Serious and Other Selected Adverse Events
Reported for Human Gene Transfer Protocols
Recombinant DNA Advisory Commitee Meeting
March 2004

Protocol Number: **412**

Protocol Title: **A Phase III, Multi-Center, Open-Label, Randomized Study to Compare the Effectiveness and Safety of Intratumoral Administration of RPR/INGN 201 in Combination with Chemotherapy Versus Chemotherapy Alone in 288 Patients with Recurrent Squamous Cell Carcinoma of the Head and Neck (SCCHN).**

DocID#	Receipt Date	Event Date	Event Description
5988	01/21/2004	01/06/2003	Follow-up Sponsor: Renal biopsy showed study participant had lupus and was started on medication to control this illness. Lupus not related to the gene transfer product.

Protocol Number: **458**

Protocol Title: **Phase II Pilot Study of Safety and Immunogenicity of a ALVAC-CEA/B7.1 Vaccine Administered with Chemotherapy, Alone or in Combination with Tetanus Toxoid, as Compared to Chemotherapy Alone, in Patients with Metastatic Colorectal Adenocarcinoma.**

DocID#	Receipt Date	Event Date	Event Description
5874	11/21/2003	10/08/2003	Research participant was admitted with right upper quadrant pain, nausea, vomiting, dehydration, and mild fever. An intrahepatic abscess was identified and treated. The Investigator considered this may possibly be related to the study vaccine, chemotherapy, malignancy, or a prior liver abscess.

Protocol Number: **495**

Protocol Title: **A Phase I Trial of Recombinant Vaccinia Viruses that Express DF3/MUC1 and TRICOM (B7.1, ICAM-1, and LFA-3) in Patients with Metastatic Adenocarcinoma of the Breast.**

DocID#	Receipt Date	Event Date	Event Description
5877	11/21/2003	2003	Research participant expired due to progression of disease and the subject's demise was reported as "unlikely" to have been related to the investigational agent.

Protocol Number: **513**

Protocol Title: **Phase I Study of Intravenous DOTAP:Cholesterol-Fus 1 Liposome Complex (DOTAP:Chol-Fus 1) in Patients with Advanced Non-Small Cell Lung Cancer (NSCLC) Previously Treated with Chemotherapy.**

DocID#	Receipt Date	Event Date	Event Description
5864	11/17/2003	08/07/2003	Research participant admitted due to fever, generalized body aches, chest pain, dysuria, palpitations and coughing up of blood. Noted to have a low white blood cell count on admission, a condition the research participant has experienced with two prior gene transfer product infusions. As per the investigator, the low white blood cell count is due to a concomitant medication (steroids) and not due to the study agent.
5863	11/17/2003	09/24/2003	Research participant admitted due to fever, generalized body aches, chest pain, palpitations, and coughing up of blood. Noted to have a low white blood cell count which was deemed to be possibly related to the use of steroids but not due to the study agent.

Protocol Number: **519**

Protocol Title: **A Phase II Trial of CG8020 and CG2505 in Patients with Nonresectable or Metastatic Pancreatic Cancer.**

DocID#	Receipt Date	Event Date	Event Description
5819	10/21/2003	2003	Follow- up Sponsor: Autopsy revealed wide spread pancreatic cancer (including abdominal carcinomatosis), evidence of pneumonia, arteriosclerotic cardiovascular disease, cardiomegaly, and a hypercellular bone marrow without evidence of leukemia, but instead consistent with a leukamoid reaction. This together with the measured GM-CSF level information led the Sponsor to consider the leukocytosis to be unrelated to the vaccinations and consistent with a leukamoid reaction secondary to tumor secretion of GM-CSF or infection.

Protocol Number: **568**

Protocol Title: **A Phase II Multi-Center, Double-Blind, Placebo-Controlled, Trial of VLTS-589 in Subjects with Intermittent Claudication Secondary to Peripheral Arterial Disease.**

DocID#	Receipt Date	Event Date	Event Description
5982	01/20/2004	01/03/2004	The research participant developed non-specific leg soreness, general malaise, and hiccoughs on Study Day 3. Continued nausea, vomiting and diarrhea led to dehydration and hypotension requiring admission to the hospital on Study Day 19. The origin of symptoms remained undetermined at the time of this report and the work-up was continuing. The Investigator considered that the symptoms were possibly related to the study agent, but additional information from the evaluation would be forthcoming.

Protocol Number: **571**

Protocol Title: **A Phase II Randomized Study of GM-CSF Gene-Modified Autologous Tumor Vaccine (CG8123) with and without Low-Dose Cyclophosphamide in Advanced Stage Non-Small Cell Lung Cancer.**

DocID#	Receipt Date	Event Date	Event Description
5831	10/27/2003	2003	Follow up Sponsor: Autopsy showed widespread tumor involvement of all lung fields as well as areas of bleeding and dead lung tissue throughout. Per the Investigator, a relationship of the events to the vaccine cannot be excluded. Considered by the Sponsor to be a combination of an infection and spread of the tumor, but changes due to the gene transfer vaccine cannot be ruled out.
5870	11/19/2003	2003	Research participant died one day after surgical resection of tumor mass (in order to produce autologous vaccine product). Cause of death presumed to be acute myocardial infarction. The research participant never received gene transfer product.
5972	01/14/2004	12/30/2003	Two weeks after first vaccine injection, the research participant presented with severe mental status changes and a markedly increased white cell count (including elevation of the eosinophil count). The investigator considered that the altered mental status was unrelated to vaccine and most likely related to the use of pain medications (narcotics). However, cause of the white cell count elevation is not clear and possibly related to vaccine.
6010	01/14/2004	12/30/2003	Follow-up Sponsor: Since the last report, the research participant has received two additional vaccinations with the GVAX product without any elevation of the white cell count being seen. Regarding the past adverse event, the initial white blood cell (WBC) count elevation that occurred 1-3 days after the first vaccination is considered by both the principal investigator and sponsor to have been due to the vaccine product. However, what caused the markedly elevated WBC count (with elevation of eosinophils as well) that occurred approximately 2 weeks after the first vaccination is still not clear.