G. CLINICAL DATA

Clinical data including radiology (Doppler) measurements, pathological analysis (biopsies) and sequence photographs were collected in two clinical studies.

1. *PROTOCOL TAG-194/01:*

A 105-week, open label uncontrolled single-center study to evaluate the safety, biocompatibility, degradation, bio-absorption and permanence of a formula made with glycolic acid and polylactic acid, used as an intradermal injected implant for the treatment of facial Lipodistrophy in 30 patients infected with the human immunodeficiency virus (HIV).

1.1 PROGRAM:

Session	Degree of Lipoatrophy				Selected participants	Abandon program	Reasons to abandon	Participating subjects
	A	**B**	**C**	**D**				
1ª	6	14	9	4	33	1	Suspended [1]	32
2ª	5	14	9	4	32	-	-	32
3ª	-	14	9	4	27	1 1	Withdrawal [2] Lack of time [3]	25
4ª	-	-	9	4	13	-	-	13
5ª	-	-	-	4	4	-	-	4

A: Mild. **B**: Moderate **C**: Severe **D**: Critical.

1. Participant admitted having been treated with certain filler 3 months earlier.
2. Participant satisfied with 2nd session results did not wish to continue the program.
3. Participant cancels due to lack of time to meet programmed appointments.

1.2 PHYSICAL CHARACTERISTICS:

Classification	All participants were males		
	Minimum	Maximum	Average
Age	26	43	42.8
Weight (Kg.)	51	93	72
Height (Mts.)	1.56	1.87	1.71

Caucasian 5, Hispanic 23, Oriental 2.

1.3 INTERVALS BETWEEN SESSIONS:

Session	***Days***				***Participants***
	Elapsed	***Minimum***	***Maximum***	***Average***	
1ª	0	-	-	-	32
2ª	0 - 20	20.3	22.8	21.6	32
3ª	20 - 40	23.3	27.6	25.5	25
4ª	40 - 60	21.5	24.5	23	13
5ª	60 - 80	21	28	24.5	4

Actual participants for the whole investigation period: **30**

2 Participants suspended (Refer to above point 1.1 foot notes 1 & 3)

1.4 RADIOLOGY MEASUREMENTS.

a. One patient example (group average):

Period	***Cutaneous level***	***Area***	
		Right cheek	***Left cheek***
Previous to treatment 24.05.01	A. Epidermis B. Dermis	0.03 cm 0.14 cm	0.03 cm 0.10 cm
12 months + 04.06.02	A. Epidermis B. Dermis	0.05 cm (+0.01 cm) 0.34 cm (+0.05 cm)	0.05 cm (+ 0.02 cm) 0.28 cm (+ 0.18 cm)
Change in 12 months +:	A. Epidermis B. Dermis	+ 0.02 cm + 0.20 cm	+ 0.02 cm + 0.18 cm

1.5 DERMAL PATHOLOGICAL RESULTS (group average):

The subcutaneous cellular tissue has been substituted almost in its entirety by lax connective tissue with young fibroblasts, newly formed blood vessels bordered by only one layer of prominent endothelial cells, surrounded by a lymphoplasmositary infiltrate of inflammation with moderated amounts of mast cells. New collagen and myofibroblasts were shown to be present. No evidence of malignancy was present in the examined material.

1.6 FINAL ASSESSMENT:

The application of the glycolic and polylactic acids' formula, promoted a foreign body reaction (neocologenesis), with volume recuperation in areas depressed by facial fat loss with the following correction % results and characteristics:

a. In 26 cases 85% to 97%.
b. In 3 cases 75% to 84%.
c. In only 1 case were the effects graded as moderate 67% to 74%.
d. Participants with mild and moderate degrees of lipoatrophy responded faster to the treatment and the effects of the product proved to be longer lasting.
e. The neocollagenesis that developed as a result of the implant was more evident in those participants under 40 years of age (20%).
f. Anatomical facial areas bordered by muscle groups of major activity (mastication, gesticulation) the recuperation effects were 20% higher than in areas of lesser muscular activity.
g. In general terms, better results are obtained in the treated area when lightly massaged after the infiltration of the product.

2. *PROTOCOL TAG-099/02:*

A 155-week, controlled multi-center study to confirm the safety, biocompatibility, degradation, bio-absorption and permanence of a formula made with glycolic acid and polylactic acid, used as an intradermal injected implant for the treatment of facial Lipodistrophy in 30 patients infected with the human immunodeficiency virus (HIV).

2.1 PROGRAM:

		Lipodystrophy degree	
Session	Participants	Acute	Moderate
1st	30	**14**	**16**
2nd	30	**14**	**16**
3rd	23	**14**	**9**
4th	15	**14**	**1***
5th	1	**1***	

***** A patient with moderate lipodystrophy required a 4th intervention and a patient with acute lipodystrophy required a 5th intervention. Satisfied with the results of the 3rd and 4th sessions respectively, both refused the suggested extra session.

2.2 PHYSICAL CHARACTERISTICS:

	Minimum	Maximum	Average
Age (years)	32	60	44.66
Weight (kg.)	52	88	69.70
Height (Mts.)	1.56	1.91	1.72

30 participants of which; 9 Caucasian, 18 Hispanic, 2 Oriental, 1 Black.

2.3 INTERVALS BETWEEN SESSIONS:

		Calendar days between sessions			
Session	Day	Minimum	Maximum	Average	Participants
First	1°	-	-	-	30
Second	15	14	17	15.5	30
Third	30	14	18	16	23
Fourth	45	15	18	16.5	14
Review	30	29	47	38	30
	60	27	40	33.5	30
	90	26	35	30.5	30

2.4 RADIOLOGY MEASUREMENTS:

a. One patient example (group average):

Day/month	11.09	13.02	±	12.09	13.02	±
Year:	2002	2003		2002	2003	
Right:	0.33	0.36	+0.03	2.10	2.82	+0.72
Left:	0.32	0.34	+0.02			

2.5 DERMAL PATHOLOGICAL RESULTS (group average):

Although a proliferation of myofibroblasts are initially identified in the biopsied materials, these or any other harmful scar process, were not registered clinically in any of the patients. Correction of adipose atrophy is not made with the same type of tissue; the anomaly is repaired by restoring connective tissue which increases volume in response to an inflammatory process due to foreign body reaction.

The body recognizes the similarity of the synthetic substitute which is phagocyted and totally eliminated, provoking an "*integrum*" repair by connective tissue with scarce or nil retraction phenomena, and even less of a pathological *Contracture* process.

2.6 USED QUANTITIES (in cc and results per used cc):

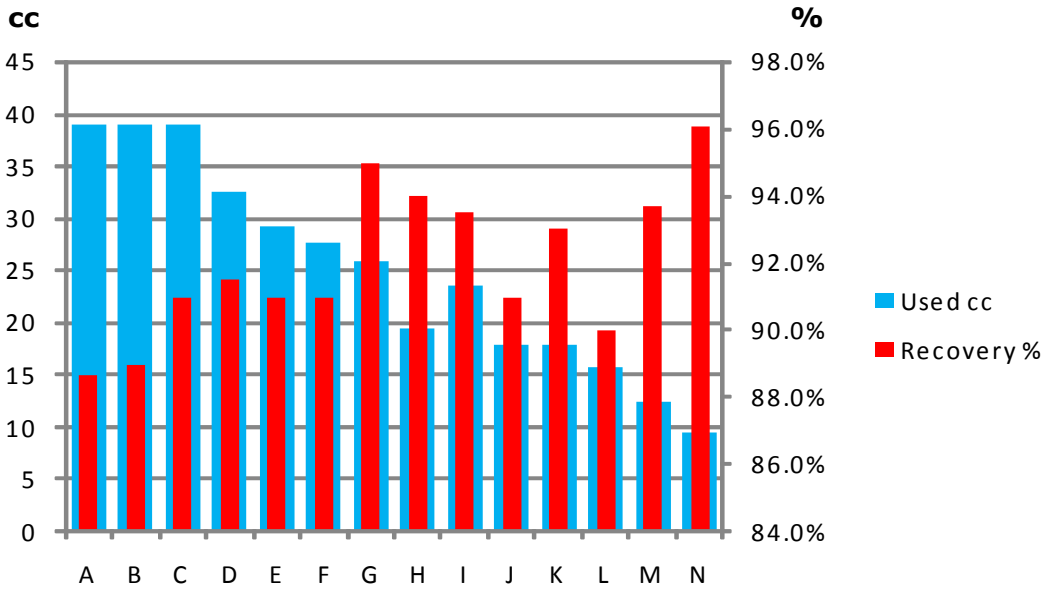
a. Dosage:

The necessary dosage to treat various degrees of lipodystrophy diagnosed in the participants was determined according to the hypothesis of the following table (1cc of activated product was classed as equivalent to 1 dose):

A	B	C	D	E	F
Moderate 16	Glabella, Temples, Malar, zygomatic, naso- labial & mandibular.	15% to 25%	2 to 3	6.5 cc to 22.75 cc	I. Intradermal: • Superficial. • Intermediate.
Acute 14		30% to 40%	3 to 4 Possibly 5	26 cc to 48.75 cc	I. Intradermal: • Intermediate. • Deep.

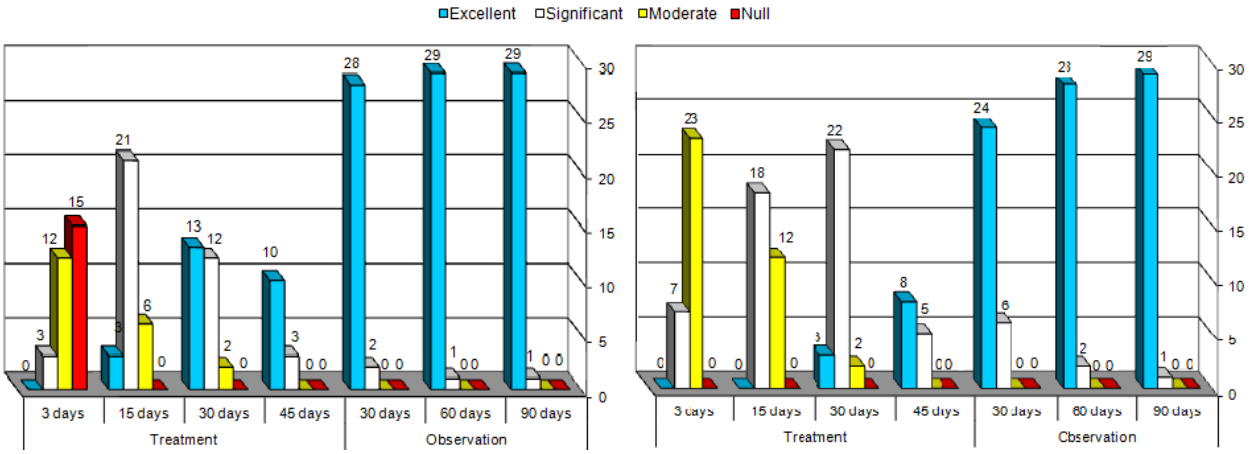
A Lipodystrophy degree and number of participants.
B Afflicted areas.
C Diagnosis of dermal thickness loss (%)
D Number of sessions.
E Dose in cubic centimeters.
F Injection level.

a. Results per used cc & recovery percentage:



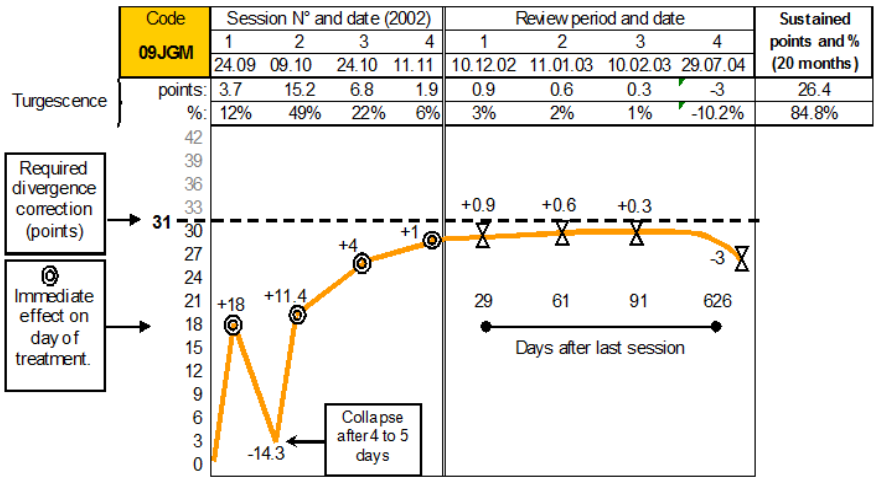
2.7 GRADING SUMMARY (doctor and participant on improvement of facial contour):

a. Participant perception: **b.** Medical Diagnosis:



2.8 PRODUCT'S OVERALL PERMANENCE:

a. Curve of progress and decline of product's effects for the two year period (one patient example):



Maximum results: 29.5 points (95%). Loss in 20 months: 3 points (10.2% from best result)
At almost 2 years from first session, this patient maintains 84.8% of treatment results.

2.9 FINAL ASSESSMENT:

a.	Problem:	External skin damage and depletion of adipose tissue, loss of facial fat and deteriorated facial symmetry.
b.	Searched solution:	Substitution of fat by dense connective tissue and restoring skin condition and facial symmetry.
c.	Repairing vehicle:	Hydroxyacetic and lactate composite.
d.	Conduct:	Body does not respond with antigen reaction (allergy).
e.	Response:	Mild foreign body reaction, humoral type, mild inflammation with phagocyte lactate crystals.
f.	Results:	Volume increase by filling of depressed areas.
g.	Toxicity:	No reports to date of serious reactions, secondary complications or pathological rejections.

Notice: Results from the preceding two studies were provided for the sole purpose of safety information.