Midwest Center for Stem Cell Therapy
Testimony of Omar Aljitawi, M.D.

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Chairman Pilcher-Cook, Chairman Crum, and members of the Committee, thank you for the opportunity to testify on this important topic.

I am an assistant Professor in the division of Hematology/Oncology at the University of Kansas Medical Center. I am also a blood and marrow transplant physician with special interest in umbilical cord blood stem cell transplantation. I have served as the principal investigator on several national trials, including trials involving umbilical cord blood stem cells. In addition, I have several laboratory research projects focused on umbilical cord blood stem cells and Wharton's jelly mesenchymal stem cells. These projects involve regenerative medicine and cancer research projects.

As a stem cell researcher, my ultimate goal is to translate laboratory research findings into clinical and bedside interventions. The goal of these interventions is to make umbilical cord blood stem cell transplantation and other interventions a safer and more effective therapy for patients with cancer and non-cancer conditions. The process of approving these interventions for human use involves pre-clinical laboratory testing, animal testing, and human testing in the form of clinical trials.

As a physician and a researcher, I understand the obstacles that slow down the process of translating adult stem cell laboratory research findings into bedside interventions. For example, a special facility is needed to handle adult stem cell processing and storage when used in clinical trials. Additionally, an infrastructure of study nurses, study coordinators, and infusion teams should be available. A specialized team that can deal with budgetary issues, regulatory requirements and governing bodies like FDA is also an integral part of a any successful clinical trial operation. Finally, physicians and scientist with expertise in the delivery of adult stem cell therapy is a needed to deliver adult stem cell therapy in a safe and controlled environment.

The presence of a regional stem cell therapy center will certainly help this process of translating research findings into clinical interventions. This center will provide the special facility for stem cell processing and storage. Also, this center will provide the previously mentioned infrastructure needed to make these clinical trials available for patients. The presence of such center will help reduce the cost of running such trials by cost sharing, especially if integrated with the current clinical trial structures available at KUMC, including the Cancer Center and the Frontiers Translational Research operation. The presence of a center of excellence in stem cell therapy will help attract and recruit subjects to clinical trials offered by the center. Additionally, it will help attract companies and clinical as well basic science investigators interested in adult stem cell therapy to collaborate with this center to conduct their studies.

This center will certainly help accelerate the process of approving an adult stem cell therapy intervention by facilitating recruitment to clinical trials. It will also make such trials available to patient in need within the Midwest region. Finally, it will help attract companies and startups to Kansas. This will ultimately result in establishing Kansas as a biomedical hub. For all the above reasons, I hope you look favorably at this bill. Thank you very much for this opportunity to testify.

Respectfully submitted,

Omar Aljitawi, MD