A Phase I Randomized, Blinded, Placebo-Controlled Rectal Safety and Acceptability Study of 1% Tenofovir Gel and 2% Nonoxynol-9 Gel

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Introduction

- Once vaginal microbicides are licensed they are likely to be used in the context of vaginal <u>and</u> anal intercourse
- There are critical epithelial differences between the cervicovaginal and rectal mucosa
- It is important to assess the rectal safety of vaginal microbicides
- The design of Phase 1 rectal microbicide safety studies is in rapid evolution and emphasizes immunological safety



Tenofovir gel

- Tenofovir gel is being developed as a vaginal microbicide
- The tenofovir portfolio needs a rectal safety study

Completed	Ongoing	Planned
HPTN-050	CAPRISA 04	MTN-001
HPTN-059		MTN-002
		MTN-003
		MTN-006
		MTN-007



- Phase 1 rectal safety study
- Randomized blinded, placebo-controlled trial:
 - 1% vaginal formulation of tenofovir
 - Hydroxyethyl cellulose (HEC) placebo gel
 - 2% nonoxynol-9 (Ortho-Gynol II)

Population:

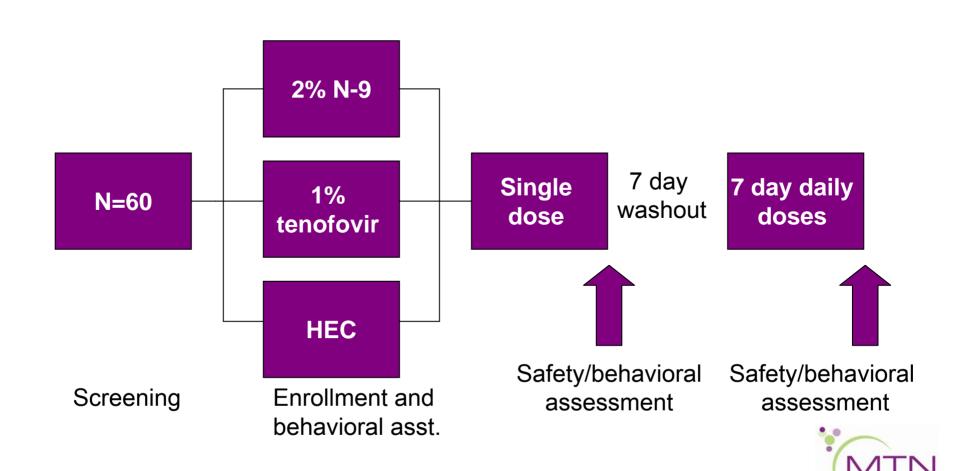
Approximately 60 sexually (anally) abstinent,
 HIV-negative adults (male and female)

Duration:

Participant accrual will take approximately 6-9 months and each participant will be on study for approximately 4-8 weeks. The total duration of the study will be approximately 12 months.



MTN-007 Study design



- Primary objectives
 - To evaluate the safety of 1% tenofovir gel,
 2% N-9 gel or HEC gel when applied rectally
 - To evaluate the acceptability of 1% tenofovir gel, 2% N-9 gel or HEC gel when applied rectally



- Primary endpoints
 - Frequency of ≥ Grade 2 adverse events as defined by the Division of AIDS Table for Grading the Severity of Adult and Pediatric Adverse Events, Version 1.0, Dec 2004, Addendum 3 (Rectal Grading Table for Use in Microbicide Studies).
 - Acceptability assessments
- Secondary endpoints
 - To determine whether use of study product is associated with rectal mucosal damage



- Measured secondary endpoint parameters
 - Epithelial sloughing
 - Histopathology
 - Mucosal mononuclear cell phenotype
 - Mucosal cytokine mRNA
 - Weck cell cytokine
 - Mucosal immunoglobulins
 - Fecal calprotectin



Why include an N-9 arm?

- Rectal exposure to N-9 results in epithelial disruption
 - Mice
 - Macaques
 - Humans
- Histological recovery occurs within 1-8 hours
- Tabet et al. demonstrated minimal histological inflammation after up to 6 weeks treatment with a 3.5% formulation of N-9



The need for a positive control

- Assessment of mucosal injury following application of microbicide candidates requires the use of esoteric and expensive assays
- Preliminary data from a UC-781 Phase 1 rectal safety study have not demonstrated changes in these mucosal safety parameters
- Interpretation:
 - The product is safe?
 - The assay is insensitive?

MTN-007 Timeline

Activity	Timeline
Protocol concept approval	Completed
Site selection	Q2 2008
Version 0.1 protocol	Q2 2008
Face-to face meeting	Q3 2008
Pre-PSRC review	Q4 2008
PSRC review	Q4 2008
Site activation	Q1 2009
FPI	Q1 2009
LPO	Q3 2009
Manuscript	Q4 2009

Summary

- 1% tenofovir gel is a promising candidate vaginal microbicide
- Safety assessment of 1% tenofovir in the rectum is necessary as epidemiological evidence suggests its' likely use in this compartment
- Previous rectal microbicide studies have shown little change in signal from histological or inflammatory safety markers
- MTN-007 will use both placebo and positive control to assess safety



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