

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	Integrated Clinical and Research Center for Intestinal Disorders (ICRID) – Kasr Al Aini Hospital – Cairo University
Address of Inspected CT Site	Al Manial, Cairo, Egypt
Inspection Details	
Dates of Inspection	Inspection Duration: One-day inspection Start Date: 20 Aug 2025 End Date: 20 Aug 2025
Type of Inspection	Routine GCP Inspection (Following the sponsor's decision for early termination of the study).
Introduction	
General Information about the Sponsor and the CT Site	The inspected site is a clinical trial site (Integrated Clinical and Research Center for Intestinal Disorders (ICRID) – Kasr Al Aini Hospital – Cairo University) participating in the conduct of the inspected clinical study sponsored by (Arena Pharmaceuticals, Inc., a wholly owned subsidiary of Pfizer Inc.), in accordance with applicable regulatory requirements and ethical standards. PI Name: Prof. Dr. Hany Shehab The inspection included verification of the study site's conduct of clinical trial activities within the defined scope, including the informed consent process, protocol compliance, participant source documentation, safety reporting, maintenance of the Investigator Site File, and data documentation, to assess compliance with the study protocol, GCP principles, and applicable local regulations.
Brief Report on Inspection Activities Undertaken	
Scope and limitations	
Areas Inspected	· Informed Consent Forms · Source documents and Electronic Case Report Forms (eCRFs) · Investigator Site File (ISF) and Essential Documents · Quality Management/Quality Assurance System · Archiving and Document Control System · Safety reporting · IMP Management Related Documents

	Study Facilities and Study-Relevant Areas
Out of Scope	The investigational product storage room was not included in the facility tour, and the IMP accountability was not verified, since the IMP had been returned to the destruction vendor following the sponsor's decision for early termination of the study
Inspected Clinical Medical Research	A Multicenter, Randomized, Double-Blind, Parallel-Group Study to Assess the Efficacy and Safety of Oral Etrasimod as Induction and Maintenance Therapy for Moderately to Severely Active Crohn's Disease Protocol Number: APD334-202 Trial ID: CULTIVATE Phase II/III EDA Initial Approval Date: 23 Aug 2022.
Type of IMP	Small Molecule IMP (Etrasimod 1mg and 2mg tablets).
Part 2	
1. Facilities and Equipment System	
1.1. Facilities and Trial Conduct	The trial site had adequate facilities and equipment to support the conduct of the trial. - A designated examination room, consultation room, and procedure room were all available and rendered operational. - Procedure Room: An emergency trolley equipped with emergency medications was placed and made readily available at the procedure area. - Calibration labels and corresponding calibration certificates for all equipment used in the clinical trial were available and verified. The relevant calibration labels were affixed to the equipment, and the calibration certificates were maintained in the Investigator's Site File (ISF). An exception was noted for the defibrillator, for which calibration had not been performed at the time of the inspection. The finding was related to the requirements of ICH E6(R3). As the study had been terminated early and the site was closed with no ongoing clinical trials, calibration could not be performed retrospectively. The applicant committed to calibrating the defibrillator before initiation of any future clinical trial and to implementing annual recalibration as a preventive measure. - The study files were stored in an access-controlled cupboard; however, it was not fireproof, which may pose a risk to the protection and preservation of essential trial documents. The finding was related to the requirements of the <i>Guideline on the Content, Management and Archiving of the Clinical Trial Master File (Paper and/or Electronic)</i>. The finding was subsequently addressed through the purchase of a fireproof storage cupboard and the

	transfer of all study files to the new storage location, with documentation confirming completion of the transfer. - A dedicated Pharmacy/Investigational product storage room was established at the site; however, it was not inspected since there was no IMP at the site during the inspection time.
1.2. Computerized system	Electronic data capture, such as eCRF and randomization systems, were in use.
2. Pharmaceutical Quality System	
2.1. Quality Management System	- The site did not have an established quality management system supported by documented Standard Operating Procedures (SOPs). Specifically, no site-specific SOPs were available to define and govern clinical trial-related activities. However, this observation was not raised as a formal finding, as the study had been terminated early and no active clinical trials were ongoing at the site at the time of the inspection. The site was advised to establish and implement a documented quality management system, supported by SOPs governing clinical trial activities, in accordance with applicable local regulations and guidelines before initiating any new clinical trials. - The study has been monitored according to the monitoring plan.
2.2. SOPs and Documentation	- No site-specific Standard Operating Procedures (SOPs) were available to define and govern the management of clinical trial-related activities. The site was advised to establish a documented quality management system through the development and implementation of SOPs for clinical trial activities in accordance with applicable local regulations and guidelines. However, this observation was not raised as a formal finding, considering that the study had been early-terminated and no active clinical trials were ongoing at the site at the time of the inspection. - Essential documents were available and reviewed, including source documents, ICFs, eCRF, approvals, contracts, insurance, CVs, GCP certificates, IB, safety reports, progress reports, IMP records, and calibration records.
2.3. Deviation Management	Clinical trial-related deviations were managed and documented in accordance with the sponsor's applicable procedures.
2.4. CAPA System	The site was required to address all observations and submit CAPA and supportive documentation as proof of correction, in the proposed time schedule for corrections. The identified findings were appropriately addressed by the site through corrective and preventive actions.
3. Ethics and Participant Protection	

3.1. Informed Consent Process	The informed consent process was reviewed. The approved informed consent forms were used throughout the study and were confirmed to be the correct, IRB-approved versions. 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 the IRB were available. - Initial IRB Approval dated 16 Sep 2020.
3.3. Participant Safety	The reported Serious Adverse Events (SAEs) were notified to the sponsor within the timelines specified in the protocol and were reported to the Institutional Review Board (IRB) and the Egyptian Drug Authority (EDA) in accordance with applicable local regulatory requirements. Moreover, the Principal Investigator ensured appropriate follow-up of participants who experienced SAEs until resolution of the events.
4. Personnel and Training	
4.1. Training and Qualifications	- Curriculum Vitae of the Principal Investigator, Co-Investigator(s), and Site Coordinator were confirmed to be available at the site, up to date, and filed appropriately in the Investigator Site File in compliance with GCP requirements. - Training records and workloads for all staff who took part in the conduct of the clinical trial were verified and filed at the site. Protocol-specific training records were reviewed and retained in the Investigator Site File. - It was verified that all study personnel were GCP-trained (certificates were found at the site).
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. - Records of IMP return to the destruction vendor were verified during the inspection. - Accountability of the IMP was not performed since there was no IMP at the study site during the inspection visit, and it was returned to the destruction vendor following the sponsor's decision for early termination of the study.
6. Clinical Trial Conduct	

6.1. Protocol Compliance	- The study was conducted according to the approved protocol. - Based on the documents reviewed, facilities inspected, and considering the findings of the inspection, the study (APD334-202), was conducted at an acceptable level of compliance with the protocol, GCP guidelines, and applicable regulatory requirements
6.2. Source Data and CRFs	- Participant records were available for verification and were maintained in an organized and accessible manner throughout the inspection period. - Source data were confirmed to be legible, well organized, and maintained in full compliance with ALCOA principles throughout the study.
6.3. Delegation of Duties	The Delegation of Responsibility Log was confirmed to be available at the site, accurately completed, signed by the Principal Investigator, and reflective of the actual roles and responsibilities assigned to each study team member.
7. Laboratory and Bioanalytical Activities (if applicable)	
- The study site utilized an external central laboratory - The laboratory was accredited - The laboratory procedures were defined in the laboratory manual filed in the Investigator Site File, along with the reference ranges to be accessible to the study staff.	
8. Safety Reporting (SAE)	
- The reported Serious Adverse Events (SAEs) were notified to the sponsor within the timelines specified in the protocol and were reported to the Institutional Review Board (IRB) and the Egyptian Drug Authority (EDA) in accordance with applicable local regulatory requirements.	
Part 3	Inspection Outcome
- Based on the reviewed documentation, inspected facilities, and observations identified during the inspection, the clinical trial site was considered to be operating at an acceptable level of compliance with GCP guidelines and applicable regulatory requirements. - The identified deficiencies were communicated to the applicant. - The identified deficiencies were communicated to the applicant and were subsequently addressed through appropriate corrective, where feasible, and preventive actions, which were evaluated and accepted by the EDA. - This EDA-GCP-PIR remains valid until the next GCP inspection of the site.	
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	
ALCOA:	Attributable, Legible, Contemporaneous, Original, Accurate
CAPA:	Corrective and Preventive Action
CRF:	Case Report Form
CT	Clinical Trial
EDA	Egyptian Drug Authority
GCP:	Good Clinical Practice
IB	Investigator Brochure
ICF	Informed Consent Form
ICH	International Conference on Harmonization
ICRID	Integrated Clinical and Research Center for Intestinal Disorders.
IMP:	Investigational Medicinal Product
IRB:	Institutional Review Board
ISF:	Investigator Site File
PI:	Principal Investigator
PIR	Public Inspection Report
SAE:	Serious Adverse Event
SOP:	Standard Operating Procedure
WHO	World Health Organization