Multidisciplinary Association for Psychedelic Studies
3141 Stevens Creek Blvd. #40653
San Jose, CA 95117 USA
maps.org

MJP2 Quarterly Progress Report – Q4 2023 January 15, 2024

1. <u>% of completion and work done during project period:</u>

A) <u>% of Completion:</u>

MAPS has performed approximately 5-10% of the work initially proposed in the statement of work.

B) <u>Work Completed During Project Period - Clinical Hold Status Update:</u>

As previously described, MAPS conducted a successful Type A meeting with the FDA Division of Psychiatry on June 15, 2023. The official meeting minutes were provided by FDA on July 12, 2023 which reflected the increased alignment on the goal of the research program and the discussions during the meeting. However, the critical outstanding issues were in the scope of the Division of Pulmonology, Allergy, and Critical Care (DPACC) who did not attend the June 15th meeting. Instead, DPACC provided comments in a separate post-meeting communication on August 11, 2023. These comments reflected a lack of understanding between the differential risks of tobacco and marijuana smoking as well as between dried botanical vaporization and "e-cig" cartridge vaporization.

During this quarter MAPS developed an extensive formal response to the Clinical Hold. This in-depth response addresses and incorporates the various communications and discussions with the FDA. The response directly addresses the Clinical Hold Comments received from the FDA on December 16, 2022, as required by the regulations, and also takes into account the productive discussion with the FDA in the Type A meeting in June, the guidance and advice from the DPACC, and a thorough review of the relevant literature. MAPS addressed each point of scientific evidence provided by the FDA speaking to the strength and merit of this evidence and providing additional scientific and data driven research to support the proposed dosing and administration paradigms in the protocol. MAPS additionally consulted with several leading experts in the field who wrote letters of support to the FDA on behalf of this study program.

As part of the proposal to lift the clinical hold, MAPS made targeted revisions to the protocol to reduce the risk of the study to support clearance by the FDA. These changes included: emphasizing the research focus of the protocol, reduction of the maximum daily allotment of cannabis from 2.0 g to 1.5 g, as well as changes to the eligibility to only include participants who have previously or were considering using cannabis and to exclude participants who have a current or history of chronic obstructive pulmonary disease or asthma. These protocol changes reflect a significant effort to address the reasonable concerns of the FDA, while maintaining the critical real-world elements of the proposal that make this data collection meaningful.

MAPS formally submitted a Complete Response to the Clinical Hold to the FDA on November 30, 2023 which included this updated protocol and the supportive letters from the scientific leaders in

the field. The complete response and supporting letters as well as the FDA meeting minutes and the DPACC comments were all shared on the MAPS website in keeping with the mission of public benefit and transparency in our research. See here for all the submissions related to this program: https://maps.org/marijuana/mjp2/

On December 28, 2023, the FDA Informed MAPS that the Partial Clinical Hold placed on our Phase 2 Study of Cannabis for Veterans with PTSD (MJP2) would be continued. This clinical hold letter rejects the study of smoked marijuana and vaporized marijuana without addressing any of the substantive responses in the Complete Response to the clinical hold submitted by MAPS in November. Importantly, the letter does not indicate if FDA will consider scientific evidence to support the use of either smoking or vaporization in future cannabis clinical research. Due to the lack of substantive engagement from the Division of Psychiatry on the merits of the response, MAPS will appeal this decision to the Office of Neuroscience though a Formal Dispute Resolution Request (FDRR). This request will be based on both regulatory review standards and the scientific research cited by MAPS in the prior Complete Response which was not addressed by the Division of Psychiatry and will ask the overseeing Office of Neuroscience to review this evidence and the risk:benefit ratio of the proposed research.

2. Description of Problems and Delays:

MAPS continues to work to resolve the FDA clinical hold and continue trial activities.

3. Statement regarding any deviation from SOW:

The Statement of Work has been updated in response to the aforementioned regulatory delays and submitted to the VMR for review in the prior quarter. The current SOW reflects current study timelines, and there are no deviations to report.

4. Quarterly Financial Expenditures:

During this reporting period, MAPS has billed $24,020.39 in administrative support of the VMR program for administrative information systems and administrative personnel. VMR Program expense in Q4 totaled $87,427.77. Total expenditure to date equals 11% of the total contract value.

The following expenses are included during this reporting period that were incurred in prior quarters but erroneously omitted from previous reports:

- Ray Allen, General Counsel, provided administrative support during Q1 and Q2.
- Two invoices for regulatory affairs contracted services were incurred during Q3.