# MTN-017: A Rectal Phase 2 Extended Safety and Acceptability Study of Tenofovir Reduced-Glycerin 1% Gel

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## Background

- Rectal microbicides have been in clinical development for over 10 years
- Topical gel products are used frequently by groups at high-risk of HIV during receptive anal sex
- Antiretroviral gel has demonstrated rectal protection in non-human primates and rectal explant in vitro models<sup>1,2</sup>
- The vaginal formulation of 1% tenofovir (TFV) gel was neither safe nor acceptable in the rectum<sup>3</sup>
- MTN-007 used a reduced-glycerin (RG) formulation of 1% TFV gel that was both safe and acceptable in the rectum following 7 consecutive daily doses<sup>4</sup>

<sup>&</sup>lt;sup>1</sup>Cranage PLoS Med 2008, <sup>2</sup>Dobard JID 2015, <sup>3</sup>Anton AIDS Res Hum Retroviruses 2012, <sup>4</sup>McGowan PLoS One. 2015

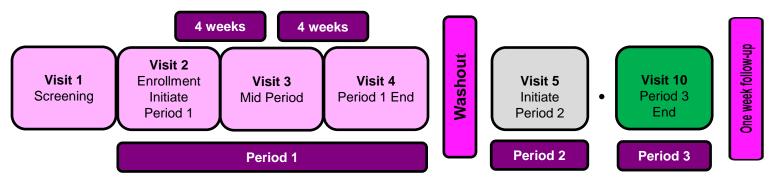
## MTN-017 Population, Duration and Sites

- Study Population
  - 195 enrolled participants
  - HIV-uninfected
  - MSM or transgender females
  - Reported practicing receptive anal intercourse
  - Age 18 years or older

- Study Duration
  - 27 weeks per participant
- Sites
  - US (4)
  - Peru (1)
  - Thailand (2)
  - South Africa (1)

## Study Design

- In a crossover design, each participant was randomized to follow all study regimens for eight weeks, with a one-week wash-out period between regimens
- Study regimens (randomized to one of 6 sequences)
  - Rectal RG 1% TFV gel used daily
  - Rectal RG 1% TFV gel used before and after receptive anal intercourse (RAI)
  - FTC/TDF tablet taken daily

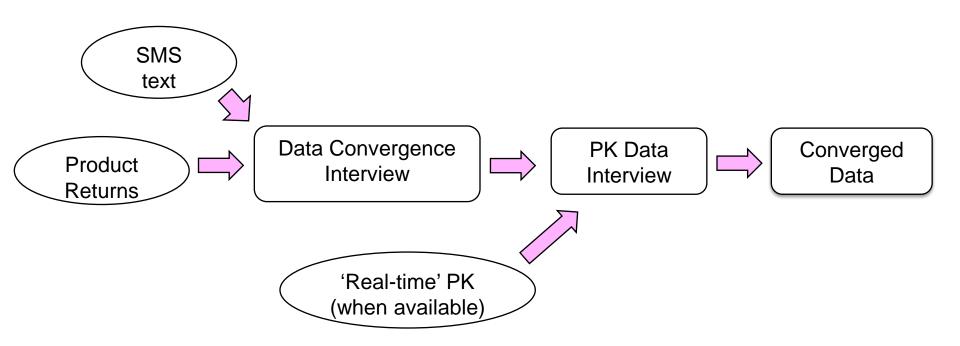


## Study Endpoints

- Safety
  - Grade 2 or higher adverse events
- Acceptability
  - Participant self-report of ease of use, liking the product, and likelihood of product use if shown to be effective
- Pharmacokinetics
  - Tenofovir concentrations
    - Blood plasma, rectal tissue\* and rectal fluid
  - Tenofovir-diphosphate concentrations
    - Peripheral blood mononuclear cell (PBMC) and rectal tissue\*
  - Emtricitabine concentrations
    - Blood plasma, rectal tissue\* and rectal fluid

<sup>\*</sup> Rectal tissue was collected on a subset of participants taking part in the rectal biopsy/fluid subset

## MTN-017 Adherence Measurement



## PK Specimen Flow Chart

Specimen collected in clinic



Specimen processed and stored within 8hrs



Notify MTN LC and ship to JHU CPAL



MTN LC generates report and submits to site/beh team



Results submitted to MTN LC

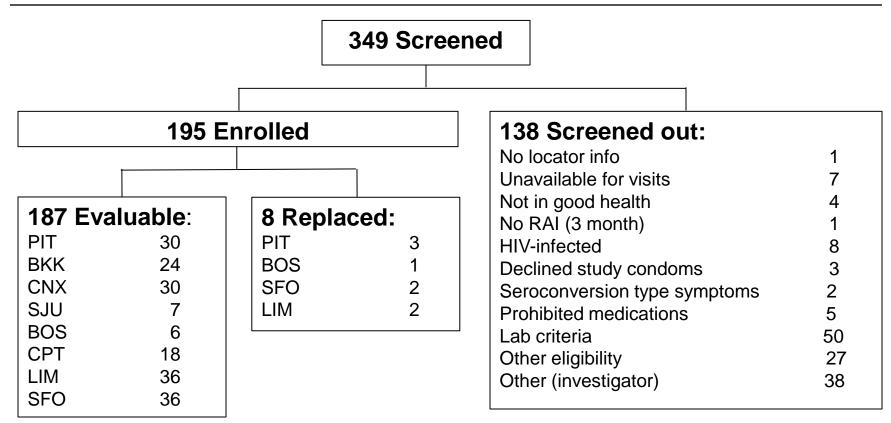


PK assay performed at JHU CPAL

## **Exploratory Objectives**

- Characterize pharmacodynamic responses
- Characterize changes in mucosal immunity
- Assess correlation between PK and adherence measures
- Identify factors associated with product adherence and whether they differ by product used
- Examine whether sexual activity or condom use varies by product used
- Determine the level of sharing of study products with nonparticipants
- Determine the prevalence of behavioral practices associated with anal intercourse that may affect microbicide use

## Screening and Enrollment



## Replacements

- Ppts with missing adherence data due to:
  - Participant was not dispensed study product
  - Participant did not report on study product use at least once in the daily gel period, the RAI gel period, or both
  - Loss-to-follow-up
  - Participant non-adherence or refusal of study product
  - Site-initiated product holds/discontinuations
- No participants were replace after full accrual

## Study Conduct

- First enrollment to data lock
  - 23 months
- Adherence to visits and procedures
  - Over 98%
- Data quality
  - Checks on 6.2 per 100 records
- Retention
  - After replacements 185/187 (98.9%) exited study

# Demographics

	LIM	SJU	CPT	BKK	CNX	BOS	PIT	SFO	All
Participants enrolled	38	7	18	24	30	7	33	38	195
Age (mean)	32.9	30.9	22.8	31.5	27.9	34.6	30.2	35.9	31.1
College education	27	6	5	21	25	4	32	36	156 (80%)
Male									141 (73%)
Female									4 (2%)
Transgender female									19 (10%)
Other/Declined									30 (15%)

#### **Adverse Events**

- 195 enrolled participants
- Grade 2 or higher AEs in:

Oral: 65/192\* (34%)

Daily rectal: 64/192\* (33%)

RAI rectal: 58/191\*\* (30%)

	Reference	Estimated IRR	95%	6 CI	P-value***
Daily Rectal	Oral	1.09	0.79	1.53	0.59
RAI Rectal	Oral	0.90	0.66	1.23	0.51

<sup>\* 3</sup> were not exposed

<sup>\*\* 4</sup> were not exposed

<sup>\*</sup>GEE with Poisson link, person time offset, exchangeable correlation structure, robust errors, controlling for period of study

# Acceptability

	Reference	Odds Ratio	95%	P-value*			
Outcome: Overall Liking [Liked (1) vs. Disliked (0)]							
Daily Rectal	Oral	0.28	0.15	0.50	<0.001		
RAI Rectal	Oral	0.37	0.20	0.70	0.002		
Outcome: Overall Ease of Use [Easy (1) vs. Difficult (0)]							
Daily Rectal	Oral	0.56	0.29	1.08	0.08		
RAI Rectal	Oral	0.76	0.37	1.56	0.46		
Outcome: Intention to Use [Likely (1) vs. Unlikely (0)]							
Daily Rectal	Oral	0.38	0.22	0.65	<0.001		
RAI Rectal	Oral	0.70	0.39	1.25	0.23		

<sup>\*</sup>GEE with binomial link, exchangeable correlation structure, robust errors, controlling for study period

## 'Real Time' Pharmacokinetics

- Qualitative results based on the lower limit of detection of TFV
- 187 evaluable participants, 2 tests per regimen at mid- and endperiod visits

	Real-Time Plasma PK result					
Regimen	Negative	Positive	Not done/ not available	Total		
Daily Rectal	66 (18.2%)	291 (80.2%)	6 (1.7%)	363		
Oral	13 (3.5%)	346 (94.3%)	8 (2.2%)	367		
Total	79 (10.8%)	637 (87.3%)	14 (1.9%)	730		

## Adherence (SMS and product return)

	Regimen			
	Oral	Daily rectal	RAI	
Less than 80%	12 (6%)	31 (17%)	13 (7%)	
At or greater than 80%	173 (94%)	153 (83%)	170 (93%)	
Total	185	184	183	

	Reference	Odds Ratio	95%	P-value*	
Daily Rectal	Oral	0.35	0.19	0.63	<0.001
RAI Rectal	Oral	0.89	0.43	1.81	0.74

<sup>\*</sup>GEE with binomial link, exchangeable correlation structure, robust errors, controlling for study period

#### Oral PrEP in 017

- MTN-017 allowed initiation of oral PrEP with FTC/TDF
- 29 of 38 enrolled participants in SF chose to start oral PrEP at enrollment
- □ 16 (42%) remained on drug at study termination
- Of the 7 participants with social harms in SF,4 described negativity around PrEP use

## Applicator



- Acceptability (product vs. applicator)
  - Daily gel p=0.008
  - RAI gel p=0.004

## **HIV Seroconversions**

#### □ Site A:

 RAI/Oral/Daily Rectal. Positive test prior to Oral regime (no product taken due to suspicion for seroconversion). No resistance

#### Site B:

- Oral/Daily Rectal/RAI. Positive test at end of Daily Rectal regime. No resistance
- RAI/Oral/Daily Rectal. Positive test 110 days after mid period Daily Rectal visit. NNRTI resistance K103N mutation
- Daily Rectal/Oral/RAI. Positive test at end of Oral regime. NNRTI resistance E138A mutation

## Summary

- Rectal 1% RG TFV gel was safe when used daily or with RAI in this population
- Use of 1% RG TFV with RAI was more acceptable than daily use
- There was high adherence to study product in all regimens
- These results support further study of 1% RG TFV as a rectal microbicide for HIV prevention in MSM and TGW

## Acknowledgments

- Study participants
- Co-chair: Javier Lama
- Site Investigators:
  - Albert Liu
  - Kenneth H. Mayer
  - Carmen D. Zorilla
  - Suwat Chariyalertsak
  - Timothy H. Holtz
  - Pedro Gonzales
  - Linda-Gail Bekker
  - Ross D. Cranston

- Gilead Sciences
- CONRAD
- SCHARP
- DAIDS/NIMH
  - Jeanna Piper
  - Cynthia Grossman

#### Funding:

The Microbicide Trials Network is funded by the National Institute of Allergy and Infectious Diseases (UM1AI068633, UM1AI068615, UM1AI106707), with co-funding from the Eunice Kennedy Shriver National Institute of Child Health and Human Development and the National Institute of Mental Health, all components of the U.S. National Institutes of Health. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.

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Jim Gavel. Rav Cefola, Carol Oriss, Deborah McMahon, Benard Macatangay, Christine O Neill, Stacy Edick, Randall Brand, Janet Harrison, Richard Duerr SFDH: Susan Buchbinder, Albert Liu, Alfonso Diaz, Deawodi Ladzekpo, Elizabeth Faber, Hailey Gilmore, Kerry Murphy, Kimberly Marsh, Ryan Gonzalez, Sally Grant, Zoe Lehman, Tim Matheson, Janie Vinson, Jobert Poblete, Jose Carlos Asencios, Toren Jones, Jenese Jackson, Myra Ozaetz, Monique Biega, Scott Fields, Diana Ng Wong, Yelena Koplo, Chris Quan, Beth Osterbauer, Marcelle Millian, Ian Schneider, Montica Levy, Emily Schaeffer, Alani Kalfayan San Juan: Carmen D. Zorrilla, Vivian Tamayo, Irma Febo, Sylvia I. Dávila, Iris García, Sheyla Garced Trado, Claudia Mántaras, Meredith Herrera Roque, Jannette Valentin, Noelia Acevedo, Indira Purcell, Maritza Cruz, Wilmer Torres, Carmen Irizarry, Viviana Cancel, Olga Mendez, Santiago Marrero, Ana Mosquera, Vilma Corres Bangkok; Timothy H. Holtz, Anupong Chitwarakorn, Marcel Curlin, Warunee Thienkrua, Wipas Wimonsate, Sumetha Hengprasert, Chaiwat Ungsedapand, Phunlerd Piyaraj, Boonchai Kowadisaiburana, Supurat Khemnark, Anchalee Varangrat, Tareerat Chemnasiri, Sarika Pattanasin, Patnaree Oungprasertgul, Nichnawee Kamchaithep, Teeraparp Watanatanyaporn, Supaporn Chaikummao, Kanokpan Pancharoen, Anuwat Sriporn, Pikunchai Luechai, Kesinee Satumay, Sirirat Lertpruek, Boonyos Raengsakulrach, Punneeporn Wasinrapee, Wannee Chonwattana, Wanna Leelawiwat, Jaray Tongtoyai, Santi Winaitham, Nutthawoot Promda, Philip Mock, Wichuda Sukwicha, Narongritt Tippanont, Somsak Yafant, Achara Sri-insut, Rinda Wongbenchaporn, Chariya Utenpitak, Pechpailin Khlaimanee, Patcharat Niyamakhom, Chanya Peerapatdit, Sasithorn Surikham, Anucha Munngen, Nawarat Sukfuang, Jirawat Suksamosorn, Kasidech Dechkittikun Chiang Mai: Suwat Chariyalertsak, Taweewat Supindham, Natthapol Kosashunhanan, Nuntisa Chotirosniramit, Sunida Thetket, Patcharaphan Sugandhayesa, Darin Ruanpeng, Pongpun Saokhieo, Radchanok Songsupa, Amornrat Yangnoi, Rattanaporn Intarawiwarat, Kachaporn yosbud Pratakpong Wongkiti, Sobhon Bipodhi, Kanokporn Wiboonnatakul, Songkran Waiyo, Benjasin Klaharn, Piya Punyarad, Kanlaya Wongworapat, Warunee Jit-Aree, Sirikwan Dokuta, Chamaiporn Na-Prom, Panida Yodkeeree, Chansom Pantip, Panudda Sothanapaisan, Jeitsada Keitkarn, Kritsadee Laosrivorapan, Thipsuda Krueyot, Kittipong Rungruengthanakit, Chiraphorn Kaewkosaba, Nattanun Suwannamas, Supatcharin Thasook, Thunyaporn Wangtan, Sutisa Tienkanted, Wanwisa Trongarom, Nutchanat Janta, Apsornsuda Tuila, Lar Chandee, Antika, Wongthanee, Suthathip Wongsrithep, Ratchaneekorn Khampan, Jarun Chuayen, Wasun Chanchai, Karand Chunpen, Kannika Jungsathit, Pimpaka Puangpotha, Karnjana Chairungsri, Boonlure Pruenglampoo, Kanjana Jeenaraj, Kannika Boursuk, Nittaya Chuenchop, Supaporn, Sirikunpun, Nataporn Kosachunhanan, Piyathida Sroysuwan, Veruree Manoyos Cape Town: Linda-Gail Bekker, Peter Chodacki, Richard Kaplan, Francois Cilliers, Catherine Orrel, Anna Cross, Keren Middelkoop, Nicola Killa, Elize Batist, Christina Hosken, Christie Heiberg, Joan Aploon, Maureen Rattley, Phyllisisty Smith, Anna Witbooi, Brian Kanyemba, Ben Brown, Daniel Ndzuzo, Xolani Mvula, Monica Vogt, Melanie Maclachlan, Lindsay Gwambe Lima: Pedro Gonzales, Javier R. Lama, Jorge Sánchez, Rosa Infante, Aldo Lucchetti, Javier Salvatierra, Jorge Vergara, Esmelda Montalban, José Gonzales, Eduardo Sánchez, Manuel Villaran, Fanny Garcia, Jessica Rios, Karen Villanueva, Karina Pareja, Monica Sánchez, Carla Porcile, Carmen Sánchez, Richard Teran, Cecilia Correa, Roberto Facho, Peter Brandes, Eduardo Ruiz, Martín Lacherre, Bertha Talaverano, Eliana Díaz, Carolina Moran, Diana Durand, Silvana Torres, Alberto Rondan, Alejandra Flores, Martín Patiño, Esmellin Perez, Robert De la Grecca, Carmela Ganoza, Lily Ganaha, Cecilia Chang, Ricardo Alfaro, Jesus Jurupe, Maria Suarez, Giovanna Solis, Carmen Salinas, Janet Soto, Ronny Tirado, Sonia Minaya, Gustavo Quispe, Roberto Alcantara, Patricia Segura, Medalith Sulca, Yolanda Vidal, Noelia Niño, Luis Castro, Rafael Rosas, Gonzalo Meneses, Daniel Alva, Christian Keller, David Amiel, Julio Dextre, Hector Salvatierra, Martin Patino, Lourdes Cruzado

## Thank You