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# Clinical performance of ShangRing and PrePex devices

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## WHO Technical Advisory Group (TAG)

- Advisory panel to WHO on technological innovations in male circumcision
- Reviews clinical data on safety and efficacy of circumcision devices considered for potential pre-qualification
- One of several key elements of WHO's pre-qualification and guidelines development processes
- TAG's summary of data on Shang Ring and PrePex devices presented here



# Adverse Event Classification adopted by TAG

## Adverse Event (AE)

Any untoward medical occurrence, unintended disease or injury, or untoward clinical signs, excluding those definitely not related to the procedure or device

## Serious Adverse Event (SAE)

An AE that resulted in medical or surgical intervention to prevent permanent impairment to body structure or a body function, *even if no permanent impairment occurred*

## Moderate AE

Any AE not classified as an SAE but that required an intervention by a health care provider or medication (parenteral, oral or topical)

## Mild AE

All other AEs



## Shang Ring Device

- Developed in China; Studied in China and Africa





## Shang Ring Studies Reviewed

Study (type)	Location	Clients	Type of providers
Safety Study	Kenya	40 healthy HIV-negative men	Physicians and nurses experienced in conventional surgical circumcision
Spontaneous Detachment	Kenya	50 healthy HIV-negative men	Physicians and nurses experienced in conventional surgical circumcision
Randomized Comparison with Surgery	Kenya and Zambia	200 Shang Ring, 200 surgery, healthy HIV-negative men	Physicians and non-physicians, all with extensive experience with surgical male circumcision
Field Studies	Kenya and Zambia	1256 healthy HIV-negative men	Physicians and non-physicians, all with extensive experience with surgical male circumcision
Acceptability and Safety	Uganda	621 healthy HIV-negative men, 508 of whom chose Shang Ring	Clinical officers in sterile conditions in outpatient operating rooms



## Shang Ring Outcomes (1,983 placements)

- High proportion of successful device placements
  - 98.8% of men eligible for device circumcision and device successfully placed
  - Small number of men considered unsuitable for Shang Ring circumcision due to minor foreskin abnormalities
  - Device could not be placed in 15 men (0.8%)
    - Correct ring size not available (8)
    - Foreskin slipped from outer ring (3), damaged (2), too short (1)
    - Outer ring could not be closed (1)
- High proportion with successful circumcision by device alone
  - 1,980 (99.8%) foreskin successfully removed by device alone
  - 3 (0.2%) had insufficient skin removed



## Shang Ring Adverse Events (TAG Classification)

Type of Event	Number	Per cent [95% CI]
Total placements	1,983	
<b>Serious AEs</b>	<b>0</b>	<b>0.0% [0.0%, 0.2%]</b>
<b>Moderate AEs</b>	<b>20</b>	<b>1.0% [0.6%, 1.6%]</b>
Pain placement (8) Infection (4) Insufficient skin removed (3) Pain leading to early removal (2) Wound disruption (2) Bleeding (1)		
<b>Mild AEs</b>	<b>43</b>	<b>2.2% [1.6%, 2.9%]</b>



## Shang Ring Outcomes

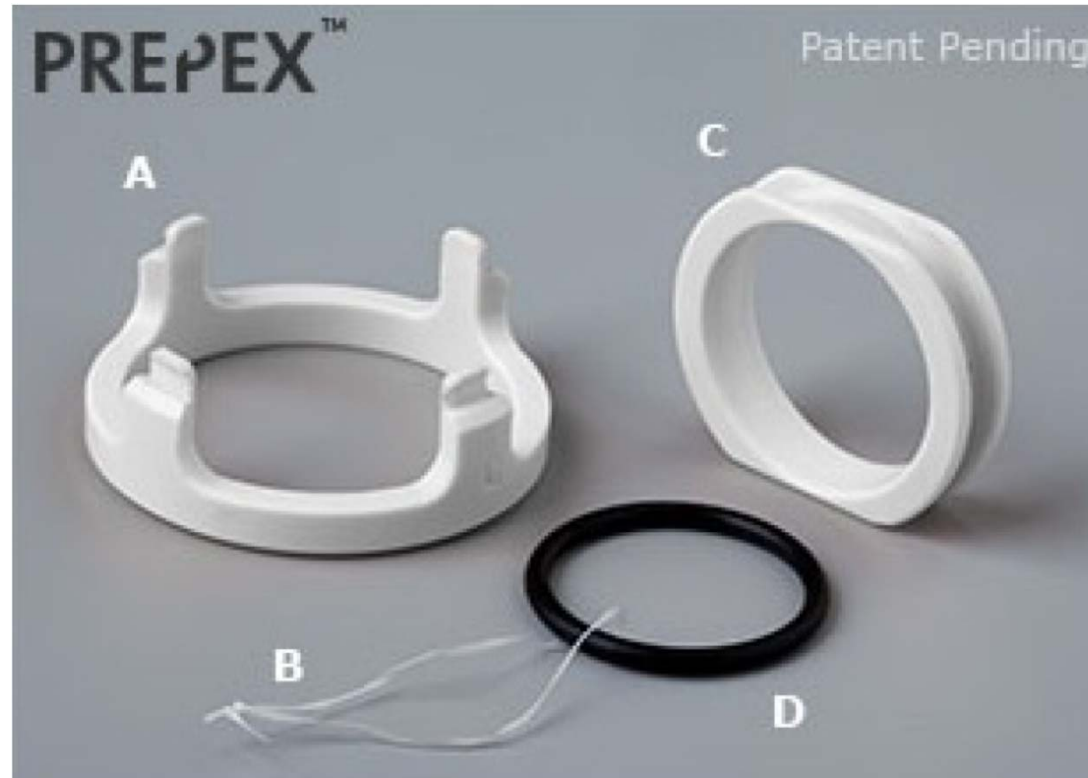
- Procedure times (shorter than surgery)
  - Placement time 6.4 (SD 3.8) mins
    - Excludes time for injection and induction of local anaesthesia
  - Removal time 3.1 (SD 1.8) mins
  - Total time 10.3 mins (placement and removal)
    - Comparison: mean time for surgical circumcision 20.3 minutes (Kenya and Zambia studies)
    - Excludes time for injection and induction of local anaesthesia
- Healing times (longer than surgery)
  - Comparative study, mean time to complete healing
    - Shang Ring: 44.1 (SD 12.6) days from date of placement
    - Surgery: 38.9 (SD 12.6) days from date of surgery
    - Average 5.2 (2.7–7.7) days longer
  - Healing by secondary intention with ring circumcision





## PrePex Device

Developed in Israel; Studied in Africa



## PrePex Studies Reviewed

Study (type)	Location	Clients	Type of providers
Safety Study	Rwanda	50 healthy HIV-negative men	Physicians and nurses
Randomized Comparison with Surgery	Rwanda	144 PrePex, 73 surgery	Physicians and nurses
Pilot Study	Rwanda	49 healthy HIV-negative men age 21–54 years	Nurses
Field Study	Rwanda	666 generally healthy men [5 HIV-positive]	Lower cadre nurses
Safety Study	Zimbabwe	53 HIV-negative men	Physicians and nurse assistants
Randomized Comparison with Surgery	Zimbabwe	240 HIV-negative men	As above
Field Study	Zimbabwe	641 HIV-negative men	Nurses with physician back-up support
Field Study	Uganda (IHK)	634 healthy men	Surgeons, medical officers, clinical officers and nurses
Field Study	Uganda (Rakai)	187 HIV-negative men	Not stated



## PrePex Outcomes (2,417 placements)

- High proportion of successful device placements
  - 92.6% of men eligible for device circumcision and device successfully placed
  - 5.9% of men considered unsuitable for PrePex circumcision due to phimosis, narrow foreskin opening, tight frenulum, other penile abnormalities
  - Device could not be placed in 38 men (1.3%)
    - Narrow, tight or short foreskin (31)
    - Adhesions (4)
    - Penis circumference outside the range of available ring sizes (3)
- High proportion with successful circumcision
  - 2,405 (99.5%) foreskin successfully removed by device alone
    - Surgery after: self-removal (4), requested early removal (2), displacement (5), device and foreskin removed surgically under local anaesthesia (1)



## PrePex Adverse Events (TAG Classification)

Type of Event	Number	Per cent [95% CI]
Total placements	2,417	
<b>Serious AEs</b>	<b>9</b>	<b>0.4% [0.2%, 0.7%]</b>
See details on next slide <i>All required prompt surgical intervention to prevent permanent injury or damage</i>		
<b>Moderate AEs</b>	<b>18</b>	<b>0.7%% [0.4%, 1.2%]</b>
Premature removal (8), Bleeding (5) Displacement (2), Infection (2), Difficult removal (1) <i>All required medical intervention to manage</i>		
<b>Mild AEs</b>	<b>15</b>	<b>0.6% [0.3%, 1.0%]</b>



## PrePex Serious Adverse Events (Total 9)

- Device displacements following sexual activity, masturbation, erection, possible placement error, or accidental dislodging by another person (4)
- Premature self-removal secondary to pain (1);
- Meatal injury at removal (1)
- Difficult removal due to necrotic tissue everted over elastic ring requiring surgical intervention (1)
- Wound disruption or dehiscence (2)
- **Displacements associated with pain, oedema and blistering required prompt surgical intervention to avoid serious infection or permanent injury to penis**



## PrePex Outcomes

- Procedure times (faster than conventional surgery)
  - Placement preparation 2.0 (SD 0.8) min
  - Placement procedure 1.5 (SD 1.0) min
  - Removal preparation 0.4 (SD 0.2) min
  - Removal procedure 2.0 (SD 1.1) min
  - In comparative study total placement and removal times 5.7 (SD 1.4) min, compared with 19.2 (SD 3.9) min for surgery
- Healing (longer than conventional surgery)
  - Comparative study, mean time to complete healing
    - PrePex: 38.0 (SD 12.1) days from placement
    - Surgery: 23.0 (SD 7.5) days from date of surgery
    - Average 15 (12 - 18) days longer
  - Healing by secondary intention following ring circumcision



## PrePex Outcomes

- Pain
  - Greatest pain and discomfort 3-6 hours after placement
  - 5% lidocaine topical anaesthetic cream applied immediately before placement, oral analgesics given to take as required
  - Appears to be somewhat less pain while device worn than at comparable times following surgery
  - Transient (short duration but quite severe) pain during device removal
- Odour
  - Complaints of bad odour after 3-4 days