

SCOLR Pharma, Inc
Top Line results for Pivotal Phase III Clinical Trial
12-Hour Ibuprofen 600 mg CDT® tablets

Dental Pain Safety and Efficacy Protocol SCO-0001¹

Protocol SCO-0001 was a randomized, placebo-controlled, double-blind, parallel group study. 306 patients were screened, 256 subjects (169 subjects in the Ibuprofen ER group and 87 subjects in the placebo group) were randomized to receive either Ibuprofen 600 mg ER tablet or a matching placebo for the relief of pain following dental surgery (molar extraction). Subjects were stratified according to a baseline pain intensity numerical rating utilizing a 0-10 point Likert scale (5-7, moderate pain, or 8-10, severe pain) and gender. The 50 patients that did not score a minimum of “moderate pain” (5) were not eligible for treatment.

Following randomization, pain assessments were made following each dose and continued through 48 hours. During the first 12 hours, pain assessment scores were taken at 0 (baseline), 15, 30, 45, 60, 90 and 120 minutes followed by hourly. Subsequent pain assessments were taken at 24, 36 and 48 hours evaluating each 12 hour period. Subjects were also followed for adverse events throughout the treatment period and for 15 days after their last study medication.

The protocol defined two co-primary endpoints:

- Analgesic efficacy for the 8-12 hour dosing interval after Dose 1 using Sum of Pain Intensity Difference (SPID);
- Response rate which measures the durability of effect and is measured by the proportion of subjects in the Ibuprofen ER group achieving meaningful improvement (>20%) in Pain Intensity Difference (PID) from baseline at all three assessment periods of 24, 36, and 48 hours. Subjects must have at least a 2 point reduction in pain intensity from baseline at 24 hr, 36 hr and 48 hours following the first dose.

The analysis of the co-primary endpoints was based on an intent-to-treat (ITT) patient population as well as those patients who completed the study.

For reasons unrelated to study drug, 12 subjects (8 in the Ibuprofen group and 4 in the placebo group) did not complete the study. No serious adverse events were reported during this trial.

The analysis of the efficacy outcomes for the ITT group showed statistically significant benefit for the Ibuprofen group. The sum of pain intensity difference (SPID) score, established relief achieved compared to baseline (starting pain) over the initial 12 hour period. The Ibuprofen group was significantly better than the placebo group with respect to SPID 0-12 hours (38.6 vs. 7.9) $p < 0.0001$ as well as for SPID 8-12 hours (15.5 vs. 3.8) with $p < 0.0001$.

The Ibuprofen group also showed significant benefit vs. placebo for the response outcome. 72.8% of the Ibuprofen subjects showed a beneficial response. The response rate for the Ibuprofen group was statistically different ($p < 0.0001$) from placebo (the lower and upper limits of a 95% confidence interval were 66.1% and 79.5%, respectively).

The Ibuprofen group showed significantly better onset of action than the placebo group. The percent of subjects who had first confirmed perceptible relief within one hour was 61.5% for the Ibuprofen group vs. 11.5% for the placebo group ($p < 0.0001$).

Results for the Completer subgroup were entirely consistent with the results from the ITT group.

¹Acknowledgements: Trial administration and biostatistics provided by AAIPharma, Inc. Clinical conducted at Jean-Brown Research, Inc.

Appendix: Results as provided by AAIPharma, Inc.

SCOLR Pharma, Inc.
 Protocol: SCO-0001
 Clinical/Statistical Report

Variable	Statistic/ Category	Ibuprofen 600 mg ER (N=169)	(%)	Placebo (N=87)	(%)	P-value
First Perceptible Relief Achieved (1)	N (%)	138	(81.70)	35	(40.20)	<0.0001
First Perceptible Relief within One Hour (1)	N (%)	121	(71.60)	29	(33.30)	<0.0001
Time to First Perceptible Relief (min)	N	138		35		
	Mean (SD)	37.1	(28.32)	40.0	(34.79)	
	Median	30.0		29.0		
	Min., Max	4.0, 201.0		10.0, 179.0		
First Confirmed Perceptible Relief Achieved (1)	N (%)	117	(69.20)	15	(17.20)	<0.0001
First Confirmed Perceptible Relief within One Hour (1)	N (%)	104	(61.50)	10	(11.50)	<0.0001
Time to Confirmed First Perceptible Relief (min)	N	117		15		
	Mean (SD)	35.6	(27.82)	52.7	(48.49)	
	Median	29.0		29.0		
	Min., Max	4.0, 201.0		14.0, 179.0		
First Meaningful Relief Achieved (1)	N (%)	117	(69.20)	15	(17.20)	<0.0001
First Meaningful Relief within One Hour (1)	N (%)	41	(24.30)	2	(2.30)	<0.0001
Time to First Meaningful Relief (min)	N	117		15		
	Mean (SD)	107.9	(94.78)	201.3	(140.49)	
	Median	81.0		178.0		
	Min., Max	18.0, 619.0		39.0, 501.0		
Response (at 24, 36 and 48 hours)	N (%)	123	(72.8)	47	(54.0)	<0.0001
	95% CI	(0.6607, 0.7949)				
Response at 24 hours	N (%)	142	(84.0)	55	(63.2)	
	95% CI	(0.785, 0.8955)				
Response at 36 hours	N (%)	137	(81.1)	63	(72.4)	
	95% CI	(0.7516, 0.8697)				
Response at 48 hours	N (%)	144	(85.2)	65	(74.7)	
	95% CI	(0.7985, 0.9056)				
SPID 0-12	N	169		87		
	Mean (SD)	38.6	(34.4)	7.9	(27.0)	
	Median	42.5		0		
	Min, Max	(-34.3, 107.0)		(-46.0, 79.3)		
	LS-means (SD)	38.93	(2.436)	8.32	(3.383)	
	Difference in LS-means	30.61				<0.0001
	95% CI for Difference in LS-means	(22.42, 38.80)				
SPID 8-12	N	169		87		
	Mean (SD)	15.5	(16.13)	3.8	(13.11)	
	Median	17.0		0.0		
	Min, Max	(-15.0, 46.0)		(-20.0, 35.0)		
	LS-means (SD)	15.75	(1.158)	4.03	(1.608)	
	Difference in LS-means	11.72				<0.0001
	95% CI for Difference in LS-means	(7.83, 15.62)				

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