BEFORE THE

INDEPENDENT CITIZENS' OVERSIGHT COMMITTEE AND THE APPLICATION REVIEW SUBCOMMITTEE TO THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE ORGANIZED PURSUANT TO THE CALIFORNIA STEM CELL RESEARCH AND CURES ACT

REGULAR MEETING

LOCATION: VIA ZOOM

DATE: MAY 26, 2022

9 A.M.

REPORTER: BETH C. DRAIN, CA CSR

CSR. NO. 7152

FILE NO.: 2022-22

INDEX

ITEM DESCRIPTION PAGE NO.

OPEN SESSION

1. CALL TO ORDER 3

2. CALL TO ORDER 3

ACTION ITEMS

3. CONSIDERATIONOF APPLICATIONS SUBMITTED IN RESPONSE TO CLINICAL TRIAL STAGE PROJECTS PROGRAM ANNOUNCEMENT (CLIN 1 OR 2)

DISCUSSION ITEMS

4. PUBLIC COMMENT NONE
5. ADJOURNMENT 18

2

1	MAY 26, 2022; 9 A.M.
1	MAT 20, 2022, 9 A.M.
2	
3	CHAIRMAN THOMAS: OKAY. GOOD MORNING,
4	EVERYBODY. WELCOME TO THE MAY MEETING OF THE ICOC
5	AND THE APPLICATION REVIEW SUBCOMMITTEE. I'VE GOT
6	MYSELF ON BLOCKED VIDEO HERE BECAUSE IT'S A
7	POTENTIALLY UNSTABLE INTERNET. WANT TO MAKE SURE WE
8	DON'T LOSE THAT. SO THANK YOU ALL FOR ATTENDING.
9	MARIA, WILL YOU PLEASE CALL THE ROLL.
10	MS. BONNEVILLE: SURE. DAN BERNAL.
11	LEONDRA CLARK-HARVEY.
12	MS. CLARK-HARVEY: PRESENT.
13	MS. BONNEVILLE: ANNE-MARIE DULIEGE.
14	DR. DULIEGE: YES.
15	MS. BONNEVILLE: YSABEL DURON.
16	MS. DURON: YES.
17	MS. BONNEVILLE: ELENA FLOWERS.
18	DR. FLOWERS: PRESENT.
19	MS. BONNEVILLE: MARK FISCHER-COLBRIE.
20	DR. FISCHER-COLBRIE: HERE
21	MS. BONNEVILLE: FRED FISHER.
22	DR. FISHER: HERE.
23	MS. BONNEVILLE: DAVID HIGGINS. STEVE
24	JUELSGAARD.
25	MR. JUELSGAARD: HERE.
	3

1	MS. BONNEVILLE: RICH LAJARA.
2	MR. LAHARA: HERE.
3	MS. BONNEVILLE: DAVE MARTIN.
4	DR. MARTIN: HERE.
5	MS. BONNEVILLE: CHRISTINE MIASKOWSKI.
6	DR. MIASKOWSKI: MORNING.
7	MS. BONNEVILLE: LAUREN MILLER-ROGEN.
8	MS. MILLER-ROGEN: HERE.
9	MS. BONNEVILLE: ADRIANA PADILLA.
10	DR. PADILLA: HERE.
11	MS. BONNEVILLE: JOE PANETTA.
12	MR. PANETTA: HERE.
13	MS. BONNEVILLE: AL ROWLETT.
14	MR. ROWLETT: HERE.
15	MS. BONNEVILLE: MARVIN SOUTHARD.
16	JONATHAN THOMAS.
17	CHAIRMAN THOMAS: HERE.
18	MS. BONNEVILLE: ART TORRES.
19	MR. TORRES: HERE.
20	MS. BONNEVILLE: KAROL WATSON. SO WE HAVE
21	QUORUM.
22	CHAIRMAN THOMAS: THANK YOU, MARIA.
23	WE WILL NOW GO STRAIGHT INTO THE
24	APPLICATION REVIEW SUBCOMMITTEE MEETING. WE HAVE
25	ONE ITEM FOR CONSIDERATION, WHICH IS CONSIDERATION
	4

1	OF APPLICATIONS SUBMITTED IN RESPONSE TO CLINICAL
2	TRIAL STAGE PROJECTS PROGRAM ANNOUNCEMENT, CLIN1, 2,
3	OR 3. WE'LL HAVE A PRESENTATION FROM DR. SAMBRANO.
4	DR. SAMBRANO: OKAY. THANK YOU, MR.
5	CHAIRMAN. GOOD MORNING, EVERYONE.
6	SO WE ARE STARTING THIS MEETING, AS WE DO
7	WITH ALL OTHERS, INCLUDING OUR GRANTS WORKING GROUP
8	MEETINGS. WHEN WE START THEM, WE ALSO MAKE SURE
9	THAT WE ARE ALL ON THE SAME PAGE IN TERMS OF WHAT
10	OUR MISSION IS AND WHAT OUR GOAL IS ULTIMATELY,
11	WHICH IS TO ACCELERATE WORLD-CLASS SCIENCE TO
12	DELIVER TRANSFORMATIVE REGENERATIVE MEDICINE
13	TREATMENTS IN AN EQUITABLE MANNER TO A DIVERSE
14	CALIFORNIA AND WORLD.
15	THIS IS A REMINDER OF WHAT OUR 2021/22
16	BUDGET ALLOCATION IS FOR OUR CLINICAL PROGRAM. SO
17	FOR THE CLINICAL PROGRAM, THUS FAR THE BOARD, THE
18	APPLICATION REVIEW SUBCOMMITTEE, HAS APPROVED 70.1
19	MILLION IN AWARDS. TODAY WE HAVE PENDING 27 MILLION
20	SUCH THAT, IF ALL OF THOSE ARE APPROVED, YOU WOULD
21	HAVE AN UNUSED BALANCE OF ABOUT 65 MILLION REMAINING
22	FOR THE FISCAL YEAR WHICH ENDS AT THE END OF JUNE.
23	THIS IS A REMINDER OF HOW WE SCORE
24	CLINICAL APPLICATIONS. WE USE A SCALE OF 1, 2 OR 3.
25	SCORES OF 1 MEANS THAT THEY HAVE EXCEPTIONAL MERIT
	F

1	AND WARRANT FUNDING. THE SCORE OF 2 MEANS THAT THEY
2	NEED IMPROVEMENT AND DON'T WARRANT FUNDING. AND SO
3	THESE APPLICATIONS WILL TYPICALLY GO BACK TO THE
4	APPLICANT FOR CORRECTIONS, REVISIONS, PROVIDING SOME
5	ADDITIONAL DATA THAT CAN COME BACK TO WHATEVER THE
6	NEXT CYCLE IS FOR THE REVIEW. A SCORE OF 3 MEANS
7	THAT IT'S SUFFICIENTLY FLAWED, IT DOESN'T WARRANT
8	FUNDING, AND WE DON'T ACCEPT THOSE FOR AT LEAST SIX
9	MONTHS FROM THE TIME OF THE REVIEW.
10	THE REVIEW CRITERIA THAT ARE UTILIZED TO
11	GIVE THESE SCORES BY THE GRANTS WORKING GROUP ARE
12	BASED ON THE FOLLOWING QUESTIONS. DOES THE PROJECT
13	HOLD THE NECESSARY SIGNIFICANCE AND POTENTIAL FOR
14	IMPACT? MEANING WHAT VALUE DOES IT OFFER, AND IS IT
15	SOMETHING THAT'S WORTH DOING? DOES IT HAVE A GOOD
16	RATIONALE? IS IT WELL-PLANNED AND DESIGNED? IS THE
17	PROJECT FEASIBLE, MEANING THEY HAVE THE APPROPRIATE
18	TEAM AND THE RESOURCES AVAILABLE TO CARRY OUT THE
19	PROPOSED ACTIVITIES? AND THEN, LASTLY, DOES THE
20	PROJECT ADDRESS THE NEEDS OF UNDERSERVED
21	COMMUNITIES?
22	THIS IS A REMINDER OF WHAT THE COMPOSITION
23	OF THE GRANTS WORKING GROUP ITSELF IS. IT INCLUDES
24	SCIENTIFIC GRANTS WORKING GROUP MEMBERS WHO ARE
25	RESPONSIBLE FOR THE SCIENTIFIC EVALUATION OF IT.

1	THEY ARE THE ONES THAT PROVIDE THE SCIENTIFIC SCORE
2	THAT YOU WILL SEE ON ALL APPLICATIONS. AND THERE'S
3	A VARIETY OF EXPERTS AND BACKGROUNDS THAT CONTRIBUTE
4	TO THESE REVIEWS. THERE ARE ALSO PATIENT ADVOCATE
5	AND NURSE MEMBERS WHO ARE ALSO MEMBERS OF THE BOARD
6	WHO ARE RESPONSIBLE FOR CONDUCTING THE DEI
7	EVALUATION OF THE APPLICATIONS, PROVIDING A PATIENT
8	PERSPECTIVE ON THE SIGNIFICANCE AND IMPACT OF THESE
9	PROPOSALS, AND ALSO PROVIDING OVERSIGHT ON THE
10	PROCESS.
11	SO YOU WILL SEE A DEI SCORE ON ALL
12	APPLICATIONS. THESE ARE FROM THE PATIENT ADVOCATE
13	AND NURSE MEMBERS. AND EACH APPLICATION GETS A VOTE
14	ON WHETHER THE PROCESS WAS CONDUCTED IN A FAIR
15	MANNER WHICH WAS CONDUCTED BY THOSE MEMBERS AS WELL.
16	IN ADDITION, WE WILL OFTEN HAVE SCIENTIFIC
17	SPECIALISTS WHO COME IN TO FILL IN THE GAPS THAT THE
18	PRIMARY 15 MEMBERS MAY NOT HAVE IN A GIVEN PANEL.
19	THEY WILL PROVIDE AN INITIAL, BUT NOT A FINAL,
20	SCIENTIFIC SCORE. SO BASICALLY THEY CONTRIBUTE
21	THEIR EXPERTISE THAT INFORMS THE REST OF THE GRANTS
22	WORKING GROUP.
23	ALL RIGHT. SO THE FIRST APPLICATION UNDER
24	CONSIDERATION IS CLIN2-12823, AND THIS IS ONE THAT I
25	PRESENTED THE GRANTS WORKING GROUP RECOMMENDATIONS

1	OF LAST MONTH. AND THE APPLICATION REVIEW
2	SUBCOMMITTEE VOTED ON THIS UNANIMOUSLY TO APPROVE
3	IT. HOWEVER, WE HAVE AN ADMINISTRATIVE ERROR THAT
4	CHAIRMAN THOMAS WILL EXPAND ON AND EXPLAIN.
5	CHAIRMAN THOMAS.
6	CHAIRMAN THOMAS: SO THANK YOU, GIL. SO
7	AS GIL SAYS, YOU WILL RECALL THAT THIS WAS VOTED ON
8	PREVIOUSLY AT OUR LAST ARS MEETING AND WAS
9	UNANIMOUSLY PASSED. SUBSEQUENTLY WE DETERMINED
10	THERE WAS ADMINISTRATIVE ERROR WHEREBY ONE OF THE
11	MEMBERS OF THE ARS WHO WAS CONFLICTED ON THIS
12	PARTICULAR APPLICATION, WAS INADVERTENTLY CALLED
13	UPON AND INADVERTENTLY VOTED ON THIS PARTICULAR
14	GRANT, WHICH IS WHAT GIVES RISE TO THE CONFLICT HERE
15	AND THE NEED IMMEDIATELY TO RECTIFY AT THE FIRST
16	AVAILABLE MOMENT, WHICH IS THIS MEETING.
17	SO THAT MEMBER, BY THE WAY, HAS REPORTED,
18	SELF-REPORTED TO THE FPPC TO OUTLINE THIS
19	ADMINISTRATIVE ERROR AND ACTION IN THE INTEREST OF
20	IMMEDIATE AND FULL TRANSPARENCY AND IS WAITING TO
21	HEAR BACK FROM THE FPPC WITH RESPECT TO THAT REPORT.
22	BECAUSE THIS WAS A VOTE THAT DID HAVE THIS
23	CONFLICT, I'M RESCINDING THE RESULTS OF THAT VOTE.
24	AND AS A RESULT, WE NEED TO HAVE A REVOTE WITH THAT
25	MEMBER NOT VOTING ON THIS OCCASION. AND SO WOULD

1	LIKE TO ASK AT THIS POINT FOR A MOTION TO APPROVE
2	THIS GRANT.
3	DR. FISHER: SO MOVED.
4	DR. DULIEGE: I SECOND.
5	CHAIRMAN THOMAS: ANY DISCUSSION BY
6	MEMBERS OF THE BOARD? ANY DISCUSSION BY MEMBERS OF
7	THE PUBLIC? OKAY.
8	GIL, I'M SORRY. I DIDN'T MEAN TO GET IN
9	THE MIDDLE OF YOUR PRESENTATION. YOU CAN JUST
10	COMPLETE THE SLIDE PRESENTATION PLEASE.
11	DR. SAMBRANO: OKAY. DO YOU WANT ME TO GO
12	OVER THIS PARTICULAR APPLICATION AGAIN?
13	CHAIRMAN THOMAS: I DON'T THINK THAT'S
14	NECESSARY. WE HAD A FULL VETTING OF IT THE LAST
15	TIME, BUT I THINK IT'S GOOD FOR THE BOARD TO SEE THE
16	STRONG SUPPORT THAT IT HAD BOTH FROM THE GWG AND
17	FROM A DEI PERSPECTIVE.
18	MR. TORRES: THERE'S NO ACTION REQUIRED ON
19	OUR PART?
20	CHAIRMAN THOMAS: WE NEED TO REVOTE. WE
21	HAVE THIS MOTION HERE THAT WAS JUST MOVED AND
22	SECONDED. SO ARE THERE ANY PUBLIC COMMENTS ON THIS
23	MOTION?
24	MS. BONNEVILLE: THERE ARE NO PUBLIC
25	COMMENTS.

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1	CHAIRMAN THOMAS: THANK YOU. MARIA, WILL
2	YOU PLEASE CALL THE ROLL.
3	MS. BONNEVILLE: LEONDRA CLARK-HARVEY.
4	MS. CLARK-HARVEY: YES.
5	MS. BONNEVILLE: ANNE-MARIE DULIEGE.
6	DR. DULIEGE: YES.
7	MS. BONNEVILLE: YSABEL DURON.
8	ELENA FLOWERS.
9	DR. FLOWERS: YES.
10	MS. BONNEVILLE: MARK FISCHER-COLBRIE.
11	DR. FISCHER-COLBRIE: AYE.
12	MS. BONNEVILLE: FRED FISHER.
13	DR. FISHER: AYE.
14	MS. BONNEVILLE: STEVE JUELSGAARD.
15	MR. JUELSGAARD: YES.
16	MS. BONNEVILLE: RICH LAJARA.
17	MR. LAHARA: YES.
18	MS. BONNEVILLE: DAVE MARTIN.
19	DR. MARTIN: YES.
20	MS. BONNEVILLE: CHRISTINE MIASKOWSKI.
21	DR. MIASKOWSKI: YES.
22	MS. BONNEVILLE: LAUREN MILLER-ROGEN.
23	MS. MILLER-ROGEN: YES.
24	MS. BONNEVILLE: ADRIANA PADILLA.
25	DR. PADILLA: YES.
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1	MS. BONNEVILLE: JOE PANETTA.
2	MR. PANETTA: YES.
3	MS. BONNEVILLE: AL ROWLETT.
4	MR. ROWLETT: YES.
5	MS. BONNEVILLE: MARVIN SOUTHARD.
6	JONATHAN THOMAS.
7	CHAIRMAN THOMAS: YES.
8	MS. BONNEVILLE: THE MOTION CARRIES.
9	CHAIRMAN THOMAS: THANK YOU. GIL, ON TO
10	THE NEXT PLEASE.
11	DR. SAMBRANO: THANK YOU, MR. CHAIRMAN.
12	SO THE NEXT TWO APPLICATIONS WERE REVIEWED
13	DURING THE APRIL CYCLE OF THE GRANTS WORKING GROUP
14	CLINICAL REVIEW. AND SO WE'LL START WITH
15	CLIN2-13017.
16	AND SO THE TITLE OF THIS ONE IS A DOUBLE
17	BLIND RANDOMIZED PLACEBO CONTROLLED INVESTIGATION OF
18	AUTOLOGOUS MUSCLE-DERIVED PROGENITOR CELLS FOR THE
19	TREATMENT OF DYSPHASIA. AND SO THIS IS A PROGENITOR
20	CELL THERAPY. DYSPHASIA IS A SWALLOWING DISORDER
21	THAT OCCURS FOLLOWING CHEMOTHERAPY TREATMENT FOR
22	HEAD AND NECK CANCER. AND THE GOAL OF THIS PROPOSAL
23	IS TO COMPLETE A PHASE 1/2 CLINICAL TRIAL TO ASSESS
24	SAFETY AND PRELIMINARY EFFICACY. THE FUNDS
25	REQUESTED ARE JUST OVER 11 MILLION AND ARE PROVIDING
	11

1	CO-FUNDING OF ABOUT TWO MILLION.
2	A LITTLE BACKGROUND ON THIS DISEASE
3	INDICATION. TREATMENT FOR HEAD AND NECK CANCER WILL
4	OFTEN RESULT IN MUSCLE DAMAGE WHICH THEN AFFECTS THE
5	ABILITY OF MANY PATIENTS TO SWALLOW. AND SO THAT
6	DISORDER MAY CAUSE PATIENTS TO EXPERIENCE
7	MALNUTRITION, DEHYDRATION, AMONG OTHER THINGS, AND
8	EVEN POSSIBLY DEATH. AND SO THE VALUE OF THIS
9	PROPOSED THERAPY IS THAT THE CURRENT STANDARD OF
10	CARE TYPICALLY WILL INCLUDE REHABILITATION EXERCISES
11	OR SURGERY WHERE THEY REMOVE THE LARYNX. AND
12	THERE'S NO OTHER TREATMENTS REALLY THAT EXIST TO
13	EFFECTIVELY RESTORE FUNCTION. SO IF THIS IS
14	SUCCESSFUL, THE PROPOSED THERAPY WOULD OFFER
15	PATIENTS THE POTENTIAL FOR AN IMPROVEMENT OR ABILITY
16	TO RESTORE THEIR ABILITY TO SWALLOW.
17	AND THIS IS A STEM CELL PROJECT BECAUSE
18	THE THERAPEUTIC CANDIDATE ITSELF OF COMPOSED
19	MUSCLE-DERIVED PROGENITOR CELLS.
20	IN OUR PORTFOLIO WE DON'T HAVE ANY OTHER
21	CLINICAL STAGE AWARDS THAT ARE ACTIVE THAT ARE
22	ADDRESSING THIS INDICATION OR THAT WOULD OTHERWISE
23	BE SIMILAR TO THIS PROPOSAL. THE APPLICANT HAS
24	RECEIVED CIRM FUNDING IN THE PAST. THEY RECEIVED AN
25	IND-ENABLING AWARD FOR A DIFFERENT INDICATION WHICH

1	WAS FOR AIRWAY STENOSIS AND DID DEVELOP A BIT OF A
2	COMPLEX PRODUCT THAT THEIR HOPE WAS TO FILE AN IND
3	AND BEGIN A CLINICAL TRIAL WITH. BUT UNFORTUNATELY
4	THE DEVELOPMENT OF THAT DID NOT WORK OUT DUE TO
5	TECHNICAL REASONS, NOT DUE TO PERFORMANCE. AND SO
6	THAT WAS ONE AWARD THEY RECEIVED IN THE PAST.
7	THE RECOMMENDATION FROM THE GRANTS WORKING
8	GROUP AS IT RELATES TO THIS CURRENT APPLICATION IS
9	FOLLOWS. THERE WAS A UNANIMOUS SCORING OF 1 FOR THE
10	APPLICATION. THERE WERE NO MEMBERS THAT SCORED IT A
11	2 OR A 3. THE DEI SCORE, GIVEN BY THE PATIENT
12	ADVOCATE AND NURSE MEMBERS, WAS A SCORE OF 9.
13	THAT'S THE MEDIAN FROM THE MEMBERS WHO SCORED. AND
14	THE CIRM TEAM RECOMMENDATION IS TO FUND THIS
15	APPLICATION FOR THE AMOUNT SHOWN OF JUST OVER \$11
16	MILLION. MR. CHAIRMAN.
17	CHAIRMAN THOMAS: THANK YOU, GIL. DO WE
18	HAVE A MOTION TO APPROVE?
19	MR. TORRES: SO APPROVED.
20	CHAIRMAN THOMAS: SECOND?
21	MS. BONNEVILLE: ART, YOU CANNOT MAKE THE
22	MOTION ON THIS PLEASE. THANK YOU.
23	MR. TORRES: SO I CAN'T EVEN SPEAK ON IT,
24	RIGHT?
25	MS. BONNEVILLE: NO.
	12

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1	DR. FISHER: I'LL MOVE.
2	MS. BONNEVILLE: FRED, WAS THAT YOU?
3	DR. FISHER: YES.
4	MS. BONNEVILLE: THANK YOU. AND DID WE
5	HAVE A SECOND? I'M SORRY I MISSED THAT.
6	DR. FLOWERS: SECOND.
7	CHAIRMAN THOMAS: THANK YOU. DO WE HAVE
8	DISCUSSION
9	MS. BONNEVILLE: ELENA, YOU CANNOT BE THE
10	SECOND. I'M SORRY.
11	DR. CLARK-HARVEY: SECOND.
12	MS. BONNEVILLE: THANK YOU.
13	CHAIRMAN THOMAS: THANK YOU, MARIA.
14	MS. BONNEVILLE: YOU'RE WELCOME.
15	CHAIRMAN THOMAS: DO WE HAVE DISCUSSION BY
16	MEMBERS OF THE BOARD? ANY COMMENTS FROM MEMBERS OF
17	THE PUBLIC? HEARING NONE, MARIA, WILL YOU PLEASE
18	CALL THE ROLL.
19	MS. BONNEVILLE: YES.
20	LEONDRA CLARK-HARVEY.
21	MS. CLARK-HARVEY: YES.
22	MS. BONNEVILLE: ANNE-MARIE DULIEGE.
23	DR. DULIEGE: YES.
24	MS. BONNEVILLE: YSABEL DURON.
25	MS. DURON: YES.
	14

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1	MS. BONNEVILLE: MARK FISCHER-COLBRIE.
2	DR. FISCHER-COLBRIE: YES.
3	MS. BONNEVILLE: FRED FISHER.
4	DR. FISHER: YES.
5	MS. BONNEVILLE: DAVID HIGGINS. STEVE
6	JUELSGAARD.
7	MR. JUELSGAARD: YES.
8	MS. BONNEVILLE: RICH LAJARA.
9	MR. LAHARA: YES.
10	MS. BONNEVILLE: DAVE MARTIN.
11	DR. MARTIN: YES.
12	MS. BONNEVILLE: LAUREN MILLER-ROGEN.
13	ADRIANA PADILLA.
14	DR. PADILLA: YES.
15	MS. BONNEVILLE: JOE PANETTA.
16	MR. PANETTA: YES.
17	MS. BONNEVILLE: AL ROWLETT.
18	MR. ROWLETT: YES.
19	MS. BONNEVILLE: JONATHAN THOMAS.
20	CHAIRMAN THOMAS: YES.
21	MS. BONNEVILLE: MOTION CARRIES.
22	CHAIRMAN THOMAS: THANK YOU. GIL, PLEASE
23	PROCEED TO THE THIRD AND FINAL GRANT FOR TODAY'S
24	MEETING.
25	DR. SAMBRANO: THANK YOU, MR. CHAIRMAN.
	15

1	SO THE NEXT APPLICATION IS CLIN2-13355. SO THE
2	TITLE OF THIS ONE IS "PHASE 1-2 STUDY OF A NEURAL
3	CELL THERAPY IN SUBJECTS WITH DRUG RESISTANT
4	UNILATERAL MESIAL TEMPORAL LOBE EPILEPSY."
5	AND SO THIS IS A CELL THERAPY DERIVED FROM
6	HUMAN EMBRYONIC STEM CELLS TO CREATE AN ALLOGENEIC
7	NEURAL CELL THERAPY. THE INDICATION IS FOR DRUG
8	RESISTANT UNILATERAL MESIAL TEMPORAL LOBE EPILEPSY.
9	THEIR GOAL IS TO COMPLETE A PHASE 1-2 CLINICAL TRIAL
10	TO ASSESS SAFETY AND PRELIMINARY EFFICACY. THE
11	FUNDS REQUESTED ARE JUST UNDER EIGHT MILLION, AND
12	THE CO-FUNDING PROVIDED IS ABOUT THREE AND A HALF
13	MILLION.
14	SO BACKGROUND ON THIS INDICATION, EPILEPSY
15	AFFECTS MORE THAN THREE MILLION PEOPLE IN THE U.S.,
16	AND APPROXIMATELY 143 TO ABOUT 191,000 CASES ARE OF
17	DRUG RESISTANT MESIAL TEMPORAL LOBE EPILEPSY.
18	SO PATIENTS THAT EXPERIENCE EPILEPTIC
19	SEIZURES ARE TREATED WITH ANTI-SEIZURE MEDICATIONS
20	OF WHICH THERE A VARIETY, BUT ONLY ABOUT 44 PERCENT
21	BECOME SEIZURE FREE. AND ABOUT A THIRD OF
22	INDIVIDUALS WITH EPILEPSY HAVE THE DRUG RESISTANT
23	SEIZURES.
24	THE STANDARD OF CARE MAY INVOLVE SURGICAL
25	RESECTION OF THE TEMPORAL LOBE AS ONE OPTION, BUT

1	MANY PATIENTS EITHER AREN'T ELIGIBLE OR INTERESTED
2	IN SUCH AN INVASIVE PROCEDURE. SO IF THIS IS
3	SUCCESSFUL, THE PROPOSED THERAPY DOES OFFER PATIENTS
4	A POTENTIAL FOR A MUCH SAFER, LESS INVASIVE, AND
5	MORE EFFECTIVE OPTION TO TREAT THOSE SEIZURES.
6	AND SO WHY IS THIS A STEM CELL OR GENE
7	THERAPY PROJECT? THIS THERAPEUTIC CANDIDATE IS
8	MANUFACTURED FROM HUMAN EMBRYONIC STEM CELLS.
9	THERE ARE NO OTHER ACTIVE CLINICAL STAGE
10	AWARDS THAT ARE TARGETING THIS DISEASE INDICATION
11	CURRENTLY IN OUR PORTFOLIO. AND THE APPLICANT HAS
12	RECEIVED CIRM FUNDING IN THE PAST. ACTUALLY TWO
13	DIFFERENT AWARDS AT THE DISCOVERY STAGE AS WELL AS
14	THE TRANSLATIONAL STAGE THAT HAVE LED ULTIMATELY TO
15	THE CURRENT PROPOSAL THAT THEY HAVE BEFORE US IN
16	DEVELOPING THIS PROPOSED THERAPY FOR MESIAL TEMPORAL
17	LOBE EPILEPSY.
18	SO THE RECOMMENDATIONS ROM THE GRANTS
19	WORKING GROUP ARE SHOWN HERE. WE HAD A UNANIMOUS
20	VOTE OF A SCORE OF 1 BY THE SCIENTIFIC MEMBERS OF
21	THE WORKING GROUP. THE DEI SCORE WAS A NINE. THE
22	MEDIAN WAS SCORED BY THE PATIENT ADVOCATE AND NURSE
23	MEMBERS. THE CIRM TEAM RECOMMENDATION IS TO FUND
24	THIS APPLICATION FOR THE AWARD AMOUNT OF 7.99
25	MILLION. MR. CHAIRMAN.

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1	CHAIRMAN THOMAS: THANK YOU VERY MUCH,
2	GIL. DO WE HAVE A MOTION TO APPROVE?
3	DR. DULIEGE: I MOVE.
4	CHAIRMAN THOMAS: MOVED BY ANNE-MARIE. DO
5	WE HAVE A SECOND?
6	DR. CLARK-HARVEY: SECOND.
7	CHAIRMAN THOMAS: THANK YOU, BOTH OF YOU.
8	ARE THERE QUESTIONS OR COMMENTS FROM MEMBERS OF THE
9	BOARD?
10	DR. DULIEGE: YES. J.T., A QUESTION IF
11	POSSIBLE.
12	CHAIRMAN THOMAS: YES.
13	DR. DULIEGE: IT'S ACTUALLY NOT SO MUCH A
14	COMMENT. GIL, CAN YOU PLEASE EDUCATE ME ON WHETHER
15	THIS REPRESENTS A RATHER SMALL PORTION OF ALL THE
16	EPILEPSIES POSSIBLE? IS IT A VERY NARROW PATIENT
17	POPULATION, OR IS IT A BROADER POPULATION? AND WILL
18	THERE BEN AN POPULATION OF THIS TO A BROADER PATIENT
19	POPULATION PATIENTS WITH EPILEPSY?
20	DR. SAMBRANO: THAT'S A VERY GOOD
21	QUESTION. I THINK THE ESTIMATE, BASED ON BOTH THE
22	APPLICANTS AND SOME OF THE REVIEWERS, THAT YOU'RE
23	LOOKING AT ABOUT 12 PERCENT OF PEOPLE WITH TEMPORAL
24	LOBE EPILEPSY. AN TEMPORAL LOBE EPILEPSY IS THE
25	MOST COMMON TYPE THAT AFFECTS INDIVIDUALS.

1	SO IT IS A SUBPORTION, BUT THE APPLICANTS
2	DO INTEND BEYOND THIS INITIAL CLINICAL TRIAL TO
3	POTENTIALLY EXPAND IT TO OTHER EPILEPSY TYPES AND
4	MAYBE OTHER SEIZURE INDUCING CONDITIONS BEYOND
5	EPILEPSY IF IT'S SUCCESSFUL.
6	DR. DULIEGE: THANK YOU.
7	CHAIRMAN THOMAS: ANY OTHER COMMENTS OR
8	QUESTIONS FROM THE BOARD?
9	DR. MARTIN: JUST A QUICK QUESTION. IS
10	THIS THE STUDY I DIDN'T GO BACK AND LOOK IT UP
11	THERE WERE 31 EXPERIMENTAL AND 31 CONTROLS IN THIS
12	STUDY?
13	DR. SAMBRANO: NO, THAT WAS THE PREVIOUS
14	APPLICATION. THIS ONE IS DONE IN TWO STAGES. SO
15	WE'RE STARTING WITH UP TO ABOUT TEN PATIENTS FIRST
16	TO ASSESS SAFETY AND THEN ABOUT 30 TO ASSESS THE
17	EFFICACY.
18	DR. MARTIN: THANK YOU.
19	MS. DURON: GIL, YSABEL HERE.
20	MS. BONNEVILLE: YSABEL, YOU CAN'T
21	COMMENT.
22	CHAIRMAN THOMAS: THANK YOU, MARIA. ANY
23	OTHER COMMENTS FROM MEMBERS OF THE BOARD? ANY
24	COMMENTS FROM THE PUBLIC? HEARING NONE, MARIA, WILL
25	YOU PLEASE CALL THE ROLL.

1	MS. BONNEVILLE: YES.
2	LEONDRA CLARK-HARVEY.
3	MS. CLARK-HARVEY: YES.
4	MS. BONNEVILLE: ANNE-MARIE DULIEGE.
5	DR. DULIEGE: YES.
6	MS. BONNEVILLE: ELENA FLOWERS.
7	DR. FLOWERS: YES.
8	MS. BONNEVILLE: MARK FISCHER-COLBRIE.
9	DR. FISCHER-COLBRIE: AYE.
10	MS. BONNEVILLE: FRED FISHER.
11	DR. FISHER: YES.
12	MS. BONNEVILLE: STEVE JUELSGAARD.
13	MR. JUELSGAARD: YES.
14	MS. BONNEVILLE: RICH LAJARA.
15	MR. LAHARA: YES.
16	MS. BONNEVILLE: DAVE MARTIN.
17	DR. MARTIN: YES.
18	MS. BONNEVILLE: CHRISTINE MIASKOWSKI.
19	DR. MIASKOWSKI: MARIA, CAN I COMMENT ON
20	THIS ONE?
21	MS. BONNEVILLE: YES, YOU CAN.
22	DR. MIASKOWSKI: THEN YES.
23	MS. BONNEVILLE: LAUREN MILLER-ROGEN.
24	MS. MILLER-ROGEN: I'M SO SORRY. I WAS
25	RESTARTING AND MISSED THE ENTIRE PRESENTATION. SO
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1	I'M NOT SURE I SHOULD VOTE.
2	MS. BONNEVILLE: OKAY. THANK YOU.
3	ADRIANA PADILLA.
4	DR. PADILLA: YES.
5	MS. BONNEVILLE: JOE PANETTA.
6	MR. PANETTA: YES.
7	MS. BONNEVILLE: AL ROWLETT.
8	MR. ROWLETT: YES.
9	MS. BONNEVILLE: JONATHAN THOMAS.
10	CHAIRMAN THOMAS: YES.
11	MS. BONNEVILLE: ART TORRES.
12	MR. TORRES: AYE.
13	MS. BONNEVILLE: THANK YOU. THE MOTION
14	CARRIES.
15	CHAIRMAN THOMAS: THANK YOU, MARIA.
16	GIL, I BELIEVE THAT CONCLUDES YOUR
17	PRESENTATION?
18	DR. SAMBRANO: IT DOES.
19	CHAIRMAN THOMAS: OKAY. THANK YOU TO YOU
20	AND MEMBERS OF YOUR TEAM FOR YOUR USUAL OUTSTANDING
21	WORK.
22	WE ARE NOW OUT OF THE APPLICATION REVIEW
23	SUBCOMMITTEE AND INTO GENERAL PUBLIC COMMENT. DO WE
24	HAVE ANY PUBLIC COMMENT ON ANY MATTERS?
25	MS. BONNEVILLE: WE DON'T.
	21
	2.1

1	CHAIRMAN THOMAS: OKAY. SO WE ARE
2	CONCLUDING THIS, BUT BEFORE WE DO, ITS A BITTERSWEET
3	NOTE THAT THIS IS THE LAST MEETING FOR DAVE MARTIN
4	AS A MEMBER OF THE ICOC AND THE APPLICATION REVIEW
5	SUBCOMMITTEE. DAVE IS PICKING UP SHOP AND MOVING
6	WITH FAMILY TO NORTH CAROLINA. AND, DAVE, WE WILL
7	GIVE YOU A PROPER RECOGNITION WITH THE FULL BOARD IN
8	JUNE. BUT IF YOU'D LIKE TO SAY A COUPLE COMMENTS AT
9	THIS POINT, TOTALLY WELCOME.
10	DR. MARTIN: ACTUALLY I SUBMITTED MY
11	RESIGNATION LETTER TO TREASURER MA AND I JUST VERY
12	SIMPLY STATED THAT IT'S BEEN A VERY INTERESTING
13	EXPERIENCE FOR ME BOTH EMOTIONALLY AND
14	INTELLECTUALLY. I'VE LEARNED A LOT, AND I VERY MUCH
15	APPRECIATE WHAT CIRM IS DOING. AND I'M ENTHUSIASTIC
16	ABOUT THE FUTURE OF CIRM AND THE PATIENTS, BOTH
17	CALIFORNIA CITIZENS AS WELL AS GLOBAL IMPACT OF
18	CIRM. AND IT'S QUITE STARTLING WHAT HAS BEEN
19	ACCOMPLISHED AND WHAT IS CLEARLY ON THE DRAWING
20	BOARD HERE.
21	AND AS I'VE SAID BEFORE, I THINK THAT
22	PROBABLY THE GREATEST LEGACY OF CIRM IS GOING TO BE
23	ITS EDUCATIONAL PROGRESS. IT'S BEEN QUITE AN
24	EXPERIENCE FOR ME. AND PART OF IT ALSO IS MEETING
25	PEOPLE, MANY OF YOU ON THIS ICOC BOARD, AND HAVING

1	SOME INTERACTIONS WITH ALL OF YOU. AND PARTICULARLY
2	MEETING IN SITU AT THE HEADQUARTERS IN OAKLAND TO
3	ACTUALLY SEE AND BE ABLE TO INTERACT WITH ALL OF
4	YOU. SO I THANK YOU ALL, AND I THANK THE TREASURER
5	FOR ALLOWING ME TO PARTICIPATE IN CALIFORNIA
6	ACTIVITIES. THANK YOU VERY MUCH.
7	CHAIRMAN THOMAS: AND THANK YOU, DAVE.
8	AND AS I SAY, WE WILL GIVE YOU YOUR FULL AND PROPER
9	DUE WITH THE FULL COMPLEMENT OF YOUR BOARD
10	COLLEAGUES AT OUR MEETING IN JUNE WHICH WILL BE A
11	FULL BOARD MEETING. YOU MAY NEED TO REAPPRISE A
12	COUPLE OF THOSE STATEMENTS, BUT I THINK IT'S BEEN
13	TERRIFIC HAVING YOU ON THE BOARD. BUT I'M GOING TO
14	SAVE MY MAIN COMMENTS FOR JUNE. I DON'T WANT TO SAY
15	GOODBYE QUITE YET.
16	MARIA, WHAT IS THE JUNE DATE AGAIN FOR
17	MEMBERS OF THE ARS?
18	MS. BONNEVILLE: JUNE 27TH. YES, JUNE
19	27TH. AND IT REALLY IS A FULL BOARD MEETING. WE'VE
20	GOT A LOT ON THE AGENDA. WE ARE ALSO HAVING AN ARS
21	MEETING THE WEEK PRIOR. THERE'S SO MUCH ON THE
22	AGENDA THAT WE WANTED TO TAKE UP THE APPLICATIONS
23	SEPARATELY FROM THE FULL BOARD MEETING. SO YOU GUYS
24	GET TO COME TO TWO MEETINGS IN LIKE FIVE DAYS. I
25	KNOW YOU'RE REALLY EXCITED ABOUT THAT.

1	CHAIRMAN THOMAS: EXCELLENT. ALL RIGHT.
2	THANK YOU. ON THAT NOTE, THANK YOU ALL VERY MUCH
3	FOR ATTENDING AND HAVE A WONDERFUL REST OF YOUR DAY,
4	AND WE STAND ADJOURNED.
5	(THE MEETING WAS THEN CONCLUDED AT
6	9:30 A.M.)
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REPORTER'S CERTIFICATE

I, BETH C. DRAIN, A CERTIFIED SHORTHAND REPORTER IN AND FOR THE STATE OF CALIFORNIA, HEREBY CERTIFY THAT THE FOREGOING TRANSCRIPT OF THE VIRTUAL PROCEEDINGS BEFORE THE INDEPENDENT CITIZEN'S OVERSIGHT COMMITTEE AND THE APPLICATION REVIEW SUBCOMMITTEE OF THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE IN THE MATTER OF ITS REGULAR MEETING HELD ON MAY 26, 2022, WAS HELD AS HEREIN APPEARS AND THAT THIS IS THE ORIGINAL TRANSCRIPT THEREOF AND THAT THE STATEMENTS THAT APPEAR IN THIS TRANSCRIPT WERE REPORTED STENOGRAPHICALLY BY ME AND TRANSCRIBED BY ME. I ALSO CERTIFY THAT THIS TRANSCRIPT IS A TRUE AND ACCURATE RECORD OF THE PROCEEDING.

BETH C. DRAIN, CSR 7152 133 HENNA COURT SANDPOINT, IDAHO (208) 920-3543