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**UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION**

Washington, DC 20549

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**FORM 8-K**

**CURRENT REPORT**

**Pursuant to Section 13 or 15(d) of  
The Securities Exchange Act of 1934**

**Date of Report (Date of earliest event reported): July 12, 2016**

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**Sucampo Pharmaceuticals, Inc.**

(Exact name of registrant as specified in its charter)

**Delaware**

(State or other jurisdiction of incorporation)

**001-33609**

(Commission File Number)

**30-0520478**

(IRS Employer  
Identification No.)

**805 King Farm Blvd, Suite 550  
Rockville, Maryland 20850**

(Address of principal executive offices, including zip code)

**(301) 961-3400**

(Registrant's telephone number, including area code)

**N/A**

(Former name or former address, if changed since last report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

- Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
  - Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
  - Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
  - Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))
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**Item 7.01. Regulation FD Disclosure.**

On July 12, 2016, Sucampo Pharmaceuticals, Inc. (“Company”) will make a corporate update presentation at one-on-one meetings with analysts and investors in New York at Cantor Fitzgerald’s 2<sup>nd</sup> Annual Healthcare Conference. All meetings will include written communication comprised of slides. The slides from the presentation are being furnished as Exhibit 99.1 to this Current Report on Form 8-K.

The information contained in the presentation furnished as Exhibit 99.1 shall not be deemed “filed” for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the “Exchange Act”), and is not incorporated by reference into any of the Company’s filings under the Securities Act of 1933, as amended, or the Exchange Act, whether made before or after the date hereof, except as shall be expressly set forth by specific reference in any such filing.

**Item 9.01 Financial Statements and Exhibits.****(d) Exhibits**

<b>Exhibit Number</b>	<b>Exhibit Description</b>
99.1	Presentation titled “Sucampo Pharmaceuticals, Inc. Cantor Fitzgerald’s 2 <sup>nd</sup> Annual Healthcare Conference” dated July 12, 2016.

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**SIGNATURES**

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

**SUCAMPO PHARMACEUTICALS, INC.**

By: /s/ Andrew P. Smith

Name: Andrew P. Smith Title: Chief Financial Officer

Date: July 12, 2016



EXHIBIT INDEX

**Exhibit  
Number**

**Exhibit Description**

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99.1

Presentation titled "Sucampo Pharmaceuticals, Inc. Cantor Fitzgerald's 2<sup>nd</sup> Annual Healthcare Conference" dated July 12, 2016.



Sucampo Pharmaceuticals, Inc.  
Cantor Fitzgerald's 2<sup>nd</sup> Annual Healthcare Conference

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Tuesday, July 12th

Peter Greenleaf, Chairman and Chief Executive Officer

Silvia Taylor, Senior Vice President, Investor Relations and Corporate Affairs

This presentation contains "forward-looking statements" as that term is defined in the Private Securities Litigation Reform Act of 1995. These statements are based on management's current expectations and involve risks and uncertainties, which may cause results to differ materially from those set forth in the statements. The forward-looking statements may include statements regarding product development, and other statements that are not historical facts. The following factors, among others, could cause actual results to differ from those set forth in the forward-looking statements: the impact of pharmaceutical industry regulation and health care legislation; Sucampo's ability to accurately predict future market conditions; dependence on the effectiveness of Sucampo's patents and other protections for innovative products; the effects of competitive products on Sucampo's products; and the exposure to litigation and/or regulatory actions.

No forward-looking statement can be guaranteed and actual results may differ materially from those projected. Sucampo undertakes no obligation to publicly update any forward-looking statement, whether as a result of new information, future events, or otherwise. Forward-looking statements in this press release should be evaluated together with the many uncertainties that affect Sucampo's business, particularly those mentioned in the risk factors and cautionary statements in Sucampo's most recent Form 10-K as filed with the Securities and Exchange Commission on March 11, 2016, as amended, as well as its filings with the Securities and Exchange Commission on Forms 8-K and 10-Q since the filing of the Form 10-K, all of which Sucampo incorporates by reference.

- **Fast-growing global biopharmaceutical company** with increasing revenues and focus on innovative R&D of proprietary drugs
- **Sustained revenue growth** from AMITIZA® (lubiprostone): highly differentiated product with broadest label in \$5B+ constipation market
- **Prioritized and diversified pipeline** for clinical development and/or partnering:
  - Focused on gastrointestinal, ophthalmic, autoimmune/inflammatory, and oncology disorders
- **Business development** strategy to bolster growth and diversify
  - **Acquisition of R-Tech Ueno** increases revenue and builds scale
  - **Exclusive option** to commercialize a Phase 3 program in familial adenomatous polyposis (FAP) with Cancer Prevention Pharmaceuticals
- Demonstrated **financial performance** with significant EBITDA and cash flow to fuel continued transformation
- Deep management team with **proven ability** to create value

	Secure	Advance	Transform
<b>Revenue &amp; Market Value</b>	<ul style="list-style-type: none"> <li>• <b>Focus efforts and strengthen overall capabilities</b> <ul style="list-style-type: none"> <li>- Team</li> <li>- Development capability</li> </ul> </li> <li>• <b>Secure and grow AMITIZA revenues</b> <ul style="list-style-type: none"> <li>- Efforts to ensure consistent and sustainable growth</li> <li>- Global partnerships</li> <li>- Resolution of patent litigation with first filer</li> </ul> </li> <li>• <b>Optimize Investment In current pipeline</b> <ul style="list-style-type: none"> <li>- Life cycle management (LCM)</li> <li>- Prioritize or exit programs to maximize return on investment (ongoing)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>Address capital structure</b> <ul style="list-style-type: none"> <li>- Diversify investor base</li> </ul> </li> <li>• <b>Execute on pipeline opportunities</b> <ul style="list-style-type: none"> <li>- File LCM programs for regulatory approvals</li> <li>- Progress programs in clinical development to Phase 3</li> </ul> </li> <li>• <b>BD strategy</b> <ul style="list-style-type: none"> <li>- Additional accretive transactions</li> <li>- Acquire new development programs to strengthen and accelerate the pipeline</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>Launch AMITIZA LCM programs</b></li> <li>• <b>Launch new pipeline products</b></li> <li>• <b>Sustainable pipeline of drug candidates with near term launch opportunities</b></li> <li>• <b>Execute more transformative deals</b></li> <li>• <b>Execute value creation strategy</b></li> </ul>
	<b>Achieved</b>	<b>Today</b>	<b>2017+</b>



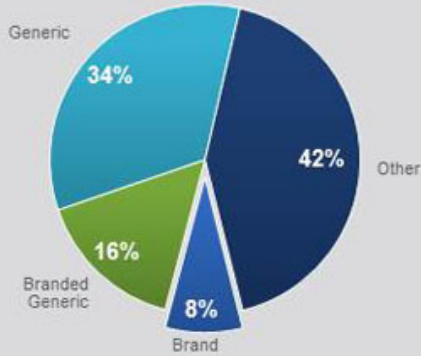
## ***Significant unmet need in efficacy, safety and patient satisfaction***

- U.S. prescription and OTC market **~\$5.2B**
  - \$4.4B branded + generic market, **~50M** annual scripts <sup>(1)</sup>
  - Additional \$800M in revenue from OTC market, 23M units (30-day supply) sold annually
- Majority of prescription and OTC treated patients currently not satisfied with treatment
  - Current OTC treatment leaves significant unmet need offering only temporary relief
    - 60%+ of patients on OTCs report ineffective symptom relief
  - Few patients aware of chronic Rx options



1) Source: IMS and Wall Street research.

## Share of Prescription Constipation Products



Strategy: convert from OTC and generics to AMITIZA

Source: Wall Street research and Company estimates.

### *Chronic Idiopathic Constipation (CIC)*

- Infrequent and difficult passage of stool over 12 non-consecutive weeks within a 12-month period
- ~14% to 16% of adults globally

### *Irritable Bowel Syndrome with Constipation (IBS-C)*

- Disorder of the intestines; symptoms are severe cramping, pain, bloating and changes of bowel habits including constipation
- IBS: ~15% of adults globally, 1/3 of which is IBS-C

### *Opioid-Induced Constipation-Non Cancer (OIC)*

- Common adverse effect of chronic opioid use; infrequent and incomplete evacuation of stool, hard stool consistency, & straining
- ~2M-4M moderate to severe sufferers in U.S.

- **Only product approved for all 3 indications**
  - CIC
  - IBS-C
  - OIC (non-cancer)
- **Differentiated MOA: localized CIC-2 activation with dual action**
  - Increases intestinal fluid secretion
  - Stimulates recovery of mucosal barrier function
- **Key product characteristics**
  - Locally-acting
  - Rapid and predictable onset of action
- **Demonstrated efficacy and tolerability**
  - Most experienced product: 2M patients and 11M+ exposures over 10+ years
  - Well-tolerated product with established safety profile:
    - No black box warning
- **More than 90% of lives covered nationally** across all payor channels

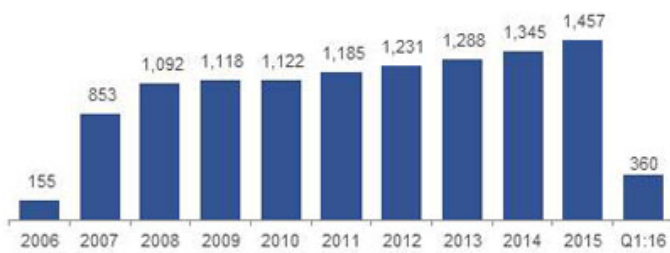


## Q1:16 TRx YoY growth: 5%

- Growth highlights strong and enduring position in the constipation market
- Reaffirm expectation of continued mid-to-high single digit prescription growth

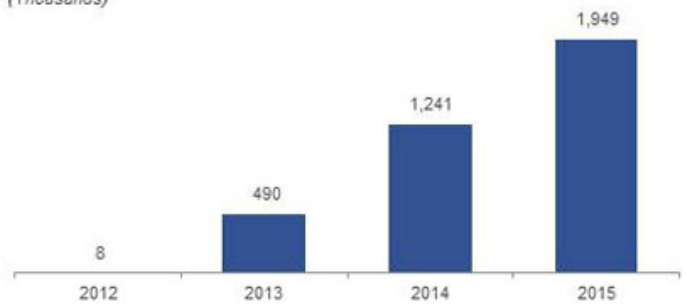
### U.S. TRx Scripts

(Thousands)



### Japan TRx Scripts<sup>(1)</sup>

(Thousands)



1) Based on management assumption of 46 capsules per TRx.

- **Takeda global rights to AMITIZA** (except Japan, China), markets AMITIZA in U.S., U.K. and Switzerland; 800 sales reps in U.S.
  - Takeda is **#1 gastroenterology company world wide** and has rights to all markets except Japan (Mylan) and China
  - Royalty arrangement in North America (18%- 26%)
  - Takeda reimburses majority of development costs for new formulations/indications
  - **50% split of annual AMITIZA net sales revenue** for North America beginning January 2021
- Agreement with **Mylan** for Japan
  - Revenue from product sales to Mylan
- **Harbin Gloria** developing AMITIZA in China
- Non-exclusive licensing agreement with **Par** beginning January 2021 with attractive economics
  - **50% gross profit split** of generic lubiprostone January 2021+



## AMITIZA is well positioned for continued growth

	Drug	Rx or OTC	Company	Target Indication			Global Market Share	Commentary
				CIC	IBS-C	OIC		
Branded / Patented	<b>amitiza</b> lubiprostone	Rx	Sucampo (Marketed by Takeda)	✓ <i>All adults</i>	✓ <i>Adult women</i>	✓ <i>All adults</i>	3%	<ul style="list-style-type: none"> <li>Long history of usage</li> <li>Well-tolerated product with an established safety profile</li> <li>No limitation on duration of use</li> </ul>
	<b>Linzess</b> <sup>®</sup> (linaclotide) capsules	Rx	Ironwood (Marketed by Actavis)	✓ <i>All adults</i>	✓ <i>All adults</i>	✗	3%	<ul style="list-style-type: none"> <li>Black box warning against pediatric use</li> <li>Often used for the most severe patients</li> <li>Food restrictions</li> <li>Convenient dosing</li> </ul>
	<b>RELISTOR</b> methylnaloxonium bromide	Rx	Salix	✗	✗	✓ <i>All adults</i>	~1%	<ul style="list-style-type: none"> <li>Very little market penetration due to method of drug delivery (via injection)</li> </ul>
	<b>movantik</b> <sup>™</sup> naloxegol tablets	Rx	AstraZeneca	✗	✗	✓ <i>All adults</i>	~1%	<ul style="list-style-type: none"> <li>Limited uptake since launch in March 2015 for OIC</li> <li>Post marketing safety commitment in place</li> </ul>
<b>All Branded / Patented:</b>							<b>8%</b>	
Generic	<b>MiraLAX</b>	OTC	Schering-Plough	✗	✗	✗	28%	<ul style="list-style-type: none"> <li>Short-term indications no longer than 2 weeks</li> <li>Used to treat one-time symptoms but not chronic conditions</li> <li>Use of laxatives for CIC and IBS-C is not supported by long-term, well-controlled clinical trial data</li> </ul>
	<b>Bentyl</b> (Dicyclomine)	Rx	Pantheon & Akorn (Marketed by Axcan)	✗	✗	✗	11%	<ul style="list-style-type: none"> <li>Does not relieve constipation</li> <li>Primarily used to reduce stomach and intestinal cramping that is symptom of IBS</li> </ul>
	<b>Other Therapies</b>	Various		✗	✗	✗	53%	<ul style="list-style-type: none"> <li>Includes Stool softener with stim (Docusate/ Senna S), PEG preps (Osmi Prep), Irritant-stimulant (Ex-Lax, Dulcolax), Bulk Fiber, Oils and Enemas</li> </ul>
<b>All Generic:</b>							<b>92%</b>	



## *Expand AMITIZA franchise through new formulation and new indication*

### New Formulation

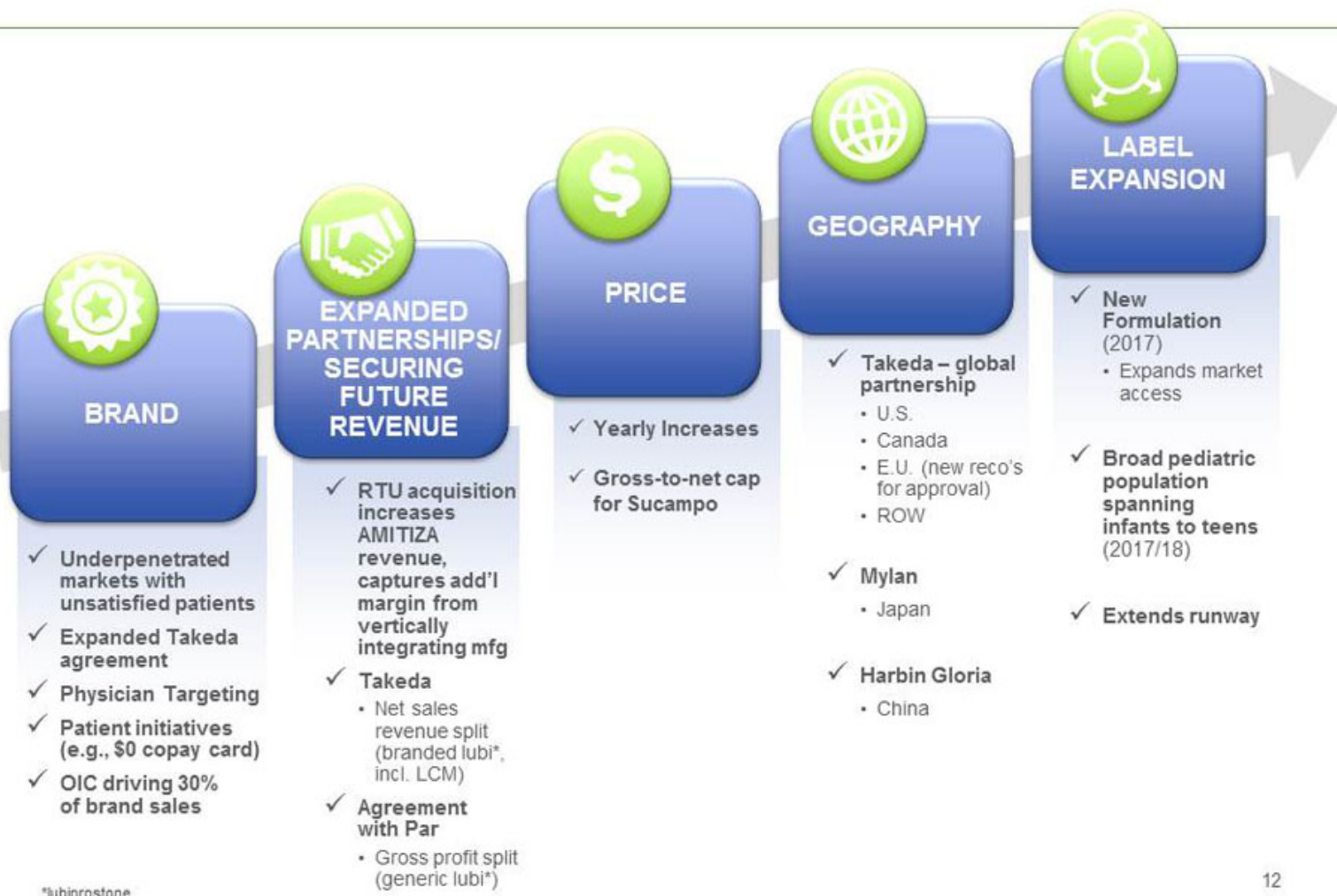
- Alternate formulation for additional adult and pediatric patients who cannot tolerate capsules, or naso-gastric tube fed patients
- ~40% of adults have difficulty swallowing pills
- Next step: **Phase 3**, initiates for adults 2H16
- **File NDA** for alternate formulation for adults 2H17
- Takeda to reimburse 100% of development costs



### New Pediatric Functional Constipation (PFC) Indication

- U.S. Prevalence: 18% of pediatric population (13.5M)
- Unmet need: No FDA-approved therapies for PFC (black box warning for linaclotide; prucalopride failed in Phase 4); patients use OTC drugs off-label
- **Phase 3** program:
  - With current capsule formulation: Children 6-17 years
    - Trial ongoing; Data 2H16 (pivotal and open-label)
    - **File sNDA 2H16**
  - With alternate formulation: Children 6 months-6 years
    - Pivotal trial initiates mid-2017 (open-label 2H17)
- Takeda reimbursing 67% of development costs





\*lubiprostone



Program	Target	First Indication	Development Stage	NDA / MAA Filing	Approval
<b>GI/Metabolic/Inflammation</b>					
AMITIZA	CIC2	Pediatric functional constipation	P3	2016	2017
Lubiprostone Microparticle Formulation	CIC2	Pediatric functional constipation (1); adult CIC (2)	P3	2018(1); 2017 (2)	2019 (1); 2018 (2)
CPP-1X/sulindac combination product	Polyamines	Familial Adenomatous Polyposis	P3	2018	2019
RTU-1096	Vap-1 inhibitor	Auto-immune/inflammatory	P1		
<b>Ophthalmology</b>					
RTU-1096	Vap-1 inhibitor	Auto-immune/inflammatory	P1 Preclinical		
<b>Oncology*</b>					
RTU-1096	Vap-1 inhibitor	Immuno-oncology	P1		
<b>Other</b>					
RTU-009	Vap-1 inhibitor	Acute cerebral infarction	Preclinical		

*\*P2 study for cobiprostone in oral mucositis in head and neck cancer discontinued after futility analysis; no safety concerns*

Sucampo Program	RTU Program	Option
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- **Significant opportunity**

- **Orphan indication** in U.S. for familial adenomatous polyposis (FAP)
  - ~30K cases currently
- **No approved** treatment options
- **Dire** patient need
  - 100% risk of colon cancer
  - Progressive removal of colon/rectum
  - Poor quality of life
- Incremental opportunity of **~\$200M-\$400M**



- **De-risked**

- **Exclusive Option** with Cancer Prevention Pharma for N. America
- Strong scientific rationale and **Phase 2 proof of concept** data in sporadic colon adenoma/FAP
- **Defined** regulatory pathway



- **Clinical development**

- **Phase 3** ongoing; fully enrolled
- Futility analysis expected in 2H16
- Co-formulation efforts ongoing

- **Additional opportunities in sporadic colon adenoma therapy (CAT)**

- **VAP-1**
  - VAP-1 is an enzyme and adhesion receptor
  
- **RTU-1096**
  - MAD Phase 1 Results
    - No significant safety issues
    - Evidence of inhibition of systemic VAP-1 at all doses tested
    - Provides evidence of proof of mechanism
    - 7 day study
  
- Major market patent coverage into 2029 for composition of matter
  - Potential for future extension

Product	Event	Expected Timing
AMITIZA (lubiprostone)	Initiation of Phase 3 pivotal alternate formulation in adults	2H16
AMITIZA (lubiprostone)	Top-line data from Phase 3 pivotal PFC (6-17 years)	
AMITIZA (lubiprostone)	Top-line data from Phase 3 open-label PFC (6-17 years)	
AMITIZA (lubiprostone)	File sNDA for PFC (6-17 years)	
CPP-1X/sulindac combination product	Phase 3 futility analysis	
AMITIZA (lubiprostone)	Top-line data from Phase 3 pivotal alternate formulation in adults	1H17
AMITIZA (lubiprostone)	Initiation of Phase 3 pivotal PFC (6 months-6 years)	Mid-2017
AMITIZA (lubiprostone)	File NDA for alternate formulation for adults in the U.S.	2H17
AMITIZA (lubiprostone)	Initiation of Phase 3 open-label PFC (6 months – 6 years)	

Summary of Results	Q1-16	% Increase on Q1-15
Revenue	\$47.2 M*	60%
Net Loss GAAP	(\$4.1 M)	(163%)
EPS GAAP - diluted	(\$0.10)	(168%)
EBITDA	\$14.6M	50%
Adjusted Net Income	\$9.0M	40%
Adjusted EPS - diluted	\$0.21	48%
Adjusted EBITDA	\$20.2M	87%

Balance Sheet	End 3/31/16	Change	End 12/13/15
Cash, Cash Equivalents and Restricted Cash	\$157.0M	(\$6.5M)	\$163.5M
Notes Payable	\$235.7M	\$16.7M	\$252.4M
Net Debt	\$78.7M***	(\$10.2M)	\$88.9M

## 2016 Revenue Guidance

Total revenue:	<b>\$195M - \$205M</b>
Adjusted net income:	<b>\$45M to \$50M</b>
Adjusted EPS:	<b>\$0.97 to \$1.07</b>
Adjusted EBITDA:	<b>\$100M to \$105M</b>

- Guidance excludes amortization of acquired intangibles of approximately \$17.6 million and amortization of the remaining inventory step-up costs of approximately \$8.9 million.

\*Includes \$12.4M as a result of the R-Tech Ueno acquisition

\*\* Including current portions of \$27.8 million (3/31/16) and \$39.1 million (12/13/15)

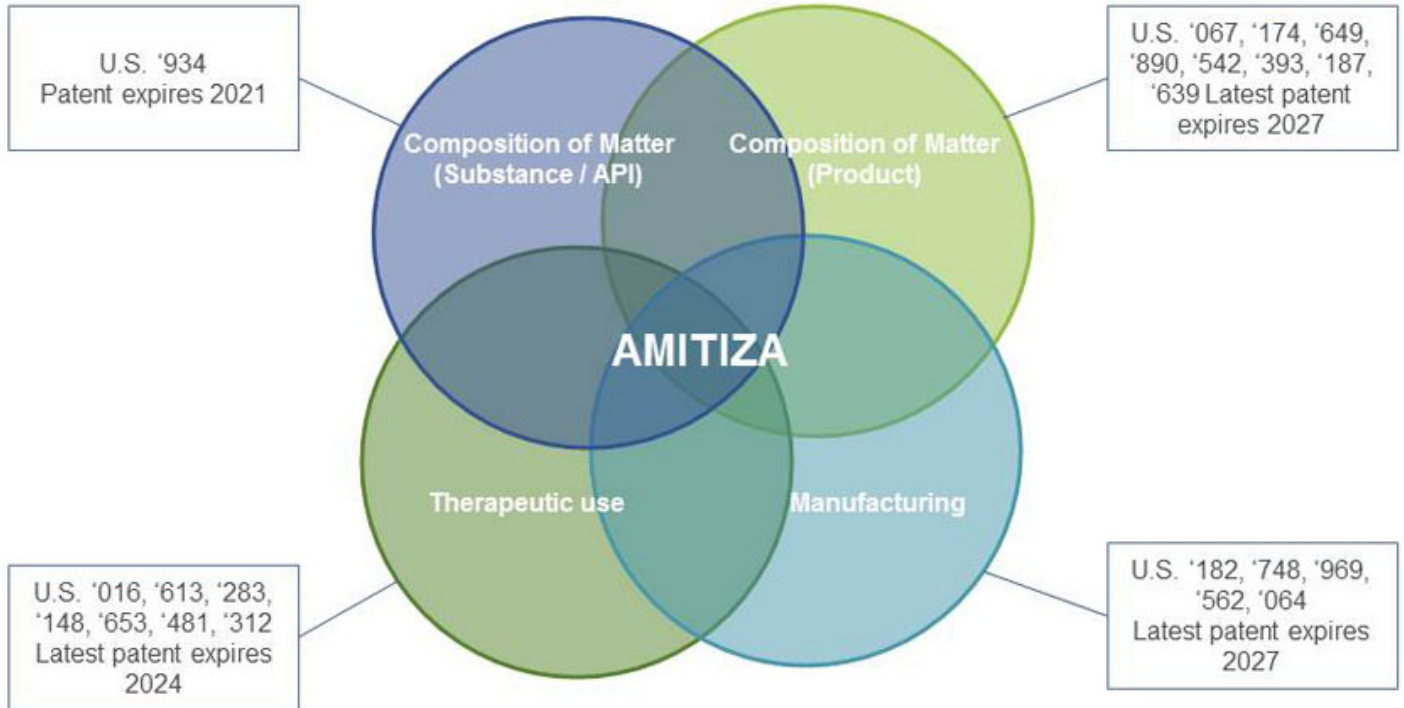
\*\*\* The change in the net debt includes the settlement of the founder notes in Q1 2016 of \$17.6 million and the collaboration with CPP, amounting to \$8.0 million, which we executed in January of 2016.



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- Deep management team with **proven ability** to create value

# Back Up Slides

**AMITIZA well-protected by a comprehensive suite of patents through 2027**



- AMITIZA is covered by an additional 10 patents through 2028 in Japan and 6 patents in Europe through 2027



**Experienced management team with considerable experience in product development and commercialization**

<p><b>Peter Greenleaf</b> Chief Executive Officer</p>	
<p><b>Peter Kiener, D.Phil</b> Chief Scientific Officer</p>	
<p><b>Andrew Smith</b> Chief Financial Officer</p>	
<p><b>Matthias Alder</b> Executive Vice President, Business Development &amp; Licensing</p>	
<p><b>Max Donley</b> Executive Vice President of Human Resources</p>	
<p><b>Steven Caffé, M.D.</b> Senior Vice President, Regulatory Affairs</p>	
<p><b>Elissa Cote</b> Senior Vice President, Strategic Business Insights</p>	
<p><b>Peter Lichtlen, M.D., Ph.D.</b> Chief Medical Officer</p>	
<p><b>Silvia Taylor</b> Senior Vice President, Investor Relations and Corporate Affairs</p>	