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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):
March 15, 2005

Aastrom Biosciences, Inc.

(Exact name of registrant as specified in its charter)

Michigan	**0-22025**	**94-3096597**
(State or other jurisdiction of incorporation)	(Commission File No.)	(I.R.S. Employer Identification No.)

24 Frank Lloyd Wright Drive
P.O. Box 376
Ann Arbor, Michigan 48106
(Address of principal executive offices)

Registrant's telephone number, including area code:
(734) 930-5555

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:

o Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

o Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

o Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

o 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.

Attached hereto as Exhibit 99.1, which is incorporated herein by reference, is a copy of certain slides used by the Company in making presentations to interested parties, including at investment conferences and to analysts and shareholders. This information is not "filed" pursuant to the Securities Exchange Act and is not incorporated by reference into any Securities Act registration statements. Additionally, the submission of this report on Form 8-K is not an admission as to the materiality of any information in this report that is required to be disclosed solely by Regulation FD. Any information in this report supercedes inconsistent or outdated information contained in earlier Regulation FD disclosures.

Item 9.01 Financial Statements and Exhibits.

(c) Exhibits.

Exhibit No.	Description
99.1	Slides used in presentation

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 hereunto duly authorized.

Date: March 15, 2005

AASTROM BIOSCIENCES, INC.

By: /s/ Alan M. Wright
Alan M. Wright
Senior Vice President, Administrative and
Financial Operations, CFO

Exhibit 99.1

Aastrom BIOSCIENCES INC

Proprietary Cell Products for Tissue Regeneration

Investor Presentation
March, 2005

(Nasdaq:ASTM)

SAFE HARBOR

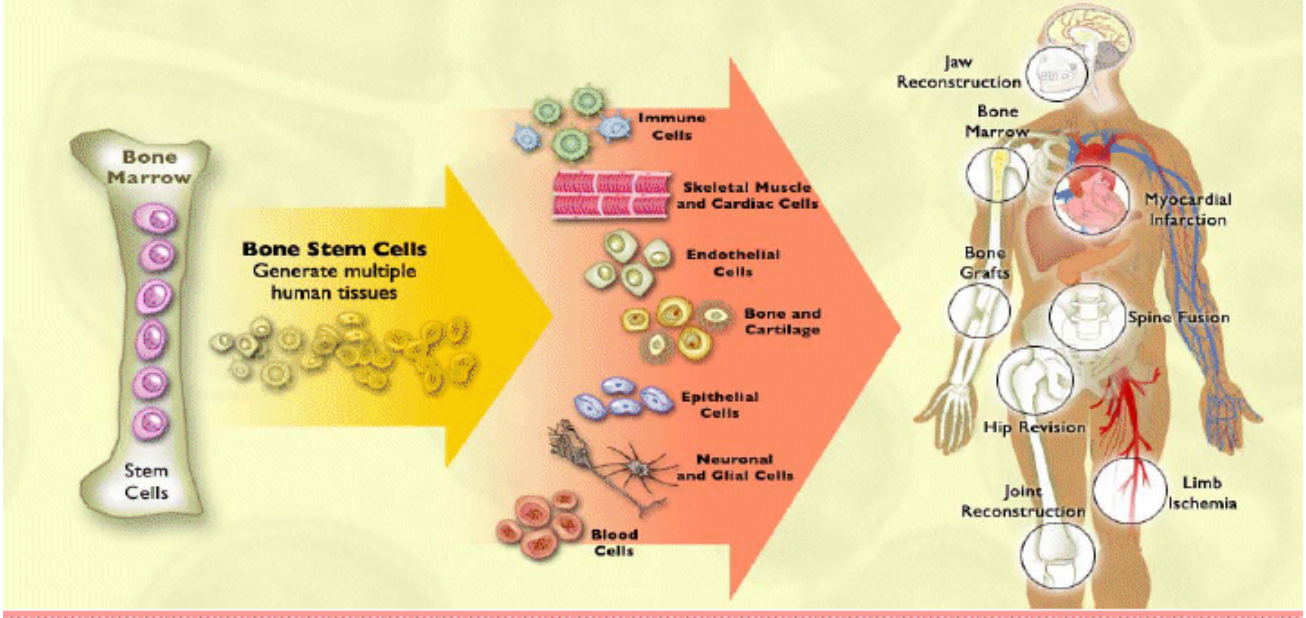
- This presentation contains forward-looking statements, including, without limitation, statements concerning product-development objectives and anticipated timing, clinical trial timing and results, potential market opportunities and revenue models, market development plans, anticipated key milestones and potential advantages and applications of the AastromReplicell® System and related products, which involve certain risks and uncertainties. Actual results may differ significantly from the expectations contained in the forward-looking statements.
- Among the factors that may result in differences are the results obtained from clinical trials and development activities, regulatory approval requirements, competitive conditions and availability of resources.
- These and other significant factors are discussed in greater detail in Aastrom's Annual Report on Form 10-K and other filings with the Securities and Exchange Commission.

Summary

- Emerging as a leading tissue regeneration company
- Proprietary bone marrow stem cell products: *Tissue Repair Cells*
- Business model based on clinical experience and ability to apply TRCs to multiple markets
- Phase II-level trials now active for *two* bone graft indications, with third planned in 2005
- Additional Phase II-level trial for diabetic limb ischemia expected to begin in 2005
- Multiple clinical milestones expected over next 12-18 months
- Good financial position

Capturing the Therapeutic Potential of Bone Marrow Stem Cells

Regenerate tissues with stem cells grown from bone marrow collected from the patient...



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What's Unique About Aastrom

Proprietary adult *stem cells* and industry-unique *manufacturing capability*...

Proprietary Tissue Repair Cells

AastromReplicell System

- Bone marrow-derived adult stem & progenitor cells (non-embryonic)
- Bone, vascular, blood, cartilage and adipose forming capability
- Produced *ex vivo* with patented single-pass perfusion technology
- Proven safety and tissue generation in > 180 patients

- Cell production automation with GMP compliance
- 12-day fixed production cycle
- Scalable
- Point of care or centralized manufacturing capability

... the *Transformation of Technology into Products*

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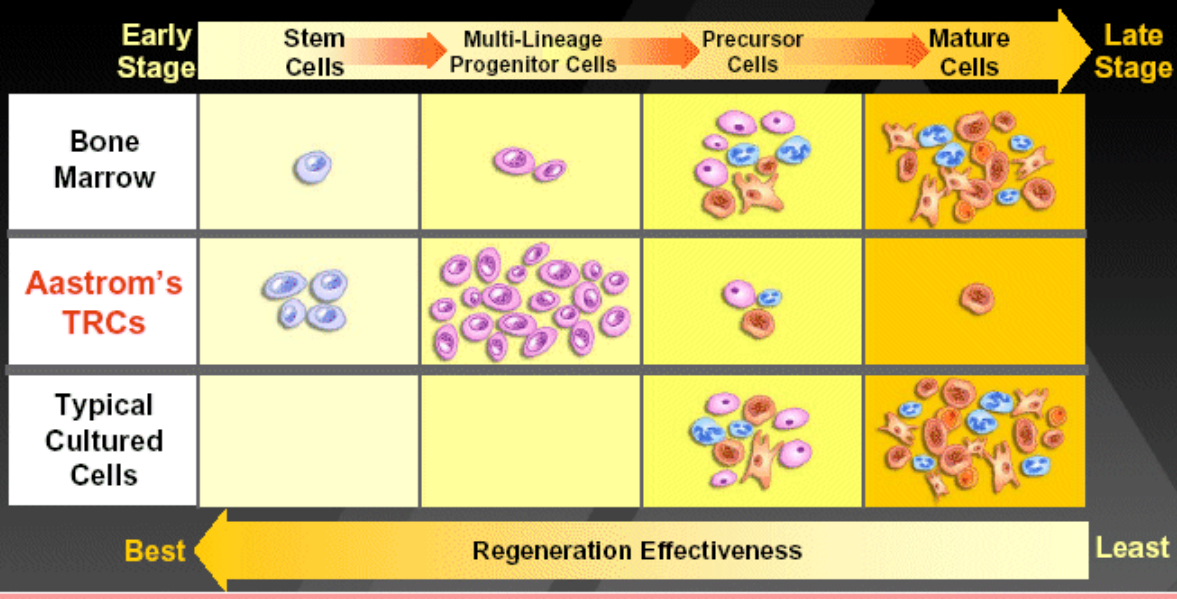
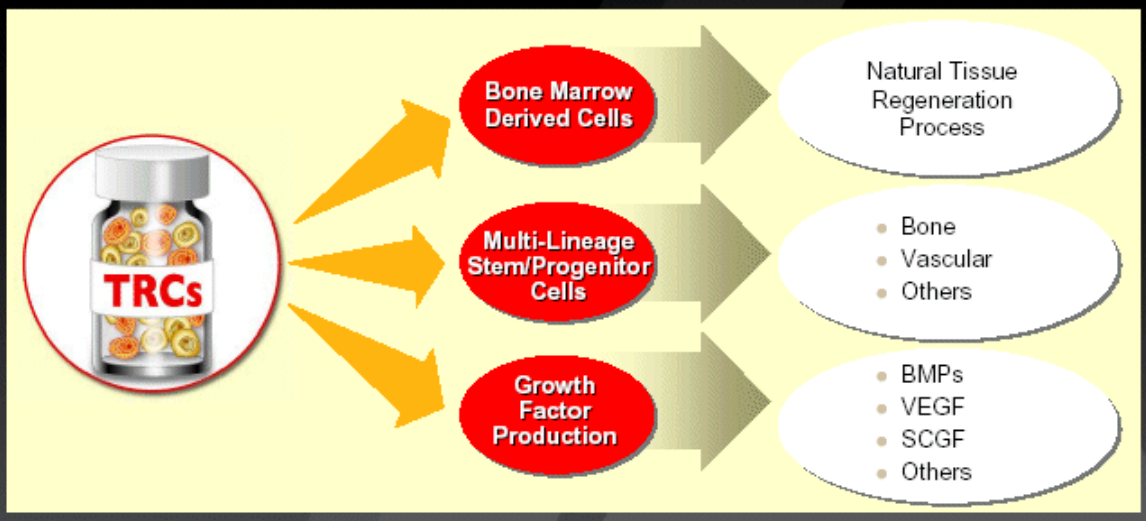
Tissue Repair Cells

Maximizing Regenerative Capability



Aastrom Tissue Repair Cell Product

New Capability in Tissue Regeneration



Tissue Repair Cells:
How The Process Works

Small aspirate collected from patient	Cells go to production lab	TRCs produced in AastromReplicell System	TRCs used to generate healthy tissues

TRC products are designed
to generate revenue
just like pharmaceuticals

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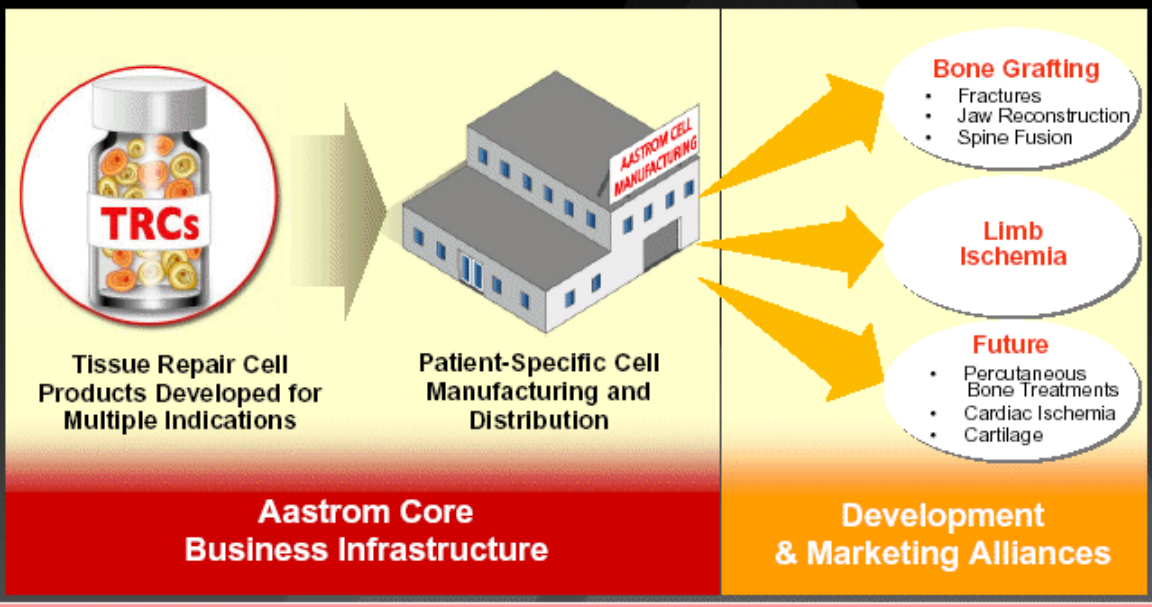
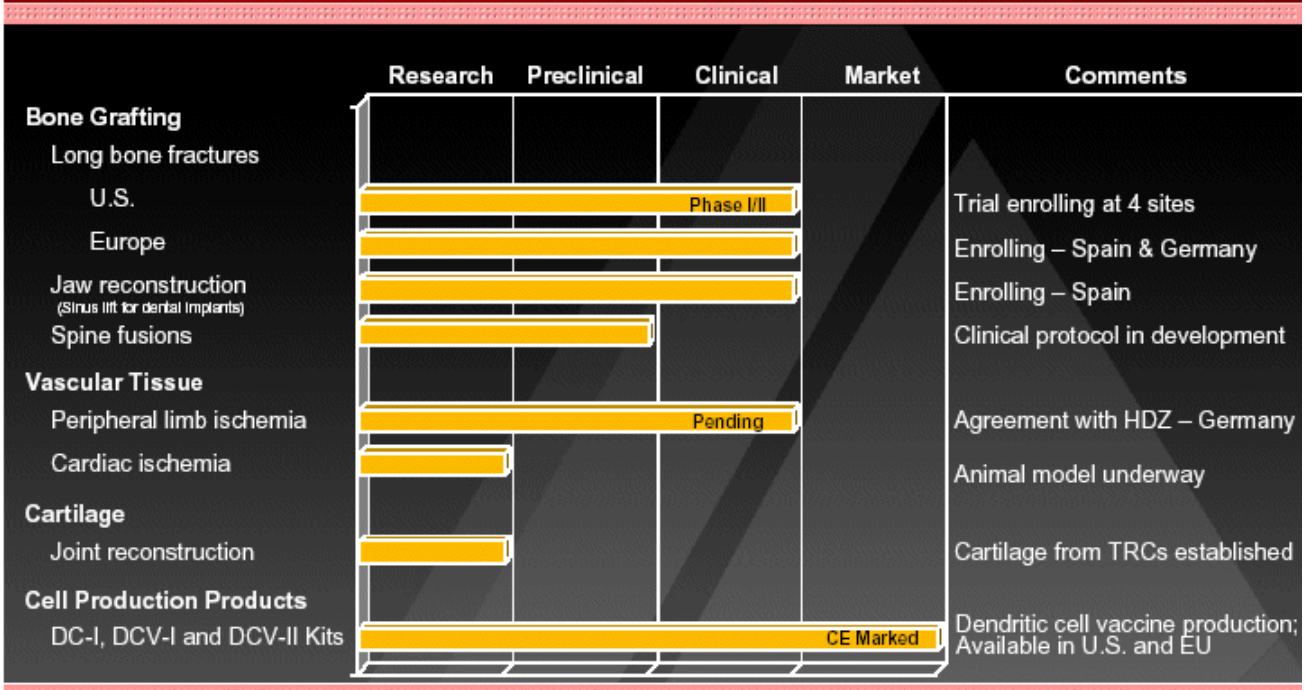
Aastrom's Business Model

Transforming Cells into Products



Development Pipeline



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Aastrom Tissue Repair Cells

Active Lead Product Indications

Product	Applications	Applicable Market Size (Patients) *	Clinical Status
Bone Grafting			
• Fracture	Long bone fractures	120,000	U.S./EU: Active
• Jaw	Sinus lift	205,000	EU: Active
• Spine	Spine fusions	330,000	Preclinical
Vascular Tissue			
• Ischemia	Diabetic limb ischemia	560,000	Pending

* Sources: Datamonitor 2002; Millennium Research Group CY2009 projections; U.S. Census 2000; United Nations 2002 World Population Report; Weitz JI, Byrne J, Clagett P, et al. Diagnosis and Treatment of Chronic Arterial Insufficiency of the Lower Extremities: A Critical Review. Circulation 1996; 94: 3026-49. *(U.S., Europe and Japan)*

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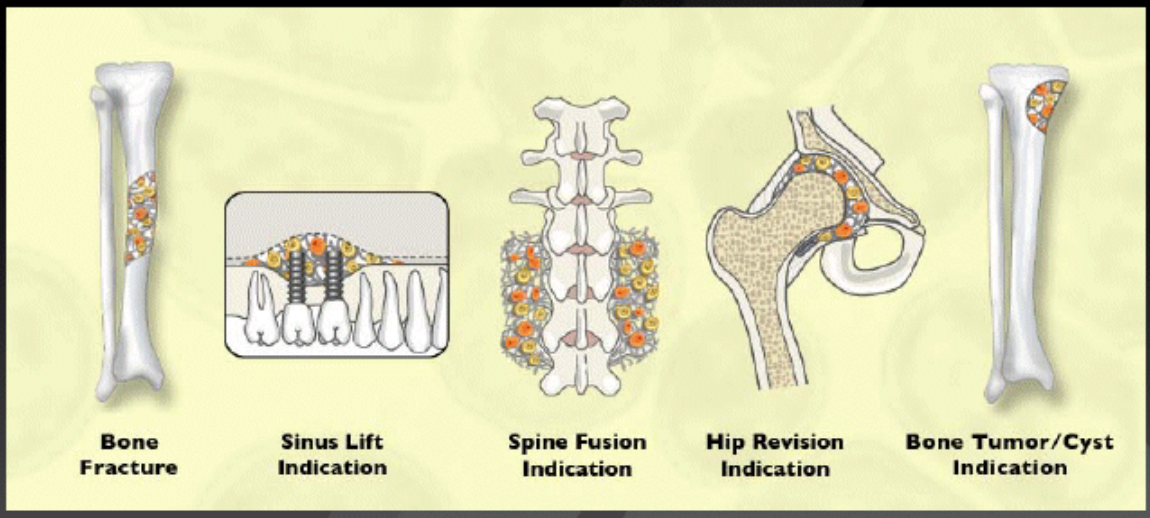
Potential for TRCs in Bone Grafting



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Bone Graft Product Comparison

Conceptual Model for Severe Indications

Alternatives

Therapy	Effectiveness	Morbidity	Cells
Autograft (Gold Standard)	+++	high	++
Synthetic Matrix	+	low to high	no
Allograft/DBM Matrix	+ (variable)	low to high	no
BMP	++	n/a	no
Aastrom TRCs (+ Matrix)	+++ (+)	low	+++

DBM = Demineralized Bone Matrix
BMP = Bone Morphogenic Proteins

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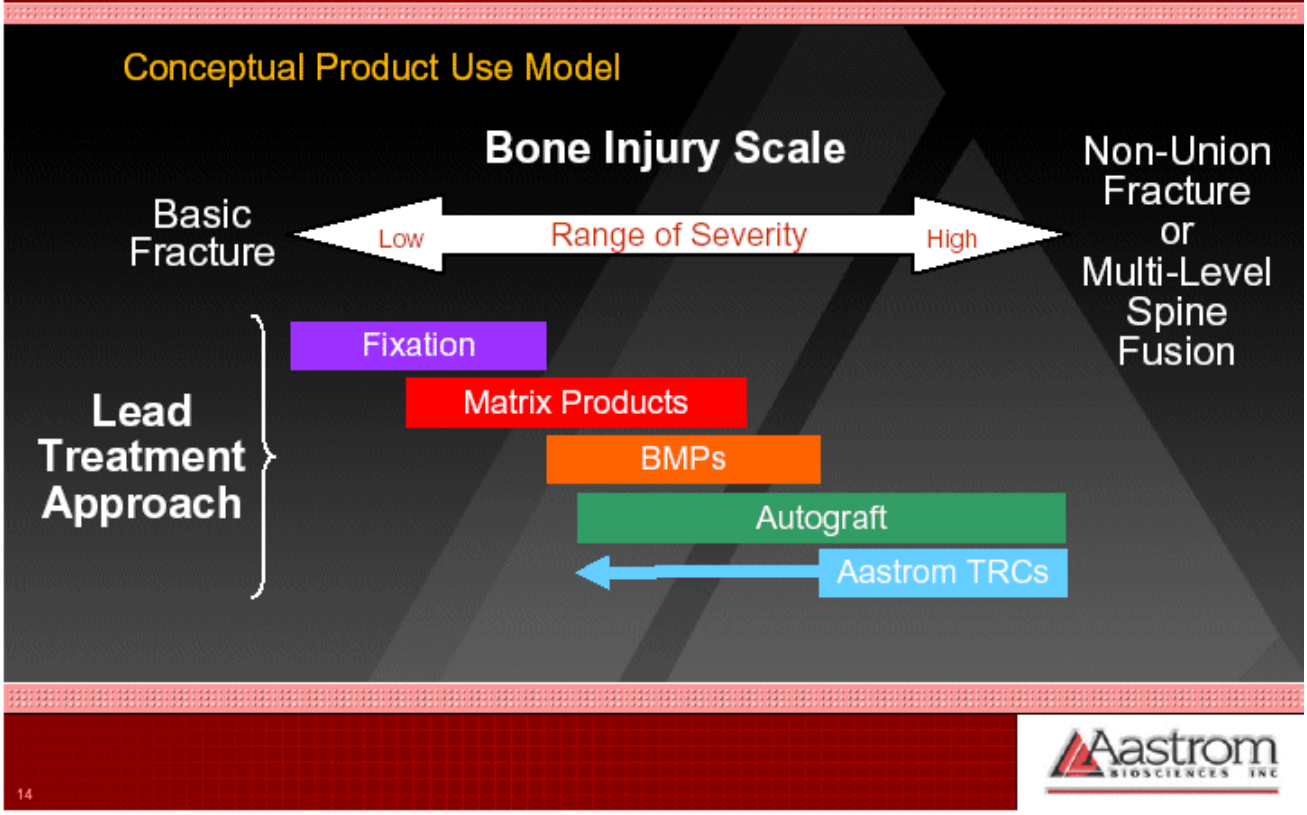
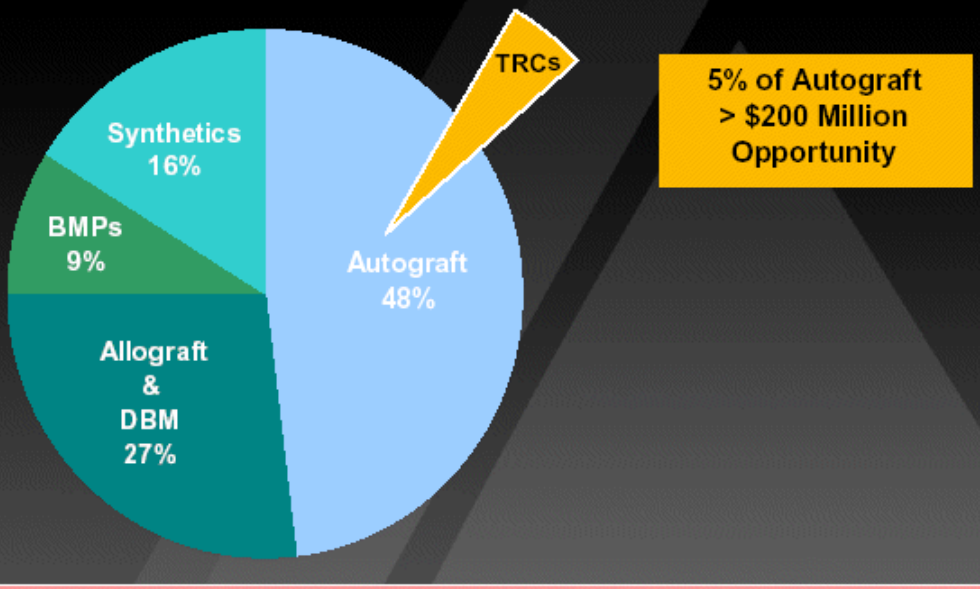
Bone Graft Market



Bone Graft Market Opportunity

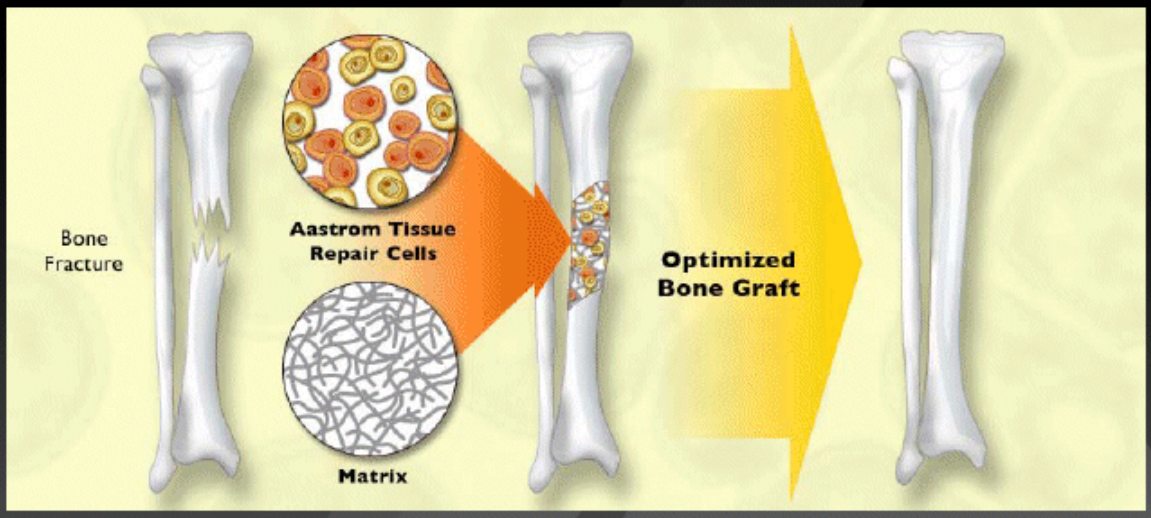
Global Market: 2 Million Bone Grafts Annually



Source: Millennium Research Group CY2009 projections *(U.S., Europe and Japan)*
BMP = Bone Morphogenic Proteins
DBM = Demineralized Bone Matrix

TRCs for Bone Grafting

Bone Fracture Indications



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Bone Graft Clinical Plan

Bone Fracture Indications

- EU
  - Lead studies underway in Spain and Germany
  - First phase (6 treatments) completed in Barcelona; trial expanding based on progressive healing and safety results
  - Process logistics working well
- United States
  - Phase I/II multi-center trial; IND approved by FDA
  - Safety milestone achieved, allowed to expand to fresh and long-ferm non-union fractures
  - Four sites currently active; 1 more expected by mid-CY2005
  - 20 patient target
  - If results acceptable, plan to move to Phase III

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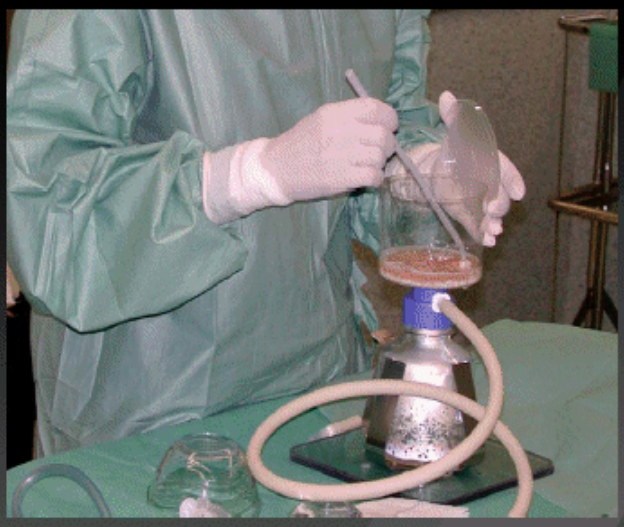
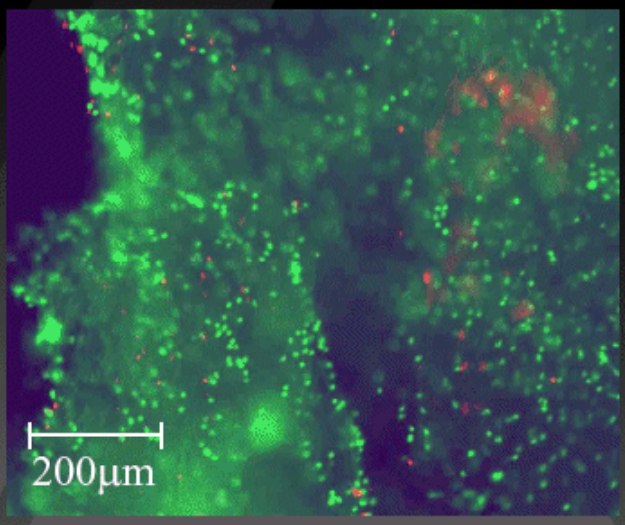
TRCs and Matrix

Combining TRCs and Matrix



Micrograph of TRCs in Matrix



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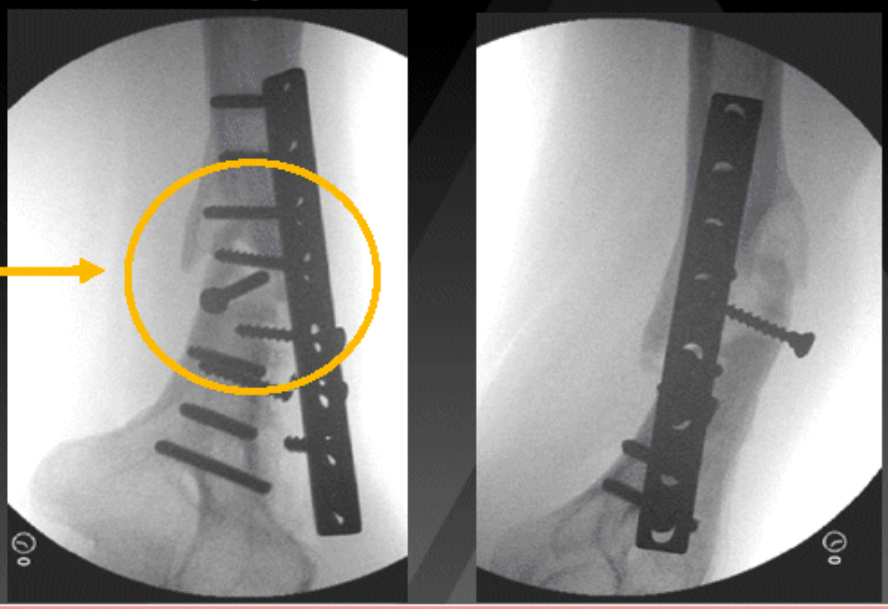
Non-Union Fracture Trial

Candidate Patient X-Rays *



* Clinical Situation: Non-union fracture of humerus which failed fixation and autograft (> 8 months)

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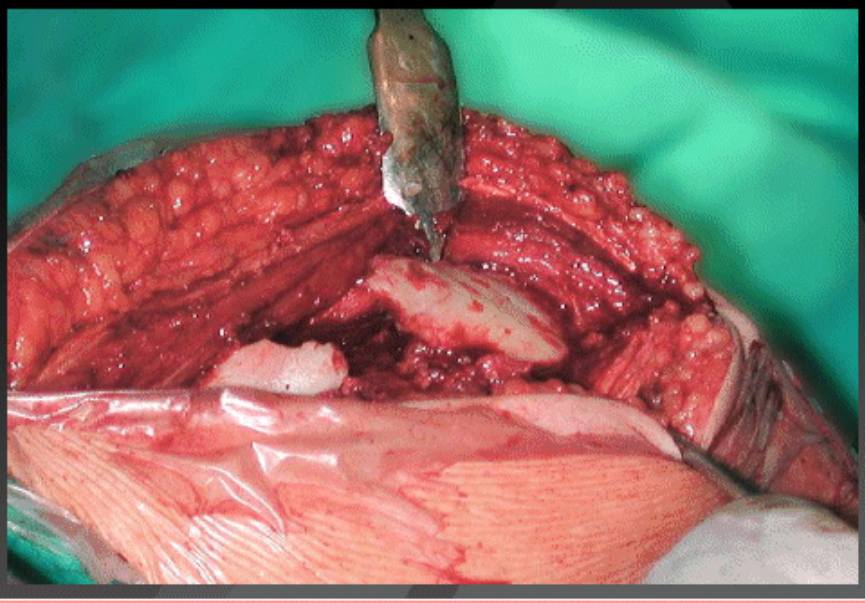
Non-Union Fracture Trial

Fracture Site with Previous Fixation Removed



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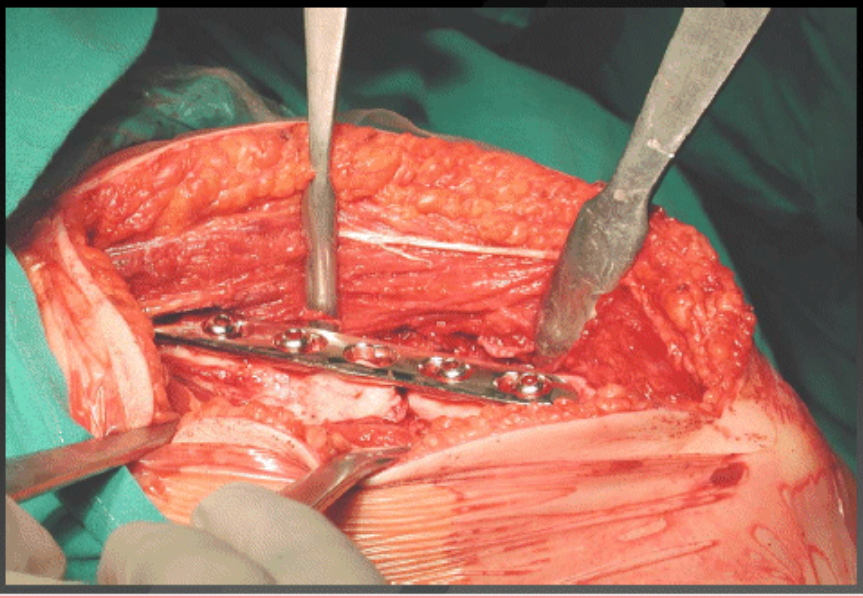
Non-Union Fracture Trial

Fracture Site with New Fixation Applied



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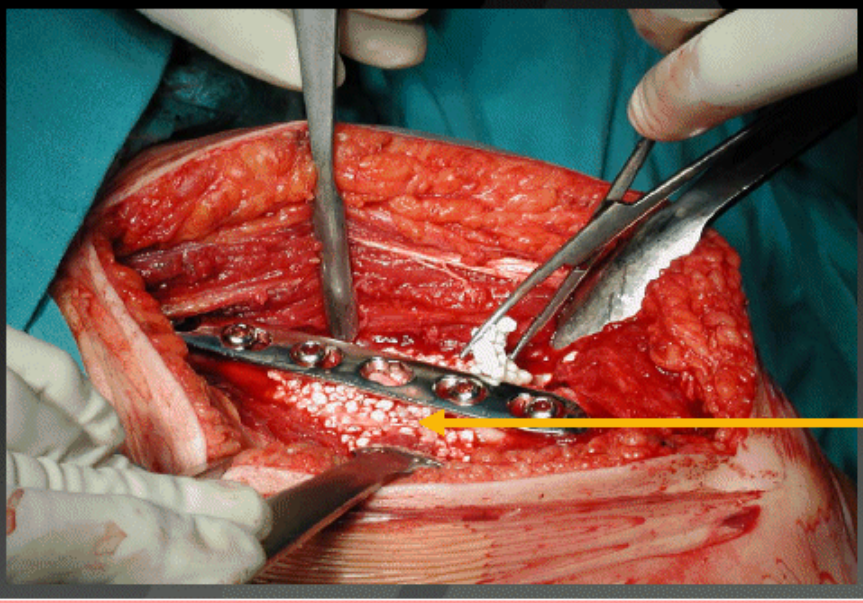
Non-Union Fracture Trial

TRCs and Matrix Applied at Fracture Site



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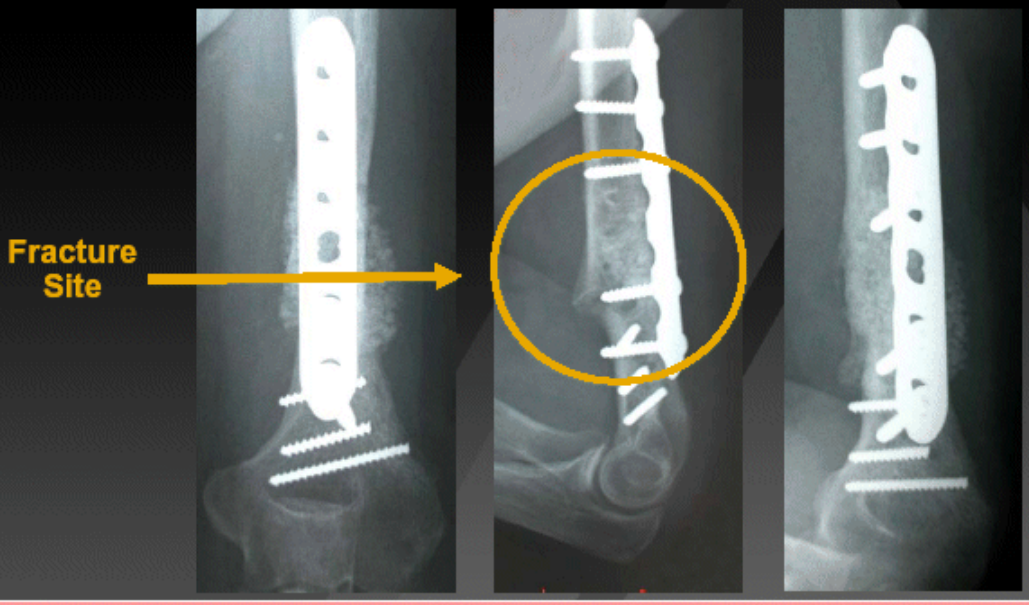
Non-Union Fracture Trial

Post-Treatment Patient Recovery (4 Months)



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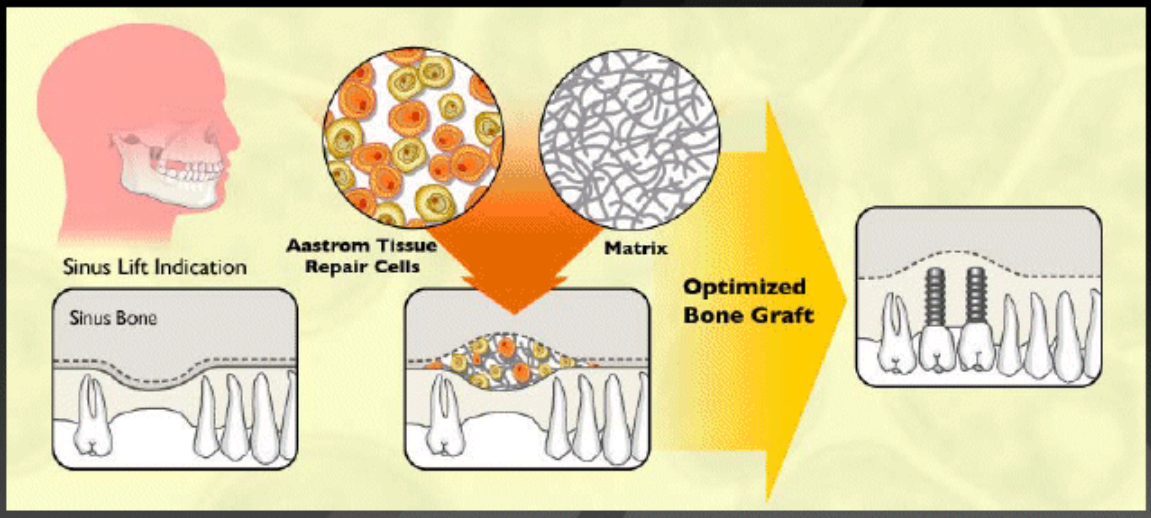
TRCs for Bone Grafting

Jaw Reconstruction Indication



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Bone Graft Clinical Plan

Jaw Reconstruction Indication

- EU
  - Lead trial for dental implant (sinus lift) initiated in Spain
  - 5 patient study; enrollment complete
  - Bone formation measured by biopsy/histology and compared to standard bone graft approach in same patient
  - Expect results by end of 2Q CY2005
- United States
  - Hold until EU trial data available

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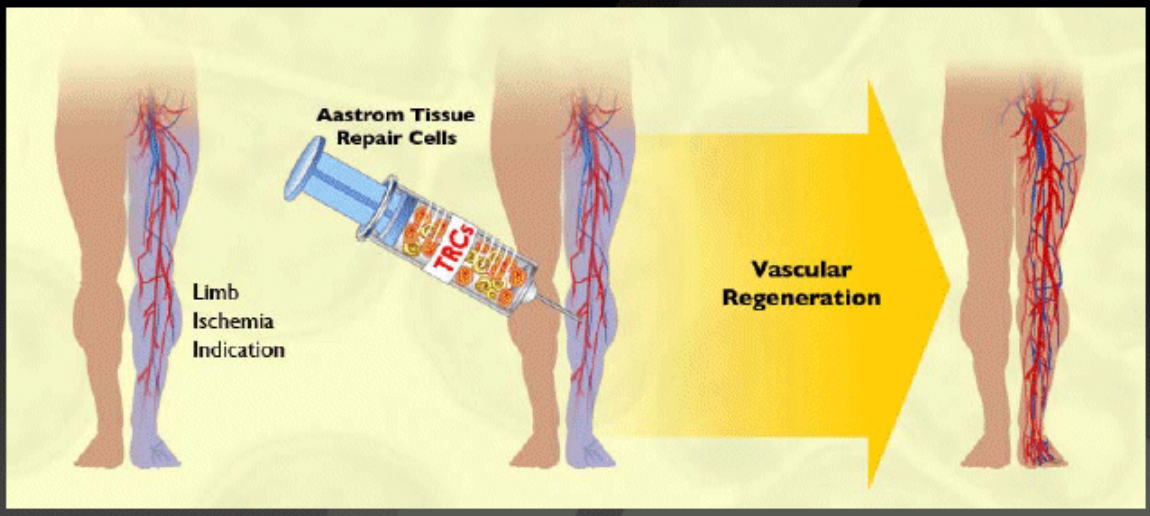
TRCs for Vascular Tissue

Limb Ischemia Indication



Limb Ischemia (Veins and Arteries)

Rationale for TRC Development

- Large market opportunity, with limited therapeutic competition
  - Diabetic and Buerger's disease patients
  - Targeted 2 million patients in need of surgery for severe limb ischemia
  - Reimbursement levels are high for interventional treatments
- Published clinical results suggest effectiveness of large volume bone marrow for limb ischemia
  - Similar reports for cardiac ischemia
- TRCs ready to go to trial
  - TRC's vascular lineage capability demonstrated *in vitro*
  - Leverage existing infrastructure established for bone grafting
  - TRCs shown as effective substitute for large volume bone marrow in BMT indication (Aastrom trials)

Source: Millennium Research Group CY2009 projections *(U.S., Europe and Japan)*
BMT = Bone Marrow Transplantation

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Limb Ischemia

Effect of Large Volume Bone Marrow

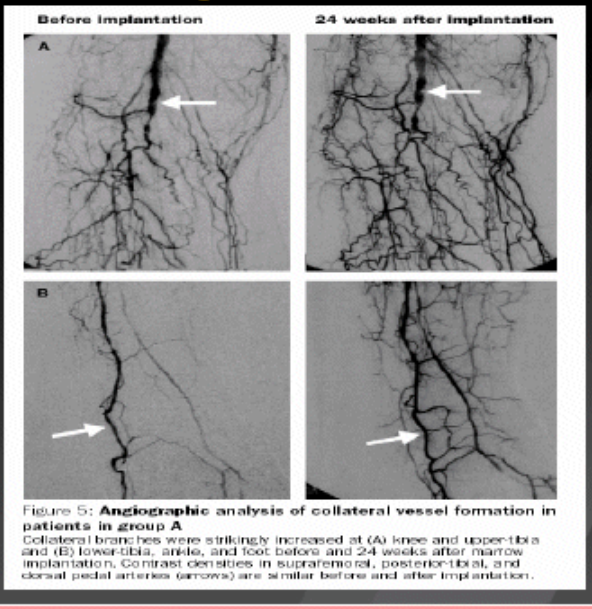

Figure 5: **Angiographic analysis of collateral vessel formation in patients in group A**
Collateral branches were strikingly increased at (A) knee and upper-tibia and (B) lower-tibia, ankle, and foot before and 24 weeks after marrow implantation. Contrast densities in suprafemoral, posterior-tibial, and dorsal pedal arteries (arrows) are similar before and after implantation.

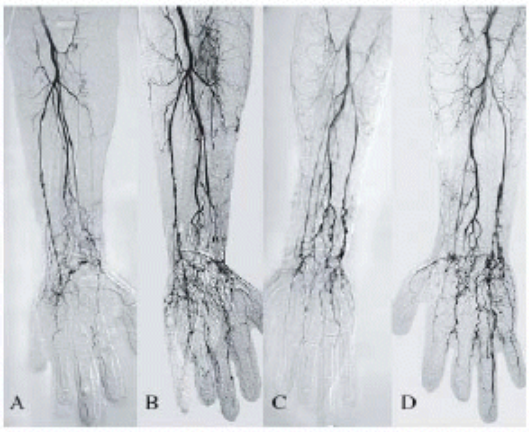

Fig. 2. Arteriography of the right hand (A, B) and the left hand (C, D). Before bone marrow transplantation (A, C). Comparison of arteriography performed with that performed on day 120 revealed the formation of new collateral vessels and the dilatation of pre-existing vessels (B, D).

Sources: Lancet 360: 427-435, 2002 (left panel)
Eur J. Vasc Endovasc Surg 00, 1-3, 2002 (right panel)

Vascular Tissue Clinical Plan

Limb Ischemia Indication

- EU
  - Clinical trial agreement with HDZ in Bad Oeynhausen, Germany
  - Cell manufacturing license process initiated
  - Patient accrual expected to begin mid-CY2005
- United States
  - Phase I NIH grant supported circulation ischemia research
  - Vascular forming capability of TRCs demonstrated
  - Pursuing grants for further research development

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Partnering

- 2003 alliance with MTF Musculoskeletal Transplant Foundation THE ALLOGRAFT LEADER™
  - Largest provider of allograft tissue matrix (>$250 million revenue)
  - Companies both contribute to development and clinical expenses for products that combine TRCs and MTF matrix
  - Companies sell their own products and coordinate marketing
- Targeting other relationship(s) for synthetic matrix
- Targeting other marketing partners for each indication
  - Fracture; Jaw; Spine; Vascular

Aastrom BIOSCIENCES INC

Aastrom Balance Sheet Data

(December 2004 – Proforma *)

• Cash and Investments	$ 37,500,000
• Total Assets	$ 39,400,000
• Shareholders' Equity	$ 38,800,000
• Average Cash Usage Per Month	$ 1,000,000

* Includes $12 million gross proceeds from an equity transaction in January 2005, and $2.9 million gross proceeds from previously issued warrants exercised through February 3, 2005

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