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	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
1	NCT04115345	<a href="#">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).</a>  Study Documents:	Title Acronym:  Other Ids: REGEN-004	Recruiting	<ul style="list-style-type: none"><li>Chronic Kidney Disease</li><li>Congenital Anomalies of Kidney and Urinary Tract</li></ul>	Biological: Renal Autologous Cell Therapy (REACT®) Autologous selected renal cells (SRC)	<div>Study Type: Interventional</div> <div>Phase: Phase 1</div> <div>Study Design: Allocation: N/A Intervention Model: Single Group Assignment Intervention Model Description: Open-label Masking: None (Open Label) Primary Purpose: Treatment</div> <div>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.</div> <div>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.</div>	<div>Actual Enrollment:</div> <div>Estimated Enrollment: 15</div> <div>Original Estimated Enrollment: <i>Same as current</i></div> <div>Age: 18 Years to 65 Years (Adult, Older Adult)</div> <div>Sex: All</div>	<div>Study Sponsors: <i>Same as current</i></div> <div>Collaborators: CTI Clinical Trial and Consulting Services</div>	<div>Study Start: August 13, 2019</div> <div>Primary Completion: March 31, 2023 (Final data collection date for primary outcome measure)</div> <div>Study Completion: May 30, 2023</div> <div>First Posted: October 4, 2019</div> <div>Results First Posted:</div> <div>Last Update Posted: September 10, 2022</div>
2	NCT05237986	<a href="#">Cognitive Aftereffects of Neurotoxicity in Children and Young Adults With Relapsed/Refractory Hematologic Malignancies Who Receive CAR T-cell Therapy</a>  Study Documents:	Title Acronym:  Other Ids: 10000631 000631-C	Not yet recruiting	<ul style="list-style-type: none"><li>Lymphoma</li><li>Leukemia</li></ul>	Not Provided	<div>Study Type: Observational</div> <div>Phase:</div> <div>Study Design: Observational Model: Cohort Time Perspective: Prospective</div> <div>Primary Outcome Measures: <i>Same as current</i></div> <div>Secondary Outcome Measures: <i>Same as current</i></div>	<div>Actual Enrollment:</div> <div>Estimated Enrollment: 60</div> <div>Original Estimated Enrollment: <i>Same as current</i></div> <div>Age: 5 Years and older (Child, Adult, Older Adult)</div> <div>Sex: All</div>	<div>Study Sponsors: <i>Same as current</i></div> <div>Collaborators: Not Provided</div>	<div>Study Start: September 20, 2022</div> <div>Primary Completion: April 30, 2024 (Final data collection date for primary outcome measure)</div> <div>Study Completion: April 30, 2025</div> <div>First Posted: February 14, 2022</div> <div>Results First Posted:</div> <div>Last Update Posted: September 15, 2022</div>

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
3	NCT03240328	<a href="#">The Effect of Chimeric Antigen Receptor (CAR)-T Cell Therapy on the Reconstitution of HIV-specific Immune Function</a>  Study Documents:	Title Acronym:  Other Ids: 20170407V3	Recruiting	HIV/AIDS	Biological: CAR-T cells HIV-1 specific chimeric antigen receptor cells	Study Type: Interventional  Phase: Phase 1  Study Design: Allocation: N/A Intervention Model: Single Group Assignment Intervention Model Description: No control. Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: Incidence of Treatment-Emergent Adverse Events of CAR-T cell therapy [ Time Frame: 6 Months ] The adverse events of VC-CAR-T cell therapy on HIV-infected patients during the clinical trial  Secondary Outcome Measures: The HIV reservoir [ Time Frame: 6 Months ] To assay the HIV loads in the peripheral blood Mono-nuclear cells and plasma	Actual Enrollment:  Estimated Enrollment: 40  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years to 60 Years (Adult)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: Sun Yat-sen University	Study Start: October 4, 2017  Primary Completion: December 31, 2023 (Final data collection date for primary outcome measure)  Study Completion: December 31, 2030  First Posted: August 7, 2017  Results First Posted:  Last Update Posted: September 14, 2022
4	NCT03226704	<a href="#">Leukapheresis for CAR or Adoptive Cell Therapy Manufacturing</a>  Study Documents:	Title Acronym:  Other Ids: 170137 17-C-0137	Enrolling by invitation	<ul style="list-style-type: none"><li>Leukemia</li><li>Lymphoma</li><li>Acute Lymphoblastic Leukemia</li><li>Diffuse Large B Cell Lymphoma</li><li>Non-Hodgkin's Lymphoma</li></ul>	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: <a href="#">Same as current</a>  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 10, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
5	NCT05541549	<a href="#">A Multi-center, Randomized, Double-blind, Phase 2 Study, Evaluating JCPyV-specific T Cell Therapy for the Treatment of PML</a>  Study Documents:	Title Acronym:  Other Ids: 20210001	Not yet recruiting	Progressive Multifocal Leukoencephalopathy	Biological: CE-VST01-JC CE-VST01-JC at a dose of $1 \times 10^8$ 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: <i>Same as current</i>  Secondary Outcome Measures: Not Provided	Actual Enrollment:  Estimated Enrollment: 60  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: March 2023  Primary Completion: April 2024 (Final data collection date for primary outcome measure)  Study Completion: July 2024  First Posted: September 15, 2022  Results First Posted:  Last Update Posted: September 15, 2022
6	NCT05534269	<a href="#">Stress Urinary Incontinence Study to Assess Safety and Efficacy of Muvon's Muscle Precursor Cell Therapy</a>  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: <i>Same as current</i>  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
7	NCT02315027	<a href="#">Mesenchymal Stem Cell Therapy in Multiple System Atrophy</a>  Study Documents:	Title Acronym:  Other Ids: 12-005950 <a href="#">R01FD004789 ( U.S. FDA Grant/Contract )</a> <a href="#">R01NS092625 ( U.S. NIH Grant/Contract )</a>	Active, not recruiting	MSA	<ul style="list-style-type: none"><li>Biological: Autologous Mesenchymal Stem Cells single dose of 1 × 10(7) cells intrathecally</li><li>Biological: Autologous Mesenchymal Stem Cells 2 doses of 5 × 10(7) cells intrathecally each 1 month (±4 days) apart</li><li>Biological: Autologous Mesenchymal Stem Cells 2 doses of 1 × 10(8) cells intrathecally each 1 month apart</li><li>Biological: Autologous Mesenchymal Stem Cells Ten doses of 5 x 10(7) (±20%) cells intrathecally six months (±1 month) apart</li><li>Biological: Autologous Mesenchymal Stem Cells Ten doses of 2.5 x 10(7) (±20%) cells intrathecally six months (±1 month) apart</li></ul>	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: <a href="#">Same as current</a>  Collaborators: <ul style="list-style-type: none"><li>Food and Drug Administration (FDA)</li><li>National Institute of Neurological Disorders and Stroke (NINDS)</li></ul>	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

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
8	NCT03425526	<a href="#">Donor T Cell Therapy in Treating Immunocompromised Patients With Adenovirus-Related Disease</a>  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"><li>Hematopoietic and Lymphoid Cell Neoplasm</li><li>Immunocompromised</li></ul>	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"><li>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 ]</li><li>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 ]</li></ul></div> <div>Secondary Outcome Measures:<ul style="list-style-type: none"><li>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.</li><li>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.</li><li>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.</li><li>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.</li><li>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.</li></ul></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: <a href="#">Same as current</a></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 10, 2022</div>

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9	NCT04257578	<a href="#">Acalabrutinib and Anti-CD19 CAR T-cell Therapy for the Treatment of B-cell Lymphoma</a>  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"><li>• B-Cell Non-Hodgkin Lymphoma</li><li>• Diffuse Large B-Cell Lymphoma, Not Otherwise Specified</li><li>• High Grade B-Cell Lymphoma</li><li>• Primary Mediastinal (Thymic) Large B-Cell Lymphoma</li><li>• Transformed Follicular Lymphoma to Diffuse Large B-Cell Lymphoma</li><li>• Grade 1 Follicular Lymphoma</li><li>• Grade 2 Follicular Lymphoma</li><li>• Grade 3a Follicular Lymphoma</li></ul>	<ul style="list-style-type: none"><li>• Drug: Acalabrutinib Given PO  Other Names:<ul style="list-style-type: none"><li>◦ 1420477-60-6</li><li>◦ ACP-196</li><li>◦ Bruton Tyrosine Kinase Inhibitor ACP-196</li><li>◦ Calquence</li></ul></li><li>• Biological: Axicabtagene Ciloleucel Given IV  Other Names:<ul style="list-style-type: none"><li>◦ KTE C19</li><li>◦ KTE-C19</li><li>◦ KTE-C19 CAR</li><li>◦ Yescarta</li></ul></li></ul>	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: <a href="#">Same as current</a>  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
10	NCT04007029	<a href="#">Modified Immune Cells (CD19/CD20 CAR-T Cells) in Treating Patients With Recurrent or Refractory B-Cell Lymphoma or Chronic Lymphocytic Leukemia</a>  Study Documents:	Title Acronym:  Other Ids: 18-001989 NCI-2019-03190 ( Registry Identifier: CTRP (Clinical Trial Reporting Program) ) 18-001989 ( Other Identifier: UCLA / Jonsson Comprehensive Cancer Center )	Recruiting	<ul style="list-style-type: none"><li>CD19 Positive</li><li>CD20 Positive</li><li>Recurrent Chronic Lymphocytic Leukemia</li><li>Recurrent Diffuse Large B-Cell Lymphoma</li><li>Recurrent Follicular Lymphoma</li><li>Recurrent Mantle Cell Lymphoma</li><li>Recurrent Primary Mediastinal (Thymic) Large B-Cell Cell Lymphoma</li><li>Recurrent Small Lymphocytic Lymphoma</li><li>Refractory Chronic Lymphocytic Leukemia</li><li>Refractory Diffuse Large B-Cell Lymphoma</li><li>Refractory Follicular Lymphoma</li><li>Refractory Mantle Cell Lymphoma</li><li>Refractory Primary Mediastinal (Thymic) Large B-Cell Cell Lymphoma</li></ul>	<ul style="list-style-type: none"><li>Biological: Chimeric Antigen Receptor T-Cell Therapy  Given Autologous anti-CD19/anti-CD20 CAR-expressing naive/memory T cells IV  Other Names:<ul style="list-style-type: none"><li>CAR T Infusion</li><li>CAR T Therapy</li><li>CAR T-cell therapy</li><li>Chimeric Antigen Receptor T-cell Infusion</li></ul></li><li>Drug: Cyclophosphamide Given IV  Other Names:<ul style="list-style-type: none"><li>(-)-Cyclophosphamide</li><li>2H-1,3,2-Oxazaphosphorine, 2-[bis(2-chloroethyl)amino]tetrahydro-, 2-oxide, monohydrate</li><li>Carloxan</li><li>Ciclofosfamida</li><li>Ciclofosfamide</li><li>Cicloxal</li><li>Clafen</li><li>Claphene</li><li>CP (cyclophosphamide) monohydrate</li><li>CTX (cytoxan)</li><li>CYCLO-cell</li><li>Cycloblastin</li><li>Cycloblastine</li><li>Cyclophospham</li><li>Cyclophosphamid monohydrate</li><li>Cyclophosphamidum</li><li>Cyclophosphan</li><li>Cyclophosphane</li><li>Cyclophosphanum</li><li>Cyclostin</li><li>Cyclostine</li><li>Cytophosphan</li><li>Cytophosphane</li><li>Cytoxan</li><li>Fosfaseron</li><li>Genoxal</li><li>Genuxal</li><li>Ledoxina</li><li>Mitoxan</li><li>Neosar</li><li>Revimmune</li><li>Syklofosfamid</li><li>WR- 138719</li></ul></li><li>Drug: Fludarabine Phosphate Given IV  Other Names:<ul style="list-style-type: none"><li>2-F-ara-AMP fludarabine: 2-Fluoroadenine 9-beta-D-Arabinofuranoside 5'-Monophosphate</li><li>9H-Purin-6-amine, 2-fluoro-9-(5-O-phosphono-beta.-D-arabinofuranosyl)-</li><li>Beneflur</li><li>Fludara</li><li>SH T 586</li></ul></li><li>Biological: Tocilizumab Given IV  Other Names:<ul style="list-style-type: none"><li>Actemra</li><li>Immunoglobulin G1, Anti-(Human Interleukin 6 Receptor) (Human-Mouse Monoclonal MRA Heavy Chain), Disulfide with Human-Mouse Monoclonal MRA Kappa-Chain, Dimer</li><li>MRA (myeloma receptor antibody)</li><li>R-1569</li><li>RoActemra</li></ul></li></ul>	<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: <i>Same as current</i></div> <div>Secondary Outcome Measures:<ul style="list-style-type: none"><li>Clinical response [ Time Frame: Up to 15 years ]  Descriptive statistics including simple summary measures and plots appropriate for longitudinal data will be used.</li><li>Duration of remission [ Time Frame: Time from complete remission (CR)/partial remission (PR) measurement criteria are first met until the first date that recurrent or progressive disease is objectively documented, or until death, assessed up to 15 years ]  Descriptive statistics including simple summary measures and plots appropriate for longitudinal data will be used. Will also be summarized descriptively (mean, standard deviation, median, first and third quartiles, minimum, maximum). Figures showing the Kaplan-Meier estimates will also be presented.</li><li>Objective response rate (ORR) [ Time Frame: Up to 15 years ]  Descriptive statistics including simple summary measures and plots appropriate for longitudinal data will be used. ORR and the individual rate for CR and PR will be summarized with the frequency count and the percentage of subjects in each category, along with a 2-sided 95% exact confidence interval.</li><li>Progression-free survival [ Time Frame: From time of study entry to documentation of objective disease progression or death due to any cause assessed up to 15 years ]  Descriptive statistics including simple summary measures and plots appropriate for longitudinal data will be used. Will also be summarized descriptively (mean, standard deviation, median, first and third quartiles, minimum, maximum). Figures showing the Kaplan-Meier estimates will also be presented.</li><li>Overall survival [ Time Frame: From date of enrollment until death, assessed up to 15 years ]  Descriptive statistics including simple summary measures and plots appropriate for longitudinal data will be used. Will be summarized with figures using the Kaplan-Meier method. The Kaplan-Meier estimates for the 1-year OS rates and the 2-sided 95% confidence interval of the rates using the Greenwood's formula will be reported. Will also be summarized descriptively (mean, standard deviation, median, first and third quartiles, minimum, maximum).</li><li>Chimeric antigen receptor (CAR) T-cell (T) 19/20 bispecific transgenic T-cell persistence [ Time Frame: Up to 5 years post-infusion ]  Descriptive statistics of T-cell counts over time, including simple summary measures and plots appropriate for longitudinal data will be used.</li><li>Frequency of T cell phenotypic markers on CART19/20 cells using flow cytometry [ Time Frame: Up to 5 years post-infusion ]  The frequency of CART19/20 cell properties will be assessed using flow cytometry to indicate the % and/or total number of CART19/20 cells expressing critical</li></ul></div>	<div>Actual Enrollment:</div> <div>Estimated Enrollment: 24</div> <div>Original Estimated Enrollment: <i>Same as current</i></div> <div>Age: 18 Years to 70 Years (Adult, Older Adult)</div> <div>Sex: All</div>	<div>Study Sponsors: <i>Same as current</i></div> <div>Collaborators: Parker Institute for Cancer Immunotherapy</div>	<div>Study Start: October 4, 2019</div> <div>Primary Completion: August 1, 2023 (Final data collection date for primary outcome measure)</div> <div>Study Completion: August 1, 2024</div> <div>First Posted: July 5, 2019</div> <div>Results First Posted:</div> <div>Last Update Posted: September 13, 2022</div>

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11	NCT04684459	<a href="#">Dual-targeting HER2 and PD-L1 CAR-T for Cancers With Pleural or Peritoneal Metastasis</a>  Study Documents:	Title Acronym:  Other Ids: MCART-002	Recruiting	<ul style="list-style-type: none"><li>Peritoneal Carcinoma Metastatic</li><li>Pleural Effusion, Malignant</li></ul>	Biological: Dual-targeting HER2 and PD-L1 CAR-T cells serosal cavity infusion	Study Type: Interventional  Phase: Early 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: 18  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years to 70 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: Not Provided	Study Start: March 12, 2021  Primary Completion: January 1, 2023 (Final data collection date for primary outcome measure)  Study Completion: January 1, 2024  First Posted: December 24, 2020  Results First Posted:  Last Update Posted: September 13, 2022
12	NCT05168748	<a href="#">CD19- and CD22-directed CAR-T Cell Therapy in Acute Lymphoblastic Leukemia</a>  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: <a href="#">Same as current</a>  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



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13	NCT04789408	<a href="#">Study Evaluating the Safety of KITE-222 in Participants With Relapsed/Refractory Acute Myeloid Leukemia</a>  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"><li>• Drug: Cyclophosphamide Administered intravenously</li><li>• Drug: Fludarabine Administered intravenously</li><li>• Biological: KITE-222 A single infusion of chimeric antigen receptor (CAR)-transduced autologous T cells administered intravenously</li></ul>	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: <a href="#">Gilead Sciences</a>  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

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
14	NCT04348643	<a href="#">Safety and Efficacy of CEA-Targeted CAR-T Therapy for Relapsed/Refractory CEA+ Cancer</a>  Study Documents:	Title Acronym:  Other Ids: PBC017	Recruiting	<ul style="list-style-type: none"><li>• Solid Tumor</li><li>• Lung Cancer</li><li>• Colorectal Cancer</li><li>• Liver Cancer</li><li>• Pancreatic Cancer</li><li>• Gastric Cancer</li><li>• Breast Cancer</li></ul>	Biological: CEA CAR-T cells CEA-CAR-T cells will be administered intravenously.	<div>Study Type: Interventional</div> <div>Phase: Phase 1 Phase 2</div> <div>Study Design: Allocation: N/A Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment</div> <div>Primary Outcome Measures: <i>Same as current</i></div> <div>Secondary Outcome Measures:<ul style="list-style-type: none"><li>• 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</li><li>• 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</li><li>• 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</li><li>• 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</li><li>• Serum tumor marker change level [ Time Frame: 2 years ]  In vivo quantity of CEA, AFP, etc.</li><li>• 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</li><li>• 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</li><li>• Levels of Cytokines in Serum [ Time Frame: 3 months ]  In vivo (Serum) quantity of cytokines</li></ul></div>	<div>Actual Enrollment:</div> <div>Estimated Enrollment: 40</div> <div>Original Estimated Enrollment: <i>Same as current</i></div> <div>Age: 18 Years to 75 Years (Adult, Older Adult)</div> <div>Sex: All</div>	<div>Study Sponsors: <i>Same as current</i></div> <div>Collaborators: Not Provided</div>	<div>Study Start: February 20, 2020</div> <div>Primary Completion: January 31, 2023 (Final data collection date for primary outcome measure)</div> <div>Study Completion: April 30, 2023</div> <div>First Posted: April 16, 2020</div> <div>Results First Posted:</div> <div>Last Update Posted: September 10, 2022</div>

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
15	NCT05540964	<a href="#">An Antiretroviral Treatment Interruption(ATI) Study to Evaluate the Impact of AGT103-T to Suppress Human Immunodeficiency Virus Replication in the Absence of Antiretroviral Therapy</a>  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: <i>Same as current</i>  Secondary Outcome Measures: <i>Same as current</i>	Actual Enrollment:  Estimated Enrollment: 7  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years and older (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  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/Collaborators	Dates
16	NCT04310592	<a href="#">Natural Killer Cell (CYNK-001) Infusions in Adults With AML</a>  Study Documents:	Title Acronym:  Other Ids: CYNK-001-AML-001	Recruiting	<ul style="list-style-type: none"><li>Leukemia</li><li>Leukemia, Myeloid</li><li>Leukemia, Myeloid, Acute</li><li>Neoplasms by Histologic Type</li><li>Neoplasms</li><li>Immunosuppressive Agents</li><li>Immunologic Factors</li><li>Physiological Effects of Drugs</li><li>Alkylating Agents</li><li>Antimetabolites, Antineoplastic</li><li>Antiviral Agents</li><li>Analgesics, Non-narcotic</li><li>Anti-infective Agents</li><li>Analgesics</li><li>Peripheral Nervous System Agents</li><li>Hematologic Diseases</li><li>Hematologic Neoplasms</li><li>Leukemia in Remission</li><li>Relapsed Adult AML</li><li>Refractory AML</li></ul>	Biological: CYNK-001 CYNK-001 is an allogeneic off the shelf cell therapy enriched for CD56+/CD3- NK cells expanded from human placental CD34+ cells.	Study Type: Interventional  Phase: Phase 1  Study Design: Allocation: Non-Randomized Intervention Model: Parallel Assignment Intervention Model Description: Experimental: Minimal Residual Disease (MRD) positive AML patients; Cyclophosphamide + Fludarabine + CYNK-001. On Days 0, 7, and 14, (and 21 in certain arms) CYNK-001 at 3 varying dose levels.  Experimental: Relapsed/Refractory AML patients; Cyclophosphamide + Fludarabine + CYNK-001. On Days 0, 7, and 14, (and 21 at certain dose levels) CYNK-001 at 3 varying dose levels.  Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: <ul style="list-style-type: none"><li>Number of Participants who experience a Dose-limiting Toxicity (DLT) [ Time Frame: Day +28 ]      The number of participants who experience a DLT will be measured.</li><li>Determine the Maximum Tolerated Dose (MTD) or Maximum Planned Dose (MPD) of CYNK-001 [ Time Frame: up to 28 days ]      The maximum dose safely administered for the treatment of patients with AML.</li><li>Frequency and Severity of Adverse Events (AEs) [ Time Frame: up to 12 months ]      Frequency and severity of Adverse Events will be evaluated.</li></ul> Secondary Outcome Measures: <ul style="list-style-type: none"><li>Number of Participants who experience Minimal Residual Disease (MRD) Response [ Time Frame: up to 12 months ]      The number of participants who convert from MRD positive to MRD negative.</li><li>Time to MRD Response [ Time Frame: up to 12 months ]      The time it takes to convert from MRD positive to MRD negative.</li><li>Duration of MRD Response [ Time Frame: up to 12 months ]      The measure of how long participants remain MRD negative.</li><li>Progression-free Survival (PFS) [ Time Frame: up to 12 months ]      Date of first CYNK-001 infusion to date of disease progression.</li><li>Time to Progression (TTP) [ Time Frame: up to 12 months ]      Date of first CYNK-001 infusion to date of disease progression.</li><li>Duration of Morphologic Complete Remission (CR) [ Time Frame: up to 12 months ]      Duration from first Morphologic CR observation to time of disease progression.</li><li>Overall Survival (OS) [ Time Frame: up to 12 months ]      Date of first CYNK-001 infusion to date of death.</li></ul>	Actual Enrollment:  Estimated Enrollment: 94  Original Estimated Enrollment: 22  Age: 18 Years to 80 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: Not Provided	Study Start: March 12, 2020  Primary Completion: June 3, 2024 (Final data collection date for primary outcome measure)  Study Completion: December 3, 2024  First Posted: March 17, 2020  Results First Posted:  Last Update Posted: September 14, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
17	NCT00001405	<a href="#">Recruitment and Apheresis Collection of Peripheral Blood Hematopoietic Stem Cells, Mononuclear Cells and Granulocytes</a>  Study Documents:	Title Acronym:  Other Ids: 940073 94-I-0073	Recruiting	<ul style="list-style-type: none"><li>• Granuloma</li><li>• Granulomatous Disease, Chronic</li><li>• Leukocyte Disease</li><li>• Genetic Disease, X-Linked</li><li>• Genetic Disease, Inborn</li></ul>	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: <a href="#">Same as current</a>  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	NCT05539768	<a href="#">Study on the Safety and Efficacy of Autogenous Tumor Infiltrates Lymphocytes for the Treatment of Advanced Solid Tumor</a>  Study Documents:	Title Acronym:  Other Ids: HS-IT101-ST001	Not yet recruiting	Advanced Solid Tumor	Biological: HS-IT101 Adoptive transfer of 1x10^9-6x10^10 autologous TIL to patients i.v. in 30-60 minutes.	Study Type: Interventional  Phase: Early 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: 8  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years to 75 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: Qingdao Sino-Cell Biomedicine Co.,Ltd.	Study Start: October 8, 2022  Primary Completion: December 31, 2023 (Final data collection date for primary outcome measure)  Study Completion: March 31, 2027  First Posted: September 14, 2022  Results First Posted:  Last Update Posted: September 14, 2022

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
19	NCT04088864	<a href="#">CD22-CAR T Cells in Children and Young Adults With B Cell Malignancies</a>  Study Documents:	Title Acronym:  Other Ids: IRB-50878 CCT6003 ( Other Identifier: OnCore ) IRB-50878 ( Other Identifier: Stanford IRB ) NCI-2019-07285 ( Other Identifier: NCI Trial Identifier )	Suspended	<ul style="list-style-type: none"><li>B Cell Lymphoma</li><li>Acute Lymphoblastic Leukemia, Pediatric</li><li>Lymphoma</li></ul>	<ul style="list-style-type: none"><li>Drug: Fludarabine Fludarabine is a purine antagonist antimetabolite</li><li>Drug: Cyclophosphamide Cyclophosphamide is a nitrogen mustard derivative alkylating agent</li><li>Drug: Autologous CD22 CAR T Autologous T cells transduced with lentiviral vector (m971BBZ) Chimeric Antigen Receptor (CD22 CAR)</li></ul>	Study Type: Interventional  Phase: Phase 1  Study Design: Allocation: Non-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: 52  Original Estimated Enrollment: <i>Same as current</i>  Age: 1 Year to 30 Years (Child, Adult)  Sex: All	Study Sponsors: <a href="#">Same as current</a>  Collaborators: Not Provided	Study Start: January 10, 2020  Primary Completion: August 2025 (Final data collection date for primary outcome measure)  Study Completion: August 2035  First Posted: September 13, 2019  Results First Posted:  Last Update Posted: September 13, 2022
20	NCT05181540	<a href="#">A Study of the Effects of AB-205 in Patients With Lymphoma Undergoing Autologous Hematopoietic Cell Transplantation</a>  Study Documents:	Title Acronym:  Other Ids: AB-205-301	Recruiting	<ul style="list-style-type: none"><li>Hodgkin Lymphoma</li><li>Non Hodgkin Lymphoma</li></ul>	<ul style="list-style-type: none"><li>Biological: AB-205 Allogeneic genetically engineered human umbilical vein endothelial cells Other Name: E-CEL cells</li><li>Other: Placebo Placebo</li></ul>	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: <a href="#">Same as current</a>  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 10, 2022



	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
21	NCT05458297	<a href="#">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)</a>  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"><li>Chronic Lymphocytic Leukemia</li><li>Mantle Cell Lymphoma</li><li>Follicular Lymphoma</li><li>Richter Transformation Lymphoma</li></ul>	<ul style="list-style-type: none"><li>Biological: Zilovertamab vedotin IV infusion Other Name: MK-2140</li><li>Drug: Nemtabrutinib 65 to 80 mg once daily (QD) orally Other Name: MK-1026</li></ul>	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: <i>Same as current</i>  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 10, 2022
22	NCT00012545	<a href="#">Collection and Storage of Umbilical Cord Stem Cells for Treatment of Sickle Cell Disease</a>  Study Documents:	Title Acronym:  Other Ids: 010122 01-H-0122	Recruiting	<ul style="list-style-type: none"><li>Sickle Cell Disease</li><li>Sickle Cell Trait</li></ul>	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: <a href="#">National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)</a>  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

	NCT Number	Title	Other Names	Status	Conditions	Interventions	Characteristics	Population	Sponsor/Collaborators	Dates
23	NCT05472558	<a href="#">Clinical Study of Cord Blood-derived CAR-NK Cells Targeting CD19 in the Treatment of Refractory/Relapsed B-cell NHL</a>  Study Documents:	Title Acronym:  Other Ids: 2022-0496	Recruiting	B-cell Non Hodgkin Lymphoma	Biological: anti-CD19 CAR-NK lentiviral vector-transduced cord blood-derived NK cells to express anti-CD19 CAR Other Name: CB CAR-NK019	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: 48  Original Estimated Enrollment: <i>Same as current</i>  Age: 18 Years to 75 Years (Adult, Older Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: September 10, 2022  Primary Completion: September 10, 2023 (Final data collection date for primary outcome measure)  Study Completion: September 10, 2025  First Posted: July 25, 2022  Results First Posted:  Last Update Posted: September 13, 2022
24	NCT01875601	<a href="#">NK White Blood Cells and Interleukin in Children and Young Adults With Advanced Solid Tumors</a>  Study Documents:	Title Acronym:  Other Ids: 130152 13-C-0152	Completed	<ul style="list-style-type: none"><li>• Solid Tumors</li><li>• Brain Tumors</li><li>• Sarcoma</li><li>• Pediatric Cancers</li><li>• Neuroblastoma</li></ul>	<ul style="list-style-type: none"><li>• Biological: Recombinant human interleukin-15 (rhIL-15) Continuous infusion rhIL15 IV</li><li>• Biological: NK Cell Infusion Infuse expanded NK cells at Day 0 after 2 days of Cyclophosphamide lymphodepletion</li></ul>	Study Type: Interventional  Phase: Phase 1  Study Design: Allocation: Non-Randomized Intervention Model: Parallel Assignment Masking: None (Open Label) Primary Purpose: Treatment  Primary Outcome Measures: <ul style="list-style-type: none"><li>• Assess feasibility of harvesting + expanding activated NK cells in escalating doses in Cohort A;and assess toxicity of autologous activated and expanded NK cells following lymphodepleting chemotherapy + or - rhIL15 in pediatric patients w/ solid... [ Time Frame: 3 years ]</li><li>• To assess the toxicity of infusing escalating doses of activated NK cells following lymphodepleting chemotherapy without rhIL15 (cohort A) [ Time Frame: 8 years ]</li><li>• To assess the toxicity of infusing NK activated cells with escalating doses of rhIL15 (cohort B) in pediatric patients with refractory malignant solid tumors [ Time Frame: 8 years ]</li></ul> Secondary Outcome Measures: Not Provided	Actual Enrollment: 16  Estimated Enrollment:  Original Estimated Enrollment: 51  Age: 2 Years to 29 Years (Child, Adult)  Sex: All	Study Sponsors: <i>Same as current</i>  Collaborators: Not Provided	Study Start: June 11, 2013  Primary Completion: September 8, 2015 (Final data collection date for primary outcome measure)  Study Completion: September 8, 2015  First Posted: June 12, 2013  Results First Posted:  Last Update Posted: September 9, 2022