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**DEBCT: Genetically Corrected, Induced Pluripotent Cell-Derived Epithelial Sheets for Definitive Treatment of Dystrophic Epidermolysis Bullosa**

**Grant Award Details**

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DEBCT: Genetically Corrected, Induced Pluripotent Cell-Derived Epithelial Sheets for Definitive Treatment of Dystrophic Epidermolysis Bullosa

**Grant Type:** Therapeutic Translational Research Projects

**Grant Number:** TRAN1-10416

**Project Objective:** Pre-IND meeting for autologous COL7A-1 gene corrected iPSC-derived epithelial sheets, aka "DEBCT", to treat dystrophic epidermolysis bullosa.

**Investigator:**

<b>Name:</b>	Anthony Oro
<b>Institution:</b>	Stanford University
<b>Type:</b>	PI

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**Disease Focus:** Epidermolysis Bullosa, Skin Disease

**Human Stem Cell Use:** iPS Cell

**Cell Line Generation:** iPS Cell

**Award Value:** \$5,107,353

**Status:** Active

**Grant Application Details**

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**Application Title:** DEBCT: Genetically Corrected, Induced Pluripotent Cell-Derived Epithelial Sheets for Definitive Treatment of Dystrophic Epidermolysis Bullosa

**Public Abstract:****Translational Candidate**

DEBCT is an autologous iPS-derived COL7A1-corrected keratinocyte graft indicated for the treatment of all chronic open wounds in patients with RDEB.

**Area of Impact**

RDEB patients lack type VII collagen and have chronic wounds that lack an abundance of keratinocyte stem cells. DEBCT skin grafts will close wounds.

**Mechanism of Action**

RDEB patient keratinocytes contain mutations in COL7A1, lack the adhesion protein type VII collagen, and suffer profound skin fragility, chronic open wounds, and stem cell depletion. DEBCT is a COL7A1-corrected autologous keratinocyte stem cell sheet, when grafted onto wounds, adhere tightly and provide long-term wound closure. Autologous, corrected iPS cells can be grown in large quantities and can be induced to produce keratinocyte stem cells, allowing clinical scaling and manufacturing.

**Unmet Medical Need**

Children with the debilitating inherited blistering disorder Recessive Dystrophic Epidermolysis Bullosa lack the COL7A1 gene and experience painful non-healing wounds over their body, and risk death from cancer later in life. Current therapy is palliation costing thousands of dollars per month.

**Project Objective**

Pre-IND meeting and DEBCT pivotal study plan

**Major Proposed Activities**

- Optimize cGMP-compatible one step reprogramming and correction to autologous IPS cells and develop cGMP-compatible nucleic acid reagents
- Optimize coupling efficiency of COL7A1-corrected iPS-derived graftable keratinocytes and develop cGMP-compatible CD49f cell separation protocol
- Perform rodent pilot efficacy and safety studies of DEBCT keratinocyte grafts prior to a Pre-IND FDA meeting

**Statement of Benefit to California:**

While Epidermolysis Bullosa is a rare orphan disease, many of the common alleles are found in people of Latin American descent, a significant population in California. Children with the debilitating inherited blistering disorder experience painful non-healing wounds over their body, with current palliative therapy costing thousands of dollars per month. Long-term wound closure with DEBCT, a therapy developed in California, would lead to lower overall health costs and improved quality of life.

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