

# *Development of a Tenofovir Disoproxil Fumarate IVR for Prevention of HIV & HSV*

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Particle Sciences



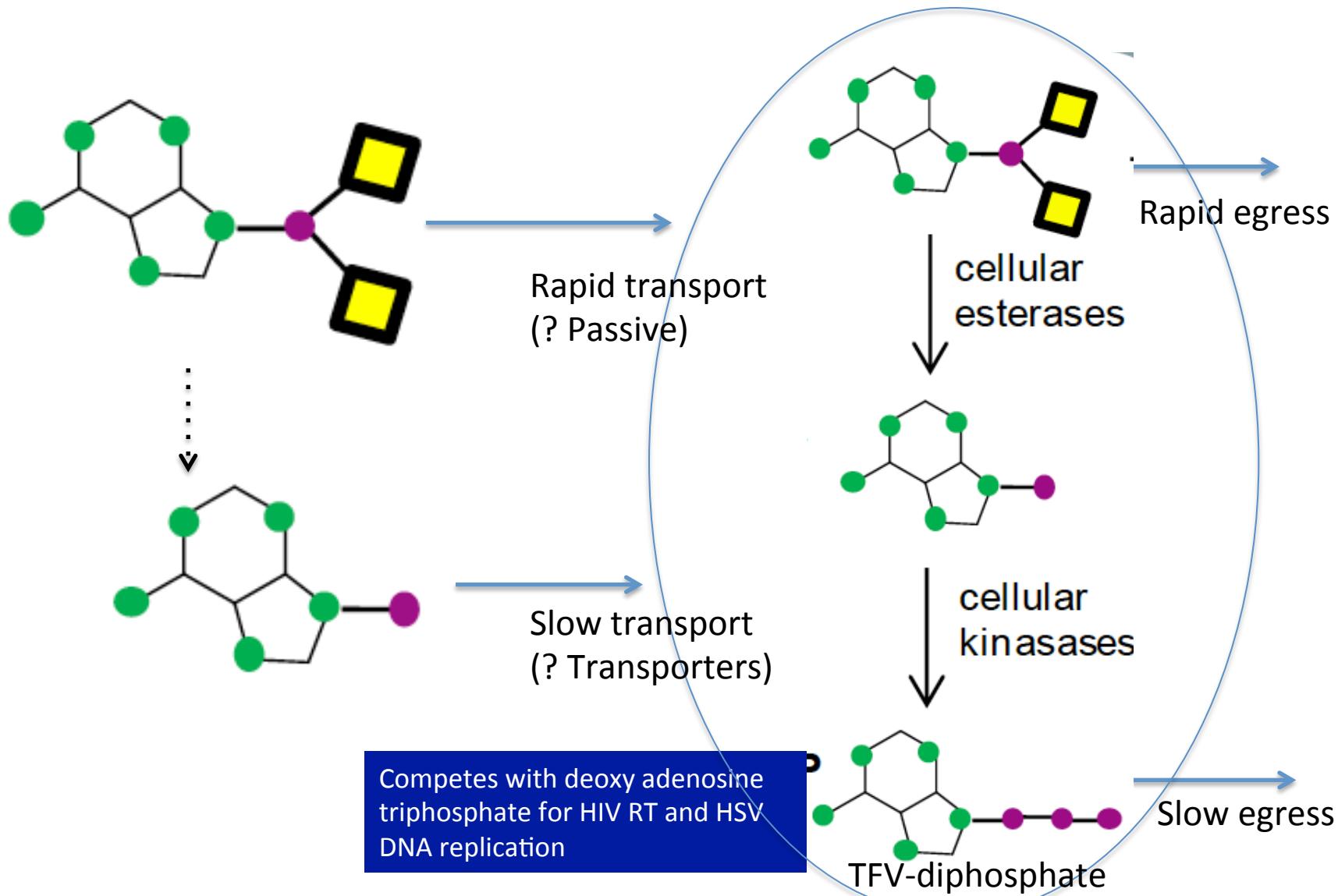
# Acknowledgments

- Studies funded by NIH NIAID U19
- Gilead provided tenofovir disoproxil fumarate
- CONRAD for advice on Pre-IND process, manufacturing methodology and allowing us to cross reference their tenofovir IND and Investigator Brochure

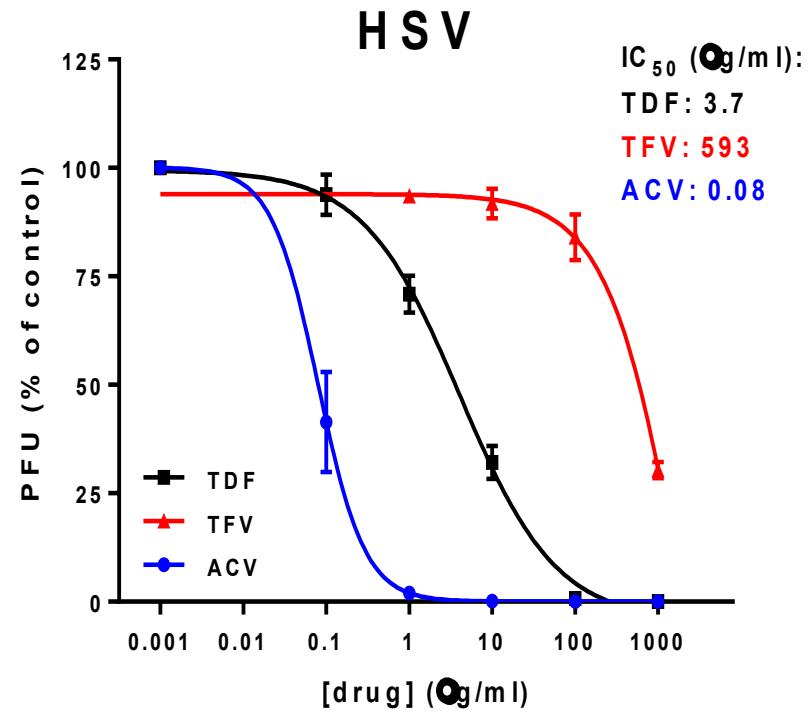
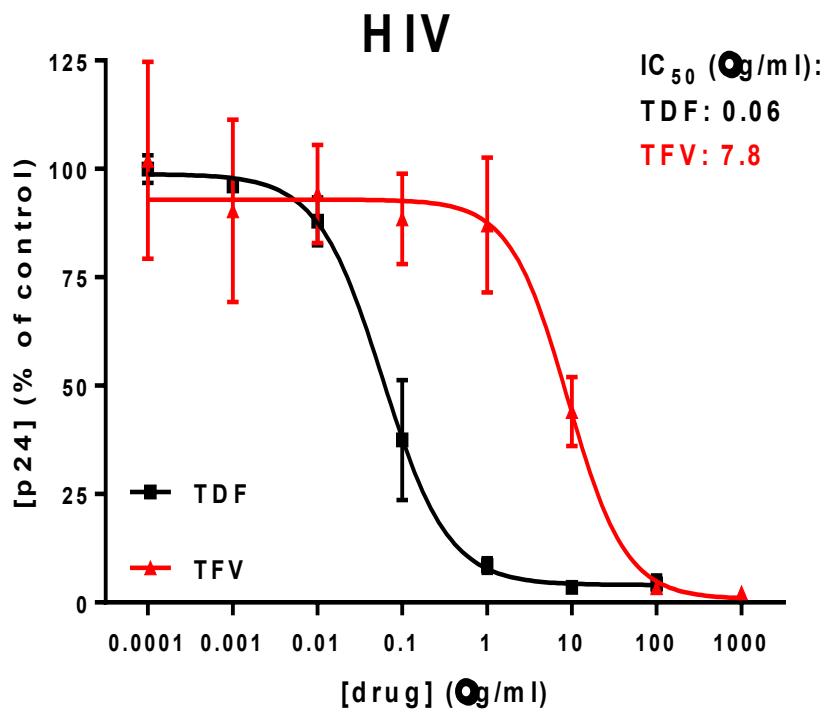
# Overview

- Why tenofovir disoproxil fumarate (TDF)?
  - In vitro and animal model data
- Why IVR design?
- Phase 1 single site PK/safety study initiated December, 2013
  - Albert Einstein College of Medicine/Montefiore Medical Center
- Future directions

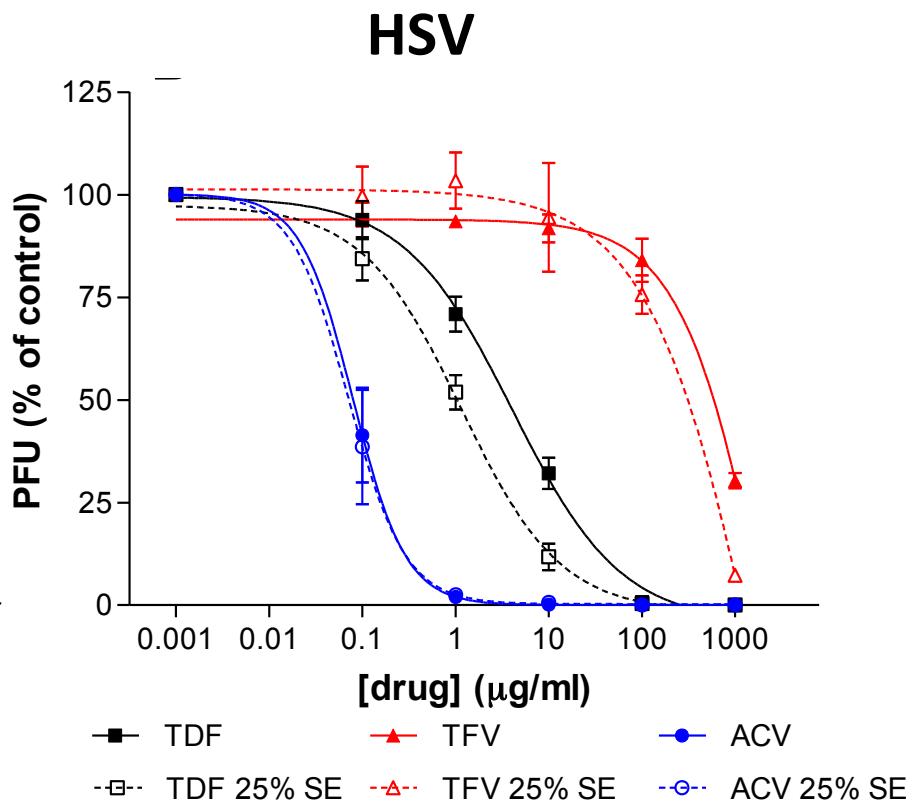
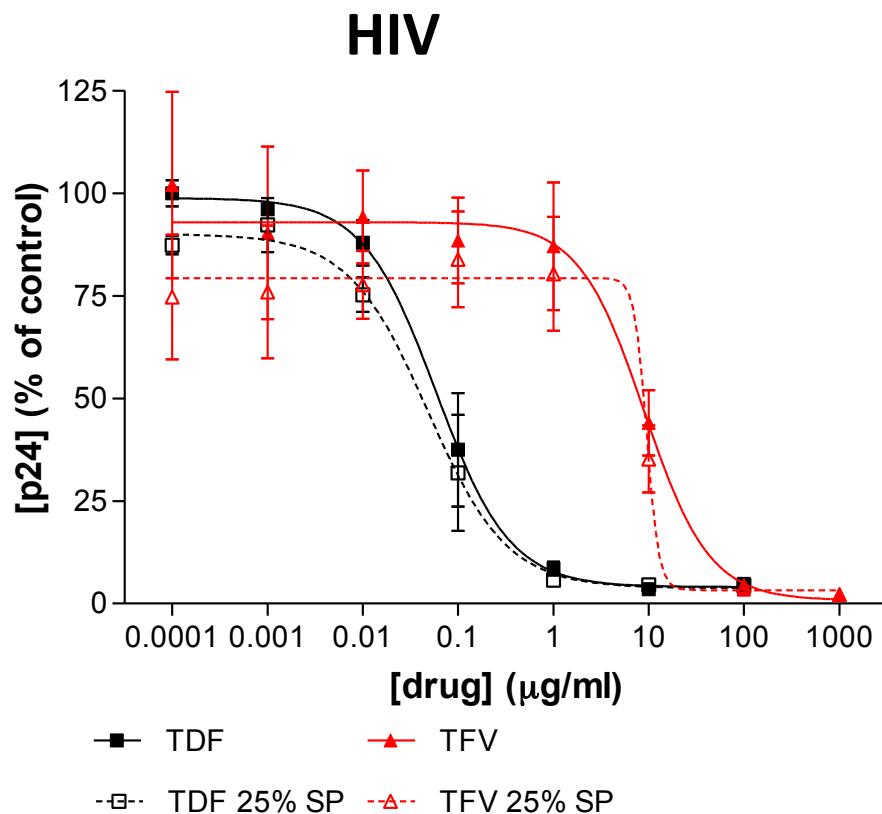
# Tenofovir Disoproxil Fumarate vs. Tenofovir



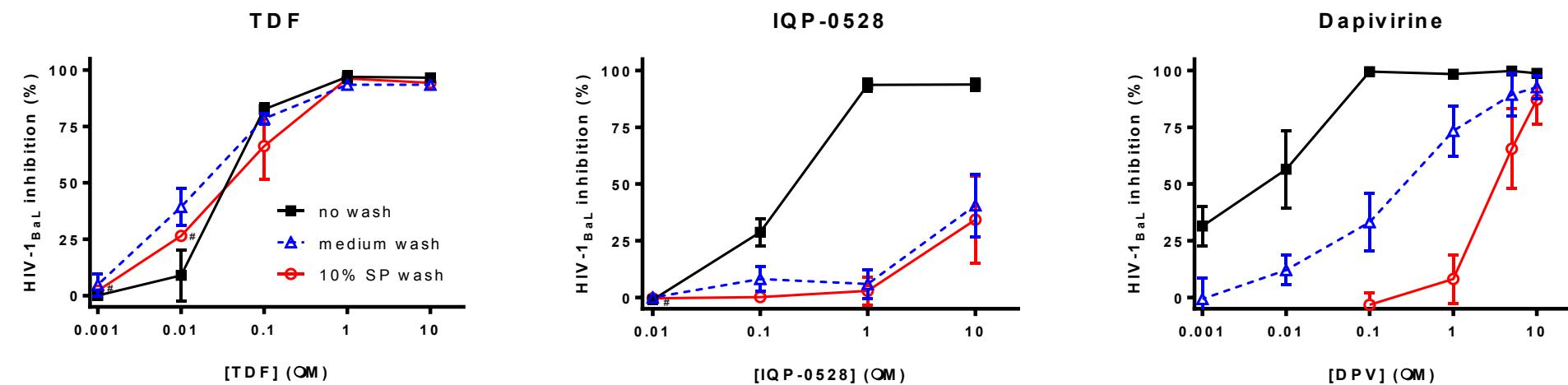
# TDF more Potent than TFV against HIV & HSV-2



# Retains Activity when Virus Introduced in Semen/Seminal Plasma

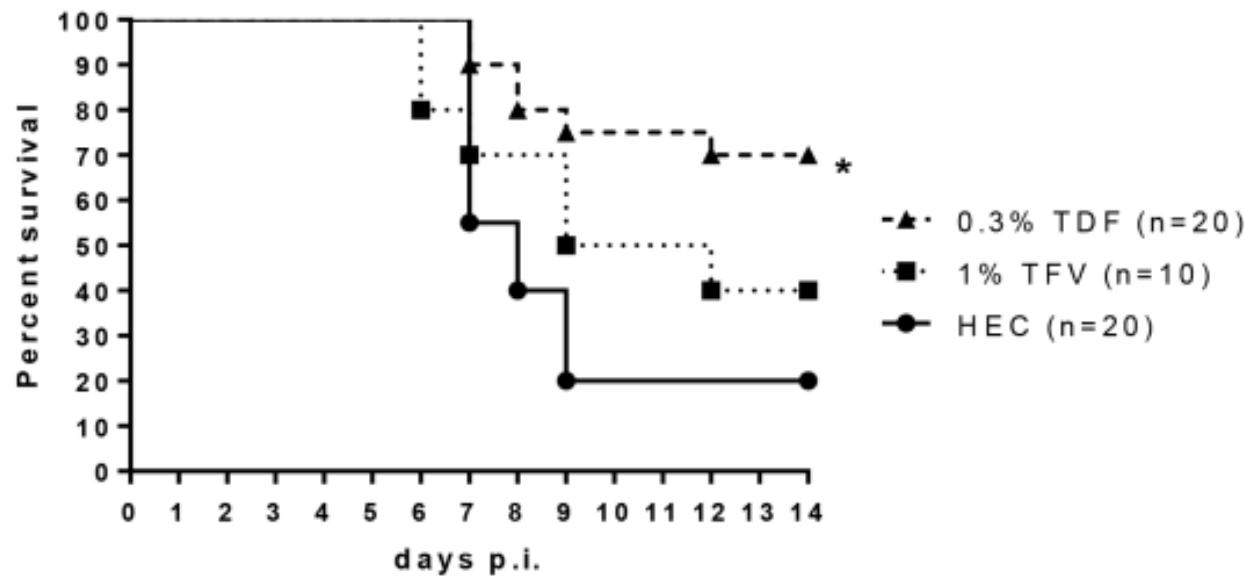


# TDF Retains Activity following Washout

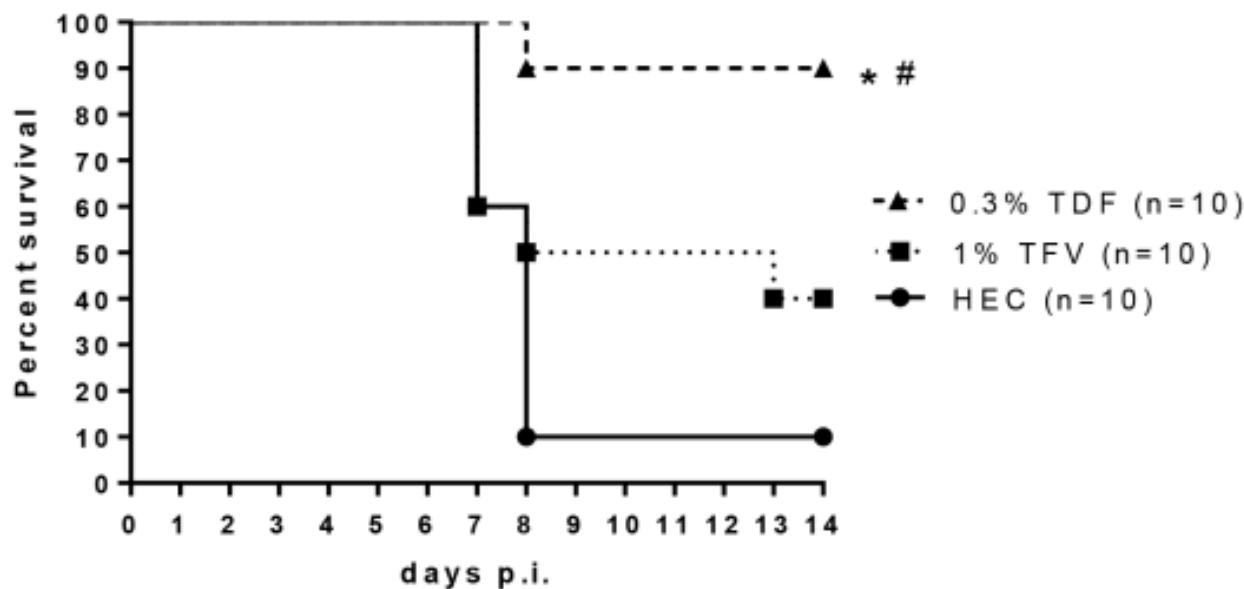


# TDF Provides Greater Protection than TFV against HSV-2 in Murine Model

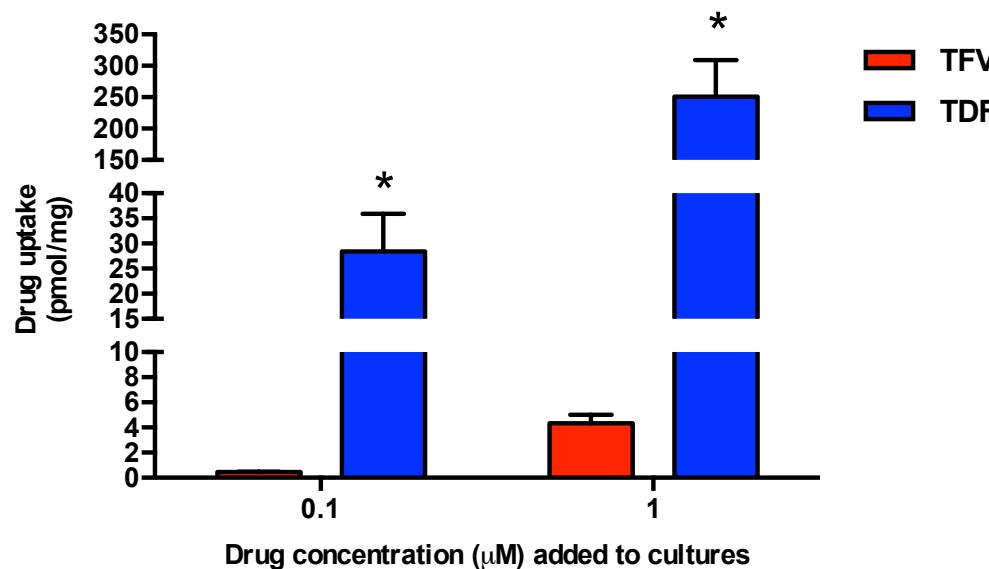
BAT24 Dosing



Daily Dosing



# Increased protection with TDF reflects greater intracellular uptake



- No significant increase in inflammatory cytokines or chemokines in vaginal washes
- No change in cytokine, chemokine or mitochondrial gene expression in RNA extracted from genital tract tissue in mice treated with twice-daily 0.3% TDF gel
- No histological changes relative to HEC treated mice
- Ring eluants had no deleterious impact on epithelial barrier integrity in dual chamber model

# Why Intravaginal Rings (IVR)?

- Optimal delivery strategy for TDF
- Rings may overcome some of the difficulties with adherence
- Behavioral studies support IVR strategy with caveats:
  - Women may remove rings
    - To ascertain “that it is still there”
    - During menstruation
    - Possibly in association with sex
  - No behavioral acceptability data comparing 30 d vs. longer duration rings

# Intravaginal Rings for Sustained Delivery

Dapivirine



MVC

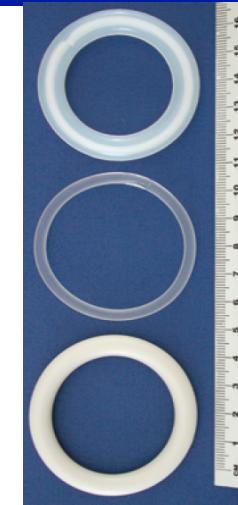
Matrix

TFV



TDF

Reservoir



Estring

22 mL

Nuvaring

4.3 mL

Femring

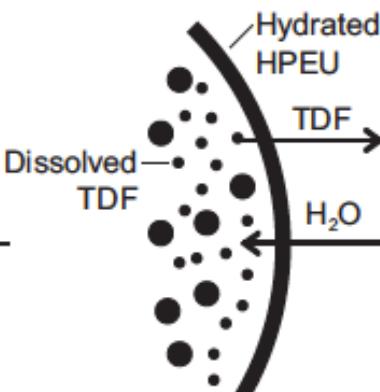
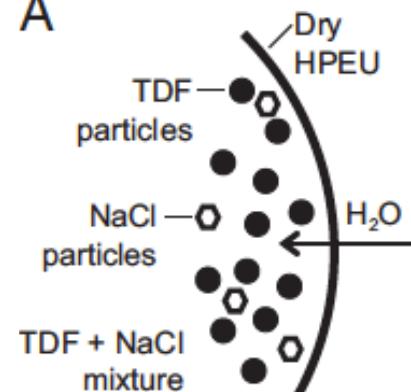
18 mL

[www.nlm.nih.gov](http://www.nlm.nih.gov)

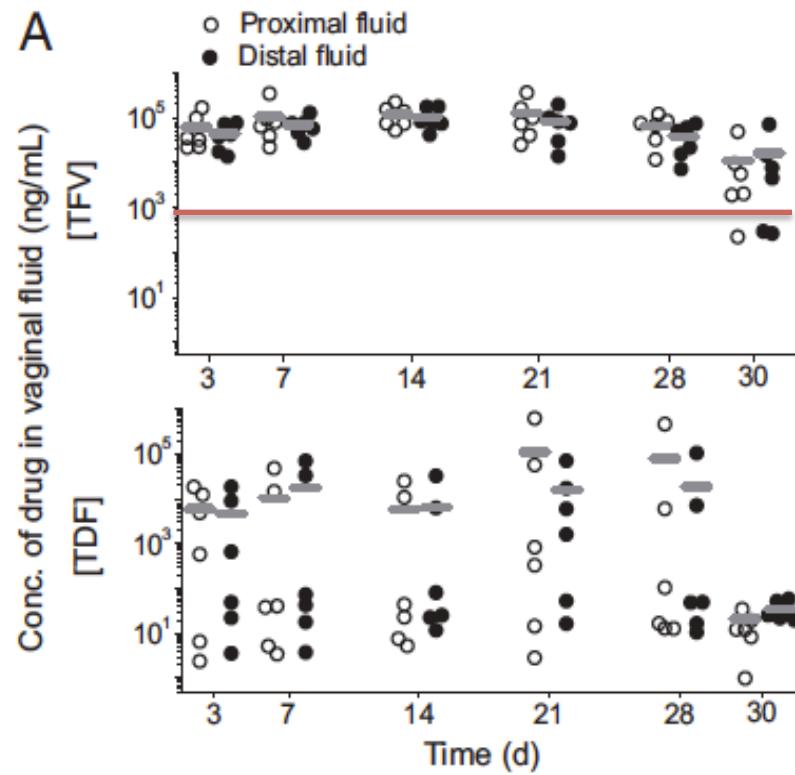
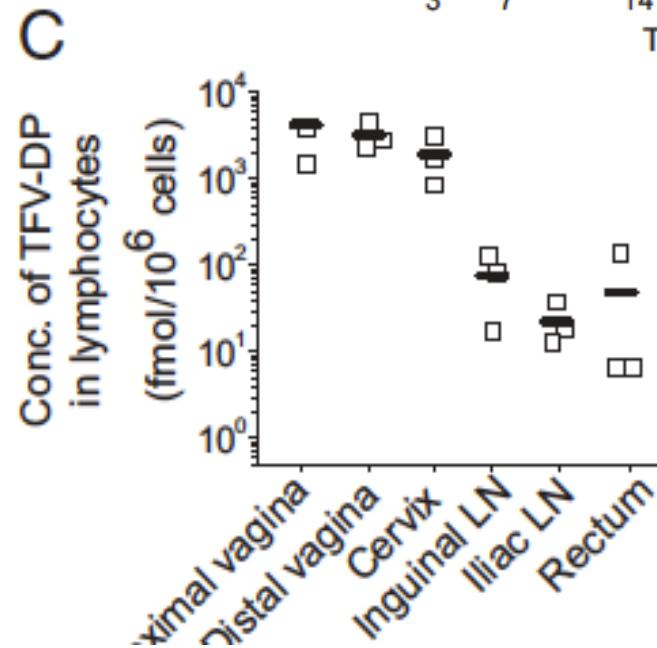
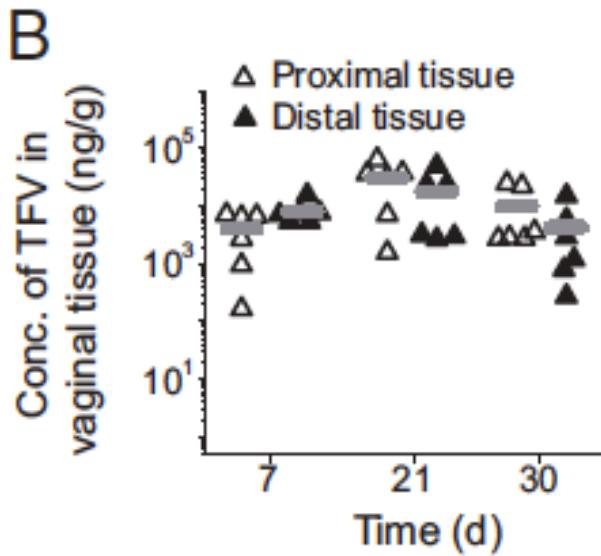
Malcolm, K. et al., *J. Antimicrob. Chemother.* 2005, 56: 954-6

- Matrix devices exhibit drug release rates that decrease with time
- **Reservoir devices rate controlling membrane that allow for more consistent drug flux**
- **TDF reservoir IVR designed using polyurethane**
  - Vaginal fluid is driven into the core resulting in TDF elution;
  - NaCl aids in solubilizing drug in the core to drive release through wall

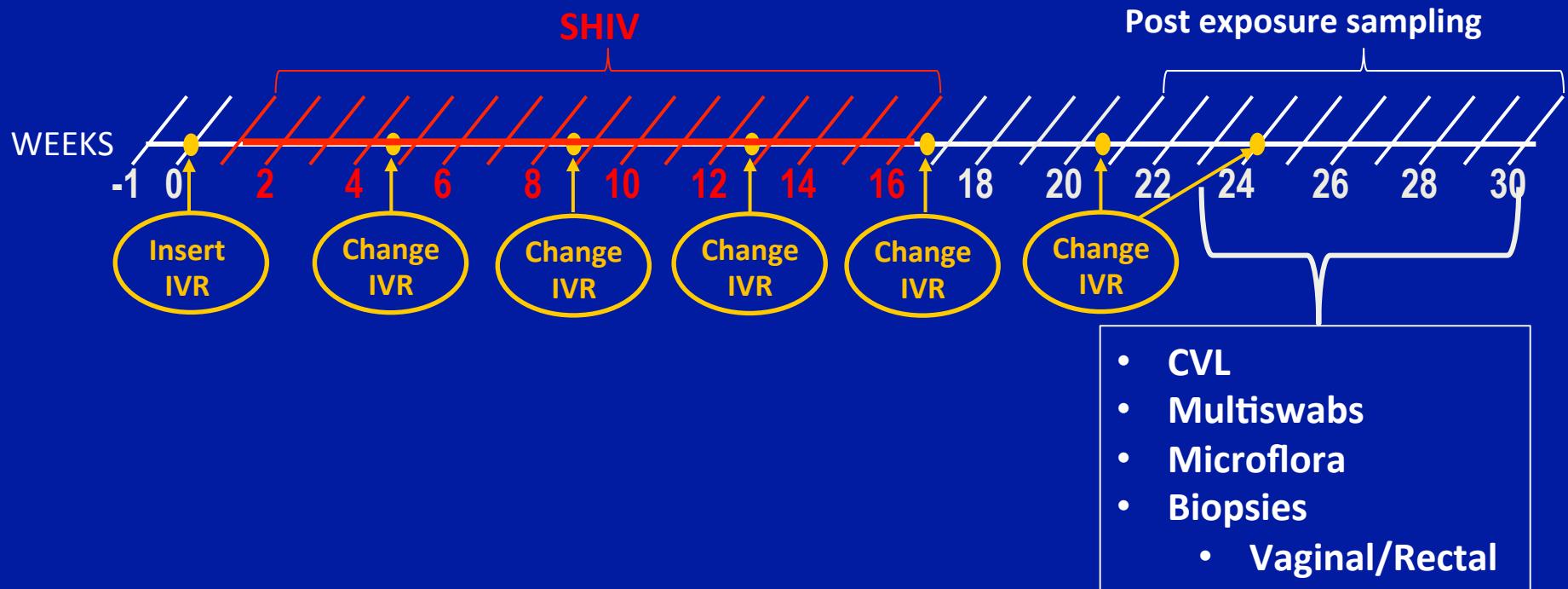
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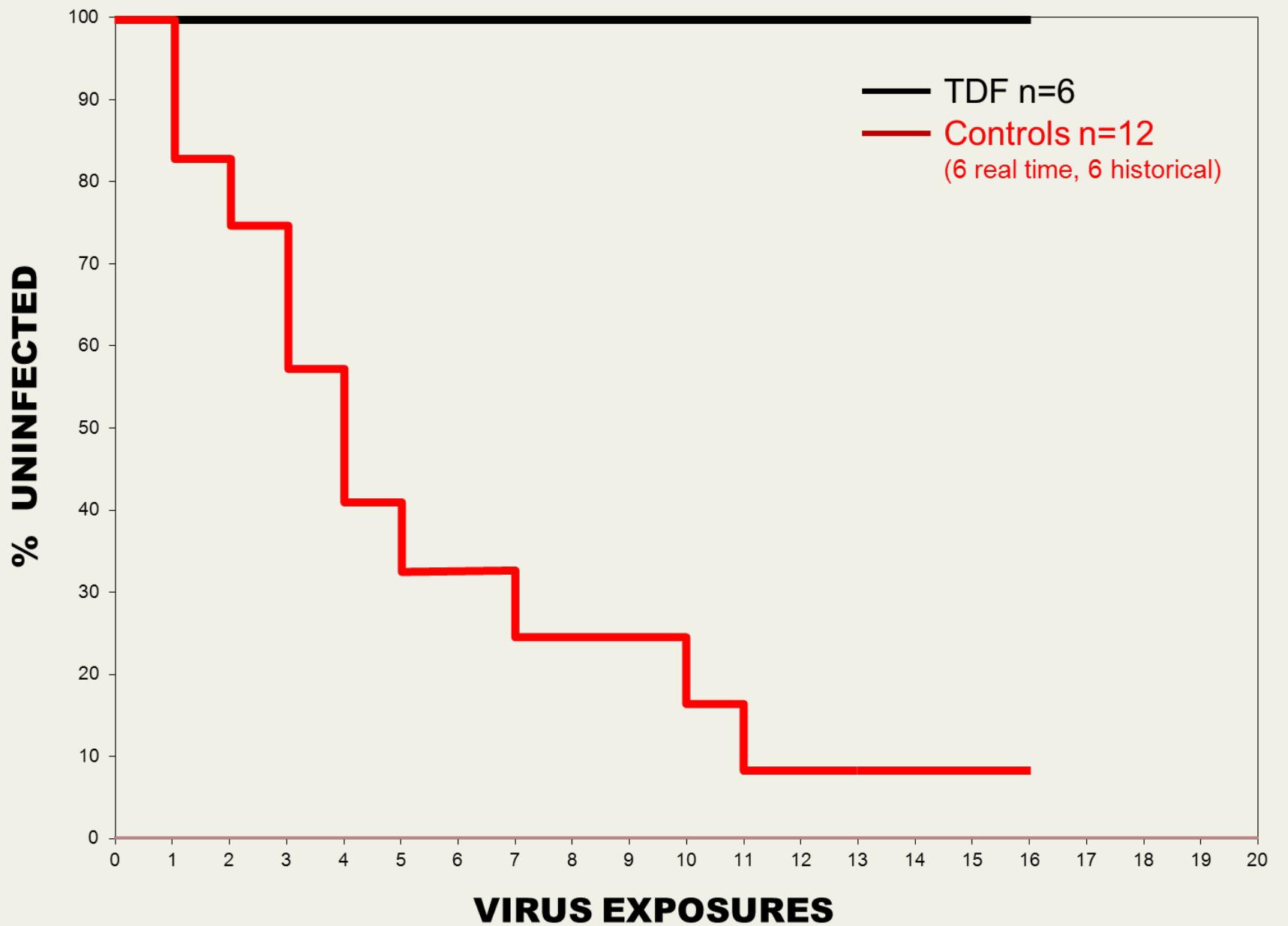


# TDF/TFV in vaginal secretions and tissue in 28 d macaque study



# Efficacy Study in Macaques

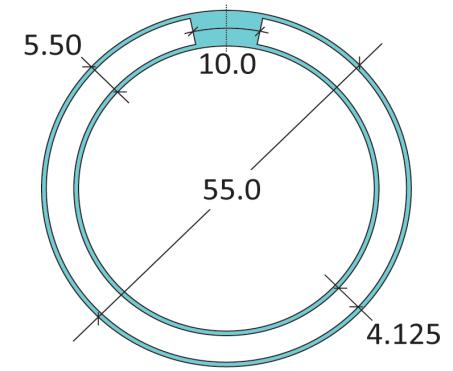
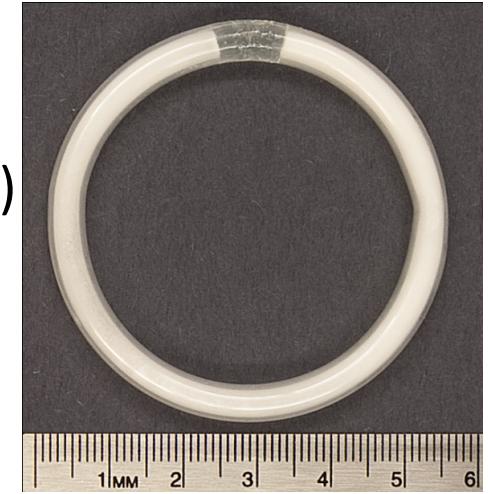




# Target product profile

- **Human IVR design**

- Reservoir polyurethane ring
- HydroThane™ AL 25-93A (20 wt% swelling polymer)  
Advansource Biomaterials
- IVR dimensions: 55 mm x 5.5 mm
- Tubing wall thickness: 0.7 mm
- Amount of core material:
  - TDF =  $360 \pm 54$  mg
  - NaCl =  $60 \pm 9$  mg
- Release duration = 30 days
- Average release rate =  $5.5 \pm 1.5$  mg/day
- Average  $F_{10} = 1.04 \pm 0.08$  N  
(force to compress 10%)

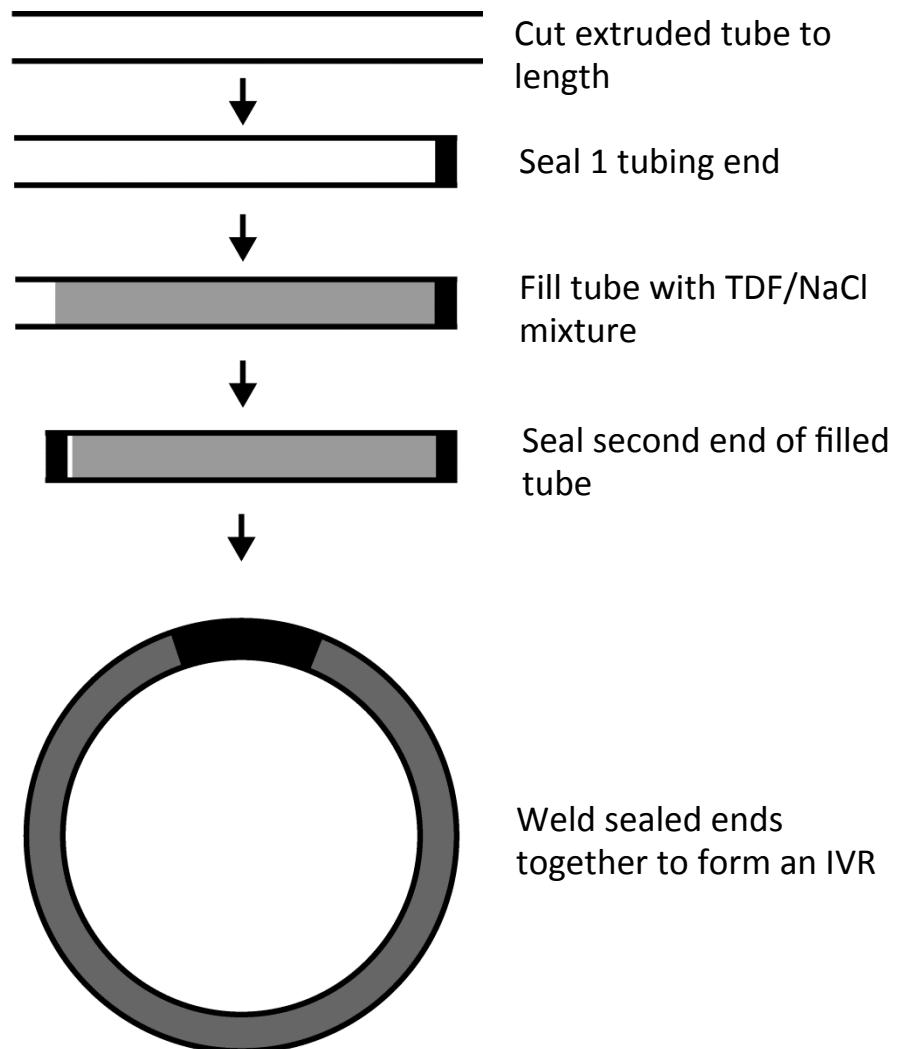


# IVR fabrication

- Steps involved

1. Extrude tubing
2. Cut tubing to 171 mm
3. Seal 1<sup>st</sup> tubing end
4. Fill tube with TDF/NaCl mixture
5. Seal 2<sup>nd</sup> end of filled tube
6. Weld sealed ends to make an IVR
7. Anneal to get a circular shape
8. Package
9. Incubate at 65°C for 5 days for wall loading

**Final device**



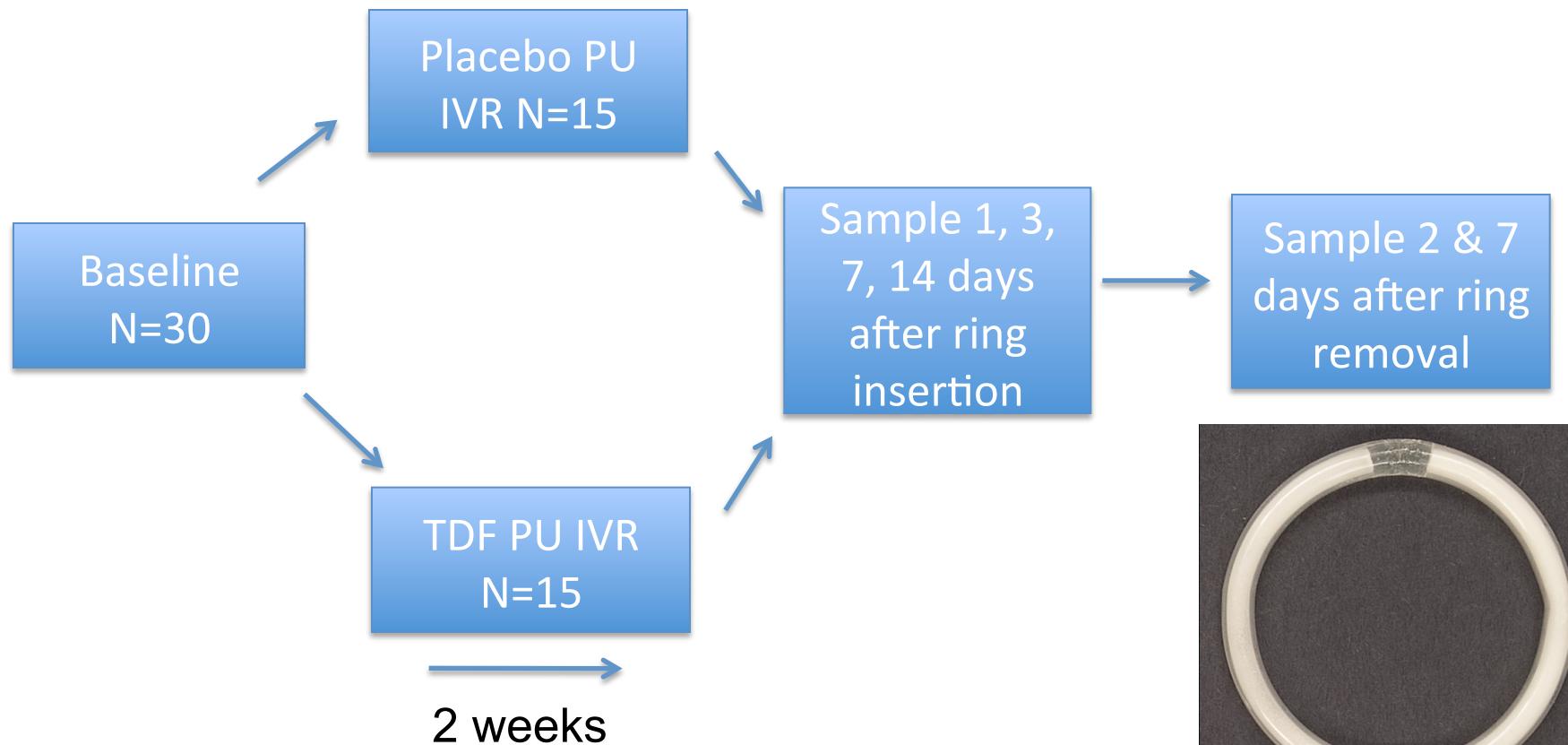
# **Phase 1 Trial**

**Randomized, Single-Site, Safety, Pharmacokinetic, and Acceptability Study of a Tenofovir Disoproxil Fumarate Reservoir and Placebo Polyurethane Intravaginal Ring**

**TDF IVR-001**

**IND 116 945**

# Study Design



# Schema of Study Design

	Visit 1: Screen	Visit 2 Enrollment	Visit 3 D0	Visit 4 D1	Visit 5 D3-5	Visit 6: D7	Call D10	Visit 7 D14	Visit 8 D16-18	Visit 9 D21
			IVR Insertion					IVR Removal		
Assessment AEs/Pelvic Exam	X	X*	X*	X	X	X		X*	X	X*
Blood, genital tract PK			X	X	X	X		X	X	X
Tissue PK/PD		X						X		

\*Colposcopy

Exploratory outcomes: Drug levels using dried blood spots, PD in biopsies and fluid, mucosal immune mediators and microbiota

# Proposed next steps

- Phase 1 study initiated in December with plan to complete by September 2014
  - Interim PK analysis in April/May
- If results (PK, safety, acceptability) favorable, propose Phase 2 expanded PK/safety study:
  - Focus on young (18-25) US and African sexual active women
  - 6 months of ring use
  - Primary endpoints: PK, safety, adherence
  - Exploratory endpoints: PD, HSV shedding, mucosal immunity including microbiome