

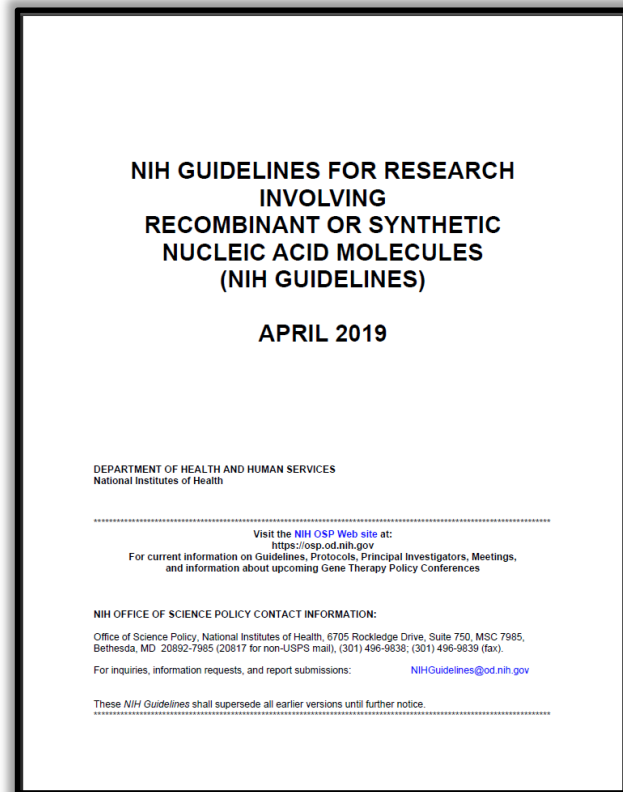
What's New at the NIH Office of Science Policy?

Kathryn L. Harris, Ph.D., RBP
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NIH Office of Science Policy

Presentation Overview

- **Oversight of Human Gene Transfer (HGT) Research**
 - **Recent Amendment to the *NIH Guidelines***
- Oversight of Emerging Technology
 - Evolution of the RAC
 - *NIH Guidelines* for the 21st Century

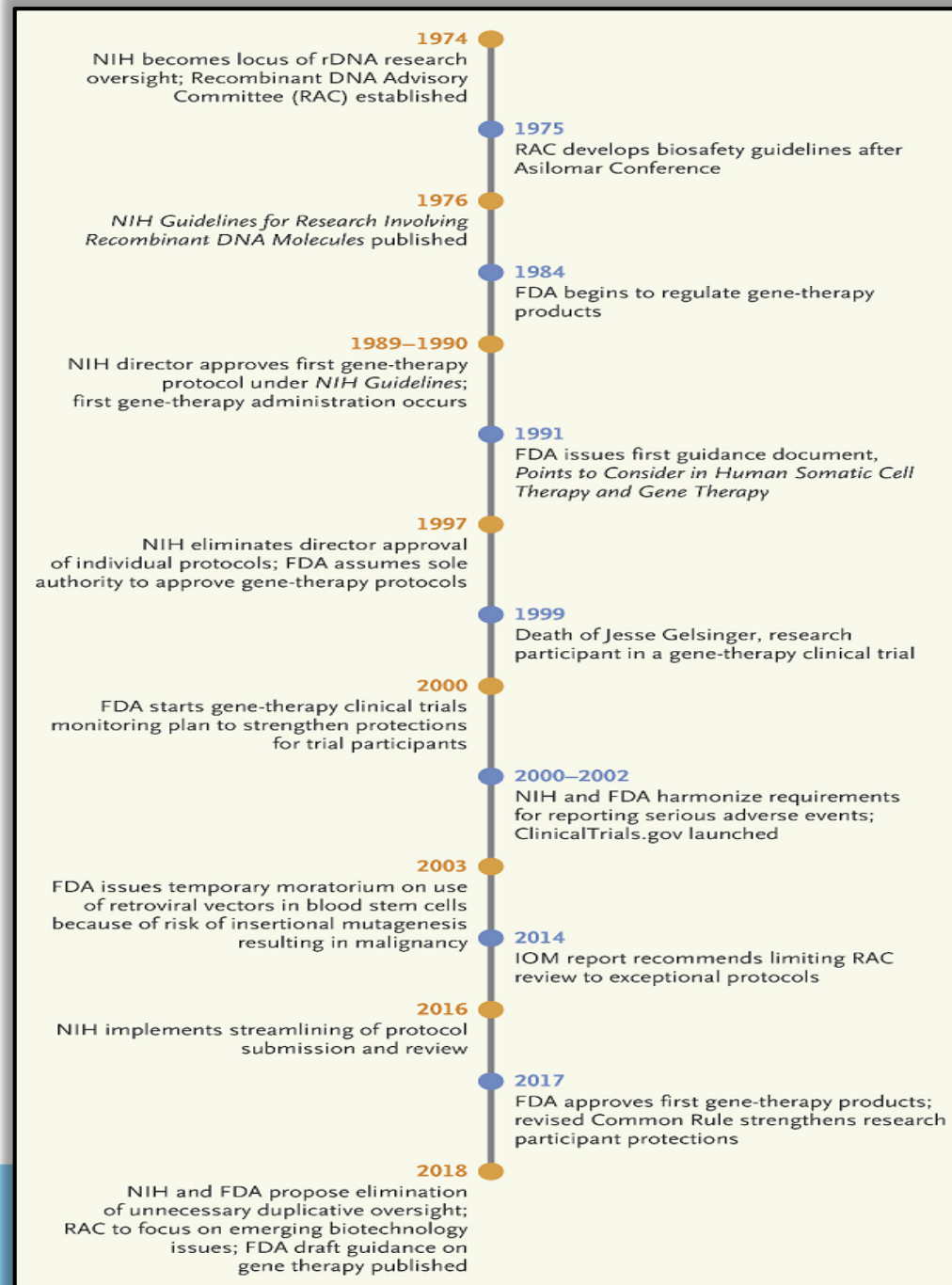
NIH Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules



- **Evolving, scientifically-responsive document**
 - **Multiple revisions since 1976**
 - **Latest version – April 2019**

<https://osp.od.nih.gov/biotechnology/nih-guidelines/>

HGT Timeline



HGT - We've Come A Long Way...

- **Significant progress, several FDA approved products**
 - **As of September 2018, more than 700 active investigational gene therapy products have been submitted to the FDA for review**



HGT - We've Come A Long Way...

- **Oversight has evolved**
 - **ClinicalTrials.gov provides transparency for all clinical trials;**
 - **Human research participants protections strengthened by changes to Common Rule;**
 - **FDA recent draft guidances (manufacturing, LTFU, clinical development)**
- **Duplication in review and reporting not afforded to other areas of clinical research**



The screenshot shows the ClinicalTrials.gov website interface. At the top, there is a navigation bar with links for Home, Search, Study Topics, and Glossary. Below this is a search bar and a list of filters: List Results, Refine Search, Results by Topic, Results on Map, and Search Details. The main content area displays the results of a search, indicating that two studies were found. The first study is titled "Bimatoprost 0.03% Versus Travoprost 0.004% in Patients Currently on Latanoprost 0.005%" and is marked as "Completed" with "Has Results". The second study is titled "The Beta Cell Responsiveness to Glucose Dependent Insulinotropic Polypeptide (GIP) With and Without Sulfonylurea in Patients With Type 2 Diabetes" and is also marked as "Completed" with "Has Results". At the bottom of the page, there are logos for the U.S. National Library of Medicine, U.S. National Institutes of Health, U.S. Department of Health & Human Services, and the U.S. Food and Drug Administration.

Revised Common Rule

The U.S. Department of Health and Human Services and fifteen other Federal Departments and Agencies have issued final revisions to the Federal Policy for the Protection of Human Subjects (the Common Rule). A final rule was published in the *Federal Register* (FR) on January 19, 2017, and was amended to delay the effective and compliance dates on January 22, 2018 and June 19, 2018.

The revised Common Rule is effective July 19, 2018; note that from July 19, 2018 through January 20, 2019 institutions are not permitted to implement the entirety of the revised Common Rule. This is explained in the transition provision (45 CFR 46.101(l)), as amended June 19, 2018).

In order to understand the regulatory text of the revised Common Rule, OHRP recommends reviewing the preamble and regulatory text from:

- [The final rule to revise the Common Rule - PDF](#) (published January 19, 2017)

From “Emerging” to “Emerged”: The Next Phase of HGT Oversight



The NEW ENGLAND JOURNAL of MEDICINE

Perspective

The Next Phase of Human Gene-Therapy Oversight

Francis S. Collins, M.D., Ph.D., and Scott Gottlieb, M.D.

The National Institutes of Health (NIH) and the Food and Drug Administration (FDA) have played key roles in the emergence of and effective human gene therapies. Now, we are proposing new efforts to encourage further advances in this rapidly evolving field.

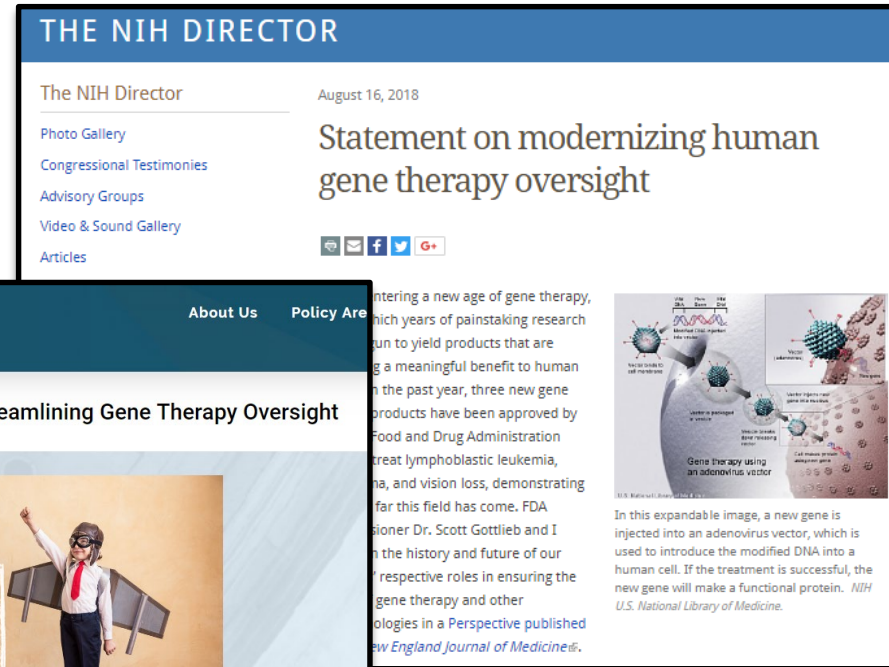
The potential to alter human genes directly was first recognized nearly 50 years ago, around the same time as initial groundbreaking advances were being made in recombinant DNA technology. After intense discussions regarding the ethical, legal, and social implications of this technology, conversations were initiated at the NIH that led to the establishment of the Recombinant DNA Advisory Committee (RAC) in 1974. The RAC's mission was to advise the NIH director on research that used emerging technologies involving manipulation of nucleic acids — a mission that was eventually expanded to encompass the review and discussion of protocols for gene therapy in humans. In 1990, the FDA oversaw the first U.S. human gene-therapy trial, which involved pediatric patients with adenosine deaminase deficiency and was conducted at the NIH Clinical Center in Bethesda, Maryland.

Although no major safety concerns were initially reported, the course of the 1990s became evident that many questions regarding the safety and efficacy of gene therapy remained unanswered. These unknowns brought into sharp focus when Jesse Gelsinger died of a massive immune response during a safety trial of gene therapy for ornithine transcarbamylase deficiency.¹ This tragic death led to closer scrutiny of the field, including a greater focus on dialogue and increased regulatory oversight.

Since that time, a tremendous amount of scientific work related to gene therapy has been conducted with support from government agencies, academic institutions, and commercial sponsors.

These efforts have increased understanding of the basic biology of

The New England Journal of Medicine
Downloaded from nejm.org at NIH Library on August 21, 2018. For personal use only.
Copyright © 2018 Massachusetts Medical Society. All rights reserved.



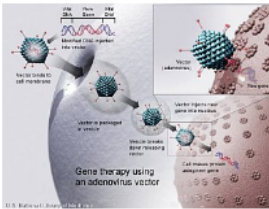
THE NIH DIRECTOR

The NIH Director August 16, 2018

Statement on modernizing human gene therapy oversight

Photo Gallery
Congressional Testimonies
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Video & Sound Gallery
Articles

entering a new age of gene therapy, which years of painstaking research have begun to yield products that are a meaningful benefit to human health. In the past year, three new gene products have been approved by the Food and Drug Administration to treat lymphoblastic leukemia, blindness, and vision loss, demonstrating how far this field has come. FDA Commissioner Dr. Scott Gottlieb and I are proud to be part of the history and future of our field. We will continue to play our respective roles in ensuring the safety and efficacy of gene therapy and other emerging technologies in a *Perspective* published in *The New England Journal of Medicine*.



In this expandable image, a new gene is injected into an adenovirus vector, which is used to introduce the modified DNA into a human cell. If the treatment is successful, the new gene will make a functional protein. NIH U.S. National Library of Medicine.



NIH National Institutes of Health
Office of Science Policy

About Us Policy Areas

From Emerging to Emerged: Streamlining Gene Therapy Oversight



I attend many meetings on policy, ethical, safety, and security issues related to “emerging biotechnologies.” Much like the scientists gathered more than 40 years ago at the Asilomar conference center to discuss the uncertain risk landscape of the then emerging science of recombinant DNA (rDNA), the research community continues to try to balance the promise and opportunity of rapidly advancing science with its safe and ethical use. While we have all grown expert at recognizing new areas of science that challenge our current understanding or oversight systems, we have largely ignored answering the question, “When has science progressed to the point that we no longer consider something an ‘emerging biotechnology?’”

Notice of Final Action Federal Register (April 25, 2019)

The screenshot displays the Federal Register website interface. At the top, the logo for the National Archives and Records Administration is visible, along with the text "FEDERAL REGISTER" and "The Daily Journal of the United States Government". A navigation bar includes a "Notice" link. The main heading of the document is "Final Action Under the NIH Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules (NIH Guidelines)". Below this, it states "A Notice by the National Institutes of Health on 04/26/2019".

The document is categorized as a "PUBLISHED DOCUMENT". The left sidebar contains a menu with icons for home, search, and document actions. The main content area is divided into sections:

- AGENCY:** National Institutes of Health, HHS.
- ACTION:** Notice of changes to the *NIH Guidelines*.
- SUMMARY:** This notice sets forth final changes to the *NIH Guidelines for Research Involving Recombinant or Synthetic Nucleic Acid Molecules (NIH Guidelines)* to streamline oversight for human gene transfer clinical research protocols and reduce duplicative reporting requirements already captured within the existing regulatory framework, as initially outlined by the NIH Office of Science Policy (OSP) in a **Federal Register** notice issued on August 17, 2018. Following the solicitation of public comment on its original proposal, the NIH is amending the *NIH Guidelines* to: (A) Delete the NIH protocol registration submission and reporting requirements under Appendix M of the *NIH Guidelines*, and (B) modify the roles and responsibilities of entities that involve human gene transfer and the Recombinant DNA Advisory Committee (RAC).
- DATES:** Changes outlined in this notice will be effective upon publication in the **Federal Register**.

On the right side, there are two "DOCUMENT DETAILS" sections:

- DOCUMENT DETAILS (top):** Printed version: PDF; Publication Date: 04/26/2019; Agencies: National Institutes of Health; Document Type: Notice; Document Citation: 84 FR 17858; Page: 17858-17866 (9 pages); Document Number: 2019-08462.
- DOCUMENT DETAILS (bottom):** DOCUMENT STATISTICS; Page views: 553.

Effective Immediately

Amendment of HGT Oversight Under the *NIH Guidelines*

- **April 2019 – Publication of Federal Register Notice to streamline HGT oversight**
 - **NIH no longer accepting new HGT protocols, annual reports, safety reports, amendments or other documentation required for previously registered protocols under the *NIH Guidelines***
 - **NIH not convening the RAC to review individual protocols**

Amendment of HGT Oversight Under the *NIH Guidelines*

- **Institutional Biosafety Committees (IBCs) and Institutional Review Boards (IRBs) not required to submit documentation to the NIH assessing whether a particular protocol meets the criteria for RAC review**
- **Other roles and responsibilities of IBCs at the local level, including review and approval of HGT research, continue as described in the *NIH Guidelines***
- **Investigator or Sponsor remain responsible for ensuring FDA regulatory requirements and all other relevant requirements are met prior to proceeding with the trial**

Amendments to the *NIH Guidelines*

ENTITY	PREVIOUS RESPONSIBILITIES	CURRENT RESPONSIBILITIES
INSTITUTIONAL BIOSAFETY COMMITTEES (IBCS)	<ul style="list-style-type: none">▪ Review and approve individual HGT protocols▪ Review biosafety, clinical, and human subjects aspects (e.g., Informed Consent Documents) of HGT protocols▪ Continue oversight of safety reporting after time of administration	<ul style="list-style-type: none">▪ Review and approve individual HGT protocols▪ Review biosafety aspects (e.g. administration, shedding) of HGT protocols▪ May complete any oversight after time of final administration or end point based on biosafety assessment

Amendments to the *NIH Guidelines*

ENTITY	PREVIOUS RESPONSIBILITIES	CURRENT RESPONSIBILITIES
PRINCIPAL INVESTIGATORS (PI'S)	<ul style="list-style-type: none">▪ Ensure all requirements for protocol submission, review and reporting for HGT protocols are addressed▪ Comply with the <i>NIH Guidelines</i> in the conduct of recombinant or synthetic nucleic acid molecule research	<ul style="list-style-type: none">▪ Comply with the <i>NIH Guidelines</i> in the conduct of recombinant or synthetic nucleic acid molecule research

Amendments to the *NIH Guidelines*

ENTITY	PREVIOUS RESPONSIBILITIES	RESPONSIBILITIES NOW
<p data-bbox="402 534 891 779">Novel and Exceptional Technology and Research Advisory Committee (NExTRAC)</p> <p data-bbox="387 868 907 1048">RECOMBINANT DNA ADVISORY COMMITTEE (RAC)</p>	<ul data-bbox="942 368 1544 1170" style="list-style-type: none"> ▪ Responsibilities specified in the <i>NIH Guidelines</i> and committee charter ▪ Provide public forum for review of exceptional individual human gene transfer (HGT) protocols ▪ Provide advice on biosafety guidance and amendment of the <i>NIH Guidelines</i> 	<ul data-bbox="1574 368 2175 1150" style="list-style-type: none"> ▪ Responsibilities specified in committee charter ▪ Provide advice to NIH Director on matters (scientific, ethical and social issues) related to the conduct and oversight of research involving emerging biotechnologies in biomedical sciences ▪ No review of individual protocols

Presentation Overview

- NIH OSP – Who We Are and What We Do
- Oversight of Human Gene Transfer (HGT) Research
 - Recent Amendments to the *NIH Guidelines*
- **Oversight of Emerging Technology**
 - **Evolution of the RAC > NExTRAC**
 - ***NIH Guidelines* for the 21st Century**

Introducing the NExTRAC

Novel and Exceptional Technology and Research Advisory Committee

Reckoning the potential of CRISPR/Cas9 tech, NIH launches \$190M genome editing research initiative



by AMBER TONG on January 23, 2018 08:44 PM EDT
Updated: 11:37 PM



NIH.gov | Blog Home | Director's Album

synthetic biology

Creative Minds: Giving Bacteria Needles to Fight Intestinal Disease

Posted on October 5th, 2017 by Dr. Francis Collins

- Advise the NIH Director on scientific, safety, ethical and social issues associated with emerging biotechnologies
 - E.g., gene editing, gene drives, synthetic biology, neurotechnology, etc.
 - Cutting edge clinical applications?
- Facilitate transparent public discourse

Inaugural Meeting of the NExTRAC

As part of the meeting, the NExTRAC will:

- **Receive its formal charge from Dr. Collins;**
- **Identify pathways for responsible innovation in emerging biotechnologies;**
- **Discuss characteristics of emerging biotechnologies; and**
- **Analyze proactive approaches to addressing scientific and societal implications of emerging biotechnologies**

Inaugural Meeting of the NExTRAC

December 5-6, 2019

NIH Campus, Bethesda

More information about the meeting, including a draft agenda and videocast information can be found at:

<https://osp.od.nih.gov/biotechnology/novel-exceptional-technology-research-advisory-committee/>

21st Century *NIH Guidelines*



**“The *NIH Guidelines* cannot anticipate every possible situation...
As new techniques develop, the *NIH Guidelines* should be periodically reviewed to
determine whether and how such research should be explicitly addressed.
It is the responsibility of the institution and those associated with it to adhere to the
intent of the *NIH Guidelines* as well as to their specifics.”**


Some Questions...

- **We need to examine the current biosafety risk assessment framework to ensure we can adequately identify and manage potential safety issues posed by the application of emerging biotechnologies and new capabilities in the life sciences**
 - **What is future role of the *NIH Guidelines* within the overall context of the biosafety oversight system in the U.S.?**
 - **What is the future role of the RAC within this system?**
- **We need to develop flexible/dynamic oversight framework that evolves with the technology**
 - **How do we ensure our oversight system keeps current and allows science to proceed safely and responsibly?**

More Questions...

- **Scope of the NIH biosafety oversight system**
 - **What should be captured in our biosafety oversight system?**
 - **Need to focus on the applications of the technology, vs. technology itself?**
- **Appropriate levels of oversight (local/federal)**
 - **Do some of the routine research protocols employed today still require the level of oversight that is currently in place in the *NIH Guidelines*?**
 - **If we were to concentrate our oversight where it would be most beneficial from a risk management perspective, where might we focus our attention?**

Yet More Questions...

- **How do we anticipate an emerging biotechnology that will create policy/safety/ethical/security challenges?**
 - **Can potential risks posed by emerging biotechnologies and new capabilities be managed by the current NIH governance structure for biosafety oversight (i.e IBCs)?**
 - **Is there a need for additional biosafety guidance to address new capabilities?**
 - **When has an emerging technology “emerged”?**
- 

Emerging Technologies: Important Semantics

Technologies/Research Tools

- Genetic Engineering • Synthetic Biology •
- Gene Editing •

Tools ≠ Applications

Applications

- Somatic Gene Therapy • Germline Modification •
- Antimicrobials • Organism Creation/Modification •
- Gene Drives •

Emerging Biotechnologies: The Promise...

Science



Brian Madeux, who has Hunter syndrome, has received a treatment aimed at editing the genome of his liver cells. AP PHOTO/ERIC RISSBERG

A human has been injected with gene-editing tools to cure his disabling disease. Here's what you need to know

By Jocelyn Kaiser | Nov. 15, 2017, 6:00 PM

FDA U.S. FOOD & DRUG ADMINISTRATION

FDA approval brings first gene therapy to the United States

CAR T-cell therapy approved to treat certain children and young adults with B-cell acute lymphoblastic leukemia

For Immediate Release November 22, 2017

NIH Director's Blog

Gene Editing in Dogs Boosts Hope for Kids with Muscular Dystrophy

Posted on September 11th, 2018 by Dr. Francis Collins




Untreated Treated

Caption: A CRISPR/Cas9 gene editing-based treatment restored production of dystrophin proteins (green) in the diaphragm muscles of dogs with Duchenne muscular dystrophy. Credit: UT Southwestern

CRISPR and other gene editing tools hold great promise for curing a wide range of devastating conditions caused by misspellings in DNA. Among the many looking to gene editing with hope are kids with Duchenne muscular dystrophy (DMD), an uncommon and tragically fatal genetic disease in which their muscles—including skeletal muscles, the heart, and the main muscle used for breathing—gradually become too weak to function. Such hopes were recently buoyed by a new study that showed infusion of the CRISPR/Cas9 gene editing system could halt disease progression in a dog model of DMD.

CRISPR treatment for rare genetic eye disorder gains FDA study approval

Damian Garde | STAT | December 10, 2018




Days after a Chinese researcher incensed the world of science with claims of editing the genomes of twin girls, an American company is plotting a CRISPR trial of its own. But in place of the secrecy and stagecraft that marked the Chinese experiment, Editas Medicine went the old-fashioned way: waiting for approval from the Food and Drug Administration.

WIRED

MEGAN MOLTENI | SCIENCE | 01.16.19 | 04:30 PM

ANTIBIOTICS ARE FAILING US. CRISPR IS OUR GLIMMER OF HOPE



Antibiotic overuse has led to a growth in drug-resistant infections, which sicken more than two million people in the US each year and kill upwards of 23,000.

BJARTE RETTEGAL/GETTY IMAGES

Science



Genetically engineered piglets free of retroviral sequences may provide safer organs for human transplant. GENESYS

CRISPR slices virus genes out of pigs, but will it make organ transplants to humans safer?

By Kelly Servick | Aug. 10, 2017, 2:00 PM

Emerging Biotechnologies: The Peril...

The New York Times

***As D.I.Y. Gene Editing Gains Popularity,
'Someone Is Going to Get Hurt'***

By Emily Baumgaertner

May 14, 2018

The Telegraph

**GM mosquitoes: playing with
God or the only way to wipe
out malaria?**

By **Sophie Arie**

5 FEBRUARY 2019



Daily **Mail**
.com

**Controversial 'gene drive' research
sparking ethical debate**

By AFP

PUBLISHED: 06:08 EDT, 6 September 2016

Science

CRISPR—a weapon of mass destruction?

By **Kelly Servick** | Feb. 11, 2016, 4:45 PM



**The CRISPR machines
that can wipe out
entire species**

BY JACKSON RYAN | 7 FEBRUARY 2019 12:00 AM AEDT

The New York Times Magazine


The Biotech Death of Jesse Gelsinger

By **SHERYL GAY STOLBERG** NOV. 28, 1999


Next Steps for the *NIH Guidelines*

- **Continue the important dialogue on issues related to emerging biotechnologies and the future direction of biosafety oversight**
- **Provide opportunities for stakeholders to provide input to NIH on a path forward in considering potential revisions to the *NIH Guidelines***

Parting Thoughts...

- **Life sciences research is a vitally important endeavor that has contributed to biomedical and public health advances, improvements in agriculture, environmental quality, and much more.**
 - **We can facilitate the conduct of beneficial biological research while maintaining a comprehensive biosafety oversight system to protect public health and national security.**
 - **As a society, we must carefully consider aspects of emerging biotechnological capabilities, while maximizing the benefits of biotechnology for all humankind.**
- 

Parting Thoughts...

- **Ideally, we need to develop a flexible and dynamic oversight framework that enables us to assess and manage potential risks posed by the application of emerging biotechnologies in a proactive way.**
 - **It is vital we train our scientists to uphold the highest standards of biosafety as part of responsible conduct of research.**
 - **We look forward to hearing from you as we consider how best to evolve our biosafety oversight framework into 21st Century.**
- 

Contact Us:

- About the changes or the *NIH Guidelines* in general:

NIHGuidelines@od.nih.gov

- Find us on the web at:

osp.od.nih.gov

Thank you for your attention!

