

PAPILOCARE[®]

1ST TREATMENT TO PREVENT AND TREAT HPV-DEPENDENT CERVICAL LESIONS[◇]

30% OF CIN I WILL PROGRESS TO CIN II/CIN III WITHIN 10 YEARS¹



HIGH-RISK HPV VIRAL DNA
IS FOUND IN 87% OF CERVICAL CANCERS²
(HPV 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68)



◇Low grade lesions: ASCUS / LSIL

FINAL RESULTS

EFFICACY AND SAFETY ENDORSED BY CLINICAL STUDIES³

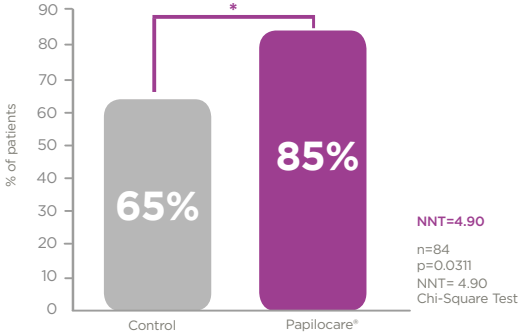
CLINICAL TRIAL
PALOMA³
ClinicalTrials.gov NCT04002154



TOTAL POPULATION

NORMALIZATION OF ASCUS/LSIL LESIONS (Primary Endpoint)

Cytological normalization with concordant colposcopy at **6 months** vs control



NORMALIZATION OF HPV-DEPENDENT CERVICAL LESIONS IN

85%*

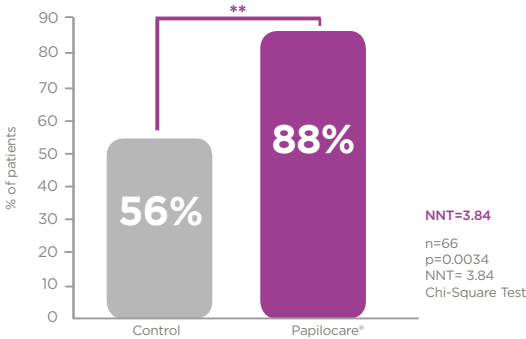
of the total population at **6 months** vs 65% in the control group

* Statistically significant: p<0,05

HIGH-RISK HPV SUBPOPULATION

NORMALIZATION OF ASCUS/LSIL LESIONS (Primary Endpoint)

Cytological normalization with concordant colposcopy at **6 months** vs control



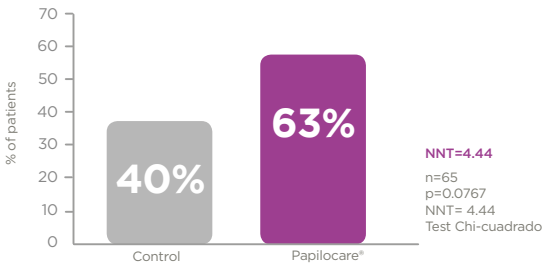
NORMALIZATION OF HPV-DEPENDENT CERVICAL LESIONS IN

88%**

of High-Risk HPV+ patients at **6 months** vs 56% in the control group

** Statistically significant: p<0,01

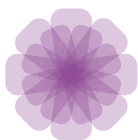
HPV CLEARANCE AT 6 MONTHS (Secondary Endpoint)



HPV CLEARANCE IN

63%

of High-Risk HPV+ patients at **6 months** vs 40% in the control group



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ABSTRACTS PRESENTED AT ASCCP 2019

Clinical Studies⁴



Annual Scientific Meeting on Anogenital & HPV-Related Diseases
April 4-7 | Atlanta, GA



APRIL 4-7TH, 2019
ATLANTA, USA

EFFECT OF A *CORIOLUS VERSICOLOR*-BASED VAGINAL GEL IN HIGH-RISK HPV INFECTED PATIENTS. RESULTS OF DIFFERENT STUDIES⁴.

Authors: Javier Cortés¹, Gilles T. Seydoux², Damián Dexeus³, Santiago Palacios⁴, Luis Serrano⁵, Clara Gajino⁶, Elena Marín⁷, Margarita Riera⁸

¹Senior Consultant in Gynecological Oncology, Private practice, Palma de Mallorca, (Spain), ²Procare Health SL, Barcelona (Spain), ³Women's Health Institute, Barcelona, (Spain), ⁴Instituto Palacios de Salud y Medicina de la Mujer, Madrid (Spain),

⁵Centro Médico Gabinete Velázquez, Madrid (Spain), ⁶Hospital Materno Infantil Teresa Herrera, A Coruña, (Spain), ⁷Hospital Álvaro Cunqueiro, Vigo (Spain), ⁸Institut Català de la Salut. Hospitalet de Llobregat, (Spain)

BACKGROUND AND OBJECTIVE

A new multi-ingredient *Coriolus versicolor*-based vaginal gel has been recently marketed in Europe to prevent and treat HPV-dependent low-grade cervical lesions. Objective: to evaluate the consistency of the results observed with the gel on the HPV clearance criteria in high-risk HPV-infected women in different studies.

METHODS

Results from 3 independent, observational, non-comparative studies carried out in 3 different public university centers in Spain with similar design characteristics (**figure 1**) were evaluated together with the pre-analysis of the final results of one clinical trial (Paloma clinical trial)¹ whose design is observed in **Table 1** and **figure 2**.

Vigo prospective study²: HPV clearance at 6 months of 25 patients infected by HPV 16 and/or 18 was evaluated as secondary endpoint.

Coruña retrospective study³: 57 medical records of patients with high-risk HPV were analyzed. HPV clearance at 6 months was evaluated as primary endpoint.

Hospitalet retrospective study⁴: Data from 91 high-risk HPV patients were evaluated. Primary endpoint: composite efficacy consisting in percentage of patients with normal cytology and/or HPV clearance at 6 months.

RESULTS

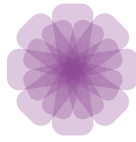
The pre-analysis of the final results of the Paloma clinical trial showed **63% of high-risk HPV clearance vs 42% in the control group (wait and see approach) at 6 months (data from 64 patients), as observed in figure 3**. Concerning independent studies, after 6 months of treatment, 48% of HPV 16-18 infected patients have cleared (Vigo study), a reduction of 58% was observed in the number of high-risk HPV-positive patients (Coruña study) and 72.5% of patients negativized cytology and/or cleared HPV (Hospitalet study) vs baseline ($p \leq 0.0001$ for all results, Chi-square). These results show strong consistency among the Paloma clinical trial and the 3 independent Phase IV studies (**figure 4**).

CONCLUSION

The use of a *Coriolus versicolor*-based vaginal gel in clinical practice shows a significant and consistent benefit for high-risk HPV clearance.

Data from further ongoing studies and clinical trials should confirm these exciting results.





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ABSTRACTS PRESENTED AT EFC 2019

Clinical Studies^{5,6}
& Scientific Innovation⁷ Data



SEPTEMBER 25-28TH, 2019
ROME, ITALY

Authors:
M. Riera, B. Rupérez, I. Lázaro, A. Felgueroso, E. Fontanet, Y. Tena.
Institut Català de la Salut. L'Hospitalet de Llobregat - Barcelona (Spain)

Objective

- To evaluate the efficacy of a *Coriolus versicolor*-based vaginal gel to clear and/or normalize cytology in high-risk HPV (HR-HPV+) patients.

Methods

- Observational, case-control study:
 - Cases: HR-HPV+ patients aged between 20 and 65 with ASCUS/LSIL or normal cytology at baseline, treated with a daily application of a *Coriolus versicolor*-based vaginal gel for 3 weeks and then alternate days up to 6 months.
 - Controls: Population with the same characteristics managed according to usual clinical practice by another gynecologist of the same unit.
- Patient data were obtained from the hospital database. Cases and controls had been derived from the general Gynecology Consultation to the Cervical Pathology Unit and managed following the protocols of the Catalan Institute of Oncology (ICO): control visit at 6 months for cases and at 12 months for controls.
- HR-HPV+ evaluation was performed by hybrid capture. Vaccinated, immunosuppressed and pregnant patients were excluded. Follow-up duration: 6 months. Recruitment period: December 2016 to October 2017.
- Endpoint: % of responders (composite efficacy variable consists of percentage of patients with normal cytology and/or HPV clearance) at control visit according to ICO protocols vs baseline.

Results

- A total of 91 HR-HPV+ patients were included as cases (46 with ASCUS/LSIL and 45 with normal cytology) and 65 as controls.
- At control visit, 72.5% of cases (66/91) vs 24.6% (16/65) of controls negativized the cytology and/or cleared HPV, so were classified as responders (Chi-square, $p < 0.0001$ between groups) (figure 1).

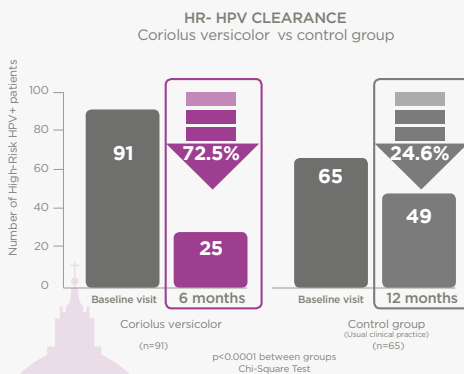


Figure 1: HR-HPV clearance.

Conclusions

- After 6 months of treatment, the *Coriolus versicolor*-based vaginal gel appears to be effective both in normalizing ASCUS and LSIL cytology alterations caused by high-risk HPV and in the clearance of high-risk HPV.
- Further prospective studies are needed to confirm these exciting results.

EFFECT OF A *CORIOLUS VERSICOLOR*-BASED VAGINAL GEL IN HPV INFECTED WOMEN: NORMALIZING HPV-DEPENDENT CERVICAL LESIONS (ASCUS/LSIL) AND HIGH-RISK HPV CLEARANCE⁶

Authors:

L. Serrano¹, A.C. López², S. González³, S. Palacios⁴, D. Deves⁵, C. Centeno⁶, P. Coronado⁷, J. de la Fuente⁸, J.A. López Fernández⁹, C. Vannell¹⁰ and J. Cortés¹¹
¹Centro Médico Gabinete Velázquez, Madrid, ²Hospital Quirónsalud, Málaga, ³Instituto Palacios, Salud y Medicina de la Mujer, Madrid, ⁴Women's Health Institute, Barcelona, ⁵Clinica Diatros, Barcelona, ⁶Hospital Clínico San Carlos, Madrid, ⁷Hospital Universitario Infanta Leonor, Madrid, ⁸Hospital General Universitario, Alicante, ⁹Hospital de la Santa Creu i Sant Pau, Barcelona, ¹⁰Private Practice, Palma de Mallorca

Objective

• To evaluate the efficacy of a *Coriolus versicolor*- based vaginal gel (CVVG) repairing HPV-dependent cervical lesions (ASCUS/LSIL cytology with concordant colposcopy image) and in the clearance of high-risk HPV (HR-HPV).

Methods

- Randomized, open-label, parallel-group, controlled clinical trial (Paloma Clinical Trial).
- HPV+ women aged between 30 and 65 with cytology of ASCUS or LSIL and concordant colposcopy image were randomized into 3 groups:
 - A) CVVG 1 cannula/day for 1 month + 1 cannula/alternate days for 5 months.
 - B) CVVG 1 cannula/day for 3 months + 1 cannula/alternate days for 3 months.
 - C) Control group: no treatment (usual clinical practice).
- Main results of the Paloma trial are presented:
 - Percentage of HPV+ and HR-HPV+ subpopulation of patients with normal cytology and concordant colposcopy image at 3 and 6 months (primary endpoint).
 - Percentage of patients with HR-HPV clearance at 6 months (clearance: total and partial clearance with concordant cytological normalization).
- Pap smear and PCR (Clart[®]) evaluations were centrally-conducted at the IECM laboratory (Lugo, Spain). *Coriolus versicolor* arms (A+B) were combined and chi-square test was used.

Results

- In the total population, at 3 and 6 months respectively, 78% (46/59) and 85% (45/53) of patients treated with CVVG had negative cytology with concordant colposcopy vs. 55% (17/31) and 65% (20/31) in control group (p=0.02 and p=0.03; Chi-square).
- In the HR-HPV+ subpopulation, normal cytology and concordant colposcopy image was observed in 80% (35/44) and 88% (36/41) of patients treated by CVVG vs 52% (13/25) and 56% (14/25) of patients in control group (p=0.01 and p=0.003 respectively; Chi-square) (figure 1).
- HR-HPV clearance at 6 months was observed in 63% (25/40) vs 40% (10/25) patients treated with CVVG vs. control group (p=0.07; Chi-square), respectively (figure 2).

Normalized cytology with concordant colposcopy at 6 months vs control in the High-Risk HPV subpopulation (Primary Endpoint)

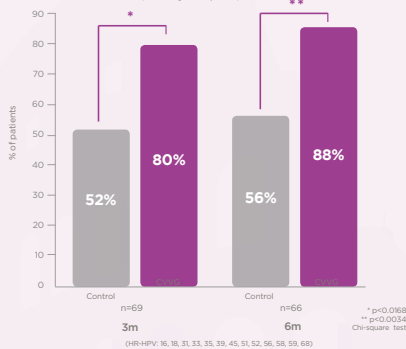


Figure 1: Papilocare[®] on repairing cervical lesions (ASCUS/LSIL) in the High-Risk HPV subpopulation.

High-Risk HPV clearance at 6 months vs control group (Secondary Endpoint)

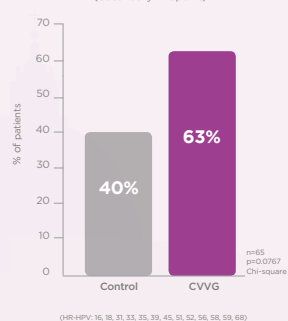


Figure 2: Papilocare[®] on High-Risk HPV clearance.

Conclusions

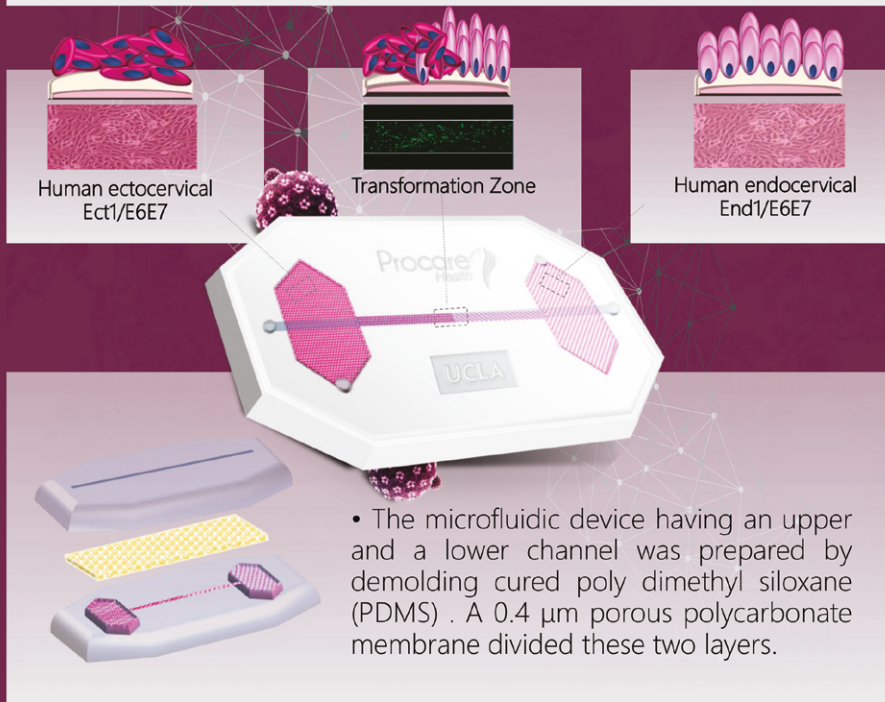
- *Coriolus versicolor*-based vaginal gel shows a statistically significant efficacy in normalizing HPV-dependent cervical lesions.
- *Coriolus versicolor*-based vaginal gel shows a trend to facilitate HPV clearance, especially in HR-HPV subpopulation.

HUMAN UTERINE CERVIX-ON-A-CHIP: ESTABLISHING THE FIRST IN VITRO MODEL TO STUDY THE DEVELOPMENT OF CERVICAL CARCINOMA AND HUMAN PAPILOMA VIRUS MECHANISM OF ACTION⁷

D. Khorsandi^{1,2}, R. Haghniaz², Y. Gaslain³, J. Combalia³, C. Emsellem³, S. Palacios⁴, A. Khademhosseini²

¹Faculty of Pharmacy, University of Barcelona - Barcelona (Spain), ²California NanoSystems Institute (CNSI), University of California - Los Angeles - Los Angeles (United States of America), ³Medical Department, Procare Health Iberia SL - Barcelona (Spain), ⁴Instituto Palacios de Salud y Medicina de la Mujer - Madrid (Spain)

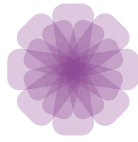
The cost of drug discovery is steadily increasing owing to the limited predictability of two-dimensional (2D) cell culture and animal models. The objective of this study was to develop a microfluidic 'uterine cervix-on-a-chip', a dynamic 3D platform that let the cultured cells mimic the native human uterine cervix histomorphology *in vitro* aiming to study the transformation zone of cervix during Human Papilloma virus (HPV) infection and cervical cancer development.



- The microfluidic device having an upper and a lower channel was prepared by demolding cured poly dimethyl siloxane (PDMS). A 0.4 μm porous polycarbonate membrane divided these two layers.

Conclusion

Uterine cervix-on-a-chip may provide the first *in vitro* model for studies on cervix physiology, real-time and high-resolution imaging, and analysis of biological responses in the cervix, as well as drug development. This technology can allow both types of epithelial cells to grow on from both sides of the chip to reach each other and make the Squamo-columnar junction, which is the target zone of HPV.



PAPIOCARE[®]

ABSTRACTS PRESENTED AT ESGO 2019

Clinical Studies^{3,8,9}



NOVEMBER 2-5TH, 2019
ATHENS, GREECE

Effect of a multi-ingredient vaginal gel in HPV infected women: normalizing HPV-dependent cervical lesions (ASCUS/LSIL) and high-risk HPV clearance³

Authors:

L. Serrano¹, A.C. López², S. González³, S. Palacios⁴, D. Dexeus⁵, C. Centeno⁶, P. Coronado⁶, J. de la Fuente⁷, J.A. López Fernández⁸, C. Vanrell⁹ and J. Cortés¹⁰
¹Centro Médico Gabinete Velázquez, Madrid, ²Hospital Quirónsalud, Málaga, ³Instituto Palacios, Salud y Medicina de la Mujer, Madrid, ⁴Women's Health Institute, Barcelona, ⁵Clinica Diatros, Barcelona, ⁶Hospital Clínico San Carlos, Madrid, ⁷Hospital Universitario Infanta Leonor, Madrid, ⁸Hospital General Universitario, Alicante, ⁹Hospital de la Santa Creu i Sant Pau, Barcelona, ¹⁰Private Practice, Palma de Mallorca.

Background/Objective:

In previous clinical studies Papilocare[®], a non-hormonal multi-ingredient vaginal gel, has shown to significantly influence the re-epithelialization of the cervix and the rebalancing of the vaginal microbiota that favors the natural process of vaginal immunity.

The objective of this study was to evaluate the effect of Papilocare[®] on the normalization of cervical HPV-dependent atypia (ASCUS and LSIL) and associated colposcopic alterations, and on the clearance of high-risk HPV (HR-HPV).

Methods

Multicenter, randomized, open-label, parallel-group, usual practice-controlled clinical trial (Paloma Clinical Trial).

Unvaccinated HPV+ women aged between 30 and 65 with cytology of ASCUS or LSIL and concordant colposcopy image were randomized into 3 groups:

- A) Papilocare[®] 1 cannula/day for 1 month + 1 cannula/alternate days for 5 months
- B) Papilocare[®] 1 cannula/day for 3 months + 1 cannula/alternate days for 3 months
- C) Control group: no treatment (usual clinical practice)

Percentage of patients with normalization of the lesions (normal cytology and concordant colposcopy image) as the primary endpoint and percentage of patients with HR-HPV clearance (total clearance or baseline-HPV partial clearance together with cytological and colposcopy normalization) were evaluated at 6 months.

Pap smear evaluation and HPV identification (Clart[®] HPV4) were blind and centrally-conducted by an independent researcher at the IECM laboratory (Lugo, Spain). Papilocare[®] arms (A+B) were combined as treatment group and Chi-square test was used.

Conclusions

After the six-month treatment period, Papilocare[®] has shown statistically significant efficacy in normalizing HPV-dependent cervical lesions (cytology of ASCUS/LSIL and concordant colposcopy images), especially in HR-HPV subpopulation. A trend to increase HPV clearance has also been observed in HR-HPV subpopulation.

Results

A total of 84 patients (mean age of 41 yo, evenly distributed among groups; total population) were evaluated (53 vs 31 in treatment and control groups, respectively) of which 66 were HR-HPV (HR-HPV subpopulation; 41 vs 25 in treatment and control groups, respectively). Results of patients with cytology normalization and concordant colposcopy at 6 months in both total and HR-HPV populations are shown in Figure 1.

Figure 2 shows clearance results in HR-HPV subpopulation at 6 months.

Normalized cytology with concordant colposcopy at 6 months (Primary Endpoint)

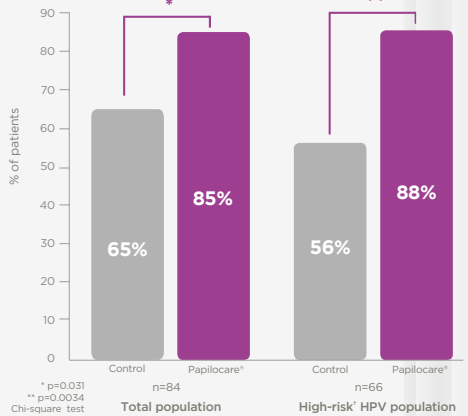
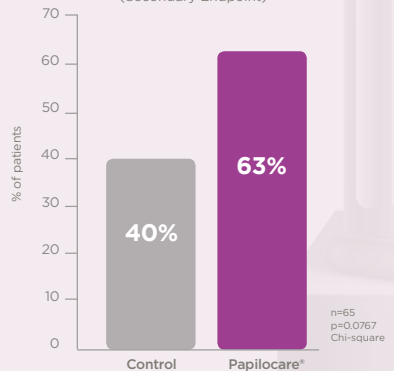


Figure 1: Papilocare[®] on repairing cervical lesions (ASCUS/LSIL cytology and concordant colposcopy image)

High-risk* HPV clearance at 6 months (Secondary Endpoint)



* HR-HPV: 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68

Figure 2: Papilocare[®] on high-risk HPV clearance.

Efficacy of a multi-ingredient vaginal gel in repairing HPV-dependent cervical lesions (ASCUS/LSIL) according to the risk of HPV strains[§]

Authors:

L. Serrano¹, A.C. López², S. González¹, S. Palacios³, D. Dexeus⁴, C. Centeno⁵, P. Coronado⁶, J. de la Fuente⁷, J.A. López Fernández⁸, C. Vanrell⁹ and J. Cortés¹⁰
¹Centro Médico Gabinete Velázquez, Madrid, ²Hospital Quirónsalud, Málaga, ³Instituto Palacios, Salud y Medicina de la Mujer, Madrid, ⁴Women's Health Institute, Barcelona, ⁵Clinica Diatros, Barcelona, ⁶Hospital Clínico San Carlos, Madrid, ⁷Hospital Universitario Infanta Leonor, Madrid, ⁸Hospital General Universitario, Alicante, ⁹Hospital de la Santa Creu i Sant Pau, Barcelona, ¹⁰Private Practice, Palma de Mallorca.

Background/Objective:

High-risk strains of HPV are well established as the causative agents for cervical dysplasia and cervical cancer. It is also well known that pre-cancerous cervical lesions persist longer and progress quickly in women infected by high-risk HPV than in women with non-oncogenic HPV strains.

The aim of this study was to evaluate the efficacy of Papilocare[®] - a multi-ingredient vaginal gel- in repairing HPV-dependent cervical lesions (ASCUS/LSIL) in three groups of patients according to the oncogenic potential of HPV strains.

Methods

Multicenter, randomized, open-label, parallel-group, usual practice-controlled clinical trial (Paloma Clinical Trial).

Unvaccinated HPV+ women aged between 30 and 65 with cytology of ASCUS or LSIL and concordant colposcopy image were randomized into 3 groups:

- A) Papilocare[®] 1 cannula/day for 1 month + 1 cannula/alternate days for 5 months
- B) Papilocare[®] 1 cannula/day for 3 months + 1 cannula/alternate days for 3 months
- C) Control group: no treatment (usual clinical practice)

Primary endpoint of the Paloma Clinical trial, percentage of patients with normalization of lesions (normal cytology and concordant colposcopy image) at 6 months, evaluated in total population, high-risk subpopulation (16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68) and the subpopulation infected by any combination of 16, 18 and 31, is presented.

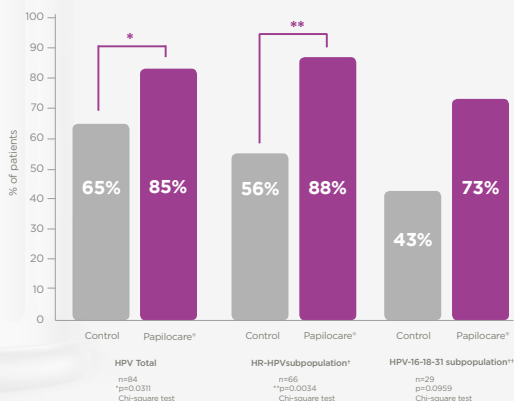
Pap smear evaluation and HPV identification (Clart[®] HPV4) were blind and centrally-conducted by an independent researcher at the IECM laboratory (Lugo, Spain). Papilocare[®] arms (A+B) were combined as treatment group and chi-square test was used.

Results

A total of 84, 66 and 29 patients corresponding to total population, and high-risk and 16-18-31 subpopulations were evaluated, respectively.

At 6 months, normal cytology and concordant colposcopy image was observed in 85% (45/53), 88% (36/41) and 73% (11/15) of patients treated with Papilocare[®] vs 65% (20/31), 56% (14/25) and 43% (6 /14) of patients in control group, in the total population, and high-risk and 16-18-31 subpopulations (p=0.0311; p=0.0034; p=0.0959), respectively (**figure 1**).

Normalized cytology with concordant colposcopy at 6 months
(Primary Endpoint)



[†] HR-HPV: 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68
^{††} Any combination of HPV 16,18 and 31

Figure 1

Papilocare[®] on repairing HPV-dependent cervical lesions (ASCUS/LSIL cytology and concordant colposcopy image) at 6 months in three groups of patients according to the oncogenic potential of HPV strains.

Conclusion

While the spontaneous normalizations of HPV-dependent cervical lesions clearly decreased according to the risk of HPV strains, the robust efficacy of Papilocare[®] in normalizing cervical lesions was maintained in the 3 subgroups, with statistically significant difference versus control group in the total population and HR-HPV subpopulation.

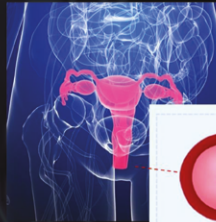
HUMAN UTERINE CERVIX-ON-A-CHIP: ESTABLISHING THE FIRST IN VITRO MODEL TO STUDY THE DEVELOPMENT OF CERVICAL CARCINOMA AND HUMAN PAPILOMA VIRUS MECHANISM OF ACTION⁹

D. Khorsandi^{1,2}, R. Haghniaz², Y. Gaslain³, J. Combalia³, C. Emsellem³, S. Palacios⁴, A. Khademhosseini²

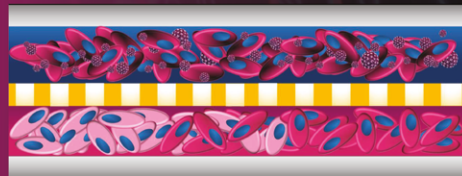
¹Faculty of Pharmacy, University of Barcelona - Barcelona (Spain), ²California NanoSystems Institute (CNSI), University of California - Los Angeles - Los Angeles (United States of America), ³Medical Department, Procare Health Iberia SL - Barcelona (Spain), ⁴Instituto Palacios de Salud y Medicina de la Mujer - Madrid (Spain)

INTRODUCTION

The cost of drug discovery is steadily increasing owing to the limited predictability of two-dimensional (2D) cell culture and animal models. The objective of this study was to develop a microfluidic 'uterine cervix-on-a-chip', a dynamic 3D platform that let the cultured cells mimic the native human uterine cervix histomorphology *in vitro* aiming to study the transformation zone of cervix during Human Papilloma virus (HPV) infection and cervical cancer development.



1. Culturing healthy epithelial cells in lower chamber of the chip.

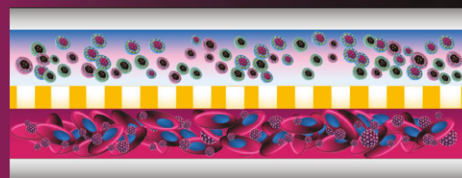


2. Adding infected cell via upper chamber of the chip to mimic the infection and let the viruses go over the porous membrane.

3. By changing the upper layer, the infected model is ready to test new drugs and treatments.

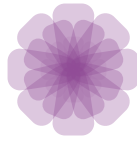


4. By adding the new treatment/ drug compound to the system through upper chamber, we can detect the treatment's mechanism of action on the infected viruses real time.



CONCLUSION

Uterine cervix-on-a-chip may provide the first *in vitro* model for studies on cervix physiology, real-time and high-resolution imaging, and analysis of biological responses in the cervix, as well as drug development. This technology can allow both types of epithelial cells to grow on from both sides of the chip to reach each other and make the Squamo-columnar junction, which is the target zone of HPV.



PAPILOCARE[®]

ORAL COMMUNICATIONS¹⁰⁻¹² & ABSTRACTS¹³
PRESENTED AT EUROGIN 2019

Clinical Studies



DECEMBER 4-7TH, 2019
MONACO

EFFECT OF A CORIOLUS VERSICOLOR-BASED VAGINAL GEL IN HPV INFECTED WOMEN: NORMALIZING HPV-DEPENDENT CERVICAL LESIONS (ASCUS/LSIL) AND HIGH-RISK HPV CLEARANCE¹⁰

Authors:

L. Serrano¹, A.C. López², S. González³, S. Palacios⁴, D. Dexeus⁵, C. Centeno⁶, P. Coronado⁷, J. de la Fuente⁷, J. A. López and J. Cortés⁸ Fernández⁹, C. Vanrell¹⁰
¹Centro Médico Gabinete Velázquez, Madrid, ²Hospital Quirónsalud, Málaga, ³Instituto Palacios, Salud y Medicina de la Mujer, Madrid, ⁴Women's Health Institute, Barcelona, ⁵Clinica D'atros, Barcelona, ⁶Hospital Clínico San Carlos, Madrid, ⁷Hospital Universitario Infanta Leonor, Madrid, ⁸Hospital General Universitario, Alicante, ⁹Hospital de la Santa Creu i Sant Pau, Barcelona, ¹⁰Private Practice, Palma de Mallorca.

Objective

In previous clinical studies a non-hormonal Coriolus versicolor-based vaginal gel (CVVG) has shown to significantly influence the re-epithelialization of the cervix and the rebalancing of the vaginal microbiota that favors the natural process of vaginal immunity. The objective was to evaluate the effect of the CVVG on the normalization of cervical HPV-dependent atypia (ASCUS and LSIL) and associated colposcopic alterations, and on the clearance of high-risk HPV (HR-HPV).

Methods

Multicenter, randomized, open-label, parallel-group, usual practice controlled clinical trial (Paloma Clinical Trial). Unvaccinated HPV+ women aged between 30 and 65 (mean age of 41 yo, evenly distributed among groups) with cytology of ASCUS or LSIL and concordant colposcopy image were included. Patients were randomized into 3 groups:

- A) CVVG 1 cannula/day for 1 month + 1 cannula/alternate days for 5 months;
- B) CVVG 1 cannula/day for 3 months + 1 cannula/alternate days for 3 months;
- C) Control group: no treatment (usual clinical practice).

Percentage of patients with normalization of the lesions (normal cytology and concordant colposcopy image) as the primary endpoint and percentage of patients with HR-HPV clearance (secondary endpoint) were evaluated at 6 months. Pap smear evaluation and HPV identification (Clart[®] HPV4) were blind and centrally- conducted by an independent researcher at the IECM laboratory (Lugo, Spain). CVVG arms (A+B) were combined as treatment group and chi-square test was used.

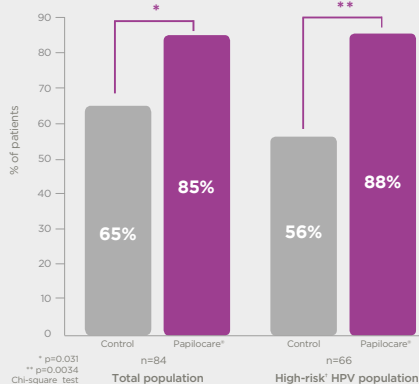
Conclusions

After the six-month treatment period, CVVG has shown statistically significant efficacy in normalizing HPV-dependent cervical lesions (cytology of ASCUS/LSIL and concordant colposcopy images), especially in HR-HPV subpopulation. A trend to increase HPV clearance has also been observed in HR-HPV subpopulation.

Results

A total of 84 patients (total population) were evaluated (53 vs 31 in treatment and control groups, respectively) of which 66 were HR-HPV (HR-HPV subpopulation) (41 vs 25 in treatment and control groups, respectively). In the total population, 85% (43/53) of patients treated with CVVG had normal cytology with concordant colposcopy vs 65% (20/31) in control group ($p=0.031$). In the HR-HPV subpopulation, normal cytology and concordant colposcopy image was observed in 88% (36/41) of patients treated by CVVG vs 56% (14/25) of patients in control group ($p=0.003$). HR- HPV clearance was observed in 63% (25/40) vs 40% (10/25) of patients treated with CVVG and control group, respectively ($p=0.076$).

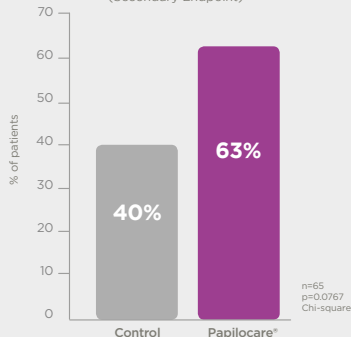
Normalized cytology with concordant colposcopy at 6 months (Primary Endpoint)



¹ HR-HPV: 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68

Figure 1: Papilocare[®] on repairing cervical lesions (ASCUS/LSIL cytology and concordant colposcopy image)

High-risk* HPV clearance at 6 months (Secondary Endpoint)



¹HR-HPV: 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68

Figure 2: Papilocare[®] on high-risk HPV clearance.

EFFECT OF A CORIOLUS VERSICOLOR-BASED VAGINAL GEL IN HPV INFECTED WOMEN: CERVICAL REEPITHELIZATION, PERCEIVED STRESS AND TOLERABILITY EVALUATION¹¹

Authors:

L. Serrano¹, A.C. López², S. González³, S. Palacios⁴, D. Dexeus⁵, C. Centeno⁶, P. Coronado⁷, J. de la Fuente⁸, J. A. López and J. Cortés⁹ Fernández¹⁰, C. Vanrell¹¹
¹Centro Médico Gabinete Velázquez, Madrid, ²Hospital Quironsalud, Málaga, ³Instituto Palacios, Salud y Medicina de la Mujer, Madrid, ⁴Women's Health Institute, Barcelona, ⁵Clinica D'iatros, Barcelona, ⁶Hospital Clínico San Carlos, Madrid, ⁷Hospital Universitario Infanta Leonor, Madrid, ⁸Hospital General Universitario, Alicante, ⁹Hospital de la Santa Creu i Sant Pau, Barcelona, ¹⁰Private Practice, Palma de Mallorca.

Objective

In previous clinical studies a non-hormonal Coriolus versicolor-based vaginal gel (CVVG) has shown to significantly influence the re-epithelization of the cervix and the rebalancing of the vaginal microbiota that favors the natural process of vaginal immunity. The objective was to evaluate the tolerability and the effect of the CVVG on the cervical re-epithelization and the perceived stress in patients with HPV-dependent atypia (ASCUS and LSIL) and associated colposcopic alterations.

Methods

Multicenter, randomized, open-label, parallel-group, usual practice controlled clinical trial (Paloma Clinical Trial). Unvaccinated HPV+ women aged between 30 and 65 (mean age of 41 yo, evenly distributed among groups) with cytology of ASCUS or LSIL and concordant colposcopy image were included. Patients were randomized into 3 groups:

A) CVVG 1 cannula/day for 1 month + 1 cannula/alternate days for 5 months;

B) CVVG 1 cannula/day for 3 months + 1 cannula/alternate days for 3 months;

C) Control group: no treatment (usual clinical practice).

Changes in epithelialization of the cervix evaluated by standard colposcopy (and rated by investigators with a likert scale from 0= severe ectopy + bleeding to 5= normal) and in perceived stress evaluated by PSS14 were assessed at 6 months as secondary endpoints. Satisfaction and tolerability of gel were also evaluated. CVVG arms (A+B) were combined as treatment group and chi-square or Fisher test were used as appropriate.

Conclusions

After the six-month treatment period, CVVG has shown a statistically significant difference in cervix re-epithelization and a positive trend in perceived stress reduction. CVVG has shown a high satisfaction level and a good tolerability. Data of further studies should confirm these exciting results.

Results

A total of 84 patients were evaluated (53 vs 31 in treatment and control groups, respectively). At 6 months, a statistically significant difference in cervix re-epithelization likert scale was observed: 4,51 vs 4.10 in CVVG and control group, respectively, $p=0.017$. A trend vs baseline was also observed in both groups: a stress reduction in CVVG group (21.13 vs 18.98) vs a stress increase in control group (17.72 vs 20.68). 58% of CVVG patients improved the PSS14 score vs 39% in control group. 87% of patients reported some degree of satisfaction with CVVG and none was unsatisfied. 11 out of 64 CVVG patients included in the safety sample reported 22 adverse events (AA): 7AA were possible/probable related to treatment (burning/stinging/itching), of which all were classified as mild/moderate and only in 2 cases caused permanent treatment withdrawal.

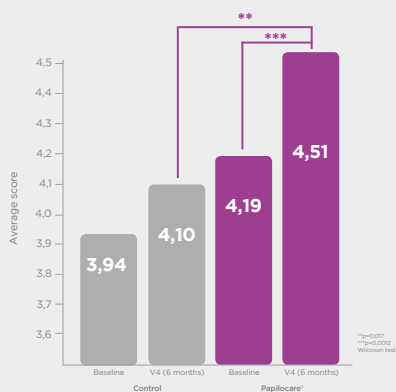


Figure 1: Cervical Mucosa Reepithelialization Degree (Likert scale) (Secondary Endpoint)

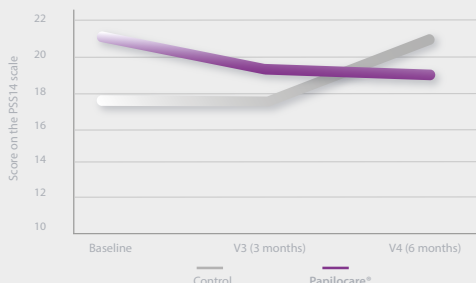


Figure 2: Stress evolution (Secondary Endpoint)

EFFECTIVENESS OF A MULTI-INGREDIENT CORIOLUS VERSICOLOR-BASED VAGINAL GEL IN REPAIRING CERVICAL MUCOSA WITH HPV LESIONS. INTERIM ANALYSIS RESULTS OF AN OBSERVATIONAL STUDY.¹²

Authors:

J. Cortés¹, J. de Santiago², A. Cos³, I. Lago⁴, G. Espinosa⁵, M.A. Olalla⁶, G. Fiol⁷, C. Lozada⁸, C. García⁹, M. Agenjo¹⁰

¹Senior Consultant in Gynecological Oncology, Private Practice, Palma de Mallorca, ²Head of the Gynecology Service, MD Anderson Cancer Center, Madrid, ³Barcelona/Spain, ⁴Pontevedra/Spain, ⁵Sevilla/Spain, ⁶Málaga/Spain, ⁷Almería/Spain, ⁸Burgos/Spain

Introduction

Real-life studies are mandatory for complementation of RCT. They inform on the "effectiveness" of a treatment what is intended to do in routine circumstances.

Objective: to evaluate the effectiveness of Papilocare® -a Coriolus versicolor-based vaginal gel- on repairing HPV-dependent low-degree cervical lesions and HPV clearance.

Methods

Observational, multicenter, prospective, one-cohort study (PAPILOBS study). Currently recruiting 300 vaccinated or not vaccinated HPV-positive women aged > 25y with pap result of ASC-US or LSIL and concordant colposcopy image during routine clinical visits in Spain. Patients are treated with Papilocare® 1 cannula/day for 21 days the first month + 1 cannula/alternate days for 5 months. After this 6-month period, patients with altered cytology and HPV persistency are treated for a 6-month extension period with the same dosage.

Interim analysis of patients with normal pap smear and concordant colposcopy image (primary endpoint) and patients with HPV clearance at 6/12 months is presented. The study was approved by the ethical committee of Public University Hospital of Puerta de Hierro (Madrid). Informed consent was signed by all patients.

Conclusions

In this preliminary analysis, Papilocare® has shown a notable effect in both repairing HPV-dependent low-degree cervical lesions and clearing HPV, in real life conditions. Objectives can be obtained after a 6-month treatment period in most of the patients, achieving 94% extending the treatment to 12 months. These findings need to be confirmed upon study completion.

Results

At 6 months, data of 72 and 71 patients for pap smear/colposcopy and HPV presence, respectively, are available. 65% of patients (47/72) had negative pap smear and concordant colposcopy. HPV clearance was observed in 54% of patients (38/71).

Data of 18 patients included in the 6-month extension treatment period, are available. At 12 months, 94% of patients (17/18) had negative pap and colposcopy and HPV clearance was observed in 83% of patients (15/18).

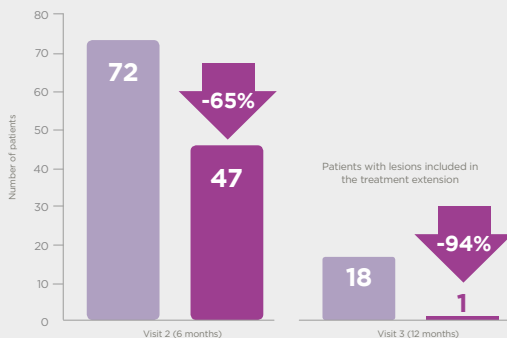


Figure 1: Normalization of cervical lesions (ASCUS/LSIL) in the TOTAL POPULATION (Primary Endpoint)

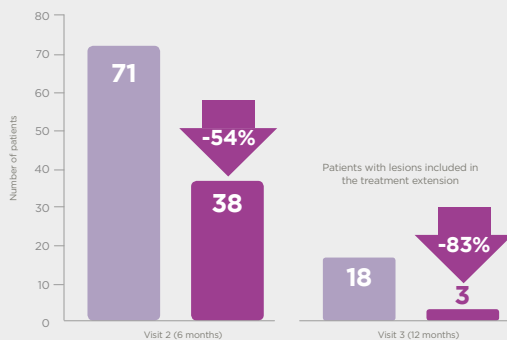


Figure 2: HPV Clearance in the TOTAL POPULATION (Secondary Endpoint)



EFFECT OF A CORIOLUS VERSICOLOR-BASED VAGINAL GEL IN A HIGH-RISK HPV INFECTED PATIENTS. RESULTS OF DIFFERENT STUDIES¹³

Authors:

Cortés Javier¹, Dexeus Damíán², Palacios Santiago³, Serrano Luis⁴, Seydoux Gilles⁵, Gajino Clara⁶, Marín Elena⁷, Riera Margarita⁸.

¹Senior Consultant in Gynecological Oncology, Private practice, Palma de Mallorca, (Spain), ²Women's Health Institute, Barcelona, (Spain), ³Instituto Palacios de Salud y Medicina de la Mujer, Madrid (Spain), ⁴Centro Médico Gabinete Velázquez, Madrid (Spain), ⁵Procare Health, Barcelona (Spain), ⁶Hospital Materno Infantil Teresa Herrera, A Coruña, (Spain), ⁷Hospital Álvaro Cunqueiro, Vigo (Spain), ⁸Institut Català de la Salut, Hospitalet de Llobregat, (Spain)

Objective

New and independent real-life data about the high-risk HPV (HR-HPV) clearance effect of a non-hormonal Coriolus versicolor-based vaginal gel (Papilocare[®] vaginal gel) have been presented in the last years. The objective of this work was to evaluate the consistency of the HPV clearance effect of this gel in patients infected by HR-HPV across these studies and a clinical trial.

Methods

Results from 3 independent observational non-comparative studies carried out in 3 different public centers of Spain were evaluated and compared to results from a randomized, open, parallel and controlled clinical trial comparing the Papilocare[®] vaginal gel vs wait and see approach (The Paloma RCT). One of the independent studies was prospective (Vigo study)¹ and the two others were retrospective (Coruña and Hospitalet studies).^{2,3}

The patients included in the three observational studies were treated with Papilocare[®] vaginal gel 1 cannula/day for 1 month + 1 cannula/ alternate days for 5 months (except menstrual days).

Vigo study¹: HPV clearance at 6 months of 25 patients older than 24 years infected by HPV 16 and/or 18 was evaluated as a secondary endpoint.

Coruña study²: 57 medical records of patients with HR-HPV (mean age 38.4 years) were analyzed. HPV clearance at 6 months was evaluated as primary endpoint.

Hospitalet study³: Data of 91 HR-HPV patients aged between 20 and 65 were evaluated. Primary endpoint: composite efficacy variable (percentage of patients with normal cytology and/or HPV clearance at 6 months).

Paloma RCT: 66 HR-HPV patients (mean age 39,73 years) were evaluated (41 vs 25 in Papilocare[®] vaginal gel and control groups, respectively). Percentage of patients with HR-HPV clearance (total clearance + partial clearance with concordant cytological and colposcopy normalization) at 6 months was assessed as secondary endpoint.

Results

After the 6-month treatment period, 48% of patients cleared HPV 16-18 (Vigo study), a reduction of 58% was observed in number of HR-HPV patients (Coruña study) and 72.5% of patients negativized cytology and/or cleared HR-HPV (Hospitalet study) vs baseline ($p \leq 0.0001$ for all results, Chi-square). In the Paloma RCT, HR-HPV clearance was observed in 63% of patients treated with Papilocare[®] vaginal gel vs 40% in the control group ($p = 0.076$).

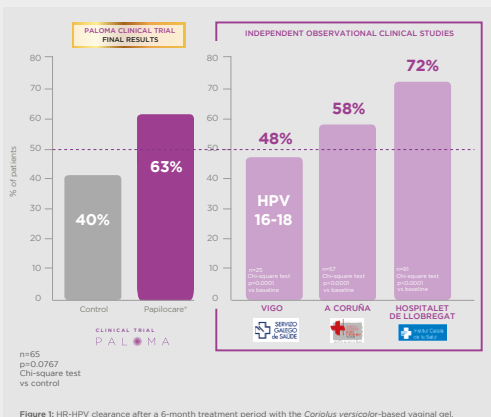


Figure 1: HR-HPV clearance after a 6-month treatment period with the Coriolus versicolor-based vaginal gel.

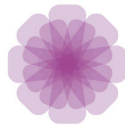
Conclusions

After the 6-month treatment period, Papilocare[®] vaginal gel has shown significant and consistent rates of HR-HPV clearance ranging from 50% to 70% in the 4 different studies carried out. Data of further studies should confirm these exciting results.

1- Gil Andrés M et al. ASCCP 2018, Las Vegas, US. Late-Breaking abstracts #71.

2- Gajino C. 32nd IPCV 2018, Sydney, Australia. Abstract #IPVC8-0489.

3- Riera M et al. J Low Genit Tract Dis. 2018;22(April 2, suppl 1): oral communication



PAPIOCARE[®]

PREVIOUS COMMUNICATIONS IN INTERNATIONAL CONGRESSES



5 POSTERS PRESENTED



1 POSTER PRESENTED
1 ORAL COMMUNICATION



4 POSTERS PRESENTED



5 POSTERS PRESENTED



7 POSTERS PRESENTED
**AWARD BEST POSTER IN CLINICAL
RESEARCH**



5 POSTERS PRESENTED
1 ORAL COMMUNICATION



6 POSTERS PRESENTED



PAPILOCARE®

ABSTRACTS PRESENTED AT ASCCP 2018

Clinical Studies Data¹⁴

& Public University Hospitals Independent Studies^{15,16}



ASCCP2018
Annual Meeting

April 18-21, 2018
Las Vegas, NV, USA

ABSTRACTS PUBLISHED IN:

JOURNAL OF
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Tract Disease**

VOLUME 22, SUPPLEMENT 2S
APRIL 2018

PAPILOCARE® CLINICAL STUDY RESULTS

EFFECT OF A NON-HORMONAL CORIOLUS VERSICOLOR VAGINAL GEL AMONG POSITIVE-HPV WOMEN WITH NO COLPOSCOPY CERVICAL LESIONS. A PILOT STUDY¹⁴



ID: 370

Authors: S. González, L. Serrano Gabinete Médico Velázquez, Madrid. (Spain)



Authors: J. Gálvez, A. Rodríguez Nogales, Teresa Vezza, José Garrido Mesa, Francesca, Algeri and M. Elena Rodríguez Cabezas. Center for Biomedical Research (CIBM), Department of Pharmacology, University of Granada, Granada, (Spain).



Objective

To evaluate the effect of a Coriolus versicolor-based vaginal gel (Papilocare®) on both cervical epithelialization and vaginal microbiota in positive - HPV women with no colposcopy lesions.

Methods

An exploratory, prospective, observational study. Sexually active HPV-positive women aged > 25y with negative pap and no colposcopy cervical lesions were included during routine clinical visits and treated with Papilocare® once daily for 21 consecutive days.

Primary endpoint: change vs baseline in epithelialization degree of the cervix mucosa evaluated by standard colposcopy and rated by investigator from 5 = No ectopy o 1= severe ectopy and bleeding.

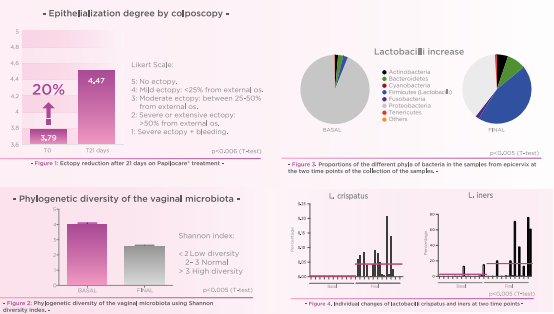
Secondary endpoints:

- 1) changes in vaginal signs and symptoms evaluated by likert-type scale from 7= severity to 28= absence,
- 2) changes in vaginal microbiota evaluated by 16S rRNA gene pyrosequencing and proportion of both bacterial phyla and species were evaluated
- 3) patient satisfaction.

Results

21 patients were included. Papilocare® showed:

- A positive trend to improve the re-epithelialization of the cervix:
 - Results of mean score are shown in figure 1.
 - 52.6% of patients improved cervix epithelialization and a score of 5 was observed in 63% of women.
- A reduction in vaginal diversity (figure 2) and an increase proportion of Firmicutes (phylum to which the lactobacilli belong) (figure3). Specifically, the significant increases of Lactobacillus crispatus and iners are shown in (figure 4).
- A trend to improve symptoms was observed despite of few symptoms at baseline: 71% of patients reached maximum symptoms score at the end of treatment period. Eight patients improved the symptoms score and 3 worsened.
- A “moderate/complete satisfaction” and some degree of «positive impact on wellness» were reported by 84% and 90% of evaluated patients.



Conclusions

Papilocare has demonstrated to improve significantly the cervix epithelialization among HPV-positive women without cervical lesions. The treatment was able to modify the composition of the microbiome, associated with a reduction of the microbiome diversity, clear marker of vaginal dysbiosis. The increase concentration of specific species of the genus Lactobacillus (iners and crispatus) suggests a restoration of the altered microbiota composition in these women at the end of the study. These results might explain the mechanism of action of Papilocare in providing positive results on normalizing cervical lesions.



PUBLIC UNIVERSITY HOSPITALS INDEPENDENT STUDIES WITH PAPILOCARE

Efficacy of a Coriolus versicolor-based vaginal gel in high risk HPV+ women¹⁵

Authors:
E. Marín Ortiz, MP, Vázquez Caamaño, M. Porto Quintans, O. Valenzuela Besada, M. Gil Andrés and A. Iñarra Fernández.
Servicio de Ginecología y Obstetricia, Unidad de Patología Cervical, Hospital Álvaro Cunqueiro (Vigo-Spain)

HOSPITAL ÁLVARO CUNQUEIRO

Objective

To evaluate the efficacy of Papilocare® - a Coriolus versicolor - based vaginal gel - to clear HPV and to normalize pap smear in high risk HPV + women

Results

A total of 86 patients, mean age 42.1 years (24 to 81) were included. At 6 months, 53% of women negative pap smear and/or cleared HPV and were classified as responders to treatment (Primary endpoint - figure 1). A total of 25 patients were positive to HPV 16-18 at baseline (12 and 13 with positive and negative pap smear, respectively).

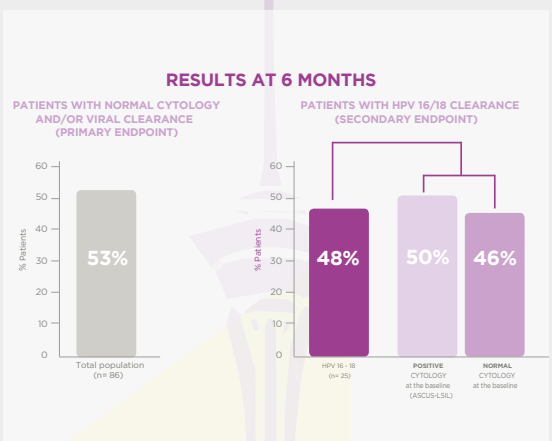
Methods

An exploratory, prospective, observational non-controlled study. High risk HPV+ vaccinated and unvaccinated women older than 24 years were included during routine follow-up visits and treated with Papilocare® 1 cannula/day for 1 month + 1 cannula/alternate days for 5 months (except menstrual days).

Primary endpoint: composite efficacy variable consists of percentage of patients with normal pap smear and/or HPV clearance at month 6 vs baseline.

Secondary variable: percentage of patients clearing HPV 16-18 vs baseline.

Results of secondary endpoint at 6 months are shown in figure 2.



Conclusions

In this preliminary analysis, Papilocare® shows a positive trend to improve pap smear alterations and HPV clearance in women infected by high risk HPV, after 6 months; these findings are consistent with other clinical studies results.

Funding: Procure Health SL (PH)
Disclosures: J Cortés, S Palacios and D Dexeus work as consultants for PH. L Serrano, S González and AC López have been speakers for PH.
Rest of authors: There are no relationships to disclose
Approvals: Study protocol was approved by Ethical Committees of all participant hospitals.



ASCCP2018
Annual Meeting

April 18-21,2018
Las Vegas,NV

Papilocare® in the clearance of High-Risk HPV¹¹

Principal Investigator:

Dr. Margarita Riera Blasco

Gynecologist and Obstetrician of the Catalan Health Institute

Assir Delta Del Llobregat, Barcelona.

Member of the AEPCC

Objective:

- Evaluate the efficacy of a *Corioulus versicolor*-based vaginal gel, Papilocare®, in High-Risk HPV+ patients

Design:

Observational study carried out between December 2016 and October 2017.

- The determination of High Risk Papilloma Virus was carried out by hybrid capture
- When the result was positive, colposcopy and biopsy were performed (if applicable), following the protocols of the ICO (Catalan Institute of Oncology)

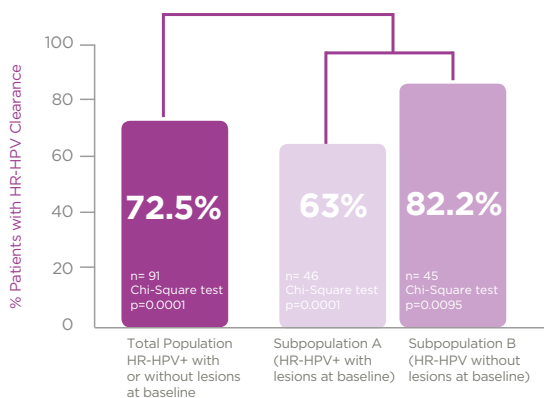
Patients:

- A total of 91 patients:

46 patients High-Risk HPV+ with cervical lesions at baseline (subpopulation A=50.5%)

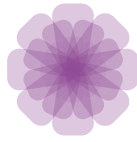
45 patients High-Risk HPV+ without cervical lesions at baseline (subpopulation B=49.5%)

High-Risk HPV Clearance after 6 months of Papilocare® treatment



Conclusions

- The *Corioulus versicolor*-based vaginal gel appears to be effective against ASCUS and LSIL lesions
- There is a viral clearance at 6 months of Papilocare® treatment in HR-HPV+ patients, presenting or not cervical lesions at baseline



PAPILOCARE[®]

ABSTRACTS PRESENTED AT IPVC 2018

Public University Hospitals Independent Study¹⁷



OCTOBER 2-6TH, 2018
SYDNEY, AUSTRALIA

PUBLIC UNIVERSITY HOSPITALS INDEPENDENT STUDIES WITH PAPILOCARE®

USE AND RESULTS OF A CORIOLUS VERSICOLOR-BASED VAGINAL GEL IN WOMEN HPV+ AND/OR ABNORMAL PAP SMEAR ATTENDED IN A REGIONAL SPANISH HOSPITAL. PRELIMINARY ANALYSIS¹⁷

SERVIZO GALEGO de SAÚDE
Complexo Hospitalario Universitario A Coruña A Coruña

Author:
Clara Gajino Suárez. Hospital Materno Infantil Teresa Herrera, Gynecology and Obstetrics, A Coruña, Spain.

OBJECTIVE

A Coriolus versicolor-based vaginal gel (Papilocare®) is recently available in Spain to prevent and treat the HPV-dependent low-grade cervical lesions. Recommended dose: 1 cannula/day for 1 month + 1 cannula/alternate days for 5 months (except menstrual days).

To analyze how Papilocare® is being used in our hospital and to evaluate the treatment results in our patients.

METHODS

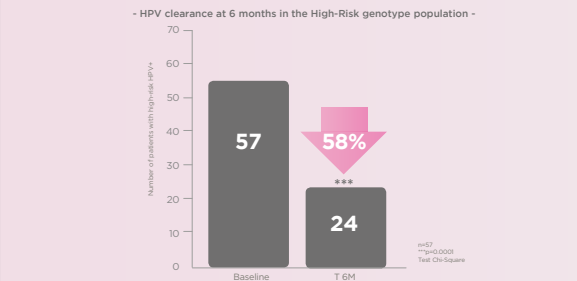
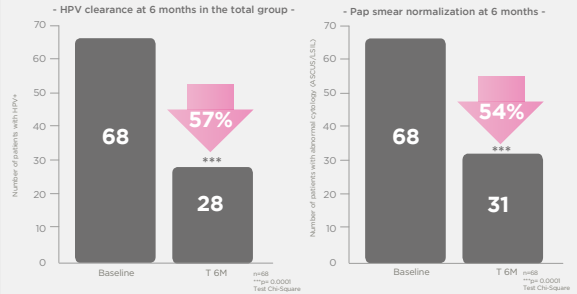
A retrospective, observational study. Medical records of patients who completed 3 or 6 months treatment period during 2017 were analyzed. Baseline characteristics of Papilocare® users were described.

Pre and post treatment number of patients with ASCUS/LSIL, positive-HPV and high risk positive HPV were assessed.

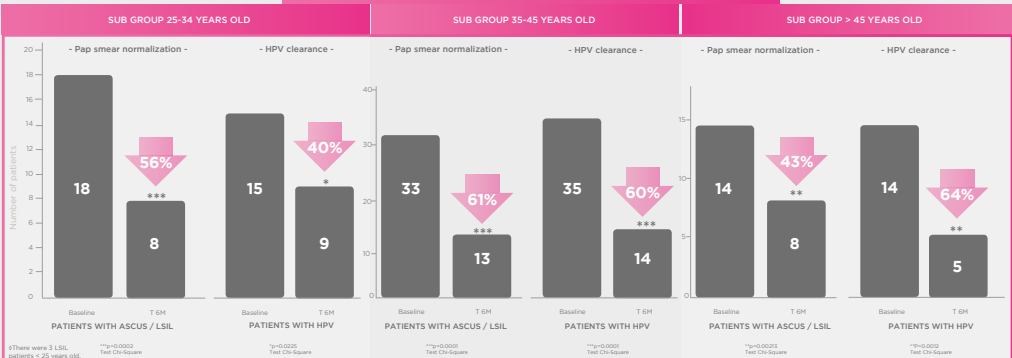
RESULTS

A total of 86 medical records were analyzed. Most of them (84%) were treated for 6 months. Mean age was 38.4 years (from 18 to 72 years), 43.5% were vaccinated before treatment with Papilocare®, 32.5% were smokers and 42% used condoms regularly in all their sexual relationships. Baseline pap smear: Normal 11(13%), ASCUS 3 (3.5%), LSIL 65 (75.5%) and HSIL 7 (8%). HPV test was performed in 68 patients of which 57 (89%) were high-risk HPV.

Results after treatment are shown in figures



RESULTS AT 6 MONTHS BY AGE GROUP¹⁸



CONCLUSIONS

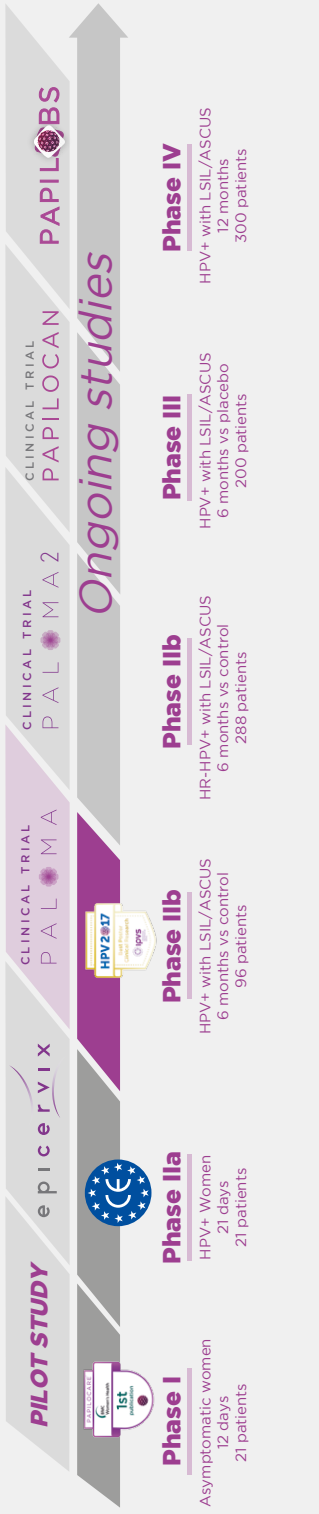
In our hospital, most of patients using Papilocare® had LSIL. In this preliminary analysis, significant reductions of patients with pap smear alterations and significant High-Risk HPV clearance were observed after 3-6 months of Papilocare® application. The treatment with Papilocare® manages to solve the medical situation in almost 1 out of 2 women treated, avoiding more aggressive treatments such as destructive and/or excisional therapies and with no side effects reported.

The authors declares no conflict of interest related to the conduct of study



PAPILOCARE®

RESEARCH & CLINICAL DEVELOPMENT PLAN



SCIENTIFIC INNOVATION FIRST HUMAN CERVIX-ON-A-CHIP



CERVIX-ON-A-CHIP

Proccare Health
Natural woman

86 patients



91 patients



86 patients



98 patients



PHASE IV INDEPENDENT PUBLIC UNIVERSITARY HOSPITAL STUDIES

Patients High Risk HPV+
6 months

FINAL RESULTS

PAPILOCARE®

1ST TREATMENT TO PREVENT AND TREAT HPV-DEPENDENT CERVICAL LESIONS[®]

THE EFFICACY OF PAPILOCARE® IN THE CLEARANCE OF HIGH RISK-HPV AT 6 MONTHS IS BETWEEN 50% TO 70% IN

the Paloma clinical trial¹, the Papilobs observational study¹², and 3 independent clinical studies¹³ carried out by university public hospitals, with a total of 700 patients

NORMALIZATION OF HPV-DEPENDENT CERVICAL LESIONS IN

88%**

of High-Risk HPV+ patients at 6 months vs 56% in the control group

FINAL RESULTS
on High-Risk HPV

HPV CLEARANCE IN

63%

of High-Risk HPV+ patients at 6 months vs 40% in the control group

*p<0.01 Chi-square Test

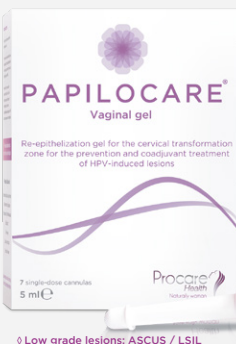
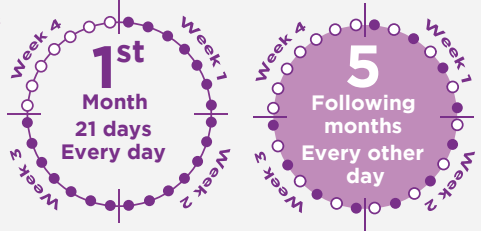
ClinicalTrials.gov NCT04002154

RECOMMENDED TREATMENT DURATION: 6 MONTHS

Instructions for use:

- Recommended for:**
- Controlling and re-epithelizing the cervical transformation zone to prevent the risk of HPV-induced lesions (LSIL).
 - Coadjuvant treatment of HPV-induced intra-epithelial lesions.
 - Repairing and re-epithelizing lesions of the cervical-vaginal mucosa.
 - Rebalancing vaginal microbiota.
 - Improving vaginal health.
 - Creating the conditions for rapid healing of lesions caused by scratching due to burning and pruritus.

Insert a single-dose cannula into the vagina, preferably before bedtime. Start treatment after period. The recommended posology is one single-dose cannula for 21 consecutive days, then one single-dose cannula every other day for the 5 following months (off during the period).



◊ Low grade lesions: ASCUS / LSIL

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