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Eli Lilly and Adocia has announced a worldwide licensing collaboration focused on developing an ultra-rapid insulin, known as BioChaperone Lispro, for treatment of type 1 and type 2 diabetes. BioChaperone Lispro relies on Adocia's proprietary BioChaperone technology and is currently in Phase Ib studies.

Lilly and Adocia will develop BioChaperone Lispro with the goal of optimising glucose levels during and after meals. Potential benefits of BioChaperone Lispro include greater flexibility in the timing of insulin injections, lower variability of post-meal blood glucose elevations, lower rates of hypoglycemia and better overall glucose control.

Under the terms of the agreement, Lilly is responsible for future development, manufacturing, and commercialization of BioChaperone Lispro. The total up-front and milestone payments could reach up to $570 million; Adocia will receive a total upfront fee of $50 million with the potential for future payments of up to $280 million if the product reaches certain development and regulatory milestones, and sales milestones up to $240 million, as well as tiered sales royalties. Lilly shall also reimburse Adocia for certain research and development expenses during the terms of the agreement. A concentrated formulation of BioChaperone Lispro is also part of the agreement.

"An ultra-rapid acting insulin, if approved by regulators, could provide a new important treatment option for people with type 1 and type 2 diabetes," said Mr Enrique Conterno, president, Lilly Diabetes. He added, "An ultra-rapid acting insulin would be a natural fit in our growing portfolio."

"It is a great day for Adocia and Lilly, a global leader in diabetes treatment, to initiate a new collaboration for the development of an innovative ultra-rapid formulation of insulin lispro. We consider Lilly a key collaborator on this project based on their extensive knowledge of insulin," said Mr Gerard Soula, president and CEO of Adocia.

Adocia retains the right to develop and license its insulin programs unrelated to prandial ultra-rapid insulin.