INTRODUCTION

- Two identical, multicenter, randomized, double-blind, vehicle-controlled trials were conducted to test the safety and efficacy of VP-102 in patients with molluscum contagiosum (MC).
- VP-102 is a drug-device combination containing 0.7% cantharidin (w/v) in a single-use applicator under investigation for the treatment of molluscum contagiosum.
- Here we review the data from a pooled analysis of patients in the CAMP-1 and CAMP-2 studies who achieved a lesion clearance rate of at least 75% or 90% by the end of the treatment period, Day 84 (pre-specified endpoints).

METHODS

- Qualified subjects ≥2 years old were consented, enrolled, and randomized 3:2 to VP-102 or vehicle.
- VP-102 or vehicle was applied to baseline and new lesions once every 21 days until total lesion clearance or up to 4 applications. The end-of-study (EOS) visit occurred on Day 84.
- Adverse events (AEs) were documented throughout study with a specific focus on local site reactions (LSRs), which were expected due to the pharmacodynamic action of cantharidin.
- Exploratory objectives included the time course and percentage of patients (ITT population) with ≥75% and ≥90% lesion clearance rates.

EFFICACY

- ≥75% Clearance of MC Lesions from Baseline to Day 84 (ITT Population)

- ≥90% Clearance of MC Lesions from Baseline to Day 84 (ITT Population)

SAFETY & TOLERABILITY

Incidence of Treatment Emergent Adverse Events (TEAEs) ≥5%

- At Least One Incidence: N (%)
- Application Site Vesicles
- Application Site Pain
- Application Site Pruritus
- Application Site Scab
- Application Site Erythema
- Application Site Discoloration
- Application Site Dryness
- Application Site Edema
- Application Site Erosion

CONCLUSIONS

- As early as D21, ≥75% and ≥90% lesion clearance rates were statistically significantly higher for VP-102 treatment compared to vehicle.
- VP-102 was well-tolerated as evidenced by low AE-related discontinuation rates.
- These data are of clinical value because, even without complete clearance, reduction of MC lesions may lead to a reduced viral burden, decrease auto-inoculation, and limit transmission to others.

Disclosures

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