

HOUSE BILL REPORT

HB 2356

As Reported by House Committee On:
Health Care & Wellness

Title: An act relating to stem cell therapies not approved by the United States food and drug administration.

Brief Description: Concerning stem cell therapies not approved by the United States food and drug administration.

Sponsors: Representatives Cody, Johnson, McBride, Jinkins, Ryu and Ormsby.

Brief History:

Committee Activity:

Health Care & Wellness: 1/12/18, 1/17/18 [DPS].

Brief Summary of Substitute Bill

- Requires licensed healthcare providers who perform therapies using human cells, tissues, or cellular or tissue-based products that have not been approved by the United States Food and Drug Administration (FDA) to provide notification that the therapy has not been approved by the FDA.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 17 members: Representatives Cody, Chair; Macri, Vice Chair; Schmick, Ranking Minority Member; Graves, Assistant Ranking Minority Member; Caldier, Clibborn, DeBolt, Harris, Jinkins, MacEwen, Maycumber, Riccelli, Robinson, Rodne, Slatter, Stonier and Tharinger.

Staff: Nate Hickner (786-7291) and Jim Morishima (786-7191).

Background:

Stem Cell Therapies.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

A stem-cell is a type of cell in a living organism that has the potential to split into a variety of different types of cells. Sometimes referred to as "master cells," stem cells can give rise to specialized cells such as blood, brain, or nerve cells, while themselves remaining stem cells.

The only stem cell-based products that are approved by the United States Food and Drug Administration (FDA) for use in the United States consist of blood-forming stem cells (hematopoietic progenitor cells) derived from cord blood. These products are approved for limited use in patients with disorders affecting the body's blood production systems.

Food and Drug Administration Regulation and Exceptions.

The FDA regulates the use of human cells, tissues, and cellular or tissue-based products (HCT/Ps), a category that includes, among other things, bone, skin, heart valves, semen, and stem cells. The FDA takes a tiered, risk-based approach to HCT/P regulation, with different requirements adhering to different sorts of HCT/Ps. As a general rule, HCT/P products are regulated as drugs, and are therefore subject to pre-market FDA clearance and approval and other requirements. However, the regulations provide for two exceptions to the pre-market approval (and in some cases, other) requirements:

Exception 1: The "Same Surgical Procedure" Exception.

The FDA excludes from regulation (including pre-market approval and clearance requirements) a number of categories of HCT/P users including:

- storage facilities for HCT/Ps;
- certain reproductive establishments that immediately transfer HCT/Ps to a sexually intimate partner of the donor;
- establishments that exclusively use HCT/Ps for nonclinical scientific or educational purposes; and
- establishments that remove HCT/Ps from an individual and implant such HCT/Ps into the same individual during the same surgical procedure.

Exception 2: The "Minimally Manipulated" Exception.

The FDA excludes from the pre-market approval and clearance requirement, but imposes other, less stringent requirements on HCT/P users when:

- the HCT/P is minimally manipulated;
- the HCT/P is intended for homologous use only (meaning the cells perform the same basic function or functions in the recipient as in the donor), as reflected by the labeling, advertising, or other indications by the manufacturer; and
- the manufacture of the HCT/P does not involve the combination of the cells or tissues with another article, except for water, crystalloids, or a sterilizing, preserving, or storage agent; and either:
 - the HCT/P does not have a systemic effect and is not dependent upon the metabolic activity of living cells for its primary function; or
 - the HCT/P has a systemic effect or is dependent upon the metabolic activity of living cells for its primary function, and:
 - is for autologous use (cells are transferred back into the same person from which they were retrieved);

- is for allogeneic use in a first-degree or second-degree blood relative (cells are transferred into a close relative of the donor); or
- is for reproductive use.

Food and Drug Administration Guidance and Enforcement Timeline.

The FDA has recently communicated its intention to pursue enforcement actions against providers of stem cell therapies that it views as abusing the above-listed exceptions. In November 2017 the FDA issued two guidance documents discussing the FDA's interpretation of terms within these exceptions.

In order to allow manufacturers of products time to comply with these requirements, until November 2020, the FDA intends to pursue enforcement action only against those noncompliant HCT/P procedures that raise reported or potential significant safety concerns.

Uniform Disciplinary Act.

Credentialed health care providers are subject to professional discipline under the Uniform Disciplinary Act (UDA). Under the UDA, the disciplining authority may take action against a provider for a variety of reasons, including unprofessional conduct, unlicensed practice, and the mental or physical inability to practice skillfully or safely. The Department of Health is the disciplining authority for many providers, and various boards and commissions are the disciplining authority for the remainder.

Upon a finding of unprofessional conduct, the disciplining authority may order sanctions such as revocation of the license, fines, compliance with probation conditions, or restriction or limitation of the practice.

Summary of Substitute Bill:

Credentialed health care providers who perform therapies using HCT/Ps not approved by the FDA must give the following notice prior to performing the therapy:

THIS NOTICE MUST BE PROVIDED TO YOU UNDER WASHINGTON LAW. This health care practitioner performs one or more stem cell therapies that have not yet been approved by the United States food and drug administration. You are encouraged to consult with your primary care provider prior to undergoing a stem cell therapy.

The notice must be provided:

- to the patient prior to therapy, in a written notice in a size of at least eight and one-half inches by 11 inches and in no less than 40-point type;
- in the license holder's office, both in the entrance and in an area visible to patients; and
- in all advertisements for the therapy; and
 - in print advertisements, the notice must be no smaller than the largest font size used in the advertisement; and

- in all other advertisements, the notice must be either printed in a font no smaller than the largest font size used in the advertisement or clearly spoken.

Violation of these notice requirements constitutes unprofessional conduct under the UDA.

License holders who have obtained approval for an investigational new drug or device from the FDA and institutions that have received certification from certain accrediting organizations are exempted from this notice requirement.

Substitute Bill Compared to Original Bill:

The substitute bill provides notice requirements for non-print advertisements and creates an exception from the notice requirements for certain certified institutions.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) Stem-cell medicine holds tremendous promise. But at the moment, the only real legitimate uses of stem-cells in clinical therapies are for use in the blood-forming system. Everything else should be considered experimental or some form of chicanery. There has been a burgeoning industry of stem-cell clinics that have popped up in the United States, but there is little evidence underlying the promises of most of these clinics—they claim to treat erectile dysfunction, autism, etc., but there is no plausible basis for these claims. For some of these clinics, it boils down to an outrageous abuse of vulnerable people looking for solutions to difficult problems.

The FDA has expressed concern about this. There have been instances not only of people being defrauded, but also instances of patient harm. The FDA is on a three-year program to crack down on these clinics, but the federal ability to enforce is limited. It is important for states to step up. A bill on this topic in California has already been passed. If Washington passed this we would be the second to regulate in this area, and we would be on the leading edge of a necessary curve.

The public needs to be protected from this type of activity. Not only is it harmful to individuals that participate in these treatments, but the practice also has a wider impact, threatening the integrity of what is otherwise an immensely promising field.

(Opposed) None.

Persons Testifying: Chuck Murry and Anthony Blau, University of Washington School of Medicine.

Persons Signed In To Testify But Not Testifying: None.