SEDANAMEDICAL

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Sedana Medical presents research grant recipients 2020

Sedana Medical AB (publ) (SEDANA: FN Stockholm) today announced the recipients of the Sedana Medical Research Grant 2020. The grant is a unique opportunity for the scientific community to increase knowledge of sedation therapies of critically ill patients.

One of Sedana Medical´s missions is to improve patient outcomes through medical innovation. Sedana Medical Research Grant (SMRG) was established in 2019 to stimulate and support international academic research and increase awareness and knowledge in sedation of critically ill, mechanically ventilated Intensive Care Unit (ICU) patients. Sedana Medical grants one to three individual academic researchers between €10 000 and €30 000 per year, for up to two years, through Sedana Medical Research Grant.

“We are happy for the great interest in moving research forward and improving patient care in this important medical field and wish all research groups success in their research,” said Peter Sackey, CMO of Sedana Medical.

Many well-written and interesting applications were submitted. After independent scientific review by two external reviewers and the Clinical Development Committee at Sedana Medical, three research projects were prioritized for funding in 2020. Each of these will contribute to forward the science and expand knowledge within ICU sedation in its own way:

Dr Christopher Lai, MD, Professor Xavier Monnet, MD, and Tài Pham, MD, PhD, Medical Intensive Care Unit, Hôpital Bicêtre, University Paris-Saclay, Le Kremlin-Bicêtre, France

Effects of sevoflurane on extravascular lung water and pulmonary vascular permeability in patients with acute respiratory distress syndrome

Patients with ARDS and treated with sevoflurane have reduced lung inflammatory response and improved oxygenation. Preclinical studies of inhaled sedation in experimental ARDS have shown reduction in lung edema but this has not been studied in humans. In this study it is hypothesized that the mechanism behind sevoflurane-mediated improved oxygenation in ARDS is reduced lung edema. This research project will evaluate the effects of inhaled sedation via the AnaConDa, compared with propofol, on extravascular lung water index (EVLWi) and the pulmonary vascular permeability index (PVPI) in ARDS patients. The aim of the study is to increase the understanding of the lung-protective effects of inhaled sedation in ARDS.

Armin Flinspach, MD and Elisabeth Adam, MD, Department of Anesthesiology, Intensive Care Medicine and Pain Therapy University Hospital, Frankfurt, Germany and Goethe University, Frankfurt, Germany

Volatile short-term sedation in patients undergoing cardiac valve surgery: a prospective randomized controlled trial

Following cardiac surgery, sedatives are routinely administered in the intensive care unit (ICU) to facilitate mechanical ventilation. Due to the advancing age of complex cardiac surgery patients, with an increasing prevalence of liver and kidney dysfunction, the metabolism of intravenous sedatives is in part severely impaired and may lead to oversedation, prolonged mechanical ventilation, delirium and drug-induced hypotension. There is increasing data that volatile sedation promotes faster patient awakening and shorter extubation times in the surgical critical care setting. Specifically, (multiple) valve surgery requiring prolonged intervention and time on cardiopulmonary bypass are different from CABG surgery. These variables may lead to different outcomes than in patients following CABG surgery. The aim of the study is to investigate whether patients undergoing cardiac valve surgery will benefit from the postoperative administration of volatile anesthetics.

Francois Labaste, MD, Professor Vincent Miniville, MD, Professor Bertrand Marcheix, MD, Service d'Anesthésie et Réanimation, Chirurgie cardiaque, Centre Hospitalier Universitaire de Toulouse, France

AnaConDa Device in cardiac surgery: an easy solution to achieve total inhalation anesthesia with sevoflurane

Volatile (inhaled) anesthetic agents have cardioprotective effects. Administration before a prolonged cardiac ischaemic episode is known as anaesthetic preconditioning. Several clinical studies indicate that volatile anesthetics given during cardiac surgery confer myocardial protection and reduce the risk of perioperative myocardial infarction, myocardial dysfunction, and death. Other randomized trials did not confirm a benefit of volatile anesthetics on long-term mortality but in these, inhaled anaesthetics were not given during cardio-pulmonary bypass (CPB) due to a lack of vaporizing methods during CPB. The research team have found and successfully implemented a method to administer inhaled anaesthetics via the AnaConDa during CPB, enabling total inhaled anesthesia throughout the entire surgical procedure. The main aim of the trial, comparing total inhaled anesthesia and postoperative sedation with intravenous anesthesia and sedation is to describe the feasibility and the safety of use of the AnaConDa during cardiac surgery with CPB.

The next SMRG call for proposals is planned for mid-2021. For more information on the grant and application procedure please visit: www.sedanamedical.com

For additional information, please contact:

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Sedana Medical is listed on Nasdaq First North Growth Market in Stockholm.
The company's Certified Adviser is Erik Penser Bank, +46 8 463 83 00, certifiedadviser@penser.se.

The information was released for public disclosure, through the agency of the contact person above, on December 17, 2020 at 08:00 am (CET).

About Sedana Medical

Sedana Medical AB (publ) develops and sells the medical device AnaConDa for the administration of volatile anaesthetics. Through a combination of AnaConDa and the drug candidate Sedaconda (isoflurane), Sedana Medical provides inhaled sedation for mechanically ventilated intensive care patients. The company has applied for marketing approval in Europe for Sedaconda and expects an approval in the second half of 2021.

Today, mechanically ventilated intensive care patients are sedated intravenously which leads to several challenges for both patients and care givers. Challenges that are solved by inhaled sedation. Globally, seven to eight million patients are estimated to be sedated in intensive care due to mechanical ventilation, evenly distributed between the US, Europe, and Asia. These patients are on average sedated three to four days. Sedana Medical estimates the total market potential to SEK 20-30 billion. Three years after marketing approval in Europe, Sedana Medical expects sales of SEK 500 million in Europe and an EBITDA margin of about 40 percent. The company has initiated processes to obtain marketing approval in the US in 2024 and in markets outside the EU.

Sedana Medical has direct sales in Benelux, France, Germany, Great Britain, the Nordics and Spain as well as external distributors in other parts of Europe, Australia, Canada, China, India, Israel, Japan, Mexico and South Korea. The company was founded in 2005 and is headquartered in Stockholm, Sweden, with medical device development in Ireland.