CURRICULUM VITAE

INVESTIGATOR NAME: Alejandro Ferro
INVESTIGATOR NACIONALITY: Argentine
DATE OF BIRTH: 19 May 1954
LICENSE NUMBER: **Prov:** 92.071 **Nac.:** 57.755
STUDY LOCATION ADDRESS: Centro de Investigaciones Médicas. Mar del Plata
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EDUCATION: List Colleges/ Universities attended with dates and degrees obtained
1980 Universidad Nacional de Buenos Aires
Degree: Medical Doctor

POSGRADE: Speciality, dates, institution´s name

1989 – Internal Medicine Specialist. Colegio de Médicos de la Provincia de Bs.As.
1994 – Infectology Specialist. Colegio de Médicos de la provincia de Bs.As
1999 – Infectology Specialist. Colegio de Médicos de la provincia de Bs.As.
2004 – Infectology Senior Specialist. Colegio de Médicos de la provincia de Bs.As.
2009 – Infectious diseases consultant physician. Colegio de Médicos de la provincia de Bs.As.
-Training Certificated Of Good Clinical Practice (GCP). NIDA Clinical Trials Network, 11 february 2021

PROFESSIONAL EXPERIENCE:

Board certification/ Name of board:
1994 – Infectology Specialist. Colegio de Médicos de la provincia de Bs.As

Previous appointments:
2007-2013 Secretary of Health. Municipio de Gral. Pueyrredón.
2006-2007 Infectology Service Coordinato. Clínica Colón.
2001-2007 Infection control assessor. Clínica Colón.
1991-2007 Staff Physician in the Infectology Unit. Hospital Interzonal.
1989-1991 Interim Physician in Infectology Unit. Hospital Interzonal.
1985-1987 Attending Physician in Internal Medicine Service. Hospital Interzonal General de Agudos de Mar del Plata En el Servicio de Clínica Médica.
1984-1986 Physician I. Instituto Rómulo Etcheverry.

Present appointments

2020-Present General Practitioner. Centro de Investigaciones Médicas Mar del Plata.
2020-Present Infectology Department Coordinator. Centro de Investigaciones Médicas Mar del Plata.
2003-Present General Practitioner, Manager of infectology area and cofounder. Consultants "medicina de excelencia".

COURSES

Mar2014 Course in Good Clinical Practice. Novartis.
Nov2016 Training in Good Clinical Practice. FEFYM.
Aug2017 Training in Ethics in Clinical Research. Dr. Ignacio Maglio
Sep2018 Training in Ethics and Good Clinical Practice (80-hour duration). Ministerio de Salud de la Nación

PROFESSIONAL EXPERIENCE IN CLINICAL INVESTIGATION

-Phase II, randomized, double-blind study of ziracin in the treatment of moderate to severe acute bacterial pneumonia due to S pneumoniae. Schering plow-research, 1998.
• Evaluation of the safety and antiviral efficacy of a new HIV-1 protease inhibitor, bms-232632, alone and in combination with stavudine and didanosine, versus the reference combination regimen. Bristol myers squibb co., 2000-
•ABT-378/r early access program. Abbott Laboratories, 2000-
•Study to evaluate the long-term antiviral activity, safety and tolerability of bms-232632 administered in combination regimens in hiv-infected patients who have completed their participation in clinical studies of bms-232632. Bristol myers squibb co., 2001-
•International, open, randomized, phase III study of recombinant subcutaneous interleukin-2 (IL-2) (proleukin) carried out in patients with hiv-1 and a cd4+ cell count of > 300/mm. Evaluation of subcutaneous proleukin in an international randomized trial (ESPRIT). Chiron corporation, 2001-
•Phase III, randomized, double-blind, multicenter, comparative study of intravenous bms-284756, followed by oral bms-284756 versus intravenous levofloxacin followed by oral levofloxacin, in the treatment of community-acquired pneumonia requiring hospitalization. Bristol Myers Squibb co., 2001-
•Randomized, double-blind equivalence study comparing emtricitabine t and stavudine within a triple drug combination containing didanosine and efavirenz in HIV-1 infected patients naïve of antiretroviral treatment. Trianglepharmaceuticals, 2001.
-Randomized, double-blind, multicenter, comparative study of bms 284756 administered intravenously followed by bms-284756 administered orally, versus piperacillin/azobactam administered intravenously followed by amoxicillin/clavulanate administered orally, in the treatment of infections Complicated intra-abdominal Bristol Myers Squibb co., 2002-
•Phase III, randomized, double-blind, placebo overload, non-inferiority study on the safety and efficacy of intravenous anidulafungin (ver002) vs. Oral fluconazole in the treatment of patients with esophageal candidiasis- Versicor, 2002.
•Population pharmacokinetic study conducted with consenting patients included in protocol ver002-4: Phase III, randomized, double-blind, placebo overload, non-inferiority study on the safety and efficacy of intravenous anidulafungin (ver002) vs. Oral fluconazole in the treatment of patients with esophageal candidiasis- Versicor, 2002
•Phase IIIb open-label, randomized, multicenter study to assess the effect on serum lipids of a switch to protease inhibitor (PI) xxxxxx, in hiv-1 infected patients showing virologic suppression on their first antiretroviral therapy containing ip Bristol Myers Squibb Co., 2004
• Multicenter, double-blind, randomized, phase III study to compare the safety and efficacy of intravenous xxxxx vs. Xxxxxx in complicated lower urinary tract infection or pyelonephritis. Peninsula Pharmaceuticals, Inc. 2004.
• Protocol 03-07-008. Phase III, randomized, double-blind, comparative study of two dose regimens of micafungin (fk463) versus caspofungin for the treatment of candidal esophagitis.
•tfp008 protocol. "Multicenter, randomized, placebo-controlled, double-blind, three-arm, phase III study to evaluate the safety and efficacy of the administration of tifacogin (recombinant inhibitor of the tissue factor pathway) in subjects with community-acquired pneumonia. severe". Chiron, 2004.
•Exploratory study on the effect of the I50l mutation on the response after treatment with xxxx. Bristol Myers Squibb, 2005.
•Large and simple study comparing two strategies for the management of antiretroviral therapy (SMART) (cpcra 065) national institute of allergy and infectious diseases. Division of AIDS, 2005
•Multicenter, double-blind, randomized, phase III study to evaluate the safety and efficacy of intravenous xxxx vs xxxxxx in complicated intra-abdominal infections". Peninsula Pharmaceuticals, 2004.
Multicenter, randomized, open phase III study to compare the safety and efficacy of intravenous xxx vs intravenous xxx in nosocomial pneumonia, Peninsula Pharmaceuticals, Inc 2005.

•Phase III, randomized, double-blind, multinational study of intravenous telavancin versus vancomycin for the treatment of complicated gram-positive skin and soft tissue infections, focused on patients with methicillin-resistant staphylococcus aureus infections. Theravance, 2005.
•Phase II study, double-blind, to determine the dose of intravenous doripenem in complicated infections of the lower urinary tract or pyelonephritis.
- BANNER Phase IIIA HIV Since 2021 Principal Investigator
219700 VOLITION Phase IIIb HIV-1 in antiretroviral therapy-naïve adults Principal Investigator Since 2024
MRXC-302 Phase III Moderate disease or severe diabetic foot infections. Since 2024 Sub Investigator

DATE:

17. Jun. 2024

SIGNATURE:

ALEJANDRO FERRO
MÉDICO INFECTÓLOGO
M. P. 92.071