FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	. ,			Filed							mpany Act		1934	1					
		of Reporting Person		С					ker or Tra		Symbol Ltd. [F	OMX]			ck all app		rting F		
(Last) (First) (Middle) 165 MASON STREET					3. Date of Earliest Transaction (Month/Day/Year) 09/13/2018								Director 10% Owner Officer (give title X below) Former 10% Owner					er (specify	
3RD FLO	OOR				4. If	Am	endment	, Date	of Origin	al File	ed (Month/D	ay/Year)				or Joint/Gr	oup Fi	iling (Chec	k Applicable
(Street) GREENWICH CT 06830													Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person						
(City)	(State)	(Zip)																
		Tab	le I -	Non-Deriv		_				Dis									
Date			2. Transacti Date (Month/Day			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acq Disposed Of (D) (and 5)				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Pri	ce	Followin Reporte Transac (Instr. 3	d tion(s)	(Inst	r. 4)	(Instr. 4)	
Common	Stock														4,781	,708(1)		I	Investment Manager ⁽²⁾
		Т	able I	I - Derivat (e.g., p							osed of, o				Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversio or Exercise Price of Derivative Security		e (Month/Day/Year	Exec if any	Deemed ution Date, y th/Day/Year)	4. Transaction Code (Instr. 8)		on of Secu Acq (A) o Disp of (I			6. Date Exerci Expiration Da (Month/Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		o D S (I	. Price f erivative ecurity nstr. 5)	9. Numbe derivative Securitie Beneficia Owned Followin Reported Transacti (Instr. 4)	Owner Form Or In (I) (Ir 4)	Ownershi Form: Direct (D) or Indire (I) (Instr.	Beneficial Ownership
					Code		V (A)	(D)	Date Exercis	able	Expiration Date		Amou or Numb of Share	er					
		of Reporting Person		<u>.C</u>															
(Last) 165 MAS 3RD FLO	SON STR OOR	(First) EET	(I	Middle)															
(Street)	WICH	CT	C	06830															
(City)		(State)	(2	Zip)															

1. Name and Address of Reporting Person*									
JAY JEFFREY R									
ON OCT TICE IX									
(Last)	(First)	(Middle)							
C/O GREAT POI	NT PARTNERS, LLC								
165 MASON STREET, 3RD FLOOR									
(Street)									
GREENWICH	CT	06830							
(City)	(State)	(Zip)							
(Oity)	(Otate)	(Zip)							
1. Name and Address of Reporting Person*									
KROIN DAVI	ח								
ICICOII DICE	<u> </u>								
(Last)	(First)	(Middle)							
, ,	` ,	(Middle)							
C/O GREAT POINT PARTNERS, LLC									
165 MASON STREET, 3RD FLOOR									
(Street)									
GREENWICH	CT	06830							
(City)	(State)	(Zip)							

Explanation of Responses:

- 1. Consists of 1,400,081 shares owned by Biomedical Value Fund, L.P. ("BVF"), 1,809,973 shares owned by Biomedical Offshore Value Fund, Ltd. ("BOVF"), 1,395,476 shares owned by GEF-SMA, L.P. ("GEF-SMA"), and 176,178 shares owned by Class D Series of GEF-PS, LP ("GEF-PS").
- 2. Great Point Partners, LLC ("Great Point") is the investment manager of each of BVF, BOVF, GEF-SMA and GEF-PS, and by virtue of such status may be deemed to be the beneficial owner of the shares owned by each of them. Each of Dr. Jeffrey R. Jay, M.D. ("Dr. Jay"), as senior managing member of Great Point, and Mr. David Kroin ("Mr. Kroin"), as special managing member of Great Point, has voting and investment power with respect to such shares, and therefore may be deemed to be the beneficial owner of such shares. Great Point, Dr. Jay and Mr. Kroin disclaim beneficial ownership of such shares except to the extent of their respective pecuniary interests.

Remarks:

On September 13, 2018, the Issuer conducted an offering of its common stock. As a result of the issuance of such additional shares, the Reporting Persons are no longer the beneficial owners of more than ten percent of any class of the Issuer's securities and are therefore no longer subject to Section 16.

 /s/ Dr. Jeffrey R. Jay.
 09/14/2018

 M.D.Senior
 09/14/2018

 /s/ Dr. Jeffrey R. Jay, M.D.
 09/14/2018

 /s/ David Kroin
 09/14/2018

 ** Signature of Reporting Person
 Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.