PIPELINE PREVIEWS

Pipeline Previews brings to you information on the newest drugs and medical products as they become available to the dermatologic community. This department may include additional information from the manufacturers, plus reports from physicians who wish to share their clinical experience with these new products. In addition, we will inform our readers about the latest drugs receiving Food and Drug Administration (FDA) approval.

Sitavig® for Herpes Labilalis

Innocutis Holdings LLC has announced the introduction into the North American markets of Sitavig® (ACYCLOVIR) 50mg Buccal Tablets, licensed from BioAlliance Pharma.

Sitavig (50 mg acyclovir) Muco-Adhesive Buccal Tablet uses a proprietary Lauriad delivery technology, which consists of a tasteless and odorless tablet that sticks to the gum, above the canine tooth on the side of the lip that is infected with a cold sore. The 8mm in diameter and 2.2–2.6mm thick tablet dissolves to provide a sustained release of medicine. Sitavig also requires application to the gum only once-per-episode. A patient can eat and drink normally once the tablet adheres to the gum, typically within a few minutes of application. Moreover, Innocutis reports that when Sitavig is applied at first signs of episodic prodromal symptoms, it can often actually abort the episode entirely.

Innocutis cites a Phase III study to demonstrate that a single low dose of Sitavig® Acyclovir buccal tablet improved all clinical parameters of labial herpes, in particular, it increased the percentages of blocked lesions and delayed by about 100 days the recurrence of the next herpes episodes. Because Sitavig provides a high sustained-release local exposure of acyclovir in oral mucosa, it is evaluated as a single low dose treatment.

In a multicenter double blind placebo-controlled patient-initiated trial, 775 patients with recurrent HL were randomly assigned to either a single application of Sitavig 50 mg or matching placebo as soon as prodromal symptoms occurred. The primary endpoint was the time to healing (TTH) of primary vesicular lesion (mITT population). Other endpoints included incidence of blocked episodes, duration of herpes episodes, and incidence and time to next recurrence evaluated during a 9-month follow-up (ITT population).

With Sitavig 50 mg, the incidence of blocked herpes episodes was increased by 24.2% (34.9% vs 28.1%; P = 0.042), the median PA3 duration of herpes episodes was reduced (5.6 days vs 6.4 days, P = 0.003) as well as viral load in saliva. During the 9-month follow up, recurrence of herpes lesions was less frequent (64.2% vs 73.6%; P = 0.027) and delayed (205 days vs 165 days, P = 0.041) in the Sitavig 50mg.

In this trial, a single administration of a low dose of acyclovir using Sitavig 50 mg resulted in the prevention of vesicular lesions. Consistently, the number and percentage of patients with "non-primary" (outside the lips) vesicular lesions were significantly lower in the Sitavig 50 mg (10.4%) than in the placebo group (15.7%). The study showed that Sitavig 50 mg reduces by 22.7% the risk to experience a recurrence in a 9-month follow up. In addition, the next recurrence of herpes episode was delayed by a mean of 100 days in patients whose herpes lesions recurred.

FDA Approves Jublia for Treatment of Onychomycosis

Valeant Pharmaceuticals has announced FDA approval of its New Drug Application for Jublia (efinaconazole 10% topical solution), the first topical triazole approved for the treatment of onychomycosis of the toenails. Jublia is a solution applied daily to the nail with a flow-through brush applicator built in to the bottle. It dries quickly and there is no need to remove excess product. There are no concerns for systemic side effects such as drug-drug interactions or acute liver injury.

The two positive pivotal studies that were the basis for approval were published last year in the Journal of the American Academy of Dermatology. These international studies were conducted in 1,655 subjects with onychomycosis, including subjects in Canada. For the pivotal studies, the primary endpoint was complete cure at Week 52, which required that the target nail show no clinical involvement and no evidence of fungus present by both KOH testing and a negative fungal culture. In Study 1, 17.8% of subjects treated with Jublia were completely cured, compared to only 3.3% of subjects treated with vehicle. In Study 2, 15.2% of subjects treated with Jublia ® were completely cured, compared to only 5.5% of subjects treated with vehicle. Adverse events that were reported were generally mild and transient and were similar between

FDA Clears Restylane® for Marketing

Valeant Pharmaceuticals has announced that that the FD has issued marketing clearance for Restylane® Silk Injectable Gel with 0.3% Lidocaine, a device indicated for submucosal implantation for lip augmentation and dermal implantation for correction of perioral rhytids in patients over the age of 21. Restylane® Silk

is a clear injectable gel composed of hyaluronic acid, a natural substance that already exists in the body. Restylane® Silk is non-animal based and free from animal protein. Allergy pretesting is not necessary. Restylane® Silk contains 0.3% lidocaine, which was added to reduce the discomfort associated with the treatment.

A clinical study was conducted with Restylane® Silk to evaluate the safety and effectiveness of injections to enhance lip fullness and to improve the wrinkles around the lips. The study included 221 mostly female subjects and evaluated subjects with light and dark skin. Subjects with very dark skin were not studied. Ninety-eight percent (98%) of subjects reported improvement in their lip fullness 14 days after injection and 76% of the subjects still had lip improvement 6 months after their injection.

The majority of adverse events were mild in intensity and the most common symptoms were lip swelling, contusion, and lip pain. The incidence of adverse event decreased significantly after the second treatment. Restylane Silk is contraindicated for patients with severe allergies manifested by a history of anaphylaxis or history or presence of multiple severe allergies; patients with a history of allergies to gram positive bacterial proteins; patients with bleeding disorders; for implantation in anatomical spaces other than the dermis or submucosal implantation for lip augmentation and should not be used in patients with previous hypersensitivity to local anesthetics of the amide type, such as lidocaine.

FDA Clears Ultherapy® Décolletage Treatment

Ulthera, Inc, has announced that its ultrasound platform device, the Ulthera® System, has received FDA clearance to non-invasively treat the chest to improve lines and wrinkles of the décolleté.

The Ultherapy Décolletage Treatment utilizes the System's signature imaging and micro-focused ultrasound therapy capabilities and takes about 30 minutes to administer. The Treatment stimulates the natural formation of collagen and elastin in the skin's foundation to gradually smooth chest wrinkles. Results are visible after about three months.

Ulthera reports that, as with its FDA-cleared Ultherapy procedure for lifting the neck, eyebrow and chin, meaningful results are achieved in just one treatment, and there's no downtime or post-treatment care requirements.

The Ultherapy Décolletage Treatment will be available in more than 1,500 physician practices across the United States, starting third quarter 2014. The Treatment is already cleared in more than 40 other countries worldwide and has been selectively available since 2012.

Brickell Biotech and Merz and BBI-3000

Brickell Biotech, Inc. has announced that it has entered into a license agreement with Merz North America, Inc. which grants Merz an exclusive North American license, with certain additional international rights, to develop and commercialize a completely novel retinoid compound, BBI-3000, for the treatment of skin conditions known to be responsive to retinoid agents, such as acne and psoriasis.

Under the terms of the agreement, Merz will assume the full cost and responsibility for future development and commercialization of the compound, initially for North America.

Brickell reports that in preclinical studies performed by Brickell, BBI-3000 displayed activity that differentiated it from the leading topical retinoids currently available on the market.

brandMD®, Inc. Launches New Hair Regrowth System

brandMD® Skin Care, introduce a new advanced technology for hair loss and innovative 3-step daily regimen, the Hair Regrowth System. Formulated by a group of leading dermatologists, scientists and market researchers, the Hair Regrowth System has been clinically proven to prevent and improve signs of hair loss by reducing the production of DHT, stimulating hair growth and improving hair follicle anchoring.

The new brandMD Hair Regrowth System is infused with peptides, nourishing essential oils and extracts. Many hair loss solutions have undesired side effects. brandMD HRS-10 breakthrough technology has no known side effects and can be used by both men and women.

This new hair care regimen was formulated to specifically target and prevent signs of hair loss using groundbreaking technology. The entire Hair Regrowth System as well as all of brandMD's technology based skin care products, are available exclusively to medical professionals for in-office dispensing.

FDA approves Dalvance to Treat Skin Infections

The FDA approved Dalvance (dalbavancin), a new antibacterial drug used to treat adults with skin infections. Dalvance is intended to treat acute bacterial skin and skin structure infections (ABSSSI) caused by certain susceptible bacteria like *Staphylococcus aureus* (including methicillin-susceptible and methicillin-resistant strains) and *Streptococcus pyogenes*. The treatment is administered intravenously.

Dalvance is the first drug designated as a Qualified Infectious Disease Product (QIDP) to receive FDA approval. It's safety and efficacy were evaluated in two clinical trials with a total of 1,289 adults with ABSSSI. Participants were randomly assigned to receive Dalvance or vancomycin, another antibacterial drug. Results showed Dalvance was as effective as vancomycin for the treatment of ABSSSI.