

**UNITED STATES
SECURITIES AND EXCHANGE COMMISSION**
Washington, D.C. 20549

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): March 30, 2007

MEDICINOVA, INC.

(Exact name of registrant as specified in its charter)

Delaware
(State or other jurisdiction
of incorporation)

001-33185
(Commission File Number)

33-0927979
(IRS Employer
Identification No.)

**4350 La Jolla Village Drive, Suite 950
San Diego, CA 92122**
(Address of principal executive offices) (Zip Code)

Registrant's telephone number, including area code: (858) 373-1500

Not Applicable
(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 March 30, 2007, Dr. Kenneth Locke, Chief Scientific Officer of MediciNova, Inc. (the "Registrant"), gave a presentation regarding the status of the Registrant's development programs to attendees of the Registrant's Annual Meeting of Stockholders. Attached as Exhibit 99.1 hereto and incorporated herein by reference in its entirety is a copy of Dr. Locke's presentation.

The information in this Item 7.01, including the exhibits furnished herewith, is furnished pursuant to Item 7.01 and shall not be deemed "filed" for any purpose, including for the purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), or otherwise subject to the liabilities of that Section. The information in this Item 7.01 of this Current Report on Form 8-K shall not be deemed incorporated by reference into any filing under the Securities Act of 1933, as amended, or the Exchange Act regardless of any general incorporation language in such filing.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits.

<u>Exhibit</u>	<u>Description</u>
99.1	Slide Presentation presented March 30, 2007

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.

Dated: March 30, 2007.

MEDICINOVA, INC.

By: /s/ Shintaro Asako
Shintaro Asako
Chief Financial Officer

EXHIBIT INDEX

<u>Exhibit No.</u>	<u>Description</u>
99.1	Slide Presentation presented March 30, 2007



MEDICINOVA

**Accelerating
the global development
and commercialization of
innovative pharmaceutical
products**



Safe Harbor Statement

This presentation may contain “forward looking statements” within the meaning of the Private Securities Litigation Reform Act of 1995. These statements include statements regarding the expected progress of the development of the Company’s product candidates and potential licensing, collaboration and partnering plans. These statements are based on certain assumptions made by the Company’s management that are believed to be reasonable at the time. Such statements are subject to a number of assumptions, risks and uncertainties, many of which are beyond the control of the Company, including results of clinical studies, interest of potential collaborators in the market and other risks and uncertainties, including those described in the Company’s filings with the Securities and Exchange Commission. These assumptions, risks and uncertainties could cause the Company’s actual results to differ materially from those implied or expressed by the forward-looking statements.

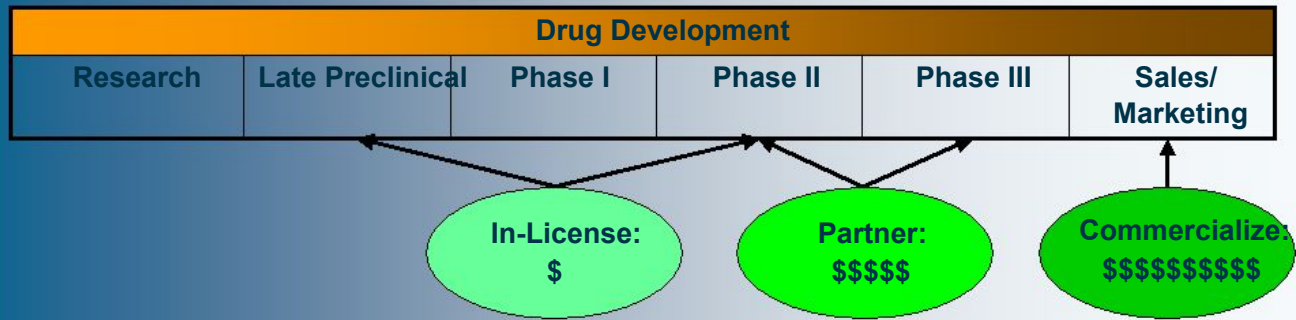


Corporate Overview

- **US-based pharmaceutical development company:**
 - Unique access to differentiated, high-value, lower-risk in-licensed assets from Japanese alliances
 - Focused on mid-to-late stage clinical development
 - Management team has global development/commercialization experience
- **Commercially-attractive clinical pipeline:**
 - 8 compounds in 10 different therapeutic indications; 7 programs in Phase II or later
 - Key market advantages for each unique molecule
 - Multi-billion dollar collective market potential
- **Well-capitalized:**
 - \$212 M raised from inception; \$104 M cash as of 12/31/06
 - Successful IPO (\$122.5 M gross) on Osaka Securities Exchange (OSE; code: 4875) in February 2005
 - NASDAQ listing December 2006 (MNOV); recent NASDAQ offering of 1 M shares @ \$12) in February 2007 to introduce MNOV to new US shareholders



Business Model



- In-license high-value, differentiated small molecule product candidates at the late preclinical-early Phase II clinical development stage at attractive terms from mid-sized Japanese pharmaceutical companies
- Add significant value through rapid advancement of product candidates through proof-of-concept Phase II/III clinical trials
- Secure strategic alliances at key value inflection points
- Selectively retain and commercialize certain product candidates for maximum ROI



Proven Global Success of Drugs In-Licensed from Japan

Drugs discovered in Japan are being snapped up by Western companies:

Drug (Date Launched)	Treatment	Japanese Discoverer	Partner in U.S.	Peak World-Wide Sales
Pravachol (1991)	High cholesterol	Sankyo	Bristol-Myers Squibb	\$3.3 billion
Prevacid (1995)	Heartburn	Takeda	Abbott	\$4.3 billion
Aricept (1997)	Alzheimer's	Eisai	Pfizer	\$1.1 billion
Abilify (2002)	Schizophrenia	Otsuka	Bristol-Myers Squibb	\$2 billion (a)
Crestor (2003)	High cholesterol	Shionogi	AstraZeneca	\$4 billion (a)

(a) Analyst estimate

Source: the companies

Others: Pepcid (Merck), Cardizem (Aventis), Lupron (TAP), Atacand (AstraZeneca), Biaxin (Abbott), Levaquin (J&J), Noroxin (Merck), Tequin (BMS)MORE



MEDICINOVA



Japanese Pharma Alliances

- Unique access to mid-sized Japanese pharmaceutical companies with no U.S. and/or European development capabilities
- Acquire rights to select, high quality compounds in U.S. and select ex-U.S. markets
- Favorable deal terms:
 - Modest milestone payments (e.g., no more than \$1M upfront)
 - Reasonable royalties (e.g., 14% maximum on U.S. sales > \$500M)
 - No stacking royalties (i.e., ~65/35% split with originator on out-licensing)
- Proven track record: 8 compounds acquired in 6 years
- Self-renewing model

Japanese Pharmaceutical Company	2005 Sales (\$M)
Takeda	10,208
Daiichi-Sankyo	8,330
Astellas	7,836
Eisai	4,845
Sanofi	2,874
Chugai	2,863
Taisho	2,540
Mitsubishi	2,129
Shionogi	1,812
Tanabe	1,563
Ono	1,320
Kyowa-Hakko	1,422
Meiji	995
Santen	842
Hisamitsu	759
Tsumura	741
Kaken	681
Mochida	618
Kyorin	602
Kissei	553

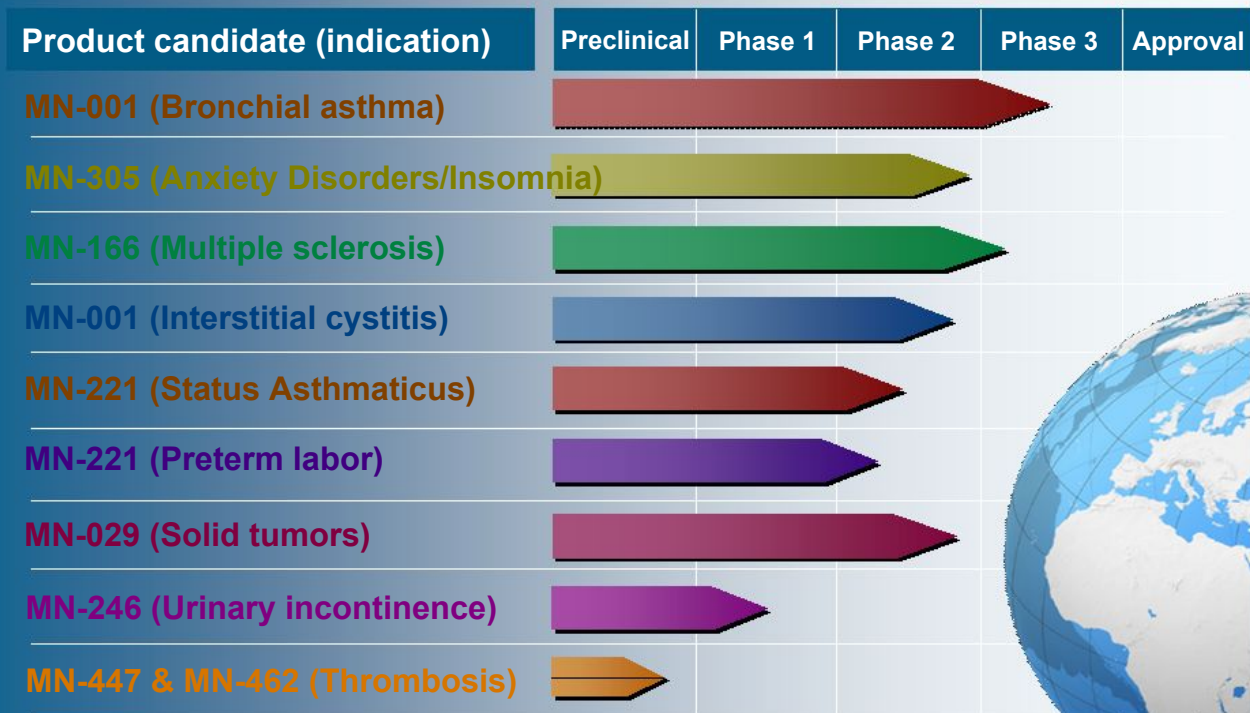
MediciNova partner
Conduct US trials directly

MEDICINNOVA



Commercially-Attractive Diversified Portfolio

6 Years
8 Compounds
10 Indications

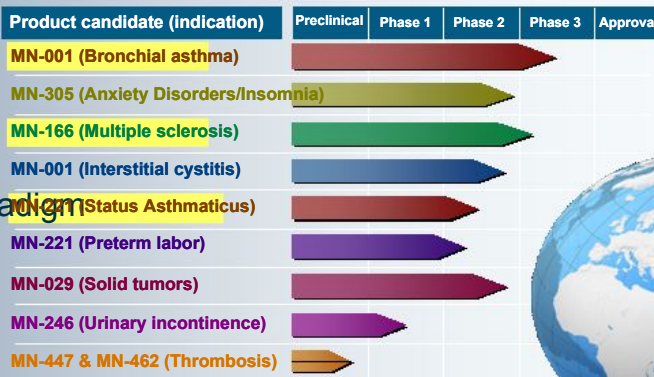


3 Near-Term Opportunities Show Pipeline Breadth and Value

- **MN-001: Bronchial Asthma**
 - Phase III initiated 4Q06
 - Bonus indication: interstitial cystitis - in pivotal Phase II/III
 - >\$1Bth 5 year sales

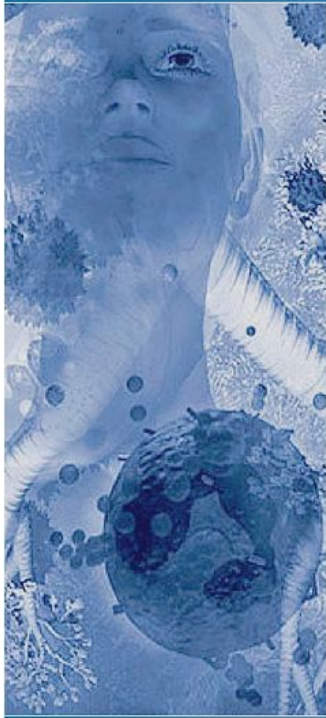
- **MN-221: Status Asthmaticus**
 - Phase II initiated 4Q06
 - Potential to change treatment paradigm
 - >\$500Mth 5 year sales

- **MN-166: Multiple Sclerosis**
 - Positive 297-patient Phase II; Phase III to start 2H07
 - Capitalizes on market need for oral medication
 - >\$1Bth 5 year sales





MN-001 (Asthma)



Source	KyoriPharmaceutical (2002)
Market Potential	5th yr sales > \$1 B
Advantages	<ul style="list-style-type: none">– Combined mechanism of leading brands (Singulair®, Zyrtec®, Daxas®) with broader efficacy– Improved safety (no steroid-like side effects)– Convenience of oral administration (improved compliance)– New US composition patent (market exclusivity > 2023)
Milestones	Positive US Phase II results (12/05); Phase III initiated 4Q06



MN-001 Competitive Advantages

Potential First Line Therapy for the Treatment of Bronchial Asthma

Compound	Dosing	Anti-Inflammatory	Steroid Sparing	Safety Issues	Market Opportunity
MN-001	TID/BID; QD in development	Yes	Yes	No	> \$3B
Singulair	QD	No	No	No	\$3B
Accolate	BID	No	No	Liver toxicity	< \$90M
Zyflo	QID; BID in clinical trials	No	No	Liver toxicity	< \$10M



MN-001 Value-Added

At Acquisition

- Large preclinical and early clinical database

Value-Added

- Elucidation of mechanism of action
- cGMP manufacturing (API and new formulation)
- Expanded dose range (through Phase I testing)
- Clinical proof-of-concept (in Phase II trial)
- New composition of matter and method of manufacture patent
- New indication Interstitial Cystitis (Ph II/III results 4Q06)

Next Steps (in progress)

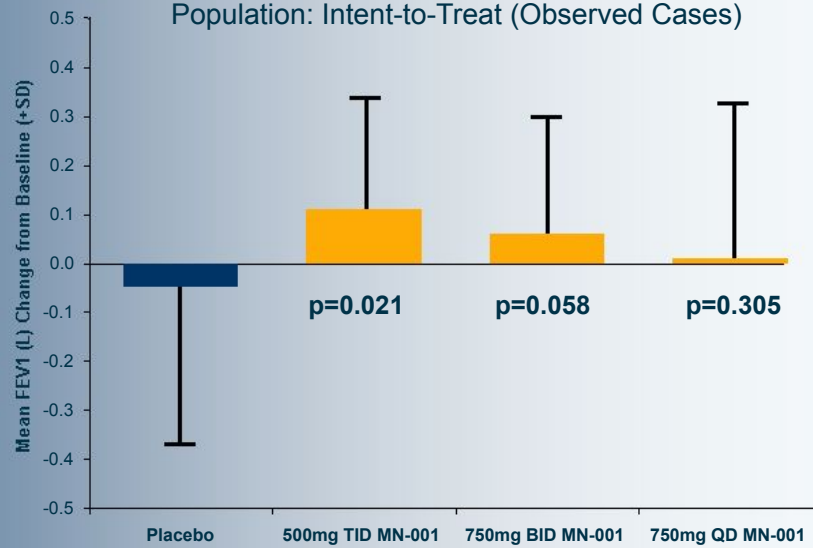
- Phase III clinical testing to establish market differentiation (oral controller with anti-inflammatory activity, steroid-sparing)
- Develop once-a-day dosage form



MN-001 Key Data

Proof-of-Concept in Mild-to-Moderate Asthmatics

Mean FEV1 (L) Change from Baseline
Population: Intent-to-Treat (Observed Cases)



Statistically significant improvement in mean FEV1 after 4 weeks with 500 mg TID compared to placebo ($p=0.021$; intent-to-treat, observed cases)

FEV1: Forced expiratory volume in the first second.
Note: Baseline is the Visit 3 pre-bronchodilator measurement.



MN-221 (Status Asthmaticus)

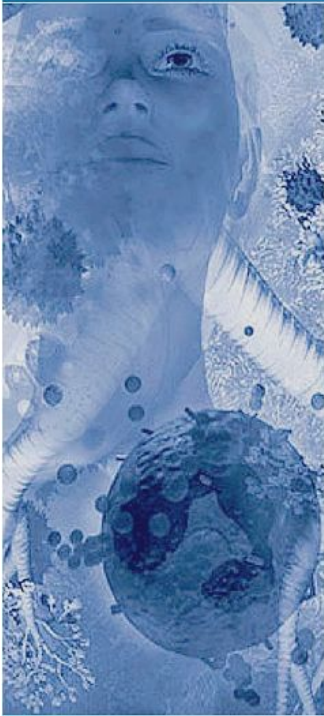
Source Kissei Pharmaceutical (2004)

Market Potential 5th yr sales ~ \$500 M

Advantages

- Clinically-proven mechanism of action (highly selective β_2 adrenergic receptor agonist)
- Greater cardiovascular safety (less β_1 adrenergic receptor stimulation)
- More reliable, effective and rapid route of administration (i.v. vs. inhaled)

Milestones US Phase II 4Q06





MN-221 Competitive Advantages

Compound	Dosing	Proven Mechanism	Rapid Action	Reliable Delivery	Safety Issues
MN-221	IV (Ph II)	Yes	Yes	Yes	No
β -Agonists	Inhaled; nebulized	Yes	Yes	No	Cardiovascular (palpitations)
Singulair	IV (Ph III)	No	?	Yes	No
Zyflo	IV (Ph I / II)	No	?	Yes	Liver toxicity



MN-221 Value-Added

At Acquisition

- Large preclinical and early clinical database (in preterm labor)

Value-Added

- Initiated cGMP Product manufacturing
- Changed clinical dosing paradigm
- Determined safety of new dosing paradigm (through Phase I testing)
- New indication ~~Status Asthmaticus~~

Next Steps (in progress)

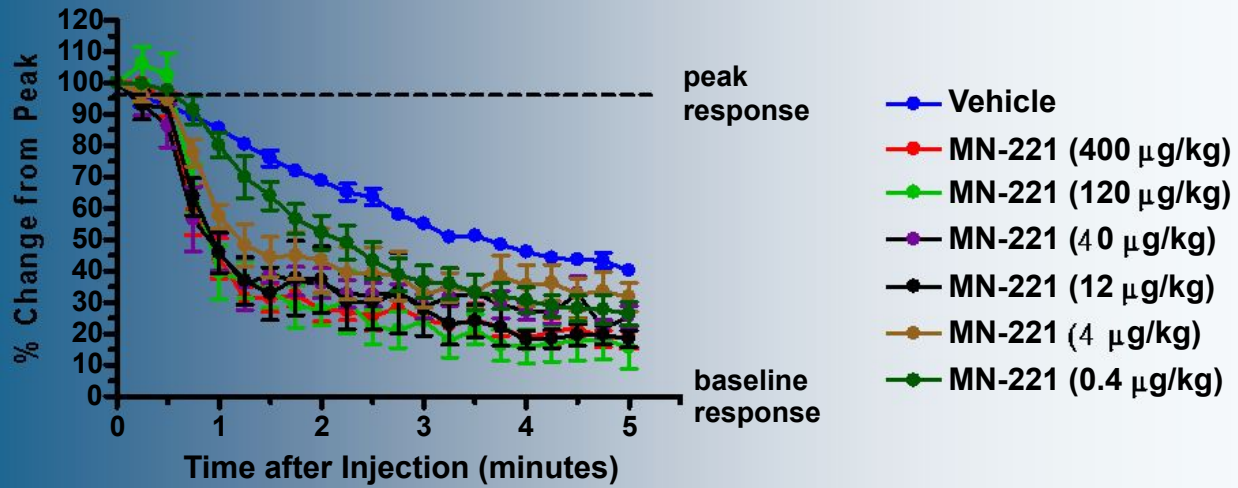
- Phase II proof-of-concept testing





MN-221 Key Data

Recovery from Ragweed-induced Bronchoconstriction in Dogs





MN-166 (Multiple Sclerosis)

Source	KyorirPharmaceutical (2004)
Market Potential	5 th yr sales ~ \$1 B
Advantages	<ul style="list-style-type: none">– Oral treatment for MS– 16 years proven clinical safety and efficacy in inflammatory disorders (asthma, stroke) in Japan– Large preclinical and clinical database (3.2M patients treated; >15,000 in formal clinical safety database)– New US use patent
Milestones	Positive Phase II results 1Q07; Phase III to start 2H07





MN-166 Competitive Advantages

MN-166	Unmet Need	Interferon Products
Oral	More convenient dosing	Intravenous or subcutaneous injection <i>(Injection site pain, swelling, and itching)</i>
Pilot clinical data suggestive of 50% reduction in relapse	Greater efficacy	Current relapse reduction rate is ~33% <i>(Significant market advantage for a drug with a relapse reduction rate of 50% or higher)</i>
No neutralizing antibodies formed; no loss of effect	Longer duration of effect	Relative benefit gained from existing drugs may decline over time - possibly due to presence of neutralizing antibodies



MN-166 Value-Added

At Acquisition

- Large preclinical and clinical database
- 16 years of clinical safety history
- Pilot data in MS patients

Value-Added

- Completed first year of large (297-patient) clinical proof-of-concept Phase II study
- Initiated cGMP manufacturing

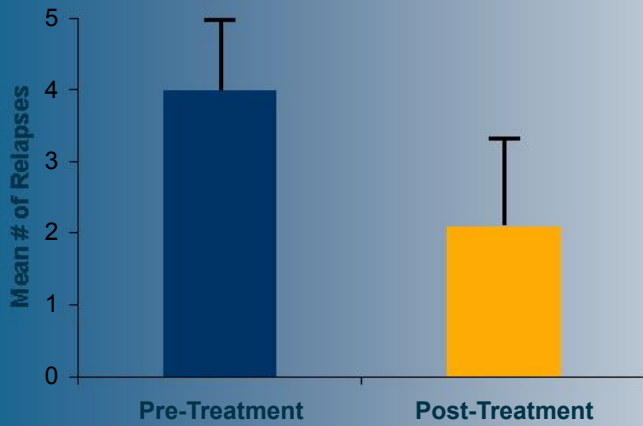
Next Steps (in progress)

- Phase III clinical testing
- Develop once-a-day dosage form



MN-166 Key Pilot Clinical Data

Reduction of Relapse Rate in 6 MS Patients



Normalization of Serum Cytokine Levels in 11 MS Patients

Cytokine		% Change
Th1	IFN- γ	-28
	TNF- α	-35
Th2	IL-4	+119
	IL-10	+64



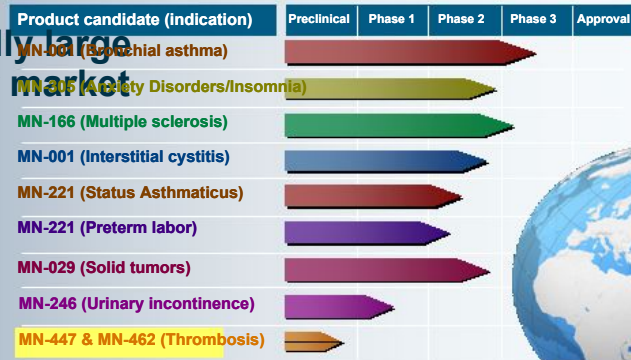
MN-166 Key Phase II Data

Outcome Measure	p-value (pbo vs. 60 mg/d)
Completers - annualized relapse rate: pbo - 0.8, 60 mg - 0.6 (pbo - 42.7% vs. 60 mg - 60% with no relapses)	0.0752
Time to first relapse: Median for 60 mg > 1 year Median for pbo - 244 days	0.0438
% of subjects exacerbation-free for 1 year: pbo - 41%, 60 mg - 56.1%	0.033
Cumulative volume of Gd-enhancing lesions: pbo - 2128 mm ³ , 60 mg - 1756 mm ³	0.087
% brain volume change: pbo: -1.2%, 60 mg: -0.79%	0.0352



Renewable Business Model: Two Newly-Acquired Product Opportunities

- Two novel cardiovascular preclinical products acquired from Japanese partner (Meiji Seika Kaisha, Ltd.)
- Modest investment with potentially large return in multi-\$B cardiovascular market
 - MN-447 Antithrombotic with novel MOA (GPIIb/IIIa) affecting clot formation
 - MN-462 Antithrombotic with novel MOA (carboxypeptidase) affecting clot lysis
- Underscores ability to replenish pipeline with innovative, high-value product opportunities



Management Team with Global Experience



LEADERSHIP	Years Experience	Life Sciences Background
Yuichi Iwaki, MD, PhD Executive Chairman, CEO	31	Prof. USC, Pitt; Advisor to JAFCO, Tanabe Director, Avigen, Inc.
Richard Gammans, PhD, MBA Chief Development Officer	29	Incara, Indevus, BMS
Kenneth W. Locke, PhD Chief Business Officer	22	Tanabe Research Laboratories USA, Indevus, Hoechst
Shintaro Asako, CPA Chief Financial Officer	8	KPMG USA (Audit), Arthur Andersen USA
Masatsun Okajima, CMA VP, Head of Japanese Office	15	Daiwa Securities SMBC, Sumitomo Capital Securities, Sumitomo Bank
Lynn Terhorst, MBA VP, Business Planning & Analysis	24	Ligand, General Electric Medical Systems, Hybritech, Molecular Biosystems
Bonnie Feldman, DDS, MBA VP, Investor Relations & Corporate Communications	24	Clinical Advisors, D3 Capital, Lippert/Heilshorn, SunCo



MediciNova, Inc. Today

- **Market-driven, commercially-focused mid-stage pharmaceutical company**
- **Innovative business model:**
 - Steady inflow of high-quality molecules, primarily from mid-size Japanese pharmaceutical companies
 - Focus on large, lucrative, underserved markets
 - Therapeutic & molecular diversity lowers risk & optimizes reward
- **Rich mid to late-stage clinical development pipeline:**
 - 6 years, 8 compounds, 10 indications
 - Small molecules with clear market advantages & strong IP
 - Multi-billion dollar market potential
- **Portfolio growth strategy: build to profitability through out-licensing & retained commercial rights**
- **Well-capitalized: poised for success**