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	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
1	NCT04115345	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	<ul style="list-style-type: none">Chronic Kidney DiseaseCongenital Anomalies of Kidney and Urinary Tract	Biological: Renal Autologous Cell Therapy (REACT®) Autologous selected renal cells (SRC)	Study Type: Interventional 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: <i>Same as current</i> Age: 18 Years to 65 Years (Adult, Older Adult) Sex: All	Study Sponsors: <i>Same as current</i> 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 12, 2022
2	NCT05237986	Cognitive Aftereffects of Neurotoxicity in Children and Young Adults With Relapsed/Refractory Hematologic Malignancies Who Receive CAR T-cell Therapy Study Documents:	Title Acronym: Other Ids: 10000631 000631-C	Not yet recruiting	<ul style="list-style-type: none">LymphomaLeukemia	Not Provided	Study Type: Observational Phase: Study Design: Observational Model: Cohort Time Perspective: Prospective Primary Outcome Measures: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 60 Original Estimated Enrollment: <i>Same as current</i> Age: 5 Years and older (Child, Adult, Older Adult) Sex: All	Study Sponsors: <i>Same as current</i> Collaborators: Not Provided	Study Start: September 15, 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 12, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
3	NCT03226704	Leukapheresis for CAR or Adoptive Cell Therapy Manufacturing Study Documents:	Title Acronym: Other Ids: 170137 17-C-0137	Enrolling by invitation	<ul style="list-style-type: none">LeukemiaLymphomaAcute Lymphoblastic LeukemiaDiffuse Large B Cell LymphomaNon-Hodgkin's Lymphoma	Not Provided	Study Type: Observational Phase: Study Design: Observational Model: Cohort Time Perspective: Prospective Primary Outcome Measures: Fraction of subjects who can enroll on a CAR-T study within approximately 6 months of undergoing apheresis [Time Frame: 6 months] Secondary Outcome Measures: Fraction of patients who experience a grade 4 toxicity associated with apheresis [Time Frame: completion of apheresis procedure]	Actual Enrollment: Estimated Enrollment: 120 Original Estimated Enrollment: <i>Same as current</i> Age: 3 Years to 65 Years (Child, Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: August 14, 2017 Primary Completion: January 31, 2030 (Final data collection date for primary outcome measure) Study Completion: July 31, 2030 First Posted: July 24, 2017 Results First Posted: Last Update Posted: September 12, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
4	NCT03435796	<div><div>Long-Term Follow-up Protocol for Participants Treated With Gene-Modified T Cells</div><div>Study Documents:</div></div>	<div>Title Acronym:</div> <div>Other Ids: GC-LTFU-001 U1111-1206-8250 (Registry Identifier: WHO) 2017-001465-24 (EudraCT Number)</div>	Recruiting	Neoplasms	Genetic: Gene-modified (GM) T cell therapy No investigational product will be administered	<div>Study Type: Interventional</div> <div>Phase: Phase 2 Phase 3</div> <div>Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Other</div> <div>Primary Outcome Measures:</div> <div><ul style="list-style-type: none">Adverse Events (AEs) [Time Frame: Up to 15 years from last GM T cell infusion] Incidence of delayed Adverse Events suspected to be related to prior gene-modified (GM) T cell therapyTumor Response Status [Time Frame: At month 12 from last GM T cells infusion then yearly until date of disease relapse or progression, assessed up to year 15] Number of subjects who continue to be responders, who have progressed, and who have relapsed will be reported. When reporting progression/relapse the appropriate date will also be reported.Disease Progression [Time Frame: Up to 15 years from last GM T cells infusion] Number of subjects who continue to be responders, who have progressed, and who have relapsed will be reported. When reporting progression/relapse the appropriate date will also be reported.Disease Relapse [Time Frame: Up to 15 years from last GM T cells infusion] Number of subjects who continue to be responders, who have progressed, and who have relapsed will be reported. When reporting progression/relapse the appropriate date will also be reported.Overall Survival [Time Frame: Up to 15 years from last GM T cells infusion] Overall survival is defined as the time from the first dose of investigational product or from the randomization date to the date of death or the date the subject is last known to be alive.Health-related quality of life (HRQoL) [Time Frame: Up to approximately 5 years] Health-related quality of life (HRQoL) analyses will be performed by combining data collected in this protocol with the data from each respective parent study as appropriate per parent study specified analysis plan, and per LTFU study plan after the parent study is closed out.Height of pediatric subjects treated with GM T cells [Time Frame: At month 12 from last GM T cells infusion then yearly until subject reaches Stage 5 per Tanner staging criteria or for 15 years from last GM T cell infusion, whichever occurs later] Height (inches or centimeters) will be collected for all pediatric subjects and descriptively summarizedWeight of pediatric subjects treated with GM T cells [Time Frame: At month 12 from last GM T cells infusion then yearly until subject reaches Stage 5 per Tanner staging criteria or for 15 years from last GM T cell infusion, whichever occurs later] Weight (pounds or kilograms) will be collected for all pediatric subjects and descriptively summarizedSexual maturation of pediatric subjects treated with GM T cells [Time Frame: At month 12 from last GM T cells infusion then yearly until subject reaches Stage 5 per Tanner staging criteria or for 15 years from last GM T cell infusion, whichever occurs later]</div>	<div>Actual Enrollment:</div> <div>Estimated Enrollment: 191</div> <div>Original Estimated Enrollment: 200</div> <div>Age: Child, Adult, Older Adult</div> <div>Sex: All</div>	<div>Study Sponsors: Same as current</div> <div>Collaborators: Not Provided</div>	<div>Study Start: June 19, 2018</div> <div>Primary Completion: November 30, 2036 (Final data collection date for primary outcome measure)</div> <div>Study Completion: November 30, 2036</div> <div>First Posted: February 19, 2018</div> <div>Results First Posted:</div> <div>Last Update Posted: September 7, 2022</div>

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5	NCT05141058	T CELL THERAPY OPPOSING NOVEL COVID-19 INFECTION IN IMMUNOCOM PROMISED PATIENTS Study Documents:	Title Acronym: Other Ids: TONI	Recruiting	SARS-CoV-2 Infection	Biological: Coronavirus-specific T cell (CST) Participants will receive donor-derived CSTs for prevention of SARS-CoV-2 infection after HSCT (28 days and <4 months after hematopoietic stem cell transplantation (HSCT)).	Study Type: Interventional Phase: Phase 1 Study Design: Allocation: Non-Randomized Intervention Model: Sequential Assignment Masking: None (Open Label) Primary Purpose: Prevention Primary Outcome Measures: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 24 Original Estimated Enrollment: <i>Same as current</i> Age: 12 Years to 80 Years (Child, Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: October 19, 2021 Primary Completion: November 1, 2025 (Final data collection date for primary outcome measure) Study Completion: December 15, 2027 First Posted: December 2, 2021 Results First Posted: Last Update Posted: September 6, 2022
6	NCT03092284	Allogeneic Stem Cell Therapy in Heart Failure Study Documents:	Title Acronym: Other Ids: CSCC_ASCII	Completed	Heart Failure	<ul style="list-style-type: none">Biological: Cardiology Stem Cell Centre Adipose Stem Cell (CSCC_ASC) Direct intramyocardial injection of CSCC_ASCBiological: Placebo Saline	Study Type: Interventional Phase: Phase 2 Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Double (Participant, Investigator) Primary Purpose: Treatment Primary Outcome Measures: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: 81 Estimated Enrollment: Original Estimated Enrollment: <i>Same as current</i> Age: 30 Years to 80 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: September 2015 Primary Completion: July 2021 (Final data collection date for primary outcome measure) Study Completion: July 2022 First Posted: March 27, 2017 Results First Posted: Last Update Posted: September 6, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
7	NCT05531708	Exploratory Study of Novel MSLN CAR-T Cell Therapy in Patients With MSLN-positive Advanced Refractory Solid Tumors Study Documents:	Title Acronym: Other Ids: 2021-IIT-004-E02	Recruiting	Mesothelin-positive Advanced Refractory Solid Tumors	<ul style="list-style-type: none">Biological: Anti-mesothelin CAR-T cells D0: Anti-mesothelin CAR-T cells are autologous genetically modified T cells. Cells will be infused intravenously.Drug: Fludarabine D-7 to D-3: Fludarabine (25 mg/m^2/day) will be administered intravenously for 5 days. Other Name: FludaraDrug: Cyclophosphamide D-7 and D-6: Cyclophosphamide (60 mg/kg/day) will be administered intravenously for 2 days. Other Name: Cytosan	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: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 20 Original Estimated Enrollment: <i>Same as current</i> Age: 18 Years to 70 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: UTC Therapeutics Inc.	Study Start: April 2, 2021 Primary Completion: April 30, 2025 (Final data collection date for primary outcome measure) Study Completion: April 30, 2026 First Posted: September 8, 2022 Results First Posted: Last Update Posted: September 8, 2022
8	NCT05534269	Stress Urinary Incontinence Study to Assess Safety and Efficacy of Muvon's Muscle Precursor Cell Therapy Study Documents:	Title Acronym: Other Ids: SUISSE MPC2	Not yet recruiting	Female Stress Urinary Incontinence	Biological: autologous muscle precursor cells Patients own Muscle Precursor Cells are isolated and injected into the rhabdomyosphincter	Study Type: Interventional Phase: Phase 2 Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Intervention Model Description: Low dose and High dose evaluation Masking: Single (Participant) Masking Description: Neither patient nor sponsor will know which patient gets which dose Primary Purpose: Treatment Primary Outcome Measures: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 70 Original Estimated Enrollment: <i>Same as current</i> Age: 20 Years to 65 Years (Adult, Older Adult) Sex: Female	Study Sponsors: Same as current Collaborators: GCP-Service International Ltd. & Co. KG	Study Start: September 2022 Primary Completion: November 2024 (Final data collection date for primary outcome measure) Study Completion: November 2025 First Posted: September 9, 2022 Results First Posted: Last Update Posted: September 9, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
9	NCT02315027	Mesenchymal Stem Cell Therapy in Multiple System Atrophy Study Documents:	Title Acronym: Other Ids: 12-005950 R01FD004789 (U.S. FDA Grant/Contract) R01NS092625 (U.S. NIH Grant/Contract)	Active, not recruiting	MSA	<ul style="list-style-type: none">Biological: Autologous Mesenchymal Stem Cells single dose of 1 × 10(7) cells intrathecallyBiological: Autologous Mesenchymal Stem Cells 2 doses of 5 × 10(7) cells intrathecally each 1 month (±4 days) apartBiological: Autologous Mesenchymal Stem Cells 2 doses of 1 × 10(8) cells intrathecally each 1 month apartBiological: Autologous Mesenchymal Stem Cells Ten doses of 5 x 10(7) (±20%) cells intrathecally six months (±1 month) apartBiological: Autologous Mesenchymal Stem Cells Ten doses of 2.5 x 10(7) (±20%) cells intrathecally six months (±1 month) apart	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: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: 24 Estimated Enrollment: Original Estimated Enrollment: Age: 30 Years to 80 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: <ul style="list-style-type: none">Food and Drug Administration (FDA)National Institute of Neurological Disorders and Stroke (NINDS)	Study Start: October 2012 Primary Completion: March 2024 (Final data collection date for primary outcome measure) Study Completion: March 2024 First Posted: December 11, 2014 Results First Posted: Last Update Posted: September 9, 2022
10	NCT04925687	Pilot Study of Intravitreal Autologous CD34+ Stem Cell Therapy for Retinitis Pigmentosa Study Documents:	Title Acronym: Other Ids: 1743714-2	Recruiting	Retinitis Pigmentosa	Biological: Intravitreal autologous CD34+ cells Autologous CD34+ cells harvested from bone marrow injected intravitreal	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: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 4 Original Estimated Enrollment: <i>Same as current</i> Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Cures Within Reach	Study Start: June 1, 2021 Primary Completion: May 31, 2023 (Final data collection date for primary outcome measure) Study Completion: May 31, 2023 First Posted: June 14, 2021 Results First Posted: Last Update Posted: September 6, 2022

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11	NCT03425526	Donor T Cell Therapy in Treating Immunocompromised Patients With Adenovirus-Related Disease Study Documents:	Title Acronym: Other Ids: 2017-0350 NCI-2018-00929 (Registry Identifier: CTRP (Clinical Trial Reporting Program)) 2017-0350 (Other Identifier: M D Anderson Cancer Center)	Recruiting	<ul style="list-style-type: none">Hematopoietic and Lymphoid Cell NeoplasmImmunocompromised	Biological: Allogeneic Adenovirus-specific Cytotoxic T Lymphocytes Given IV Other Name: Allogeneic Adenovirus-specific CTLs	<div>Study Type: Interventional</div> <div>Phase: Phase 1</div> <div>Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment</div> <div>Primary Outcome Measures:<ul style="list-style-type: none">Toxicity of T Cells for Therapy of Adenovirus Related Disease in Immunocompromised Patients defined by the NCI Common Terminology Criteria for Adverse Events (CTCAE), Version 4.0). [Time Frame: 45 days after last CTL dose]T Cells for Therapy of Adenovirus Related Disease in Immunocompromised Patients Determined Feasible if at Least 50% of the Enrolled Eligible Patients Receive One CTLs Infusion [Time Frame: 1 year]</div> <div>Secondary Outcome Measures:<ul style="list-style-type: none">Overall Survival (OS) of T Cells for Therapy of Adenovirus Related Disease in Immunocompromised Patients [Time Frame: 2 years] Overall survival (OS) defined from treatment start date to date of death. OS estimated using the Kaplan-Meier method.Relapse-Free Survival (RFS) of T Cells for Therapy of Adenovirus Related Disease in Immunocompromised Patients [Time Frame: 2 years] Relapse-free survival (original malignancy) (RFS) defined from treatment start date to the date of documented disease recurrence or death. RFS estimated using the Kaplan-Meier method.Cumulative Incidence of Adenovirus Reactivation After Infusion of T Cells for Therapy of Adenovirus Related Disease in Immunocompromised Patients [Time Frame: 2 years] Cumulative incidence of adenovirus reactivation after therapy assessed using the competing risks method. The competing risks include relapse and death and patients who are still alive without disease progression at end of study will be censored.Cumulative Incidence of Grade 2-4 Graft Versus Host Disease (GVHD), Grade 3-4 GVHD, and Chronic GVHD [Time Frame: 2 years] Cumulative incidence of grade 2-4 GVHD, grade 3-4 GVHD, and chronic GVHD assessed using the competing risks method. The competing risks include relapse and death and patients who are still alive without disease progression at end of study will be censored.Reconstitution of Anti Adenovirus Immunity [Time Frame: 2 years] The proportion of patients with population of cells that are specific and can be detected computed along with associated 95% CI.</div>	<div>Actual Enrollment:</div> <div>Estimated Enrollment: 16</div> <div>Original Estimated Enrollment: <i>Same as current</i></div> <div>Age: Child, Adult, Older Adult</div> <div>Sex: All</div>	<div>Study Sponsors: Same as current</div> <div>Collaborators: National Cancer Institute (NCI)</div>	<div>Study Start: March 15, 2018</div> <div>Primary Completion: January 1, 2024 (Final data collection date for primary outcome measure)</div> <div>Study Completion: January 1, 2024</div> <div>First Posted: February 7, 2018</div> <div>Results First Posted:</div> <div>Last Update Posted: September 12, 2022</div>

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12	NCT04257578	Acalabrutinib and Anti-CD19 CAR T-cell Therapy for the Treatment of B-cell Lymphoma Study Documents:	Title Acronym: Other Ids: RG1006269 NCI-2020-00238 (Registry Identifier: NCI / CTRP) 10418 (Other Identifier: Fred Hutch/University of Washington Cancer Consortium)	Recruiting	<ul style="list-style-type: none">• B-Cell Non-Hodgkin Lymphoma• Diffuse Large B-Cell Lymphoma, Not Otherwise Specified• High Grade B-Cell Lymphoma• Primary Mediastinal (Thymic) Large B-Cell Lymphoma• Transformed Follicular Lymphoma to Diffuse Large B-Cell Lymphoma• Grade 1 Follicular Lymphoma• Grade 2 Follicular Lymphoma• Grade 3a Follicular Lymphoma	<ul style="list-style-type: none">• Drug: Acalabrutinib Given PO Other Names:<ul style="list-style-type: none">◦ 1420477-60-6◦ ACP-196◦ Bruton Tyrosine Kinase Inhibitor ACP-196◦ Calquence• Biological: Axicabtagene Ciloleucel Given IV Other Names:<ul style="list-style-type: none">◦ KTE C19◦ KTE-C19◦ KTE-C19 CAR◦ Yescarta	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: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 50 Original Estimated Enrollment: 20 Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: AstraZeneca	Study Start: December 2, 2020 Primary Completion: March 1, 2024 (Final data collection date for primary outcome measure) Study Completion: March 1, 2029 First Posted: February 6, 2020 Results First Posted: Last Update Posted: September 9, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
13	NCT05126758	A Study of CAP-1002 in Ambulatory and Non-Ambulatory Patients With Duchenne Muscular Dystrophy Study Documents:	Title Acronym: Other Ids: CAP-1002-DMD-04	Recruiting	<ul style="list-style-type: none">Muscular DystrophiesMuscular Dystrophy, DuchenneMuscular Disorders, AtrophicMuscular DiseasesNeuromuscular DiseasesGenetic Diseases, X-LinkedGenetic Diseases, InbornNervous System Diseases	<ul style="list-style-type: none">Biological: CAP-1002 CAP-1002 is a cell therapy consisting of human allogeneic cardiosphere-derived cells (CDCs). CDCs are known to secrete numerous bioactive elements (growth factors, exosomes) which impact the therapeutic benefits of the cell-based therapy. The mechanism of action is the composite ability to be immunomodulatory, anti-fibrotic and regenerative. Other Name: Cardiosphere-Derived Cells (CDCs)Drug: Placebo Placebo	Study Type: Interventional Phase: Phase 3 Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Quadruple (Participant, Care Provider, Investigator, Outcomes Assessor) Primary Purpose: Treatment Primary Outcome Measures: To evaluate full upper limb function at Month 12 following 4 IV administrations of CAP-1002 [Time Frame: At Month 12] Mean change from baseline in full PUL 2.0 at Month 12 Secondary Outcome Measures: To evaluate cardiac muscle function and structure at Month 12 following 4 IV administrations of CAP-1002 [Time Frame: At Month 12] Mean change from baseline in ejection fraction at Month 12	Actual Enrollment: Estimated Enrollment: 68 Original Estimated Enrollment: <i>Same as current</i> Age: 10 Years and older (Child, Adult, Older Adult) Sex: Male	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: June 22, 2022 Primary Completion: December 2024 (Final data collection date for primary outcome measure) Study Completion: December 2025 First Posted: November 19, 2021 Results First Posted: Last Update Posted: September 6, 2022
14	NCT05528887	Study of CAR-T Cell Therapy in the Treatment of Relapsed/Refractory Hematological Malignancies Study Documents:	Title Acronym: Other Ids: 2021-037	Recruiting	<ul style="list-style-type: none">Relapsed/Refractory Hematological MalignanciesLymphomaMyelomaLeukemia	<ul style="list-style-type: none">Biological: Autologous CAR-T cells D0: CAR-T cells will be infused intravenously.Drug: Fludarabine D-5 to D-3: Fludarabine (30 mg/m^2/day) will be administered intravenously for 3 days. Other Name: FludaraDrug: Cyclophosphamide D-5 to D-3: Cyclophosphamide (500 mg/m^2/day) will be administered intravenously for 3 days. Other Name: Cytoxan	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: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 10 Original Estimated Enrollment: <i>Same as current</i> Age: 18 Years to 75 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: UTC Therapeutics Inc.	Study Start: September 16, 2021 Primary Completion: June 2024 (Final data collection date for primary outcome measure) Study Completion: June 2026 First Posted: September 6, 2022 Results First Posted: Last Update Posted: September 6, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
15	NCT05168748	CD19- and CD22-directed CAR-T Cell Therapy in Patients With Acute Lymphoblastic Leukemia Study Documents:	Title Acronym: Other Ids: CIMJ995A12101 2021-000677-89 (EudraCT Number)	Not yet recruiting	Acute Lymphoblastic Leukemia	Drug: IMJ995 single agent Single intravenous administration of IMJ995	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: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 35 Original Estimated Enrollment: <i>Same as current</i> Age: 1 Year and older (Child, Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: December 14, 2022 Primary Completion: July 3, 2026 (Final data collection date for primary outcome measure) Study Completion: July 3, 2026 First Posted: December 23, 2021 Results First Posted: Last Update Posted: September 9, 2022
16	NCT05532761	Multidimensional Assessment of Quality of Life, Social and Professional Life and Care Utilization in Patients With Diffuse Large Cell B-cell Lymphoma Treated With CAR-T Cells Study Documents:	Title Acronym: Other Ids: 69HCL22_0430	Not yet recruiting	<ul style="list-style-type: none">Diffuse Large B-cell Lymphoma (DLBCL)CAR-T Cells Treatment	Other: self-administered questionnaires In order to describe the experience of CAR-T cell therapy of DLBCL patients, a pharmaceutical follow-up is carried out the day before the injection (baseline) and at 1, 3, 6, 9, 12 and 18 months. These follow-ups consist of interviews with the patient and the delivery of self-administered questionnaires. The interviews will investigate drug consumption, the use of self-medication and complementary alternative therapies and the adverse effects of interest. The self-questionnaires will focus on exploring multidimensional quality of life, social and professional life, anxiety-depression or uncertainty tolerance through internationally validated questionnaires. No supplementary visits will be needed : interviews with the research team will occur at the end of hematologic consultations.	Study Type: Observational Phase: Study Design: Observational Model: Cohort Time Perspective: Prospective Primary Outcome Measures: <i>Same as current</i> Secondary Outcome Measures: Not Provided	Actual Enrollment: Estimated Enrollment: 30 Original Estimated Enrollment: <i>Same as current</i> Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: September 2022 Primary Completion: March 2025 (Final data collection date for primary outcome measure) Study Completion: March 2025 First Posted: September 8, 2022 Results First Posted: Last Update Posted: September 8, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
17	NCT04789408	Study Evaluating the Safety of KITE-222 in Participants With Relapsed/Refractory Acute Myeloid Leukemia Study Documents:	Title Acronym: Other Ids: KT-US-486-0201 2020-000962-40 (EudraCT Number)	Recruiting	Acute Myeloid Leukemia	<ul style="list-style-type: none">Drug: Cyclophosphamide Administered intravenouslyDrug: Fludarabine Administered intravenouslyBiological: KITE-222 A single infusion of chimeric antigen receptor (CAR)-transduced autologous T cells administered intravenously	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: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 40 Original Estimated Enrollment: <i>Same as current</i> Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Gilead Sciences Collaborators: Not Provided	Study Start: July 19, 2021 Primary Completion: January 2024 (Final data collection date for primary outcome measure) Study Completion: January 2039 First Posted: March 9, 2021 Results First Posted: Last Update Posted: September 9, 2022
18	NCT04652908	Cellular Therapy for In Utero Repair of Myelomeningocele - The CuRe Trial Study Documents:	Title Acronym: Other Ids: 1617774	Recruiting	Myelomeningocele	<ul style="list-style-type: none">Biological: Placental Mesenchymal Stem Cells seeded on a commercially available dural graft extracellular matrix As in the current standard fetal surgery, under sonographic guidance, initial uterine entry will be accomplished by uterine stapling device or similar. The fetus will be given an intramuscular injection of pain medications and paralytic. The myelomeningocele will be closed in a standardized manner under magnification. As in the standard fetal operation, the spinal cord will be dissected from surrounding tissue and allowed to drop into the spinal canal. The PMSC-ECM product will then be tailored to the size of the spinal cord and applied topically, cell side down. The PMSC-ECM product will be sutured in place to the dura. Finally, the fetal skin will be closed in the standard fashion. The amniotic fluid volume will be replaced and antibiotics will be added. The uterus will be closed. The abdominal fascial layer and skin will be closed in routine fashion. Other Name: PMSC-ECMOther: Untreated contemporaneous cohort The addition of a non-PMSC treated cohort, the untreated contemporaneous cohort, has been added at the request of the FDA to provide contemporaneous patients for validation of the continued relevance of use of the outcomes of the MOMS trial as the comparison arm for the Phase 2a portion of the study. Other Name: non-PMSC-ECM	Study Type: Interventional Phase: Phase 1 Phase 2 Study Design: Allocation: Non-Randomized Intervention Model: Parallel Assignment Intervention Model Description: Treatment arm subjects receiving PMSC-ECM (Placental Mesenchymal Stem Cells seeded on a commercially available dural graft extracellular matrix). Additionally, we will follow a contemporaneous cohort of patients undergoing routine fetal or postnatal MMC repair without PMSC-ECM (non-PMSC untreated contemporaneous cohort). 35 participants will be enrolled under the treatment arm and 20 participants will be enrolled under the untreated contemporaneous cohort. The addition of a non-PMSC treated cohort, the untreated contemporaneous cohort, has been added at the request of the FDA to provide contemporaneous patients for validation of the continued relevance of use of the outcomes of the MOMS trial as the comparison arm for the Phase 2a portion of the study. Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 55 Original Estimated Enrollment: 35 Age: 19 Weeks to 25 Weeks (Child) Sex: All	Study Sponsors: <i>Same as current</i> Collaborators: California Institute for Regenerative Medicine (CIRM)	Study Start: June 21, 2021 Primary Completion: March 2024 (Final data collection date for primary outcome measure) Study Completion: March 2024 First Posted: December 3, 2020 Results First Posted: Last Update Posted: September 6, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
19	NCT04348643	Safety and Efficacy of CEA-Targeted CAR-T Therapy for Relapsed/Refractory CEA+ Cancer Study Documents:	Title Acronym: Other Ids: PBC017	Recruiting	<ul style="list-style-type: none">• Solid Tumor• Lung Cancer• Colorectal Cancer• Liver Cancer• Pancreatic Cancer• Gastric Cancer• Breast Cancer	Biological: CEA CAR-T cells CEA-CAR-T cells will be administered intravenously.	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: <i>Same as current</i> Secondary Outcome Measures: <ul style="list-style-type: none">• The response rate of CEA CAR-T treatment in patients with relapse/refractory CEA+ Cancer that treatment by CEA CAR-T cells therapy [Time Frame: 6 months] The response rate of CEA CAR-T treatment will be recorded and assessed according to the irRECIST Version 1.1• Duration of Response (DOR) of CEA CAR-T treatment in patients with refractory/relapsed CEA+ Cancer [Time Frame: 2 years] DOR will be assessed from the first assessment of CR/PR/SD to the first assessment of recurrence or progression of the disease or death from any cause• Progress-free survival(PFS) of CEA CAR-T treatment in patients with refractory/relapsed CEA+ Cancer [Time Frame: 2 years] PFS will be assessed from the first CAR-T cell infusion to death from any cause or the first assessment of progression• Overall survival(OS) of CEA CAR-T treatment in patients with refractory/relapsed CEA+ Cancer [Time Frame: 2 years] OS will be assessed from the first CAR-T cell infusion to death from any cause• Serum tumor marker change level [Time Frame: 2 years] In vivo quantity of CEA, AFP, etc.• Rate of CEA CAR-T cells in peripheral blood [Time Frame: 2 years] In vivo (peripheral blood) rate of CEA CAR-T cells were determined by means of flow cytometry• Quantity of CEA CAR copies in peripheral blood [Time Frame: 2 years] In vivo (peripheral blood) quantity of CEA CAR copies were determined by means of qPCR• Levels of Cytokines in Serum [Time Frame: 3 months] In vivo (Serum) quantity of cytokines	Actual Enrollment: Estimated Enrollment: 40 Original Estimated Enrollment: <i>Same as current</i> Age: 18 Years to 75 Years (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: February 20, 2020 Primary Completion: January 31, 2023 (Final data collection date for primary outcome measure) Study Completion: April 30, 2023 First Posted: April 16, 2020 Results First Posted: Last Update Posted: September 12, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
20	NCT02315599	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	<ul style="list-style-type: none">Pediatric CancersHematologic MalignanciesSolid Tumors	Not Provided	Study Type: Observational Phase: 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: <i>Same as current</i> Age: 1 Year to 99 Years (Child, Adult, Older Adult) Sex: All	Study Sponsors: <i>Same as current</i> 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 8, 2022
21	NCT05041309	Long-term Follow-up Study for Participants of Kite-Sponsored Interventional Studies Treated With Gene-Modified Cells Study Documents:	Title Acronym: Other Ids: KT-US-982-5968 2020-005843-21 (EudraCT Number)	Enrolling by invitation	Solid and Hematological Malignancies	<ul style="list-style-type: none">Biological: Axicabtagene Ciloleucel No investigational product will be administered Other Name: Yescarta®Biological: Brexucabtagene Autoleucel No investigational product will be administered Other Name: Tecartus™Biological: KITE-585 No investigational product will be administeredBiological: KITE-718 No investigational product will be administeredBiological: KITE-439 No investigational product will be administeredBiological: KITE-222 No investigational product will be administeredBiological: KITE-363 No investigational product will be administered	Study Type: Interventional Phase: Phase 2 Study Design: Allocation: Non-Randomized Intervention Model: Parallel Assignment Masking: None (Open Label) Primary Purpose: Other Primary Outcome Measures: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 700 Original Estimated Enrollment: <i>Same as current</i> Age: Child, Adult, Older Adult Sex: All	Study Sponsors: <i>Same as current</i> Collaborators: Not Provided	Study Start: December 15, 2021 Primary Completion: November 2026 (Final data collection date for primary outcome measure) Study Completion: November 2026 First Posted: September 13, 2021 Results First Posted: Last Update Posted: September 7, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
22	NCT04838171	Prospective Study of White Blood Cells Study Documents:	Title Acronym: Other Ids: QEL-RP-001	Recruiting	<ul style="list-style-type: none">Autoimmune DiseasesInflammationRejection; Transplant, Liver	Other: White blood cell and blood collection Mononucleocytes will be collected via apheresis	Study Type: Observational Phase: Study Design: Observational Model: Case-Only Time Perspective: Prospective Primary Outcome Measures: <i>Same as current</i> Secondary Outcome Measures: Not Provided	Actual Enrollment: Estimated Enrollment: 10 Original Estimated Enrollment: <i>Same as current</i> Age: Child, Adult, Older Adult Sex: All	Study Sponsors: <i>Same as current</i> Collaborators: Not Provided	Study Start: March 24, 2021 Primary Completion: December 2024 (Final data collection date for primary outcome measure) Study Completion: December 2024 First Posted: April 8, 2021 Results First Posted: Last Update Posted: September 8, 2022
23	NCT00001405	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	<ul style="list-style-type: none">GranulomaGranulomatous Disease, ChronicLeukocyte DiseaseGenetic Disease, X-LinkedGenetic 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: <i>Same as current</i> 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 12, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
24	NCT05181540	A Study of the Effects of AB-205 in Patients With Lymphoma Undergoing Autologous Hematopoietic Cell Transplantation Study Documents:	Title Acronym: Other Ids: AB-205-301	Recruiting	<ul style="list-style-type: none">Hodgkin LymphomaNon Hodgkin Lymphoma	<ul style="list-style-type: none">Biological: AB-205 Allogeneic genetically engineered human umbilical vein endothelial cells Other Name: E-CEL cellsOther: Placebo Placebo	Study Type: Interventional Phase: Phase 3 Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: Quadruple (Participant, Care Provider, Investigator, Outcomes Assessor) Primary Purpose: Treatment Primary Outcome Measures: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 148 Original Estimated Enrollment: <i>Same as current</i> Age: 40 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: February 21, 2022 Primary Completion: June 2025 (Final data collection date for primary outcome measure) Study Completion: December 2025 First Posted: January 6, 2022 Results First Posted: Last Update Posted: September 12, 2022
25	NCT05458297	A Study of Zilovertamab Vedotin (MK-2140) as Monotherapy and in Combination With Nemtabrutinib (MK-1026) in Participants With Aggressive and Indolent B-cell Malignancies (MK-2140-006) Study Documents:	Title Acronym: Other Ids: 2140-006 MK-2140-006 (Other Identifier: Merck) 2021-004450-36 (EudraCT Number)	Recruiting	<ul style="list-style-type: none">Chronic Lymphocytic LeukemiaMantle Cell LymphomaFollicular LymphomaRichter Transformation Lymphoma	<ul style="list-style-type: none">Biological: Zilovertamab vedotin IV infusion Other Name: MK-2140Drug: Nemtabrutinib 65 to 80 mg once daily (QD) orally Other Name: MK-1026	Study Type: Interventional Phase: Phase 2 Study Design: Allocation: Randomized Intervention Model: Parallel Assignment Masking: None (Open Label) Primary Purpose: Treatment Primary Outcome Measures: <i>Same as current</i> Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment: Estimated Enrollment: 260 Original Estimated Enrollment: <i>Same as current</i> Age: 18 Years and older (Adult, Older Adult) Sex: All	Study Sponsors: Same as current Collaborators: Not Provided	Study Start: July 21, 2022 Primary Completion: March 13, 2027 (Final data collection date for primary outcome measure) Study Completion: April 26, 2027 First Posted: July 14, 2022 Results First Posted: Last Update Posted: September 12, 2022