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	NCT Number Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
1	NCT0411 5345  A Study of a Renal Autologous Cell Therapy (REACT®) in Patients With Chronic Kidney Disease (CKD) From Congenital Anomalies of the Kidney and Urinary Tract (CAKUT).  Study Documents:	Title Acronym: Other Ids: REGEN-004	Recruiting	Chronic Kidney Disease     Congenital Anomalies of Kidney and Urinary Tract	Biological: Renal Autologous Cell Therapy (REACT®) Autologous selected renal cells (SRC)	Phase: Phase 1  Study Design: Allocation: N/A Intervention Model: Single Group Assignment Intervention Model Description: Open-label Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: Assess change in eGFR and observe incidence of renal-specific procedure and/or product related adverse events (AEs) through 24 months following two Renal Autologous Cell Therapy (REACT) injections [Safety]. [Time Frame: 12 months following last REACT injection ] The primary objective is to assess the safety and optimal delivery of Renal Autologous Cell Therapy (REACT) injected at one site in a recipient kidney as measured by procedure-and/or product related adverse events (AEs) through 12 months post-treatment.  Secondary Outcome Measures: Number of subjects with renal-specific adverse events over a 24-month period following injection of Renal Autologous Cell Therapy (REACT). [Time Frame: 24 months following last REACT injection ] The number of subjects with renal-specific adverse events over a 24-month period following injection of Renal Autologous Cell Therapy (REACT) will be observed utilizing renal-specific laboratory assessments. The secondary objective will compare the results of laboratory tests from baseline through 12 months following REACT injection, followed by an additional observational period of 18 months for a total of 24 months of observation. Each subject's baseline rate of CKD disease progression serves as his/her own "control" to monitor for changes in renal insufficiency over time.	Actual Enrollment: Estimated Enrollment: 15 Original Estimated Enrollment: Same as current Age: 18 Years to 65 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current  Collaborators: CTI Clinical Trial and Consulting Services	Study Start: August 13, 2019  Primary Completion: March 31, 2023 (Final data collection date for primary outcome measure)  Study Completion: May 30, 2023  First Posted: October 4, 2019  Results First Posted: Last Update Posted: September 16, 2022
2	NCT0523 7986  Cognitive Aftereffects of Neurotoxicity in Children and Young Adults With Relapsed/Refract ory Hematologic Malignancies Who Receive CAR T-cell Therapy  Study Documents:	Title Acronym:  Other Ids: 10000631 000631-C	Not yet recruiting	Lymphom     a     Leukemia	Not Provided	Study Type: Observational Phase:  Study Design: Observational Model: Cohort Time Perspective: Prospective  Primary Outcome Measures: Same as current  Secondary Outcome Measures: Same as current	Actual Enrollment:  Estimated Enrollment: 60  Original Estimated Enrollment: Same as current  Age: 5 Years and older (Child, Adult, Older Adult)  Sex: All	Study Sponsors:  Same as current  Collaborators: Not Provided	Study Start: September 26, 2022  Primary Completion: April 30, 2024 (Final data collection date for primary outcome measure)  Study Completion: April 30, 2025  First Posted: February 14, 2022  Results First Posted: Last Update Posted: September 21, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborat	Dates
3	NCT0463 7763	CRISPR-Edited Allogeneic Anti- CD19 CAR-T Cell Therapy for Relapsed/Refract ory B Cell Non- Hodgkin Lymphoma Study Documents:	Title Acronym: Other Ids: CB10A	Recruiting	<ul> <li>Lymphom <ul> <li>a, Non-Hodgkin</li> </ul> </li> <li>Relapsed <ul> <li>Non Hodgkin Lymphom <ul> <li>a</li> </ul> </li> <li>Refractory <ul> <li>B-Cell Non-Hodgkin Lymphom <ul> <li>a</li> <li>Lymphom</li> <li>a</li> </ul> </li> <li>Lymphom <ul> <li>a</li> <li>Egll Lymphom</li> <li>a</li> </ul> </li> <li>B Cell Lymphom <ul> <li>a</li> <li>B Cell Non-Hodgkin's Lymphom</li> <li>a</li> </ul> </li> </ul></li></ul></li></ul>	Genetic: CB-010     CB-010 is a CRISPR-edited allogeneic CAR-T cell therapy targeting CD19.      Drug: Cyclophosphamide     Chemotherapy for lymphodepletion      Drug: Fludarabine     Chemotherapy for lymphodepletion	Study Type: Interventional  Phase: Phase 1  Study Design: Allocation: Non-Randomized Intervention Model: Sequential Assignment Intervention Model Description:  The CB10A clinical study consists of 3 + 3 design with three dose levels.  Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: Same as current  Secondary Outcome Measures: Not Provided	Actual Enrollment:  Estimated Enrollment: 50  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: May 26, 2021  Primary Completion: August 2025 (Final data collection date for primary outcome measure)  Study Completion: September 2025  First Posted: November 20, 2020  Results First Posted: Last Update Posted: September 19, 2022
4	NCT0554 1549	A Phase 2 Study Evaluating JCPyV-specific T Cell Therapy for PML Study Documents:	Title Acronym: Other Ids: 20210001	Not yet recruiting	Progressive Multifocal Leukoencephalo pathy	Biological: CE-VST01-JC CE-VST01-JC at a dose of 1 × 10^8 cells administered as an intravenous (IV) infusion every 28 days for 4 total infusions	Study Type: Interventional  Phase: Phase 2  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description:     randomized, double- blinded, Phase 2 trial in patients with PML due to JCPyV.  Masking: Triple (Participant, Care Provider, Investigator) Primary Purpose: Treatment  Primary Outcome Measures: To evaluate the effect of CE-VST01-JC on time to disease progression, as measured by mRS (modified Rankin Score) [ Time Frame: 1 year ] Time to progression as measured by mRS. A progression event is defined as an increase of 2 points on mRS attributable to disease progression* that is durable (not reversed over two consecutive measurements, at least 14 days apart), or an increase to mRS of 5 or 6 (severe disability or death, respectively).  Secondary Outcome Measures: Not Provided	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: Not Provided	Study Start: February 2023  Primary Completion: March 2024 (Final data collection date for primary outcome measure)  Study Completion: April 2025  First Posted: September 15, 2022  Results First Posted: Last Update Posted: September 16, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborat ors	Dates
5	NCT0444 5454	Mesenchymal Stromal Cell	Title Acronym: Other Ids:	Recruiting	Coronavirus Infection	Biological: Mesenchymal stromal cells  Bone marrow collection and MSC expansion cultures will	Study Type: Interventional Phase: Phase 1	Actual Enrollment:	Study Sponsors: Same as current	Study Start: June 12, 2020
		Therapy for Severe Covid- 19 Infection	TJT2012			be carried out at the Laboratory of Cell and Gene Therapy (LTCG) at the University of Liège as described in IMPD and its SOPs.	Phase 2  Study Design: Allocation: N/A	Estimated Enrollment: 20	Collaborators: Not Provided	Primary Completion:
		Study Documents:				Other Name: MSC	Intervention Model: Single Group Assignment Intervention Model Description:  This study is a monocentric prospective phase I/II clinical trial, aiming at evaluating the safety and efficacy of 3 intravenous administrations of BM-MSC in 20 patients	Original Estimated Enrollment: Same as current		September 30, 2024 (Final data collection date for primary outcome
							with severe to critical COVID-19 pneumonia.  Masking: None (Open Label)  Primary Purpose: Treatment	Age: 18 Years to 70 Years (Adult, Older Adult)		Study Completion:
							Primary Outcome Measures: Same as current	Sex: All		September 30, 2024
							Secondary Outcome Measures: Same as current	Sex. Thi		First Posted: June 24, 2020
										Results First Posted:
										Last Update Posted: September 21, 2022
6	NCT0459	Clinical Trial	Title Acronym:	Recruiting	• CD7+	Biological: anti-CD7 CAR-T	Study Type: Interventional	Actual	Study Sponsors:	Study Start:
	9556	for the Safety and Efficacy of Anti-CD7 CAR-	Other Ids: CD7- 001		Acute Leukemia	Lymphodepleting chemotherapy followed by anti-CD7 CAR-T infusion	Phase: Phase 1 Phase 2	Enrollment:  Estimated	Same as current Collaborators:	November 20, 2021
		T Cell Therapy for Patients With Relapsed or Refractory CD7 Positive			• CD7+ Lymphom a		Study Design: Allocation: Non-Randomized Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment	Enrollment: 108 Original Estimated Enrollment:	Yake Biotechnology Ltd.	Primary Completion: December 2022 (Final data collection
		Hematological Malignancy					Primary Outcome Measures: Same as current	Same as current		date for primary outcome
		Study					Secondary Outcome Measures: Not Provided	Age: 3 Years to 80 Years		measure)
		Documents:						(Child, Adult, Older Adult) Sex: All		Study Completion: December 2023
										First Posted: October 22, 2020
										Results First Posted:
										Last Update Posted: September 21, 2022

NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collabora ors	<b>Dates</b>	
NCT0435 9784	Anakinra for the Prevention of	Title Acronym:	Recruiting	B-Cell Non- Hodgkin	Biological: Anakinra Given SC	Study Type: Interventional	Actual Enrollment:	Study Sponsors: Same as current	Study Start: December 27	
	Cytokine Release	Other Ids: RG1006866		Lymphoma	Other Names:	Phase: Phase 2	Estimated	Collaborators:	2021	
	Syndrome and	NCI-2020-			<ul><li> Kinaret</li><li> Kineret</li></ul>	Study Design: Allocation: N/A Intervention Model: Single Group Assignment	Enrollment: 25	Swedish Orphan	Primary	
	Neurotoxicity in Patients With B-	01861 (Registry Identifier:			• rIL-1ra	Masking: None (Open Label)	Original	Biovitrum	Completion March 3, 2	
	Cell Non- Hodgkin	CTRP (Clinical Trial Reporting			• rIL1RN • 143090-92-0	Primary Purpose: Prevention	Estimated Enrollment:		(Final data collection	
	Lymphoma	Program))	Primary Outcome Measures: Absence of any grade cytokine	Same as current	<u>t</u>	for primar				
	Receiving CD19-Targeted	10373 (Other Identifier: Fred		release syndrome (CRS) [ Time Frame: Up to 90 days after axicabtagene ciloleucel (Axi-cell) infusion ]	Age: 18 Years and older		outcome measure)			
	CAR-T Cell Therapy	Hutch/University of Washington				Will assess the efficacy of anakinra in preventing the occurrence of any grade CRS using the Bayesian optimal phase	(Adult, Older		Study	
	C	Cancer Consortium )				2 design. Assessed based on the ASTCT Consensus Grading for CRS and Neurotoxicity Associated with Immune Effector	Adult)		Completion March 3, 2	
		Consortium )				Cell.	Sex: All		First Poste	
						Secondary Outcome Measures:			April 24, 2	
						<ul> <li>CRS grade [ Time Frame: Up to 90 days after Axi-cell infusion ]</li> </ul>			Results Fin Posted:	
							Graded according to the American Society for Transplantation and Cellular Therapy (ASTCT)			Last Upda
							Consensus Grading for CRS and Neurotoxicity Associated with Immune Effector Cell.			Posted: September
				<ul> <li>Neurotoxicity grade [ Time Frame: Up to 90 days after Axi-cell infusion ]</li> </ul>			2022			
						Graded according to the American Society for				
						Transplantation and Cellular Therapy (ASTCT) Consensus Grading for CRS and Neurotoxicity				
						Associated with Immune Effector Cell.  • Disease response to Axi-cel [ Time Frame: At 28 and 90				
						days after Axi-cell infusion ]				
						Objective responses to the therapeutic regimen will be assessed based on institutional standard using physical				
						examination, imaging (CT or PET-CT), and if necessary, bone marrow biopsies.				
					Adverse events (AEs) [ Time Frame: Within 28 days after Axi-cell infusion ]					
						Graded according to the National Cancer Institute				
						Common Terminology Criteria for Adverse Events version 5.0.				

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborat	Dates
8	NCT0369 6030	HER2-CAR T Cells in Treating Patients With Recurrent Brain or Leptomeningeal Metastases Study Documents:	Title Acronym:  Other Ids: 17237 NCI-2018- 01270 ( Registry Identifier:     CTRP (Clinical Trial Reporting Program) ) 17237 ( Other Identifier: City of Hope Medical Center )	Recruiting	Malignant Neoplasm     Metastatic Malignant Neoplasm in the Brain     Metastatic Malignant Neoplasm in the Leptomeni nges     Breast Cancer     HER2-positive Breast Cancer	Biological: Chimeric Antigen Receptor T-Cell Therapy Given HER2-CAR T cells via intraventricular administration Other Names:  • CAR T Infusion • CAR T Therapy • CAR T-cell therapy • Chimeric Antigen Receptor T-cell Infusion	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:  • Incidence of dose limiting toxicities (DLTs) [ Time Frame: 21 days post T cell infusion ] Rate and associated 90% Clopper and Pearson binomial confidence limits (90% CJ) will be estimated for participants experiencing DLTs at the recommended phase 2 dose schedule.  • Number of participants with treatment related adverse events as assessed by CTCAE v5.0. [ Time Frame: Up to 15 years ] Tables will be created to summarize all toxicities and side effects by dose, time post treatment, organ, severity and arm.  Secondary Outcome Measures:  • HER2-CAR T cells in cerebrospinal fluid (CSF) and peripheral blood [ Time Frame: Measured over time from baseline through 1 year, the number of measurements is determined by whether or not the participant has progressed (progressed: baseline, 1, 3, 6, and 12 months, not progressed: baseline, 1, 3, 6, and 12 months, not progressed: baseline, 1, 3, 6, 3,	Actual Enrollment:  Estimated Enrollment: 39  Original Estimated Enrollment: 21  Age: 18 Years to 75 Years (Adult, Older Adult)  Sex: All	Study Sponsors: Same as current  Collaborators: National Cancer Institute (NCI) California Institute for Regenerati ve Medicine (CIRM)	Study Start: August 31, 2018  Primary Completion: August 31, 2023 (Final data collection date for primary outcome measure)  Study Completion: August 31, 2023  First Posted: October 4, 2018  Results First Posted: Last Update Posted: September 16, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborat	Dates
9	NCT0513 5091	FIH Study of NRTX-1001 Neural Cell Therapy in Drug-Resistant Unilateral Mesial Temporal Lobe Epilepsy Study Documents:	Title Acronym: Other Ids: NTE001	Recruiting	Mesial Temporal Lobe Epilepsy With Hippocampal Sclerosis	Biological: NRTX-1001 is an experimental neural cell therapy product candidate derived from an allogeneic human embryonic stem cell line. The stem cells were converted into inhibitory nerve cells that produce GABA.  Other Name: GABA-secreting interneurons  Procedure: Sham Comparator Sham Comparator.	Phase: Phase 1 Phase 2  Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description:  This is a two-stage study. Stage 1 is an open-label, single arm, sequential dose escalation. Stage 2 is a parallel, randomized, 2-arm, sham controlled study.  Masking: Triple (Participant, Investigator, Outcomes Assessor) Masking Description:  This is a two-stage study. Stage 1 is open-label and unmasked. Stage 2 is masked with participant, part of investigator team, and outcomes assessor masked to treatment assignment.  Primary Purpose: Treatment  Primary Outcome Measures: Same as current  Secondary Outcome Measures: Same as current	Actual Enrollment:  Estimated Enrollment: 40  Original Estimated Enrollment: Same as current  Age: 18 Years to 55 Years (Adult)  Sex: All	Study Sponsors: Same as current  Collaborators: California Institute for Regenerative Medicine (CIRM)	Study Start: June 16, 2022  Primary Completion: May 2025 (Final data collection date for primary outcome measure)  Study Completion: May 2026  First Posted: November 26, 2021  Results First Posted: Last Update Posted: September 21, 2022
10	NCT0382 7343	Retrospective Study of Immunotherapy Related Toxicities in Children and Adults With Cancer Study Documents:	Title Acronym: Other Ids: 999919044 19-C-N044	Active, not recruiting	Macropha ge     Activation Syndrome     Primary Hemophag ocytic Lymphohi stiocytosis	Not Provided	Study Design: Observational Model: Cohort Time Perspective: Retrospective  Primary Outcome Measures: To develop a retrospective study to allow for comparison of immunotherapy related toxicity profiles and risk factors across a set of protocols in the NCI. [ Time Frame: 2 years ]  To develop a retrospective study to allow for comparison of immunotherapy related toxicity profiles and risk factors across a set of protocols in the NCI  Secondary Outcome Measures:  • Evaluate the incidence, risk factors for, and treatment of HLH/MAS in patients who receive CAR-T cell therapy [ Time Frame: 2 years ]  Evaluate the incidence, risk factors for, and treatment of HLH/MAS in patients who receive CAR-T cell therapy  • Evaluate infectious complications and their risk factors in patients who receive CAR-T cell therapy for cancer [ Time Frame: 2 years ]  Evaluate infectious complications and their risk factors in patients who receive CAR-T cell therapy for cancer [ Time Frame: 2 years ]	Actual Enrollment: 500  Estimated Enrollment:  Original Estimated Enrollment:  Same as current  Age: 1 Month and older (Child, Adult, Older Adult)  Sex: All	Study Sponsors:  Same as current  Collaborators: Not Provided	Study Start: January 23, 2019  Primary Completion: December 31, 2025 (Final data collection date for primary outcome measure)  Study Completion: December 31, 2025  First Posted: February 1, 2019  Results First Posted: Last Update Posted: September 21, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborat	Dates
11	NCT0505 0006	ITIL-168 in Advanced Melanoma  Study Documents:	Title Acronym: Other Ids: ITIL- 168-101 2020-003862-37 ( EudraCT Number )	Recruiting	Advanced Cutaneous Melanoma	Biological: ITIL-168 ITIL-168 is a cell therapy product derived from a patient's own TILs. A tumor sample is removed from each patient to make a personalized ITIL-168 product. Once ITIL-168 has been made, the patient is treated with 5 days of lymphodepleting chemotherapy including cyclophosphamide and fludarabine, followed by a single infusion of ITIL-168, and up to 8 doses of IL-2.	Study Type: Interventional  Phase: Phase 2  Study Design: Allocation: Non-Randomized Intervention Model: Parallel Assignment Intervention Model Description:  All enrolled participants are assigned to be treated with a single dose of ITIL-168 Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: Same as current  Secondary Outcome Measures: Same as current	Actual Enrollment:  Estimated Enrollment: 130  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: October 7, 2021  Primary Completion: March 2024 (Final data collection date for primary outcome measure)  Study Completion: August 2028  First Posted: September 20, 2021  Results First Posted: Last Update Posted: September 16, 2022
12	NCT0554 6723	LMY-920 for Treatment of Relapsed or Refractory Myeloma  Study Documents:	Title Acronym:  Other Ids: LMY- 920-002 LUMT1A22 ( Other Identifier: Cleveland Clinic Taussig Cancer Institute )	Not yet recruiting	Multiple Myeloma, Refractory     Multiple Myeloma in Relapse	Biological: Autologous CAR-T cell therapy expressing the BAFF-ligand. LMY-920	Study Type: Interventional  Phase: Phase 1  Study Design: Allocation: N/A Intervention Model: Sequential Assignment Intervention Model Description:  Open label, dose escalation study with up to four dose levels of LMY-920. The maximum tolerated dose (MTD) of LMY-920 will be determined using dose-escalation 3+3 design.  Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: Same as current  Secondary Outcome Measures: Same as current	Actual Enrollment:  Estimated Enrollment: 30  Original Estimated Enrollment: Same as current  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors:  Same as current  Collaborators:  The Cleveland Clinic  Case Western Reserve University	Study Start: November 1, 2022  Primary Completion: October 31, 2024 (Final data collection date for primary outcome measure)  Study Completion: December 31, 2024  First Posted: September 21, 2022  Results First Posted: Last Update Posted: September 21, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborat	Dates
13	NCT0231 5599	Follow-Up Evaluation for Gene-Therapy- Related Delayed Adverse Events After Participation in Pediatric Oncology Branch Clinical Trials Study Documents:	Title Acronym:  Other Ids: 150028 15-C-0028	Enrolling by invitation	Pediatric Cancers     Hematolog ic Malignanc ies     Solid Tumors	Not Provided	Study Design: Observational Model: Cohort Time Perspective: Prospective  Primary Outcome Measures: Conduct long term safety evaluations after gene therapy [ Time Frame: Every 3 months X 1 year then annually X 15 years ]  Secondary Outcome Measures: Not Provided	Actual Enrollment:  Estimated Enrollment: 500  Original Estimated Enrollment: Same as current  Age: 1 Year to 99 Years (Child, Adult, Older Adult)  Sex: All	Study Sponsors:  Same as current  Collaborators: Not Provided	Study Start: December 23, 2014  Primary Completion: April 1, 2035 (Final data collection date for primary outcome measure)  Study Completion: August 1, 2050  First Posted: December 12, 2014  Results First Posted: Last Update Posted: September 21, 2022
14	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

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collabora ors	Dates
15	NCT0547	<u>Dual-targeting</u>	Title Acronym:	Recruiting	Malignant	Biological: Dual-targeting VEGFR1 and PD-L1 CAR-T	Study Type: Interventional	Actual	Study Sponsors:	Study Start:
	7927	VEGFR1 and PD-L1 CAR-T	Other Ids: MCART-006		Peritoneal Effusion	cells  In the dose escalation part, the dose levels will be escalated	Phase: Phase 1	Enrollment:  Estimated	Same as current Collaborators:	October 30, 2022
		for Cancers Patients With	MCART-000		Malignant	following a traditional escalation scheme for 3+3 design.  In the dose expansion part, patients will be assigned to	Study Design: Allocation: N/A Intervention Model: Single Group Assignment	Enrollment: 58	Not Provided	Primary
		Pleural or Peritoneal Metastases			Ascites • Serous Cavity	different groups based on pleural or peritoneal metastases condition.	Masking: None (Open Label) Primary Purpose: Treatment	Original Estimated		Completion: December 31, 2024 (Final
		Study			Metastatis es		Primary Outcome Measures: Same as current	Enrollment: Same as current		data collection date for primary
		Documents:			CS		Secondary Outcome Measures: Same as current	Age: 18 Years to 65 Years		outcome measure)
								(Adult, Older Adult)		Study Completion:
								Sex: All		December 31, 2024
										First Posted: July 28, 2022
										Results First Posted:
										Last Update Posted: September 19, 2022
16	NCT0000	Recruitment and	Title Acronym:	Recruiting	Granulom	Not Provided	Study Type: Observational	Actual	Study Sponsors:	Study Start:
	1405	Apheresis Collection of	Other Ids:		a		Phase:	Enrollment:	Same as current	February 27, 1994
		Peripheral Blood Hematopoietic	940073 94-I-0073		<ul> <li>Granulom atous Disease,</li> </ul>		Study Design: Observational Model: Cohort Time Perspective: Other	Estimated Enrollment: 850	Collaborators: Not Provided	Primary Completion:
		Stem Cells, Mononuclear			Chronic  • Leukocyte		Primary Outcome Measures: Not Provided	Original Estimated		Not Provided
		Cells and Granulocytes			Disease  Genetic		Secondary Outcome Measures: Not Provided	Age: 18 Years		Study Completion: Not Provided
		Study Documents:			Disease, X-Linked • Genetic			to 70 Years (Adult, Older Adult)		First Posted: November 4, 1999
					Disease, Inborn			Sex: All		Results First Posted:
										Last Update Posted: September 19, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
17	NCT0506 8674	Human Embryonic Stem Cell- Derived Cardiomyocyte Therapy for Chronic Ischemic Left Ventricular Dysfunction Study Documents:	Title Acronym: Other Ids: 60978	Recruiting	Chronic Ischemic Left Ventricular Dysfunction	<ul> <li>Drug: Human Embryonic Stem Cell-Derived Cardiomyocyte 50M cells 50 million (M) cells delivered in a dose of 5M cells per injection over 10 injections. Other Name: Human ESC-CMs</li> <li>Drug: Human Embryonic Stem Cell-Derived Cardiomyocyte 150 cells 150M cells delivered in a dose of 15M cells per injection over 10 injections Other Name: Human ESC-CMs</li> <li>Drug: Human Embryonic Stem Cell-Derived Cardiomyocyte 300M cells 300M cells delivered in a dose of 30M per injection over 10 injections Other Name: Human ESC-CMs</li> </ul>	Study Type: Interventional  Phase: Phase 1  Study Design: Allocation: Randomized Intervention Model: Sequential Assignment Intervention Model Description:  Phase I will be a standard 3+3 dose-escalation study to evaluate 3 doses of allogeneic hESC-CMs Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: Same as current  Secondary Outcome Measures: Not Provided	Actual Enrollment:  Estimated Enrollment: 18  Original Estimated Enrollment: Same as current  Age: 21 Years to 80 Years (Adult, Older Adult)  Sex: All	Study Sponsors:  Same as current  Collaborators: California Institute for Regenerative Medicine (CIRM)	Study Start: March 22, 2022  Primary Completion: October 2025 (Final data collection date for primary outcome measure)  Study Completion: October 2025  First Posted: October 6, 2021  Results First Posted: Last Update Posted: September 19, 2022
18	NCT0554 4526	CAR T Cells to Target GD2 for DMG Study Documents:	Title Acronym: Other Ids: UCL/ 150853	Not yet recruiting	Diffuse Midline Glioma, H3 K27M-Mutant	Biological: GD2 CAR T cells Infusion with: GD2 CAR T-cells	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: Estimated Enrollment: 12 Original Estimated Enrollment: Same as current Age: up to 16 Years (Child) Sex: All	Study Sponsors:  Same as current  Collaborators: Not Provided	Study Start: December 2022  Primary Completion: December 2025 (Final data collection date for primary outcome measure)  Study Completion: December 2039  First Posted: September 16, 2022  Results First Posted: Last Update Posted: September 16, 2022

NCT Number Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collabora ors	t Dates
NCT0462 NEO-PTC-01 5205 Patients With	_	Recruiting	• Unresecta ble	Biological: NEO-PTC-01 Administered via intravenous (IV) infusion.	Study Type: Interventional  Phase: Phase 1	Actual Enrollment:	Study Sponsors: Same as current	Study Start: December 1,
Study Documents:	Other Ids: NTC- 001 2019-003908-13 ( EudraCT Number )		ble Melanoma  • Metastatic Melanoma	Administered via intravenous (IV) infusion.	Phase: Phase 1  Study Design: Allocation: Non-Randomized Intervention Model: Sequential Assignment Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: Rate of adverse events (AEs), including serious adverse events (SAEs) and AEs leading to treatment discontinuation [ Time Frame: Day 1 to week 52 ] Rate of AEs, including SAEs and AEs leading to treatment discontinuation and those adverse events and serious adverse events detected during symptom-directed physical examinations (changes in safety laboratory evaluations, physical examination findings, and vital signs.  Secondary Outcome Measures:  • Progression-free survival (PFS), defined as the time from the date of first dosing of NEO-PTC-01 to the date of first documented progressive disease (PD) or death, whichever comes first [ Time Frame: Day 1 to week 52 ]  Clinical activity endpoints, based on Investigator assessment of serial radiographic evaluations [Computed Tomography (CT) or Magnetic Resonance Imaging (MRI)] to determine response to treatment and progression of disease based on response criteria in solid tumors (RECIST) v1.1.  • Overall response rate (ORR), defined as the proportion of patients who achieve complete response (CR) or partial response (PR) based on RECIST v1.1 [ Time Frame: Day 1 to week 52 ]  • Duration of response (DOR), defined as the date of the first documentation of a confirmed response to the date of the first documented PD [ Time Frame: Day 1 to week 52 ]  • Clinical benefit rate (CBR), defined as the proportion of patients who achieve CR, PR, or stable disease (SD) based on RECIST [ Time Frame: Day 1 to week 52 ]  • Clinical benefit rate (CBR), defined as the time from the date of first subsequent therapy, defined as the time from the date of first subsequent therapy ( Time Frame: Day 1 to week 52 ]	Estimated Enrollment: 52  Original Estimated Enrollment: 32  Age: 18 Years to 75 Years (Adult, Older Adult)  Sex: All	Collaborators: Not Provided	Primary Completion: November 2023 (Final data collection date for primary outcome measure)  Study Completion: November 2023  First Posted: November 12, 2020  Results First Posted: Last Update Posted: September 21, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
20	NCT0554 8712	The Effect of PEMF for Patients With Knee OA  Study Documents:	Title Acronym: Other Ids: 2021.491	Recruiting	Knee Osteoarthr itis     Knee Pain Chronic	<ul> <li>Device: Pulse Electromagnetic Field Subjects will receive PEMF treatment with the duration of 8 weeks, twice a week with total 16 treatment sessions.</li> <li>Device: Sham Pulse Electromagnetic Field Subjects will receive sham PEMF treatment with the duration of 8 weeks, twice a week with total 16 treatment sessions.</li> </ul>	Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description: Participants will be assigned into either treatment group or sham group. Masking: Triple (Participant, Care Provider, Investigator) Masking Description: It is doubled blinded, a subject 's specific ID card will be provided for each of the enrolled subject and the investigators don't know whether it is PEMF or Sham treatment for that subject's specific ID card. And the investigator will ask the manufactory about the number of grouping at the end of the study. Primary Purpose: Treatment  Primary Outcome Measures: Same as current Secondary Outcome Measures: Same as current	Actual Enrollment:  Estimated Enrollment: 80  Original Estimated Enrollment: Same as current  Age: 50 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors:  Same as current  Collaborators: Not Provided	Study Start: May 5, 2022  Primary Completion: September 15, 2024 (Final data collection date for primary outcome measure)  Study Completion: September 15, 2024  First Posted: September 21, 2022  Results First Posted: Last Update Posted: September 21, 2022
21	NCT0410 2436	Non-Viral TCR Gene Therapy  Study Documents:	Title Acronym: Other Ids: 190143 19-C-0143	Recruiting	Endocrine/ Neuroendo crine     Non- Small Cell Lung Cancer     Breast Cancer     Gastrointe stinal/Geni tourinary Cancers     Ovarian Cancer	<ul> <li>Drug: Fludarabine Days -7 to -3: Fludarabine 25 mg/m2/day IVPB daily over 30 minutes for 5 days.</li> <li>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.</li> <li>Drug: Aldesleukin Aldesleukin 720,000 IU/kg or 72,000 IU/kg (based on total body weight) IV over 15 minutes approximately every 8 hours beginning within 24 hours of cell infusion and continuing for up to 4 days (maximum 10 doses).</li> <li>Biological: Sleeping Beauty Transposed PBL Day 0: Cells are to be infused at a dose not to exceed 1.5e11 in 400 mL intravenously on the Patient Care Unit over 20-30 minutes or as clinically determined by an investigator for patient safety (between 2-4 days after the last dose of fludarabine).</li> </ul>	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:  • Phenotypic and functional characteristics of PBL [ Time Frame: 2-4 years post cell infusion ]  Patient PBL will be obtained from whole blood and then evaluated for function and phenotype  • Safety and tolerance [ Time Frame: 6 weeks (+/- 2 weeks) following administration of the cell product ] Using standard CTCAE 5.0	Actual Enrollment:  Estimated Enrollment: 210  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 26, 2022  Primary Completion: December 31, 2028 (Final data collection date for primary outcome measure)  Study Completion: December 31, 2029  First Posted: September 25, 2019  Results First Posted: Last Update Posted: September 21, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collabora ors	t Dates			
22	NCT0431 8964	TAEST16001 in the Treatment of	Title Acronym:	Recruiting	Soft Tissue Sarcoma	Biological: TAEST16001 cells  The patients in the dose increasing part and the expanding part received the intravenous reinfusion of TAEST16001	Study Type: Interventional	Actual Enrollment:	Study Sponsors:  Same as current	Study Start: March 19, 2020			
	0704	Soft Tissue	Other Ids:		Sarcoma		Phase: Phase 1			i			
		Study	TAEST16001			cells on the 5th day (i.e. the interval was 4 days) after the lymphocyte elimination chemotherapy: If the dose level of	Study Design: Allocation: N/A Intervention Model: Single Group Assignment	Estimated Enrollment: 12	Collaborators: Guangdong Xiangxue	Primary Completion: November 1,			
		Study Documents:				reinfusion was 1 and 2, the planned total amount of TAEST16001cells (calculated by TCR-T positive cells) was given a single reinfusion on the 1st day of the study. If the	Masking: None (Open Label) Primary Purpose: Treatment	Original Estimated	Precision Medical	2022 (Final data collection			
						dose level of reinfusion was 3 and 4,then the total amount of TAEST16001cells (calculated by TCR-T positive cells)	Primary Outcome Measures: Same as current	Enrollment: Same as current	Technology Co., Ltd.	date for primary outcome			
						was planned to be reinjected in 60% and 40% proportion on the first and second day of the study.	Secondary Outcome Measures:	Age: 18 Years		measure)			
						After the first reinfusion of TAEST16001 cells, the patients will be given a small dose of IL-2 subcutaneously (study day 1 to day 14), 500000 U / time. The first injection will be carried out within 30 minutes after the cell reinfusion, twice a day (interval 10-12 hours), for 14 days.  Time Frame: Time Fradays ]  The maximum concent observed in peripheral were detected by flow detected by qPCR  Peripheral blood TAE  Time Frame: Time Fradays ]  The time required to of TAEST16001 cells in cells were detected by qPCR  Peripheral blood TAE  On The maximum concent observed in peripheral were detected by qPCR  Peripheral blood TAE  Time Frame: Time Fradays ]  The time required to of TAEST16001 cells in cells were detected by qPCR  Peripheral blood TAE	Peripheral blood TAEST16001 cell peak (C Max) [     Time Frame: Time Frame: From cell infusion up to 28 days ]  The maximum concentration of TAEST16001 cells observed in peripheral blood, and TAEST16001 cells	to 70 Years (Adult, Older Adult)		Study Completion: March 1, 2023			
								Sex: All		First Posted:			
							were detected by flow cytometry and TCR-T DNA was			March 24, 2020 Results First			
							<ul> <li>Peripheral blood TAEST16001 cell peak time (T Max) [</li> <li>Time Frame: Time Frame: From cell infusion up to 28</li> </ul>			Posted:  Last Update Posted:			
							days ]						
							The time required to observe maximum concentration of TAEST16001 cells in peripheral blood, TAEST16001 cells were detected by flow cytometry and TCR-T DNA was detected by qPCR			September 15, 2022			
							<ul> <li>Peripheral blood TAEST16001 cell AUC 0-28 [ Time Frame: Time Frame: From cell infusion up to 28 days ]</li> </ul>						
							Area under the Concentration-time Curve from Zero up to a Definite Time Day 28						
							T cell subsets [ Time Frame: Time Frame: From cell infusion up to 28 days ]						
										5mL venous blood was collected and sent to the center for flow cytometry			
							<ul> <li>Peripheral blood antigen-specific CTL [ Time Frame: Time Frame: From cell infusion up to 28 days ]</li> </ul>						
							5mL venous blood was collected and sent to the center for flow cytometry of cytotoxic T Cell						
							Effector cell activity [ Time Frame: Time Frame: From cell infusion up to 28 days ]						
							5mL venous blood was collected and sent to the center for flow cytometry of cytokines secreted by effector cells						

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	t Dates
23	NCT0360 2612	T Cells Expressing a Novel Fully- Human Anti- BCMA CAR for Treating Multiple Myeloma  Study Documents:	Title Acronym: Other Ids: 180125 18-C-0125	Active, not recruiting	Myeloma- Multiple     Myeloma, Plasma- Cell	<ul> <li>Drug: Cyclophosphamide 300 mg/m^2 IV over 30 minutes on days -5, -4, and -3</li> <li>Drug: Fludarabine 30 mg/m^2 IV infusion over 30 minutes administered immediately following the cyclophosphamide on day -5, -4, -3</li> <li>Biological: Anti-BCMA CAR T cells 0.75x10^6 - 12.0X10^6 CAR+ T cells per kg of recipient bodyweight one time dose on day 0</li> </ul>	Study Type: Interventional  Phase: Phase 1  Study Design: Allocation: Non-Randomized Intervention Model: Sequential Assignment Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: Same as current  Secondary Outcome Measures: Not Provided	Actual Enrollment: 35  Estimated Enrollment:  Original Estimated Enrollment: 42  Age: 18 Years to 73 Years (Adult, Older Adult)  Sex: All	Study Sponsors:  Same as current  Collaborators: Not Provided	Study Start: September 14, 2018  Primary Completion: January 1, 2023 (Final data collection date for primary outcome measure)  Study Completion: January 1, 2024  First Posted: July 27, 2018  Results First Posted: Last Update Posted: September 21, 2022

NCT Number Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	t Dates
NCT0199 1457  Fludarabine / Total Body Irradiation Regimen for ALLO HCT in Acute Lymphoblastic Leukemia  Study Documents:	Title Acronym: Other Ids: UAB 1285	Completed	Adult Lymphoblastic Lymphoma	Procedure: Total Body Irradiation  Output  Drug: Fludarabine  Output  Dru	Phase: Phase 2  Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: Number of subjects Disease-free survival [ Time Frame: 2 years post-transplant ]  Secondary Outcome Measures:  • Number of subjects that survived [ Time Frame: 2 years post-transplant ]  • Number of subjects with neutrophil engraftment [ Time Frame: Within the first 100 days ]  Neutrophil engraftment is defined as the first of 3 consecutive days with an absolute neutrophil count (ANC) > 500/L.  • Number of subjects with regimen related toxicity [ Time Frame: Within first 100 days post-transplant ]  • Number of subjects with Acute GVHD [ Time Frame: 2 years post transplant ]  • Mean rate of Immune Reconstitution [ Time Frame: 1 year post transplant ]  Track the growth rate of and the number of lymphocyte subsets.  • Number of subjects with relapse [ Time Frame: 2 Years post-transplant ]  • Number of subjects with platelet engraftment [ Time Frame: Within 100 days post transplant ]  • Number of subjects with platelet count > 20,000/L without platelet transfusion for 7 days.  • Number of subjects with chronic GVHD [ Time Frame: 2 years post transplant ]	Actual Enrollment: 19  Estimated Enrollment: Original Estimated Enrollment: 20  Age: 40 Years to 65 Years (Adult, Older Adult)  Sex: All	Study Sponsors:  Same as current  Collaborators: Not Provided	Study Start: August 27, 2013  Primary Completion: January 30, 2020 (Final data collection date for primary outcome measure)  Study Completion: August 23, 2022  First Posted: September 21, 2022  Results First Posted: September 21, 2022  Last Update Posted: September 21, 2022

NC	CT Number Title	Other	r Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborat	Dates
25 NO	NCT0382	4CAR for 4+ Leukemia Lymphoma  dy cuments:  Title Other IUSC ICG1 FD-R 01 ( Grant	e Acronym: er Ids: CTO- CCC- 6122-101 R-006820- Other nt/Funding nber: FDA	Active, not recruiting	• T-cell Lymphom a • T-cell Leukemia	Biological: CD4CAR CD4CAR cells transduced with a lentiviral vector to express the single-chain variable fragment (scFv) nucleotide sequence of the anti-CD4 molecule derived from humanized monoclonal ibalizumab and the intracellular domains of CD28 and 4-1BB co-activators fused to the CD3 T-cell activation signaling domain administered by IV infusions as a single dose (total dose of up to -4x106 T Cells/KG)	Characteristics  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:  • Duration of in vivo survival of the CD4CAR. [Time Frame: 18-24 months] Persistence of CD4CAR will be monitored by measuring the CD4CAR transgene copy number at variable time points.  • Rate of manufacturing failure [Time Frame: 18-24 months] The number of failed manufacturing attempts of CD4 CAR, per subject and overall, in this patient population. Manufacturing failure is defined as failure to manufacturing failure is defined as failure to manufacturing attempts per patient are allowed.  • Clinical Response [Time Frame: 18-24 months] Clinical response to T-cell infusion will be evaluated by comparing disease before and after infusion identified by: • standard imaging (PET CT or PET MRI) for lymphoma patients • bene marrow biopsy for leukemia patients • peripheral blood cells morphology, flow cytometry panel, immunohistochemistry, and other blood molecular markers for both lymphoma and leukemia.  • trafficking of CD4CAR at tumor sites and at sites with significant toxicity [Time Frame: 18-24 months] Quantification of both of CD4CAR by flowcytometry and transgene copy number by PCR will be measured at tumor sites in bone marrow and lymph nodes at variable time points if applicable. Same tests will be done on biopsies of organs that shows significant toxicity if need be. • Number of participants with immune reactions against CD4CAR [Time Frame: 18-24 months] The absolute and relative number of subjects who develop immune reactions against the treatment over a period of 2 years. Human anti-mouse antibody (HAMA) ELISA tests will be carried out in the blood of participants at multiple times after initial treatment. • Serum cytokines levels [Time Frame: 18-24 months] The absolute and relative number of subjects who develop immune reactions against the treatm	Actual Enrollment: Estimated Enrollment: 20 Original Estimated Enrollment: Same as current  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: Stony Brook University  Collaborators: iCell Gene Therapeutics	Study Start: June 18, 2019  Primary Completion: December 2025 (Final data collection date for primary outcome measure)  Study Completion: December 2037  First Posted: February 4, 2019  Results First Posted: Last Update Posted: September 21, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
26	NCT Number NCT0479 5882	A New Study Evaluating the Activity of Modular CAR T for mYeloma Study Documents:	Other Names  Title Acronym: Other Ids: UCL 129642	Status  Enrolling by invitation	Conditions  Multiple Myeloma	<ul> <li>Interventions</li> <li>Biological: BCMA CAR T cells     Infusion with ATIMP: BCMA CAR T-cells</li> <li>Biological: BCMA/CD19 CAR T cells     Infusion with ATIMP: BCMA/CD19 CAR T-cells</li> </ul>	Characteristics  Study Type: Interventional  Phase: Phase 1  Study Design: Allocation: Non-Randomized Intervention Model: Parallel Assignment Intervention Model Description: Rolling 6 trial design Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures:  • Toxicity evaluated by the incidence of grade 3-5 toxicity causally related to the Advanced Therapy Investigational Product (ATIMP) [ Time Frame: 28 days ]  The incidence of grade 3-5 toxicity assessed using the Common Terminology Criteria for Adverse Events (CTCAE) v5.0 and the American Society for Transplantation and Cellular Therapy (ASTCT) Cytokine Release Syndrome (CRS) and Neurotoxicity	Actual Enrollment: Estimated Enrollment: 24 Original Estimated Enrollment: 30 Age: 18 Years and older (Adult, Older Adult) Sex: All	Sponsor/Collaborators  Study Sponsors: Same as current  Collaborators: Not Provided	Study Start: April 22, 2022  Primary Completion: December 31, 2025 (Final data collection date for primary outcome measure)  Study Completion: December 31, 2035  First Posted: March 12, 2021  Results First
							• Feasibility of manufacturing CAR T-cells evaluated by the number of therapeutic products generated [ Time Frame: 30 days ]  Feasibility of adequate leucapheresis collection and generation of CAR T cells as evaluated by the number of therapeutic products generated.  Secondary Outcome Measures: Not Provided			Posted:  Last Update Posted: September 19, 2022