Congress of the United States
House of Representatives
SELECT COMMITTEE ON CHINA

June 29, 2026

Robert A. Michael
Chairman of the Board and Chief Executive Officer
AbbVie, Inc.
1 N. Waukegan Road
North Chicago, Illinois 60064

Dear Mr. Michael,

The United States is engaged in a fierce biotechnology competition with the People's Republic of China (PRC). This competition has implications for our national and economic security as well as for the future of healthcare and the security of American medical data. In its 15th Five-Year Plan issued in March 2026, the Chinese Communist Party (CCP) refined its plan to target biotechnology breakthroughs as a national priority.[1] This plan also calls for tighter biological data regulations, and for Chinese firms to maximize the use of artificial intelligence (AI) across the biotechnology sector, recognizing data as a strategic asset.[2] This is significant because the U.S. Congress, through its passage of the BIOSECURE Act, has also identified biotechnology as a key sector in economic and national security competition with China. We now have two systems racing to gain an edge in this critical technology.

At the heart of this biotechnology competition is China's clinical trial system. Through a combination of regulatory reforms, state subsidies, and (at best) questionable ethics, China has transformed itself into the cheapest and fastest place in the world to run early-stage human drug trials. First-in-human data remains the currency of the biotechnology sector—whoever gets it fastest de-risks their investment and can move to larger clinical trials.

Patient enrollment at Chinese clinical trial sites is two to five times faster than in the United States.[3] This is due to several factors, including large potential patient populations concentrated around large hospitals in China. The speed of China's patient enrollment may also be accelerated by its lack of ethical safeguards surrounding informed consent and voluntary participation, according to U.S. biotechnology company executives.[4] Research studies of informed consent in

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[1] Melanie Hart, Caroline Costello, and Samantha Wong, "Five Takeaways for US Policymakers about China's New Five-Year Development Plan," *Atlantic Council*, March 31, 2026, https://www.atlanticcouncil.org/dispatches/five-takeaways-for-us-policymakers-about-chinas-new-five-year-development-plan/; "China's 15th Five-Year Plan: Full English Translation," *Mandarin Peel* (Substack), March 26, 2026, https://mandarinpeel.substack.com/p/chinas-15th-five-year-plan-full-english.

[2] Hart, Costello, and Wong, "Five Takeaways for US Policymakers."

[3] Anirudh Roy Popli, Fangning Zhang & Jay Park, *The Emerging Epicenter: Asia's Role in Biopharma's Future*, McKinsey & Co. (Jan. 7, 2026), https://www.mckinsey.com/industries/life-sciences/our-insights/the-emerging-epicenter-asias-role-in-biopharmas-future.

[4] Documentation on file with the Select Committee.

Chinese trials have corroborated these concerns.[5] These factors have enabled China to surpass the United States in the number of registered clinical trials conducted in the country.[6]

In that light, I write to you regarding AbbVie's conduct of clinical trials in China, where it appears to have sponsored or collaborated on more than 100 clinical studies since 2007, including at sites in Xinjiang, China, and at medical centers and hospitals affiliated with the PRC military, according to publicly available information at https://clinicaltrials.gov and https://ChinaDrugTrials.org.cn. Xinjiang is the epicenter of the CCP's genocide targeting Uyghurs and other ethnic and religious minorities. Specifically, between 2015 and 2025, the Select Committee identified AbbVie as having participated in:

- At least 17 trials that included hospitals in Xinjiang, China, with several that are still ongoing—the most recent of which began in January 2025; and

- At least 16 trials that included PRC military medical centers and hospitals, with several that are still ongoing—the most recent of which began in February 2025.[7]

Additional details on these trials, which are not to be considered exhaustive, are included in the attachment at the end of this letter. These data also do not include any early-stage clinical trials conducted by Chinese biotechnology companies for drug prospects that were later licensed by AbbVie, such as through its recent partnership with Chinese drugmaker RemeGen, worth up to $5.6 billion.[8]

U.S. regulations require that clinical investigators in the United States obtain legally effective informed consent of human clinical trial subjects; seek consent only under circumstances that minimize the possibility of coercion or undue influence; and that information provided to the subjects be in a language that is understandable to the subject, among other requirements.[9] While China has laws requiring informed consent in clinical trials, Chinese researchers have documented significant issues with obtaining informed consent in practice. For instance, a 2023 survey of findings from research of informed consent in Chinese cancer clinical trials found that:

- 91.2% of surveyed participants mistook clinical trials as the standard-of-care treatment;

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[5] For example, Xing Liu et al., *Informed Consent in Cancer Clinical Drug Trials in China: A Narrative Literature Review of the Past 20 Years*, 24 Trials 445 (2023), https://doi.org/10.1186/s13063-023-07482-y; Ping Wen et al., *Research on Issues in the Protection of Clinical Trial Human Subjects in China: A Delphi Study*, 26 BMC Med. Ethics 161 (2025), https://doi.org/10.1186/s12910-025-01302-5; Jing-Bao Nie, *The Harms of Family-Oriented Informed Consent in Clinical Practice in Two Megacities in Northern China: A Sociological and Ethical Study*, Asian Bioethics Rev. (Nov. 15, 2025), https://doi.org/10.1007/s41649-025-00373-1.

[6] One study examining clinical trial data across multiple trial registries showed that the number of trials run in China in 2014 was only 1,826—far lower that the U.S. leading 7,268 trials. In 2023, the number of trials in China had grown to 11,268, far surpassing the U.S. number of 7,569. Till Bruckner, "New Study Shows That China Is Now a Global Powerhouse of Clinical Research," *TransparIMED*, May 26, 2025, https://www.transparimed.org/single-post/new-study-shows-that-china-is-now-a-global-powerhouse-of-clinical-research.

[7] Select Committee analysis of data from *ClinicalTrials.gov*, U.S. National Library of Medicine, https://clinicaltrials.gov/ (last visited June 3, 2026) and Nat'l Medical Prods. Admin., *Drug Clinical Trial Registration and Information Disclosure Platform*, https://www.chinadrugtrials.org.cn/index.html (last visited June 3, 2026).

[8] According to public reporting, AbbVie paid $650 million upfront for the ex-China rights to RemeGen's RC 148 tumor treatment, with the potential for up to $4.95 billion in future payments based on development, regulatory, and commercial milestones. James Waldron, *AbbVie Pens $5.6B Pact with RemeGen to Join PD-1xVEGF Race*, FierceBiotech (Jan. 12, 2026), https://www.fiercebiotech.com/biotech/abbvie-pens-56b-pact-remegen-join-pd1xvegf-bispecific-battle.

[9] 21 C.F.R. pt. 50 (2024)

- 55.9% of surveyed participants said their doctors did not offer any alternatives besides treatment in a clinical trial while 41.2% were unsure whether they had been offered alternative treatments;
- More than 70% of surveyed participants in cancer drug trials believed that treatment regimens studied in the trial were proven to be the best;
- 80% of surveyed participants mistakenly believed that drugs in clinical trials would not cause severe side effects; and
- Undue influence was observed in clinical trials and investigators were prone to tendentious explanations of trials, including understating potential toxic effects and overstating efficacy of trial protocols.[10]

These, and other, findings indicate the need for heightened due diligence by American companies conducting clinical trials in China to ensure that their trials are complying with Good Clinical Practice and are not profiting from a system that is failing to protect the rights of participants.[11]

Regarding AbbVie's clinical trials conducted in Xinjiang, more specifically, the Uyghur Forced Labor Prevention Act (UFLPA) was passed by Congress and enacted in December 2021 to prevent goods made with forced labor in the Xinjiang Uyghur Autonomous Region (XUAR) of China from entering the United States.[12] Congress passed this law because it found credible evidence that the government of the PRC has been pursuing a deliberate and systematic program of state-imposed forced labor in region, specifically targeting the Uyghur people and other minorities in the region. It creates the rebuttable assumption that goods mined, produced, or manufactured wholly or in part in the XUAR are made with forced labor and are therefore prohibited from importation into the United States. This rebuttable assumption exists because of the extreme difficulty involved in conducting credible independent audits or investigations at sites in Xinjiang.

While the UFLPA does not specifically address the conduct of clinical trials in the region, it reflects best practices given the ethical risks of operating there and the necessity for U.S. companies to conduct due diligence regarding their supply chains to ensure they are free of forced labor. While not part of a supply chain for physical goods, clinical trials are a critical part of the drug discovery pipeline—an intellectual supply chain, where human clinical trial subjects are a foundational input. In addition to evidence of widespread forced labor and oppression in Xinjiang, there have been numerous credible investigations that have documented forced medical testing, procedures, medications, and biodata collections on Uyghurs and other oppressed minorities in Xinjiang.[13] Given what we know about the human rights abuses and oppression in

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[10] Xing Liu et al., *Informed Consent in Cancer Clinical Drug Trials in China: A Narrative Literature Review of the Past 20 Years*, 24 Trials 445 (2023), https://doi.org/10.1186/s13063-023-07482-y

[11] Good Clinical Practice is an international ethical and scientific standard that ensures the safety, rights, and well-being of clinical trial participants while guaranteeing the credibility and reliability of trial data.

[12] Uyghur Forced Labor Prevention Act, Public Law 117-78, 135 Stat. 1525 (2021), https://www.congress.gov/bill/117th-congress/senate-bill/65/text.

[13] Human Rights Watch, "China: Minority Region Collects DNA from Millions," December 13, 2017, https://www.hrw.org/news/2017/12/13/china-minority-region-collects-dna-millions; Emile Dirks and James Leibold, *Genomic Surveillance: Inside China's DNA Dragnet*, Australian Strategic Policy Institute, Policy Brief Report No. 34/2020, June 2020, https://www.aspi.org.au/report/genomic-surveillance/; Dake Kang et al., "China Cuts Uighur Births with IUDs, Abortion, Sterilization," Associated Press, June 29, 2020, republished by *PBS NewsHour*, https://www.pbs.org/newshour/world/ap-report-china-stifling-uighur-births-with-iuds-abortion-sterilization; Office of the United Nations High Commissioner for Human Rights, *OHCHR Assessment of Human Rights Concerns in the Xinjiang Uyghur Autonomous Region, People's Republic of China*, August 31, 2022,

Xinjiang, it is reasonable to question whether clinical trial subjects there are participating voluntarily and with informed consent—indispensable principles of good clinical practice.

AbbVie's clinical trials held at PRC military hospitals raise significant questions related to how data developed through clinical trials at those hospitals could fuel the CCP's military biotechnology research, experimentation, and capability development. Clinical trials involve collaborative research activities with doctors, nurses, and other officials at the trial sites and produce sensitive and proprietary data. Conducting this research at PRC military hospitals puts the cutting-edge, biotechnology Intellectual Property (IP) of American companies at potential risk of being transferred to the Chinese military. Make no mistake, acquiring this knowledge is a high priority for the CCP, as its latest Five-Year Plan makes clear. As evidence of the vulnerability of medical data, the U.S. Department of Commerce has listed the People's Liberation Army (PLA) Academy of Military Medical Sciences on its entity list, due to recognition that biotechnology research can be used to support Chinese military end uses, including development of potential dual-use technologies.[14]

While there is no evidence that AbbVie has engaged in illegal activity or wrongdoing, conducting clinical trials in China, and in Xinjiang and PRC military hospitals more specifically, exposes American companies to ethical and security risks—some of which even the most robust due diligence may not be sufficient to mitigate.

I request that AbbVie provides the following information by July 17, 2026.

1. A detailed briefing and information on AbbVie's due diligence processes to ensure Good Clinical Practice standards at its clinical trial sites in China broadly, and in Xinjiang and at PRC military hospitals more specifically.

2. Company policies, regulations, strategies, guidance documents, and other communications that outline or govern AbbVie's Good Clinical Practice standards for the conduct of clinical trials generally, and more specifically, in China, at PRC military hospitals, and in Xinjiang.

3. Data and/or information sufficient to show the number and frequency of AbbVie's inspections of its clinical trial sites in China, and efforts to ensure the validity of such inspections (e.g., use of company translators).

4. Any internal analyses, risk assessments, or other similar research products that AbbVie has conducted or sponsored regarding clinical trials in China, in Xinjiang, or at PRC military hospitals.

5. Data sufficient to show the number of clinical trials that AbbVie has conducted in China since January 1, 2015, by trial and site, and any Contract Research Organization (CRO)

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https://www.ohchr.org/sites/default/files/documents/countries/2022-08-31/22-08-31-final-assesment.pdf; U.S. Department of State, *2023 Country Reports on Human Rights Practices: China*, https://www.state.gov/report/custom/cffccc34d2/.

[14] "Supplement No. 4 to Part 744: Entity List," *Electronic Code of Federal Regulations*, Title 15, Subtitle B, Chapter VII, Subchapter C, Part 744, U.S. Department of Commerce, Bureau of Industry and Security, accessed May 7, 2026, https://www.ecfr.gov/current/title-15/subtitle-B/chapter-VII/subchapter-C/part-744/appendix-Supplement%20No.%204%20to%20Part%20744.

or Contract Development Manufacturing Organization (CDMO) that AbbVie engaged to set up, manage, facilitate, or produce materials for any such trial.

6. Data sufficient to show the number of clinical trials that AbbVie has conducted at PRC military hospitals since January 1, 2015, by trial and site, and including any CRO and CDMO that AbbVie engaged to set up, manage, facilitate, or produce materials for any such trial.

7. Data sufficient to show the number of clinical trials that AbbVie has conducted at hospitals in Xinjiang since January 1, 2015, by trial and site, and including any CRO and CDMO that AbbVie engaged to set up, manage, facilitate, or produce materials for any such trial.

8. Information about AbbVie's due diligence processes to ensure the protection of its intellectual property and other sensitive data at clinical trial and manufacturing sites in China broadly, and in Xinjiang and at PRC military hospitals more specifically, including how data is stored and how the company navigates China's data transfer laws.

9. All agreements since January 1, 2020 between Chinese companies and AbbVie related to licensing, equity, or joint ventures. Data sufficient to show the locations of clinical trials conducted prior to AbbVie's acquisition; and AbbVie's due diligence processes regarding the conduct of such clinical trials.

I look forward to constructive engagement with AbbVie on this important topic affecting U.S. national security and the health of American citizens.

Sincerely,

John Moolenaar
Chairman, Select Committee on the CCP

Enclosure: AbbVie Clinical Trials at Military and Xinjiang Facilities

AbbVie — Clinical Trials at PLA/Military and Xinjiang Facilities

Trial Title	Facility	Start Date	Drugs
A Phase 3, Multicenter, Randomized, Double-Blind, Placebo-Controlled Study With an Open-Label Extension to Evaluate the Efficacy, Safety, and Tolerability of Atogepant for the Preventive Treatment of Menstrual Migraine (NCT06806293)	Chinese PLA General Hospital	Feb. 2025	Atogepant, Placebo for Atogepant
A Phase 2, Open-Label, Randomized, Global Study of Three Telisotuzumab Vedotin Regimens in Subjects With Previously Treated c-Met Overexpressing, EGFR Wildtype, Locally Advanced/Metastatic Non-Squamous Non-Small Cell Lung Cancer (NCT06568939)	Cancer Hospital Affiliated to Xinjiang Medical University	Jan. 2025	Telisotuzumab Vedotin
A Two-year Non-interventional, Real-world, Observational Study to Assess Safety of OZURDEX® (Dexamethasone Intravitreal Implant) in Patients With Diabetic Macular Edema in China (NCT06548568)	General Hospital of Central Theater Command	Nov. 2024	Dexamethasone LA
A Study Assessing Adverse Events and Disease Activity when Comparing Intravenously (IV) Infused ABBV-400 to Trifluridine and Tipiracil (LONSURF) Oral Tablets Plus IV Infused Bevacizumab in Adult Participants with C-met Protein above Cutoff Level above Refractory Metastatic Colorectal Cancer (CTR20253836)	Cancer Hospital of Xinjiang Medical University, Urumqi	Nov. 2024	Bevacizumab, telisotuzumab adizutecan, (tipiracil hydrochloride + trifluridine)
REal-world Utilization and Treatment Target ACHievement With Upadacitinib in Adolescents and Adults With Moderate to Severe Atopic Dermatitis in China (NCT06421740)	People's Hospital of Xinjiang Uygur Autonomous Region	Jun. 2024	Upadacitinib ER
Randomized, Double-blind, Placebo-Controlled, Multiple-Attack Study With an Open-Label Extension to Evaluate the Efficacy, Safety, Tolerability, and the Consistency of Effect of Atogepant for the Acute Treatment of Migraine (ECLIPSE) (NCT06241313)	Chinese PLA General Hospital General Hospital of Northern Theater Command	Mar. 2024	Atogepant, Placebo for Atogepant
A Phase 3, Multi-center, Randomized, Double-Blinded, Placebo-Controlled Study to Evaluate the Safety and Efficacy of BOTOX® (Botulinum Toxin Type A) Purified Neurotoxin Complex for the Treatment of Moderate to Severe Forehead Lines in China (NCT06174688)	Tangdu Hospital of The Fourth Military Medical University, PLA	Dec. 2023	BOTOX, Placebo
SELECT-SLE: A Phase 3 Program to Evaluate the Safety and Efficacy of	People's Hospital of Xinjiang Uygur Autonomous Region	Jul. 2023	Upadacitinib, Placebo

Trial Title	Facility	Start Date	Drugs
Upadacitinib in Subjects With Moderately to Severely Active SLE (NCT05843643)			
Randomized, Multicenter, Open-label, Phase 3 Study of Mirvetuximab Soravtansine in Combination With Bevacizumab Versus Bevacizumab Alone as Maintenance Therapy for Patients With FRα-high Recurrent Platinum-sensitive Epithelial Ovarian, Fallopian Tube, or Primary Peritoneal Cancers Who Have Not Progressed After Second Line Platinum-based Chemotherapy Plus Bevacizumab (NCT05445778)	Cancer Hospital Affiliated to Xinjiang Medical University	Mar. 2023	Mirvetuximab soravtansine plus Bevacizumab, Bevacizumab
A Phase 3 Open-Label, Randomized, Controlled, Global Study of Telisotuzumab Vedotin (ABBV-399) Versus Docetaxel in Subjects With Previously Treated c-Met Overexpressing, EGFR Wildtype, Locally Advanced/Metastatic Non-Squamous Non-Small Cell Lung Cancer (NCT04928846)	The Affiliated Cancer Hospital of Xinjiang Medical University	Mar. 2022	Telisotuzumab Vedotin, Docetaxel
A Study of the Safety of Oral Elsubrutinib Capsules and Oral Upadacitinib Tablets Given Alone or in Combination (ABBV-599) for Adult Participants with Moderately to Severely Active Systemic Lupus Erythematosus to Assess Change in Disease State (CTR20210600)	People's Hospital of Xinjiang Uygur Autonomous Region, Urumqi	Jul. 2020	(Elsubrutinib + upadacitinib), upadacitinib ER, elsubrutinib
Multicenter, Phase 3 Study of Venetoclax and Azacitidine as Maintenance Therapy for Patients With Acute Myeloid Leukemia in First Remission After Conventional Chemotherapy (NCT04102020)	Tangdu Hospital of The Fourth Military Medical University, PLA Chinese PLA General Hospital	Mar. 2020	Venetoclax, Azacitidine
A Randomized, Open Label Phase 3 Study Evaluating Safety and Efficacy of Venetoclax in Combination With Azacitidine After Allogeneic Stem Cell Transplantation in Subjects With Acute Myeloid Leukemia (AML) (VIALE-T) (NCT04161885)	Tangdu Hospital of The Fourth Military Medical University, PLA Chinese PLA General Hospital	Feb. 2020	Venetoclax, Azacitidine, Best Supportive Care (BSC)
A Study to Evaluate Efficacy and Safety of Upadacitinib in Adults with Axial Spondyloarthritis (SELECT-AXIS 2) (CTR20200194)	People's Hospital of Xinjiang Uygur Autonomous Region, Urumqi	Nov. 2019	Upadacitinib tartrate ER
BOTOX® (onabotulinumtoxinA) Treatment of Masseter Muscle Prominence: A Phase 3, Multicenter, Randomized, Double-Blind, Placebo-Controlled Study (NCT04073303)	Chinese PLA General Hospital Tangdu Hospital of The Fourth Military Medical University, PLA	Aug. 2019	Botulinum Toxin Type A, Placebo
A Study to Investigate the Safety and Efficacy of Elsubrutinib and Upadacitinib Given Alone or in Combination in Participants With Moderately to Severely	People's Hospital of Xinjiang Uygur Autonomous Region, Urumqi	Jul. 2019	(Elsubrutinib + upadacitinib), upadacitinib tartrate ER, elsubrutinib

Trial Title	Facility	Start Date	Drugs
Active Systemic Lupus Erythematosus (SLE) (SLEek) (CTR20192719)			
Study of Telisotuzumab Vedotin (ABBV-399) in Participants with Previously Treated c-Met+ Non-Small Cell Lung Cancer (CTR20190277)	Cancer Hospital of Xinjiang Medical University, Urumqi	Oct. 2018	Telisotuzumab vedotin
A Multicenter, Randomized, Double-Blind, Placebo Controlled 52-Week Maintenance and an Open-Label Extension Study of the Efficacy and Safety of Risankizumab in Subjects With Ulcerative Colitis (NCT03398135)	Tangdu Hospital of The Fourth Military Medical University, PLA	Aug. 2018	Risankizumab, placebo for risankizumab
A Phase 3 Randomized, Placebo-Controlled, Double-Blind Study to Evaluate Upadacitinib in Combination With Topical Corticosteroids in Adolescent and Adult Subjects With Moderate to Severe Atopic Dermatitis (NCT03568318)	Chinese PLA General Hospital	Aug. 2018	Placebo, Upadacitinib, Topical corticosteroids (TCS)
A Multicenter, Randomized, Double-Blind, Placebo Controlled Induction Study to Evaluate the Efficacy and Safety of Risankizumab in Subjects With Moderately to Severely Active Ulcerative Colitis (NCT03398148)	Tangdu Hospital of The Fourth Military Medical University, PLA	Mar. 2018	Risankizumab IV, placebo for risankizumab, risankizumab SC
A Study with Upadacitinib (ABT-494) in Subjects from China and Selected Countries with Moderately to Severely Active Rheumatoid Arthritis who have had an Inadequate Response to Conventional Synthetic Disease-modifying Anti-rheumatic Drugs (csDMARDs) (CTR20170970)	People's Hospital of Xinjiang Uygur Autonomous Region, Urumqi	Jan. 2018	Upadacitinib ER
A Randomized, Double-Blind, Placebo-Controlled, Multicenter Study to Evaluate the Efficacy and Safety of ABT-493/ABT-530 in Treatment-Naïve and Treatment-Experienced, Non-Cirrhotic Asian Adults With Chronic Hepatitis C Virus Genotype (GT) 1 to GT6 Infection With or Without Human Immunodeficiency Virus Co-Infection (NCT03222583)	Fourth Military Medical University Tangdu Hospital, PLA Chinese People's Liberation Army 81 Hospital 1st Affiliated Hospital of Xinjiang Medical University	Oct. 2017	Placebo, Glecaprevir/Pibrentasvir
An Open-Label Study to Evaluate the Efficacy and Safety of ABT-493/ABT-530 in Treatment-Naïve and Treatment-Experienced Asian Adults With Chronic Hepatitis C Virus Genotype (GT) 1 to GT6 Infection With Compensated Cirrhosis and With or Without Human Immunodeficiency Virus Co-Infection (NCT03235349)	Chinese People's Liberation Army 81 Hospital Fourth Military Medical University Tangdu Hospital, PLA	Sep. 2017	Glecaprevir/Pibrentasvir
Postmarketing Observational Study to Evaluate the Effectiveness and Patient-Reported Outcome of Adalimumab in	Traditional Chinese Medical Hospital of Xinjiang Uygur Autonomous Region	Sep. 2017	Adalimumab

Trial Title	Facility	Start Date	Drugs
Patients With Moderate to Severe Plaque Psoriasis in China (NCT03236870)			
A Phase 3, Randomized, Double-Blind, Study Comparing Upadacitinib (ABT-494) to Placebo and to Adalimumab in Subjects With Active Psoriatic Arthritis Who Have a History of Inadequate Response to at Least One Non-Biologic Disease Modifying Anti-Rheumatic Drug (DMARD) - SELECT-PsA 1 (NCT03104400)	People's Hospital of Xinjiang	Apr. 2017	Adalimumab, Upadacitinib, Placebo to Upadacitinib, Placebo to Adalimumab
Study Comparing Rovalpituzumab Tesirine versus Topotecan in Subjects with Advanced or Metastatic Small Cell Lung Cancer with High Levels of Delta-like Protein 3 (DLL3) and Who Have First Disease Progression During or Following Front-line Platinum-based Chemotherapy (TAHOE) (CTR20181228)	Fourth Military Medical University, Xi'an Cancer Hospital of Xinjiang Medical University, Urumqi	Apr. 2017	Topotecan, dexamethasone, rovalpituzumab tesirine
A Randomized, Double-Blind, Placebo-Controlled Phase 3 Study of Rovalpituzumab Tesirine as Maintenance Therapy Following First-Line Platinum-Based Chemotherapy in Subjects With Extensive Stage Small Cell Lung Cancer (MERU) (NCT03033511)	4th Military Medical University The Affiliated Cancer Hospital of Xinjiang Medical University	Feb. 2017	Placebo for dexamethasone, Placebo for rovalpituzumab tesirine, Rovalpituzumab tesirine, Dexamethasone
Efficacy and Safety of Glecaprevir (ABT-493)/Pibrentasvir (ABT-530) (GLE/PIB) in Combination With Sofosbuvir and Ribavirin in Participants With Hepatitis C Virus Who Did Not Respond to Treatment in a Previous AbbVie Clinical Study (MAGELLAN-3) (CTR20201304)	Army Military Medical University First Affiliated Hospital, Chongqing	Nov. 2016	Sofosbuvir, ribavirin, (glecaprevir + pibrentasvir)
ABT-450/Ritonavir/ABT-267 (ABT-450/r/ABT-267) and ABT-333 in Treatment-naïve and Treatment-experienced, Non-cirrhotic Asian Adults with Subgenotype 1b Chronic Hepatitis C Virus (HCV) Infection (CTR20150588)	Third Military Medical University Hospital One, Chongqing Military Hospital 302, Beijing Fourth Military Medical University, Xi'an PLA Hospital 81, Nanjing The First Affiliated Hospital of Xinjiang Medical University, Urumqi	Jul. 2015	(Ombitasvir + paritaprevir + ritonavir), dasabuvir