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0:01
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Now sit back, relax and enjoy the next revelatory episode of IBN's Bio Med Wire podcast.

0:54
Welcome back everyone to the Bio Med Wire podcast brought to you by the Investor Brand Network.

1:00
And today we're going to be showcasing a company, Regentus Bio mineral Bio materials, excuse me, limited.

1:07
They're traded on the NYSE American Exchange under the ticker symbol RG NT.

1:12
I'd like you to learn more about this company as I speak with the company's CEO and Executive Chairman.

1:18
In just a moment, I'll be introducing Dr.

1:20
Ahud Geller to the program.

1:23
But before I do that, go ahead and travel to their website.

1:26
It's very simple.

1:27
It's Regentis REGEN tis.co dot IL.

1:33
Of course, you can just visit us at the Investor Brand Network as well.

1:38
Follow along in alphabetical order.

1:39
You'll find the company Regentis and they're in the side of their profile.

1:43
You're going to find links to everything, the company website, media presentations, A newsroom for the company, a full due diligence on the company.

1:51
But with that, let's go ahead and welcome in our guest today, a hood.

1:55
Thank you so much for making time for us today here at the Biomedwire.

1:58
It's a pleasure to meet you.

1:59
Thank you, Sir.

2:02
So a hood, let's start for those investors or those shareholders that are the potential ones, the ones the viewers that are just seeing your company for the very first time, If you would tell us what your company does and let's talk about your lead product, which is the gel run C let's learn a little bit more about your company and what you do for your patients.

2:22
OK.

2:23
So thank you for your question and the time our company Regentis is called that way because we are focused on developing technologies for regeneration of tissue, hence the name regeneration of tissue.

2:42
When you're able to match the therapy, the ailment with the technology in tissue regeneration, you probably have the best medicine possible because otherwise you're resorting to chemicals, drugs, devices and so on.

3:00
In our particular case, we have a platform from which we can develop a variety of applications.

3:09
But currently we are focused.

3:11
Our lead product is called Jelwyn C Jelwyn is the platform and C stands for cartilage and we are specifically focused on treating cartilage injuries to the knee.

3:24
That is the product that we are developing right now.

3:27
We are in that already approved for marketing in Europe and we are in the midst of our clinical trial, the pivotal trial which will get us the permission by FDA to start marketing in the US Now our company is happily developing this product.

3:48
I'm saying happily because it's designed to do something very, very important and beneficial to the patients.

3:56
Currently, patients who suffer from injuries, cartilage injuries to the knee have a problem of terrible pain and debilitation, or if you want to call it limited functionality of their legs.

4:14
Most people know of cartilage issues, cartilage injuries.

4:21
Practically every third person I talked to had either his own knees replaced or has pain or know somebody who had it.

4:30
So it's extremely prevalent.

4:33
Our patients right now suffer from a major lack, an unsatisfied situation for the treatment of such cartilage injuries.

4:43
There is no off the shelf product in the US market to treat that injury.

4:51
There are probably two or three groups of what is available.

4:56
The first one are procedures.

4:58
The procedures are either inadequate, meaning they don't do the job, and pain and limited function comes back after a few months, which is no good because you want a person to be functional, ability to walk, run or do sports.

5:16
The other one is available commercially.

5:18
It is being sold as a procedure costing $50,000 and requiring a long period of of waiting for cellular expansion and two surgeries in addition to that, that procedure is not used for too many patients because of those issues.

5:39
The second group is probably all kind of supplements, I call them.

5:45
There are various lubricants that are injected into the knee like grease in your car.

5:52
They will lubricate your your joint for a while, but they get absorbed and they're not therapeutic, meaning they do not heal your problem.

6:03
They are palliative and treat your pain for a very short time.

6:08
And then there's a third group that I won't delve very deeply into which is I put them under witchcraft, OK.

6:14
I don't want to go or or say anything bad about anybody.

6:18
So our product generate C brings a great relief to the patients.

6:24

And I'm saying brings because it's already, we have more than 500 man years of cartilage grown by our product and we have yet to hear of the first disgruntled patients if you want, or one that required another surgery or another product or replacement or lack of success.

6:45
And actually a big subject we're promoting for our company is durability.

6:52
Too many people spend more time on changing their tires and thinking how long they're going to hold, then thinking about what they're going to do for their knees.

7:00
And you want a durable cartilage.

7:03
Cartilage in itself is, is a gift.

7:07
It is a miracle tissue.

7:09
It is so thin, it has no blood in it, yet it lubricates and bears your weight for your whole life except when it fails.

7:19
It fails in two ways.

7:21
One would be wear and tear.

7:23
You know, activity and activity in a way that causes wear and tear down to a cartilage defect, as we call it.

7:33
The second one is trauma, and trauma is unpredictable.

7:36
You can go up the stairs and there's a little click and you tore your cartilage.

7:43
We are focused on the cartilage injuries and I assume our listeners know that cartilage and cartilage injuries to the knee is the white thin tissue that covers the end of the joints where the bones meet and they act as a lubricated bear weight bearing barrier for your movements.

8:07
Any movement, walking, running, sitting is based on your cartilage and so it is also for small joints.

8:16
A few words about that later, but we have cartilage in many, many places such as the elbow, the ankle and the wrist.

8:25
All of those are also covered by a cartilage.

8:32
Now, I'm sorry, I didn't want to cut you off, but you mentioned earlier the, the pending FDA here in the States also are in European.

8:41
You've talked about the 500 years of cartilage that's already been developed.

8:46
Basically what what is your target market?

8:49
It sounds global, but you know, and you talked about one in every three people.

8:53
I mean, I know at our age, I'm 56, you know, I would say one in every one people I know has some kind of knee problem, back problem.

9:03
So the target market though for the investors tuning in, that's got to be a massive market that you're tapping into.

9:08
We believe that there are two layers to that market.

9:12
The very obvious one patient comes to the doctor suffering from pain in his knee and he would probably have one of three potential pathologies.

9:23
The major one covering more than 50% of the cases is ours, cartilage injuries, focal injuries to the knee.

9:31
The two others which we're not dealing with, at least not right now, are ACL and also meniscus.

9:41
They share each about 20 to 25% of the market.

9:47
The total U.S.

9:48
market annually is 470,000 cases a year and that is the size of the market currently untreated and yes.

9:59
So some people would bear the weight and and pain, others would use one of the two procedures I mentioned.

10:08
Others would be happy with an injection to lubricate their knee for a few months and come back with either more pain but very often deteriorated situation UN or impro improperly tended to cartilage injury would go into an inflammatory situation.

10:30
That inflammation would cause a terrible pain and swelling and eventually start eating at the bone.

10:40
At that point, you're, you're moving in across the line to osteoarthritis and the earlier you treat cartilage injuries or the pain of cartilage injuries, the better.

10:52
And you should treat it properly.

10:54
And we hope to bring happiness and a good answer medically to those patients.

11:01
470,000 patients.

11:03
Less than 1/3 or 1/4 of it is covered by the 1st procedure I mentioned microfracture, which is in the public domain and the rest are spread over, all over the place between lubricants and MSN and food supplements.

11:21
New name.

11:23
Well, let's learn a little bit more about you, Doctor.

11:26
You're our guest today.

11:27

And of course, as I've mentioned at the outset, you are the Executive Chairman as well as the CEO of Regentus.

11:31
What brought you to this point?

11:33
And tell us a little bit about your background before the company.

11:37
OK.

11:38
I've been in this business of healthcare technologies for better most of my life, a few decades without going into a specific number of years, but many.

11:50
I grew up in the Pharmaceutical industry in the US for Wyatt Laboratories as a senior scientist, then moved into marketing.

12:00
I was CEO of a number of companies.

12:02
I have a PhD in pharmaceutical technology and chemical engineering and MBA in between, and again, chemical engineering from Columbia University.

12:12
To begin with, that's my background.

12:14
I was executive VP of Teva and CEO of Inter Farm, one of the top success in Israeli biotechnology and I've been and I founded that the first venture fund and medically oriented venture fund in Israel called Medical Venture Partners.

12:34
So that's kind of in a nutshell, my background, I am a veteran of product development, be it pharmaceuticals or medical devices and in regentes.

12:47
I've been dedicated to this company because of its technology and the product that we're developing.

12:54
It excites me.

12:56
I'm probably one that is beyond making a livelihood.

13:01
And therefore I believe that I'm more, more, more credible than anybody else in this sense.

13:08
I'm surrounded by an excellent team of management members who cover all the professions that we are dealing with.

13:17
We have Raz Simon covering technology and applications.

13:23
If any doctors anywhere in the world wants to know how to do the procedure of Jelwyn, Raz is probably his expert.

13:32
We have Nadia Elisalvader, who's our head of clinical operations.

13:36
She's an MD.

13:37
She's been running clinical studies all her professional life.

13:41
And likewise, we have R&D and medical services and so on, experts all across companies run by a team of about 8 executives who are all experts in the field from finance all the way to R&D and biology.

14:01
Outstanding team.

14:02
And you can learn more about this team through reading the press releases and of course, visiting that website I gave out at the intro.

14:09
Speaking about that news, lots of great news on the Wire.

14:12
We're going to dive into some specific news a little bit later in this interview.

14:16
But as the CEO, as the leadership of the company, looking back on 2026 so far, what have you seen as some of the major milestones may be issued via news?

14:26
Maybe not, Maybe it's just a relationship that was developed.

14:30
What do you see as the milestones for the company?

14:32
So to begin with, if you're talking about the rest of the year, there isn't much rest of the year left at this time.

14:39
But we want to finish enrolling the balance of our patients for the US pivotal study, which we're now running.

14:47
We're in the midst of that study and our team is right now opening new clinical and old clinical sites of for a clinical study in the US to speed up the enrollment, which we hope to finish by the end of the year.

15:04
When I call, when I say enrollment, it means an identified clinical sites, a hospital or a clinic, a Doctor Who specializes in in research and doing those things with a team around him and not only screening and choosing the patients because they need to qualify.

15:24
It's an FDA monitored and mandated study, but also including doing the procedure.

15:31
So by the end of the year, we'll finish the required number of patients by FDA to do our clinical pivotal study, which is the ultimate study in order to get permission to market in the US Another thing that we're doing is working quite actively on commercialization.

15:53
We have approval in Europe, so we are permitted already to market and sell in Europe.

16:00
Following our IPO, we started activities towards that.

16:05
We are in discussion with a number of distribution systems and or strategic major orthopaedic companies in Europe.

16:15
Each country is usually separate, sometimes two or three, and we hope before the end of the year to conclude some agreements and to start selling in Europe.

16:26
Each country by itself.

16:28
Those are the two major objectives for the balance of the year.

16:33
They're also an excellent source of news flow both from our clinical progress, our enrolment, but also from our progress along the commercial structure required to sell in Europe and hopefully some news about selling well.

16:52
Very good.

16:53
You're right.

16:53
We are in the month of September already.

16:56
It slips by so quickly these days or I guess as we get older, it just slips by faster.

17:01
So from an investor standpoint, looking at the next 12 to 18 months, if you will, what are some of the catalysts you want investors, interested parties to be looking out for?

17:12
OK.

17:14
For the next 12 to 18 months, there will be probably two or three general sources of news flow and advancement of our activities also in the eyes of the public investors.

17:32
So the progress along the monitoring of the patients who have been treated and additional R&D and clinical development programs that we will initiate post this product post doing the clinical for this product.

17:53
And as I mentioned before, we already have and patented the product called Gelarin PP is for paste and it is a paste form of Gelarin that is extremely practical for small joints like the wrist, the elbow and the ankle.

18:12

And it and it requires it cannot use a liquid product as we use for the knee and it will go into clinical development sometimes during the next 12 to 18 months.

18:25
We're also looking at more severe osteoarthritis to see what we can do because German C can also mend bone.

18:34
So osteoarthritis is when the bone is involved as I mentioned before, when inflammation has eaten into the bone.

18:43
And again, all of this will go in an excellent way towards either delaying or sometimes replacing the need for total knee replacement and some additional work on other joints.

18:57
On the commercial side, we hope to be in a 12 to 18 months very active in commercialization in Europe, adding countries in Europe.

19:08
Each country is a market, adding countries, adding activities, adding collaborations.

19:15
We're also looking at Japan and Australia because of some unique positioning of our European approval that is highly useful in those markets and and as we progress you know commercialization activity that will be a basis for additional information.

19:40
Also what might happen in the 12 to 18 months.

19:43
Going forward would be discussion with strategics.

19:47
We intend to start strong discussions with strategics who already have large sales and marketing organization in Europe and maybe in other places and are very hungry for new products.

20:03
We hope before we submit for final approval in the state to have an advanced situation of discussions with one of the majors.

20:11
So that's kind of the road map for the next 18 months.

20:15
Of course, there are other activities, but they're not the main one.

20:18
We're always looking to improve our manufacturing methods.

20:23
We are developing an additional delivery device.

20:26
We are using a delivery device and you can see it in a video on the website to help the surgeon apply children see during the procedure.

20:39
That procedure is very short but we make life for the surgeon even easier and that way also making the procedure of administering the product much less traumatic to the patients.

20:52
Our patients go home for two weeks recovery against 6 to 8 to to 12 weeks in in other cases.

21:03
Yeah, that's an incredible, I mean, I think all of us can put that in with our jobs, our busy lives, shutting, cutting that part of that down, that recovery down is a major, major benefit.

21:15
So let's jump into that specific news just to give our viewers and listeners some context on how truly international your company's footprint is at this time.

21:24
Regentus receives Japanese patent allowance, strengthening its global Gel Rancy intellectual property portfolio with new proprietary manufacturing technology.

21:35
So there's a little bit to unpack there inside this press release besides just the patent allowance.

21:41
If we could as ACEO, can we get your insights into this press release?

21:45
So we consider Japan a very important target market even though it's very far from all of us and it is so because Japan has a very large aged population and therefore a very high level of incidence of cartilage injuries, not only the youth and the sports and there is no product there.

22:11
We were successful in getting allowance for our Japanese patent and a few words about that.

22:17
In the beginning of this year, I think it was about February, March, we received allowance and granted a patent in the US a very wide scope of patent that was already on an improved product and I'll be

short about it, but that product requires no preparation meaning the IT being an off the shelf product is complete, doctor calls it from the hospital pharmacy, the product is ready to use and ready to use was the basis for a new patent.

22:51
We were able to cover in that pattern a whole innovation.

22:56
So we now have in the US that patent taking us with innovation to 2038 covering everything, the manufacturing method, the product, even the delivery device is covered by patents.

23:10
We that we applied in parallel for that same patent in Japan and we're successful in getting it.

23:17
That kind of drove a European, Japanese company to write to us and start being interested in collaboration.

23:25
I cannot divulge your name, but we're very hopeful about it.

23:30
Another part of this innovation was an improvement in the manufacturing process.

23:39
Any volume of product that we are making and we make a product in a volume that then gets filled into vials.

23:47
That's why it's called an off the shelf product.

23:49
It's not a procedure.

23:51
It requires a procedure for administration, but the procedure for administration is not the therapy.

23:56
The therapy is the product.

24:00
We were dragging a manufacturing method from the R&D days of of this product and we realized it was highly inefficient.

24:11
People developed a manufacturing process that was brilliant in the sense of how simple it was, removing a particular step and increasing the yield of any given volume of manufacturing 5 fold.

24:26
So if we make 1000 vials by the old method in X liters of volume, we're now making 5000.

24:36
That cuts down costs in a tremendous way.

24:39
It allows us to service to serve the sales and marketing in a better way.

24:47
As you and your listener may know, there is a tremendous cost and and detail burden on manufacturing of medical product of quality assurance and regulatory requirements.

25:02
That cost is now divided by 5 because in the same volume, you now make five times the product.

25:09
So that was an important announcement for us.

25:12
We're now making it in that new larger volume and we'll start when we are, when we have the opportunity to ship products into Europe, at least for now from that improved process.

25:25
Excellent.

25:26
Well, thank you for your insights there and we've covered a lot in this interview and I very much appreciate your time.

25:32
Before I let you go, any closing thoughts or comments you'd like to share with the viewers, listeners and your existing shareholders?

25:40
I think there are great days coming to the shareholders, to the share of regentes and to the company.

25:48
The message we bring to the market is one of a short procedure, 10 minute procedure, two weeks of recovery and I must say we've put in front of us durability as a slogan for the company.

26:03
We need to treat patients in a way that will hold for a long time.

26:08
It's not a palliative treatment, it is a therapy.

26:11
It's not a headache tablet.

26:15
It is to grow your new cartilage.

26:19
Our product management manages and directs the new cartilage to be grown and at the end of the activity of our product, the patient's cartilage injury is covered by his own, her own cartilage as as if they were born.

26:37
And we hope to bring that as fast as possible to the greatest number of patients because we know and realize how painful and debilitating it currently is.

26:49
Well, what a tremendous episode today of the Biomedwire podcast brought to you once again by the Investor Brand Network.

26:55
I want you to do your due diligence.

26:56
So bring up the company symbol RGNT, bring up that website regentus.co dot IL.

27:04
And of course, visit us here at Ibn for a full profile and investment considerations on this company.

27:11
Regentus Hey, Hood, thank you so much for your time here today.

27:15
All right, for Doctor A Hood Geller, this is Stuart Smith saying thanks so much for tuning in.

27:21
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