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Public Relations

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**Ono Enters into License Agreement with Nissan Chemical  
for New Therapeutic Agent for Thrombocytopenia**

Ono Pharmaceutical Co., Ltd. (Osaka, Japan, President: Toshiharu Korekane) and Nissan Chemical Industries, Ltd. (Tokyo, Japan, President: Nobuichiro Fujimoto) announced today that both companies entered into a license agreement for a new therapeutic agent for thrombocytopenia discovered by Nissan.

Under this agreement, Ono is granted the worldwide exclusive rights (including sublicense rights) to develop and commercialize the compound and in return Nissan will receive upfront and milestone payments based on development stage as well as royalties on sales of the compound. Nissan and Ono will jointly develop the compound; Ono will begin non-clinical studies for the compound in the first quarter of next year that are required for the initiation of the Phase I studies planned in 2009.

Platelets are one of blood cell components and play an important role in hemostasis upon bleeding. For instance, hematological disorders such as idiopathic thrombocytopenic purpura and myelodysplastic syndromes are associated with the decrease of platelet count or thrombocytopenia often causing bleeding, which is life-threatening in severe cases.

Thrombocytopenia is also found during chemotherapy / radiotherapy for cancer and the treatment of hepatitis C and may impair the treatment of those diseases.

Platelet transfusion is widely practiced as a common therapy for thrombocytopenia in Japan. However, risk of infection is accompanied by platelet transfusion and shortage of platelets supply is also an issue.

This compound is an orally active low molecule compound which may increase platelet count by activating a receptor of thrombopoietin, which is a hematopoietic factor to accelerate platelet production. The efficacy and safety of the compound have been demonstrated in basic research. Both companies expect that the compound will be developed as a new drug which may reduce the risk of bleeding in various diseases with thrombocytopenia and overcome risk of infection associated with platelet transfusion.