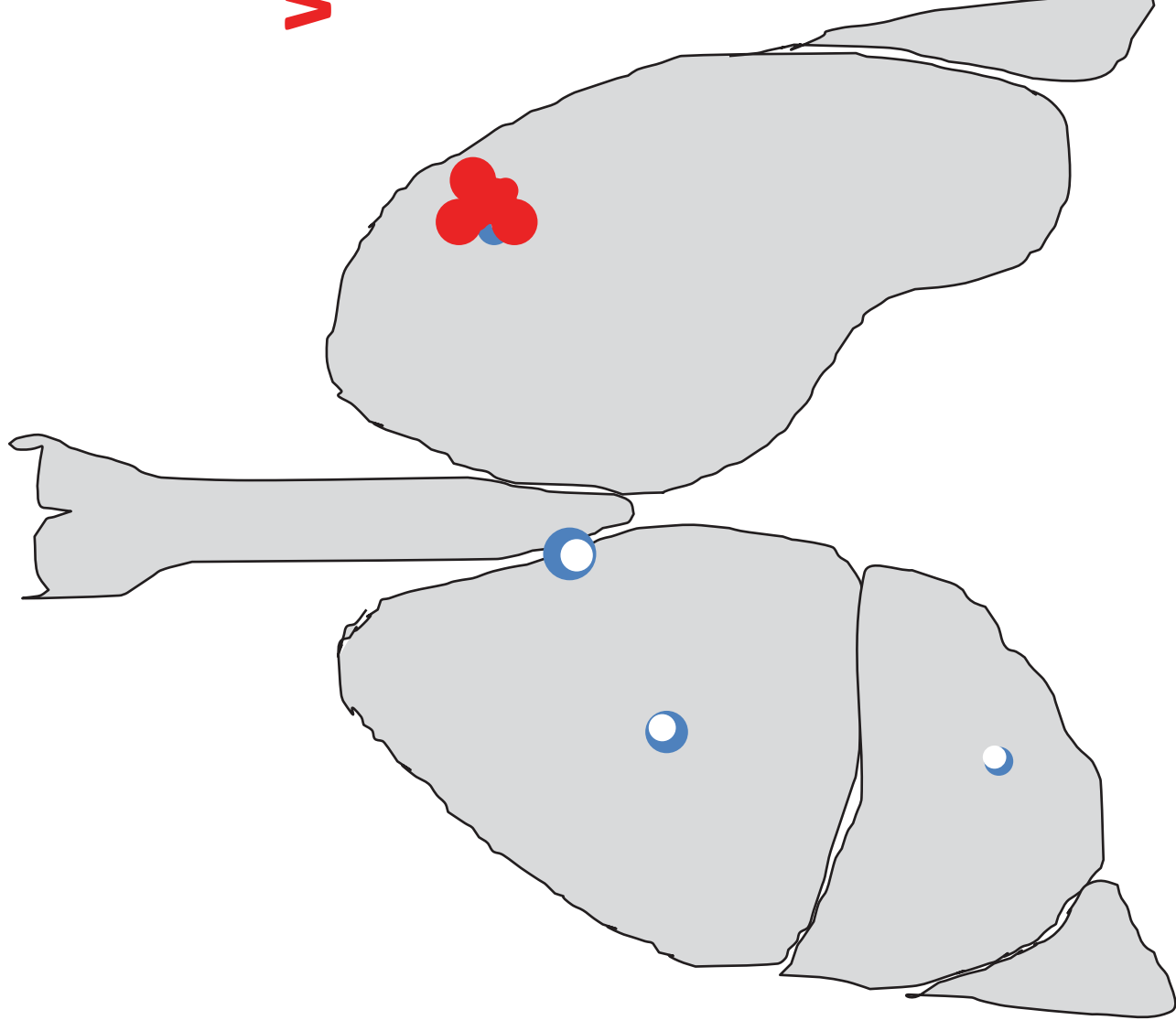
w11



Cardona PJ 2015

U†E

w12



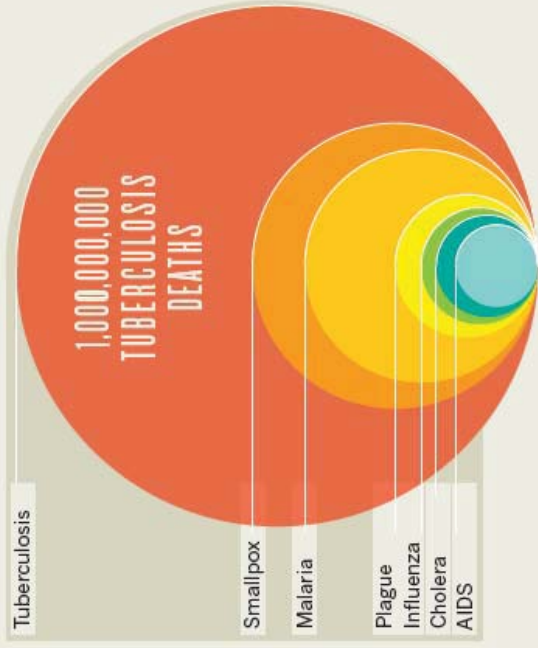
Cardona PJ 2015

A MORTAL FOE

Tuberculosis is one of the world's most lethal infectious diseases. Further progress in conquering it to the past is a massive challenge. By Tom Paulson.

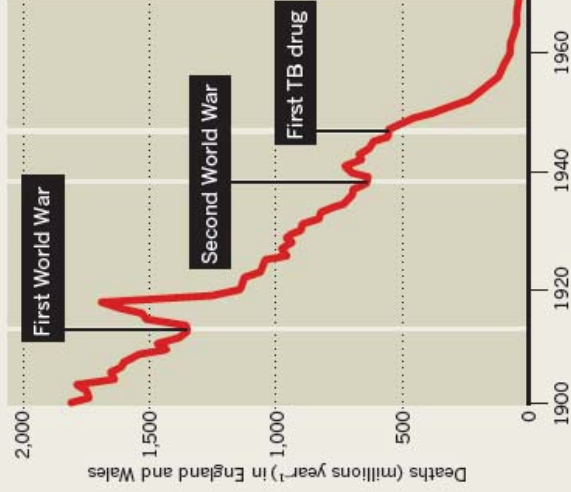
THE BIGGEST KILLER

Tuberculosis has killed more than any other infectious disease in history. Over a billion lives in the past two hundred years.



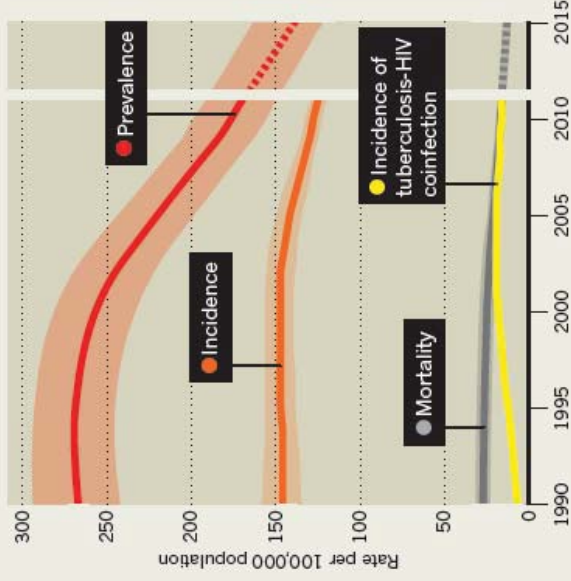
THE 100 YEARS BATTLE

Rising living standards in industrialized nations, interrupted by two World wars, and new antibiotics had tuberculosis in decline.



SLOW PROGRESS

Over the past fifteen years, an invigorated anti-TB effort has begun to reduce the global burden of disease worsened by HIV.



Tuberculosis is still a humankind threat

9 MILLION
PEOPLE FELL ILL WITH TB
IN 2013 INCLUDING
1.1 MILLION PEOPLE
LIVING WITH HIV



1.5 MILLION
PEOPLE DIED IN 2013
INCLUDING 360 000
PEOPLE WHO WERE
HIV POSITIVE



480 000
PEOPLE ESTIMATED TO
HAVE DEVELOPED
MULTIDRUG-RESISTANT TB
(MDR-TB) IN 2013.

Improved TB data from countries are revealing that the burden of the disease is higher than previously estimated.

GLOBAL RESPONSE AND IMPACT

202 countries reported on their response to TB, guided by WHO's TB strategy



37 MILLION
LIVES SAVED BETWEEN
2000 AND 2013 THROUGH
EFFECTIVE DIAGNOSIS AND
TREATMENT



45% DECLINE
IN TB MORTALITY RATE
SINCE 1990

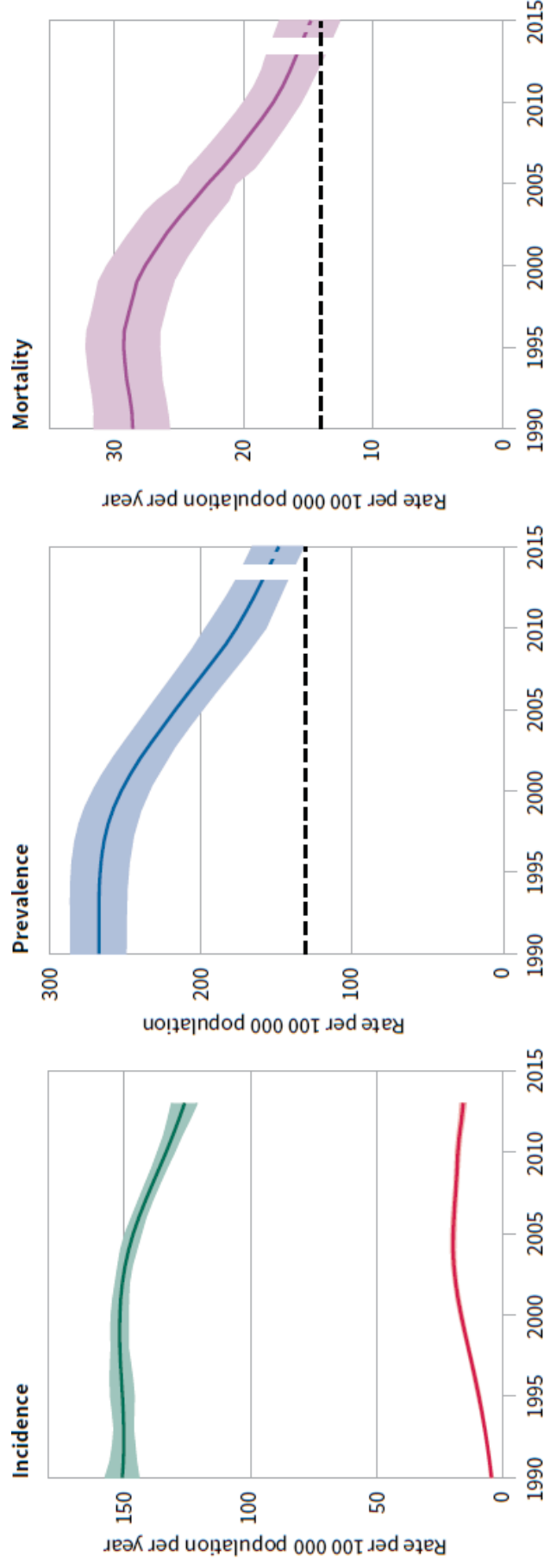


FRAGILE PROGRESS
IN MDR-TB DIAGNOSIS AND
ENROLLMENT ON TREATMENT,
BUT WIDENING GAPS IN
TREATMENT COVERAGE COULD
COMPROMISE GAINS



\$2 BILLION
ANNUAL FUNDING GAP
FOR TB CONTROL
IMPLEMENTATION,
TB RESEARCH AND
DEVELOPMENT ALSO
UNDERFUNDED

Tuberculosis is still a humankind threat

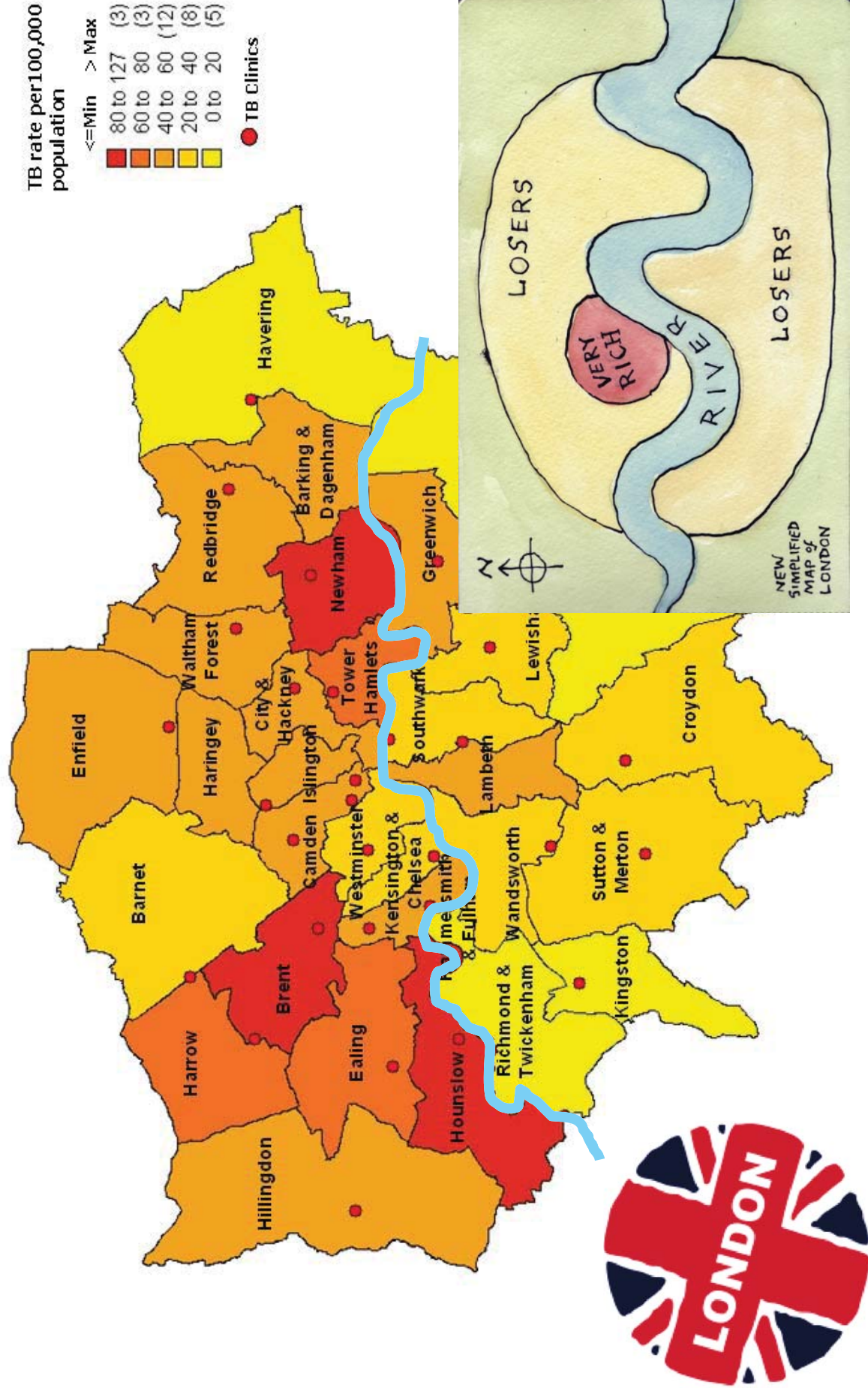


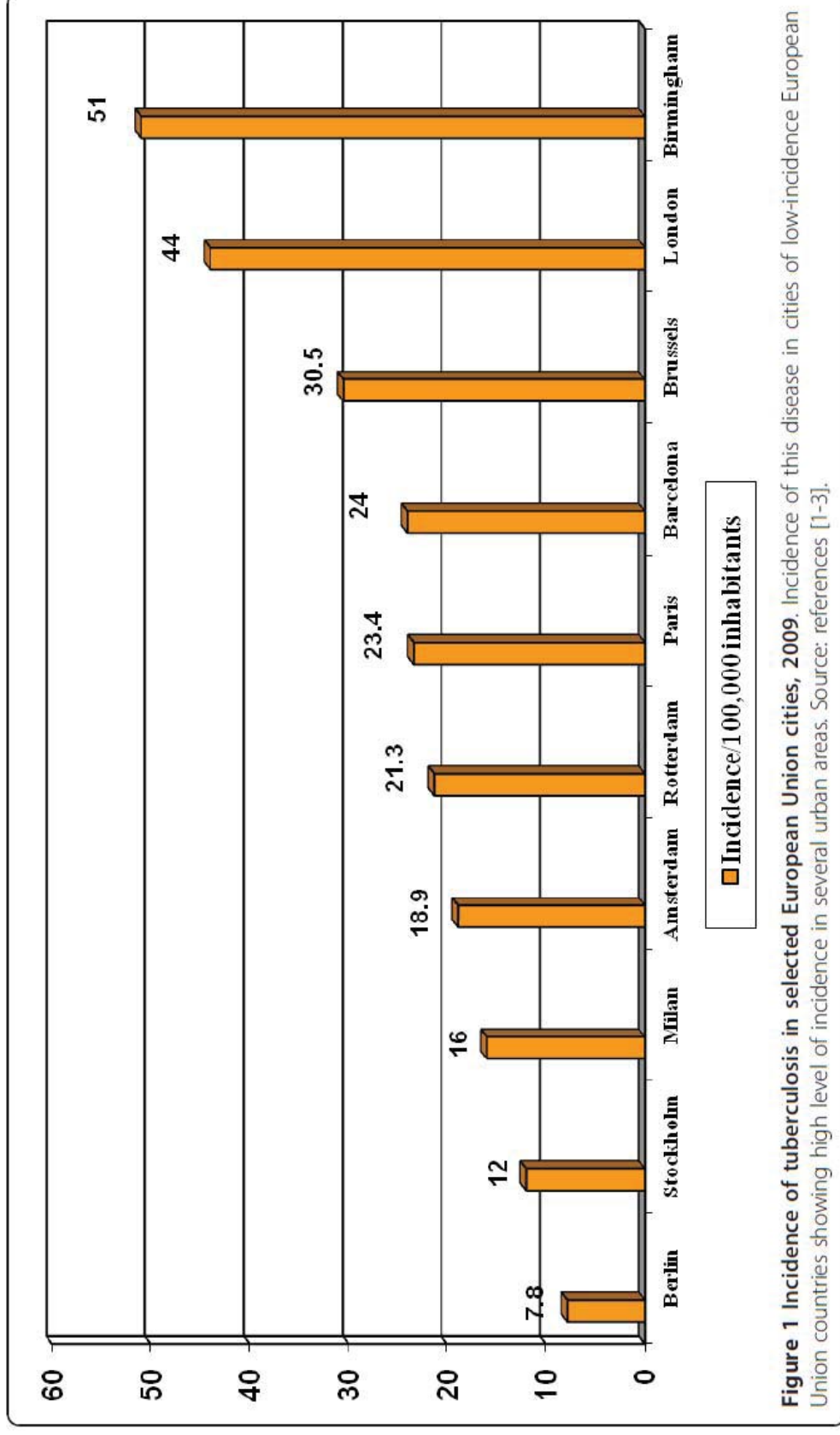
U†E

22 countries have the 85% incidence



TB rate per 100,000 population, by PCT of residence, 2009





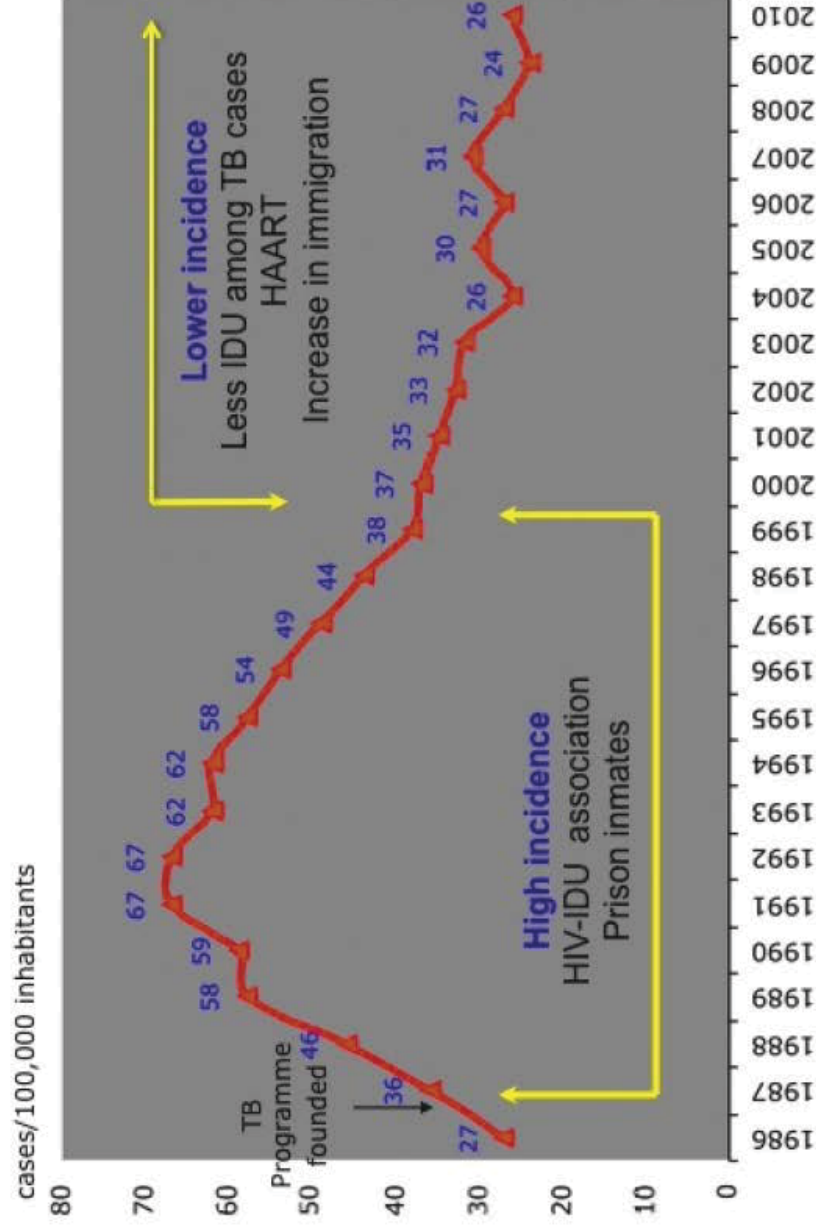
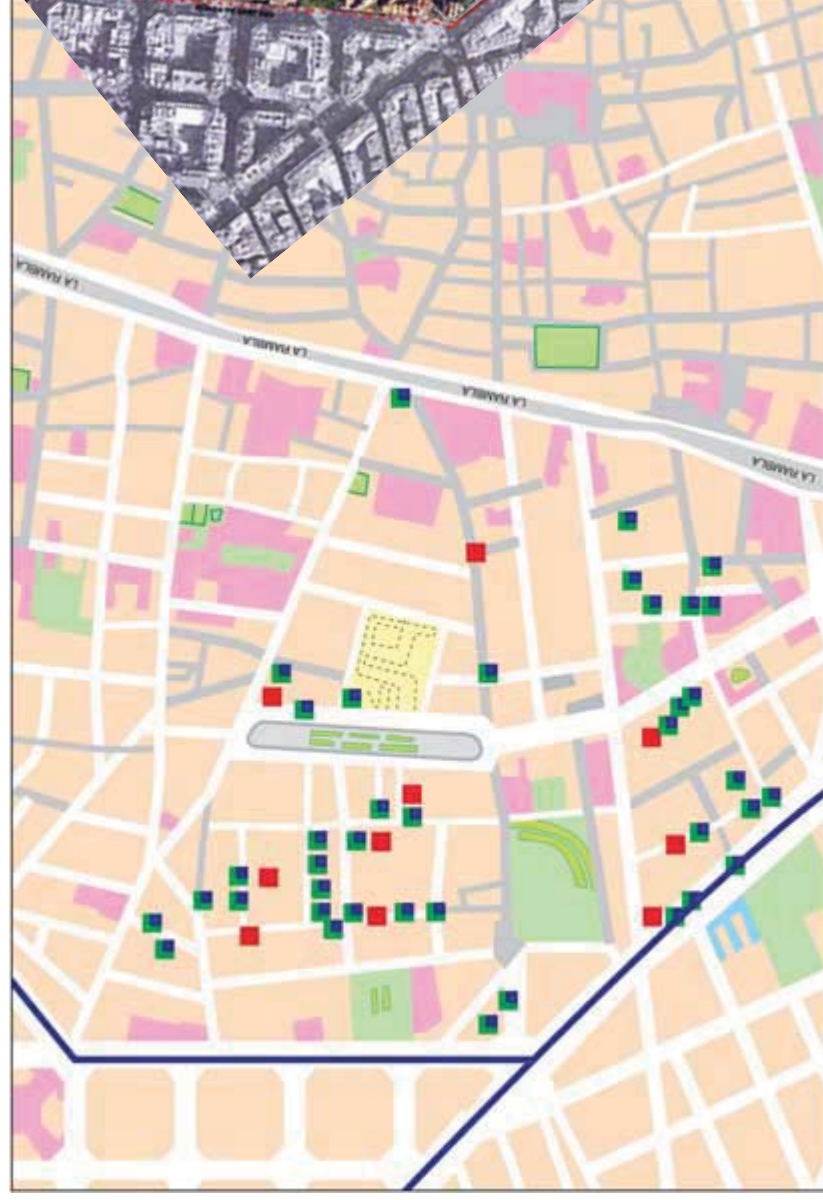


Figure 2 The evolution of tuberculosis in Barcelona, 1986-2010. The graph shows tuberculosis cases per 100,000 inhabitants over time. During the 1990s a high incidence period was observed, mostly due to HIV-infected injecting drug users. With the implementation of control measures and the generalization of antiretroviral treatments, the annual decline was about 10%. This decline was attenuated during the low incidence period due to massive immigration from high burden countries. TB, tuberculosis; IDU, injecting drug users; HAART, highly active antiretroviral therapy.





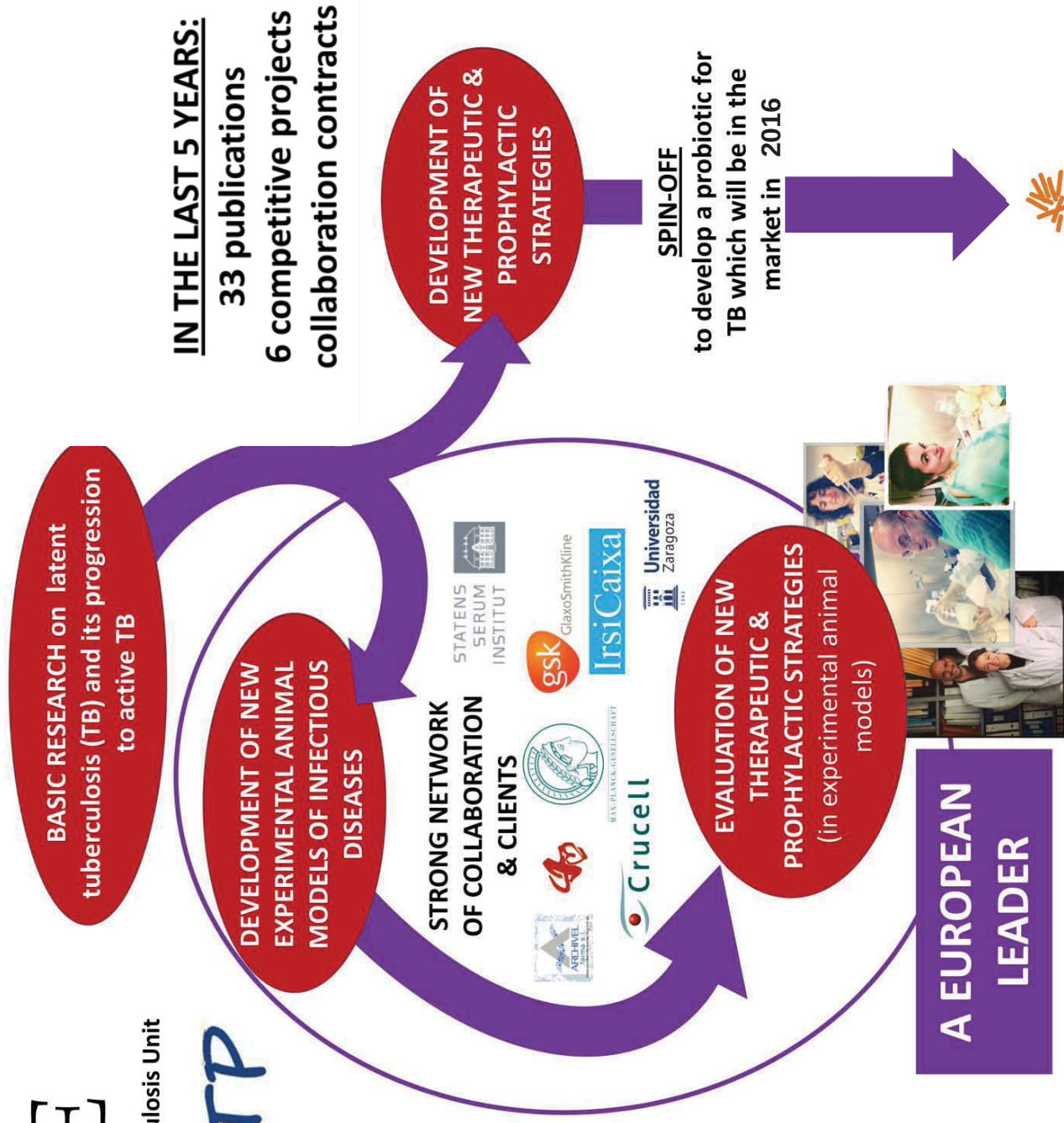


FUNDACIÓ
JOSEP CARRERAS
Contra la leucèmia



Universitat Autònoma de Barcelona







U+FE

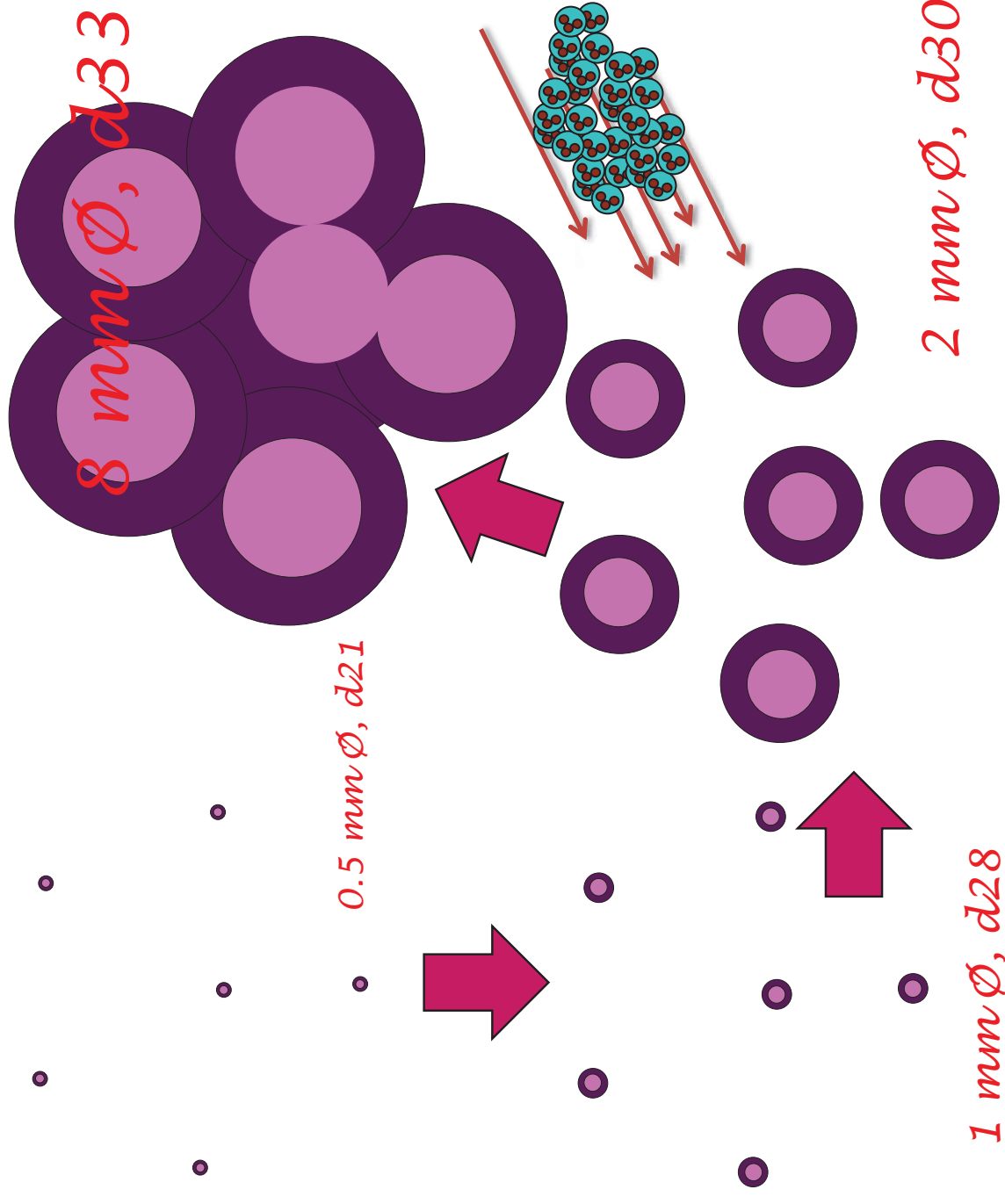


Aknowledgements



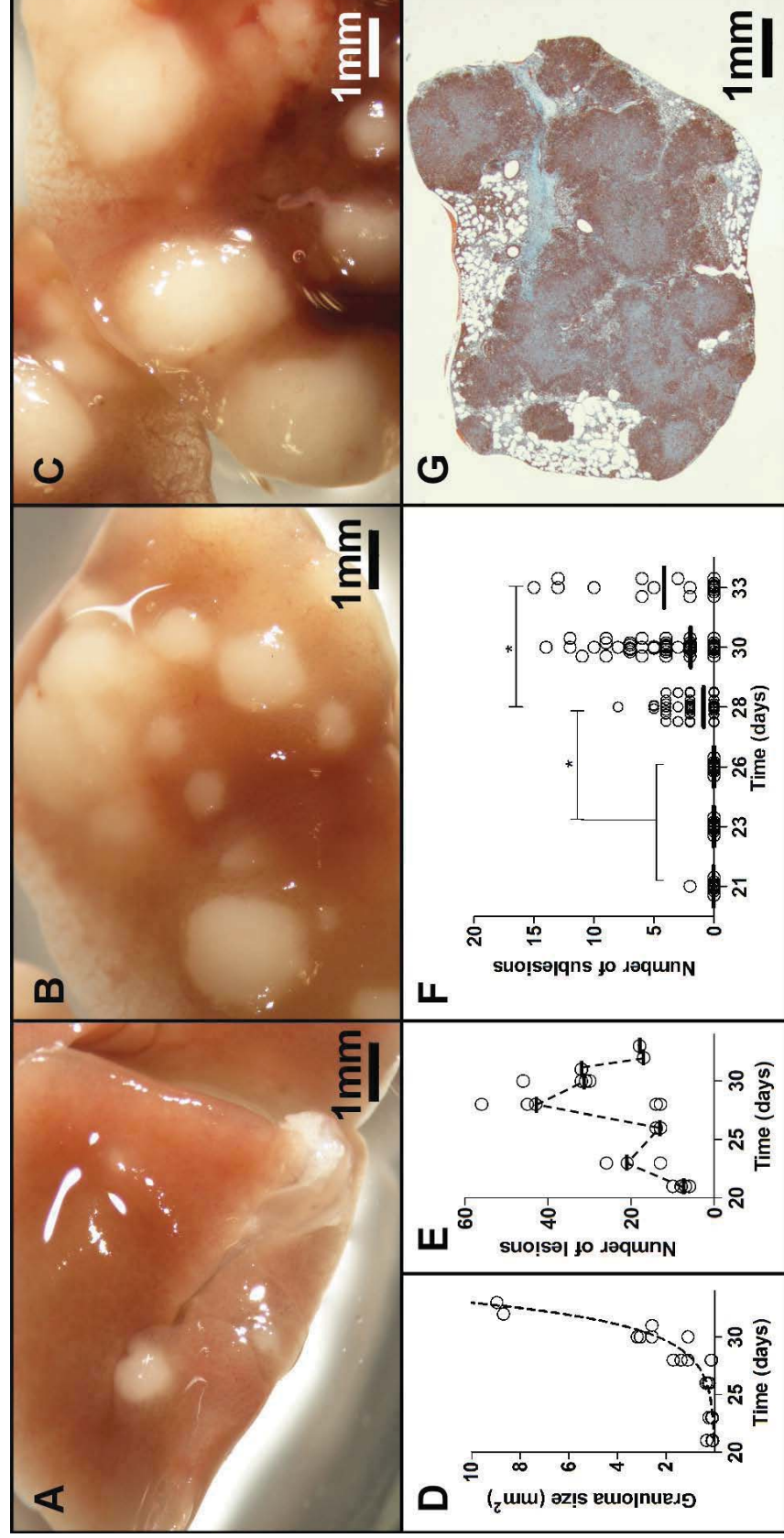
Generalitat de Catalunya
Departament de Salut





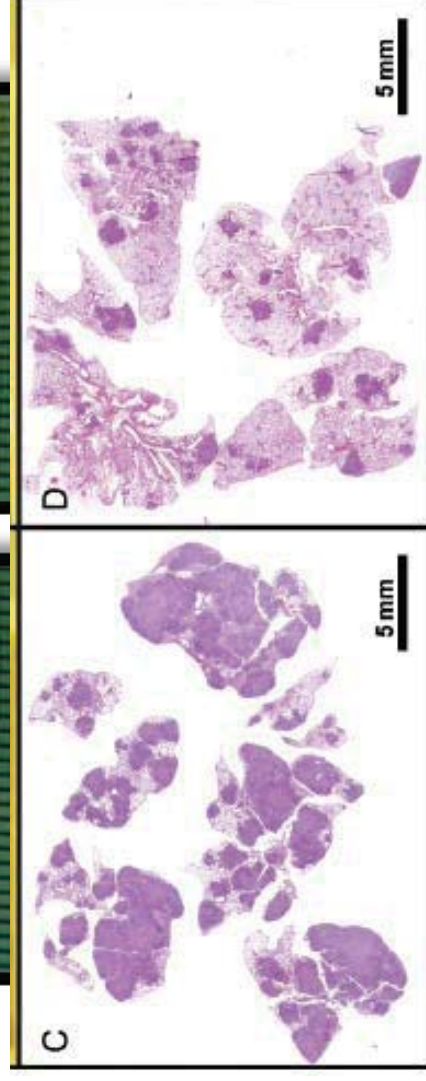
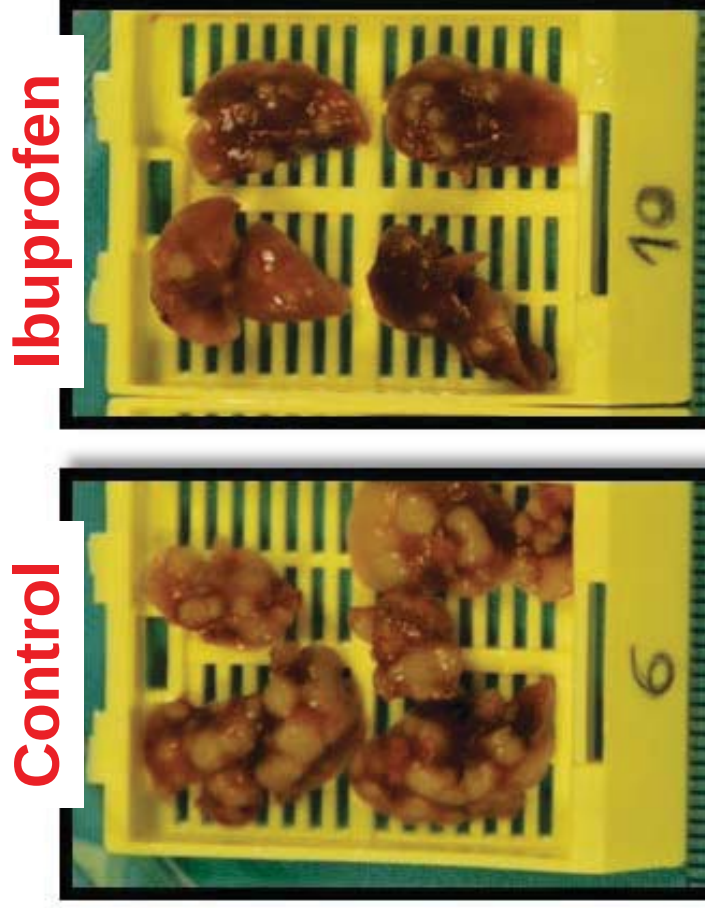
U†E

Exaggerated inflammation is clue for understanding the progression from infection to active TB

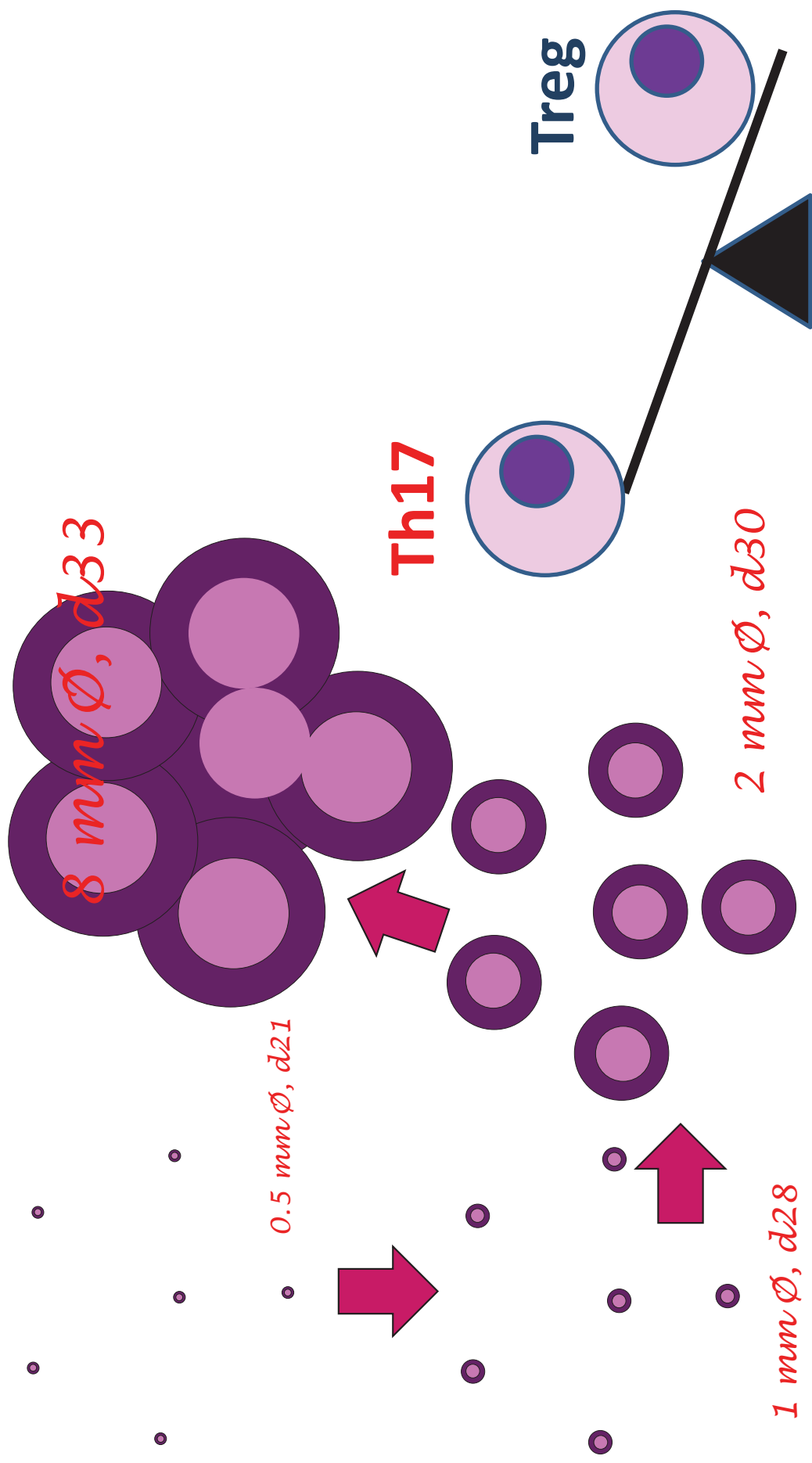


Ibuprofen Therapy Resulted in Significantly Decreased Tissue Bacillary Loads and Increased Survival in a New Murine Experimental Model of Active Tuberculosis

Cristina Vilaplana,¹ Elena Marzo,¹ Gustavo Tapia,² Jorge Diaz,¹ Vanesa Garcia,¹ and Pere-Joan Cardona¹

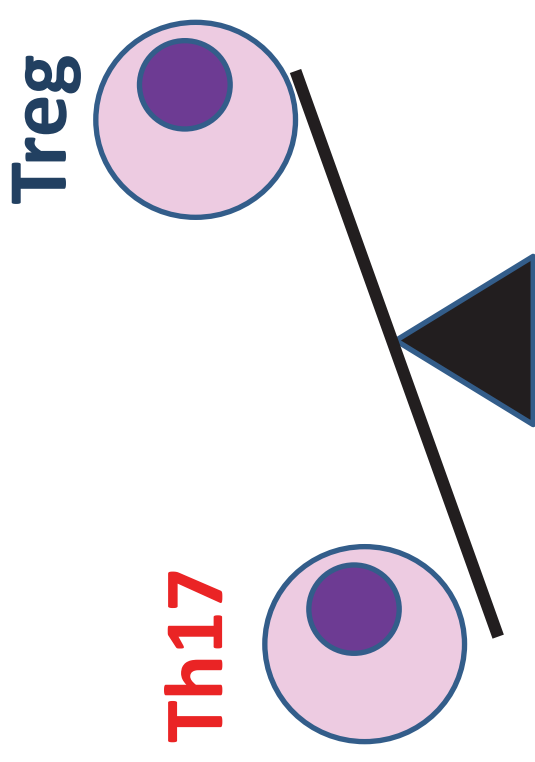
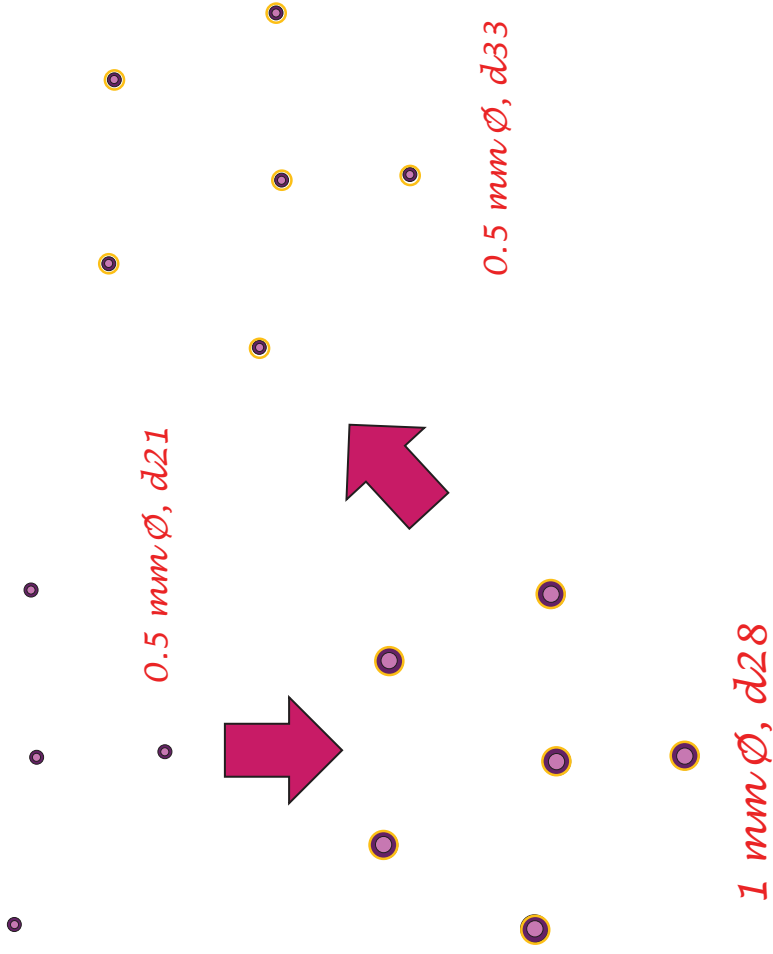


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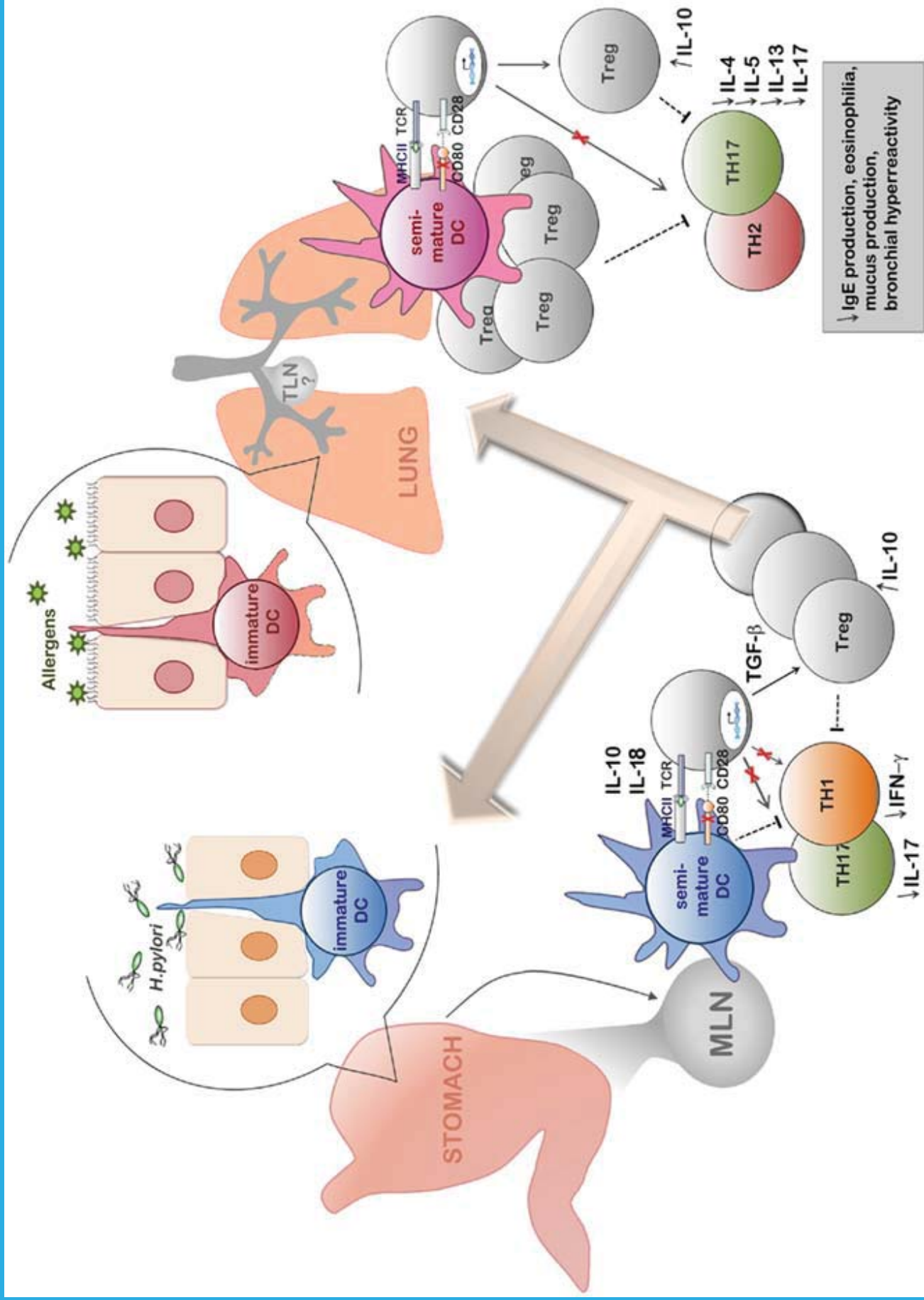


U†E

● Encapsulation

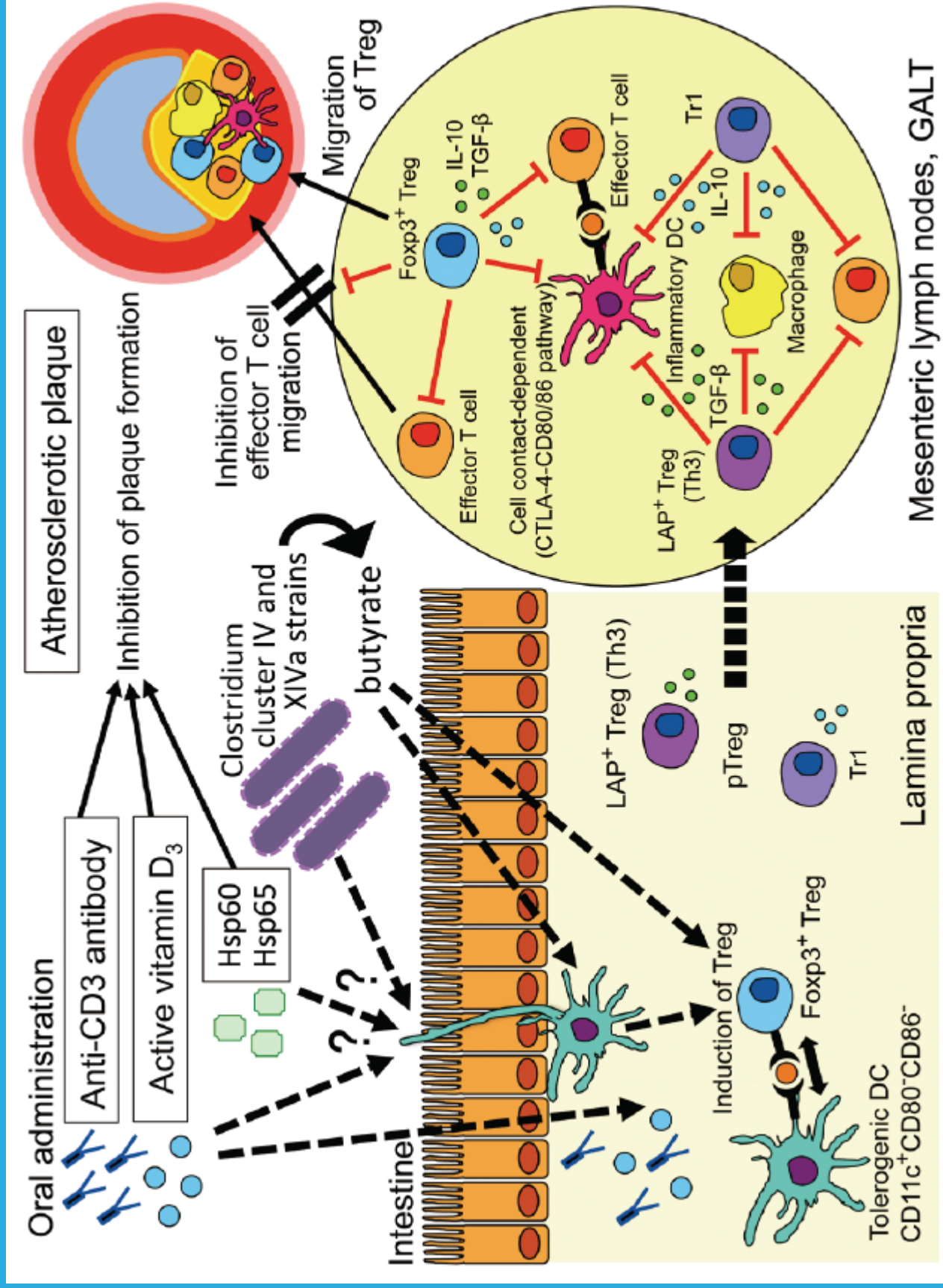


Treg induction can balance it and reduce TB risk



Connection GI – Lung, *H. pylori*

Arnold et al 2012



The case of atherosclerosis

Yamashita et al 2015

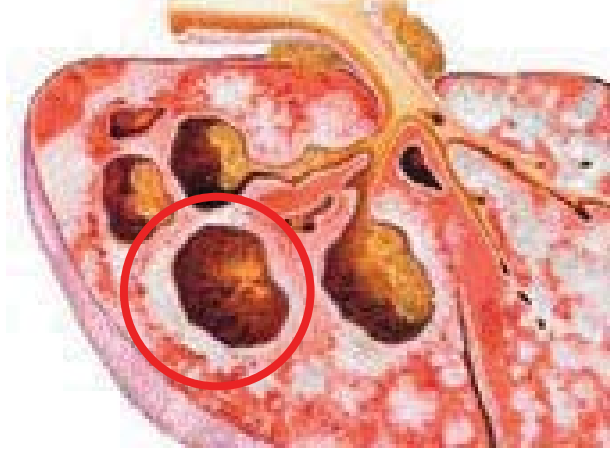
Technology definition



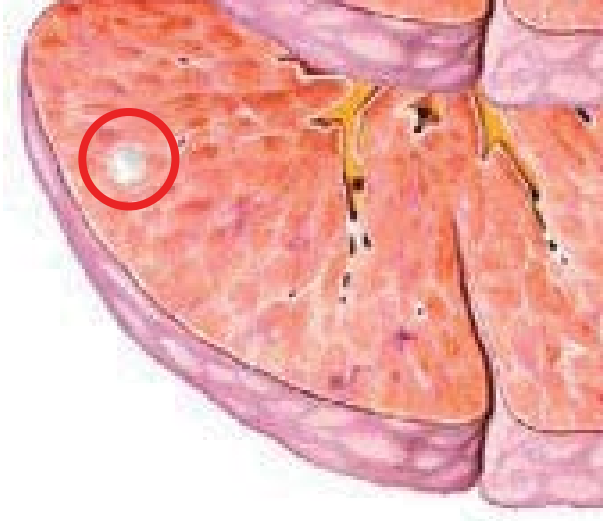
Administration of heat-killed *M.manresensis* inactivat avoids the excessive inflammatory response that causes TB.

14 days of treatment reduces the risk for 1 year.

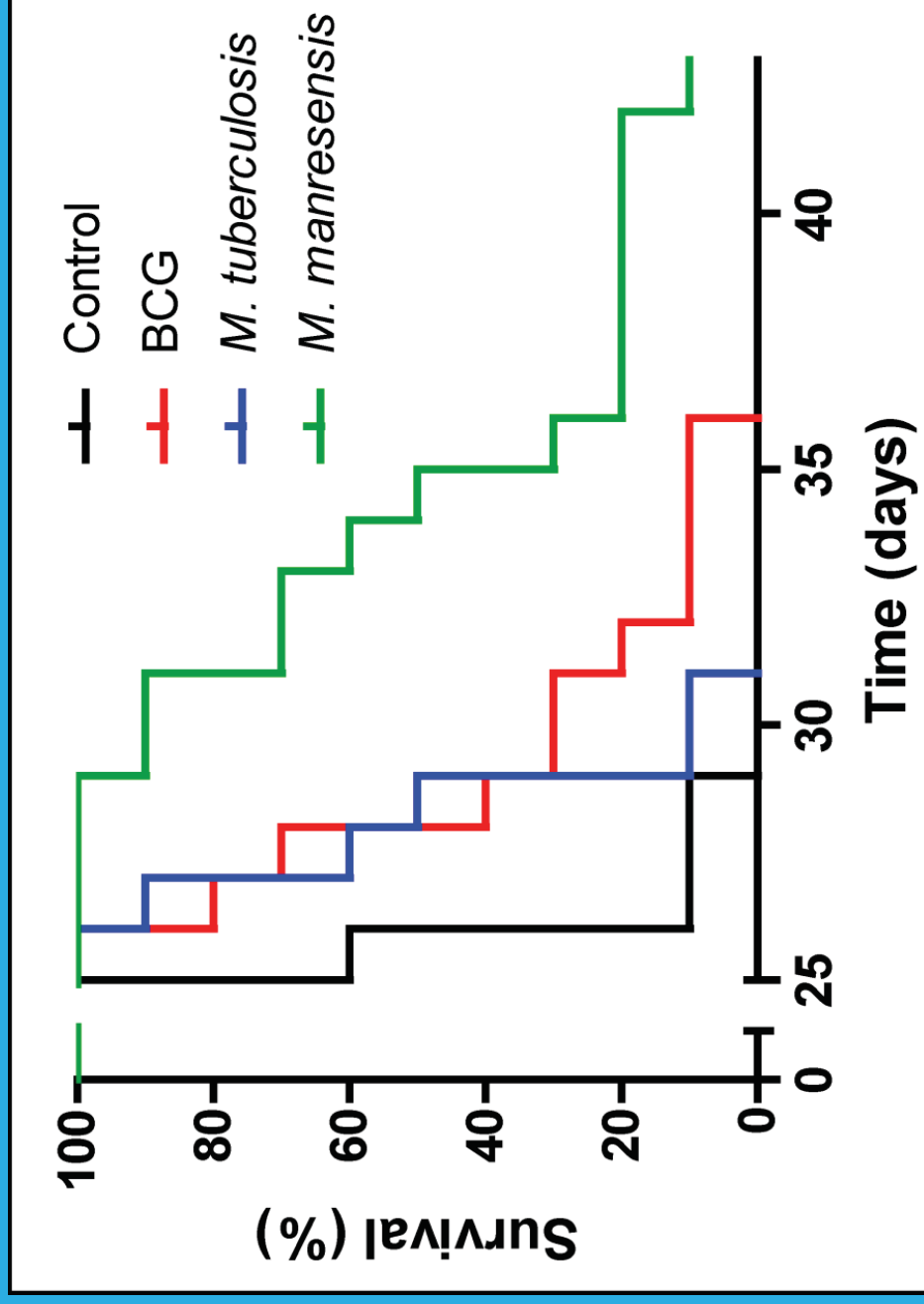
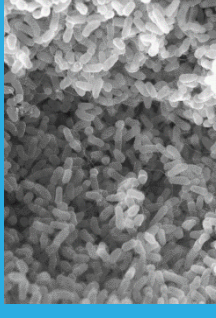
CONTROL

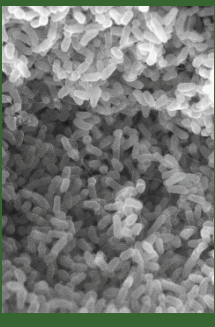


+ Nyaditum resae®

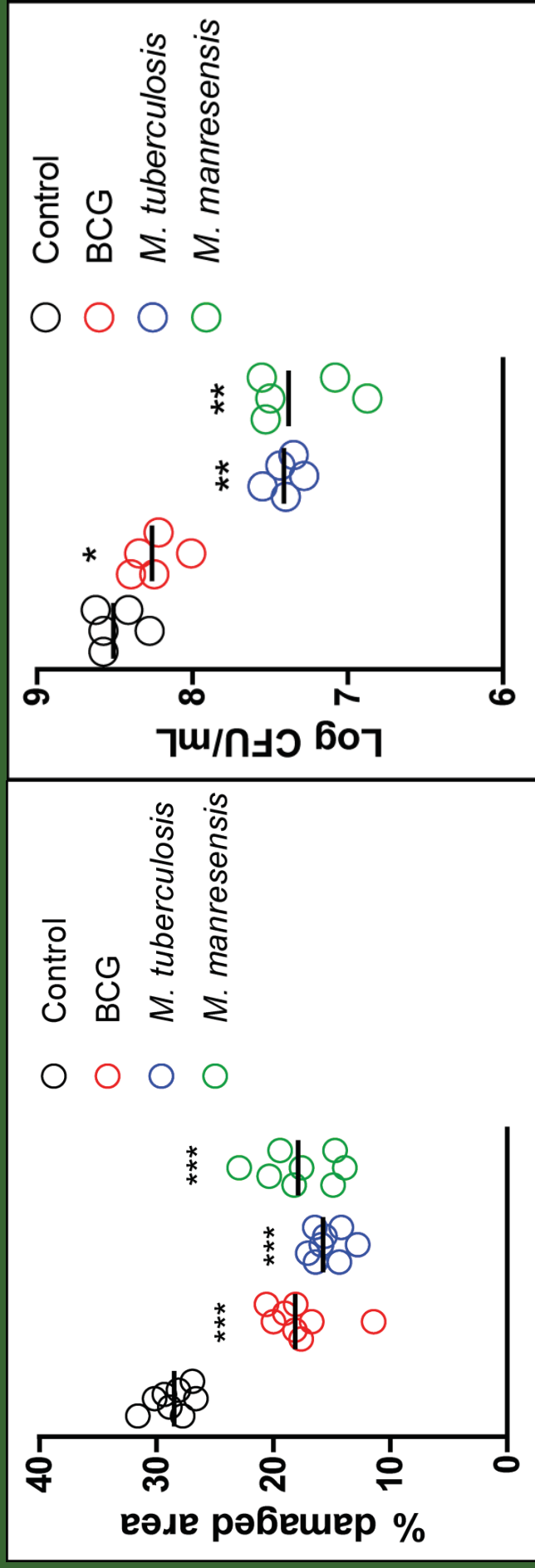


Heat-killed mycobacteria stops progression towards active TB



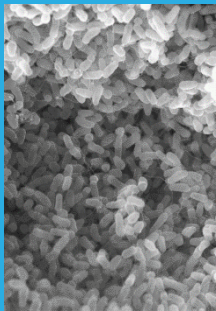
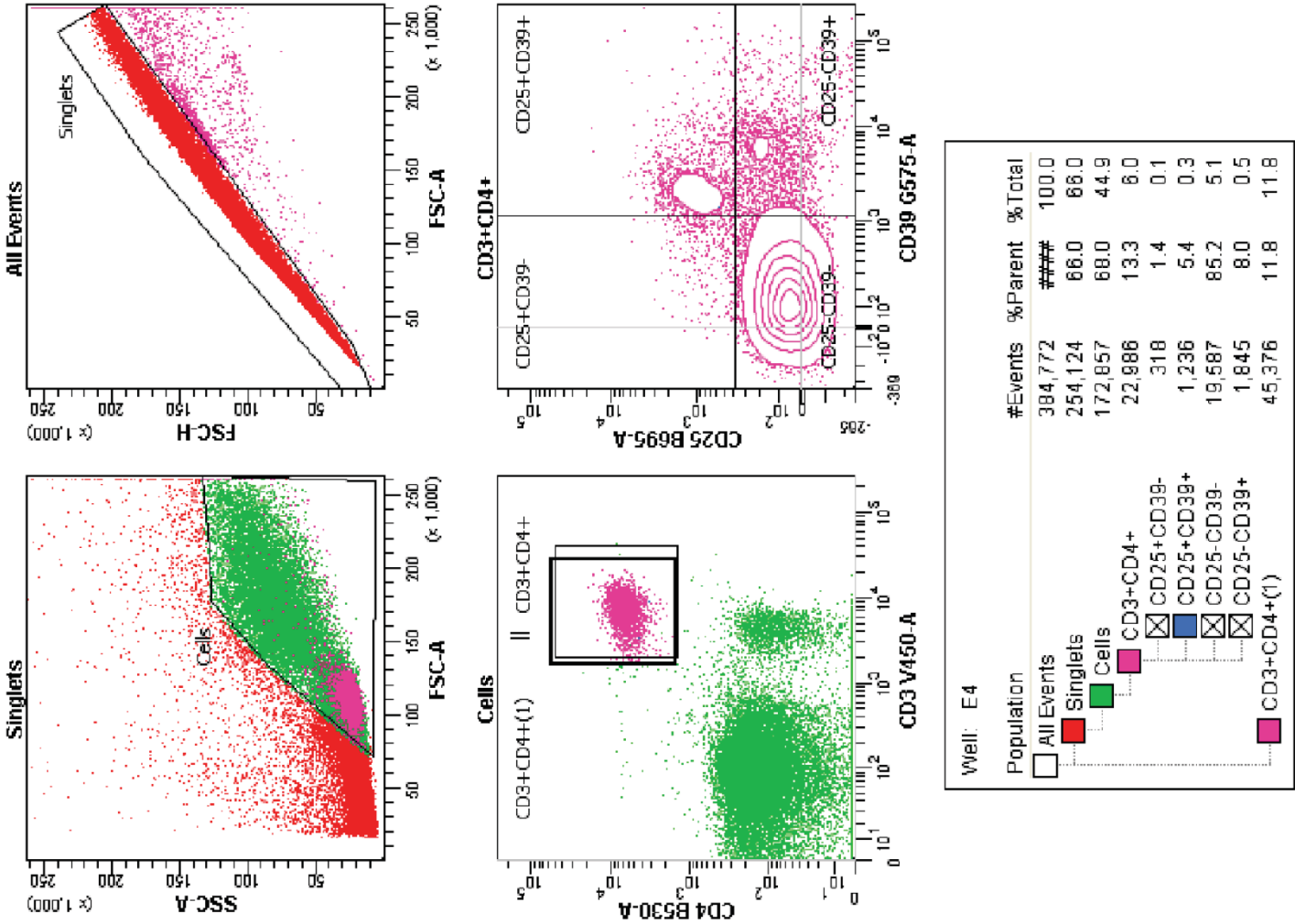


Heat-killed mycobacteria stops progression towards active TB



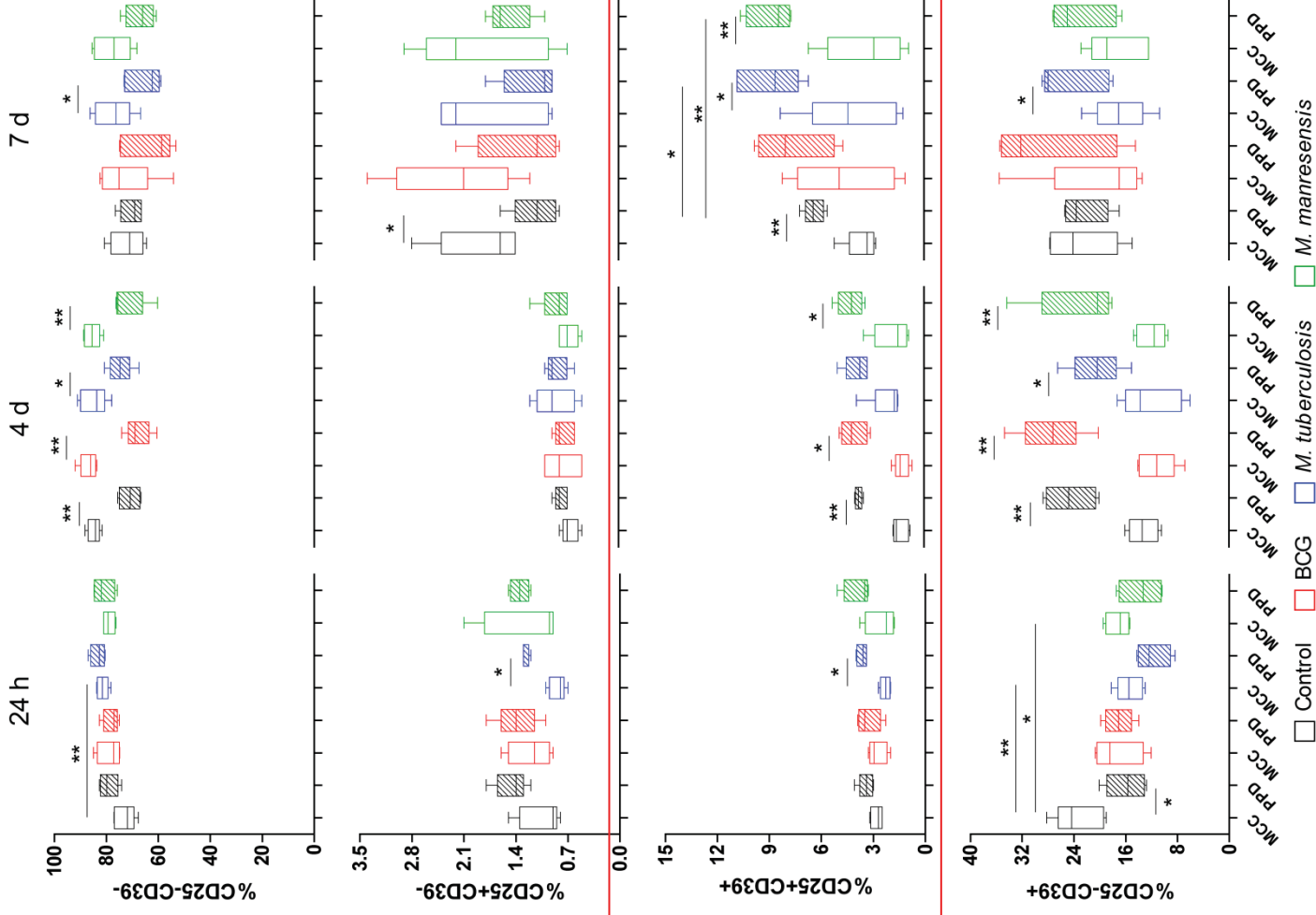
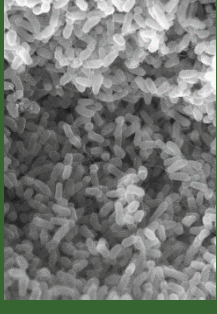
Administration of oral heat-killed mycobacteria increases Treg response

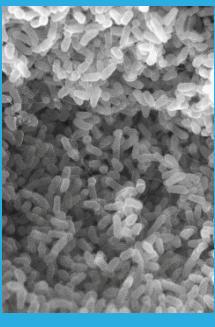
Cardona P et al submitted



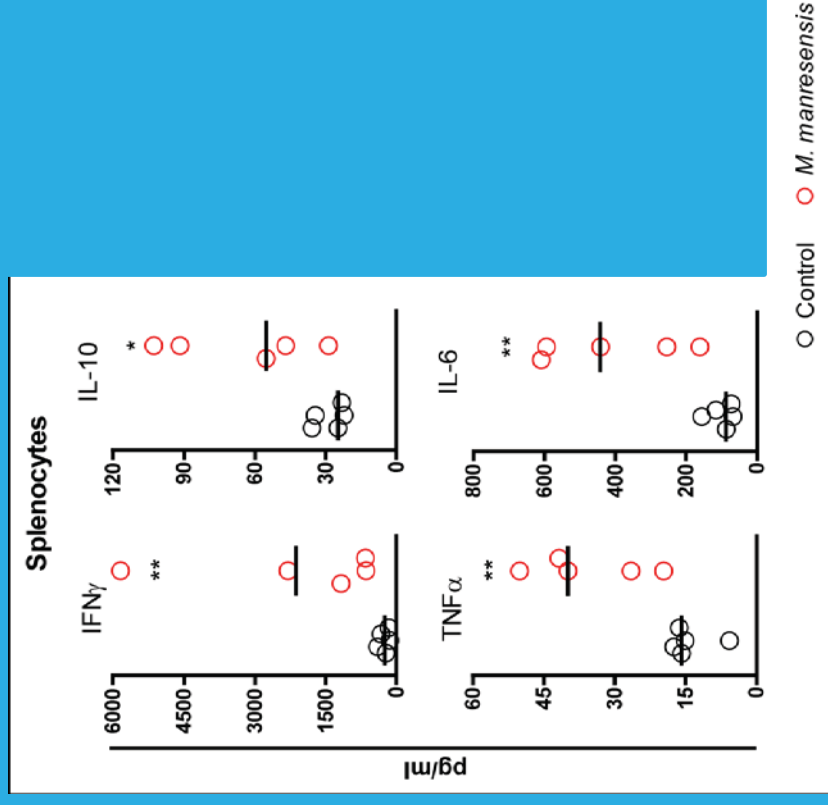
Administration of oral heat-killed mycobacteria increases Treg response

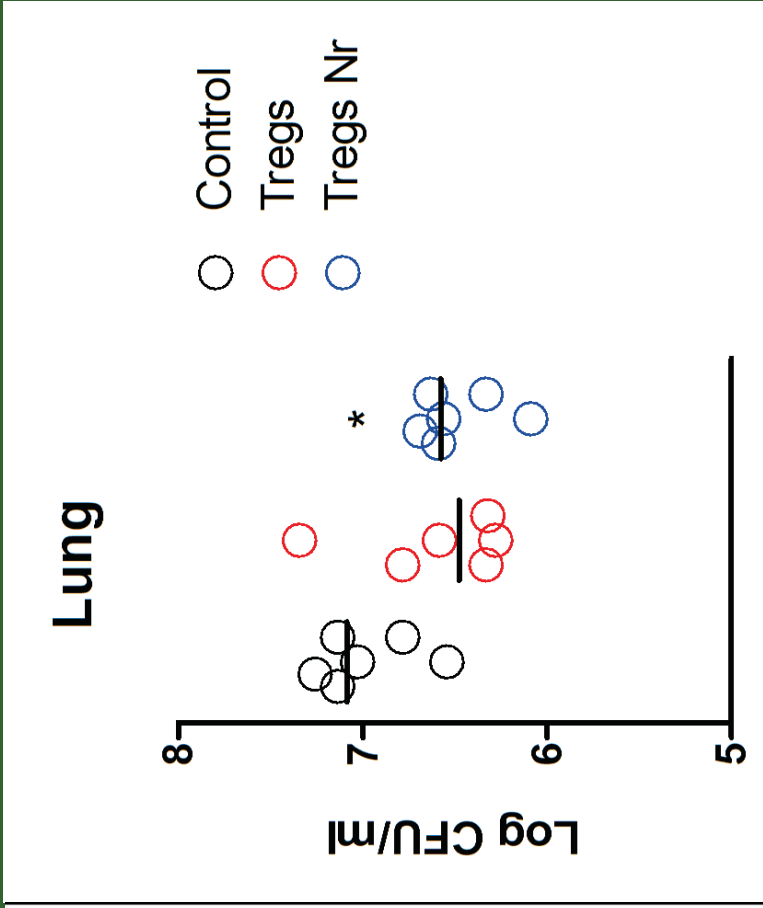
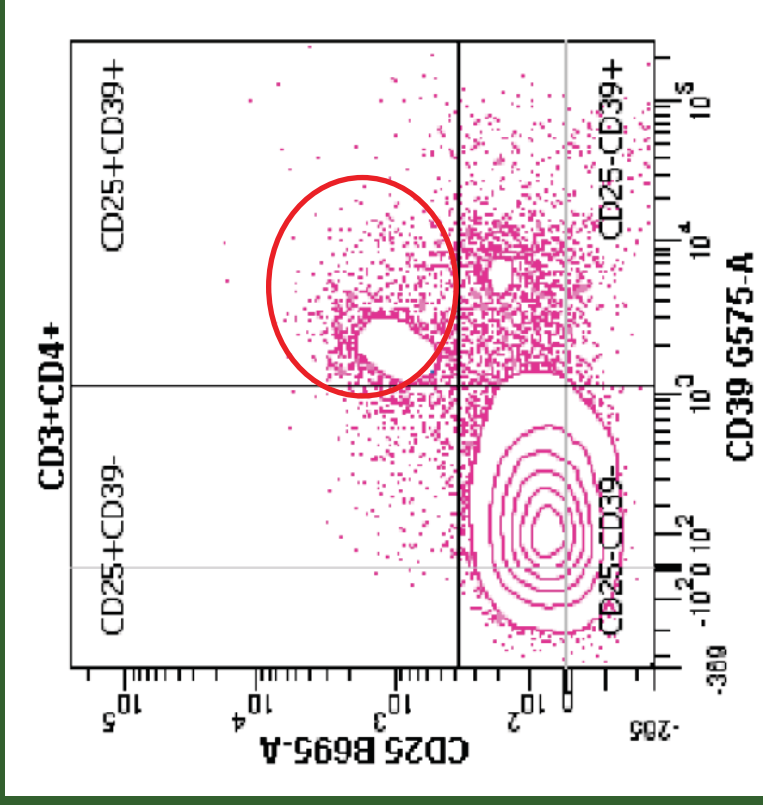
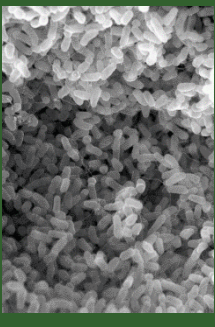
Cardona P et al submitted





Administration of oral heat-killed mycobacteria decreases the inflammatory response in the lungs





Cardona P et al In preparation

Transference of Tregs has stopped the progression towards active TB

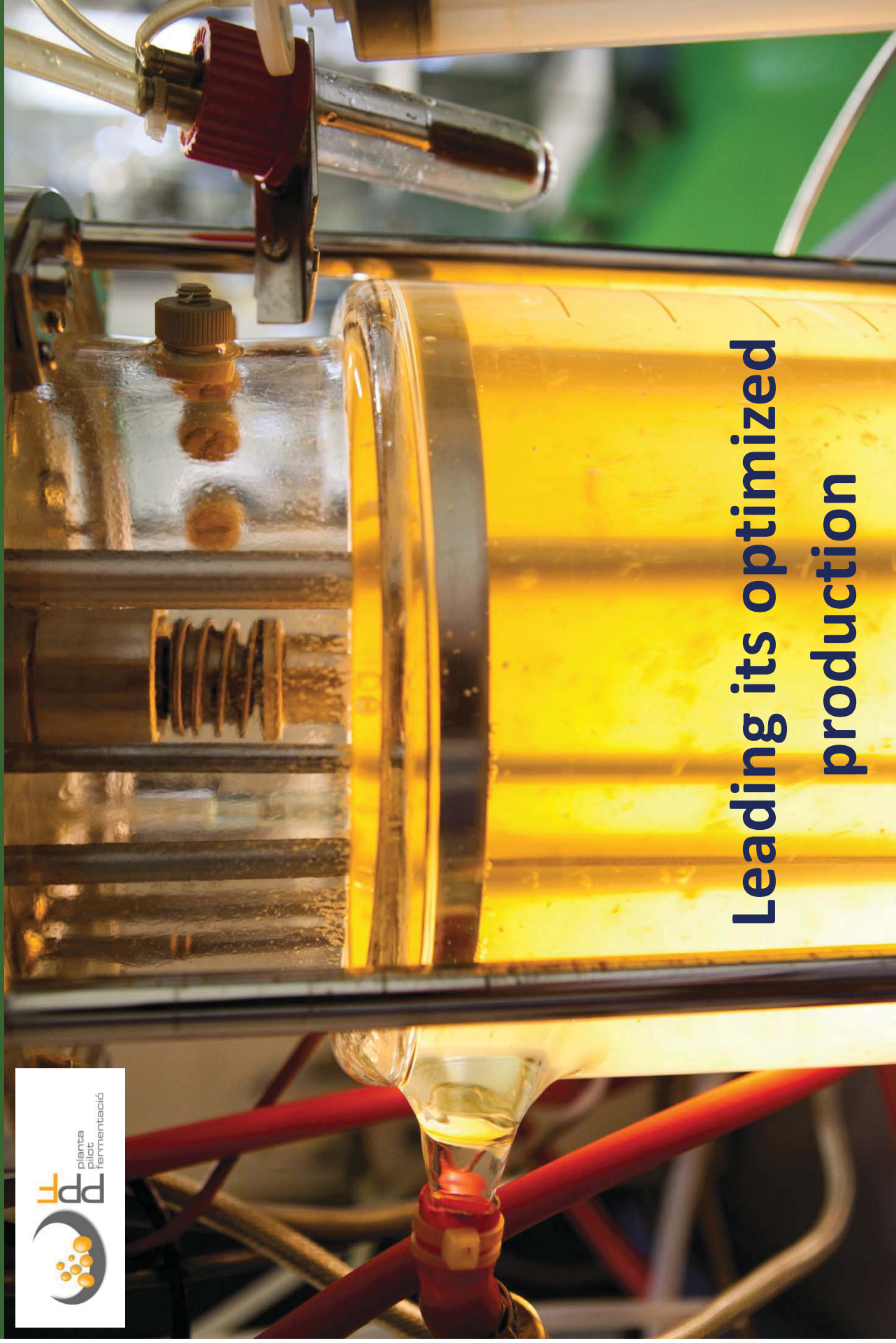


This is the origin of Manremyc, a spin-off of IGTP



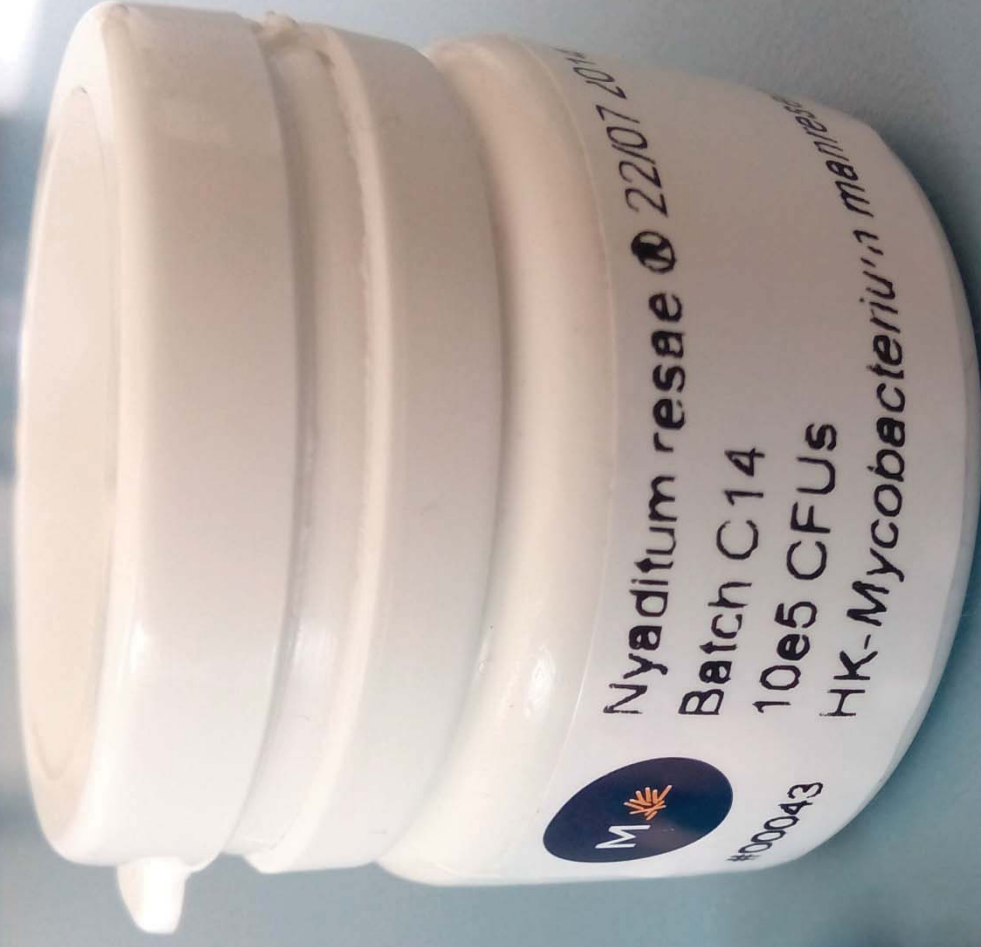
Manremyc is developing **Nyaditum resae®** a galenic formulation of *M. manneschii*

Leading its optimized production



Scale-up production





and it's widest distribution



अर्य मे विशद मेभल :

Tablets (India) Limited



Elena Ramón

El consejero delegado de Reig Jofre, Ignasi Biosca.

Reig Jofre se alía con la 'biotech' Manremyc

ACUERDO/ El laboratorio catalán distribuirá en Europa un complemento nutricional de la 'start up' contra la tuberculosis.

Gabriel Trindade. Barcelona

La farmacéutica Reig Jofre apuesta por las biotecnológicas catalanas. La compañía ha llegado a un acuerdo con la 'start up' Manremyc para el desarrollo comercial en Europa del *Nyaditum resae*, un

tes de la fusión con Natraceutical.

El acuerdo muestra el compromiso de la firma con el sector biotecnológico en el proceso de transferencia de conocimiento al mercado. "Es imprescindible que las

LA ENFERMEDAD

La tuberculosis es la segunda causa de mortalidad en el mundo por agente infeccioso. Cada año,

Safety and Immunogenicity of Nyaditum Resae® Probiotic to Protect From Tuberculosis

This study has been completed.

Sponsor:

Manresana de Micobacteriologia, SL

Information provided by (Responsible Party):

Manresana de Micobacteriologia, SL

ClinicalTrials.gov Identifier:

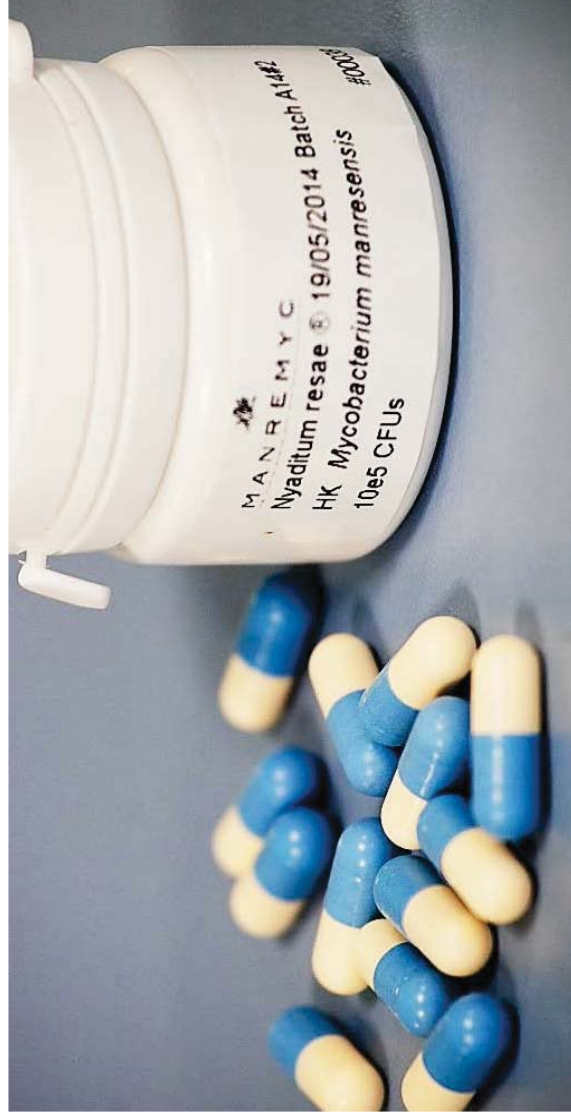
NCT02076139

First received: February 20, 2014

Last updated: August 24, 2015

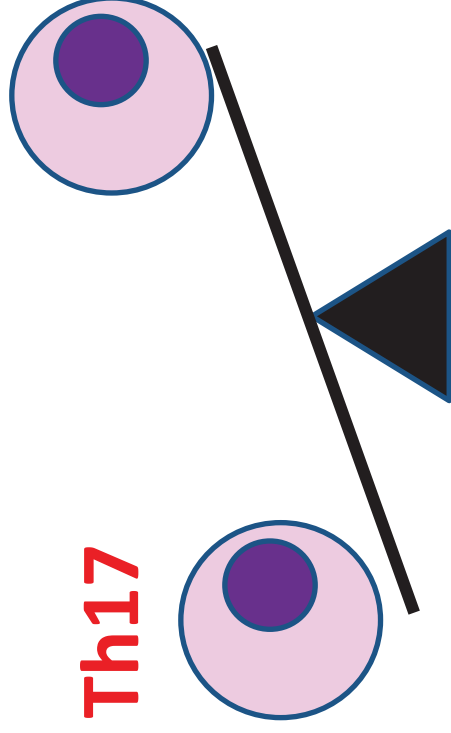
Last verified: August 2015

History of Changes



U†E

Th17



1st day in NYADATREG





NYADATREG

The **tolerability** of the food supplement **Nyaditum resae®** was **excellent**. The AE recorded were mostly gastrointestinal and mild, and no statistically significant differences were found between the treated groups with Nyaditum resae® and the Placebo group.

The analysis of the **immunogenicity** showed a significant **increase** in the population of specific effector and memory Tregs in the groups treated with Nyaditum resae® in both PPD pos & neg subjects. It has been experimentally demonstrated that these cells are the responsible for balancing the excessive inflammatory response that led to the induction of active TB.



NYADATREG

Total Adverse Events per subject, Median (IQR)

	Gastrointestinal	Non-gastrointestinal	Total	p
PLACEBO	4 (2 - 6)	2 (1 - 3)	6 (4 - 9)	NS
Nyaditum resae® low dose	2,5 (1,3 - 4)	2 (1,3 - 4,5)	4,5 (4 - 9)	NS
Nyaditum resae® high dose	2 (1,0 - 3,5)	2 (1 - 4,5)	5 (2,5 - 7,5)	NS

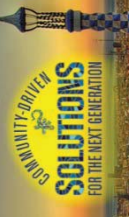
Number of subjects presenting possible or probable-related adverse events

ADVERSE EVENTS	Participants		PLACEBO (n=18)	Nyaditum resae®		p
	N	%		Low dose (n=16)	High dose (n=17)	
Gastrointestinal						
Abdominal pain	18	35.3	8	3	7	NS
Faeces deposition	18	35.3	8	6	4	NS
Faeces consistency	14	27.5	5	5	4	NS
Nausea	9	17.6	6	2	1	NS
Diarrhoea	6	11.8	3	2	1	NS
Dispepsia	4	7.8	1	3	0	NS
Faeces deposition	3	5.9	3	0	0	NS
Faeces consistency	3	5.9	3	0	0	NS
Vomits	2	3.9	1	0	1	NS
Flatulence	2	3.9	1	1	0	NS
Constipation	1	2	1	0	0	NS
Epigastralgia	1	2	1	0	0	NS
Rectal Tenesmus	1	2	0	1	0	NS
Non-Gastrointestinal						
Hepatic alterations	7	13.7	1	4	2	NS
Hematologic alterations	5	9.8	3	1	1	NS
Cephalaea, migraine	4	7.9	1	3	0	NS
Respiratory Infection	3	5.9	1	1	1	NS
Hyperglycemia	3	5.9	0	1	2	NS
Others	5	9.8	1	3	1	NS

**45th Union World Conference
on Lung Health**

BARCELONA, SPAIN · 28 OCTOBER - 1 NOVEMBER 2014

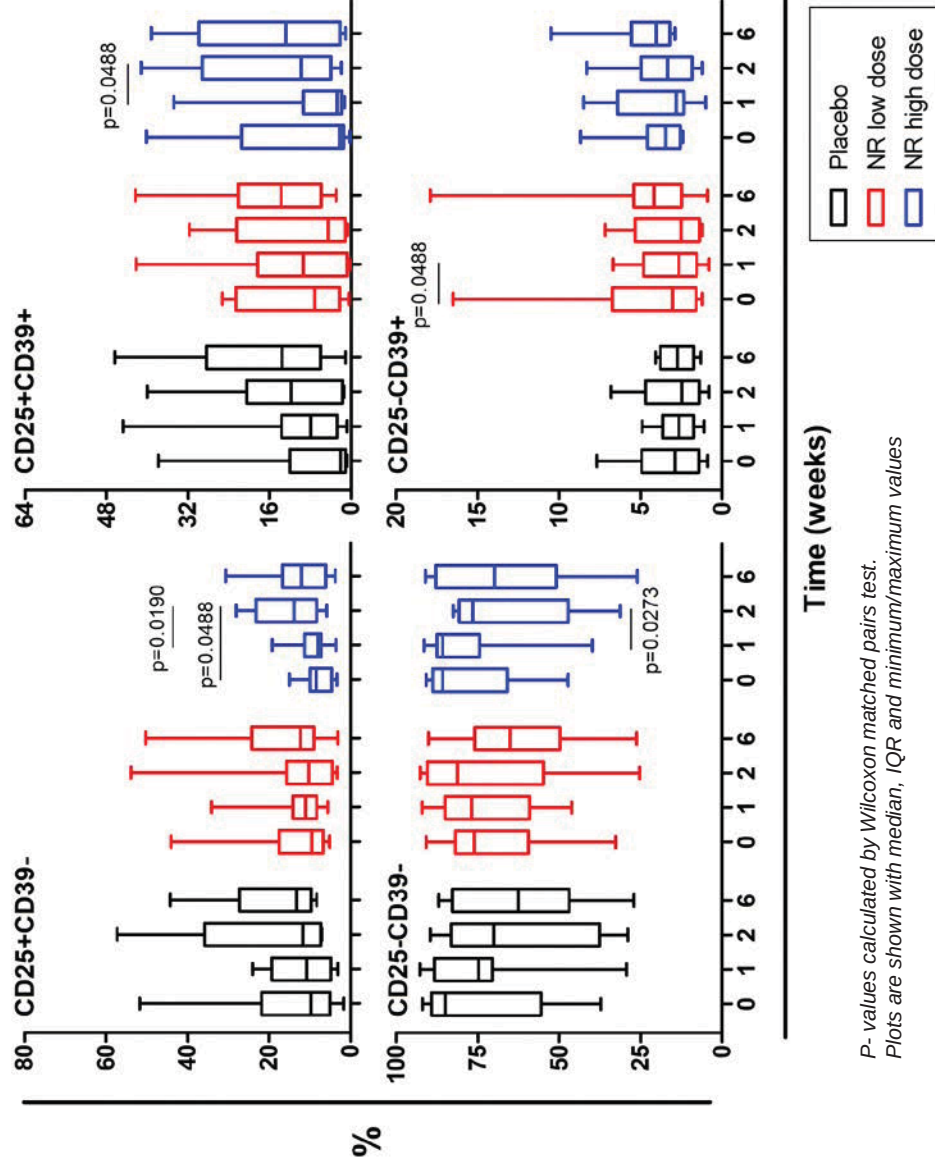
International Union Against
Tuberculosis and Lung Disease





NYADATREG

Cell populations out of the CD3+CD4+ populations in PPD- subjects



P- values calculated by Wilcoxon matched pairs test.
Plots are shown with median, IQR and minimum/maximum values



NYADATREG

NR[®] is a unique product:
There are no competitive
products. It is *not* a vaccine, it
is a nutraceutical, thus it has a
lot of regulatory advantages.

Tuberculosis (TB) Disease: Only the Tip of the Iceberg

There are **two** types of TB conditions:
TB disease and latent TB infection.

People with **TB disease** are sick from active TB germs. They usually have symptoms and may spread TB germs to others.

People with **latent TB infection** do not feel sick, do not have symptoms, and cannot spread TB germs to others.

But, if their TB germs become active, they can develop **TB disease**.

Millions of people in the U.S. have **latent TB infection**. Without treatment, they are at risk for developing **TB disease**.



TARGETS?

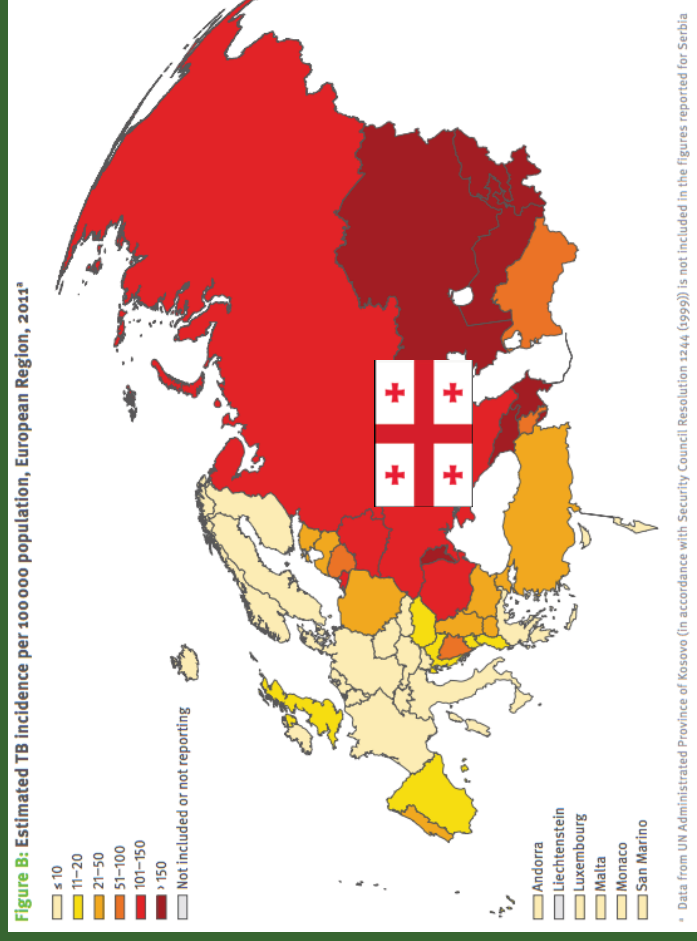
Contacts of active TB cases

Active TB cases

Subjects in risk: i.e. DM, HIV



EFFICACY CLINICAL TRIALS to be launched

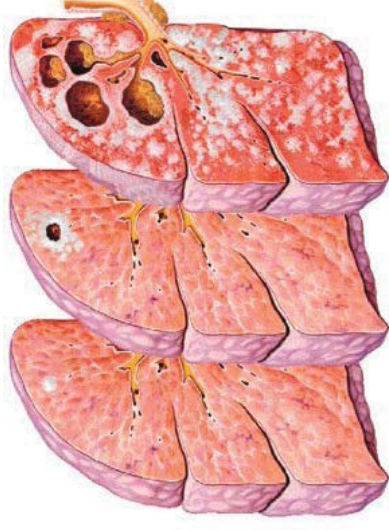




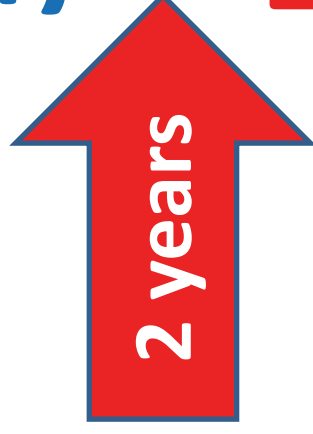
1650 subjects



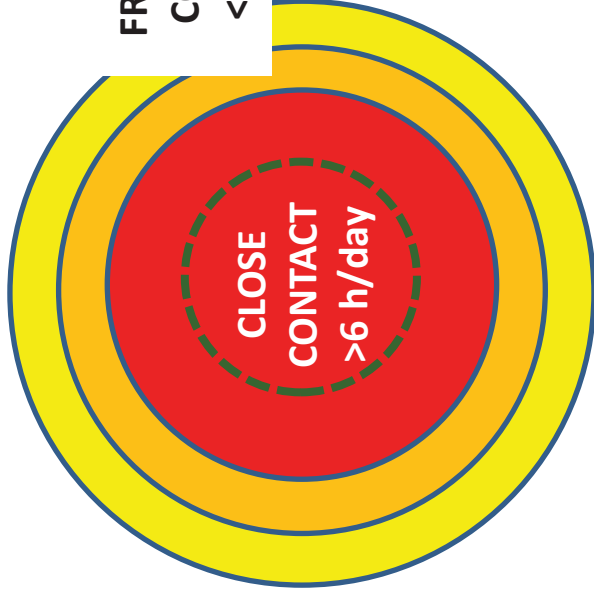
1650 subjects



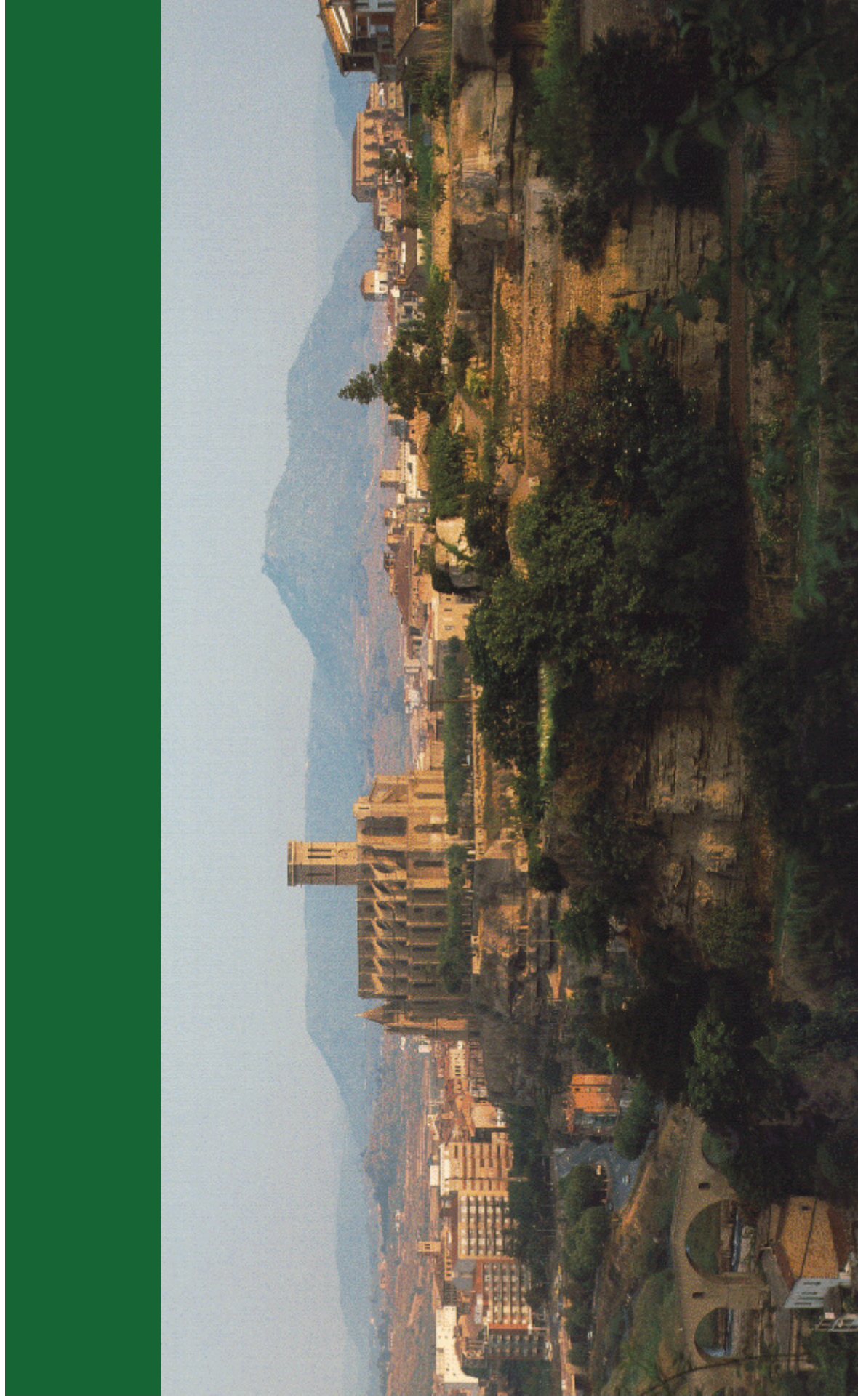
3%



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THANKS A LOT !!!