FDA GHANA **FOOD AND DRUGS AUTHORITY**

Your Well-being, Our Priority.

N/O	TITLE OF STUDY, PHASE & DATE OF RECEIPT OF APPLICATION	PRINCIPAL INVESTIGATOR	STUDY CENTRE(S)	SPONSORS & APPLICANT	STATUS & DURATION OF STUDY	PURPOSE/AIM OF STUDY
1	LETICIA Phase II 30th August, 2019	Dr. Lawrence Osei-Tutu	Agogo Presbyterian Hospital	Dr. Lawrence Osei-Tutu	Approved, yet to start 12 Months	Iron deficiency is the most common nutritional deficiency worldwide and an important public health problem in Low and Middle Income Countries (LMICs). Causes of anemia in LMICs like Ghana are usually multifactorial including malaria, hemolytic anemias, and chronic blood loss from chronic parasitic infections including schistosomiasis and hookworm. Factors accounting for inadequate supplies of dietary iron and micronutrients include poverty, a lack of nutritional supplementation, and food taboos. Anemia may result when iron deficiency is severe, after the body's iron stores are depleted and supply to the bone marrow is limited. This proof of concept study is to determine whether hospitalized children 6-59 months old who presented with moderate-to-severe anemia and given a combination of iron-rich food and standard iron replacement therapy (the intervention group) will demonstrate a greater final hemoglobin (Hb) concentration after two weeks compared to participants of similar characteristics in the control group who will receive oral iron supplementation in addition to their usual diet.
2	ANTICOV Phase III 15th July, 2020	John Humphrey, AMUASI	Komfo Anokye Teaching Hospital	• Bernhard Nocht Institute for Tropical Medicine	Approved, yet to start 24 Months	The purpose of this study is to compare the efficacy of alternative treatment strategies versus control on the risk of progression to severe respiratory disease
3	AVAREF TV ROTA Phase III 9th April, 2019	1.Prof. George E. Armah 2.Dr. Alberta Amu	Dodowa Health Research Centre	PATH	Approved 48 Months	Diarrhea is the second-leading cause of death worldwide among children under the age of five, killing an estimated three quarters of a million children annually and hospitalizing millions more in developing countries. The most common cause of infantile diarrhoea is rotavirus and almost all children are infected by their third birthday regardless of geographical area or economic status. Infection is primarily via fecal oral route and improved sanitation alone will not control infection. Oral rotavirus vaccines have traditionally shown lower efficacy in Low and Middle Income Countries (LMICs) as compared to developed countries. Several theories proposed for this observation includes interference by other intestinal viruses or bacteria, neutralization of vaccine by maternally virus by maternally derived antibodies in breastmilk, etc. Some of these challenges may be obviated by a parenteral administered rotavirus vaccine. This study is therefore to demonstrate the efficacy and safety of the parenteral trivalent rotavirus vaccine in healthy infants (≥6 and <8 weeks old) to prevent severe rotavirus gastroenteritis compared with the orally approved Rotarix®
4	DOLF_IDA ONCHO SAFETY GHANA Phase II 22nd February 2019	Dr. Nicholas Opoku	University of Health and Allied Sciences	Washington University School of Medicine	Approved, study commenced 24 Months	Programs for control of onchocerciasis through community directed treatment with ivermectin (IVM) as a form of Mass Drug Administration (MDA) have been in place for almost 30 years. IVM is effective for clearing Mf and it temporarily sterilizes adult female worms, but it is not a microfilaricide and does not kill adult worms. For that reason, MDA with IVM must be repeated for the reproductive life of the adult worms, which is 10-15 years. Thus, there is a widely recognized need for new, safe, short-course treatment drug(s) that can kill or permanently sterilize adult worms. This study aims to provide preliminary data on the safety of ivermectin + diethhylcarbamazine + albendazol (IDA) treatment in persons with onchocerciasis when administered after pre-treatment with IVM to clear or greatly reduce microfilariae from the skin and eyes. Widespread use of IDA following IVM pretreatment (I/IDA) has the potential to greatly accelerate elimination of LF in African countries that are coendemic for LF and onchocerciasis
5	FALCON Phase III 10th April, 2019	Prof. Stephen Tabiri	Tamale Teaching Hospital	The University of Birmingham	Approved, study commenced 24 Months	Improving surgical outcomes is a global health priority. Recent World Health Organisation (WHO) guidelines made 29 recommendations for intraoperative and postoperative measures to prevent SSI, including global perspectives relevant to LMICs., none of the evidence for the recommendations used was derived from resource limited settings, leading to uncertainty about implementation of measures in these settings. A randomised trial that has the potential to evaluate multiple interventions has particular value in this setting, and can establish a high quality evidence base that will inform guidance, and influence revisions to the WHO Surgical Safety Checklist This study assesses whether either (1) 2% alcoholic chlorhexidine versus 10% povidone-iodine for skin preparation, or (2) triclosan-coated suture versus non-coated suture for fascial closure, can reduce surgical site infection at 30-days post-surgery for each of (1) clean-contaminated and (2) contaminated/dirty surgery

6	LEDoxy Phase II 12th July, 2017	Prof. Alexander Yaw Debrah	1.Kumasi Centre for Collaborative Research (KCCR), Kwame Nkrumah University of Science and Technology (KNUST) 2.War Memorial Hospital, Navrongo	Kumasi Center For Collaborative Research (KCCR)	Enrollment ended; participants are in follow-up stage 40 months	The previously demonstrated effect of doxycycline in reversing or stopping the progression of lymphedema of patients with stage 1-3, irrespective of their filarial infections being active or not, provides an opportunity to include the drug as a new tool inlymphatic filariasis (LF) morbidity management programs. However, before recommendations can be made regarding the frequency of its usage or alternate dosing patterns more trials need to be conducted. This multi-national trial is to show efficacy of a lower dosage of doxycycline and to confirm finding in patients with stages 1-3 lymphedema irrespective of active LF infection as well as in people with higher grades of lymphedema. The purpose of the study is to establish that Doxycycline can improve filarial lymphedema in healthy adolescents or adults (14 – 65 years)
7	SMAART Phase II 9th February, 2018	Dr. Fred Stephen Sarfo	Komfo Anokye Teaching Ho	Kwame Nkrumah University of Science and Technology	Actively Enrolling 19 months	There has been unprecedented rise in the prevalence of stroke in sub-Saharan Africa (SSA), which when compared to stroke profiles in high-income countries (HIC) is characterized by a younger age of onset, higher case fatality rates, and more severe disability among survivors. Stroke survivors in SSA are especially at high risk for recurrent vascular events or death due to several factors including uncoordinated health systems, undiagnosed and under-controlled vascular risk factors, and lack of care affordability. Fixed-dose combination pills, known as “polypills”, containing Aspirin, a statin and blood pressure (BP) lowering medication(s) may improve medication adherence and consequently reduce vascular risk as a cost-effective intervention among high risk patients including stroke survivors. This trial is to assess whether a polypill containing fixed doses of 3 antihypertensives, a statin and antiplatelet therapy taken once daily orally would result in carotid intimal thickness regression, improved adherence, and tolerability compared with ‘usual care’ group on separate individual secondary preventive medications among Ghanaian first time stroke survivors (male or female above the age of 18 years).
8	MoRiOn II 28th April, 2017	Prof. Alexander Yaw Debrah	1.Enchi Government Hospital 2.Communities of Aowin/Suaman District W/R	Kumasi Centre for Collaborative Research in Tropical Medicine	Actively Enrolling 15 months	Onchocerciasis is caused by the parasite Onchocerca volvulus. More than 37 million people are estimated to be infected with O. Volvulus worldwide. The current therapeutic strategy relies on annual mass drug administration (MDA) based on the drug donation program for Ivermectin. Ivermectin is mainly microfilaricidal and after a few months female worms resume MF production levels high enough for transmission. Therefore, safe microfilaricidal drugs are needed to reach the goal of elimination. The study aims to show efficacy (Wolbachia depletion) of combination Rifapentine plus Moxiflocaxin using immunohistology compared to no treatment and treatment with Doxycycline.
9	MAL 094 Phase IIb 21st November 2016	Prof. Tsiri Agbenyega	Malaria Research Center, Ac	GlaxoSmithKline Biologicals SA	Enrollment ended; participants receiving treatment 72 months	As part of GSK and PATH’s commitment to develop a malaria vaccine for reduction of malaria disease burden in children and contribution to the malaria elimination goal, characterization of an optimal dosing regimen and boosting schedules are critical. Results of previous efficacy study MAL 055, including the long term follow-up data and efficacy of a fourth dose administered 18 months after the third dose, and the preliminary results of MAL 071 study (recent controlled human malaria infection) were reviewed by the European Medicines Agency (EMA). There was evidence that demonstrated superior protection against malaria infection associated with the use of a fractional third dose in a 0, 1, 7-month schedule with a higher vaccine efficacy against malaria infection. This study intends to establish Proof of Concept for a fractional dose schedule under conditions of natural exposure. The study will be conducted in children 5-17 months old at first vaccination living in areas of mid to high malaria transmission, in line with the age group recommended by the World Health Organization. Results from study will be critical in informing future possibilities for the development of vaccine-based strategies which, in combination with other interventions, may contribute to the malaria elimination agenda.
10	KNC 19 (NIBIMA) Phase IIb 11th September 2020	Prof. Ellis Owusu-Dabo	Komfo Anokye Teaching Ho	KNUST Office of Grants and Research	Application Approved	The purpose of this trial is to evaluate the: • Efficacy of Nibima in reducing >50% Covid-19 viral load per patient within 14 days of therapy. Evaluate the efficacy of Nibima in increasing the anti-inflammatory and interferon alpha/beta profiles of >50% of the Covid-19 patients within 14 days.
11	STAND Phase III 30th September, 2019	1.Dr. Yvonne Dei Adomakoh Dr. Vivian Paintsil	1.Ghana Institute of Clinical Genetics, Korle-Bu Sickle Cell Office Directorate of Child Health, KATH	Novartis Pharma AG	Application Approved	Sickle cell disease (SCD) is a genetic blood disorder, caused by a single missense mutation in the β-globin gene, progresses into a systemic disease. Vaso-occlusion is the hallmark of SCD and can lead to serious acute and chronic complications. Extensive preclinical data has established P-selectin as a key mediator of VOC in SCD and suggest that its blockade or genetic absence of P-selectin decreases or eliminates its interactions with its ligands, thereby reducing vaso-occlusion. Crizanlizumab is a monoclonal antibody that binds to P-selectin preventing it interactions with its ligands. The purpose of this study is to compare the efficacy and safety of 2 doses of crizanlizumab (5.0 mg/kg and 7.5 mg/kg) versus placebo in adolescent and adult SCD patients (12 years and older) with history of VOC leading to healthcare visit.

12	INOVIO	Prof. Kwadwo Ansah Koram	Noguchi Memorial Institute for Medical Research University of Ghana, Legon	Inovio Pharmaceuticals, Inc	Application Approved	The purpose of this study is to evaluate the tolerability and safety of INO-4500 administered by ID injection followed by EP in healthy adult volunteers
13	MULTIMAL Phase II 27th July 2020	PI(s) Dr. Oumou Maiga (KCCR)	St. Francis Xavier Hospital Assin Fosu, Ghana. Gabon	Department of Tropical Medicine, Bernhard Nocht Institute for Tropical Medicine (BNITM)	Application Approved	The purpose of this study is to describe the pharmacokinetic properties of each partner drug and their principal active metabolites in the two antimalarial combination treatments artesunate-pyronaridine-atovaquone/proguanil (APAP) and artesunatefosmidomycin-clindamycin (AFC), respectively in patients with uncomplicated malaria
14	MDGH-MOX Phase I February 2020	Dr. Nicholas Opoku	School of Public Health Res	Medicines Development for Global Health	Application Approved	The purpose of the study is to Identify an optimal dose of moxidectin for the treatment of children aged 4 to 11 years with onchocerciasis.
15	CROWN CORONATION Phase III 7th Sept 2020	Prof. Kwadwo Koram	•• Ga East Municipal Hospital • Korle-Bu Teaching Hospital • UGMC • Effia-Nkwanta Hospital • Pentecost Treatment Center	Each country serves as its own sponsor but will receive funding from the Covid 19 Therapeutics Accelerator and Gates Foundation through Washington University in St. Louis.	Application Approved	The purpose of this study is to determine the effectiveness of the trial intervention(s) in preventing symptomatic (i.e. any of the following: cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, sore throat, new loss of taste or smell, nausea, vomiting, or diarrhea), laboratory test-confirmed COVID-19 in healthcare workers with repeated exposures to SARS-CoV-2 by day 60 after receiving trial treatment.
16	ASTAWOL Phase II 25th June 2020	Prof. Alexander Yaw Debrah	•Bawku west •Builsa South •Nabdam Fumbisi •Garu-Tempane •Kayoro	Kumasi Centre for Collaborative Research (KCCR), Kumasi, Ghana	Application Approved	The purpose of this study is to • To show efficacy (Depletion of Wolbachia) of the combination of Rifampicin plus Albendazole against lymphatic filariasis using PCR compared to treatment with albendazole and “no treatment” (other than ivermectin) - Lymphatic Filariasis (LF) trial • To show efficacy (depletion of Wolbachia and interruption of embryogenesis in female adult worms) of the combination of Rifampicin plus Albendazole, using PCR and immunohistology compared to treatment with albendazole and “no treatment” (other than ivermectin) – Onchocerciasis trial
17	CHEETAH Pilot June 2020	Professor Stephen Tabiri	• Tamale Teaching Hospital • Cape Coast Teaching Hospital • Effiah Nkwanta Regional Hospital • Eastern Regional Hospital • Ridge Hospital • Goaso Municipal Hospital • Ho Teaching Hospital • Holy Family Hospital – Berekum • Holy Family Hospital – Techiman • KATH • Korle Bu • Salaga Municipal Hospital • St Theresa's Hospital • Sunyani Regional Hospital	Birmingham Clinical Trials Unit, University of Birmingham	Application Approved	To purpose of this study is to assess whether the practice of using separate, sterile gloves and instruments to close wounds at the end of surgery can reduce surgical site infection at 30-days post-surgery for patients undergoing clean-contaminated, contaminated or dirty abdominal surgery, compared to current routine hospital practice.
18	CECOLIN Phase III September 2020	Prof. Tsiri Agbenyega	• Agogo Asante Akim North D	PATH	Application Approved	The purpose of this study is to demonstrate the non-inferiority of Cecolin® administered on 0, 6-month; 0, 12-month; and 0, 24-month two-dose regimens, to Gardasil® using a 0, 6-month two-dose regimen, based on HPV Immunoglobulin G (IgG) antibody levels measured one month after the last dose for HPV types 16 and 18.
19	IMR SCD Phase IIb 23rd Sept 2020	Dr. Seyram Kaali	• Korle-Bu Teaching Hospital • Kintampo Health Research Centre	IMARA Inc.	Application Approved	The purpose of this study is: • To evaluate the fetal hemoglobin (HbF) response to IMR-687 versus placebo To evaluate the safety of IMR-687 versus placebo
20	EMODEPSIDE Phase II 5th November, 2020	Dr. Nicholas Opoku	• School of Public Health Research Centre, (UHAS). • Municipal Hospital, Hohoe, Volta Region, Ghana • Kpassa, Nkwanta- North District, Oti Region, Ghana	DNDi (Drugs for Neglected Diseases initiative)	Application Pending Approval	The purpose of this study is to • Ensure the safety and tolerability of emodepside after single oral doses administered as solution (liquid service formulation, LSF) or immediate release (IR) tablets in healthy male subjects • Plasma PK of emodepside (solution and tablets), the effect of food on the bioavailability of emodepside

21	STEADFAST Phase II 15th February, 2021	Dr. Yvonne Dei Adomako	• Ghana Institute of Clinical Genetics Korlebu • Sickle cell office Directorate Child(KATH)	Novartis Pharma	Application Pending Approval	The purpose of this study is to explore the effect of P-selectin inhibition with crizanlizumab on renal function in SCD patients with CKD who are receiving standard of care for SCD-related CKD, have Grade A2-A3 albuminuria and Stage 1-3a CKD, and are at risk for rapid decline in their eGFR.
22	HOPE KIDS 2 Phase III 16th December 2020	Dr. Catherine Segbefia	• Korlebu Teaching Hospital Department of Child Health • Sickle cell office Directorate Child(KATH)	Global Blood Therapeutics, inc	Application Pending Approval	The purpose is to evaluate the effect of voxelotor compared to placebo on the transcranial Doppler(TCD) time-averaged mean of the maximum velocity(TAMMV) arterial cerebral blood flow at 24 weeks in SCD participants >2 to < 15 years of age with conditional (170 to <200cm/sec) TCD flow velocity.
23	BURULIRIFDAC Phase III 12th December 2020	Prof. Richard Phillips	• KCCR • Ga East munical hospital • Pakro Health Centre • Wassa Amenfi East Hospital	London school of Hygiene and Tropical Medicine	Application Pending Approval	Compare the time to clearance of viable Mycobacterium from wounds of patients treated with high-dose rifampicin and DACC dressings (HR-DACC) to those receiving standard dose rifampicin and DACC dressings
24	BEMPU 2nd November, 2020	Mr. Prince Owusu	• Achimota General Hospital • Greater Accra Regional Hospital • Eastern Regional Hospital • Korle-Bu Teaching Hospital • Central Regional Hospital Princess Marie Luis Children Hospital	Center for learning and childhood development	Application Pending Approval	To determine the accuracy of the bracelet in identifying hypothermia and evaluate its effect on Kangaroo Mother Care (KMC) practices and neonatal health outcomes in Ghana. To assess the acceptability of the bracelet in Health providers and caregivers of Low Birth Weight (LBW) infants by conducting qualitative in-depth interviews. Determine the accuracy of the BEMPU bracelet in classifying hypothermia in the clinical setting. Evaluate the impact of the bracelet
25	IVERMECTIN GH Phase II 5th March 2021	Dr. Kwaku Poku Asante	Mamprobi Polyclinic LEKMA Hospital Ga East Hospital Mamobi Tema General Hospital Pantang Hospitals	Prof. Fred Binka	Application Pending Approval	To determine the impact of Ivermectin in the country to guide its possible use for prophylaxis or treatment. The studies will assess the efficacy of Ivermectin as prophylaxis and treatment among healthworkers and patients diagnosed with symptomatic COVID-19 infection respectively. Results from this study will inform policy on the treatment and prevention of COVID-19.
26	PRCR SPOT 15th March 2021	Dr. Hannah Brown Amoakoh	Ridge Hospital, Korlebu Teaching Hospital, Koforidua Regional Hospital	Emily Stephanie Zobrist, PATH, 2201 Westllake Avenue, Seattle, WA 98121, USA	Application Pending Approval	To address the gap in proteinuria measurement solutions, LifeAssay Diagnostics (LAD) has developed and commercialized a low-cost PrCr urine dipstick that has shown goodlaboratoryand clinical performance and high usability within antenatal care (ANC)settings in previous studies.There is a need for further evidenceon the clinical utility and operational fit of the LAD Test-it™ PrCr test to inform policy recommendation for its use in Ghana and other LMIC settings.
27	SHEA LIDO Phase III 10th Sept 2020	Dr. Kekeli Kodjo Adanu	Ho Teaching Hospital	University of Health and Allied Sciences	Application Pending Approval	This study is a randomized controlled trial which compares the effectiveness, complications and ease of use of shea butter as a surgical lubricant to lidocaine gel. The purpose is to: • To determine the ease of use of shea butter by clinicians as compared to lidocaine gel as a lubricant for rectal examination. • To determine the complication rate related to the use of shea butter as a lubricant for rectal examination. • To ascertain the complication rate associated with the use of lidocaine gel as a lubricant for rectal examination • To compare the complication rate related to the use of shea butter to that of lidocaine gel.
28	KAE609 Phase II	Dr. Abraham Rexford Oduro	1.Navrongo Health Center 2.Kintampo Health Research Centre	Novartis Pharma AG, Switzerland	Active Phase ended; Final report submitted 14months	
29	Saving Brains Navrongo I	Dr. Engelbert A. Nonterah	Navrongo Health Research	CNutriset, SAS	Active Phase ended; Final report yet to be submitted 6 months	
30	SAVING BRAINS KUMASI I	Prof. Jacob Plange-Rhule	1.Tafo Government Hospital 2.Suntreso Government Hospital 3.Kumasi South Government Hospital	KNUST/Nutriset SAS	Study ended 6months	
31	ALB_IVM III	Dr. Nicholas Opoku	Onchocerciasis Chemotherapy Research Centre Government Hospital.	Case Western Reserve University School of Medicine, 10900 Euclid Ave Cleveland	Active Phase ended; Final report submitted 38 months	

32	MAL 055 III	1. Prof. E. Tsiri Agbenyaga 2. Prof. Seth Owusu Agyei 3. Dr. Kwaku Poku Asante	1. Malaria Research Centre, Agogo. 2. Kintampo Health Research Centre	GlaxoSmithKline Biologicals	Active Phase ended; Final report submitted 60 months	
33	MMS III	Prof. Tsiri Agbenyaga	1. Barekuma Collaborative Community Development Project 2. C/O Komfo Anokye Teaching Hospital, Kumasi	Kirk Humanitarian	Active Phase Ended; yet to submit report 48 months	
34	PRENABELT *	Dr. Jerry Coleman	Korle-Bu Teaching Hospital, Accra – Korle Bu	Global Innovations for Reproductive Health and Life, USA	Active Phase ended; Final report submitted 7 months	
35	CPAP Phase III	1. Dr. Harry Tagbor 2. Dr. Frank Baiden 3. Dr. Damien Punguyire 4. Dr. Kwadwo Nyarko Jectey	1. Mampong Government Hospital, Mampong 2. Kintampo Municipal Hospital, Kintampo	General Electric (GE) Foundation's Systems Improvement at District Hospitals and Regional Training of Emergency Care (sidHARTe) out of Columbia University	Active Phase ended; yet to submit report in required format. 36 months	
36	AIMS Phase III	Dr. Shirley Owusu-Ofori	Komfo Anokye Teaching Hospital	Terumo BCT Europe N.V.	Active Phase ended; Final report submitted 6 months	
37	MENINGOCOCCAL-A CONJUGATE VACCINE II	Dr. Patrick Ansah	Navrongo Health Research Centre	SIIL PATH	Active Phase ended; Final report submitted 54 months	
38	NON-INVASIVE HAEM DEVICE III	Dr. Sam Newton	Kintampo Health Research Centre, Kintampo	PATH	Active Phase Ended 2 months	
39	ROTARIX III	Prof. George Armah	Navrongo Health Research Centre	PATH	Active Phase Ended 7 months	
40	ARTIMIST III	Dr. Patrick Ansah	Navrongo Health Research Centre	ProtoPharma Limited	Active Phase Ended 5 months	
41	GARDASIL III	Dr. Nana Akosua Ansah	Navrongo Health Research Centre	Merck, Sharp and Dohme Corporation	Active Phase Ended 20 months	
42	SMAC III	Prof. Tsiri Agbenyega	Komfo Anokye Teaching Hospital, Kumasi	University Medical Centre Tubingen	Active Phase Ended 15 months	
43	OXYTOCIN III	Dr. Sam Newton	Kintampo Health Research Centre	PATH	Active Phase Ended 12 months	
44	AMARYL M IV	Dr. Frank Umeh	Korle-Bu Teaching Hospital	Sanofi Aventis	Active Phase Ended 6 months	
45	MOXIDECTIN- IVERMECTIN III	Dr. Nicholas Opoku	Onchocerciasis Chemotherapy Research Centre Government Hospital.	1. Wyeth Research Division of Wyeth Pharmaceuticals Inc. 2. Product Development and Evaluation unit TDR	Report submitted	Report submitted 25 months + (12 months ext.)
46	EBA I	Prof. Kwadwo Ansah Koram	Noguchi Momorial Institute of Medical Research	Division of Microbiology and Infectious Diseases (DMID) National Institute of Allergy and Infectious Diseases (NIAID)	Active Phase Ended 18 months	
47	IPT & SP III	Dr. Abraham Hodgson	Health Facilities in the Kassena Nankana, Navrongo Health Research Centre	London School of Hygiene and Tropical Medicine	Active Phase Ended 32 months	

48	IRON FORTIFICATION III	Prof. Seth Owusu Agyei	Kintampo Health Research Centre	National Institutes of Health	Active Phase Ended 12 months	
49	ROTASHIELD III	1. Prof. George E. Armah 2. Prof. Fred N. Binka 3. Dr. Abraham Hodgson	1. War Memorial Hospital, Navrongo 2. Bongo Hospital	International Medica Foundation	Active Phase Ended 16 months	
50	AZITHROMYCIN PLUS CHLOROQUINE PHOSPHATE III	Dr. Patrick Ansah	Navrongo Health Research Centre	Pfizer Laboratories Incorporated, Pfizer Global Research and Development.	Active Phase Ended 8 months	
51	CRASH-2 II	Prof. J. C. B. Dakubo	Korle-Bu Teaching Hospital	London School of Hygiene & Tropical Medicine	Active Phase Ended, Lancet publication submitted 24 months	
52	PYRONARIDINE ARTESUNATE VRS COARTEM III	Dr. G. Bedu-Adoo	Komfo Anokye Teaching Hospital	Medicines For Malaria Venture, Switzerland	Active Phase Ended 3 months	
53	MAL 050 III	Prof. Seth Owusu Adjei	Kintampo Health Research Centre	GlaxoSmithKline R&D	Active Phase Ended 17 months	
54	PFCSP_MVACS_MALARIA I	Prof. Kwadwo A Koram	Tetteh Quarshie Memorial Hospital	Division of Microbiology and Infectious Diseases (DMID) National Institute of Allergy and Infectious Diseases (NIAID)	Active Phase Ended 18 months	
55	ROTATEQ III	Prof. George E. Armah	Navrongo Health Research Centre	1. Merck & Co. 2. PATH	Active Phase Ended 18 months	
56	MEFLOQCHLOAZITH III	Dr. Abraham Hodgson	Navrongo Health Research Centre	Pfizer Inc.	Active Phase Ended 12 months	
57	MAL 047 II	Prof. Seth Owusu Adjei, Dr. Kwaku Poku Asante	Kintampo Health Research Centre	GlaxoSmithKline R&D	Active Phase Ended 19 months	
58	CDA III	Prof. Seth Owusu Agyei Dr. Kwaku Poku Asante	Kintampo Health Research Centre	GlaxoSmithKline R & D	Active Phase Ended 12 months	
59	CDA2 III	Prof. Tsiri Agbenyega	Department of Physiology, School of Medical Sciences, KNUST	GlaxoSmithKline R & D	Active Phase Ended 12 months	
60	NOVASIL II	Prof. David Ofori Agyei Dr. Nii- Ayi Ankrah	Ejura Sekyedumasi Disrict, Ashanti Region	United States Agency for International Development (USAID) Through The Peanut Collaborative Research Support Program	Active Phase Ended 9 months	
61	TENOFOVIR II	Dr. Edith Clarke	Ghana Health Service	Family Health International	Active Phase Ended 20 onths	
62	SAVVY II	Dr. William Ampofo Dr. Baafuor Kofi Opoku	1. Noguchi Memorial Institution for Medical Research. 2. Komfo Anokye Teaching Hospital.	Family Health International	Active Phase Ended 32 months	
63	MAL 063 III	Prof. E. Tsiri Agbenyaga	Malaria Research Centre, Agogo.	Malaria Research Centre, Agogo	Active Phase Ended 52 months	
64	PREGACT III	1.Dr. Harry Tagbor 2.Dr. Henry Opare Addo	1.Ejisu Government Hospital, Ejisu 2. Juaben Government Hospital, Juaben	Prince Leopold Institute of Tropical Medicine	Active Phase Ended 60 months	
65	ALBIVIM K'SI III	Prof. Alexander Yaw Debra	Kumasi Centre for Collaborative Research in Tropical Medicine	University Hospitals Case medical Center	Active Phase Ended, Yet to submit final report 4 years and 2 months	

66	RIFAMPIN VS ISONIAZID III	Dr. Joseph Baah Obeng	Komfo Anokye Teaching Hospital Chest Clinic, Kumasi	Canadian Institute of Health Research	Active Phase Ended 60 months	
67	NOGUCHI FILARIASIS *	Prof. Daniel A. Boakye Dr. Nana – Kwadwo Biritwum	Noguchi Memorial Institute For Medical Research	World Health Organization - TDR	Active Phase Ended 10 months	
68	ZIV AFFLIBERCEPT I	Braimah Imoro Zeba	Retina unit, Eye Centre, Korle-Bu, Teaching Hospital, Korle-Bu, Accra	Same as PI	Active Phase Ended 5 months	
69	HESTIA3 Phase III 1st August, 2018	1. Prof. Alex Osei-Akoto 2. Dr Patrick Ansah 3. Dr. Catherine Segbefia 4.Dr Kokou Hefoume Amegan-Aho	1. Komfo Anokye Teaching Hospital, Department of Child Health 2. Navrongo Health Research Centre 3. Department of Child Health, Korle Bu University of Health and Allied Sciences	AstraZeneca AB	Active Phase Ended. Final Report submitted 29 Months	Sickle cell disease (SCD) is a genetic, autosomal, recessive blood disorder resulting in altered (sickle- shaped) red-blood cells. A vaso-occlusive crisis (VOC) is a severe, acute painful episode that occurs when sickle-shaped red blood cells obstruct the microcirculation and restrict blood flow to an organ or tissue, resulting in ischaemia, necrosis and organ damage. There is a high unmet need for treatment options in SCD and there is a data that platelet inhibition has the potential to reduce the risk for acute vaso-occlusions. This study is to evaluate the effect (efficacy, safety and tolerability) of ticagrelor versus placebo in reducing the rate of vaso-occlusive crises (VOCs), which is the composite of painful crisis and/or acute chest syndrome (ACS), in paediatric patients (2 to 11 years and 12 to 17 years with sickle cell disease (SCD).
70	PRCR DIPSTICK 16th February, 2018	Dr. Sam Newton	Kintampo Health Research Center	Program For Appropriate Technology In Health (PATH)	Active Phase Ended. Final Report Submitted 19 months	The lack of access to reliable tests for proteinuria measurement in all antenatal care settings, particularly at the periphery, remains a critical gap in the accurate identification of women at high risk for Pre-Eclampsia. In Low Resource Settings, a protein-only measurement via a urine dipstick is the most widely used proteinuria test due in part to its low complexity and low cost. However, the clinical utility of the protein-only dipstick is limited. Test results can be unreliable, as the test cannot adjust for daily fluctuation of body hydration. This leads to protein measurements that are either too low or too high due to the level of urine dilution. More accurate tests, such as the 24-hour urine test, are available only for confirmatory testing in tertiary-level clinics due to their high cost and technical complexity. The purpose of the study is to generate a body of evidence that will determine performance characteristics of the current Protein Creatinine dipstick test and the feasibility of its use in target Ante Natal Care settings.
71	MAL 073 Phase IIIb 11th December 2015	1.Prof. Tsiri Agbenyega Prof. Seth Owusu Adjei	1.Malaria Research Center, Agogo 2.Kintampo Health Research Centre	GlaxoSmithKline Pharmaceuticals	• Enrollment ended; participants receiving treatment (MRC, Agogo) • Enrollment ended; participants are in follow-up stage (KHRC, Kintampo 38 months	In sub-Saharan Africa, most of the Expanded Program on Immunization (EPI) vaccines are given in early infancy while measles, rubella and yellow fever (YF) vaccines are given at 9 months of age. Between the first EPI vaccines and the measles, rubella and YF vaccines, children receive Vitamin A supplementation at 6 months of age. To limit the number of clinic visits for young children and to optimize vaccine implementation a schedule (0, 1.5, 3-month) is proposed . There are however no data of the anti-circumsporozoite protein of Plasmodium falciparum (anti-CS) immune response induced by RTS,S/AS01E when given in coadministration with measles, rubella and YF, in a 0, 1.5, 3-month schedule starting at an older age (5-17 months). This study intends to demonstrate that anti-CS immune response of the candidate malaria vaccine RTS,S/AS01E is not inferior when RTS,S/AS01E is administered at 6, 7.5 and 9 months of age with the third dose given alone or in co-administration with a YF vaccine and a combined measles and rubella vaccine Safety has not been evaluated in co-administration with measles, rubella and YF in a 0, 1.5, 3-month schedule starting at 6 months of age. This study will therefore provide safety information when RTS,S/AS01E is administered at 6, 7.5 and 9 months of age alone or in co-administration with YF vaccine and a combined measles and rubella vaccine
72	ESM UBT *	Dr. Ivy Frances Osei	Field Work	Bill and Melinda Gates Foundation, USA	Study not conducted; Funds from Sponsor withdrawn before initiation 8months	
73	FERROQUINE II	Dr. Josephine C. Ocran Prof. Kwadwo Ansah Koram	Noguchi Memorial Institute o	Sanofi-Aventis Recherché And Development	Study Closed by Sponsor. No recruitment was done. 13Conths	
74	HOPE SCD III	1.Dr. Yvonne Dei Adomakoh 2.Dr. Vivian Paintsil	1.Center for Clinical Genetics, Korle-Bu Teaching Hospital 2.Paediatric Sickle cell clinic, Komfo Anokye Teaching Hospital	Global Blood Therapeutics Inc. 400 East Jamie Court, Suite 101 South San Francisco, CA 94080,USA	Group 1 and 2 under current protocol completed (none recruited in Ghana); yet to start Main Population Study (Group 3) 17 months	

75	BURULINOX Phase III 24th September 2018	Prof. Richard Odame Phillips	1.Kumasi Centre for Collaborative Research in Tropical Medicine 2.Agogo Presbyterian Hospital 3.Tepa Government Hospital 4.Dunkwa Government Hospital	Kumasi Center For Collaborative Research (KCCR)	Study not conducted(Delay in Commencement)	Buruli ulcer is a neglected disease caused by infection with Mycobacterium ulcerans (Mu), which manifests as large, disfiguring skin ulcers mainly in children aged 5 to 15 years. Access to treatment in rural areas can be challenging and late presentation is typical, due to fear, stigma, suspicion about conventional medicine and economic consequences for poor families. The current recommended regimen of oral rifampicin together with intramuscular streptomycin or clarithromycin for 8 weeks is far from ideal, particularly given the increasing global threat of antimicrobial resistance. Although the disease can be cured in most patients who adhere to this regimen, healing rates are highly variable even in patients with seemingly similar lesions. The purpose of the study is to compare the healing measured by the percentage area reduction of EDX110 dressing with oral rifampicin and clarithromycin (EDX-RC) versus 'Usual Care' with routine Vaseline gauze dressing and oral rifampicin and clarithromycin (VG-RC).
76	MEBENDAZOLE IV	Prof Michael David Wilson	Kintampo Health Research C	Program For Appropriate Technology In Health (PATH)	Application Withdrawn N/A	
77	EBOLA Z II	1.Dr. Kwaku Poku Asante 2.Prof. Kwadwo A Koram	1.Kintampo Health Research Centre 2.OCRC, Hohoe	GlaxoSmithKline Biologicals	Application withdrawn N/A	
78	EBOLA Z (Paediatric) II	Dr. Kwaku Poku Asante	OCRC, Hohoe	Glaxosmithkline Biologicals, Rue De L'institut, 89 – 1330 Rixensart, Belgium	Application withdrawn N/A	
79	ZEBOV I	Professor Fred Binka	OCRC, Hohoe	Crucell Holland B.V, Represented by Janssen Pharmaceutica (Pty) Ltd	Approved but sponsor withdrew conduct N/A	
80	ZEBOV 2 II	Professor Fred Binka	OCRC, Hohoe	Crucell Holland B.V, Represented by Janssen Pharmaceutica (Pty) Ltd	Application withdrawn N/A	
81	HYDRANON	Prof. David Ofori-Adjei	Noguchi Memorial Institute F	General Resonance Technology 1llc	Application Withdrawn N/A	
82	SALIF, IIIb	1. Dr. Isaac Osei 2. Dr. Samuel Abora 3. Dr. Fred Adomako – Boateng	Navrongo Health Research	Janssen-Cilag International NV (Sponsor) represented by CClinical Research Africa Ltd.	Application Withdrawn N/A	
83	NOGUCHI SCD Ib	Amma Twumwaa Owusu Ansah	1. Noguchi Memorial Institut	University of Pittsburg, Representative: Amma OwusueAnsah, MD	Application Withdrawn N/A	
84	TENOFOVEK BEI	1. Prof. Seth Owusu Agyei 2. Dr. Kwaku Poku Asante	Kintampo Health Research C	Danadams Pharmaceuticals Industry Limited, Accra-Ghana	Application closed by FDA since Sponsor failed to start study 3 years after approval.	
85	ELDON CARD NYN	Prof. Samuel Ameny Obed	Korle Bu Teaching Hospital,	Center for Global Child Health, Hospital for sick Children.	Incomplete CTA; Application closed by FDA. N/A	
86	AX-100 HIV I	Dr. Kwaku Poku Asante	Kintampo Health Research C	Neopharmacie Limited , Germany	Incomplete CTA; Application closed by FDA. N/A	
87	4P III	1. Dr. Emmanuel Kwabla Srofenyoh 2. Dr. Patrick Frimpong	Ridge Hospital Accra La Gen	Julius Centre for Health Sciences and Primary Care, University Medical Centre Utrecht, The Netherlands	Incomplete CTA; Application closed by FDA. N/A	
88	INVACT III	Prof. Kwadwo Ansah Koram	Noguchi Memorial Institute F	Global Emerging Infections Surveillance and Response System of the US Armed Forces Health Surveillance Center	Incomplete CTA; Application closed by FDA. N/A	
89	INSUGEN IV	N/A	Korle-Bu Teaching Hospital	BIOCON LTD	Incomplete CTA; Application closed by FDA. N/A	
		Dr. Luitgard Darko		Lagray Chemical Company, Ltd.		
90	MYCOPIROX_LAGRAY III				Not Approved N/A	

91	TADO III	Prof. Tsiri Agbenyega Dr. Catherine Idara Segbefia	Malaria Research Center, Ag	Eli Lilly and Company Indianapolis	Prematurely terminated 24 months		
92	WOMAN III	1. Dr. Anthony K. Dah 2. Dr.Opare Addo Henry Sakyi 3. Dr. Kwadwo Asamoah Nyarko-Jectey 4. Dr. Chris Opoku Fofie 5. Dr. Chris Bawa	1. Ashanti Mampong Municip	Clinical Trials Unit, London School of Hygiene and Tropical Medicine	Terminated by Sponsor Prematurely ended.		
93	NEOVITA III	Dr. Sam Newton	Kintampo Health Research C	PATH	Premature Termination 36 Months		
94	SAR97276A_SANOFI II	Prof. Seth Owusu-Agyei	Navrongo Health Research C	Sanofi Aventis Recherche & Developpement	Study Terminated in October 2009 N/A		

95	HESTIA4 Phase I 16th May, 2018	1. Dr. Patrick Ansah 2. Dr. Catherine Segbefia 3. Dr. Kokou Hefoume Amegan-Aho	1. Navrongo Health Researc	AstraZeneca AB	Study termination 31 Months	Complications of sickle cell disease (SCD) occur very early in life. Painful crises first appear in the fingers and toes (dactylitis) in very young children prior to their first birthday. In addition to painful crises occurring in the very young, SCD can affect organ function early in life. Loss of splenic function begins as early as 5 months of age with associated increase in infection risk. Stroke risk begins at age 2. Given the early onset of symptoms and complications of this disorder, therapies for SCD should be targeted at children, including the very young. There is a need to first establish the pharmacokinetics (PK) of ticagrelor in this age group to allow for modelling or extrapolation in this population. This goal of the study is to evaluate PK data in the 0-2 year old population in order to way for further studies and ultimately use of ticagrelor in this youngest population.	
96	CALLASCOPE*	Dr. Emmanuel Srofenyoh	Ridge Hospital, Korle-Bu Te	Duke Global Health Institute	Study ended, FDA DISSOCIATED itself from any data or findings from the study due to violation of its guidelines for conducting clinical trials. 3 months		
97	HOHOE ANTIMALARIAL III	Dr. Margaret Kweku	Hohoe Health Research Cen	Malaria Capacity Development Consortium (MCDC	FDA DISSOCIATED itself from any data or findings from the study due to violation of its guidelines for conducting clinical trials. 7 months		
98	YAWS III	Dr. Cynthia KwakyeMaclean	Ga West District	1. University of Ghana School of Public Health 2. World Health Organization 3. Ghana Health Service, Ga West District	Not Approved. FDA DISSOCIATES itself from any data or findings from the study due to violation of its guidelines for conducting clinical trials. N/A		
99	GMZ 2 II / III	Dr. Frank Atuguba	Navrongo Health Research C	Statens Serum Institute	FDA DISSOCIATED itself from any data or findings 27 onths		
100	CEREBETA	Mrs. Rose T. Odotei Adjei	Suntreso Government hospit	Best Environmental Technologies	FDA DISSOCIATED itself from any data Findings N/A		
101	AQUAMAT III	Prof. Tsiri Agbenyega	Komfo Anokye Teaching Ho	WORLD HEALTH ORGANIZATION	FDA DISSOCIATED itself from any data Findings		
102	AZI4YAWS III	Prof. Adu Sarkodie	1. Ayensuanor District 2. We	World Health Organization, Geneva - Switzerland	FDA DISSOCIATED itself from any data or findings from the study due to violation of its guidelines for conducting clinical trials. 12 months		