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): June 20, 2016

Titan Pharmaceuticals, Inc.

(Exact name of registrant as specified in its charter)

Delaware

(State or other jurisdiction of incorporation)

0-27436 (Commission File Number)	94-3171940 (IRS Employer Identification No)
400 Oyster Point Blvd., Suite 505, So	outh San Francisco, CA 94080
(Address of principal executive	ve offices and zip code)
650-244-4	990
(Registrant's telephone numb	er including area code)
(Registrant's former name or former add	dress, if changed since last report)
eck the appropriate box below if the Form 8-K filing is intended to sin following provisions:	nultaneously satisfy the filing obligation of registrant under any of
Written communications pursuant to Rule 425 under the Securities A	act (17 CFR 230.425)
Soliciting material pursuant to Rule 14a-12(b) under the Exchange A	ct (17 CFR 240.14a-12(b))
Pre-commencement communications pursuant to Rule 14d-2(b) under	er the Exchange Act (17 CFR 240.14d-2(b))
Pre-commencement communications pursuant to Rule 13e-4(c) unde	r the Exchange Act (17 CFR 240.13e-4(c))

Item 7.01. Regulation FD Disclosure.

On June 22, 2016, Titan Pharmaceuticals, Inc. (the "Company") will participate in the 3rd Annual Healthcare Day in London hosted by Roth Capital Partners. A copy of the updated corporate presentation, which will be posted on the Company's website, is attached hereto as Exhibit 99.1 and incorporated herein by reference.

The foregoing information, including the presentation attached hereto as an Exhibit, is being furnished pursuant to Item 7.01 of this Current Report and shall not be deemed "filed" for the purposes of Section 18 of the Securities and Exchange Act of 1934, as amended, or otherwise subject to the liabilities of that Section. This information shall not be incorporated by reference into any registration statement pursuant to the Securities Act of 1933, as amended.

Item 8.01. Other Events.

On June 20, 2016, the Company issued a press release announcing 10 patients received treatment last week with the Probuphine (buprenorphine) implant making them the first patients in the United States to receive the medication since it was approved by the U.S. Food and Drug Administration on May 26, 2016 for the maintenance treatment of opioid dependence.

A copy of the press release is attached hereto as Exhibit 99.2 and is incorporated herein by reference.

Item 9.01. Financial Statement and Exhibits.

(d) Exhibits.

Exhibit No.		Description	
99.1 99.2	Corporate Presentation Press Release dated June 20, 2016		

SIGNATURES

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 thereunto duly authorized.

TITAN PHARMACEUTICALS, INC.

By: /s/ Sunil Bhonsle

Name: Sunil Bhonsle

Title: President and Chief Executive Officer

Dated: June 20, 2016



FORWARD-LOOKING STATEMENTS

The presentation may contain "forward-looking statements" within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. Reference is made in particular to the description of our plans and objectives for future operations, assumptions underlying such plans and objectives and other forward-looking terminology such as "may," "expects," "believes," "anticipates," "intends," "projects," or similar terms, variations of such terms or the negative of such terms.

Forward-looking statements are based on management's current expectations. Actual results could differ materially f-rom those currently anticipated and such statements involve risks and uncertainties, including, but not limited to, those risks and uncertainties relating to availability of financing, difficulties or delays in development, testing, regulatory approval, production and marketing of the Company's drug candidates, adverse side effects or inadequate therapeutic efficacy of the Company's drug candidates that could slow or prevent product development or commercialization and the uncertainty of patent protection for the Company's intellectual property or trade secrets.





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- · Focus on proprietary therapeutics for select chronic diseases
- ProNeura[™] drug delivery platform provides long-term, continuous, non-fluctuating medication levels
- Probuphine® (buprenorphine) implant six-month maintenance treatment of opioid addiction
 - FDA approval May 2016
 - · Large and growing market opportunity; significant unmet medical need
- Product pipeline: Ropinirole implant for Parkinson's disease and T3 implant for Hypothyroidism
- · Strong Cash Position to Support Near-term Development Activities



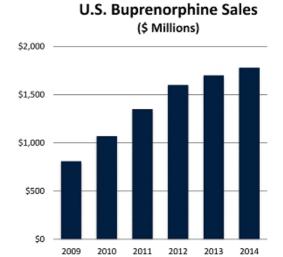


- · Increasingly recognized as a global epidemic by world health authorities
- · Primary, chronic disease of brain reward, motivation, memory and neurobiological circuitry
- · Characterized by cravings, accompanied by a lack of impulse control, cycles of relapse and remission
- · Requires long-term treatment plans and medical care; abstinence is rarely a successful approach
- · Buprenorphine current gold standard for medication-assisted therapy in US



OPIOID ADDICTION: TREATMENT OVERVIEW

- Buprenorphine pharmacology makes it an effective, safer, and more convenient treatment option
 - Controls withdrawal symptoms and cravings without inducing opioid euphoria in patients
 - Convenient outpatient treatment allows take-home medication, unlike methadone
 - · Low risk of respiratory depression versus other opiates
- · U.S. buprenorphine sales in 2015 almost \$2 billion
- · Challenges with daily dosed formulations
 - · Compliance
 - · Sublingual dosing results in variable blood levels
 - · Diversion and abuse





PROBUPHINE® (BUPRENORPHINE) IMPLANT

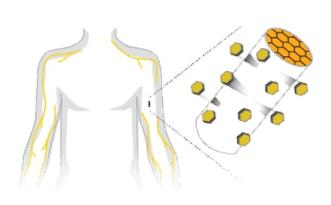
- Implant contains 80 mg of buprenorphine HCl uniformly distributed throughout the ethylene vinyl acetate co-polymer (EVA) matrix
- · No reservoir, therefore no risk of drug dumping

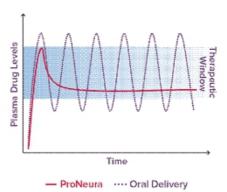




PROBUPHINE® ADMINISTRATION

- · Inserted subdermally in the inner side of the upper arm by a certified health care provider
- · Drug is released continuously into patient's body through the process of dissolution
- · Results in a stable level of medication in the blood, avoiding peaks and troughs of oral dosing





PHARMACEUTICAL

PROBUPHINE® (BUPRENORPHINE) IMPLANT

Probuphine® is the first and only **FDA-approved** maintenance treatment for opioid dependence that provides non-fluctuating blood levels of buprenorphine around-the-clock for a period of six months

EFFICACY	Effective in reducing illicit opioid use	
Non-fluctuating drug exposure over six months may provide superior safety art tolerability		
COMPLIANCE	COMPLIANCE Treatment with implant expected to enhance compliance	
EASE OF USE	Patients dosed once every six months in an outpatient setting	
DIVERSION	Limited access to implants – distribution controlled via a REMS program	



PROBUPHINE®: COMMERCIALIZATION PLANS

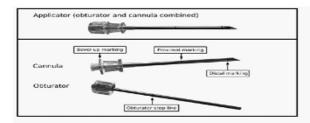
Partnership with Braeburn Pharmaceuticals, Inc. for development and commercialization in U.S. and Canada*

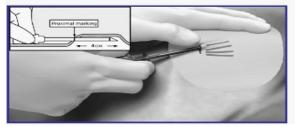
- · Milestone payments:
 - · Upfront: \$15.75 million
 - Approval Milestone: \$15 million
 - · Sales Milestones: \$165 million
- · Tiered Royalties on net sales: mid-teens to low 20s (%)
 - · U.S. Patent term to April 2024
- · First made available to patients in June 2016:
 - · More than 800 health care providers certified in the first 15 days
 - 262 training sessions across 55 cities (2,000+ providers) over 6 weeks in June/July 2016; capacity to train
 4,000 healthcare providers in 2016
 - Exploring reimbursement approaches with insurers, including value-based programs, payment assistance program, rebates
- * Braeburn has sublicensed Canadian rights to Knight Therapeutics



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PROBUPHINE®: RISK EVALUATION & MITIGATION STRATEGY











PROBUPHINE®: RISK EVALUATION & MITIGATION STRATEGY

- Training and Certification Providers who prescribe and implant Probuphine will:
 - · Attend Live Training: Lecture and Practicum
 - Complete the Probuphine REMS Program Knowledge Assessment
 - · Be enrolled in the Probuphine REMS program
 - Providers who will perform Probuphine surgical procedures must meet criteria for procedural competency
 - Recertification will be required after 12 months, prior to placement of any additional orders.
- Patient Counseling Patients will be counseled regarding risks of accidental overdose, misuse, and abuse, and when they might need to contact their healthcare provider
- Closed Distribution Probuphine will only be available to healthcare providers who have been certified in the Probuphine REMS Program

PROBUPHINE®: U.S. CERTIFIED HEALTH CARE PROVIDERS





PROBUPHINE®: EX - U.S. PARTNERING PLANS

- · Pursuing ex-U.S. opportunities in opioid addiction treatment
 - · Progressing discussions with interested companies in select regions
 - · Planning regulatory discussions with EMA and/or select European countries in second half of 2016
- · Opportunity to further develop Probuphine® for treatment of chronic pain





PRONEURA: ADDING VALUE BEYOND PROBUPHINE®

- · Long-term drug delivery technology validated through the Probuphine® program
- Potential for the treatment of select chronic diseases for which low dose, long-term delivery and stable drug levels may offer advantages over other forms of administration
- · Product development programs in progress:
 - · Ropinirole implant for the treatment of Parkinson's disease (PD)
 - · Triiodothyronine (T3) implant for the treatment of hypothyroidism
- Conducting feasibility evaluation of additional compounds in other chronic disease settings to add to the product pipeline
- Goal is to pursue commercial partnerships for product candidates at appropriate stages of development, and potential licensing agreements with other pharmaceutical companies for ProNeurabased technology





PARKINSON'S DISEASE OVERVIEW

- Characterized by the loss of dopamine, which alters activity in the brain region impacting movement and motor function
 - · Treated with drugs designed to replace or mimic dopamine in the brain
 - · After several years of treatment, these drugs lose benefit and trigger serious side effects in up to 80% of patients
- Titan's ProNeuraTM technology has the potential to deliver continuous non-fluctuating levels of dopamine agonists for three months or longer from a single treatment



PARKINSON'S DISEASE - THERAPEUTICS MARKET

- · As many as 1 million people in the US affected
- · That number is expected to almost double by 2030 due to aging of population
- · About 60,000 newly diagnosed for PD annually
- · More than 23,000 die from PD each year

Sales of Dopamine Agonists, U.S.*			
Year Total Sales		% DA	\$ DA
2012	\$1.1 Billion	26%	\$286 Million
2022	\$2.3 Billion	18%	\$414 Million

Cost to American Society **		
\$14.4 Billio	n Annually	
Treatment Costs \$8.1 Billion	Indirect Costs \$6.3 Billion	_
If costs continue to rise	e they will double by 2040	

^{*} GlobalData; **Parkinson's Action Network, National Center for Health Statistics; "The Current and Projected Economic Burden of Parkinson's Disease in the United States" Movement Disorders, March 2013
Based on information from Titan and other sources believed to be reliable and prepared exclusively for Titan. Woodside Capital Partners is not responsible for any use that Titan may make of this material.



PRONEURATM PARKINSON'S DISEASE PROGRAM

- · Ropinirole (Requip®), a dopamine agonist marketed by GSK for PD
- Evaluated in a Parkinsonian animal model using ProNeura[™] drug delivery platform
 - · Results presented in June 2015 19th International Congress of Parkinson's Disease and Movement Disorders
 - · Sustained plasma ropinirole levels for several months following implantation
 - · No local skin irritation at implant site
 - · Controlled PD symptoms without triggering dyskinesias
- · Ropinirole implant program status
 - · Implant formulation selected for clinical development
 - · Non-clinical development program defined and initial clinical study design established
 - · FDA feedback received on pre-IND meeting briefing material
 - · Required non-clinical studies to support IND are in progress
 - · On target to file IND in Q4 2016, to be followed by initial pharmacokinetic and proof of concept clinical study





- · Thyroid gland does not make enough thyroid hormone to meet body's need
 - Typical treatment consists of synthetic prohormone thyroxine (T4) given orally once a day, which is converted by the body to the active triiodothyronine (T3)
 - · Oral T3 treatment is effective, but comes with potential side effects caused by blood level fluctuations
- ProNeura[™] platform has potential to deliver continuous, non-fluctuating levels of T3 and provide a stable blood level for several months following a single treatment



PRONEURATM HYPOTHYROIDISM PROGRAM STATUS

- Completed initial formulation development of the implant and conducted in-vitro and in-vivo drug release studies to further define implant formulation
- · In-vivo non-clinical studies in progress evaluating implant formulations for drug release characteristics
 - · Demonstrated non-fluctuating release of T3 over several months in small and large animal models
 - · Testing in a non-clinical model of hypothyroidism in process
- Next steps
 - · Complete proof-of-concept in the non-clinical studies
 - · Establish the non-clinical study plan that will provide safety data for the IND
 - · Target meeting with the FDA for a pre-IND meeting in Q4 2016
 - · Goal is to start a proof of concept clinical study in second half of 2017



TITAN PRONEURA PRODUCT PIPELINE

CANDIDATE	INDICATION	DEVELOPMENT STAGE
Probuphine®	Opioid Addiction	PRECLINICAL PHASE 1 PHASE 2 PHASE 3 MARKET
Ropinirole Implant	Parkinson's Disease	PRECLINICAL PHASE 1 PHASE 2 PHASE 3 MARKET
T3 Implant	Hypothyroidism	PRECLINICAL PHASE 1 PHASE 2 PHASE 3 MARKET



TITAN EXECUTIVE MANAGEMENT

- · Marc Rubin, M.D. · Executive Chairman & Director
 - · 9 years with Titan
 - · Former Head of Global R&D and member of the Board of Management at Bayer Pharma
 - · Executive R&D and commercial responsibilities at GSK for 13 years
 - · 25 years in the pharmaceutical industry following 7 years at NIH
- · Sunil Bhonsle, M.B.A. President, CEO & Director
 - · 20 years with Titan
 - · 20 years with Bayer Corporation in Biological and Pharmaceutical finance and operations management
- · Kate Beebe, Ph.D. Executive Vice President, Chief Development Officer
 - · 9 years with Titan
 - 20 years in industry, with senior positions in clinical development and medical affairs at GSK, Merck, and Corcept Therapeutics
 - · 10 years in academic medicine





- ProNeura[™] Unique and compelling drug delivery platform
- Probuphine® Only product on market to provide long-term, continuous, non-fluctuating blood levels of buprenorphine for maintenance treatment of opioid addiction
 - · Attractive U.S. partnership in place and pursuing ex-U.S. opportunities
- ProNeura™ for Parkinson's Disease and Hypothyroidism could significantly enhance Titan's value
- Conducting feasibility evaluation of additional compounds in other chronic disease settings to add to the product pipeline
- Strong cash position to support near-term development activities





TITAN PHARMACEUTICALS ANNOUNCES FIRST PATIENTS TREATED WITH PROBUPHINE® FOR OPIOID DEPENDENCE

More than 1,000 health care professionals are now certified to provide Probuphine

SOUTH SAN FRANCISCO, CA – June 20, 2016 – Titan Pharmaceuticals, Inc. (NASDAQ: TTNP) today announced that 10 patients received treatment last week with the Probuphine (buprenorphine) implant, making them the first patients in the United States to receive the medication since it was approved by the U.S. Food and Drug Administration (FDA) on May 26, 2016 for the maintenance treatment of opioid dependence. Probuphine was developed using Titan's long-term, continuous drug delivery platform ProNeura.

To date, more than 1,000 health care providers in 44 states have been trained and certified to provide Probuphine. More than 5,000 health care providers have requested additional information on Probuphine training and will have the opportunity to participate in one of 252 training sessions in 55 U.S. cities this summer, potentially bringing the total number of certified health care providers to more than 2,000 by the end of July and a total of more than 4,000 by the end of 2016.

According to Titan's development and commercialization partner, Braeburn Pharmaceuticals, insurance companies have also expressed strong interest in discussing how they would provide coverage for Probuphine. Several Blue Cross Blue Shield Plans, as well as United Healthcare, have been among those that approved reimbursement for the first patients implanted.

Titan granted exclusive commercialization rights to Probuphine in the U.S. and Canada to Braeburn in 2012 and is currently exploring licensing opportunities in other countries where buprenorphine treatment is part of the opioid addiction treatment practice.

About Opioid Addiction

According to recent estimates, there are 2.5 million people with opioid addiction in the U.S. Approximately 20 percent of this population is addicted to illicit opioids, such as heroin, and the other 80 percent to prescription opioids, such as oxycodone, hydrocodone, methadone, hydromorphone and codeine. Before the year 2000, medication-assisted therapies for opioid dependence had been sanctioned to a limited number of facilities in the U.S. The Drug Addiction Treatment Act of 2000 (DATA 2000) allowed medical office-based treatment of opioid dependence and greatly expanded patient access to medication-assisted treatments (MAT). In 2015, the U.S. Health and Human Services Department announced it would move to expand access to medication-assisted-treatment even further by revising regulations that cap the number of patients who can be treated with buprenorphine products by physicians. The HHS revision to the regulation will be developed to provide a balance between expanding the supply of buprenorphine-based treatment, encouraging use of evidence-based MAT, and minimizing the risk of drug diversion. Sales of buprenorphine drug products for treatment of opioid addiction in 2014 were approximately \$1.75 billion in the United States.

About Probuphine®

Probuphine is a subdermal implant designed to deliver buprenorphine continuously for six months following a single treatment, and to promote patient compliance and retention. Buprenorphine, which is the active ingredient in multiple FDA-approved drug products for the treatment of opioid dependence, is currently available in tablet and film formulations that require self-administration by patients on a daily basis.

Probuphine was developed using ProNeuraTM, Titan's continuous drug delivery system that consists of a small, solid implant made from a mixture of ethylene-vinyl acetate (EVA) and a drug substance. The resulting construct is a solid matrix that is placed subdermally, normally in the upper arm in an outpatient office procedure, and removed in a similar manner at the end of the treatment period. The efficacy and safety of Probuphine have previously been studied in several clinical trials, including a 163-patient, placebo-controlled study over a 24-week period (published in the Journal of the American Medical Association (JAMA)), and a follow on study of 287 patients (published in the journal Addiction).

WARNING: IMPLANT MIGRATION, PROTRUSION, EXPULSION and NERVE DAMAGE ASSOCIATED WITH INSERTION and REMOVAL

Risk Associated with Insertion and Removal

Insertion and removal of PROBUPHINE are associated with the risk of implant migration, protrusion, expulsion resulting from the procedure. Rare but serious complications including nerve damage and migration resulting in embolism and death may result from improper insertion of drug implants inserted in the upper arm. Additional complications may include local migration, protrusion and expulsion. Incomplete insertions or infections may lead to protrusion or expulsion.

Because of the risks associated with insertion and removal, PROBUPHINE is available only through a restricted program called the PROBUPHINE REMS Program. All Healthcare Providers must successfully complete a live training program on the insertion and removal procedures and become certified, prior to performing insertions or prescribing PROBUPHINE implants. Patients must be monitored to ensure that PROBUPHINE is removed by a healthcare provider certified to perform insertions.

Please see additional Important Safety Information in the Package Insert that can be found at probuphine.com or by following this link http://probuphinerems.com/wp-content/uploads/2016/02/final-approved-pi.pdf.

About Titan Pharmaceuticals

Titan Pharmaceuticals Inc. (NASDAQ: TTNP), based in South San Francisco, CA, is a specialty pharmaceutical company developing proprietary therapeutics primarily for the treatment of serious medical disorders. The company's lead product is Probuphine®, a novel and long-acting formulation of buprenorphine for the long-term maintenance treatment of opioid dependence. Probuphine employs Titan's proprietary drug delivery system ProNeuraTM, which is capable of delivering sustained, consistent levels of medication for three months or longer. Titan has granted U.S. and Canadian commercial rights for Probuphine to Braeburn Pharmaceuticals. Probuphine is the first and only commercialized treatment of opioid dependence to provide continuous, around-the-clock blood levels of buprenorphine for six months following a single procedure. The ProNeura technology has the potential to be used in developing products for treating other chronic conditions, such as Parkinson's disease, where maintaining consistent blood levels of a therapeutic agent may benefit the patient and improve medical outcomes. For more information about Titan, please visit www.titanpharm.com.

This press release may contain "forward-looking statements" within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. Such statements include, but are not limited to, any statements relating to our product development programs and any other statements that are not historical facts. Such statements involve risks and uncertainties that could negatively affect our business, operating results, financial condition and stock price. Factors that could cause actual results to differ materially from management's current expectations include those risks and uncertainties relating to the regulatory approval process, the development, testing, production and marketing of our drug candidates, patent and intellectual property matters and strategic agreements and relationships. We expressly disclaim any obligation or undertaking to release publicly any updates or revisions to any forward-looking statements contained herein to reflect any change in our expectations or any changes in events, conditions or circumstances on which any such statement is based, except as required by law.

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