

# FDA panel recommends approval of Sculptra for treating HIV-related facial lipoatrophy

By Bob Roehr

STAFF CORRESPONDENT

**Gaithersburg, Md.** — The FDA and members of the Medical Devices Advisory Committee meeting unanimously recommended approval of Sculptra for reconstructive purposes with lipoatrophy associated with HIV infection and treatment. However, limited clinical data and fear of off-label

See *Sculptra* on page 33



(Left to right) Physicians Douglas Mest, Marcus Conant, Peter Engelhard (Photo courtesy of Bob Roehr)

## Sculptra

**Conditions for approval** continued from page 1

use led them to recommend attaching five conditions to that approval, including a post-approval study and limiting product use to HIV-positive patients.

Sculptra is an injectable poly-L-lactic acid (PLLA) wrinkle treatment that has been used outside of the United States since 1999 under the trade name New-Fill. It is commercially available in 33 countries and has been used in more than 150,000 patients. Dermik Laboratories, the dermatology arm of Aventis in the United States, recently acquired rights to the product.

The hearing opened with dramatic, often anonymous testimony from HIV patients who have benefited from Sculptra. It is not uncommon for patients to defer beginning combination therapy for HIV or stop that therapy because of the lipodystrophy that is believed to be associated with some of those drugs.

Los Angeles patient Bradley Land said he was diagnosed with AIDS in 1987. Because of lipoatrophy, he looked like he was on his deathbed, even after a drug regimen effectively controlled the virus. While clinically healthy, "I was looking forward to suicide." Six treatments with Sculptra in 2003 ameliorated the worst of his lipoatrophy. He said it made him feel like he was part of the human race again.

"Facial lipoatrophy has become the scarlet letter of AIDS," said San Francisco AIDS physician Marcus Conant. Nearly half of patients experience some facial lipoatrophy within three years of beginning therapy. Conant's experience using Sculptra in a protocol over the last four months has

led him to believe, "It is safe and effective and my patients would benefit tremendously" from its availability.

Panel members clearly were moved by the personal testimonials and were convinced of the need for a product to treat lipoatrophy. But they were equally frustrated with limitations on the data presented to them for evaluation. Clinical trials have been investigator initiated, with limited support from the company that initially developed the product.

Panel members clearly were moved by the personal testimonials and were convinced of the need for a product to treat lipoatrophy. But they were equally frustrated with limitations on the data presented to them for evaluation. Clinical trials have been investigator initiated, with limited support from the company that initially developed the product.

Broad commercial product use in the general population over the last five years has resulted in only 251 reported adverse events. Data on using significantly larger volumes of the product in immunocompromised patients mirrors that safety profile. The most compelling efficacy data came from the VEGA study, an open-label trial of up to six injections as needed, in 50 patients in France, and published in the journal *AIDS* (*AIDS* 2003, 17:2471-2477). It showed a significant increase in total cutaneous thickness in the treated area.

Peter Engelhard, a Miami Beach physician specializing in HIV, received training in administering New-Fill in Paris and subsequently organized a compassionate use, 100-patient, open-label trial of the product in the United States. HIV physician Douglas Mest organized a parallel trial in the Los Angeles region. Both found similar patterns of ease of administration, safe-

ty, and patient satisfaction as were seen in the European trials.

Dr. Engelhard said that 50 percent of his patients require "touch-up treatments" within a year, though some have gone two to three years without them.

Several members of the review panel were concerned that the mechanism of action of PLLA has not been identified, and by formation of what was varyingly described as micro-nodules or irregularities. The clinicians reported that these formations seldom were visible or even noticed by the patients and often were discerned by the

physician only through palpation of the injected region.

Dr. Mest said the nodules tend to occur within the first two months of treatment and slowly abate over time; he assumes they are excess product. This points to a technique different from collagen in that one initially should administer less of the PLLA and later add more as needed.

The advisory panel recommended that Dermik conduct post-approval trials in women and people of color to see if data from the initial trials, conducted largely in white males, holds up in broader popula-

tions. Consumer representative Lee Doyle, Ph.D., said fat distribution differs markedly in females and that may affect the efficacy of this product in women.

The panel would like to see safety and efficacy data out beyond the current two years, out to five years, as well as education and training on proper use of the product.

There is little doubt that the FDA will give final approval to Sculptra — perhaps as quickly as within the next 30 days. Directly competitive products for this indication, such as silicone oil, are at least a year away from gaining market approval for sale. **CST**