

# Safety and Tolerability of Sarecycline for the Treatment of Acne Vulgaris

## Results from a Phase III, Multicenter, Open-label Extension Study and a Phase I Phototoxicity Study

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### Background

- Sarecycline is a novel, narrow-spectrum, once-daily, oral tetracycline-class antibiotic indicated for the treatment of inflammatory lesions of non-nodular moderate-to-severe acne<sup>1</sup>
- Poor tolerability and bacterial resistance concerns may limit the use of broad-spectrum tetracycline antibiotics for the treatment of acne<sup>1</sup>

### Objective

- To evaluate the long-term safety, tolerability, and patterns of use for the once-daily oral, narrow-spectrum antibiotic sarecycline in patients with moderate-to-severe acne vulgaris during a 40-week Phase III, multicenter, open-label extension study<sup>1</sup>
- Additionally, a Phase I, single-center, randomized, double-blind, placebo-controlled, crossover study conducted to evaluate the potential of sarecycline to cause phototoxicity<sup>1</sup>

### Methods

#### Open-label Safety Evaluation

- Patients aged 9-years of age or older with moderate-to-severe acne who completed one of two prior Phase III, double-blind, placebo-controlled, 12-week trials in which they received sarecycline 1.5mg/kg/ day or placebo were included<sup>1,2</sup>



- Primary assessment was the safety of sarecycline treatment over one year as measured by adverse events (AEs), vital signs, electrocardiograms (ECGs), clinical laboratory tests, and physical examinations
- Study visits occurred at Weeks 2, 6, 12, 18, 24, 32, and 40

#### Phototoxicity Study

- 19 Subjects (healthy; non-smoker, men, aged 18 to 45 years) received placebo or 240mg of sarecycline in a random order in each of the two treatment periods (not weight based)
- A two-treatment, two-period, two-sequence crossover design. Treatment periods were separated by at least nine days
- At three hours after administration of the study treatment, a previously unexposed area of each subject's back was irradiated with 16J/cm<sup>2</sup> of UVA, after which point, another area was irradiated with UVA/UVB at 50 percent of the subject's minimum erythral dose (MED)
- UV-exposed skin was assessed visually at 24, 48, and 72 hours after irradiation, and UV-induced skin reaction was evaluated using dermal response score scale
- Mean and maximum numerical UV-induced dermal response scores were determined for sarecycline and placebo

### Results

- The safety population included 483 patients; 354 patients (73.3%) completed the study<sup>1</sup>
- The most common TEAEs were nasopharyngitis (3.7%), upper-respiratory-tract infection (3.3%), headache (2.9%), and nausea (2.1%). Clinical laboratory evaluations suggested no clinically meaningful differences between the treatment sequences<sup>1</sup>
- Rates of TEAEs commonly associated with other tetracycline antibiotics were for dizziness (0.4%) and sunburn (0.2%), and for gastrointestinal TEAEs, nausea (2.1%), vomiting (1.9%), and diarrhea (1.0%). Vulvovaginal mycotic infection (0.8%)<sup>1</sup>
- Dermal response to UV exposure did not exceed mild erythema with either sarecycline or placebo at any time point, and the mean and maximum UV-induced dermal response scores for both sarecycline and placebo were low. No TEAEs or serious AEs were reported in the phototoxicity study

**Table 1. Summary of subject demographics and baseline characteristics<sup>1</sup>**

	Placebo / Sarecycline <sup>a</sup> (N=236)	Sarecycline / Sarecycline <sup>b</sup> (N=247)	Total <sup>c</sup> (N=483)
Mean (SD) age, years	18.7 (6.0)	18.4 (5.9)	18.5 (6.0)
≥9 and <12 years	2	3	5
≥12 and <18 years	138	152	290
≥18 years	96	92	188
Gender, n (%)	48.3	49.4	48.9
Female	122 (51.7)	125 (50.6)	247 (51.1)
Male	114 (48.3)	122 (49.4)	236 (48.9)
BMI, mean (SD), kg/m <sup>2</sup>	25.07 (5.4)	25.36 (6.1)	25.22 (5.8)
Race, n (%)			
White	198 (83.9)	201 (81.4)	399 (82.6)
Black or African American	28 (11.9)	29 (11.7)	57 (11.8)
Other	10 (4.2)	16 (6.5)	26 (5.4)
Investigator's Global Assessment, n (%)			
3 (moderate)	191 (80.9)	207 (83.8)	398 (82.4)
4 (severe)	45 (19.1)	40 (16.2)	85 (17.6)

<sup>a</sup>The Placebo/Sarecycline population contained patients who received placebo in the placebo-controlled, double-blind lead-in trials.  
<sup>b</sup>The Sarecycline/Sarecycline populations contained patients who received sarecycline in the placebo-controlled, double-blind lead-in trials.  
<sup>c</sup>Safety Population included all participants among the screened population who were exposed to study treatment (sarecycline) in either the double-blind lead-in study or this open-label extension study.  
SD, standard deviation

**Table 2. Summary of subject demographics and baseline characteristics<sup>1</sup> (Phase-I Phototoxicity Study)**

	TOTAL (n = 19)
Age, mean (SD), years	30.7 (9.0)
White, n (%)	19 (100)
Hispanic/Latino, n (%)	6 (31.6)
Body mass index, mean (SD), kg/m <sup>2</sup>	26.1 (2.5)
Fitzpatrick Skin Phototype, n (%)	
I	3 (15.8)
II	7 (36.8)
III	9 (47.4)

SD: standard deviation.  
<sup>a</sup>Number enrolled and randomized; one subject was lost to follow-up and excluded from phototoxicity analysis.

**Table 3. Common TEAEs (≥2% of patients in either group; safety population)**

Patients, n (%)	Placebo / Sarecycline <sup>a</sup> (N=236)	Sarecycline / Sarecycline <sup>b</sup> (N=247)	Total <sup>c</sup> (N=483)
Nasopharyngitis	13 (5.5)	5 (2.0)	18 (3.7)
Upper-respiratory-tract infection	7 (3.0)	9 (3.6)	16 (3.3)
Headache	9 (3.8)	5 (2.0) <sup>b</sup>	14 (2.9) <sup>b</sup>
Nausea	4 (1.7) <sup>b</sup>	6 (2.4)	10 (2.1) <sup>b</sup>
Vomiting	3 (1.3) <sup>b</sup>	6 (2.4)	9 (1.9) <sup>b</sup>
Urinary tract infection	2 (0.8)	5 (2.0)	7 (1.4)

<sup>a</sup>One patient in each treatment group had an AE that occurred more than 30 days after the dose of sarecycline.  
<sup>b</sup>One of these TEAEs was an AE that occurred more than 30 days after the last dose of sarecycline but before study completion.  
AE: adverse event; TEAE: treatment-emergent adverse event.

**Table 4. Overall summary of patients with adverse events (safety population)**

Paitents, n (%)	Placebo / Sarecycline <sup>a</sup> (N=236)	Sarecycline / Sarecycline <sup>b</sup> (N=247)	Total <sup>c</sup> (N=483)
Any TEAE	94 (39.8)	94 (38.1)	188 (38.9)
Any severe TEAE	3 (1.3)	2 (0.8)	5 (1.0)
SAEs	2 (0.8)	2 (0.8)	4 (0.8)
Abdominal pain	0	1 (0.4)	1 (0.2)
Anemia	1 (0.4)	0	1 (0.2)
Dehydration	0	1 (0.4)	1 (0.2)
Headache <sup>a</sup>	1 (0.4)	0	1 (0.2)
Peptic Ulcer <sup>b</sup>	1 (0.4)	0	1 (0.2)

<sup>a</sup>Considered possibly related to study treatment according to the investigator's assessment  
<sup>b</sup>Experienced by the same patient with anemia  
SAE: serious adverse event; TEAE: treatment-emergent adverse event

### Conclusion

- Sarecycline was associated with low rates of TEAEs, with nasopharyngitis, upper-respiratory-tract infection, headache, and nausea being the only TEAEs reported by two percent or more of patients with moderate-to-severe acne vulgaris aged nine years or older treated with sarecycline once daily for up to 40 weeks.
- Adverse events commonly associated with other tetracycline antibiotics such as dizziness, sunburn, nausea, vomiting, and diarrhea were low
- No clinically meaningful safety findings were noted

### References

- Pariser, David M., Lawrence J. Green, Carsten Schmitz, Amy Chinigo, Brian McNamee, and David R. Berk. "Safety and Tolerability of Sarecycline for the Treatment of Acne Vulgaris: Results from a Phase III, Multicenter, Open-Label Study and a Phase I Phototoxicity Study." *JCAD: The Journal of Clinical and Aesthetic Dermatology*. JCAD, November 1, 2019. <http://jcadonline.com/sarecycline-acne/>. [ClinicalTrials.gov Registration: NCT02413346](https://clinicaltrials.gov/ct2/show/study/NCT02413346)
- Moore A, Green LJ, Bruce S, Sadick N, Tschen E, Werschler P, Cook-Bolden FE, Dhawan SS, Forsha D, Gold MH, Guenther S. Once-Daily Oral Sarecycline 1.5 mg/kg/day Is Effective for Moderate to Severe Acne Vulgaris: Results from Two Identically Designed, Phase 3, Randomized, Double-Blind Clinical Trials. *Journal of drugs in dermatology*. JDD. 2018 Sep;17(9):987-96.

### Disclosures

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