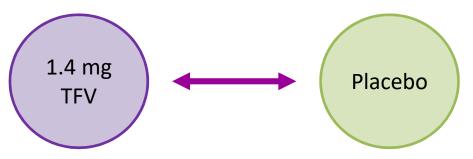
MTN-038 Protocol Overview

MTN-038: Extended Duration Tenofovir Vaginal Ring

The study will compare the safety and PK of the Tenofovir (TFV) extended duration intravaginal ring (IVR) to a placebo IVR.



Study Design	Phase 1, two-arm, multi-site, randomized (2:1 ratio), placebo-controlled	
Participant Follow Up	92 days (91 days of continuous IVR use)	
Study Population	48 healthy, HIV-uninfected women or those assigned female birth, age 18-45 (inclusive)	
Study Sites	Pittsburgh, San Francisco, and Alabama	

Study Rationale

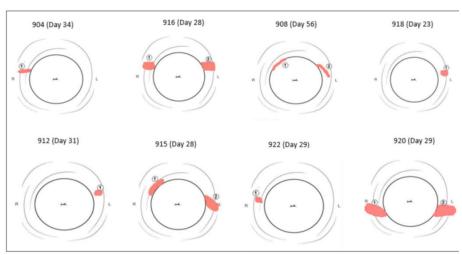
- Safety/tolerability of TFV in vaginal gel and oral tablet formulations demonstrated
- Daily/pericoital TFV vaginal gel not consistently effective for HIV prevention, likely due to low adherence
- While daily oral PrEP found to be protective in some studies, high adherence (6-7 doses/week) needed to protect against vaginal exposures
- Extended duration TFV IVR could overcome adherence/efficacy issues with vaginal gel and daily oral formulations, reduce patient and provider burden
- TFV delivered intravaginally may help prevent HSV-2
- MTN-038 is the first MTN study to evaluate the TFV VR in humans for the intended 90 days of use
 - Potential use for multipurpose technology (e.g. HIV, HSV and pregnancy prevention)

Tenofovir (TFV)/TFV IVR

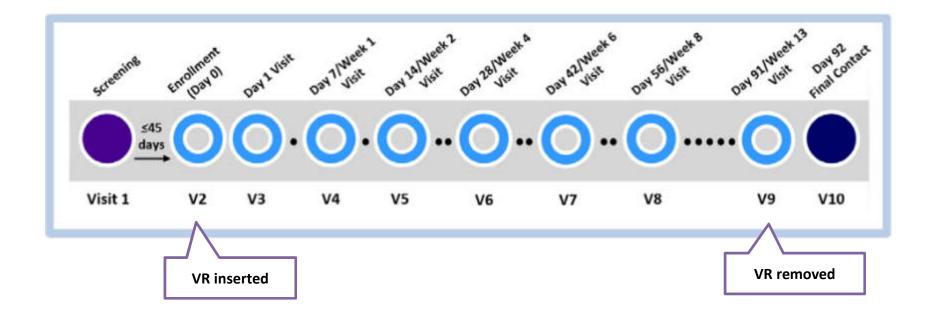
- Highly potent ARV (NtRTI): inhibits HIV RT enzyme via chain termination, preventing viral replication
- TFV 1% vaginal gel demonstrated to be well tolerated
- Polyurethane reservoir ring containing 1.4 g of TFV, designed to release ~10 mg/day over 90 days
- Target based on trying to achieve sustained PK in the vaginal compartment that matched or exceeded peak PK from TFV 1% gel

Safety of Tenofovir IVR

- Tenofovir IVR found to be safe and well-tolerated in 2 CONRAD studies (128, 130)
- <u>TDF</u> IVR was evaluated in 3 month study of sexually active women
 - 17 ppts enrolled prior to termination (12 TDF, 5 placebo)
 - Among 12 ppts in TDF arm:
 - 2 completed study without complications, 2 had ring removed preemptively
 - 8 ppts in TDF arm developed G1 vaginal/cervical ulceration
 - Occurred average 32 days after ring use (range 23-56 days)
 - 4 were symptomatic, 3 had bilateral ulcers
 - All ulcers resolved after ring removal
 - No ulcerations in placebo arm
- Modifications to MTN-038
 - Added safety visit at day 42
 - Added vaginal and cervical ulceration to ICF Risk section
 - Collection of CVF for biomarkers



Study Visit Schedule



The participant's menstrual cycle must be considered when scheduling Visit 2- Enrollment (Day 0). **Ideally no bleeding occurs during the first 7 days of product use.**

Study Accrual Target

Study-wide Accrual Target

48 participants

Site Accrual Period

6-9 months from site's first enrollment

Site-specific Accrual Target			
Pittsburgh	Bridge HIV	UAB	
n=24 3-4 participants/month	n=12 2-3 participants/month	n=12 2-3 participants/month	

Primary Study Objectives

Pharmacokinetics (PK)

- Characterize the local and systemic pharmacokinetics of one TFV IVR used continuously for 91 days
- Endpoints: TFV levels in plasma, cervicovaginal fluid, rectal fluid, and cervical tissue; TFV-DP levels in cervical tissue

Safety

- Evaluation the safety of one TVF IVR used continuously for 91 days.
- Endpoints: Grade 2 or higher genitourinary AEs, and Grade 3 or higher AEs

Secondary Study Objectives

Adherence

- Evaluate participant adherence to one TFV IVR used continuously for 91 days
- <u>Endpoint</u>: Frequency of study IVR removal/expulsions (voluntary and involuntary) and duration without IVR in vagina (by self-report); IVR use initiation and persistence (whether IVR in place at study visits)

Acceptability

- Evaluate the overall acceptability of one TFV IVR used continuously for 91 days
- Endpoint: Degree to which study participants liked or disliked using the IVR (by self-report)

Exploratory Study Objectives

Vaginal Microenvironment

- Describe the genital microenvironment in HIV-uninfected participants during
 91 days of continuous IVR use
- <u>Endpoints:</u> Changes in microbiota and biomarkers; impact of microbiota on TFV levels in tissue and plasma

Pharmacodynamics (PD)

- Determine the anti-HIV activity in CVF and cervical tissue, and anti-HSV-2 activity in CVF
- Endpoint: Measures of HIV inhibition in CVF and cervical tissue; measures of HSV-2 inhibition in CVF

Exploratory Study Objectives (Cont'd)

Adherence

- Evaluate markers of ring use for the TFV IVR
- <u>Endpoints</u>: Plasma and CVF TFV levels; residual drug levels in returned IVRs; biomarkers of IVR use

Acceptability

- Evaluate components of acceptability of ring use for the TFV IVR
- <u>Endpoints</u>: Self-reported attitudes about IVR attributes; interest/preference in a single vs. dual-purpose indication; proportion of participants who find the study IVR to be at least as acceptable as other HIV prevention methods

Key Inclusion Criteria

- Assigned female sex at birth
- Available for all visits and able and willing to comply with all study procedural requirements.
- For the duration of study participation, willing to <u>refrain from inserting any non-study</u> <u>vaginal products or objects</u> into the vagina or rectum starting 24 hours preceding the Enrollment Visit.
- Willing to <u>abstain from receptive vaginal or anal sexual activities</u> for 72 hours prior to each clinical visit and for 72 hours after biopsy collection
- Willing to <u>use male condoms</u> for penile-vaginal intercourse (PVI) and penile-rectal intercourse for the duration of study participation
- Per participant report, using an <u>effective, method of contraception</u> 30 days prior to Enrollment and intending to continue the use of an effective method for the duration of study participation
- Regular menstrual cycles of at least 21 days
- HIV-uninfected

Key Exclusion Criteria

- Diagnosed with a <u>symptomatic UTI or reproductive tract infection (RTI) or an</u> <u>acute STI</u> requiring treatment at Screening or Enrollment
- Clinically apparent <u>Grade 2 or higher pelvic exam finding</u>
- Report or evidence of a **gynecologic or genital procedure** 45 days or less prior to Enrollment.
- Use of <u>Post-exposure prophylaxis (PEP) for HIV exposure and/or Pre-exposure prophylaxis (PrEP)</u> for HIV prevention within the 3 months prior to Enrollment
- Currently <u>breastfeeding or pregnant</u> or planning to become pregnant or breastfeed during the study period
- Abnormal laboratory results for ALT, AST, hemoglobin, creatinine clearance, or a positive Hepatitis B surface antigen result