[16gk0110022h0001]

平成 29 年 5 月 31 日

## 平成 28 年度 委託研究開発成果報告書

# I. 基本情報

事 業 名: (日本語) 成育疾患克服等総合研究事業

(英 語) Project for Baby and infant Research of healTH and Development to Adolescent and Young adult

研究開発課題名: (日本語)脳性麻痺に対する臍帯由来間葉系細胞治療に関する研究

(英語) Regenerative therapy for cerebral palsy: transplantation of umbilical cord

mesenchymal stromal cells

研究開発担当者 (日本語) 大阪市立大学大学院医学研究科発達小児医学 教授 新宅治夫

所属 役職 氏名: (英 語)Osaka City University Graduate school of Medicine, Department of

Pediatrics, Professor, Shintaku Haruo

実 施 期 間: 平成28年4月1日 ~ 平成29年3月31日

分担研究 (日本語)脳性麻痺に対する臍帯由来間葉系細胞 (MSC) 投与のプロトコール検討

臍帯由来 MSC 投与後安全性確認

開発課題名: (英 語)Study for protocol of transplantation of umbilical cord mesenchymal stromal cells

Safety assessment of transplantation of umbilical cord mesenchymal stromal cells

研究開発分担者 (日本語) 淀川キリスト教病院ホスピス・こどもホスピス病院 院長 鍋谷まこと

所属 役職 氏名: (英 語)Yodogawa Christian Hospital Hospice Children's Hospice Hospital, Director,

Nabetani Makoto

分担研究 (日本語)自己・同種臍帯由来間葉系細胞 (MSC) の製剤化に関する検討

開発課題名: 英語) Study for the formulation of autologous and allogeneic umbilical cord mesenchymal

stromal cells

研究開発分担者 (日本語)東京大学医科学研究所附属病院セルプロセッシング・輸血部 准教授 長村登紀子

所属 役職 氏名: (英 語)Department of Cell Processing and Transfusion, IMSUT Hospital, The Institute of

Medical Science, The University of Tokyo, Associate professor, Nagamura Tokiko,

分担研究 (日本語)新生児脳性麻痺の神経学的予後の検討

開発課題名: (英 語) Study for neurological prognosis of neonatal cerebral palsy

研究開発分担者 (日本語)東京大学小児科 教授 岡 明

所属 役職 氏名: (英 語) University of Tokyo, Department of Pediatrics, Professor, Oka Akira,

分担研究 (日本語) 自己臍帯採取・冷蔵保存・配達システムの構築

開発課題名: (英語) Construct a system for sampling, cryopreservation and delivery of autologous

umbilical cord

研究開発分担者 (日本語) 倉敷中央病院 総合周産期母子医療センター主任部長 渡部 晋一

所属 役職 氏名: (英 語)Kurashiki Central Hospital, Perinatal Center, Director, Watabe

Shinichi

分担研究 (日本語) 脳性麻痺治療用臍帯由来間葉系細胞の特性解析項目の検討

開発課題名: (英 語)Study for characteristic analysis items of transplantation of umbilical cord

mesenchymal stromal cells for therapy for cerebral palsy

研究開発分担者 (日本語)国立成育医療センター 政策科学研究部 部長 森 臨太郎

所属 役職 氏名: (英 語) National Center for Child Health and Development,

Department of Health policy, Director, Mori Rintaro

**分担研究** (日本語) 脳室周囲白質軟化症に対する臍帯由来間葉系細胞治療における炎症に関する

評価項目の検討

開発課題名: (英語)Study for evaluation points of the inflammation for transplantation of umbilical cord

mesenchymal stromal cells for therapy for cerebral palsy for periventricular

leukomalacia

研究開発分担者 (日本語) 東京医科歯科大学小児科 講師 滝 敦子

所属 役職 氏名: (英 語)Department of Pediatrics and Developmental Biology, Tokyo Medical

and Dental University, Junior Associate Professor, Taki Atsuko

分担研究 (日本語)脳性麻痺に対する臍帯由来間葉系細胞(MSC)治療の拡大と発信

開発課題名: (英 語) Communication of information for transplantation of umbilical cord

mesenchymal stromal cells for therapy for cerebral palsy

研究開発分担者 (日本語)東京女子医科大学 新生児科 教授 楠田 聡

所属 役職 氏名: (英 語)Tokyo Women's Medical University, Department of Neonatology, Professor,

Kusuda Satoshi

#### II. 成果の概要(総括研究報告)

新宅治夫教授(大阪市立大学 大学院医学研究科)は、分担研究者の長村登紀子(東京大学医科学研究所 附属病院セルプロセッシング・輸血部)、鍋谷まこと(淀川キリスト教病院 小児科)、濱崎考史(大阪市立大学 大学院医学研究科)、渡部晋一(倉敷中央病院 総合周産期母子医療センター)、岡明(東京大学 大学院医学研究科)らのグループとともに、AMED 研究(臍帯血・臍帯由来間葉系細胞(MSC)製剤を用いた新規免疫療法・再生医療の開発 H26・再生・一般・010 代表 長村登紀子:長村班)と連携しながら、脳性麻痺に対する医師主導治験用の臍帯由来 MSC 製造および提供体制を確立した。同種健常人臍帯由来MSCの製剤化については、長村班において重症急性移植片対宿主病(GVHD)を対象とした PMDA 薬事戦略相談(対面助言)を受け、品質・安全性および非臨床研究項目について概ね合意に至った後、新生児脳性麻痺に対する臍帯由来 MSC の医師主導治験用の工程内試験や規格試験、特性解析項目の追加を検討した。分担研究者の長村、鍋谷、岡らは研究代表者と共に薬事戦略相談の事前面談および対面助言(書面)を受けた。事前面談では、新生児に特化した非臨床安全性薬理試験は特に必要ないとの見解を得、対面助言では、これまでの神経障害モデルおよび in vitro において上昇を認めた肝細胞増殖因子 (HGF)と脳由来神経栄養因子(BDNF)の遺伝子発現を realtime PCR により確認する試験を規格として追加することで合意に至った。その他、追加支援をうけ非特異的ウイルス否定試験を実施し、製品の安全性を確認した。

分担研究者の岡明(東京大学 小児科)、楠田聡(東京女子医科大学 新生児科)らのグループは、脳性麻痺予防研究会を開催し、韓国のソウル大学から Kim 教授を招いて新生児の脳症とその治療について特別講演を行い、国際共同研究について討論した。米国小児科学会(PAS2017)でシンポジウムを企画し、日本と世界各国の実施状況について討論し、治療法に関する最新の情報を得て治療プロトコールについて調整した。

分担研究者の滝敦子(東京医科歯科大学 小児科)らのグループは、分担研究者の長村らが培養調整した同種健常人由来 MSC を脳室周囲白質変性症(PVL)モデルマウスに腹腔内投与し、MSC は脳に到達しないものの神経症状を回復させる効果があることを見いだした。また、研究代表者らは、分担研究者の長村から MSC の提供を受け効果・安全性を新生児 HIE モデルマウスと新生児 HIE モデルラットで検討し、2つの異なる病態モデルにおいて安全性を確認した。効果については両モデルにおいて概ね同じであったが、一部異なる点もあることを明らかにし、作用メカニズムとしては、細胞治療による急性期の脳血流改善、ミクログリアの活性化抑制などを確認した。

分担研究者の森臨太郎(国立成育医療研究センター政策科学研究部)は、稀少疾患の治療に関する臨床研究の実施には困難を伴うが、革新的な手法を組み合わせた研究デザインを検討し、必要サンプルサイズを最小化する手法と、治療を受ける症例数を最大化するためにネットワークによる多施設共同研究としての実施など工夫して安全性についての第1相試験を計画、実施することとした。

Professor Haruo Shintaku (Osaka City University Graduate School of Medicine) established a production and supply setup for umbilical cord blood-derived mesenchymal stem cells (MSC) to be used in physician-led clinical trials on cerebral palsy, together with research groups of the co-investigators Tokiko Nagamura (Department of Cell Processing and Transfusion, IMSUT Hospital, The Institute of Medical Science, The University of Tokyo), Makoto Nabetani (Department of Pediatrics, Yodogawa Christian Hospital), Takashi Hamazaki (Osaka City University Graduate School of Medicine), Shinichi Watabe (Perinatal Center, Kurashiki Central Hospital) and Akira Oka (Department of Pediatrics, The University of Tokyo). This research work has been carried out in association with the

AMED Study (Development of novel immunotherapy and regenerative medicine using formulations of umbilical cord blood and umbilical cord-derived mesenchymal stem cells), and H26-Regeneration, General-010, leader Tokiko Nagamura: Nagamura Group. With regard to making medical products out of allogeneic umbilical cord-derived MSC from healthy persons, the Nagamura group had PMDA pharmaceutical affairs consultations (face-to-face clinical trial consultations) regarding severe and acute graft-versus-host disease (GVHD) and arrived at a broad agreement on quality, safety and non-clinical research items. Then, the group examined the addition of in-process tests, specifications tests and characterization items to be used in physician-led clinical trials on umbilical cord-derived MSC for treating neonatal cerebral palsy. The co-investigators Nagamura, Nabetani, Oka and others, along with the principal investigator, had prior assessment consultations and face-to-face clinical trial consultations (in writing) of the pharmaceutical affairs consultation on R&D strategy at PMDA. In the prior assessment consultations, the PMDA opined that non-clinical pharmacological safety tests specific for neonates are not particularly required. In the faceto-face clinical trial consultation, an agreement was reached on adding tests to verify, through real-time PCR, the gene expression of hepatocyte growth factor (HGF) and brain-derived neurotrophic factor (BDNF), which were seen to be elevated in animal models of neuropathy studied so far and also in vitro, as a standard feature. Apart from this, with the additional support received, the group conducted tests to rule out non-specific viruses and confirm the safety of the medical product.

The research groups of co-investigators Akira Oka and Satoshi Kusuda (Department of Neonatology, Tokyo Women's Medical University) held a seminar on the prevention of cerebral palsy, where they invited Professor Kim from Seoul University of South Korea to deliver special lecturer on neonatal encephalopathy and its treatment. They also discussed international joint research. They organized a symposium at the American Academy of Pediatrics (PAS 2017) where they discussed the status of treatment in Japan and other parts of the world and on the basis of the latest information they obtained, they made some adjustments in their treatment protocol.

Co-investigator Atsuko Taki (Department of Pediatrics and Developmental Biology, Tokyo Medical and Dental University) intraperitoneally administered allogenic, healthy person-derived MSC that had been cultured and prepared by co-investigator Nagamura and her associates to a mouse model of periventricular leukomalacia and found that the MSC had the effect of reducing neurological symptoms, although the cells had not reached the brain. The principal investigator and his associates examined the effectiveness and safety of MSC in the mouse model and rat model of neonatal HIE using the MSC obtained from co-investigator Nagamura and confirmed that they were safe in these two animal models of this disease. They showed that the effectiveness was about the same in the two models, but have also pointed out some differences. As the action mechanism of this cell therapy, they confirmed that it improved cerebral blood flow in the acute phase and that it suppressed the activation of microglia.

Co-investigator Rintaro Mori (Department of Health Policy, National Center for Child Health and Development) examined the study using a combination of innovative techniques, although implementation of a clinical study on the treatment of a rare disease generally poses difficulties. Based on his studies, the Phase 1 study, which examines the safety of the treatment, will be planned and executed by employing creativity, such as using the technique of minimizing the required sample size and making it a multi-center joint study that leverages a network in order to maximize the number of cases that might require the new treatment.

### III. 成果の外部への発表

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  - 2. 再生医療を用いた脳性麻痺の新しい予防法、特別口演、新宅治夫、第60回全国肢体不自由児療育研究大会、2015/10/15,国内
  - 3. 脳性麻痺の治療と再生医療について、会長口演、<u>新宅治夫</u>、第4回臍帯血による再生医療研究会、2016/7/24、国内.

## (4) 特許出願