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JPN Kanagawa Prefecture – UK Cell & Gene Therapy Catapult Webinar

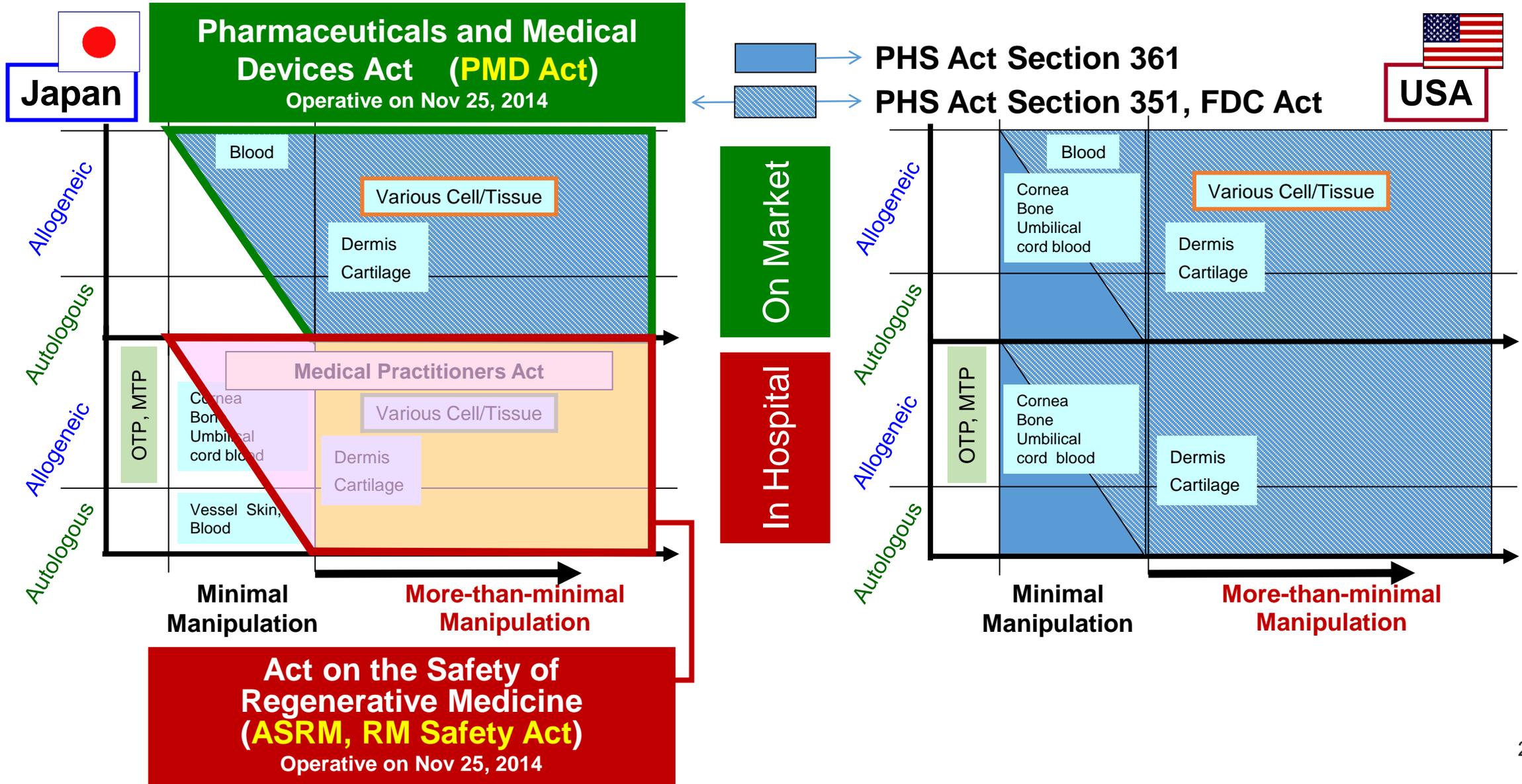
Japan's Regulatory Landscape for Cell Therapy and Regenerative Medicine

Yoji SATO, PhD

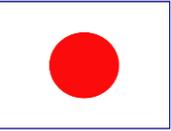
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DISCLAIMER: The views and opinions expressed in this presentation are those of the presenter and do not necessarily represent official policy or position of the National Institute of Health Sciences, the Ministry of Health, Labour & Welfare, or the Japanese Society for Regenerative Medicine .

Regulations for CT/RM



Two Acts Regulating CT/RM

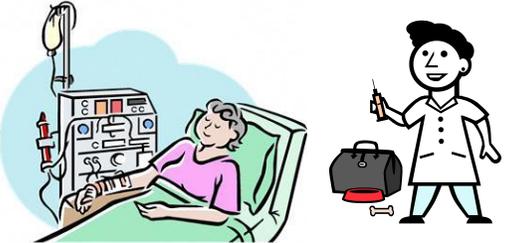


In Hospital

Cell Therapy
Regenerative Medicine

On Market

Medical practices using processed cells,
which are not intended for marketing



Regenerative Medicine Safety Act
(RM Safety Act) *

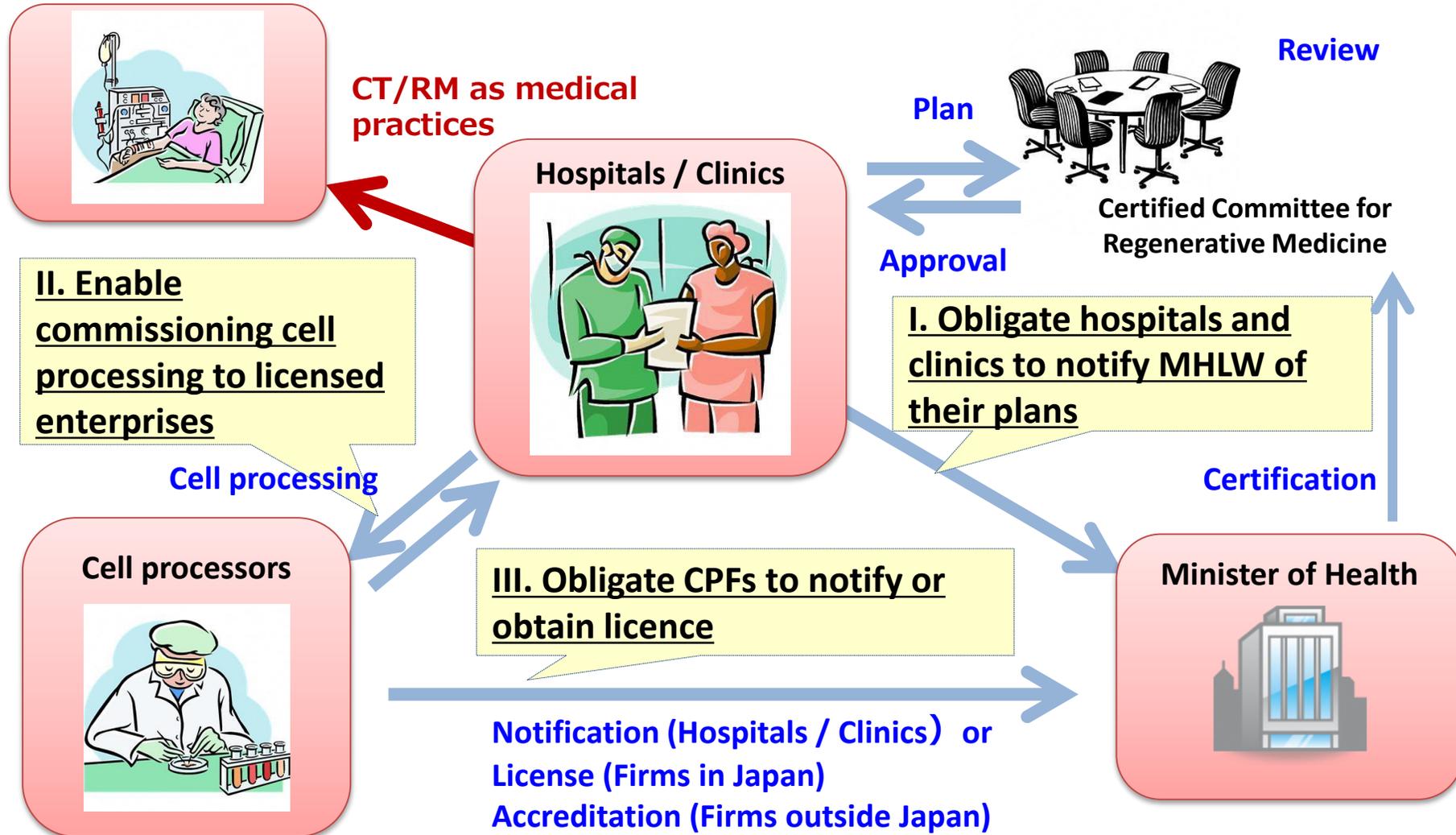
Production and marketing of
products for CT/RM by firms



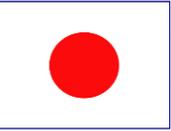
Pharmaceuticals and Medical Devices
Act (PMD Act, Revised PAL)*

* Two laws were enacted on 25 November 2014.

CT/RM using processed cells without MA under the Act on the Safety of Regenerative Medicine (RM Safety Act)



The two legislations share common good practices for the quality/manufacturing control of processed cells



Clinical study, private practice
(using processed cells without MA)

Regenerative medical products
(for marketing)

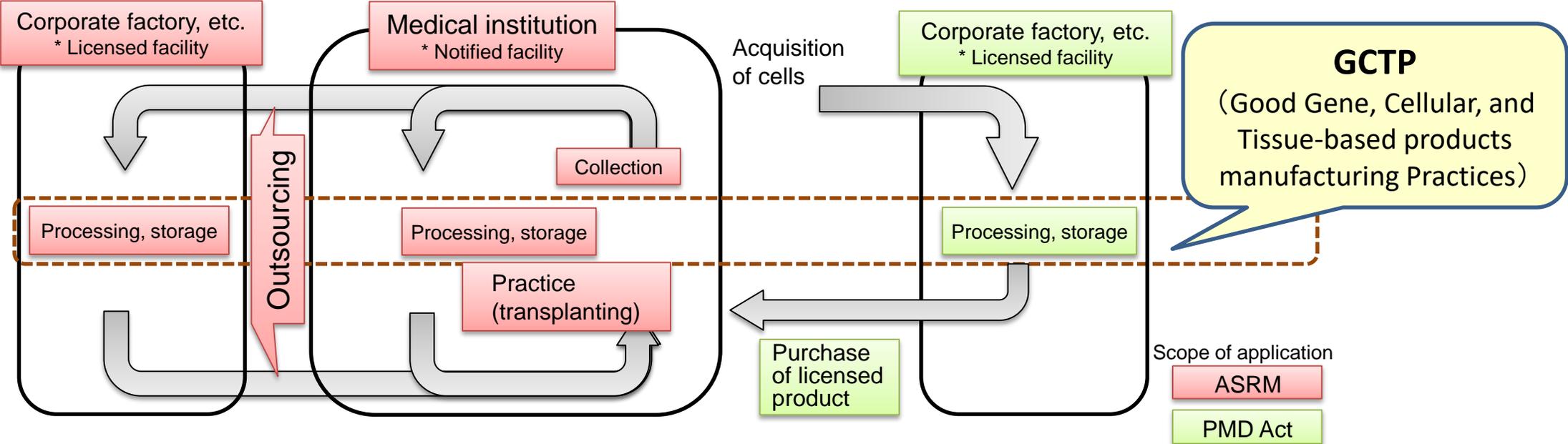
RM Safety Act

The safety, etc., of regenerative medicine provided as a medical service is ensured by stipulating the practical procedures of, for instance, sampling, standards for medical institutions that provide regenerative medicine and standards for facilities that culture and process cells.

PMD Act

The efficacy and safety of regenerative medical products are ensured by stipulating standards for manufactory of regenerative medical products.

* Outsourcing of cell culturing and processing carried out under the responsibility of physicians based on the Regenerative Medicine Assurance Act is exempt from the application of the Pharmaceutical and Medical Device Act.



Specials & Hospital Exemption



	Specials	Hospital Exemption
Legal basis	Art. 5 (1) of Directive 2001/83/EC (Compassionate use on a named patient basis)	Art. 28 (2) ATMP regulation amending art. 3 of Dir. 2001/83/EC
Authorisation	No product licence but manufacturer licence	
Qualified Person	NO	
Scope	Any medicinal product including ATMPs	ATMPs only
Purpose	For special (clinical) needs of an individual patient	For an individual patient
Use	No restriction	Hospital
Movement	YES, possible export/import	NO, preparation and use within the same Member State
Evolution	Stopped once marketing authorisation obtained	<i>Nothing is said</i>



Evidence for the efficacy is NOT mandatory.

Stem cell shots linked to outbreak of bacterial infection



At least 12 patients in Florida, Texas and Arizona became infected after getting injections, the Centers for Disease Control and Prevention said.

By Associated Press

December 21, 2018

Health officials on Thursday reported an outbreak of bacterial infections in people who got injections of stem cells derived from umbilical cord blood.

At least 12 patients in three states – Florida, Texas and Arizona – became infected after getting injections for problems like joint and back pain, the Centers for Disease Control and Prevention said. All 12 were hospitalized, three of them for a month or longer. None died.

Investigators don't think the contamination occurred at the clinics where the shots were given, because they found bacteria in unopened vials provided by the distributor, Liveyon, based in Yorba Linda, California.

Liveyon voluntarily recalled the stem cells in October.

Infection by an unapproved cord blood cell product



Bacterial contamination during the manufacturing



Protection of the Public Health through the RM Safety Act (2014~)



6 arrested over unauthorized stem cell therapy using cord blood

 **KYODO NEWS** August 27, 2017



In order to prevent future adverse events, the Government can arrest medical practitioners who conduct cell therapy without notifying the authorities.

<https://english.kyodonews.net/news/2017/08/5d0a5ee3cba3-update1-6-arrested-over-unauthorized-stem-cell-therapy-using-cord-blood.html>

MATSUYAMA, Japan – Police on Sunday arrested a doctor and five others suspected of involvement in unauthorized stem cell therapies using blood from umbilical cords and placenta after childbirth.

The doctor who heads a clinic in Tokyo and people involved in cord blood sales are suspected to have administered cord blood to seven patients to treat cancer and as a beauty treatment. Each treatment is said to have cost 3 million to 4 million yen (\$27,400-\$36,600).

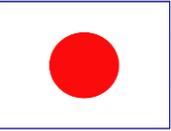
While hopes are high over the use of cord blood in the field of regenerative medicine to treat a number of diseases as it contains stem cells, the health ministry is concerned over the spread of costly medical services provided without clear scientific evidence and without ensuring sufficient safety.

The arrests were the first of anyone suspected of violating a law on regenerative medicine that came into force in 2014. The transplantation of cells could involve the risk of graft rejection and infection.

Medical institutions using stem cells are required to submit treatment plans beforehand for review by the health ministry, except for treating designated diseases such as leukemia.

The six suspects allegedly conducted the treatments without notifying the authorities.

Two Acts Regulating CT/RM

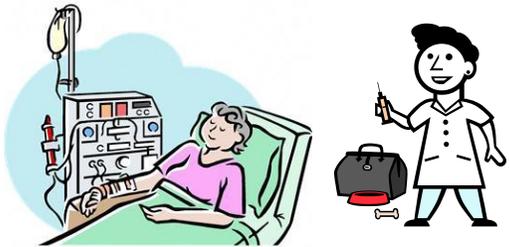


In Hospital

Cell Therapy
Regenerative Medicine

On Market

Medical practices using processed cells
whose safety and efficacy have not been
established yet



Act on the Safety of Regenerative
Medicine (ASRM, RM Safety Act)

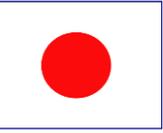
Basically not covered
by public insurance

Production and marketing of
products for CT/RM by firms

Pharmaceuticals and Medical Devices
Act (PMD Act)

Usually fully covered
by public insurance

Regenerative Medical Products in the PMD Act



Former Pharmaceutical
Affairs Law (PAL)

Drug

Device



PMD Act
(Revised PAL)

Drug

Regenerative
Medical Product
(RM Product)

Device

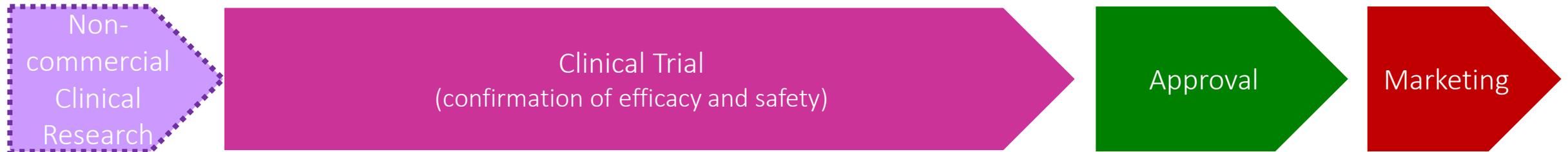
◆ Additions for regenerative medicine products

- Definition and independent chapter for regenerative medicine products
- Introduction of conditional/time limited approval system

Unique Approval Pathway in Japan's Legislation



Conventional approval process



Unique approval process that accommodates early practical application of **RM products**



RM
Safety
Act

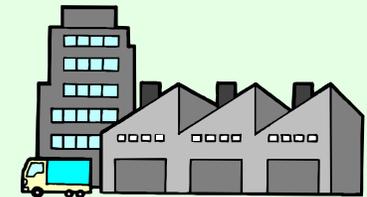
PMD Act

- If data from the clinical trial are likely predict efficacy and confirming safety, conditional/term-limited marketing authorization for RM products might be granted to timely provide the products to patients.
- The PMD Act requires further confirmation of safety and efficacy during the post-marketing phase.

RM Products Approved for Manufacturing & Marketing in Japan

9 RM products have been approved under PMD Act
(including **2 products for in vivo gene therapy**)

- autologous epidermis
 - autologous cartilage
 - **allogeneic** MSCs for GVHD
 - **autologous myoblast sheet***
 - **autologous MSCs for spinal cord injury ***
 - autologous CAR-T cells
 - autologous cultured corneal epithelium
-
- **plasmid vector for chronic arterial occlusion ***
 - AAV vector for spinal muscular atrophy



***conditional & term-limited approval**

Criticism of the recent conditional/term-limited approval of autologous MSCs for SCI



A stem-cell treatment for spinal-cord injuries will soon be available in Japan.

JAPAN

Stem-cell therapy raises concerns

Independent researchers warn that approval is premature.

BY DAVID CYRANOSKI

Japan has approved a stem-cell treatment for spinal-cord injuries — the first such therapy for this kind of injury to receive government approval for sale to patients.

"This is an unprecedented revolution of science and medicine, which will open a new era of health care," says oncologist Masanori Fukushima, head of the Translational Research Informatics Center, a Japanese government organization in Kobe that has been giving advice and support to the project for more than a decade.

But ten specialists in stem-cell science or spinal-cord injuries, who were approached for comment by *Nature* and were not involved in the work or its commercialization, say the approval is premature, because there is insufficient evidence that the treatment works. Many of them say the approval for the therapy, which is injected intravenously, was based on a small, poorly designed clinical trial.

They say that the trial's flaws — including that it was not double-blinded — make it difficult to assess long-term efficacy, because it is hard to rule out whether patients might have recovered naturally. And, although the cells used — which are extracted from a patient's bone marrow and known as mesenchymal stem cells (MSCs) — are thought to be safe, the infusion of stem cells into the blood has been connected with dangerous blood clots in the lungs. And all medical procedures carry risks, which makes them hard to justify unless

they are proven to offer a benefit.

"This approval is an unfortunate step away from everything researchers have learned over the past 70 years about how to conduct a valid clinical trial," says James Guest, a neurosurgeon at the Miami Project to Cure Paralysis at the University of Miami in Florida.

One inventor of the treatment, neurosurgeon Osamu Honmou of Sapporo Medical University in Japan, says he plans to publish a scientific paper that will discuss the clinical trial and safety issues. "I think it is very safe."

He says he did not do a double-blinded study because Japan's regulations do not require it. "The most important point is that the efficacy is dramatic and definitive," adds Fukushima.

The unpublished results describe a trial of 13 people who had experienced spinal-cord injuries in the past 40 days. The team found that infusions of MSCs, which had been multiplied in the lab after they were extracted, helped the injured volunteers to regain some of the sensation and movement they had lost.

EARLY GREEN LIGHT

On the basis of these results, Japan's health ministry last month gave conditional approval for the treatment, called Stemirac. In the clinical trial, about 50 million to 200 million MSCs were intravenously infused back into patients 40 days after their injury to help repair the damage. The team can market and sell the therapy as long as they collect data from the participants over the next seven years that show that it works. People could start paying

"This approval is an unfortunate step away from everything researchers have learned over the past 70 years about how to conduct a valid clinical trial,"

James Guest, spinal cord injury researcher

"This trial, as designed, cannot reveal efficacy,"

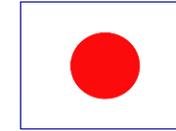
Bruce Dobkin, spinal cord injury researcher

"I do not think it is morally justified to charge patients for an unproven therapy that has risks,"

Arnold Kriegstein, stem cell researcher

Nature 565, 535–536; 2019 and Nature 565, 544–545; 2019.

Criticism of the recent conditional/term-limited approval of autologous MSCs for SCI



MHLW's response to the Criticism



A stem-cell treatment for spinal-cord injuries will soon be available in Japan.

JAPAN

Stem-cell therapy

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"cannot accept your criticism of our approval of stem-cell treatment for spinal-cord injuries"

"This approval is an unfortunate step away from everything researchers have learned over the past 70 years about how to conduct a valid clinical trial,"
James Guest, spinal cord injury researcher

"This trial, as designed, cannot reveal efficacy,"
Bruce Dobkin, spinal cord injury researcher

"But in this therapy, known as Stemirac, stem cells from the patient's bone marrow are cultured externally and then returned to the patient (in sub-acute phase). **A double-blind study is therefore structurally impossible, and performing a sham operation on a control group would raise ethical issues.**"

"I do not think it is morally justified to charge patients for an unproven therapy that has risks,"
Arnold Kriegstein, stem cell researcher

"However, under the terms of the country's conditional and time-limited approval for regenerative medical products, such products are granted marketing authorization only when efficacy can be demonstrated in post-marketing studies within a specified period. And, **because Stemirac is covered by national health insurance, patient payments are fixed at a feasible level.**"

surgeon at the Miami Project to Cure Paralysis at the University of Miami in Florida.
One inventor of the treatment, neurosurgeon Osamu Hommu of Sapporo Medical University in Japan, says he plans to publish a scientific paper that will discuss the clinical trial and safety issues. "I think it is very safe." He says he did not do a double-blinded study because Japan's regulations do not require it. "The most important point is that the efficacy is dramatic and definitive," adds Fukushima. "The results describe a trial of

damage. The team can market and sell the therapy as long as they collect data from the participants over the next seven years that show that it works. People could start paying

Correspondence (Nature 569, 40; 2019)

Likely to Predict Efficacy (Clinical Benefit)

USFDA -Accelerated Approval of New Drugs for Serious or Life-Threatening Illnesses (57 FR 58958, Dec. 11, 1992)



- It applies to certain new drug products in treating serious or life-threatening illnesses and that provide meaningful therapeutic benefit to patients over existing treatments.
- **Approval based on a surrogate endpoint or on an effect on a clinical endpoint other than survival** or irreversible morbidity.
- The drug product has an effect on a surrogate endpoint that is reasonably likely to predict clinical benefit or on the basis of an effect on a clinical endpoint other than survival or irreversible morbidity..
- Approval will be subject to **the requirement that the applicant study the drug further, to verify and describe its clinical benefit.**
- Postmarketing studies would usually be studies already underway.
- FDA may **withdraw approval**, if a **postmarketing clinical study fails** to verify clinical benefit;

Early Access Schemes of US, EU & UK and JPN

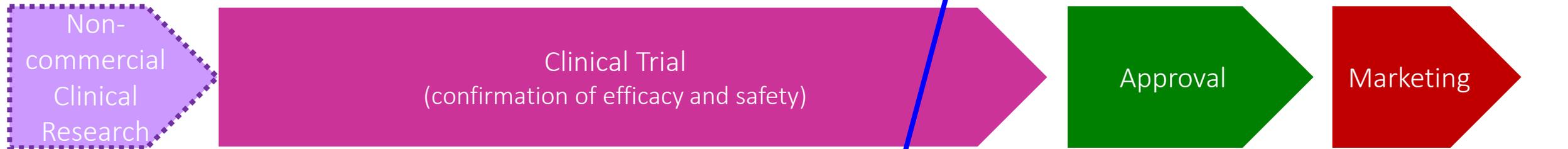
US 	EU & UK  	JPN 
Priority Review	Accelerated Assessment	Priority Review
<p>Accelerated approval for serious or life-threatening illnesses</p>	<p>Conditional marketing authorisation (MA)</p> <p>MA under exceptional circumstances</p>	<p>Conditional approval for Oncology drugs & Orphan drugs</p> <p>Conditional & term-limited approval for RM products</p>
Breakthrough therapy & Fast Track designation	Hospital Exemption	
<p>RMAT (Regenerative Medicine Advanced Therapy) designation</p>	PRIME (PRiority MEdicines) scheme	Forerunner Review Assignment (“SAKIGAKE”)

Each agency has unique approaches to accommodate patient access to medicines although they have certain similarity.

Unique Approval Pathway in Japan's Legislation



Conventional approval process



New approval process that accommodates early practical application of RM products



RM Safety Act

Challenge

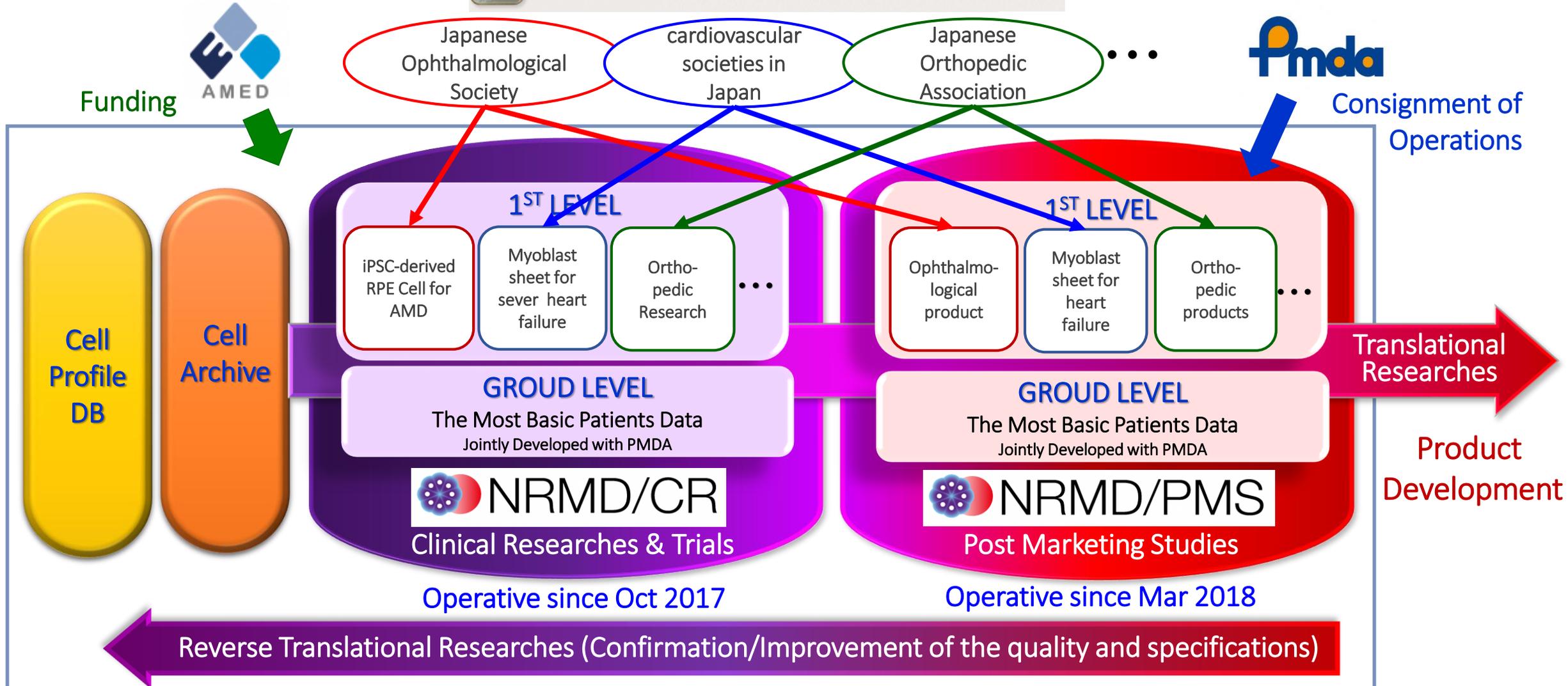
PMD Act

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Development of Nation-wide Clinical Research Data Systems (NRMD)



JAMS The Japanese Association of Medical Sciences



These Databases enables seamless translational/reverse translational researches from clinical investigation to PMS, by acquiring real world data of all clinical cases **into the systems with common data quality assurance.**

Introduction of National Regenerative Medicine Database (NRMD)

(Japanese)

<https://www.youtube.com/watch?v=s3wdgnYZ-l8>

(English)

<https://www.youtube.com/watch?v=LVCLVkJPzrNQ>



HESI CT-TRACS Membership



Committee members and collaborators from > 25 organizations across EU, UK, Japan and USA.

(CT-TRACS Multi-Sector Membership, as of November 2020)

Regulatory bodies:



Universities/ Research Centers:



Gov./Consortia/NGO:



Developers (Therapies and Tools), CROs:



Thank you for your attention!

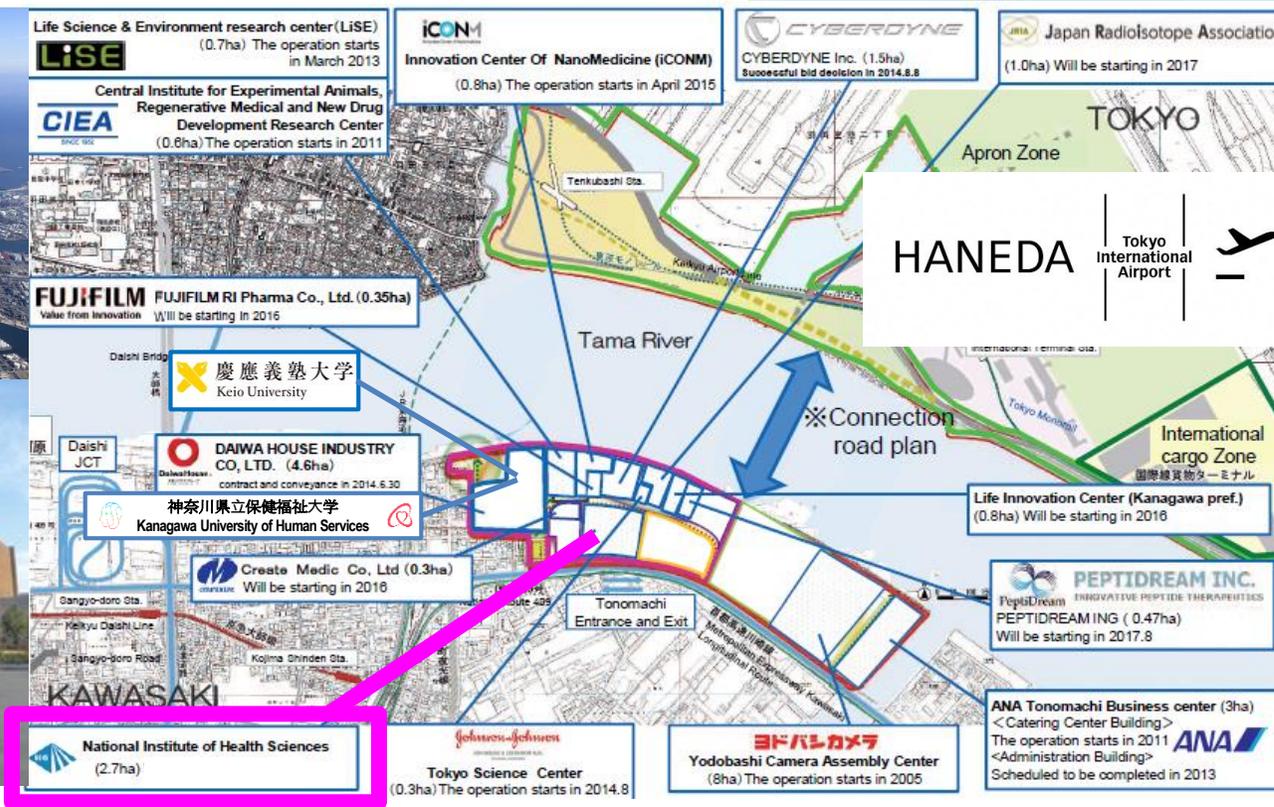
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* <https://www.oag.com/hubfs/air-canada-787.jpg>

** <http://www.city.kawasaki.jp/en/page/0000038680.html>