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	Number Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborat ors	Dates
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NCT0386	A Study to	Title Acronym:	Active, not	Hemophilia B	Biological: PF-06838435/ fidanacogene elaparvovec	Study Type: Interventional	Actual	Study Sponsors:	Study Start: July
1273	Evaluate the Efficacy and	Other Ids:	recruiting		Gene Therapy	Phase: Phase 3	Enrollment: 45	Same as current	29, 2019
	Safety of Factor IX Gene Therapy With	C0371002 2018-003086-33 (EudraCT				Study Design: Allocation: Non-Randomized Intervention Model: Single Group Assignment Masking: None (Open Label)	Estimated Enrollment: Original	Collaborators: Not Provided	Primary Completion: November 21,
	PF-06838435 in Adult Males	Number)				Primary Purpose: Treatment	Estimated		2022 (Final data collection
	With Moderately					Primary Outcome Measures:	Enrollment: 55		date for primary outcome
	Severe to Severe					• Annualized bleeding rate (ABR) [Time Frame: First 12	Age: 18 Years to 65 Years		measure)
	Hemophilia B Study Documents:					months post PF 06838435 infusion] • Vector derived FIX:C level [Time Frame: Week 12 to 12 months post PF 06838435 infusion]	(Adult, Older Adult)		Study Completion: March 11, 2030
	2 ocuments.					Secondary Outcome Measures:	Sex: Male		First Posted:
						Annualized infusion rate (AIR) of exogenous Factor IX			March 4, 2019
						Activity [Time Frame: First 12 months post study drug infusion]			Results First Posted:
						 Annualized Factor IX Activity consumption [Time Frame: 12 months post study drug infusion] 			Last Update Posted:
						 Annualized number of bleeding events of specific type: spontaneous and traumatic, and untreated [Time Frame: 12 months post study drug infusion] 			September 14, 2022
						• Frequency of target joint bleeds [Time Frame: 12 months post study drug infusion]			
						 Percentage of the participants without bleeds [Time Frame: 12 months post study drug infusion] 			
						 Change in joint health as measured by the Hemophilia Joint Health Score (HJHS) instrument [Time Frame: 12 months post study drug infusion] 			
						 Patient Reported Outcome (PRO) instrument - Hemophilia Quality of Life (Haem A QoL) [Time Frame: 12 months post study drug infusion] 			
						 Patient Reported Outcome (PRO) instrument - Hemophilia Activities List (HAL) [Time Frame: 12 months post study drug infusion] 			
						• Patient Reported Outcome (PRO) instrument - Patient Global Impression of Change-Hemophilia (PGIC-H) [Time Frame: 12 months post study drug infusion]			
						Annualized Bleeding Rate [Time Frame: Annually for 6 years]			
						 Vector derived Factor IX activity (FIX:C) level at steady state [Time Frame: Annually for 6 years] 			
						 Annualized infusion rate (AIR) of exogenous Factor IX [Time Frame: Annually for 6 years] 			
						Annualized Factor IX consumption [Time Frame: Annually for 6 years]			
						 Annualized number of bleeding events of specific type: spontaneous and traumatic, and untreated [Time Frame: Annually for 6 years] 			
						• Frequency of target joint bleeds [Time Frame: Annually for 6 years]			
						 Patient Reported Outcome (PRO) instrument - Hemophilia Quality of Life (Haem A QoL) [Time Frame: Annually for 6 years] 			
						Patient Reported Outcome (PRO) instrument - Hemophilia Activities List (HAL) [Time Frame: Annually for 6 years]			
						Patient Reported Outcome (PRO) instrument - Patient Global Impression of Change - Hemophilia (PGIC-H) [
						 Time Frame: Annually for 6 years] Incidence and severity of all adverse events collected during the study [Time Frame: For the duration of 6 			

2	NCT0279	Gene Therapy in	Title Acronym:	Recruiting	• HIV	Procedure: Autologous Hematopoietic Stem Cell	Study Type: Interventional
	7470	Treating Patients With Human	Other Ids: AMC- 097		Infection • Mature T-	Transplantation Undergo infusion of lentivirus vector CCR5	Phase: Phase 1 Phase 2
		Immunodeficien cy Virus- Related Lymphoma Receiving Stem	NCI-2015- 01745 (Registry Identifier: CTRP (Clinical Trial Reporting		Cell and NK-Cell Non- Hodgkin Lymphom	shRNA/TRIM5alpha/TAR decoy-transduced autologous CD34-positive hematopoietic progenitor cells Other Name: Autologous Stem Cell Transplantation	Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment
		Cell Transplant	Program))		a	• Drug: Carmustine 300 mg/m2 on Day -6, as part of BEAM and R-	Primary Outcome Measures:
		Study Documents:	9933 (Other Identifier: CTRP (Clinical Trial Reporting Program))		Plasmabla stic Lymphom a	BEAM regimens. Other Names: BCNU Becenum	Efficacy of the candidate product defined as establishment of > 5% mononuclear blood cell expressing anti-HIV genes in the peripheral bloom. Time Frame: 3 months post-transplant]
			AMC 097 (Other Identifier: AIDS Malignancy		Recurrent Adult Hodgkin Lymphom	 Becenun BiCNU Bis(chloroethyl) Nitrosourea Bis-Chloronitrosourea 	Efficacy rates will be summarized by the propoparticipants who meet the criteria for efficacy, exact binomial CIs.
			Consortium) 097 (Other Identifier: AIDS Malignancy		a • Recurrent Adult Non-	 Carmubris Carmustin Carmustinum FDA 0345 	 Incidence of adverse events, using the Nationa Institute Common Terminology Criteria for Ad Events (NCI CTCAE) version 4.0 [Time Fran month post-transplant]
			Consortium) AMC-097 (Other Identifier: CTEP) U01CA121947 (U.S. NIH Grant/Contract)		Hodgkin Lymphom a Recurrent Burkitt Lymphom a Recurrent Follicular	 Gliadel N,N'-Bis(2-chloroethyl)-N-nitrosourea Nitrourean Nitrumon SK 27702 SRI 1720 WR-139021 Drug: Cytarabine 100 mg/m2 BID on Days -5 through -2, as part of BEAM and R-BEAM regimens. 	Defined as timely engraftment (collective estal of a persistent absolute neutrophil count of at l cells/mm^3 and platelet count of 20,000 cells/without transfusion for 3 consecutive days) in absence of any study candidate-specific grade non-hematopoietic organ toxicity or any clonal expansion. Toxicity will be summarized as the proportion experiencing a given toxicity or grotoxicities, at or above a specified level of sever exact 95% confidence intervals (CIs).
					Lymphom a	Other Names:	Secondary Outcome Measures:
					 Stage III Follicular Lymphom a Stage III Mantle Cell Lymphom a Stage IV 	 betaCytosine arabinoside 1-betaD-Arabinofuranosyl-4-amino- 2(1H)pyrimidinone 1-betaD-Arabinofuranosylcytosine 1-Beta-D-arabinofuranosyl-4-amino- 2(1H)pyrimidinone 1-Beta-D-arabinofuranosylcytosine 1.betaD-Arabinofuranosylcytosine 2(1H)-Pyrimidinone, 4-Amino-1-beta-D- arabinofuranosyl- 2(1H)-Pyrimidinone, 4-amino-1.betaD- 	 CD4 recovery [Time Frame: Up to 24 months treatment] Complete response rate [Time Frame: Up to 1 Summarized descriptively. For dichotomous enthe frequency, proportion, and exact 95% confiniterval for proportion will be calculated. Duration of complete response (CR) [Time Frame from the first documentation of CR until that relapsed or progressive disease is objective.
					Follicular Lymphom a • Stage IV Mantle	arabinofuranosyl- Alexan Ara-C ARA-cell Arabinofuranosyleytosina	documented, assessed up to 15 years] Time-to-event data will be presented graphical Kaplan-Meier plots and summarized by estima median time to event (if that is estimable from with 95% confidence interval.
					Cell Lymphom a	 Arabinofuranosylcytosine Arabinosylcytosine Aracytidine Aracytin 	 Duration of gene modified HIV-1 resistant per blood cells and gut mucosal immune cells [Tin Up to 24 months post-transplant]
						 Aracytine Beta-Cytosine Arabinoside CHX-3311 Cytarabinum 	Summarized descriptively. Continuous measur summarized by mean (SD) and median (range) transformation if necessary for skewed measur would be typical for cell counts.
						 Cytarbel Cytosar Cytosar-U Cytosine Arabinoside 	 Hematologic function, defined as ANC > 1500 g/dl without transfusion, and platelets > 100,00 Frame: Day 100]
						CytosinebetaarabinosideCytosine-beta-arabinoside	HIV-1 viral load over time [Time Frame: Up to months post-transplant]
						ErpalfaStarasidTarabine PFS	 Incidence of toxicities, infections, transfusions infusion-related reactions, using the NCI CTC version 4.0 [Time Frame: Up to 15 years]
						U 19920U-19920Udicil	• Integration sites of vector sequences in circular Time Frame: Up to 24 months post-transplant
						WR-28453Drug: Etoposide	Overall survival [Time Frame: Time from star treatment to death, assessed up to 15 years]
						VP-16: 100 mg/m2 BID on Days -5 through -2, as	Time-to-event data will be presented graphical

udy Type: Interventional nase: Phase 1 nase 2 udy Design: Allocation: N/A tervention Model: Single Group Assignment asking: None (Open Label) imary Purpose: Treatment imary Outcome Measures: Efficacy of the candidate product defined as establishment of > 5% mononuclear blood cells expressing anti-HIV genes in the peripheral blood [Time Frame: 3 months post-transplant] Efficacy rates will be summarized by the proportion of participants who meet the criteria for efficacy, with 95% exact binomial CIs. Incidence of adverse events, using the National Cancer Institute Common Terminology Criteria for Adverse Events (NCI CTCAE) version 4.0 [Time Frame: 1 month post-transplant] Defined as timely engraftment (collective establishment of a persistent absolute neutrophil count of at least 500 cells/mm³ and platelet count of 20,000 cells/mm³ without transfusion for 3 consecutive days) in the absence of any study candidate-specific grade 3 and 4 non-hematopoietic organ toxicity or any clonal expansion. Toxicity will be summarized as the proportion experiencing a given toxicity or group of toxicities, at or above a specified level of severity, with exact 95% confidence intervals (CIs). econdary Outcome Measures: CD4 recovery [Time Frame: Up to 24 months posttreatment] Complete response rate [Time Frame: Up to 15 years] Summarized descriptively. For dichotomous endpoints, the frequency, proportion, and exact 95% confidence interval for proportion will be calculated. Duration of complete response (CR) [Time Frame: Time from the first documentation of CR until first date that relapsed or progressive disease is objectively documented, assessed up to 15 years] Time-to-event data will be presented graphically by Kaplan-Meier plots and summarized by estimated median time to event (if that is estimable from the data) with 95% confidence interval. Duration of gene modified HIV-1 resistant peripheral blood cells and gut mucosal immune cells [Time Frame: Up to 24 months post-transplant] Summarized descriptively. Continuous measures will be summarized by mean (SD) and median (range), with log transformation if necessary for skewed measures, as would be typical for cell counts. Hematologic function, defined as ANC > 1500, Hb > 10 g/dl without transfusion, and platelets > 100,000 [Time Frame: Day 100] HIV-1 viral load over time [Time Frame: Up to 24 months post-transplant] Incidence of toxicities, infections, transfusions, and infusion-related reactions, using the NCI CTCAE version 4.0 [Time Frame: Up to 15 years] Integration sites of vector sequences in circulating cells [Time Frame: Up to 24 months post-transplant Overall survival [Time Frame: Time from start of study

Time-to-event data will be presented graphically by

Actual Enrollment: Estimated Enrollment: 18 Original Estimated Enrollment: Same as current Age: 18 Years and older (Adult, Older Adult) Sex: All

Study Sponsors: Same as current

Collaborators:

• National

 California Institute for Regenerati ve Medicine (CIRM)

Cancer

Institute

(NCI)

Study Start: June 23, 2016

Primary Completion: December 31, 2024 (Final data collection date for primary outcome measure)

Study Completion: June 30, 2025

> First Posted: June 13, 2016

Results First Posted:

Last Update Posted: September 15, 2022

3	NCT0479 8235	First-in-Human Study of TSHA-	Title Acronym:	Active, not recruiting	Infantile GM2 Gangliosidosis	Biological: TSHA-101 AAV9 viral vector containing HEXA and HEXB genes to	Study Type: Interventional	Actual Enrollment: 3	Study Sponsors: Same as current
		101 Gene Therapy for	Other Ids: TSHA-101-IST- 001		(Disorder)	be administered via Intrathecal injection	Phase: Phase 1 Phase 2	Estimated Enrollment:	Collaborators:
		Treatment of Infantile Onset GM2 Gangliosidosis	001				Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment	Original Estimated Enrollment: 6	• Taysha Gene Therapies, Inc.
		Study Documents:					Primary Outcome Measures: Same as current	Age: up to 15 Months (Child)	GlycoNet
							Secondary Outcome Measures:		
							• Safety and tolerability: Viral shedding analysis [Time Frame: 1 year]	Sex: All	
							Positive presence of viral DNA from biological fluids (whole blood, urine, saliva, and stool)		
							Assessment of Immunogenicity: Biomarkers in serum milestones [Time Frame: 1 year]		
							Summary of neutralizing antibodies (NAbs) titers for adeno-associated virus, serotype 9 (AAV9) and Hex A		
							• Assessment of Immunogenicity: Biomarkers in serum [Time Frame: 1 year]		
							Summary of total antibodies (TAbs) titers for AAV9 and Hex A		
							 Assessment of Immunogenicity: Biomarkers in peripheral blood mononuclear cells (PBMCs [Time Frame: 5 years] 		
							Summary of PBMCs for enzyme-linked immune absorbent spot (ELISpot) assays for cytokine secretion against AAV9 and Hex A		
							• Overall Survival [Time Frame: treatment to death from any cause, up to 5 years]		
							Estimated using the Kaplan-Meier method		
							Hex A Enzyme Activity: Cerebrospinal fluid (CSF) and serum [Time Frame: 1 year]		
							Change from baseline		
							Head Control: Number of events for abnormal head control [Time Frame: 1 year]		
							change from Baseline		
							Change from Baseline in motor function: Children's Hospital of Philadelphia Infant Test of Neuromuscular Disorders (CHOP-INTEND) [Time Frame: 1 year]		
							The test consists of 16 items (body parts), where each item is tested for both sides of the body, left and right. The best score is taken for each item (with a maximum score of 4), and the scores are summed over all 16 items with a possible total CHOP-INTEND score of 64.		
							 Change from Baseline in Motor Function: Modified Ashworth Scale [Time Frame: 1 year] 		
							change from Baseline. Increase or decrease of muscle tone will be measured by the Modified Ashworth Scale. Frequency counts and percentages will be presented by score (0, 1, 1+, 2, 3, and 4), muscle, side, and visit for the safety population. Flexion and extension of the knee and elbow will be measured on both sides, along with hip adduction and abduction on both sides of the body.		
							Clinical Efficacy Assessment: Progression of Hypotonia [Time Frame: 1 year]		
							Assessed through neurological examinations as present or absent. Baseline to each post-Baseline visit		
							• Clinical Efficacy Assessment: Dysphagia [Time Frame: From onset up to 3 years, if present]		
							Assessment of the dysphagia events- assessed as present or absent.		

Study Start: March 12, 2021

Primary Completion: March 12, 2023 (Final

data collection date for primary

Study Completion: March 12, 2027

First Posted: March 15, 2021

Results First Posted:

Last Update Posted:

September 14, 2022

outcome measure)

4	NCT0212 2952	Gene Transfer Clinical Trial for Spinal Muscular Atrophy Type 1 Study Documents:	Title Acronym: Other Ids: AVXS-101-CL- 101 COAV101A121 01 (Other Identifier: Novartis Pharmaceuticals)	Completed	Spinal Muscular Atrophy 1	Biological: AVXS-101 Self-complementary AAV9 carrying the SMN gene under the control of a hybrid CMV enhancer/chickenactin promoter Other Name: Zolgensma	Study Type: Interventional Phase: Phase 1 Study Design: Allocation: Non-Randomized Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Safety Outcome Measure [Time Frame: 2 years] Any one Grade III or higher treatment-related toxicity Secondary Outcome Measures: • Mortality [Time Frame: 2 years] Time from birth to time of death • Time-to-Event Outcome Measure [Time Frame: 2 years] Time from birth to medically prescribed respiratory assistance required 16 hours per day or more.	Actual Enrollment: 15 Estimated Enrollment: Original Estimated Enrollment: 9 Age: up to 6 Months (Child) Sex: All	Study Sponsors: Jerry R. Mendell Collaborators: Not Provided	Study Start: May 5, 2014 Primary Completion: December 15, 2017 (Final data collection date for primary outcome measure) Study Completion: December 15, 2017 First Posted: May 10, 2019 Results First Posted: May 10, 2019
5	NCT0197 6091	A Gene Transfer Therapy Study to Evaluate the Safety of SRP- 9004 (Patidistrogene Bexoparvovec) in Participants With Limb- Girdle Muscular Dystrophy, Type 2D (LGMD2D) Study Documents:	Title Acronym: Other Ids: 9004- 101 5U01AR060911 (U.S. NIH Grant/Contract)	Completed	Limb-Girdle Muscular Dystrophy, Type 2D	Genetic: SRP-9004 Isolated Limb Infusion (ILI) Other Name: patidistrogene bexoparvovec	Study Type: Interventional Phase: Phase 1 Phase 2 Study Design: Allocation: Non-Randomized Intervention Model: Sequential Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Safety with fewer than 2 grade 3 adverse events [Time Frame: 1 year from start] Safety with fewer than 2 grade 3 adverse events Secondary Outcome Measures: Efficacy outcome measure 6MWT [Time Frame: 2 years] 6 minute walk test (6MWT)-(primary variable to measure efficacy) Efficacy would be a significant improvement in distance walked in the 6 minute walk test.	Actual Enrollment: 6 Estimated Enrollment: Original Estimated Enrollment: Same as current Age: 7 Years and older (Child, Adult, Older Adult) Sex: All	Study Sponsors: Jerry R. Mendell Collaborators: Nationwide Children's Hospital	Last Update Posted: September 15, 2022 Study Start: February 1, 2015 Primary Completion: March 14, 2019 (Final data collection date for primary outcome measure) Study Completion: March 14, 2019 First Posted: April 1, 2022 Results First Posted: April 1, 2022 Last Update Posted: September 13, 2022

6	NCT0554 1627	PhI/II Dose-Finding Study to Evaluate BV- 101 Striatal Administration in Adults With Early Manifest Huntington's Disease Study Documents:	Title Acronym: Other Ids: ASK-HD-01-CS-101	Not yet recruiting	Huntington Disease	Genetic: BV-101 Gene Therapy One-time intracerebral bilateral injections of BV-101 (AAVrh10.CAG.hCYP46A1), an adeno-associated viral vector serotype Rh10 containing the human cholesterol 24-hydroxylase gene Other Name: AAVrh10.CAG.hCYP46A1	Study Type: Interventional Phase: Phase 1 Phase 2 Study Design: Allocation: Non-Randomized Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Same as current Secondary Outcome Measures: Same as current	Actual Enrollment: Estimated Enrollment: 18 Original Estimated Enrollment: Same as current Age: 18 Years to 65 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: October 15, 2022 Primary Completion: December 31, 2025 (Final data collection date for primary outcome measure) Study Completion: December 31, 2029 First Posted: September 15, 2022 Results First Posted: Last Update Posted: September 15, 2022
7	NCT0358 8299	Study to Test the Safety and How Well Patients With Severe Hemophilia A Respond to Treatment With BAY 2599023 (DTX 201), a Drug Therapy That Delivers a Healthy Version of the Defective Factor VIII Gene Into the Nucleus of Liver Cells Using an Altered, Non- infectious Virus (AAV) as a "Shuttle". Study Documents:	Title Acronym: Other Ids: 19429 2017-000806-39 (EudraCT Number)	Active, not recruiting	Hemophilia A	Drug: BAY2599023 (DTX201) Single escalating doses with 4 dose steps; Single intravenous (IV) administration.	Study Type: Interventional Phase: Phase 1 Phase 2 Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Number of patients with adverse events (AEs), treatment-emergent adverse events (TEAEs), serious adverse events (SAEs) and AEs/SAEs of special interest [Time Frame: Up to 52 weeks] Secondary Outcome Measures: Change of FVIII activity from baseline throughout the study [Time Frame: Up to 5 years] FVIII activity will be determined using both a one-stage assay and chromogenic assay.	Actual Enrollment: 11 Estimated Enrollment: Original Estimated Enrollment: 18 Age: 18 Years and older (Adult, Older Adult) Sex: Male	Study Sponsors: Same as current Collaborators: Ultragenix pharmaceutical	Study Start: November 7, 2018 Primary Completion: November 3, 2026 (Final data collection date for primary outcome measure) Study Completion: November 30, 2026 First Posted: July 17, 2018 Results First Posted: Last Update Posted: September 14, 2022

8	NCT0363 6438	Long Term Follow Up to Evaluate DTX301 in Adults With Late-Onset OTC Deficiency Study Documents:	Title Acronym: Other Ids: 301OTC02 2018-000156-18 (EudraCT Number)	Active, not recruiting	Ornithine Transcarbamylas e (OTC) Deficiency	Other: No Intervention No Intervention	Study Type: Observational Phase: Study Design: Observational Model: Other Time Perspective: Prospective Primary Outcome Measures: Number of Participants with Adverse Events and Serious Adverse Events [Time Frame: Up to 260 weeks following DTX301 administration] Secondary Outcome Measures: • Change from Baseline Over Time in the Ureagenesis Rate [Time Frame: Baseline (average of Screening and Day 1) up to 260 weeks following DTX301 administration] • Change from Baseline Over Time in 24-Hour Area Under the Curve for Plasma Ammonia [Time Frame: Baseline (Day 0 of Study 3010TC01) up to 260 weeks following DTX301 administration]	Actual Enrollment: 11 Estimated Enrollment: Original Estimated Enrollment: 12 Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: August 30, 2018 Primary Completion: December 2027 (Final data collection date for primary outcome measure) Study Completion: December 2027 First Posted: August 17, 2018 Results First Posted: Last Update Posted: September 13, 2022
9	NCT0405 5090	Extension of Phase 3 Gene Therapy for Painful Diabetic Neuropathy Study Documents:	Title Acronym: Other Ids: VMDN-003b	Completed	Painful Diabetic Neuropath y Diabetic Neuropath y, Painful Painful	 Genetic: Long-Term Follow-Up of Patients who Received Engensis (VM202) No study drug is administered in this study. Patients who received Engensis (VM202) in a previous trial will be evaluated in this trial for long-term safety and efficacy. Drug: Long-Term Follow-Up of Patients who Received Placebo No study drug is administered in this study. Patients who received Placebo in a previous trial will be evaluated in this trial for long-term safety and efficacy. 	Study Type: Interventional Phase: Phase 3 Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description: Long term, prospective, non-interventional, safety extension study of phase 3 trial. Double blind, randomized, placebo-controlled, multicenter study/ Masking: Quadruple (Participant, Care Provider, Investigator, Outcomes Assessor) Masking Description: Double-blind Primary Purpose: Treatment Primary Purpose: Treatment Primary Purpose: Treatment Primary Easseline through Day 365 follow up] defined as occurrence of adverse events - observed between subjects receiving VM202 versus subjects receiving placebo in the VMDN-003 study Secondary Outcome Measures: • The change in the average 24-hour pain score from baseline to the Day 365 follow-up [Time Frame: baseline to the Day 365 follow-up in the Daily Pain and Sleep Interference Diary • The change in the average 24-hour pain score from Day 270 to the Day 365 follow-up [Time Frame: Day 270 to the Day 365 follow-up in the Frame: Day 270 to the Day 365 follow-up in the Paily Pain and Sleep Interference Diary; • Patient's Global Impression of Change (PGIC) at the Day 365 follow-up [Time Frame: At the Day 365 follow-up] The patient's global impression of change	Actual Enrollment: 101 Estimated Enrollment: Original Estimated Enrollment: 120 Age: 18 Years to 75 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: February 4, 2019 Primary Completion: July 24, 2019 (Final data collection date for primary outcome measure) Study Completion: July 24, 2019 First Posted: August 13, 2019 Results First Posted: Last Update Posted: September 14, 2022

10	NCT0428 1485	Study to Evaluate the Safety and Efficacy of PF- 06939926 for the Treatment of Duchenne Muscular Dystrophy Study Documents:	Title Acronym: Other Ids: C3391003 2019-002921-31 (EudraCT Number)	Recruiting	Duchenne Muscular Dystrophy	 Genetic: PF-06939926 PF-06939926 will be administered as a single IV infusion at Year 1 for Cohort 1. Other: Placebo Placebo will be administered as a single IV infusion at Year 1 for Cohort 2. Other: Placebo Placebo will be administered as a single IV infusion at Year 2 for Cohort 1. Genetic: PF-06939926 PF-06939926 will be administered as a single IV infusion at Year 2 for Cohort 2 	Study Type: Interventional Phase: Phase 3 Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description: Parallel up to the measurement of the primary outcome at Week 52. At the beginning of study Year 2 participants who were originally assigned to placebo will have the opportunity to receive PF-06939926. All participants will be followed for 5 years following treatment with PF-06939926. Masking: Quadruple (Participant, Care Provider, Investigator, Outcomes Assessor) Masking Description: The study will be quadruple blind. Primary Purpose: Treatment Primary Outcome Measures: Same as current Secondary Outcome Measures: Same as current	Actual Enrollment: Estimated Enrollment: 99 Original Estimated Enrollment: Same as current Age: 4 Years to 7 Years (Child) Sex: Male	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: November 5, 2020 Primary Completion: January 30, 2024 (Final data collection date for primary outcome measure) Study Completion: January 29, 2029 First Posted: February 24, 2020 Results First Posted: Last Update Posted: September 14, 2022
11	NCT0542 9372	Study of Fordadistrogene Movaparvovec in Early Stage Duchenne Muscular Dystrophy Study Documents:	Title Acronym: Other Ids: C3391008 2021-003379-33 (EudraCT Number)	Recruiting	Muscular Dystrophy, Duchenne	Genetic: PF-06939926 All participants will receive a single dose of PF-06939926 on Day 1. Other Name: Fordadistrogene Movaparvovec	Study Type: Interventional Phase: Phase 2 Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Same as current Secondary Outcome Measures: Same as current	Actual Enrollment: Estimated Enrollment: 10 Original Estimated Enrollment: Same as current Age: 2 Years to 3 Years (Child) Sex: Male	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: August 8, 2022 Primary Completion: July 17, 2024 (Final data collection date for primary outcome measure) Study Completion: June 25, 2028 First Posted: June 23, 2022 Results First Posted: Last Update Posted: September 10, 2022

12	NCT0001 2545	Collection and Storage of Umbilical Cord Stem Cells for Treatment of Sickle Cell Disease Study Documents:	Title Acronym: Other Ids: 010122 01-H-0122	Recruiting	Sickle Cell Disease Sickle Cell Trait	Not Provided	Study Type: Observational Phase: Study Design: Observational Model: Case-Only Time Perspective: Cross-Sectional Primary Outcome Measures: Not Provided Secondary Outcome Measures: Not Provided	Actual Enrollment: Estimated Enrollment: 352 Original Estimated Enrollment: Age: 18 Years to 45 Years (Adult) Sex: All	Study Sponsors: National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) Collaborators: Not Provided	Study Start: November 1, 2001 Primary Completion: Not Provided Study Completion: Not Provided First Posted: March 12, 2001 Results First Posted: Last Update Posted: September 13, 2022
13	NCT0490 3288	A Study of SmartFlow® Magnetic Resonance (MR) Compatible Ventricular Cannula for Administering Eladocagene Exuparvovec to Pediatric Participants Study Documents:	Title Acronym: Other Ids: PTC-AADC-GT-002	Recruiting	AADC Deficiency	Genetic: Eladocagene Exuparvovec Four 0.08 milliliters (mL) infusions at a dose of 0.45×10^11 vg and a volume of 80 microliters (l) per site to 4 sites (2 per putamen), for the total dose of 1.8×10^11 vg and a total volume of 320 l per participant.	Study Type: Interventional Phase: Phase 2 Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Same as current Secondary Outcome Measures: Same as current	Actual Enrollment: Estimated Enrollment: 3 Original Estimated Enrollment: Same as current Age: 1 Year to 17 Years (Child) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: May 12, 2021 Primary Completion: July 15, 2023 (Final data collection date for primary outcome measure) Study Completion: July 15, 2023 First Posted: May 26, 2021 Results First Posted: Last Update Posted: September 16, 2022

14	NCT0162 1581	AAV2-GDNF for Advanced Parkinson s Disease Study Documents:	Title Acronym: Other Ids: 120137 12-N-0137	Completed	Parkinson's Disease	Genetic: Convection enhanced delivery/AAV2-GDNF Adeno-Associated Virus Encoding Glial Cell Line-Derived Neurotrophic Factor (AAV2-GDNF) Administered via Bilateral Stereotactic Convection-Enhanced Delivery	Study Type: Interventional Phase: Phase 1 Study Design: Allocation: Non-Randomized Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Assess the safety and tolerability of 4 different dose levels of AAV2-GDNF Secondary Outcome Measures: Obtain preliminary data regarding the potential for clinical responses of the 4 dose levels tested by assessing the magnitude and variability of any treatment effects (via clinical, laboratory and neuroimaging studies).	Actual Enrollment: 25 Estimated Enrollment: Original Estimated Enrollment: 28 Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: March 13, 2013 Primary Completion: February 4, 2022 (Final data collection date for primary outcome measure) Study Completion: February 4, 2022 First Posted: June 18, 2012 Results First Posted: Last Update Posted: September 15, 2022
15	NCT0506 2980	Reqorsa (Quaratusugene Ozeplasmid) in Combination With Pembrolizumab in Previously Treated Non- Small Lung Cancer Study Documents:	Title Acronym: Other Ids: ONC-004	Recruiting	Non Small Cell Lung Cancer	Biological: quaratusugene ozeplasmid Quaratusugene ozeplasmid is an experimental nonviral immunoogene therapy utilizing the TUSC2 gene, designed to target cancer cells by interrupting cell signaling pathways that allow cancer cells to grow, reestablishing pathways that promote cancer cell death and modulating the immune system response against cancer cells. Other Names: GPX-001 Reqorsa Drug: pembrolizumab Pembrolizumab is a programmed death receptor-1 (PD-1) blocking antibody indicated for treatment of patients with metastatic NSCLC. Other Name: Keytruda Drug: docetaxel Docetaxel is a microtubule inhibitor indicated for locally advanced or metastatic NSCLC after platinumbased chemotherapy failure. Drug: ramucirumab Ramucirumab is a human vascular endothelial growth factor receptor 2 (VEGFR2) antagonist indicated for in combination with docetaxel for treatment of NSCLC with disease progression after platinumbased chemotherapy. Other Name: Cyramza	Phase: Phase 1 Phase 2 Study Design: Allocation: Randomized Intervention Model: Sequential Assignment Intervention Model Description: Phase 1: 3+3 dose escalation to identify RP2D followed by a 12 patient dose expansion cohort. Phase 2: Parallel randomization in a 2:1 ratio to either Reqorsa at RP2D in combination with pembrolizumab or docetaxel +/- ramucirumab. Masking: Single (Outcomes Assessor) Masking Description: Tumor responses will be assessed centrally using RECIST 1.1 criteria by an independent radiology group blinded to treatment arm assignment. Primary Purpose: Treatment Primary Outcome Measures: • Maximum Tolerated Dose (MTD) - Phase 1 [Time Frame: up to 3 weeks] Dose limiting toxicity (DLT), defined as any Grade 3 prolonged non-hematological toxicity or Grade 4 prolonged hematological, organ or non-hematological toxicity or any Grade 3 prolonged cytokine release syndrome (CRS) or any Grade 4 CRS occurring during the first cycle of therapy and considered to be possibly, probably, or definitely related to GPX-001. • Progression-free Survival (PFS) - Phase 2 [Time Frame: 24 months] Number of months from randomization to the date of disease progression, confirmed by RECIST v1.1 criteria or to the date of death due to any cause. Secondary Outcome Measures: Not Provided	Actual Enrollment: Estimated Enrollment: 156 Original Estimated Enrollment: Same as current Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: March 30, 2022 Primary Completion: May 2025 (Final data collection date for primary outcome measure) Study Completion: May 2026 First Posted: September 30, 2021 Results First Posted: Last Update Posted: September 13, 2022

16	NCT0553 6973	Safety and Efficacy of ADVM-022 in Treatment- Experienced Patients With Neovascular Age-related Macular Degeneration Study Documents:	Title Acronym: Other Ids: ADVM-022-11	Recruiting	Neovascular Age-related Macular Degeneration	Genetic: ADVM-022 A single IVT injection of 2E11 vg/eye ADVM-022 dose in combination with one (1) of four (4) corticosteroid treatment regimens Genetic: ADVM-022 A single IVT injection of 6E10 vg/eye ADVM-022 dose in combination with one (1) of four (4) corticosteroid treatment regimens	Study Type: Interventional Phase: Phase 2 Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Double (Participant, Investigator) Primary Purpose: Treatment Primary Outcome Measures: Same as current Secondary Outcome Measures: Same as current	Actual Enrollment: Estimated Enrollment: 72 Original Estimated Enrollment: Same as current Age: 50 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Parexel	Study Start: August 23, 2022 Primary Completion: February 2024 (Final data collection date for primary outcome measure) Study Completion: February 2024 First Posted: September 13, 2022 Results First Posted: Last Update Posted: September 13, 2022
17	NCT0000 1405	Recruitment and Apheresis Collection of Peripheral Blood Hematopoietic Stem Cells, Mononuclear Cells and Granulocytes Study Documents:	Title Acronym: Other Ids: 940073 94-I-0073	Recruiting	Granulom a Granulom atous Disease, Chronic Leukocyte Disease Genetic Disease, X-Linked Genetic Disease, Inborn	Not Provided	Study Type: Observational Phase: Study Design: Observational Model: Cohort Time Perspective: Other Primary Outcome Measures: Not Provided Secondary Outcome Measures: Not Provided	Actual Enrollment: Estimated Enrollment: 850 Original Estimated Enrollment: Age: 18 Years to 70 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: February 27, 1994 Primary Completion: Not Provided Study Completion: Not Provided First Posted: November 4, 1999 Results First Posted: Last Update Posted: September 15, 2022

18	NCT0335 4390	HERV-E TCR Transduced Autologous T Cells in People With Metastatic Clear Cell Renal Cell Carcinoma Study Documents:	Title Acronym: Other Ids: 180012 18-H-0012	Recruiting	Kidney Cancer	Biological: cell infusion This is a single-arm, phase 1 trial of HERV-E TCR transduced CD8+/CD34+ T cells in HLA-A*11:01 positive patients with metastatic ccRCC. The study is planned based on a Phase 1 3+3 dose escalation design. The maximum tolerated dose (MTD) is defined as the highest dose at which 0 or 1 patient in six has experienced a dose limiting toxicity (DLT). Patients with evaluable advanced/metastatic ccRCC will be recruited in up to 4 dose levels.	Study Type: Interventional Phase: Phase 1 Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Toxicity [Time Frame: 21 days] Secondary Outcome Measures: Same as current	Actual Enrollment: Estimated Enrollment: 24 Original Estimated Enrollment: Same as current Age: 18 Years to 75 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Loyola University Medical Center (LUMC)	Study Start: July 20, 2018 Primary Completion: April 30, 2024 (Final data collection date for primary outcome measure) Study Completion: December 31, 2032 First Posted: November 28, 2017 Results First Posted: Last Update Posted: September 10, 2022
19	NCT0283 0724	Administering Peripheral Blood Lymphocytes Transduced With a CD70- Binding Chimeric Antigen Receptor to People With CD70 Expressing Cancers Study Documents:	Title Acronym: Other Ids: 160131 16-C-0131	Recruiting	Pancreatic Cancer Renal Cell Cancer Breast Cancer Melanoma Ovarian Cancer	 Drug: Cyclophosphamide For Phase I, Days -7 and -6: Dose Level 1: 15 mg/kg/day x 2 days IV Dose Level 2: 15 mg/kg/day x 2 days IV Dose Level 3: 15 mg/kg/day x 2 days IV Dose Level 4: 15 mg/kg/day x 2 days IV Dose Level 5: 30 mg/kg/day x 2 days IV Dose Level 6: 60 mg/kg/day x 2 days IV For Phase II, Days -7 and -6: 60 mg/kg/day x 2 days IV Drug: Fludarabine For Phase I, Days -7 to -5: Dose Level 1: 25 mg/m(2)/day x 3 days IVPB Dose Level 2: 25 mg/m(2)/day x 3 days IVPB Dose Level 3: 25 mg/m(2)/day x 3 days IVPB Dose Level 4: 25 mg/m(2)/day x 3 days IVPB Dose Level 6: 25 mg/m(2)/day x 5 days IVPB Dose Level 6: 25 mg/m(2)/day x 5 days IVPB For Phase II, Days -7 to -3: 25 mg/m(2)/day x 5 days IVPB Drug: Aldesleukin Aldeskeukin 720,000 IU/kg IV (based on total body weight) over 15 minutes approximately every 8 hours beginning within 24 hours of cell infusion and continuing for up to 3 days (maximum 9 doses). Biological: Anti-hCD70 CAR transduced PBL Day 0: Cells will be infused intravenously on the Patient Care Unit over 20-30 minutes (2-5 days after the last dose of fludarabine). 	Study Type: Interventional Phase: Phase 1 Phase 2 Study Design: Allocation: Non-Randomized Intervention Model: Sequential Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: To determine the safety of administering PBL transduced with this anti-CD70 CAR in concert with preparative lymphodepletion and high dose interleukin-2 (IL-2; aldesleukin) and to mediate regression. [Time Frame: Approximately 5 years] Secondary Outcome Measures: • Determine the in vivo survival of anti-hCD70 CAR transduced cells [Time Frame: Approximately 5 years] • Determine the toxicity of this treatment regimen [Time Frame: Approximately 5 years]	Actual Enrollment: Estimated Enrollment: 124 Original Estimated Enrollment: 113 Age: 18 Years to 70 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: April 6, 2017 Primary Completion: January 1, 2027 (Final data collection date for primary outcome measure) Study Completion: January 1, 2028 First Posted: July 13, 2016 Results First Posted: Last Update Posted: September 15, 2022

20	NCT0554 0964	An Antiretroviral Treatment Interruption(ATI) Study to Evaluate the Impact of AGT103-T to Suppress Human Immunodeficien cy Virus Replication in the Absence of Antiretroviral Therapy Study Documents:	Title Acronym: Other Ids: AGT-HC-169	Enrolling by invitation	HIV	Other: Antiretroviral Therapy Interruption(ATI) Study participant that were previously infused with autologous genetically modified cell product will be taken off ART and followed closely by monitoring HIV rebound.	Study Type: Interventional Phase: Phase 1 Study Design: Allocation: N/A Intervention Model: Single Group Assignment Intervention Model Description: All study participant that consent to the study will be withdrawn from their Antiretroviral Therapy(ART) and monitored closely by clinic visit and laboratory testing of blood sample collected during each visit. Masking: None (Open Label) Primary Purpose: Diagnostic Primary Outcome Measures: Same as current Secondary Outcome Measures: Same as current	Actual Enrollment: Estimated Enrollment: 7 Original Estimated Enrollment: Same as current Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: July 19, 2022 Primary Completion: July 19, 2025 (Final data collection date for primary outcome measure) Study Completion: July 19, 2025 First Posted: September 15, 2022 Results First Posted: Last Update Posted: September 15, 2022
21	NCT0319 0941	Administering Peripheral Blood Lymphocytes Transduced With a Murine T-Cell Receptor Recognizing the G12V Variant of Mutated RAS in HLA- A*11:01 Patients Study Documents:	Title Acronym: Other Ids: 170113 17-C-0113	Recruiting	Pancreatic Cancer Gastric Cancer Gastrointe stinal Cancer Colon Cancer Rectal Cancer	 Drug: Cyclophosphamide Days -7 and -6: Cyclophosphamide 60 mg/kg/day x 2 days IV in 250 mL D5W infused simultaneously with mesna 15 mg/kg/day over 1 hour x 2 days. Drug: Fludarabine Days -7 to -3: Fludarabine 25 mg/m2/day IVPB daily over 30 minutes for 5 days. Biological: Anti-KRAS G12V mTCR PBL Day 0: Cells will be infused intravenously on the Patient Care Unit over 20-30 minutes (2-4 days after the last dose of fludarabine). Drug: Aldesleukin Aldesleukin 720,000 IU/kg IV (based on total body weight) over 15 minutes approximately every 8 hours beginning within 24 hours of cell infusion and continuing for up to 3 days (maximum 9 doses). 	Study Type: Interventional Phase: Phase 1 Phase 2 Study Design: Allocation: Non-Randomized Intervention Model: Sequential Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Response rate [Time Frame: 6 weeks (+/- 2 weeks) after cell infusion, then at week 12, every 3 months x3, every 6 months x2 years.] Maximum Tolerated Dose [Time Frame: End of treatment] Secondary Outcome Measures: Survival and persistence of mTCR gene-engineered cells. [Time Frame: approximately 4-5 years]	Actual Enrollment: Estimated Enrollment: 110 Original Estimated Enrollment: Same as current Age: 18 Years to 70 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: September 21, 2017 Primary Completion: June 29, 2027 (Final data collection date for primary outcome measure) Study Completion: June 29, 2028 First Posted: June 19, 2017 Results First Posted: Last Update Posted: September 14, 2022

22	NCT0554 2615	Prolonged Release Pirfenidone for Advanced Residual Liver Fibrosis (MINERVA). Study Documents:	Title Acronym: Other Ids: MINERVA	Recruiting	Liver Cirrhosis Hepatitis C, Chronic Epigenetic Disorder	Drug: Prolonged-Release Pirfenidone 1200 mg / day of Pirfenidone (KitosCell® LP)	Study Type: Interventional Phase: Phase 2 Study Design: Allocation: N/A Intervention Model: Single Group Assignment Intervention Model Description: This will be a real-life, open-label, proof of concept trial to assess the safety and efficacy of two daily doses of pirfenidone (KitosCell® LP), in patients with compensated liver cirrhosis. Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Same as current Secondary Outcome Measures: Same as current	Actual Enrollment: Estimated Enrollment: 60 Original Estimated Enrollment: Same as current Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Hospital Central Militar CdMX	Study Start: August 1, 2019 Primary Completion: January 1, 2023 (Final data collection date for primary outcome measure) Study Completion: December 1, 2023 First Posted: September 15, 2022 Results First Posted: Last Update Posted: September 15, 2022
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Monotherapy and RP3 in Combination With Nivolumab in Patients With Solid Tumours Study Documents: Other Ids: RP3- 301 Other Ids: RP3- 301 Other Ids: RP3- 301 Phase: Phase 1 Study Design: Allocation: Non-Randomized Intervention Model: Sequential Assignment Intervention Model Description: Part 1 - Dose Escalation - Participants will be enrolled into two sequential dose level cohorts. Study Documents: • Cohort 1: 1 × 105 plaque-forming units (PFU)/mL on Day 1 followed by 1 × 106 PFU/mL every 2 weeks and older	23	NCT0473	Study of RP3	Title Acronym:	Recruiting	Advanced Solid	Biological: RP3	Study Type: Interventional	Actual
With Problems in the Control of the		5978				Tumor		Phase: Phase 1	
Content 13 x 105 stages, estimating and per style of the period of the p			Combination With Nivolumab in Patients With	301				Intervention Model: Sequential Assignment Intervention Model Description: Part 1 - Dose Escalation - Participants will be enrolled	Enrollment: Original Estimated
Part 2 - Done Constituents on Validation will be consided unto a 1 of 5 done expansion colorum 5, 12, and 4 well entrol patterns with head and neck cancer, lung will constituent with such and misch, cancer, lung will constituent with a world done and patterns with sould and misch cancer, lung will constituent with a world constituent with most of long and inglusce who have at local 2 manns that can be injected and hopsingly. Expansion Colorum 5 (1941) Novolumanh. - Figuration Colorum 6 (1941) Novolumanh Figuration Colorum 7 (1941) Novolumanh) - Eleganation Colorum 7 (1941) Novolumanh) - Eleganation Colorum 7 (1942) Novolumanh of Medium Pattern 1942 Novolumanh of Medium 1942 Novolumanh of			•					 Cohort 1: 1 × 105 plaque-forming units (PFU)/mL on Day 1 followed by 1 × 106 PFU/mL every 2 weeks (Q2W) for up to 5 doses. 	Age: 18 Yea and older (Adult, Olde
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Expansion Colora? (2019 Followed by Nevolumab) Fepansion Colora? (APP) Monotherapy Expansion Colora? (APP) Monotherapy Fepansion Colora? (APP) Mivolumab in Melanoma) Macking: Nume (Open Label) Primary Outcome Measures: Some an current Secondary Outcome Measures: Some an current Secondary Outcome Measures: Some an current Secondary Outcome Measures: Recentage of Mologia activity I'm. France: From Day I to 10 and soft following the last does in does esculation. From Day I to 100 days following the last does in does containation. From Day I to 100 days following the last does in does containation. From Day I to 100 days following the last does in does containation. Percentage of participants with biological activity as assessed by individual mumor response (including evylteem, mecrosis, and/or inflammation and changes in tumor states, in agricultural mumors). Incidence of cleanance of REF from blood and unite [Time Frame: From Day I to 0 days following the last does in does contain the contained of th								• Expansion Cohort 1 (RP3 + Nivolumab)	
Cohurt) Expansion Cohort 4 (RP3 Monotherapy) Expansion Cohort 4 (RP3 Monotherapy) Expansion Cohort 5 (RP3 - Nivolumab in Melanoma) Maksing, None (Open Label) Primary Purpose: Treatment Primary Ontorome Measures: Secondary Ontorome Measures: Peremage of biologic activity. Time Frame: I vom Day I to 12 months following the last does in does cetalation. I van 10th 10th 10th 10th 10th 10th 10th 10th									
Beganning Coloro 5 (RP3 + Nivoluma) in Melanoma) Maskings None (Open Label) Primary Purpose Treatment Primary Outcome Measures: Prementings of biologic activity Time Frame: From Day I to 21 months following the last does in does esclation. From Day I to 10 days following the last does in does cumbination Prementings of participants with biological activity as assessed by individual tumor responses (including crybtems, accross, and/or inflammation and changes in numerates in support of the participants with biological activity as assessed by individual tumor responses (including crybtems, accross, and/or inflammation and changes in numerates in support of the participants with biological activity as assessed by individual tumor responses (including crybtems, accross, and/or inflammation and changes in numerates in support of the participants with participants with design in the participants of the participa									
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Percentage of biologic activity [Time Frame: From Day I to 12 months following the last dose in dose ecantion. From Day I to (100 days following the last dose in dose combination] Percentage of participants with biological activity as assessed by individual rumor responses (including erythema, necross, and/or inflammation and changes in tumor stars, in injected and uninjected fumors). Incidence of learnance (RPS from blood and urine [Time Frame: From Day I to 600 days following the last dose in dose escalation. From Day I to 100 days following the last dose in dose escalation from Day I to 100 days following the last dose in dose of participants with detectable RP3. [Time Frame: From Day I to 600 days following the last dose in dose of participants with detectable RP3. [Time Frame: From Day I to 600 days following the last dose in dose of the dose in dose excalation. From Day I to 100 days following the last dose in dose excalation. From Day I to 100 days following the last dose in dose combination] Data gathered from blood, urine, swabs of injection site, dressing and oral mucosa to determine the shedding and biodistribution of RP3 • Change in IRSV 1 antibody levels [Time Frame: From Day I to Day 43] Change in IRSV 1 antibody levels during treatment compared to baseline • Percentage of RRV1 arronegative patients with TLALis [Time Frame: From Day I to Day 1 to 100 days post last dose in dose combination] • Percentage of lastV-1 seronegative patients with TEALis Frame Frame: From Day I to post patients with TEALis Percentage of objective overall response rate (ORR) I								Primary Outcome Measures: Same as current	
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before and after each injection Percentage of participants with detectable RP3. [Time Frame: From Day 1 to 60 days following the last dose in dose escalation. From Day 1 to 100 days following the last dose in dose combination] Data gathered from blood, urine, swabs of injection site, dressing and oral mucosa to determine the shedding and biodistribution of RP3 Change in HSV-1 antibody levels [Time Frame: From Day 1 to Day 1 to Day 4 4 3] Change in HSV-1 antibody levels during treatment compared to baseline Percentage of HSV-1 seronegative patients with TEAEs [Time Frame: From Day 1 to 60 days following last dose in dose escalation. From Day 1 to 100 days post last dose in dose combination] Percentage of HSV-1 seronegative patients with TEAEs Percentage of HSV-1 seronegative patients with TEAEs								Time Frame: From Day 1 to 60 days following the last dose in dose escalation. From Day 1 to 100 days	
Frame: From Day 1 to 60 days following the last dose in dose escalation. From Day 1 to 100 days following the last dose in dose combination] Data gathered from blood, urine, swabs of injection site, dressing and oral mucosa to determine the shedding and biodistribution of RP3 • Change in HSV-1 antibody levels [Time Frame: From Day 1 to Day 43] Change in HSV-1 antibody levels during treatment compared to baseline • Percentage of HSV-1 seronegative patients with TEAEs [Time Frame: From Day 1 to 60 days following last dose in dose escalation. From Day 1 to 100 days post last dose in dose combination] Percentage of HSV-1 seronegative patients with TEAEs • Percentage of Objective overall response rate (ORR) [
dressing and oral mucosa to determine the shedding and biodistribution of RP3 • Change in HSV-1 antibody levels [Time Frame: From Day 1 to Day 43] Change in HSV-1 antibody levels during treatment compared to baseline • Percentage of HSV-1 seronegative patients with TEAEs [Time Frame: From Day 1 to 60 days following last dose in dose escalation. From Day 1 to 100 days post last dose in dose combination] Percentage of HSV-1 seronegative patients with TEAEs • Percentage of objective overall response rate (ORR) [Frame: From Day 1 to 60 days following the last dose in dose escalation. From Day 1 to 100 days following the	
Day 1 to Day 43] Change in HSV-1 antibody levels during treatment compared to baseline Percentage of HSV-1 seronegative patients with TEAEs [Time Frame: From Day 1 to 60 days following last dose in dose escalation. From Day 1 to 100 days post last dose in dose combination] Percentage of HSV-1 seronegative patients with TEAEs Percentage of objective overall response rate (ORR) [dressing and oral mucosa to determine the shedding and	
Change in HSV-1 antibody levels during treatment compared to baseline • Percentage of HSV-1 seronegative patients with TEAEs [Time Frame: From Day 1 to 60 days following last dose in dose escalation. From Day 1 to 100 days post last dose in dose combination] Percentage of HSV-1 seronegative patients with TEAEs • Percentage of objective overall response rate (ORR) [
 Percentage of HSV-1 seronegative patients with TEAEs [Time Frame: From Day 1 to 60 days following last dose in dose escalation. From Day 1 to 100 days post last dose in dose combination] Percentage of HSV-1 seronegative patients with TEAEs Percentage of objective overall response rate (ORR) [Change in HSV-1 antibody levels during treatment	
• Percentage of objective overall response rate (ORR) [Percentage of HSV-1 seronegative patients with TEAEs [Time Frame: From Day 1 to 60 days following last dose in dose escalation. From Day 1 to 100 days post 	
								Percentage of HSV-1 seronegative patients with TEAEs	
Percentage of ORR								Time Frame: Up to 3 years since first patient in]	

Actual Enrollment:

Estimated Enrollment: 123

Original Estimated Enrollment: 48 Age: 18 Years

Study Sponsors:

Bristol-Myers Squibb

Same as current Collaborators:

Primary Completion: April 2024 (Final data collection date for primary outcome measure)

Study Start: December 29,

2020

Study Completion: April 2024

First Posted: February 3, 2021

Results First Posted:

Last Update Posted: September 16, 2022

24	NCT0206 2827	Genetically Engineered HSV-1 Phase 1 Study for the Treatment of Recurrent Malignant Glioma Study Documents:	Title Acronym: Other Ids: UAB-1317	Active, not recruiting	Recurrent Glioblasto ma Multiform e Progressiv e Glioblasto ma Multiform e Anaplastic Astrocyto ma or Gliosarco ma	Biological: M032 (NSC 733972) A single dose of HSV-1 (M032) infused through catheters into region(s) of tumor defined by MRI	Study Type: Interventional Phase: Phase 1 Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Same as current Secondary Outcome Measures: Same as current	Actual Enrollment: 24 Estimated Enrollment: Original Estimated Enrollment: 36 Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: November 25, 2013 Primary Completion: September 2023 (Final data collection date for primary outcome measure) Study Completion: September 2024 First Posted: February 14, 2014 Results First Posted: Last Update Posted: September 16, 2022
25	NCT0524 3017	Safety and Efficacy of AMT-130 in European Adults With Early Manifest Huntington's Disease Study Documents:	Title Acronym: Other Ids: CT-AMT-130-02	Recruiting	Huntington Disease	Genetic: intra-striatal rAAV5-miHTT One time MRI-guided stereotaxic infusion of rAAV5-miHTT into the brain Other Name: AMT-130	Study Type: Interventional Phase: Phase 1 Phase 2 Study Design: Allocation: Non-Randomized Intervention Model: Sequential Assignment Intervention Model Description: The first cohort will be treated with low dose, and a total of 6 enrolled participants is anticipated. The second cohort will be treated with high dose, and a total of 9 enrolled participants is anticipated. Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: Same as current Secondary Outcome Measures: Same as current	Actual Enrollment: Estimated Enrollment: 15 Original Estimated Enrollment: Same as current Age: 25 Years to 65 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: October 7, 2021 Primary Completion: March 2027 (Final data collection date for primary outcome measure) Study Completion: October 7, 2027 First Posted: February 16, 2022 Results First Posted: Last Update Posted: September 14, 2022

26	NCT0376 7348	Study of RP1 Monotherapy and RP1 in Combination With Nivolumab Study Documents:	Title Acronym: Other Ids: RPL- 001-16	Recruiting	Cancer Melanoma (Skin) Mismatch Repair Deficiency Microsatel lite Instability Non- melanoma Skin Cancer Cutaneous Melanoma NSCLC NSCLC	Biological: RP1 Genetically modified herpes simplex type 1 virus Biological: nivolumab anti-PD-1 monoclonal antibody Other Name: Opdivo	Study Type: Interventional Phase: Phase 2 Study Design: Allocation: Non-Randomized Intervention Model: Parallel Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: • % subjects with adverse events (AEs) [Time Frame: 26 months] • % subjects with serious adverse events (AEs) [Time Frame: 26 months] • % subjects with dose limiting toxicities (DLTs) [Time Frame: 26 months] • % subjects with overall response (OR) [Time Frame: 26 months] • Maximum tolerated dose (MTD) and recommended Phase 2 dose (RP2D) of RP1 [Time Frame: 20 weeks] Secondary Outcome Measures: • % subjects with biologic activity [Time Frame: 20 weeks] Secondary Outcome Measures: • % subjects with detectable RP1 [Time Frame: 20 weeks] Blood, urine, swabs of injection site, dressing, oral mucosa • % subjects with complete response [Time Frame: 26 months] • median duration of response [Time Frame: 26 months] • median progression free survival [Time Frame: 26 months]	Actual Enrollment: Estimated Enrollment: 300 Original Estimated Enrollment: 168 Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: September 20, 2017 Primary Completion: November 2024 (Final data collection date for primary outcome measure) Study Completion: November 2024 First Posted: December 6, 2018 Results First Posted: Last Update Posted: September 10, 2022
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