To: Gareth Maher-Edwards, Scientific Director, Global Health

CC: Simon Tiberi, Senior Clinical Development Director
Sophie Penman, Clinical Development Director
Elena Fernandez Alvaro, Director, Global Health Access Strategy
David Barros, Head of TB Discovery Performance Unit

GlaxoSmithKline
79 New Oxford Street
London
United Kingdom
WC1A 1DG

28 July 2025

Open Letter: Urgent Appeal to Establish Compassionate Use / Pre-Approval Access Program for Ganfeborole (GSK-656)

Dear Mr. Maher-Edwards and colleagues,

We commend GlaxoSmithKline's commitment to tuberculosis (TB) research and development and community engagement. As members of the Global TB Community Advisory Board (TB CAB) and research-literate, community activists committed to supporting the development of and access to new technologies and interventions capable of improving TB diagnosis, prevention, and treatment, we understand the critical importance of new drugs like ganfeborole to address drug-resistant TB (DR-TB). We write to encourage GSK to establish a compassionate use / pre-approval access program for ganfeborole.

As we learned from the development and introduction of bedaquiline, delamanid, and pretomanid, pre-approval access to investigational drugs is crucial for people with extensively drug-resistant TB (XDR-TB) and other complicated forms of resistance, as it provides potentially life-saving treatment to individuals in situations of unmet medical need. Pre-approval access programs can also generate valuable data to inform broader use among populations who might otherwise be excluded from clinical trials.

A coalition of front-line clinical providers, civil society organizations, and impacted community members, including members of the TB CAB, have come together under the banner of the BETTER (Building Expertise Treating TB with Expanded Resistance) Project to highlight the dire need for pre-approval access to novel compounds like ganfeborole for individuals with limited treatment options due to XDR-TB. The BETTER Project has published a best practice

field guide to inform treatment and care of people with XDR-TB, established a set of principles for equitable and ethical pre-approval access/compassionate use programs, and proposed two scenarios under which compassionate use access to new drugs like ganfeborole would be deemed appropriate:

1. People with strains of TB that have resistance patterns for which an injectable agent is needed to construct an adequate four-drug regimen and in whom ganfeborole would be given in place of the injectable; and
2. People with strains of TB that have resistance patterns for which ganfeborole is needed to construct an adequate four-drug regimen.

These individuals face life-threatening gaps in treatment and exposure to 18-to-20-months of treatment with toxic medications, several of which are delivered by injection or IV requiring prolonged hospitalization. In scenario 1, ganfeborole would be given instead of an injectable or IV agent and in scenario 2, ganfeborole would be given alongside the injectable and/or IV agent(s). In both scenarios, depending on availability, potential for drug-drug interactions, and other considerations, ganfeborole might be given alongside other investigational medicines. Some of the individuals that meet the criteria for these scenarios may be eligible for clinical trials focused on XDR-TB that are under discussion now, however, geographic and other factors that limit clinical trial access and participation, and lengthy timelines for when such trials would be open to enrollment underscore the importance of establishing a compassionate use program in parallel to randomized controlled trials necessary to optimize treatment duration and composition for XDR-TB.

As phase 2b studies of ganfeborole are underway, now is the time to plan for compassionate use / pre-approval access.[1] There were many important lessons learned from the process of setting up and implementing the pre-approval access programs for bedaquiline, delamanid, and pretomanid that can inform GSK's efforts to establish a mechanism for pre-approval access to ganfeborole.[2] The TB CAB and others, including the BETTER Project and Médecins Sans Frontières, stand ready to support GSK to navigate lessons learned to design and implement such a program for ganfeborole. The TB CAB is also monitoring the pipeline of new TB compounds and similar correspondences are being sent out to other drug sponsors with compounds in phase 2 development.[3]

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[1] ClinicalTrials.gov [Internet]. Bethesda (MD): National Library of Medicine (US). Identifier NCT06114628, Platform Assessing Regimens and Durations In a Global Multisite Consortium for TB (PARADIGM4TB); 2023 Nov 02 [cited 2025 Jul 22]. Available from: https://clinicaltrials.gov/study/NCT06114628.

[2] Stillo J, Frick M, Galarza J, et al. Addressing the needs of people with extensively drug-resistant TB through pre-approval access to drugs and research. Public Health Action. 2023 Dec;13(4):126-129. doi: 10.5588/pha.23.0033.

[3] Global Tuberculosis Community Advisory Board (TB CAB). Request for information and urgent appeal to accelerate compassionate use access to quabodepistat. 2025 Apr 30. Available from: https://globaltbcab.org/open-letter/request-for-information-and-urgent-appeal-to-accelerate-compassionate-use-access-to-quabodepistat/.

By 11th August 2025, we kindly request a response in writing, including your availability to meet to discuss this important topic further. We are especially interested in: (1) your reaction to the two aforementioned scenarios under which the BETTER Project and TB CAB propose compassionate use access to new drugs like ganfeborole would be deemed appropriate; (2) whether there have been any discussions held within the company about this already; and (3) any advocacy the TB CAB can do to support the establishment of a pre-approval access program for ganfeborole for people with XDR-TB and unmet medical need.

Sincerely,

Ani Herna Sari
Chair

Oxana Ruscineanu
Co-Chair

On behalf of the Global TB Community Advisory Board