

**<sup>99m</sup>Tc-Maraciclalide Demonstrates Potential to Differentiate Inflammation from Fibrosis in Interstitial Lung Disease**

- Phase 2 <sup>99m</sup>Tc-maraciclalide data presented at SNMMI 2026 Annual Meeting show distinct  $\alpha\beta3$  integrin uptake in patients with ILD

**London, UK, 1 June 2026.** [Serac Healthcare Limited](#) (“Serac Healthcare” or “the Company”), a clinical radiopharmaceutical company developing an innovative molecular imaging agent, <sup>99m</sup>Tc-maraciclalide, has presented Phase 2 data showing that SPECT-CT imaging with <sup>99m</sup>Tc-maraciclalide has the potential to identify and differentiate active inflammation from fibrosis in patients with interstitial lung disease (ILD). The findings were presented at the Society of Nuclear Medicine and Molecular Imaging (SNMMI) Annual Meeting in Los Angeles, USA, taking place from 30 May to 2 June and have been highlighted in an SNMMI press release: [“New SPECT Imaging Approach Distinguishes Inflammation from Fibrosis to Optimize Treatment for Lung Disease.”](#)

These encouraging Phase 2 results demonstrate that imaging with <sup>99m</sup>Tc-maraciclalide has the potential to meet a number of unmet clinical needs:

- Differentiating inflammation from fibrosis to inform treatment selection
- Identifying co-existent inflammation in patients with established fibrotic disease to inform treatment approach
- Providing a screening tool for ILD in rheumatoid arthritis (RA) patients based on established risk factors; and
- Enabling early identification and monitoring of RA-associated ILD for disease progression and therapy response.

ILD encompasses a heterogeneous group of lung conditions characterised by varying degrees of inflammation and fibrosis. Accurately distinguishing between the two is critical to clinical management, yet there is currently no reliable, non-invasive method to identify active inflammation in the lungs.

**<sup>99m</sup>Tc-maraciclalide** is a gamma-emitting radiotracer that binds to  $\alpha\beta3$  integrin, which is upregulated during angiogenesis (new blood vessel formation), a cardinal feature of inflammatory diseases. The investigational agent has previously demonstrated diagnostic utility in other inflammatory conditions, including endometriosis and rheumatoid arthritis.

The 15 patient substudy is part of the “PROspective Evaluation of Interstitial Lung Disease progression with quantitative CT (PREDICT-ILD)” Phase 2 clinical trial which is being run by a team from the University of Exeter, a world-leading research centre for lung disease. Investigators evaluated <sup>99m</sup>Tc-maraciclalide in patients with two distinct forms of ILD: idiopathic pulmonary fibrosis (IPF) and fibrotic hypersensitivity pneumonitis (fHP), alongside healthy controls (n=5 per group). Fused images were independently evaluated to assess radiological patterns, distribution, and standardised uptake values (SUV). A target-to-background ratio (TBR) was derived from maximum and minimum lung SUV.

Both IPF and fHP patient cohorts showed distinct uptake in the lungs compared with healthy controls. Mean lung SUV was significantly higher in the fHP cohort versus healthy controls, and numerically higher for IPF; mean TBR was also numerically higher in both patient groups. The more pronounced uptake observed in fHP, a condition in which active inflammation typically co-exists with fibrosis,

compared with IPF, in which inflammation is not a defining feature, is biologically consistent with the mechanism of action of maraciclatiside.

Commenting on the findings, **Dr Druin Burch, Scientific Director of Serac Healthcare**, said:

*“ILD is a pernicious and painful condition affecting millions of patients worldwide. Inflammatory and fibrotic disease have distinct pathophysiological mechanisms, prognostic implications, and therapeutic requirements, yet there is no non-invasive way of making this distinction. If these results are replicated in a larger study, maraciclatiside has the potential to have an immediate impact on clinical outcomes.”*

**David Hail, Chief Executive of Serac Healthcare** added:

*“The ability to visualise inflammation non-invasively, and to distinguish it from fibrosis, addresses an urgent unmet need in ILD. For clinicians managing these patients, the ability to visualise and identify disease activity has the potential to inform and improve clinical decisions and also to enable the development of new therapies.”*

The ILD data add to a growing body of clinical evidence for <sup>99m</sup>Tc-maraciclatiside across multiple inflammatory conditions. Maraciclatiside holds US FDA Fast Track Designation for both endometriosis and ILD indications.

Analysis of the Phase 2 study is ongoing; Phase 3 studies in ILD are being planned.

**-ENDS-**

**Maraciclatiside is for investigational use only and is not approved by the FDA or UK and European regulatory authorities.**

**Images are available on request.**

The abstract 261910. *“Imaging Lung Inflammation in Interstitial Lung Disease (ILD) with <sup>99m</sup>Tc-Maraciclatiside – a Therapy Selection Tool?”* is available on the SNMMI [website](#) and on the Serac Healthcare website [here](#).

Details on the PREDICT-ILD study can be found at [www.clinicaltrials.gov](http://www.clinicaltrials.gov) : NCT05609201

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## **Notes to Editors**

### **Serac Healthcare Ltd**

Serac Healthcare is a clinical radiopharmaceutical company with deep expertise in discovering, developing and commercialising innovative molecular imaging technologies. Using these targeted technologies to underpin personalised medicine in the fields of endometriosis, inflammatory arthritis and interstitial lung disease, Serac Healthcare is focused on bringing to market effective tools to

accelerate diagnosis, and to deliver earlier and more effective treatment decisions. Serac Healthcare Ltd is a wholly owned subsidiary of Serac Life Sciences Limited. [www.serachealthcare.com](http://www.serachealthcare.com)

**About the Society of Nuclear Medicine and Molecular Imaging**

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