

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): August 6, 2010

Sucampo Pharmaceuticals, Inc.

(Exact Name of Registrant as Specified in Charter)

Delaware

001-33609

30-0520478

(State or Other Jurisdiction
of Incorporation)

(Commission
File Number)

(IRS Employer
Identification No.)

4520 East-West Highway, Suite 300
Bethesda, Maryland

20814

(Address of Principal Executive Offices)

(Zip Code)

Registrant's telephone number, including area code: (301) 961-3400

(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 (*see* General Instruction A.2. below):

- 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 August 6, 2010, Sucampo Pharmaceuticals, Inc. will make a corporate update presentation to potential analysts that include written communication comprised of slides. The slides from the presentation are being furnished as Exhibit 99.1 to this Current Report on Form 8-K.

The information in this Item 7.01 and Exhibit 99.1 to this Form 8-K shall not be deemed “filed” for purposes of Section 18 of the Securities Exchange Act of 1934 (the “Exchange Act”) or otherwise subject to the liabilities of that section, nor shall it be deemed incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Exchange Act, except as expressly set forth by specific reference in such a filing.

Item 9.01 Financial Statements and Exhibits

(d) Exhibits

99.1 The corporate update presentation slides dated August 6, 2010.

SIGNATURE

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.

SUCAMPO PHARMACEUTICALS, INC.

Date: August 6, 2010

By: /s/ THOMAS J. KNAPP

Name: Thomas J. Knapp

Title: Corporate Secretary



Corporate Update

August 6, 2010

Forward-Looking Statement

Forward-looking statements contained in this presentation are based on Sucampo's assumptions and expectations concerning future events. They are subject to significant business, economic and competitive risks and uncertainties that could cause actual results to differ materially from those reflected in the forward-looking statements. Sucampo's forward-looking statements could be affected by numerous foreseeable and unforeseeable events and developments such as regulatory delays, the failure of clinical trials, the inability to fund drug development initiatives, competitive products and other factors identified in the "Risk Factors" section of Sucampo's Annual Report on Form 10-K and other periodic reports filed with the Securities and Exchange Commission. While Sucampo may elect to update these statements at some point in the future Sucampo specifically disclaim any obligation to do so, whether as a result of new information, future events or otherwise. In light of the significant uncertainties inherent in the forward-looking information in this presentation, you are cautioned not to place undue reliance on these forward-looking statements.

Amitiza®

- First FDA approved drug for chronic idiopathic constipation (CIC) in adults of all ages (Amitiza 24 mcg)
- Only FDA approved drug for irritable bowel syndrome with constipation (IBS-C) in women 18 years and older (Amitiza 8 mcg)
- Marketing approval in Switzerland for CIC received; pricing review ongoing
- Phase 3 efficacy trial for CIC in Japan met endpoint ($p < 0.001$), and reported positive interim data from companion long-term phase 3 safety trial
- Will conduct another US phase 3 trial in opioid-induced bowel dysfunction (OBD)

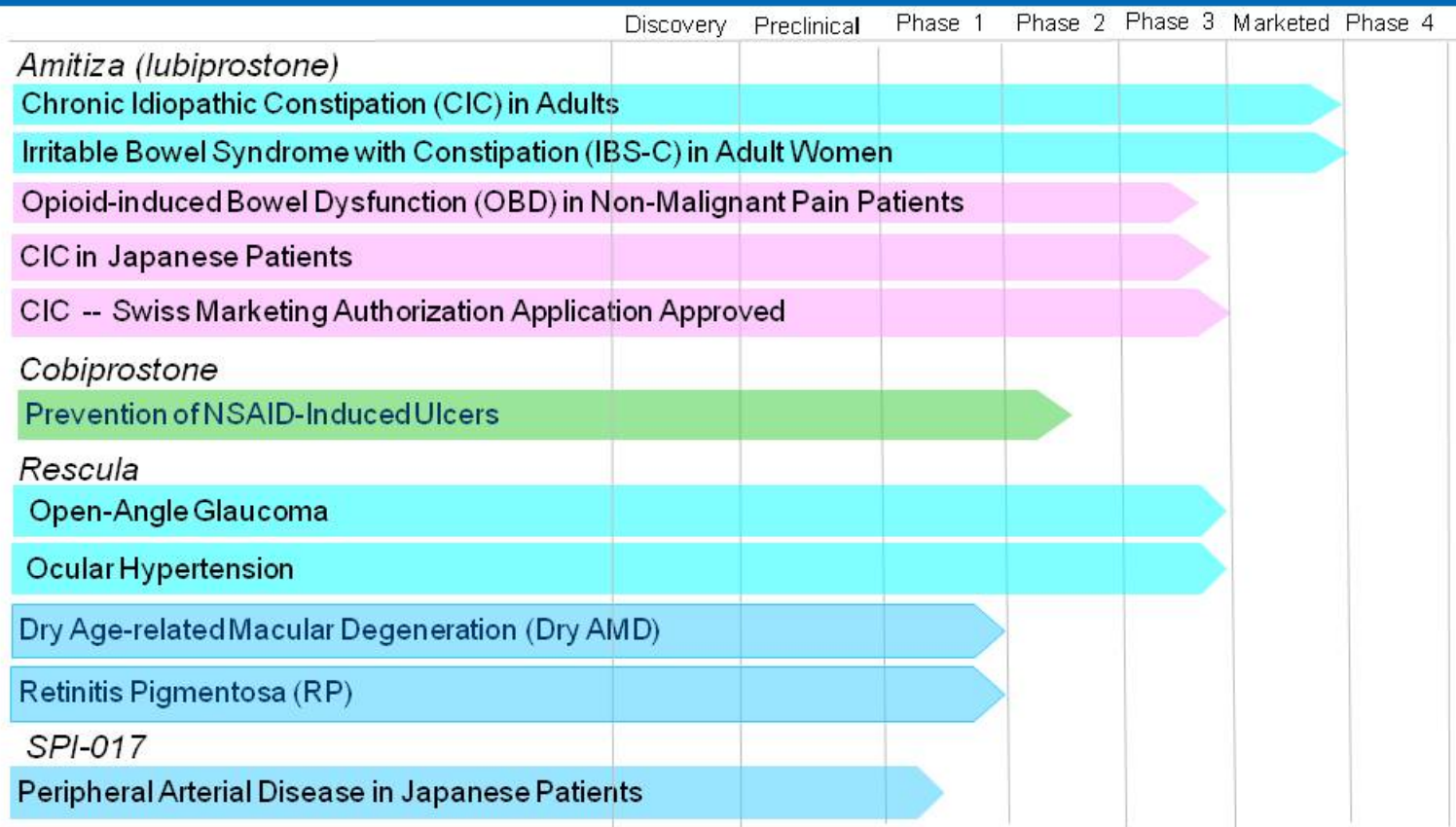
A pipeline of prostone-based product opportunities

- Rescula® FDA-approved for glaucoma and ocular hypertension; promising data for additional indications
- Cobiprostone for prevention of NSAID-induced gastric ulcers in phase 2
- SPI-017 for peripheral arterial disease going into phase 2
- Additional prostones in preclinical development

Strong financial position

- \$114.4 million in cash and investments (as of June 30, 2010)
- No debt

Sucampo's Product Opportunities



Amitiza Answers Unmet Medical Needs in the Gastro-Intestinal Market

- **Proven safety and efficacy for long-term usage**
 - Efficacy and tolerability similar for both genders and across age groups for CIC
 - 90% of nausea events diminish after first week
 - Competing products recommended for short-term use only
- **Quick and predictable relief of symptoms**
 - Up to 63% of CIC patients respond within 24 hours
 - IBS-C patients were twice as likely to achieve overall response than those receiving placebo
- **A major market opportunity**
 - Estimated U.S. market of 12 million patients with CIC
 - Estimated more than 10 million patients with IBS-C in the U.S.
 - More than 14 million (CIC and IBS-C) new diagnoses each year
- **Unique mechanisms of action**
 - In CIC, Amitiza activates chloride ion channels, promoting fluid secretion
 - In IBS-C, Amitiza activates chloride ion channels and promotes mucosal barrier protection

Amitiza – Electrolytes Remain Stable, Even After 48 Weeks*

	n	Baseline	Week 24	Week 48
Sodium, mEq/L	873	141.0	140.0	139.0
Potassium, mEq/L	873	4.2	4.1	4.1
Chloride, mEq/L	873	103.0	103.0	103.0
Calcium, mg/dL	873	9.7	9.7	9.7
Magnesium, mEq/L	872	1.7	1.7	1.7
Phosphorus, mg/dL	872	3.6	3.6	3.6

* Orr KK. *Formulary*. 2006;41(3):118-129.
Ueno R, Osama H, Habe T, Engelke K, Patchen M..

Amitiza: Effects of Lubiprostone on Clinical Electrocardiographic Results -- Summary and Conclusions of Two Studies*

Summary and Conclusions

- No clinically significant QTc prolongation was observed when healthy volunteers were administered lubiprostone at a single 24 or 144 mcg dose.
- No clinically significant QTc prolongation was reported when constipated patients were dosed daily for 3 weeks with varying doses of lubiprostone
- These findings indicate that lubiprostone treatment does not increase the risk of TdP associated with QTc prolongation
- The results are consistent with the current cumulative safety information for lubiprostone administered to patients with chronic constipation or irritable bowel syndrome with constipation: no serious cardiac adverse events attributable to lubiprostone have been reported to date

* Sprenger C, Copa A, Morganroth J, Panas R, Ueno R. Effect of lubiprostone, a unique agent for the treatment of chronic idiopathic constipation, on clinical electrocardiographic results. *Gastroenterology* 2007; 132(4 Suppl 2): A-3225 [abstract S2136]

- Takeda commercializes and markets Amitiza for GI indications in U.S. and Canada
 - Currently covers two indications: CIC in adults and IBS-C in adult women
 - Takeda holds right of first refusal to additional GI indications
 - Takeda records all U.S. sales
 - Sucampo retains all other rights
- Sucampo's tiered royalty rate: 18% to 26% of annual net sales
- Sucampo reimbursed for GI clinical development costs
- Sucampo has received \$150 million in upfront and development milestone payments as of 6/30/2010
- Sucampo receives up to \$4.5 million/year to support co-promotion efforts
- Sucampo co-markets Amitiza to Long Term Care, Hospitals and Department of Defense market segments

Amitiza – Design of Successful Phase 3 Trial for Opioid-induced Bowel Dysfunction (OBD)

- A total of 443 OBD patients received two 24-mcg capsules of lubiprostone or placebo each day for 12 weeks (1 capsule, twice a day) in a randomized placebo controlled phase 3 trial
- Conducted at multiple sites in the U.S. and Canada
- Primary endpoint: change from baseline in spontaneous bowel movement (SBM) frequency at Week 8 in patients without reduction in dose of study pain medication
- Concomitant pain medications: fentanyl, methadone, morphine and oxycontin
- Trial '632 did not hit endpoint

Amitiza – Data from Phase 3 Pivotal Trial for Opioid-induced Bowel Dysfunction (OBD)*

Reported results of successful phase 3 trial (OBD0631) at DDW 2010

- Patients in '631 trial taking lubiprostone achieved a significantly ($p=0.02$) greater increase in the mean number of SBMs per week in eight of the 12 weeks of the trial as compared to placebo patients
- The percentage of patients in '631 trial who achieved a SBM within 24 hours and 48 hours was significantly higher with lubiprostone as compared to placebo ($p=0.0126$ at 24 hours, and $p=0.0360$ at 48 hours)
- Statistical significance was achieved for the overall change from baseline in constipation-associated symptom endpoints in '631 trial

Sucampo has decided to conduct another phase 3 OBD trial
As per our contract, we expect Takeda to share 50% of the costs of this trial
Trial to initiate in late 2010

* DDW 2010, Abstract #780958

Amitiza - Terms of License, Commercialization and Supply Agreement with Abbott Japan

- Abbott agreement represents a key element in Sucampo's international growth strategy for Amitiza
- Abbott received exclusive rights to commercialize Amitiza in Japan for CIC, and right of first refusal for additional indications in Japan
- If successfully developed, Sucampo will supply finished product to Abbott
- Sucampo retains right to co-promote Amitiza in Japan and to develop Amitiza for additional indications
- Sucampo has received a total of \$17.5 million in upfront and milestone payments from Abbott (as of June 30, 2010)
- Sucampo designed and managed the phase 3 efficacy and safety trials in Japanese CIC patients

Phase 3 efficacy trial

- Met primary efficacy endpoint ($p=0.0001$)* of mean change in SBMs from baseline after one week of treatment
- A randomized, double-blind, placebo-controlled multi-center trial
- Dose: Placebo or lubiprostone 24-mcg capsule, twice daily, for 28 days
- Evaluated 124 patients, with history of less than 3 SBMs per week for at least 6 months, confirmed during 14-day screening period

Phase 3 long-term safety trial

- An open-label, multi-center, confirmatory trial
- Dose: one lubiprostone 24-mcg capsule twice a day for 48 weeks
- Enrolled 209 patients, with history of less than 3 SBMs per week for at least 6 months, confirmed during 14-day screening period
- Interim results* through Week 24 of 48-week trial show lubiprostone is safe and well tolerated

*Sucampo press release of August 5, 2010

Rescula – Agreement with R-Tech Ueno Ltd. covers U.S. and Canada

- Sucampo's first non-GI therapeutic area drug, licensed from R-Tech Ueno, Ltd.
- Rescula is a prostone-based drug with a unique mechanism of action
 - FDA-approved in 2000 for lowering of intra-ocular pressure (IOP) in glaucoma and ocular hypertension patients, not currently marketed in U.S. or Canada
 - Activates BK channels in retinal cells
 - Lowers IOP by increased outflow of aqueous humor through trabecular meshwork
 - Proven to increase ocular blood flow to optic nerve and in the choroid
 - Demonstrated to maintain visual field, to inhibit apoptosis and to inhibit changes in an ischemic optic nerve head
 - These data were developed after Rescula's first approval in 2000
 - Sucampo filed these data in an sNDA in August 2009; awaiting decision

Rescula – Agreement with R-Tech Ueno Ltd. covers U.S. and Canada

- Sucampo has exclusive rights to commercialize Rescula and the right of first refusal to additional indications; as well as the right to develop Rescula for additional ophthalmic indications and to license those indications back to RTU

Sucampo's Plans for Rescula

- Launch for glaucoma and ocular hypertension, once sNDA is approved
- Designing phase 2 protocol for dry age-related macular degeneration (dry AMD)
- Designing phase 2 protocol for retinitis pigmentosa (RP)

Significant recent development:

R-Tech Ueno's phase 2 clinical trial results

in 112 moderate to severe RP patients

showed dose-dependent improvement in visual field *

* R-Tech Ueno press release of June 4, 2010

Cobiprostone -- Phase 2 Trial Design

- Cobiprostone is a locally acting chloride channel activator with potent activity in the GI tract
- Purpose of phase 2 trial: to assess the safety and protective effects of cobiprostone compared to placebo in patients taking chronic NSAID therapy for osteoarthritis and/or rheumatoid arthritis
- Three dose levels of cobiprostone: 18-mcg once, twice or three times a day
- All subjects received 500-mg naproxen twice a day
- Baseline endoscopy without gastric and duodenal ulcers or ≤ 2 gastric and/or duodenal erosions
- Primary endpoint: overall incidence of gastric ulcers during 12 week treatment period
- Addresses the risk of *C difficile* infections as well as constipation associated with PPI-NSAID combinations

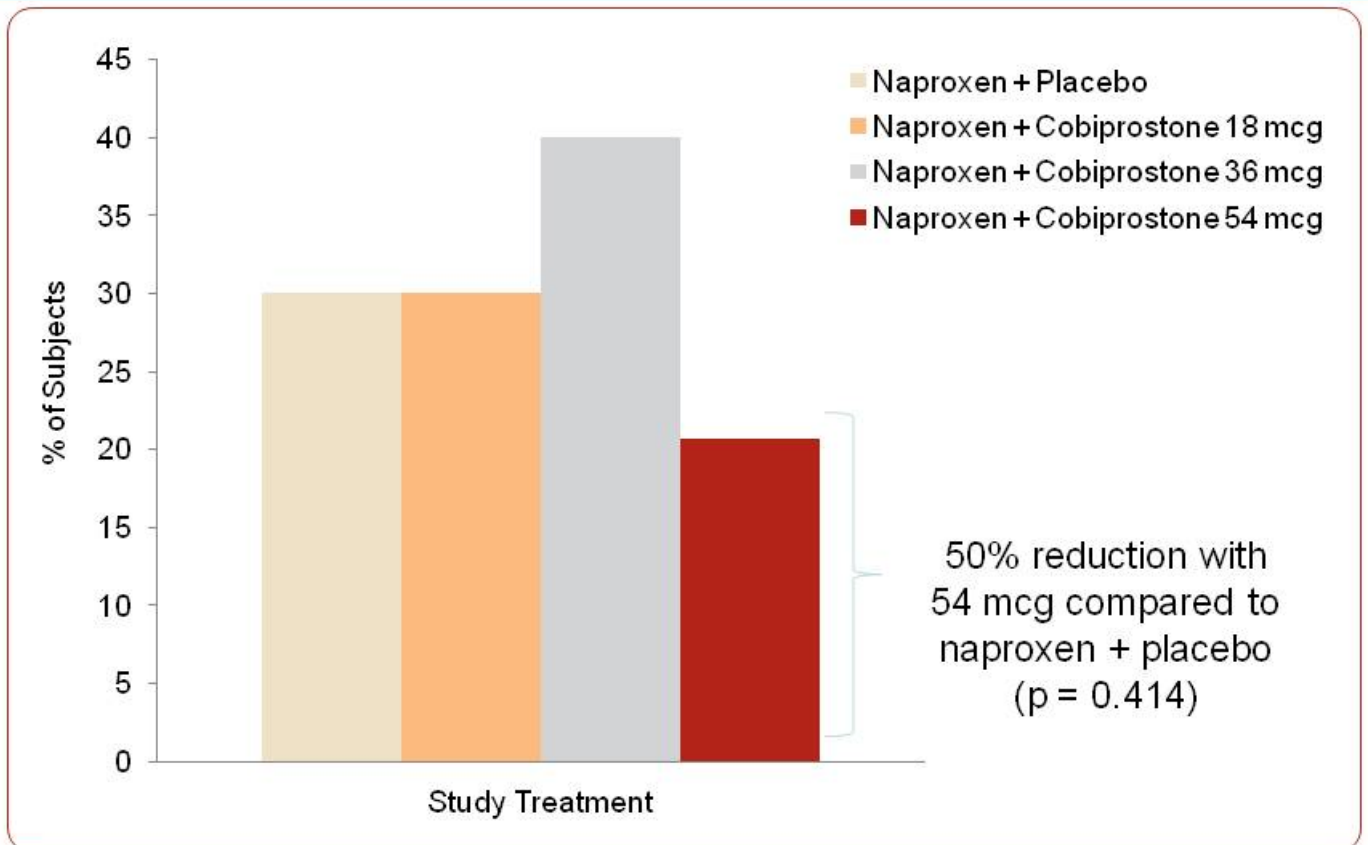
Cobiprostone -- Phase 2 Trial Results in Prevention of NSAID-Induced GI Injury*

- Subjects in high-dose cobiprostone cohort experienced 50% reduction in overall incidence of gastric ulcers when compared to placebo
- Cobiprostone showed an overall statistically significant reduction in gastric erosions through the 12 week treatment period and reductions in gastric erosions through Week 12 were dose dependent, middle and high dose cohorts showed statistical significance
- Time-to-onset of all ulcer or erosion development was delayed in cobiprostone cohorts with overall statistical significance across the 12 weeks

**DDW 2010, oral presentation 780837*

Cobiprostone - Phase 2 Efficacy Results

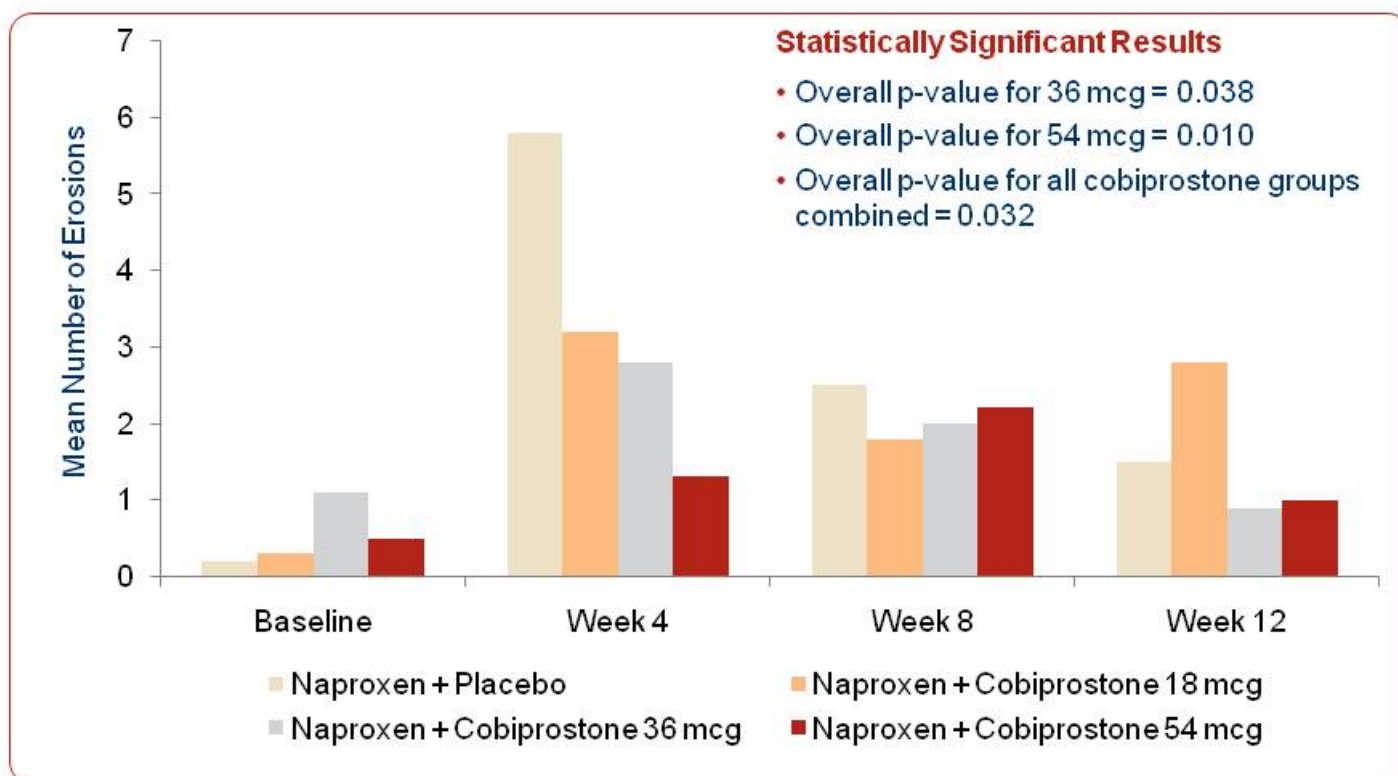
Overall Incidence of Ulcers at Week 12*



*DDW 2010, oral presentation 780837

Cobiprostone – Phase 2 Efficacy Results

Incidence of Gastric Erosions*



P-values are from post-hoc contrasts comparing each group to placebo

P ≤ 0.05

* DDW 2010, oral presentation #780837

Proprietary Fatty Acids – Prostones – Fuel Sucampo's Growth and Deep Product Pipeline

Fatty Acids



Prostones

Amitiza[®]

(lubiprostone)

CIC (24 mcg) approved
January 2006

IBS-C (8 mcg) approved
April 2008

Rescula[®]

(unoprostone isopropyl)

Re-launch in U.S. for
glaucoma and ocular
hypertension in 2010

DryAMD and RP phase
2 protocols under
development

Cobiprostone

(SPI-8811)

Reported phase 2
trial for prevention of
NSAID-induced
gastric ulcers

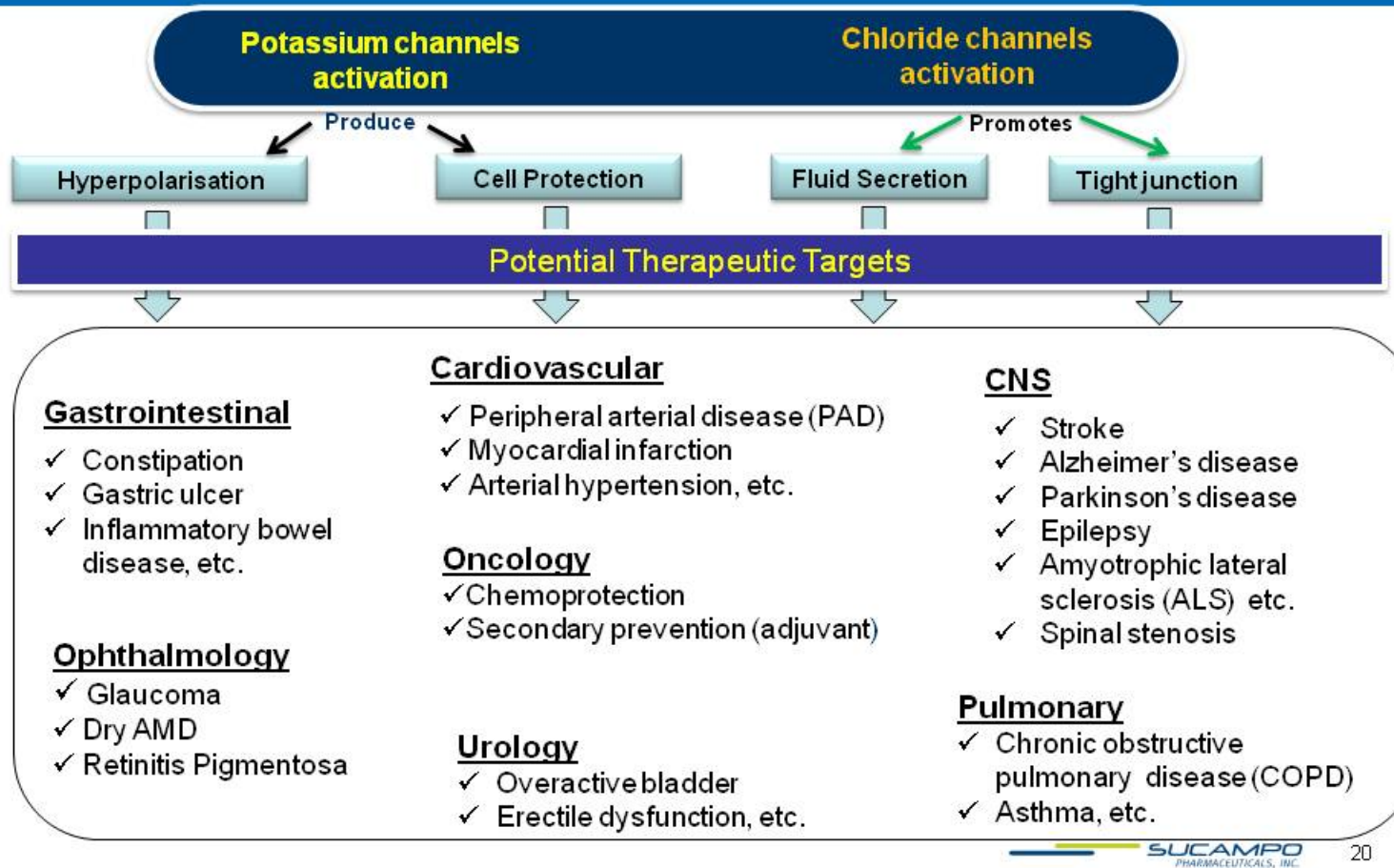
SPI-017

Planning phase
2 trial for
peripheral
arterial disease

**Other
Prostones**

Several
compounds
selected for
preclinical
development

Prostones Work As Potassium and Chloride Channel Activators

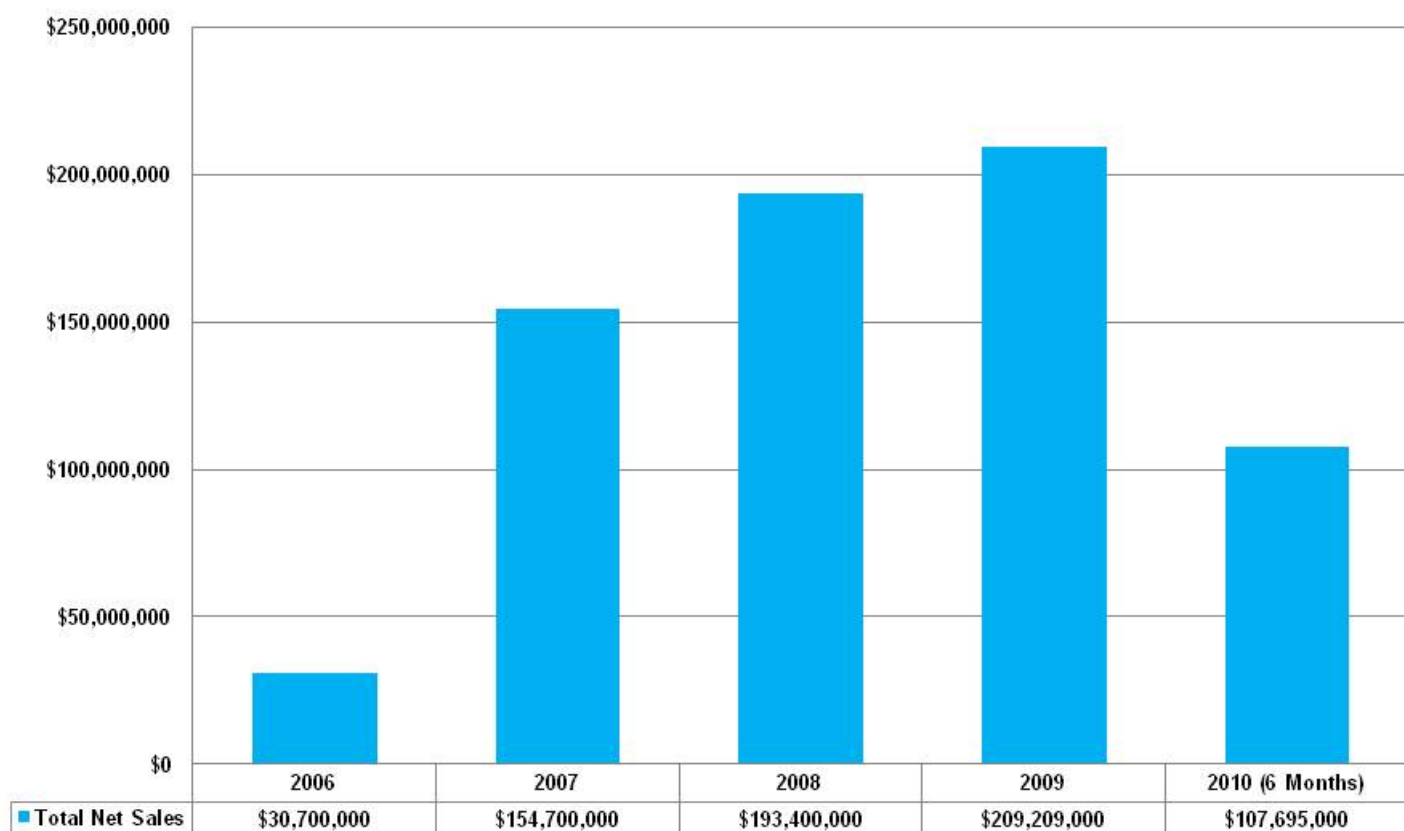


Sucampo's Financial Results and Position

<i>(In millions, except per share data)</i>	2007	2008	2009	2010 YTD As of June 30 (6 months)
Product Royalty Revenue	\$27.5	\$34.4	\$38.3	\$19.4
R&D Revenue*	\$59.4	\$72.3	\$24.0	\$6.8
Total Revenue	\$91.9	\$112.1	\$67.4	\$28.6
Net Income/(Loss)	\$13.2	\$25.0	(\$0.8)	(\$2.3)
Earnings Per Share (diluted)	\$0.35	\$0.59	(\$0.02)	(\$0.05)
Cash and Investments	\$86.1	\$121.5	\$118.3	\$114.4

*R&D Revenue includes reimbursement of clinical trial expenses, and revenue recognized from milestone payments for filing and approval of sNDA for IBS-C (in 2007 and 2008, respectively).

Annual Net Sales of Amitiza Since Launch in April 2006



Sucampo's 2010 Milestones

- Plan commercialization of Amitiza in Switzerland, based on pricing negotiations with Swiss authorities
- ✓ Report phase 3 efficacy trial results of Amitiza in Japanese CIC patients
- Initiate Amitiza phase 3 trial in OBD patients
- Initiate phase 2 trial of Rescula in dry AMD
- ✓ Complete phase 1 trial of SPL-017 for peripheral arterial disease (PAD) in Japanese patients
- Complete Amitiza for OBD phase 3 follow-on safety extension trial

Corporate Update

August 6, 2010