Wederhoor Sen-Jam Pharmaceuticals

Vragen Investico 13 juli

Dear NAAM,

I am an investigative journalist at Investico, a Dutch platform for investigative journalism. We are writing to you in connection with an article that will soon be published in the Dutch magazine *De Groene Amsterdammer* and the newspaper *Trouw*. Over the past few months, we have been working on a story that involves one of Sen-Jam's consultants, Joris Verster, and the hangover remedy SJP-001.

In the spirit of providing you with an opportunity to respond, we would like to present our findings to you. We ask that you review them carefully and correct them as you see fit. Please respond to our questions by **Monday, July 20**, at the latest.

Our Findings:

- Sen-Jam is developing the hangover remedy SJP-001. It is a combination of two medications that are already on the market and readily available at drugstores in the Netherlands: naproxen and fexofenadine. The drug is not yet on the market but is currently undergoing Phase 2 clinical trials in the United States. Through press releases and WeFunder, Sen-Jam regularly calls on people to invest in the drug. Sen-Jam is collaborating on this project with a Dutch researcher from Utrecht University: Joris Verster. According to a video published on Sen-Jam's website, Verster and Jacqueline Iversen, founder of Sen-Jam, met for the first time in New Orleans. From 2016 to 2025, Verster co-authored several studies that were sponsored by Sen-Jam Pharmaceutical about a purported hangover remedy produced by the company.

- In 2017 Verster published a study with a number of master's students and a researcher from Utrecht University. The article is titled "An Effective Hangover Treatment: Friend or Foe?" The finding: "social drinkers" do indeed see value in a hangover remedy and indicate that it does not cause them to drink more. Verster concluded: "Research shows that the vast majority will not increase their alcohol consumption." According to an expert we spoke with, this is "a completely illogical conclusion." "You can't possibly determine how people will behave in the future based on a questionnaire," he says. "Because people are simply inclined to give socially desirable answers when it comes to topics such as drinking or smoking." At the top of the article, Verster presented himself as an employee of Utrecht University. However, the article states that the research was conducted by Neuroclinics, his private company. In previous responses, the university said it did not receive any funding for this study and that the money from Sen-Jam most likely went to Neuroclinics. Utrecht University said Verster did this study as a consultant for Sen-Jam, for which it didn't give permission to Verster, and it wasn't aware of it. The

university also said it is not allowed to put the university as an affiliation while conducting consulting work.

- In 2020, Verster participated in an experiment to investigate the effectiveness of Sen-Jam's drug (SJP-001). Although the study included only five subjects, the authors draw a conclusion: The new drug "significantly" reduced the severity of hangovers, and the data "suggests" that the drug is effective. However, a closer look at the data reveals that the drug actually performs no better than when patients receive only naproxen. Here, too, Verster presents himself as a researcher at Utrecht University. All the authors served on Sen-Jam's scientific advisory board. Utrecht University (UU) stated in previous responses that it has nothing to do with this. "We must note that the employee conducted these studies in his capacity as a scientific advisor to the company,". The university states that it must grant prior approval for all outside activities and that any potential appearance of a conflict of interest must, of course, be transparently disclosed. "The University of Utrecht believes that this was not done, or was done insufficiently, in this case."

  - Sen-Jam is trying to portray a hangover as a medical condition. At Verster's suggestion, the hangover is included in the International Classification of Diseases (ICD), a list of diseases recognized by the World Health Organization. The company announces this change as major news, portraying Verster as "the father of alcohol hangover research."

  - In 2025, Verster co-authored a study with Jacqueline Iversen of Sen-Jam in which he established a link between hangovers and an increased risk of cancer. The authors conclude: "To promote healthy aging and a long life, it is therefore justified to develop a safe and effective treatment for a hangover," after which they write that Sen-Jam's remedy is "a promising hangover remedy." An expert tells us that cancer is not caused by a hangover, but rather by alcohol itself. The expert states that Dutch pharmacies advise users of naproxen to be 'careful' in drinking alcohol, since drinking alcohol can exacerbate the stomach problems associated with taking naproxen. In the Conflict of Interest section, it is stated that Verster holds shares in Sen-Jam Pharmaceuticals. When asked whether the university had been informed by Verster that he was co-authoring a scientific publication with students in collaboration with the company in which Verster holds shares, Utrecht University replied, "No."

  - A professor of medical ethics says the following about Verster's work for Sen-Jam: "Why on earth would you conduct research on a substance that only encourages people to drink more? It seems like a slippery slope where someone's primary goal is personal enrichment," she says. "If you receive money in your personal bank account, you must not mix it with your work at the university: that's a conflict of interest in which you're using the university to further your personal goals."

  Our questions:

- Did Sen-Jam pay Joris Verster or his private company, Neuroclinics, to conduct the studies between 2016 and 2025?
- If so, for which studies and how much money?
- Utrecht University says it never entered into a contract with Sen-Jam. Why didn't Sen-Jam enter into a contract with Utrecht University—Verster's employer—to conduct the studies?
- How does Sen-Jam respond to scientists' criticism of hangover remedies, particularly when they argue that such remedies lead to increased alcohol consumption?
- How does the company respond to the criticism of Verster's 2017 study, which suggests that future alcohol consumption cannot be inferred from a questionnaire at all?
- How does the company respond to the criticism of Sen-Jam's 2020 study, which argues that the conclusion that SJP-001 significantly reduces hangovers is strange, given that the results suggest the drug does not perform better than naproxen alone, a drug that is already available?
- How does Sen-Jam respond to the criticism of the 2025 study, which claims that alcohol—and not a hangover—causes cancer? And that Sen-Jam's drug could be dangerous because drinking alcohol can exacerbate the stomach problems associated with taking Naproxen?

Kind regards,

Antwoord Sen-Jam 16 juli

Dear Mr. Dequeker,

Thank you for contacting us and for providing Sen-Jam with an opportunity to respond before publication.

We take the matters raised in your email seriously and are reviewing your findings with the appropriate scientific, regulatory, legal, and corporate personnel.

At the outset, however, we must note that your summary contains a number of factual inaccuracies, material omissions, and characterizations that do not accurately represent either Sen-Jam's scientific platform or our public communications. Several of the "findings" presented in your summary are, in our view, disputed characterizations rather than established facts. Accordingly, Sen-Jam does not accept a number of the premises embedded in your inquiry and intends to correct the record before any publication is finalized.

Most significantly, your summary reduces nearly a decade of inflammatory resolution research to a narrative centered on a single investigational asset for alcohol-induced inflammation. That fundamentally mischaracterizes our work. Sen-Jam is a

computational drug discovery and development company focused on discovering host-directed therapies that promote inflammatory resolution across multiple therapeutic areas. SJP-001 is one investigational program within that broader platform. Alcohol-induced inflammation was selected because it provides a well-characterized, measurable model of acute inflammatory biology.

Likewise, Sen-Jam has never claimed that treating a hangover prevents or cures cancer, nor have we stated that hangover itself causes cancer. Our communications have specifically supported the January 2025 U.S. Surgeon General's Advisory on Alcohol and Cancer Risk. We discussed the role of alcohol-induced inflammation as one biological consequence of alcohol exposure that warrants continued scientific investigation. Those are materially different propositions, and we expect those distinctions to be accurately reflected.

We are also concerned that your summary omits the broader scientific context in which this research has evolved. Since 2010, the Alcohol Hangover Research Group (AHRG)—an international scientific collaboration established to improve the rigor, standardization, and scientific understanding of alcohol hangover research—has helped advance what was historically an overlooked area of biomedical investigation. Professor Joris Verster has been one of many longstanding contributors to that effort. Any balanced discussion should recognize that this body of work extends well beyond any one investigator or institution and has contributed meaningfully to a growing understanding of alcohol-induced inflammation and its broader biological implications. The evolution of that science helped illuminate alcohol hangover not merely as a collection of symptoms, but as a reproducible human model of acute inflammatory dysregulation—an insight that informed Sen-Jam's broader work in inflammatory resolution.

To ensure that our response addresses the evidence underlying your reporting rather than summaries or paraphrases, please provide:

1. The complete statements received from Utrecht University, including the detailed questions posed and the dates they were provided.
2. The identities, qualifications, and complete comments of the experts whose opinions are quoted or paraphrased.
3. The analysis supporting your assertion regarding the 2020 pilot study.
4. The specific Sen-Jam publications or communications on which you base your mischaracterizations of our work.
5. Your anticipated publication date and the date and time (including time zone) by which our response must be received.

Please also confirm that Sen-Jam's response will be reflected accurately and in appropriate context in any publication arising from your investigation.

We are committed to transparency, scientific rigor, and factual accuracy and intend to provide a substantive response once we have reviewed the materials supporting the assertions outlined in your email.

Nothing in this acknowledgment should be interpreted as accepting the accuracy, completeness, or characterization of the findings presented in your summary.

Kind regards,

Antwoord Investico 17 juli

Dear NAAM,

Thank you very much for your response.

As requested, and also to avoid any confusion, we are forwarding to you the studies we will publish about and to which we referred in our previous email dated Monday, July 13. Please see the attachment for these.

Regarding the publication date, it will likely be sometime during the week of July 27, at a time yet to be determined.

However, we cannot accommodate your other requests (as described by you in points 1, 2, and 3). We believe we have sent you adequate information for you to respond to, and are under no obligation in particular to share complete statements or responses from other parties with you.

We can extend the deadline for your responses to our questions by one day, to Tuesday, July 21. We look forward to hearing your perspective.

Kind regards,

Antwoord Sen-Jam 20 juli

Dear Mr. Dequeker,

Further to our prior correspondence, Sen-Jam Pharmaceutical has reviewed the three publications you supplied and the questions and characterizations contained in your original inquiry. We appreciate the opportunity to provide our perspective before publication.

You declined to provide the complete statements from Utrecht University, the questions to which those statements responded, the identities and qualifications of

the experts quoted, or the analysis supporting certain assertions. We are therefore responding to those assertions as they were presented to us. Nothing in this response should be understood as accepting the accuracy, completeness, or context of the third-party statements in your inquiry.

We welcome legitimate scientific scrutiny. We do not accept, however, characterizations that omit disclosures and limitations expressly contained in the publications, confuse exploratory research with confirmatory evidence, or present disputed interpretations as established facts.

1. Dr. Joris Verster's relationship with Sen-Jam and Utrecht University

Dr. Joris Verster has served as a scientific advisor to Sen-Jam since 2016. He was engaged in his independent advisory capacity and not as a representative of Utrecht University. Sen-Jam has never represented that Utrecht University was a contractual partner in the development of SJP-001.

Dr. Verster did not conceal his professional affiliations from Sen-Jam. His professional materials openly identified his academic appointments at Utrecht University and Swinburne University, his role as director of NeuroClinics, his leadership in alcohol-hangover research, and his advisory work for Sen-Jam and numerous other organizations.

Dr. Verster told Sen-Jam that Utrecht University was aware of and supportive of his outside scientific activities. Sen-Jam had no information suggesting otherwise. We cannot speak to which internal forms, notifications, or approvals Dr. Verster may have been required to complete with Utrecht University. Those administrative matters were between Dr. Verster and his employer. Sen-Jam never instructed him to conceal his relationship with the company, omit a financial interest, or misrepresent the capacity in which he was working.

Sen-Jam did not contract with Utrecht University because the company did not retain Utrecht University to conduct a university-sponsored research program. An author's academic affiliation identifies the institution at which the researcher holds an appointment; it does not necessarily mean that the institution funded, commissioned, or sponsored every publication the author contributed to.

2. Compensation, study funding, and student support

Dr. Verster did not receive cash compensation from Sen-Jam for conducting the individual studies identified in your inquiry. He served under a broader scientific advisory agreement and received equity-based compensation in the form of Sen-Jam shares and warrants for his advisory services. That compensation was not

calculated on a study-by-study basis and was not contingent upon a study producing a favorable result or a publication reaching a predetermined conclusion.

Sen-Jam uses comparable equity-based arrangements with other experienced scientific and clinical advisors. The arrangement was not created uniquely for Dr. Verster or for the publications discussed in your inquiry.

The 2017 publication states that data collection was conducted by NeuroClinics and that the study was funded by Sen-Jam Pharmaceutical. Because that work occurred approximately nine years ago, Sen-Jam has not reconstructed the precise historical payment mechanics or amounts within the compressed timeframe of this prepublication inquiry. We therefore cannot confirm whether particular study expenses were paid directly to NeuroClinics, reimbursed through another arrangement, or handled in another manner.

The 2020 pilot publication states that the study was funded by Sen-Jam and conducted operationally by Clinilabs. The publication also describes Sen-Jam's involvement in study design, data interpretation, manuscript preparation, and the decision to publish.

Separately, Sen-Jam sponsored travel support that enabled students to attend and present scientific work at Alcohol Hangover Research Group meetings. Those awards supported scientific education, travel, and participation. They were not conditioned on any particular research finding. The 2025 publication expressly discloses Dr. Verster's advisory relationship with Sen-Jam, his ownership of Sen-Jam stock, the travel support received by certain authors, and Jacqueline Iversen's role with Sen-Jam.

Sen-Jam has not undertaken a line-item reconstruction of historical study expenses, equity and warrant grants, or travel awards for this response. The relevant forms of funding, support, and financial interest were disclosed in the applicable publications, and none was contingent upon a predetermined research conclusion.

3. Whether an effective treatment would encourage increased alcohol consumption

Sen-Jam does not encourage excessive alcohol consumption. SJP-001 is not intended or represented to make drinking safe, reduce intoxication, prevent impairment, or eliminate alcohol's short- or long-term health risks.

The proposition that reducing next-day symptoms would necessarily cause people to consume more alcohol is a hypothesis, not an established scientific conclusion. Individuals also vary substantially in their susceptibility to alcohol hangover,

illustrating that the relationship between next-day symptoms and future drinking behavior is not a simple cause-and-effect relationship.

The 2017 study surveyed 1,837 Dutch adults between 18 and 30 years of age who had recently experienced a hangover. Of the respondents, 71.6% stated that they would not consume more alcohol if an effective hangover treatment became available, 13.4% stated that they would, and 15.1% were uncertain. A follow-up survey of 471 participants produced a similar distribution.

Those results should be described accurately. The study measured respondents' stated intentions; it did not prove how all consumers would behave after a treatment became available. The publication expressly acknowledged this limitation and called for prospective research. Sen-Jam agrees with that limitation.

It is therefore inaccurate to suggest that the authors overlooked the distinction between stated intentions and observed future behavior. They identified and discussed it themselves. Sen-Jam does not claim that no individual could change his or her behavior. The minority who said they might drink more further demonstrates why responsible-use communication, prospective study, warnings, and regulatory oversight are important.

Any eventual product communication would need to state clearly that reducing next-day symptoms does not reduce intoxication, impaired judgment, unsafe-driving risk, or the broader health consequences of alcohol consumption.

4. The 2020 SJP-001 proof-of-concept pilot

The 2020 study was an exploratory proof-of-concept pilot, not a confirmatory clinical trial.

Sixteen subjects were screened and 13 participated. Seven participants did not experience a qualifying hangover after receiving placebo, despite reporting at enrollment that the selected amount of alcohol would normally produce one. One additional participant was excluded because of significant sleep difficulties in the clinical setting. Five participants therefore met the criteria for the final efficacy analysis.

Describing the research only as a 'five-subject study' omits this methodological history and one of the principal lessons from the pilot: screening based solely on a participant's expectation of developing a hangover was not sufficiently reliable. The study was not designed to estimate the prevalence of hangover resistance in the general population.

Compared with placebo, SJP-001 produced a statistically significant difference on the aggregate Acute Hangover Scale. Naproxen alone did not cross the conventional threshold for statistical significance. However, the numerical mean scores for SJP-001 and naproxen were similar.

The publication discusses that similarity directly and considers several possible explanations, including differences in variability, differences in breath-alcohol concentration, and the possibility that the finding reflected the very small sample and might not be reproduced in a larger study. Sen-Jam does not claim that this pilot established superiority of SJP-001 over naproxen alone.

The appropriate conclusion is that the pilot generated a preliminary signal for SJP-001 compared with placebo and justified additional investigation. It did not provide definitive evidence of comparative efficacy.

The paper openly identifies the small efficacy sample, the similarity between certain SJP-001 and naproxen results, limitations in alcohol administration and participant selection, reliance on subjective assessment, and the need for a larger, adequately powered randomized trial. It also identifies Sen-Jam as the funder, Clinilabs as the organization that conducted the clinical study, and the relevant company and advisory relationships of the authors. Those limitations and relationships were disclosed, not concealed.

5. Recognition and classification of alcohol hangover

Neither Sen-Jam nor Dr. Verster has the authority to unilaterally add a condition to the World Health Organization's International Classification of Diseases. Classification decisions occur through the WHO's scientific and administrative processes.

Defining or classifying a symptom complex does not endorse the activity that precedes it. Classification permits a condition to be defined, studied, measured, coded, and evaluated consistently. Recognition of alcohol hangover does not minimize the harms of excessive alcohol consumption or suggest that drinking is safe.

6. The 2025 opinion article, alcohol, inflammation, and cancer risk

Alcohol consumption causes cancer. Sen-Jam does not dispute that fact.

The 2025 publication is expressly identified as an opinion article. It begins with the established conclusion from the U.S. Surgeon General's Advisory that alcohol consumption increases the risk of multiple cancers. It also states that the simplest way to prevent hangovers and alcohol-associated inflammation is to moderate

alcohol consumption, and it supports educational campaigns intended to reduce drinking and increase public awareness of alcohol-related cancer risk.

For ease of reference, we have linked for you HERE the January 2025 U.S. Surgeon General's Advisory on Alcohol and Cancer Risk, which makes clear that alcohol consumption—not hangover—is the established carcinogenic exposure and discusses inflammation, oxidative stress, and acetaldehyde among the principal biological mechanisms by which alcohol contributes to cancer risk.

The article you reference does not establish through new clinical evidence that hangover, independently of alcohol consumption, causes cancer. It presents a hypothesis that frequent alcohol exposures resulting in hangovers may involve repeated acetaldehyde exposure, oxidative stress, and inflammatory responses that warrant further scientific investigation.

Sen-Jam has never claimed that SJP-001 prevents or treats cancer. We have also never claimed that reducing hangover symptoms eliminates the carcinogenic, systemic, or long-term risks of alcohol consumption. The article's discussion of hangover, inflammation, and disease should be described as a proposed biological hypothesis, not as proof that hangover independently causes cancer.

The publication also discloses Dr. Verster's Sen-Jam advisory relationship and stock ownership, the student travel support, and Jacqueline Iversen's company role. Those relationships were presented to readers.

7. Naproxen and alcohol-related safety

Sen-Jam recognizes the established gastrointestinal and other warnings associated with naproxen, including risks that may be relevant to alcohol consumption.

SJP-001 is investigational and is not approved for consumer use. Sen-Jam does not recommend that individuals independently combine naproxen and fexofenadine as a hangover treatment.

The fact that naproxen and fexofenadine are separately available over the counter does not establish that their combined use, at a particular dose and timing, is safe and effective for a new indication. That is precisely why Sen-Jam is pursuing a regulated pharmaceutical-development pathway.

Appropriate development requires evaluation of the proposed dose and timing, intended population, exclusion criteria and contraindications, adverse events, potential interactions, warnings, and overall benefit-risk profile. Any proposed indication, claims, dosing instructions, and labeling would be subject to regulatory review.

A known safety risk is not a reason to avoid scientific evaluation. It is a reason to conduct controlled research, apply appropriate oversight, and establish clear warnings and conditions of use before a product could be considered for approval.

8. Scientific disclosure and assertions concerning motive

Scientific disagreement regarding methodology, statistical power, interpretation, disclosure, and clinical relevance is legitimate.

The assertion that Dr. Verster's work was primarily intended to encourage alcohol consumption or achieve personal enrichment is speculation, not evidence of scientific misconduct. Dr. Verster had an extensive international research record in psychopharmacology, alcohol effects, driving safety, and alcohol-hangover research before his relationship with Sen-Jam. His academic appointments, NeuroClinics role, advisory work, industry relationships, and Sen-Jam relationship were openly documented.

Financial disclosure does not prevent scientific criticism. It does, however, contradict any suggestion that the relevant Sen-Jam relationships were hidden from readers. The 2017 publication disclosed Sen-Jam funding, NeuroClinics' data-collection role, and Dr. Verster's consulting relationship. The 2020 publication disclosed Sen-Jam's funding and involvement, Clinilabs' operational role, and the authors' relevant relationships. The 2025 communication disclosed Dr. Verster's advisory relationship and stock ownership, student travel support, and Ms. Iversen's role.

9. Sen-Jam's purpose

SJP-001 is one investigational program within Sen-Jam's broader work in inflammatory biology and resolution-oriented therapeutics.

Sen-Jam is not attempting to make excessive alcohol consumption safe or consequence-free. Our objective is to determine, through controlled clinical research and regulatory review, whether an investigational product can demonstrate an acceptable safety and efficacy profile for a defined condition that already causes substantial symptoms and functional impairment.

That question should be answered through evidence and regulatory review, not through assumptions about the motives of the company, its advisors, or the people who experience the condition.

We ask that the factual corrections and context provided in this response be reflected accurately and in substance in any resulting publication.

We also ask that Sen-Jam be given a fair opportunity to respond to any new material allegation that was not included in your original inquiry before publication.

Nothing in this response should be interpreted as accepting the accuracy, completeness, or characterization of the disputed findings contained in your correspondence.

Kind regards,
NAAM