FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OIVID APPROVAL										
	OMB Number:	3235-0287									
l	Estimated average burde	en									

0.5

hours per response:

Chec	ck this box if no longer subject to
Secti	on 16. Form 4 or Form 5
oblig	ations may continue. See
Instru	uction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Himawan Jeff</u>				2. Issuer Name and Ticker or Trading Symbol MEDICINOVA INC [4875 OSE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) 4350 LA	`	First)	(Middle) UITE 950		3. Date of Earliest Transaction (Month/Day/Year) 01/09/2006								Officer (give title Other (specify below) below)					
(Street) SAN DIEGO, CA 92122				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)																		
		Та	ble I - Non	-Deriva	ative	_			quired, [Disp	osed o	f, or Be	neficia	ly Owned				
Date				2. Transa Date (Month/D	2A. Deemed Execution Date if any (Month/Day/Ye		Date,	e, Transaction Code (Instr.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			Benefici	es ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount (A) or (D)		r Price	Transact	Transaction(s) (Instr. 3 and 4)			(IIISU: 4)
			Table II - D						uired, Di					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Yo	Cod	nsactio	ction Derivative I			Expiration Date of S (Month/Day/Year) Und Deri			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securitie Beneficia Owned Following Reported	Securities Seneficially Owned Following	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	de V	(A)	((D)	Date Exercisable		opiration	Title	Amount or Number of Share	5	(Instr. 4)	ion(s)		
Stock Option (right to buy)	\$1.48 ⁽¹⁾	01/09/2006		A		100	000		01/09/2006	01	./08/2016	Common Stock	100,00	\$0	100,00	00	I	By Essex Woodlands Health Ventures, Inc. ⁽²⁾
Stock Option (right to buy)	\$1.48 ⁽¹⁾	01/09/2006		A		100	000		(3)	01	./08/2016	Common Stock	100,00	\$0	100,00	00	I	By Essex Woodlands Health Ventures, Inc. ⁽²⁾
Stock Option (right to buy)	\$1.48 ⁽¹⁾	01/09/2006		A		10,	000		01/09/2006	01	./08/2016	Common Stock	10,000	\$0	10,00	00	I	By Essex Woodlands Health Ventures, Inc (2)

Explanation of Responses:

- 1. The exercise price of this stock option is 170 yen. On the date of grant, the exercise price was equal to \$1.48, based on the exchange rate as found on www.oanda.com.
- 2. The Reporting Person is a managing member of Essex Woodlands Health Ventures VI, L.L.C. and is a limited partner of Essex Woodlands Health Ventures VI, L.P. Essex Woodlands Health Ventures VI, L.L.C. is the general partner of Essex Woodlands Health Ventures VI, L.P., which is the general partner of Essex Woodlands Health Ventures Fund VI, L.P. Essex Woodlands Health Ventures, Inc. is the management company for Essex Woodlands Health Ventures Fund VI, L.P. Pursuant to Instruction (4)(b)(iv) of Form 4, the Reporting Person has elected to report as indirectly beneficially owned the entire number of securities beneficially owned by such entities. The Reporting Person disclaims beneficial ownership of any securities, and any proceeds thereof, that exceed his pecuniary interest therein and/or that are not actually distributed
- 3. The option vests over a four (4) year period commencing January 9, 2006, in equal quarterly installments.

Remarks:

/s/ Shintaro Asako, as Attorney-06/20/2006

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.