Efficacy and Safety of a Fixed-Dose Clindamycin Phosphate 1.2%, Benzoyl Peroxide 3.1%, and Adapalene 0.15% Gel for Moderate-to-Severe Acne: Randomized Phase 2 and Phase 3 Studies of the First Triple-Combination Drug

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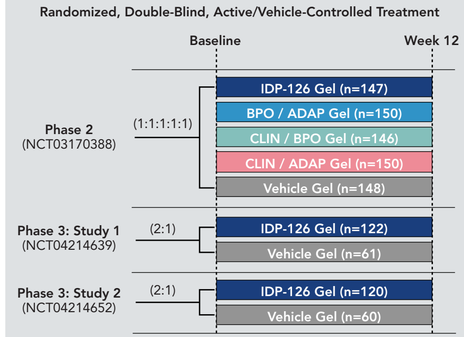
SYNOPSIS AND OBJECTIVE

- A three-pronged approach to acne treatment—combining an antibiotic, antibacterial agent, and retinoid in a single formulation—has been investigated as a means to provide greater efficacy than single/double treatments while potentially reducing antibiotic resistance
- Clindamycin phosphate 1.2%/benzoyl peroxide (BPO) 3.1%/adapalene 0.15% (IDP-126) gel is the first triple-combination, fixed-dose topical acne product in development and this product addresses the major pathophysiological abnormalities in acne patients (Stein Gold *AJCD* 2022)
- The objective of these analyses was to evaluate the efficacy, safety, and tolerability of IDP-126 in phase 2 and 3 studies of patients with moderate-to-severe acne

STUDY TREATMENTS AND PARTICIPANTS

12-Week Studies of IDP-126 Gel



ALL STUDIES

Key Eligibility Criteria:
- Aged ≥9 years
- EGSS 3 (moderate) or 4 (severe)
- Inflammatory lesions: 30–100
- Noninflammatory lesions: 35–150

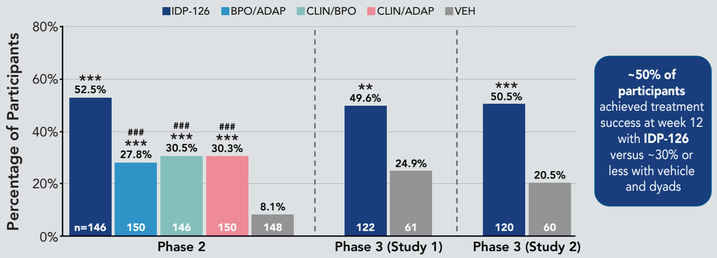
Co-primary Endpoints:
- Treatment success[a]
- Change from baseline in inflammatory and noninflammatory lesion counts

Baseline Demographics/Characteristics:
- Mean age ranged from 19.2–21.4 years across all studies
- Most participants were female, White, and non-Hispanic, with EGSS=3 (moderate)

[a]Defined as the percentage of participants achieving ≥2-grade reduction from baseline in EGSS and a score of 0 (clear) or 1 (almost clear).
N values shown are for randomized populations.
ADAP, adapalene 0.15%; BPO, benzoyl peroxide 3.1%; CLIN, clindamycin phosphate 1.2%; EGSS, Evaluator's Global Severity Score; IDP-126, clindamycin phosphate 1.2%/benzoyl peroxide 3.1%/adapalene 0.15% gel.

RESULTS: EFFICACY

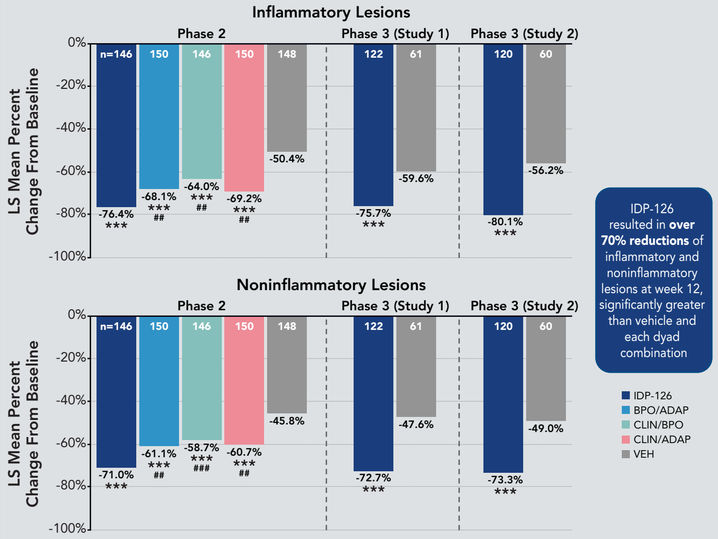
Treatment Success[a] at Week 12 (ITT Populations)



~50% of participants achieved treatment success at week 12 with **IDP-126** versus ~30% or less with vehicle and dyads

**P<0.01; ***P≤0.001 vs vehicle. ###P≤0.001 vs IDP-126.
[a]Defined as percentage of participants achieving ≥2-grade reduction from baseline in Evaluator's Global Severity Score and a score of 0 (clear) or 1 (almost clear).
Values have been adjusted for multiple imputation.
ADAP, adapalene 0.15%; BPO, benzoyl peroxide 3.1%; CLIN, clindamycin phosphate 1.2%; IDP-126, clindamycin phosphate 1.2%/benzoyl peroxide 3.1%/adapalene 0.15% gel; ITT, intent to treat; VEH, vehicle gel.

Mean Percent Changes from Baseline in Lesion Counts at Week 12 (ITT Populations)

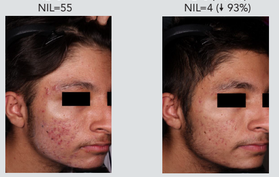


IDP-126 resulted in **over 70% reductions** of inflammatory and noninflammatory lesions at week 12, significantly greater than vehicle and each dyad combination

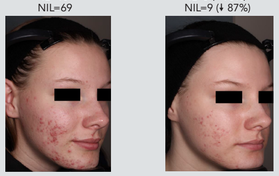
***P<0.001 vs vehicle. **P<0.01; ***P<0.001 vs IDP-126.
Values have been adjusted for multiple imputation.
ADAP, adapalene 0.15%; BPO, benzoyl peroxide 3.1%; CLIN, clindamycin phosphate 1.2%; IDP-126, clindamycin phosphate 1.2%/benzoyl peroxide 3.1%/adapalene 0.15% gel; ITT, intent to treat; LS, least-squares; VEH, vehicle gel.

Acne Improvements With IDP-126

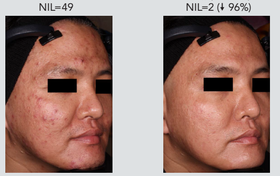
18-Year-Old Male (Asian, non-Hispanic)
Baseline: EGSS=4, IL=59, NIL=55 — **Week 12:** EGSS=1, IL=6 (↓ 90%), NIL=4 (↓ 93%)



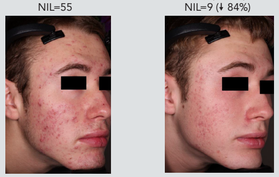
18-Year-Old Female (White, non-Hispanic)
Baseline: EGSS=3, IL=40, NIL=69 — **Week 12:** EGSS=1, IL=3 (↓ 93%), NIL=9 (↓ 87%)



44-Year-Old Male (Asian, non-Hispanic)
Baseline: EGSS=3, IL=48, NIL=49 — **Week 12:** EGSS=0, IL=0 (↓ 100%), NIL=2 (↓ 96%)



16-Year-Old Male (White, non-Hispanic)
Baseline: EGSS=3, IL=53, NIL=55 — **Week 12:** EGSS=1, IL=7 (↓ 87%), NIL=9 (↓ 84%)



Individual results may vary.
EGSS, Evaluator's Global Severity Score (0=clear, 1=almost clear, 2=mild, 3=moderate, 4=severe); IDP-126, clindamycin phosphate 1.2%/benzoyl peroxide 3.1%/adapalene 0.15% gel; IL, inflammatory lesions; NIL, noninflammatory lesions.

RESULTS: SAFETY AND TOLERABILITY

- IDP-126 was well tolerated in all 3 studies:
  - Less than 4% of participants discontinued studies/treatment due to AEs
  - Most TEAEs were of mild or moderate severity (data not shown)
  - Mean cutaneous safety/tolerability scores were all <1 (mild; data not shown)

Treatment-Emergent Adverse Events Through Week 12 (Safety Populations)

Phase 2 Study

Participants, n (%)	IDP-126 (n=141)	BPO / ADAP (n=146)	CLIN / BPO (n=144)	CLIN / ADAP (n=148)	VEH (n=146)
TEAEs	51 (36.2)	52 (35.6)	26 (18.1)	40 (27.0)	22 (15.1)
Related	28 (19.9)	32 (21.9)	3 (2.1)	18 (12.2)	2 (1.4)
Discontinued drug or study due to AE	4 (2.8)	8 (5.5)	0	3 (2.0)	2 (1.4)
Most common treatment-related TEAEs (≥3% participants in any treatment)					
AS pain	11 (7.8)	16 (11.0)	1 (0.7)	5 (3.4)	1 (1.7)
AS dryness	9 (6.4)	8 (5.5)	2 (1.4)	9 (6.1)	0
AS exfoliation	5 (3.5)	3 (2.1)	0	2 (1.4)	1 (0.7)
AS erythema	2 (1.4)	2 (1.4)	1 (0.7)	5 (3.4)	0

Phase 3 Studies

	Study 1		Study 2	
Participants, n (%)	IDP-126 (n=122)	VEH (n=61)	IDP-126 (n=120)	VEH (n=60)
TEAEs	30 (24.6)	5 (8.2)	36 (30.0)	5 (8.3)
Related	22 (18.0)	0	26 (21.7)	2 (3.3)
Discontinued drug or study due to AE	3 (2.5)	0	4 (3.3)	0
Most common treatment-related TEAEs (≥3% participants in any treatment)				
AS pain	13 (10.7)	0	18 (15.0)	1 (1.7)
AS dryness	2 (1.6)	0	5 (4.2)	0
Erythema	6 (4.9)	0	0	0
AS irritation	1 (0.8)	0	4 (3.3)	0
AS exfoliation	4 (3.3)	0	0	0

There were 4 serious AEs reported that were not considered related to treatment (Phase 2 study: n=1 IDP-126 [sickle cell anemia with crisis]; n=3 CLIN/ADAP [n=1 hyperbilirubinemia; n=1 enteritis; n=1 abortion induced]).
ADAP, adapalene 0.15%; AE, adverse event; AS, application site; BPO, benzoyl peroxide 3.1%; CLIN, clindamycin phosphate 1.2%; IDP-126, clindamycin phosphate 1.2%/benzoyl peroxide 3.1%/adapalene 0.15% gel; TEAE, treatment-emergent adverse event; VEH, vehicle gel.

CONCLUSIONS

- The innovative fixed-dose, triple-combination IDP-126 gel was efficacious and well tolerated in 3 clinical studies including children, adolescents, and adults with moderate-to-severe acne
- In all three studies at week 12, ~50% of participants achieved treatment success
- IDP-126 resulted in over 70% reductions of inflammatory and noninflammatory lesions at week 12
- To our knowledge, observed acne improvements in these studies with IDP-126 were greater than any FDA-approved topical acne treatment, though patient populations may differ across studies

AUTHOR DISCLOSURES

Linda Stein Gold has served as investigator/consultant or speaker for Ortho Dermatologics, LEO Pharma, Dermavant, Incyte, Novartis, AbbVie, Pfizer, Sun Pharma, UCB, Arcutis and Lilly. Leon H Kircik has acted as an investigator, advisor, speaker, and consultant for Ortho Dermatologics. Emil A Tanghetti has served as speaker for Novartis, Ortho Dermatologics, Sun Pharma, Lilly, Galderma, AbbVie, and Dermira; served as a consultant on clinical studies for Hologic, Ortho Dermatologics, and Galderma; and is a stockholder for Accure. Hilary Baldwin has served as advisor, investigator, and on speakers' bureaus for Almirall, Cassiopea, Foamix, Galderma, Ortho Dermatologics, Sol Gel, and Sun Pharma. Zoe D Draelos has received research funding from Ortho Dermatologics. Michael Gold has acted as an investigator, advisor, speaker, and consultant for Ortho Dermatologics. Investigator, consultant and/or speaker for Ortho Dermatologics, AbbVie, Almirall, Amgen, Arcutis, Dermavant, EPI Health, Galderma, Incyte, LEO Pharma, Novartis, Eli Lilly, Pfizer, SUN Pharma, UCB, Endo International, ChemoCentryx, Biorasi, Sirnaomics, Evelo Biosciences, Concert Pharmaceuticals, Cara Therapeutics, Castle Biosciences, Mindera, Biofrontera, Alfasigma, AiViva Biopharma, Anaptys Bio, Bausch Health, Dr Reddy's, Trevi Therapeutics. David M Pariser has served as consultant to Atacama Therapeutics, Bickel Biotechnology, Biofrontera AG, Celgene, Dermira, LEO Pharma, Regeneron, Sanofi, TDM SurgiTech, TheraVida, and Ortho Dermatologics; investigator for Abbott Laboratories, Almirall, Amgen, AOBiome, Asana Biosciences, Bickel Biotechnology, Celgene, Dermavant, Dermira, Eli Lilly, LEO Pharma, Menlo Therapeutics, Merck & Co., Novartis, Novo Nordisk A/S, Ortho Dermatologics, Pfizer, Regeneron, and Stiefel; on advisory board for Pfizer; and on the data monitoring board for BMS. Neil Sadick has served on advisory boards, as a consultant, investigator, speaker, and/or other and has received honoraria and/or grants/research funding from Almirall, Actavis, Allergan, Anacor Pharmaceuticals, Auxilium Pharmaceuticals, Bausch Health, Bayer, Biorasi, BTG, Carma Laboratories, Cassiopea, Celgene Corporation, Cutera, Cynosure, DUSA Pharmaceuticals, Eclipse Medical, Eli Lilly and Company, Endo International, EndyMed Medical, Ferndale Laboratories, Galderma, Gerson Lehrman Group, Hydropeptide, Merz Aesthetics, Neostrata, Novartis, Nutraceutical Wellness, Palomar Medical Technologies, Prescriber's Choice, Regeneron, Roche Laboratories, Samumed, Solta Medical, Storz Medical AG, Suneva Medical, Vanda Pharmaceuticals, and Venus Concept. Radhakrishnan Pillai and Varsha Bhatt are employees of Bausch Health US, LLC and may hold stock and/or stock options in its parent company.

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