EDA-GCP Public Inspection Report (PIR) of Clinical Trial Site

Part 1	**General Information**
Clinical medical research site details	
CT site information	
Name of CT site	Oncology Department, Faculty of Medicine, Mansoura University Hospital (OCMU) "3002"
Address of inspected CT site	El Gomhouria Street, Mansoura (Section 2), Dakahlia governorate
Inspection details	
Dates of inspection	27 January 2025
Type of inspection	Routine
Introduction	
General information about the sponsor and CT site	- The inspected site is a Clinical Trial Site (**Oncology Department, Faculty of Medicine, Mansoura University Hospital**) that conducts clinical studies for the sponsor (**Janssen Research & Development, LLC**). - PI name: **Prof. Dr. Sameh Shamaa** - Activities include participant recruitment, clinical conduct, sample collection, safety monitoring, and data documentation.
Brief report on inspection activities undertaken	
Scope and limitations	
Areas inspected	- Clinical operations (screening, dosing, follow-up) - Informed Consent Process - Investigational Medicinal Product (IMP) management - Pharmacy / IMP storage area - Bioanalytical / laboratory facilities (if applicable) - Source documents and Case Report Forms (CRFs) - Archiving and documentation system - Quality management system
Out of scope	Not defined
Inspected Clinical medical research	The inspection focused on the following study: - Study Title: Efficacy and Safety of M281 in Adults with Warm Autoimmune Hemolytic Anemia: A Multicenter, Randomized, Double-blind, Placebo-controlled Study with a long-term Open-label Extension - Protocol Number: MOM-M281-0006 -Phase: II/III - EDA initial approval date: 19/07/2023

Type of IMP	Biological Monoclonal antibody (Nipocalimab)
Part 2	
1. Facilities and equipment system	
1.1. Facilities and Trial Conduct	- The site facilities were generally adequate for trial conduct. - Dedicated consenting, examination and procedure rooms were available for study-related activities. - Study files were stored in a secure, access-controlled, fire- and water-resistant cabinet. - A dedicated investigational medicinal product (IMP) storage room was available, and the IMP storage conditions were maintained in accordance with the Pharmacy Manual. - Equipment, calibration records, emergency equipment preparedness, IMP storage conditions, temperature monitoring records, and laboratory facilities were reviewed and verified for adequacy and compliance with the approved protocol, Good Clinical Practice (GCP), and applicable regulatory requirements during the inspection. - Two observations related to the trial facilities were identified during the inspection **in accordance with ICHE6R3**. The first concerned inadequate evidence of calibration for the weight balance, as the device did not have a serial number that could be linked to the calibration certificate. The second related to a discrepancy between the calibration label and the calibration certificate of the sphygmomanometer. In response, corrective and preventive actions were implemented, including completion of equipment calibration documentation, issuance of calibration certificates and labels, development and implementation of an equipment calibration and maintenance SOP, staff training, and verification during subsequent monitoring visits. Following clarification and submission of the required documentation, the CAPA was reviewed and accepted by the Egyptian Drug Authority (EDA).
1.2. Computerized system	Electronic data capture, as eCRF and randomization systems were in use.
2. Pharmaceutical Quality System	
2.1. Quality Management System	- The Quality Management System (QMS) was assessed during the inspection through the review of site standard operating procedures (SOPs), monitoring documentation, quality-related records, and GCP training records and verified that the quality processes supporting the conduct of the clinical trial were implemented in accordance with the approved protocol, GCP, and applicable regulatory requirements. - The study had been monitored according to the monitoring plan.

2.2. SOPs and Documentation	- SOPs and essential clinical trial documentation were reviewed during the inspection to verify that the conduct of the clinical trial was supported by current approved procedures and complete, accurate, and traceable documentation in accordance with the approved protocol, GCP, and applicable regulatory requirements. - The inspection included the review of essential trial documents, monitoring reports, delegation and signature logs, informed consent forms, case report forms (eCRFs), training records, source documents, protocol deviation records, progress reports, IMP documentation, and other trial-related records. - One observation was identified during the inspection in accordance with ICH-E6R3, as no site-specific SOP for Serious Adverse Event (SAE) reporting was available for verification. In response, the sponsor clarified the procedures used for safety reporting, provided regulatory training on safety reporting requirements, and submitted a site-specific SOP for adverse event (AE) and SAE reporting together with the associated training records. The submitted CAPA was reviewed and accepted by the Egyptian Drug Authority (EDA).
2.3. Deviation Management	- Deviation management was assessed during the inspection through the review of protocol-related documentation and trial records to verify the identification, documentation, and management of protocol deviations in accordance with the approved protocol, GCP, and applicable regulatory requirements. - Protocol deviations were handled according to SOPs and were documented in progress reports submitted to EDA.
2.4. CAPA System	- A CAPA system was established at the site. - A Comprehensive CAPA responses addressing all findings and recommendations were prepared and submitted within defined timeline - All corrective actions were implemented and supported with documentation as proof of correction in compliance with applicable GCP and regulatory standards.
3. Ethics and participant Protection	
3.1. Informed Consent Process	- The informed consent process was assessed during the inspection through the review of the approved Informed Consent Forms (ICFs), participant source records, and informed consent documentation to verify that informed consent was obtained in accordance with the approved protocol, GCP, and applicable regulatory requirements. - The inspection verified that the approved ICFs were used and signed before the performance of any study-related procedures. - Approved ICFs were available and used as follows: • Main ICF for adults: Version 01 (dated 03/11/2022) and Version 2.1 (dated 04/02/2024) • ICF for Pregnant participant or pregnant partner: Version 01 (dated 03/11/2022)

	- All informed consents were signed by participants prior to the performance of any study-related procedures, in full compliance with GCP guidelines. The procedure for obtaining informed consent from participants was confirmed to be fully in line with the requirements of GCP guidelines.
3.2.Ethics Committee Approval	- Approvals from IRB/IEC were available, date of approval: • **IRB Approval** on: 30/01/2023 • **MOH approval** on: 31/05/2023 - Approvals from the Ministry of Health (MOH)-Independent Ethics Committee (IRB/IEC) the, as applicable, were reviewed during the inspection and verified the compliance with the EDA approved protocol, GCP, and applicable regulatory requirements. - One observation was identified **in accordance with ICH-E6R3**, as the total number of bioanalytical samples exported from the Egyptian study sites for analysis at the external central laboratory exceeded the number approved by the MOH. The EDA inspectors, during the inspection, and the sponsor, in the submitted reply, confirmed that the excess exportation occurred at other sites as Cairo University, Alexandria University , and Ain Shams University and this observation did not impact the inspected site (Nasser Institute) as no participants were randomized, only two screening failures participants, and consequently no biological samples were collected or exported from this site. The sponsor clarified that this discrepancy resulted from a misinterpretation of the MOH conditional approval, whereby the approved sample numbers were incorrectly understood to apply per participant rather than to the study. In response, the sponsor notified the Supreme Council for Clinical Research Ethics (SCCRE), submitted an amendment requesting an increase in the approved number of exportable samples, suspended further sample shipments from all study sites, provided additional clarifications to the SCCRE, and **subsequently** terminated the clinical trial at all Egyptian sites following the suspension of sample exportation.
3.3. Participant Safety	- Participant safety was assessed during the inspection through the review of participant source records, safety-related documentation, AE and SAE records, eCRFs, and other relevant essential clinical trial documentation to verify that participants' rights, safety, and well-being were protected in accordance with the approved protocol, GCP, and applicable regulatory requirements. - No SAEs were reported at the inspected site during the conduct of the clinical trial till the inspection date.
4. Personnel and Training	
4.1. Training and qualifications	- Roles and responsibilities of study personnel were clearly defined. - GCP training records were available and reviewed.

	- The qualifications and training records for the principal investigator and study personnel were reviewed during the inspection to verify that study staff were appropriately qualified, trained, and delegated to perform their assigned trial-related responsibilities in accordance with the approved protocol, GCP, and applicable regulatory requirements. - The inspection included a review of curriculum vitae (CVs), GCP training records, delegation of responsibilities, and other relevant personnel documentation.
5. Investigational Product (IMP) Management	
5.1. IMP handling	- Shipping records detailing the quantity, and the batch numbers of the IMPs received at the site were available. - Printout of the data logger of temperature during transportation of IMP from the depot to the clinical trial site was verified. - Dispensing records were verified during the inspection. - IMP accountability, including receipt, dispensing, return, reconciliation, and traceability, was verified.
6. Clinical Trial Conduct	
6.1. Protocol Compliance	- Protocol compliance was assessed during the inspection through the review of the approved protocol (Amendment Version: 6.0, dated: 18/08/2022), participant source records, eCRFs, and other relevant essential clinical trial documentation to verify compliance with the approved protocol, GCP, and applicable regulatory requirements.
6.2. Source Data and CRFs	- Source documents and eCRFs were reviewed during the inspection and verified for the completeness, accuracy, consistency, traceability, and integrity of clinical trial data in accordance with the approved protocol, GCP, and applicable regulatory requirements. - source documents were verified by comparison of participant source records with the corresponding eCRFs and other relevant study documentation.
6.3. Delegation of Duties	- The ddelegation-related documentation was verified that trial-related responsibilities were appropriately assigned to the investigator and delegated study personnel in accordance with the approved protocol, GCP, and applicable regulatory requirements. Documentation reviewed included the delegation of responsibilities log and other relevant personnel records supporting the conduct of the clinical trial.
7. Laboratory and Bioanalytical Activities (if applicable)	
- An External Central and Local laboratory were used for biosamples analysis. - Laboratory and bioanalytical activities were assessed during the inspection through the review of laboratory-related documentation and a visit to the laboratory facilities involved in the clinical trial,	

as applicable, to verify compliance with the approved protocol, Good Clinical Practice (GCP), and applicable regulatory requirements.

8. Safety Reporting (SAE)

- SOP for SAE reporting was not available as describe above.
- Safety reporting was assessed during the inspection through the review of AEs and SAEs documentation, safety-related records, and applicable Standard operating procedures to verify compliance with the approved protocol, GCP, and applicable regulatory requirements.

Part 3	**Inspection outcome**

- Based on the reviewed documentation, inspected facilities, and observations identified during the inspection: The clinical trial site was as All identified deficiencies were communicated to the site and the CAPA were implemented to address the observations.
- **However, the sponsor terminated the clinical trial at all Egyptian sites following the suspension of sample exportation by the supreme council decision.**
- This EDA-GCP-PIR remained valid until the next inspection, provided no critical findings, safety concerns, or regulatory actions arise.

Part 4	**List of national Laws and GCP Guidelines referenced in the inspection report**

1. Law of Regulating Clinical Medical Research no.214/2020.
2. Prime Minister's Decree No. 927 of 2022 On Promulgating the Executive Regulation of Law on Regulating Clinical Medical Research Promulgated by Law No. 214 of 2020
3. EDA Chairman Decree No.111 for 2022.
4. Guideline for Good Regulatory Oversight of Clinical Trials by Egyptian Drug Authority "EDREX.GL.Bioinn.006".
5. Guideline for Good Clinical Practice ICH E6r3.
6. Declaration of Helsinki
7. WHO Handbook for Good Clinical Research Practice (GCP) -Guidance for Implementation.

Abbreviation	
ADA	Anti-drug antibody
AE	Adverse Event
CAPA	Corrective and Preventive Action
CRF	Case Report Form
CT	Clinical Trial
CV	Curriculum Vitae
EDA	Egyptian Drug Authority
GCP	Good Clinical Practice
ICF	Informed Consent Form
ICH	International Conference of Harmonization

IMP	Investigational Medicinal Product
IRB/IEC	Institutional Review Board / Ethics Committee
MOH	Ministry of Health
NAb	Neutralizing antibody
PI	Principal Investigator
PIR	Public Inspection Report
PK	Pharmacokinetic
QMS	Quality Management System
SAE	Serious Adverse Event
SCCRE	Supreme Council for Clinical Research Ethics
SOP	Standard Operating Procedure
WHO	World Health Organization

العنـــــــــــوان: 51 شارع وزارة الزراعة، العجوزة - الجيزة
البـريد الإلـكـتـرونـي: المكتب الفني / bio.tech@edaegypt.gov.eg، المكتب الإداري /bio.admin@edaegypt.gov.eg
التـــلـيـــفـــون: 0237484988
موقع الهيئة: www.edaegypt.gov.eg