Prevention of scar formation in the skin using a topical FAK inhibitor

Geoffrey C. Gurtner, MD – Professor of Surgery and, by courtesy, Professor of Bioengineering and of Material Science and Engineering, Stanford University

Jayakumar Rajadas, PhD – Director of BIOADD and Assistant Director of CV Pharmacology, Biomaterials & Advanced Drug Delivery

Clinical Need

Injury to the skin in the craniofacial region from trauma, burns, radiation and surgery often results in hypertrophic scar (HTS) formation. HTS leads to airway edema, speech/swallowing dysfunction, sensory defects, disfigurement, and psychological distress to the patient. Approximately 2.5 million patients experience craniofacial wounds and 50,000 patients experience craniofacial burns each year in U.S. Burn wounds that are deep partial thickness or full thickness almost always result in HTS. While full thickness burns are surgically treated by skin grafts, there currently is no effective standardized therapy for patients with deep partial thickness injury.

Solution

Our solution is to provide accelerated and improved wound healing after craniofacial trauma or burns to the skin using our topical focal adhesion kinase inhibitor (FAK-I). During the past decade, Dr. Gurtner's lab has demonstrated that localized FAK-I treatment via a topical hydrogel scaffold decreases wound closure time, reduces hypertrophic scar formation, and restores hair follicles & skin appendages, leading to improved regeneration of the skin after injury and trauma. Our topical delivery mechanism can be applied with each dressing change of the wound and easily integrated within current wound care protocols.

Competitive Advantage

Our FAK-I compound has previously demonstrated human safety during a Phase I trial approved by FDA for oral anti-cancer therapy. Moreover, its pre-clinical efficacy in inhibiting pro-fibrotic cellular activities have been well-documented by us and others. To the best of our knowledge, we are the first group to pioneer research in this FAK-I molecule and the delivery mechanism for wound healing and scar mitigation applications.

Target Market

Approximately 2.5 million patients with craniofacial wounds and 50,000 patients experience craniofacial burns each year. We estimate the total global market size, at saturation, for the scar treatment market, and for all competitors, to be approximately $34.5B dollars (USD).[1] There currently are no effective pharmacological treatments for craniofacial burn wounds and HTS that are routinely used in the clinics. This makes topical FAK-I therapy a promising treatment approach from both a domestic and global market perspective. While there are medical devices in the market that physically modulate mechanical stress to reduce fibrosis, these are cumbersome to use in the craniofacial area. Moreover, burn injuries of the craniofacial area as well as other body parts that receive medical treatment at healthcare clinics in the U.S. have reached more than 400,000 each year. This makes a significant number of the burn patients the target segment who will use FAK-I therapy for wound care and scar management.

Regulatory Pathway

Combination product (drug-device) with the PMOA being the drug. Regulatory pathway will be IND with CDER as the lead agency.

Intellectual Property

We currently have two issued patents related to this technology: 9,655,967 and 9,636,362

Related Publications

Wong VW, Rustad KC, Akaishi S, et al. (2011) Focal adhesion kinase links mechanical force to skin fibrosis via inflammatory signaling. Nat Med 11;18(1):148-52. / Ma K, Kwon SH, Padmanabhan J, et al. (2018) Controlled delivery of a focal adhesion kinase inhibitor results in accelerated wound closure with decreased scar formation. J Invest Dermatol 138(11):2452-2460. Epub 2018 Jul 12.