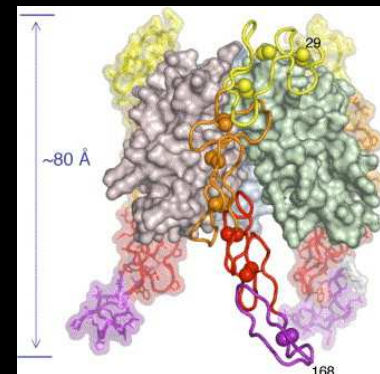


SITC – 2014

T Cell Costimulation in Cancer Immunotherapy Through Agonist Agents: OX40

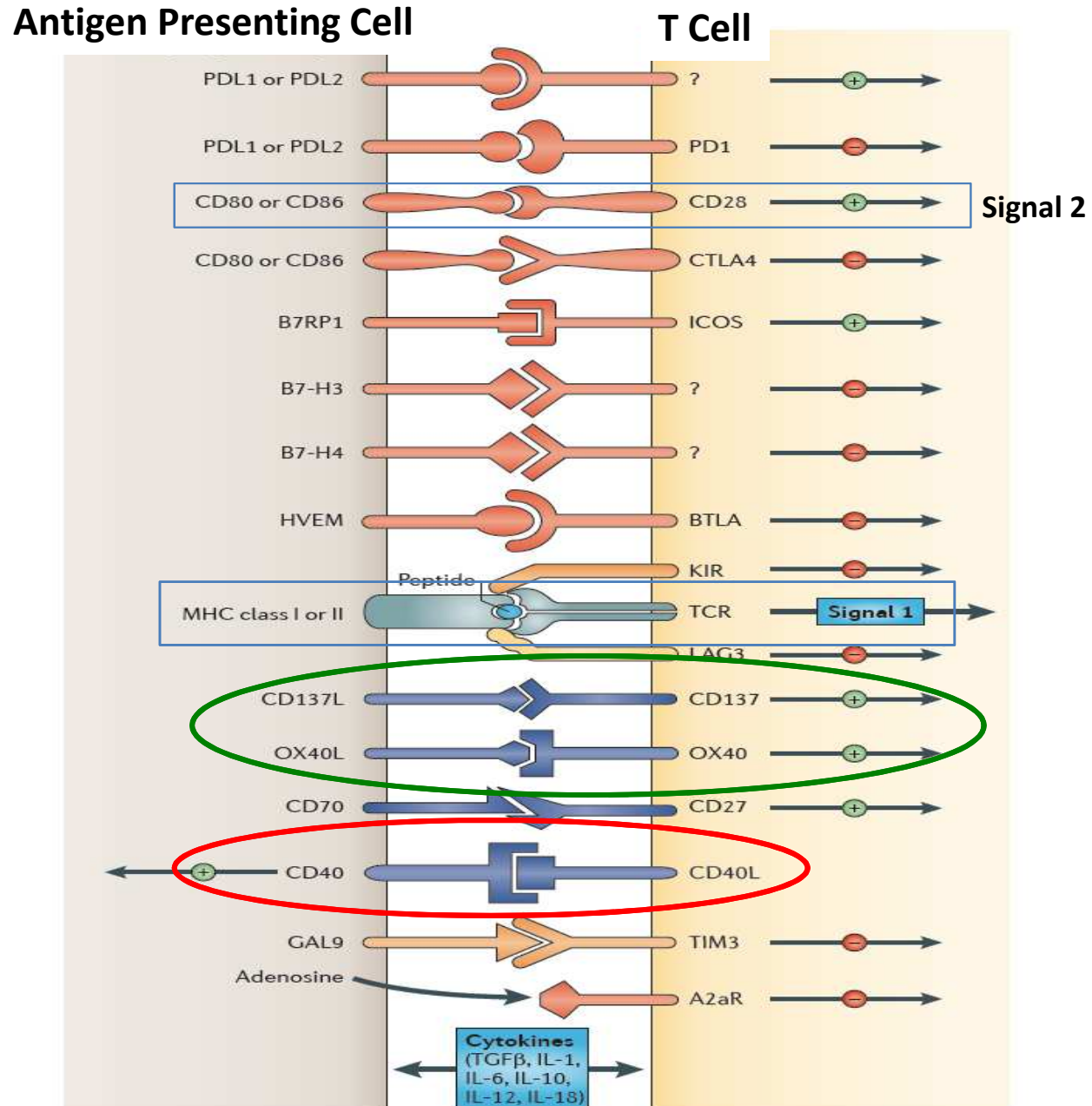
Andrew Weinberg, PhD
EACRI/Providence Cancer Center
Portland, OR



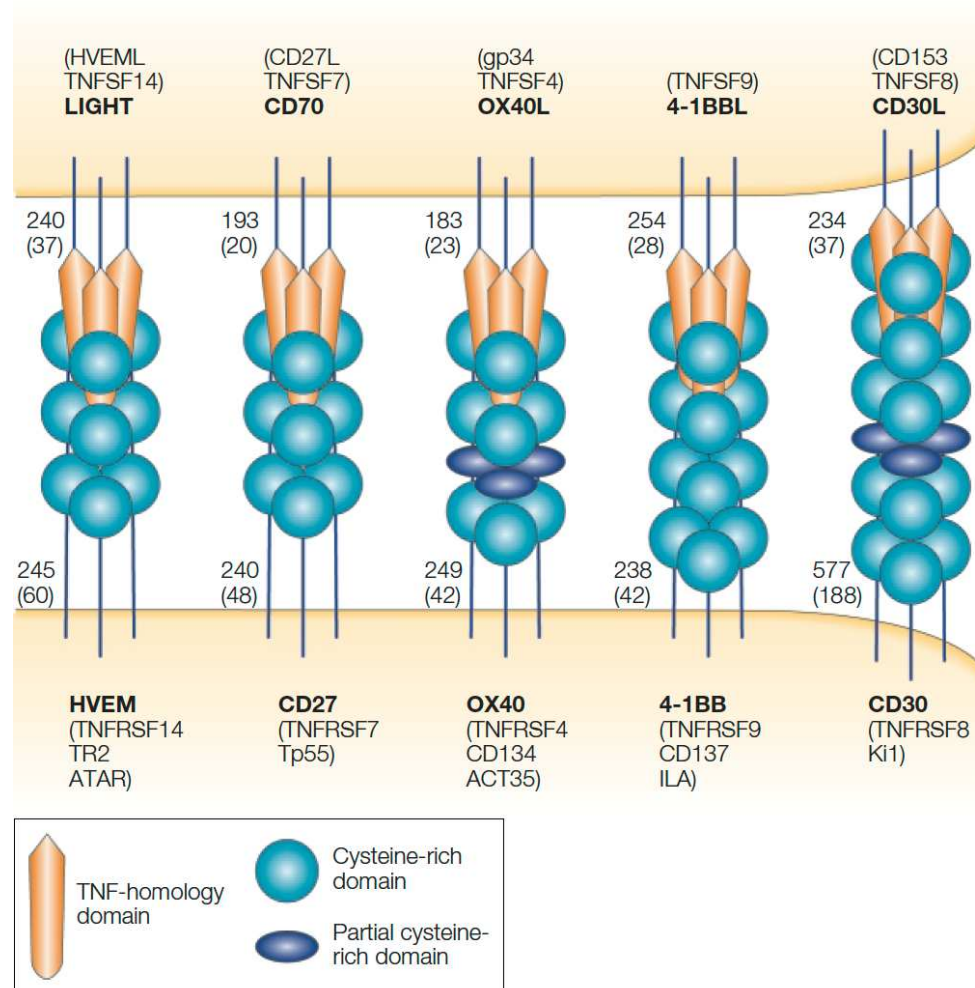
- Introduction of TNF-Rs in Immunotherapy: OX40, 4-1BB, CD40
- T Cell Costimulation: History – CD28
- OX40 Costimulation – In Vitro and In Vivo
- OX40 Agonist Therapy Preclinical Models
- OX40 Agonist Therapy in the Clinic
- OX40 Agonist Combinations

Disclosures

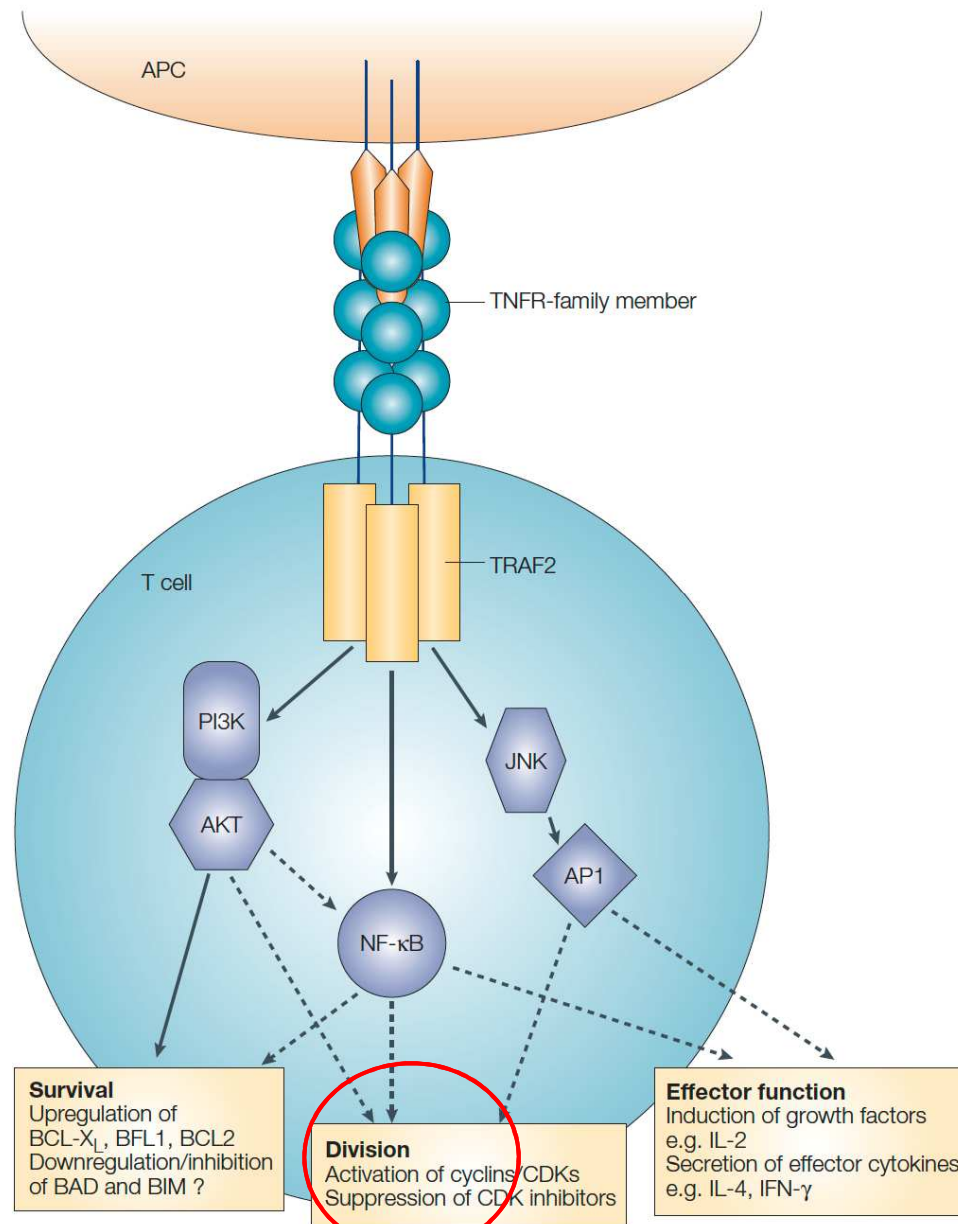
- Have issued patents pertaining to OX40 Agonists for use in Cancer Patients
- Receive OX40 Agonist Research Funding from MedImmune
- President and CSO of Agonox, Inc



Biochemical Structure of the TNF/TNF-receptor Family Members



Overview of TNF-R Signaling



The Genesis of T Cell Costimulation



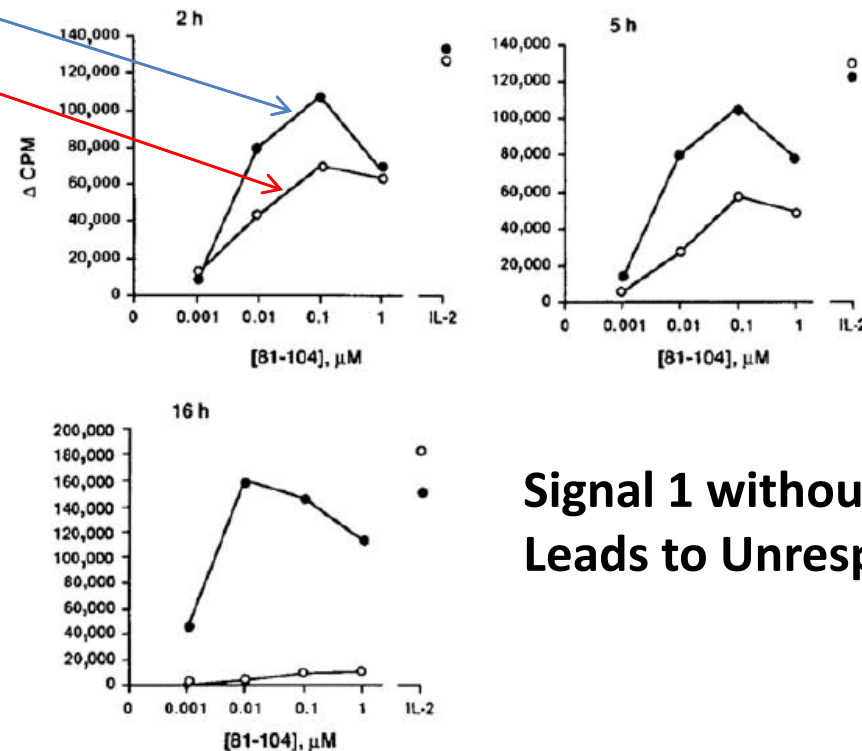
Pillars Article: Antigen Presentation by Chemically Modified Splenocytes Induces Antigen-Specific T Cell Unresponsiveness In Vitro and In Vivo. *J. Exp. Med.* 1987. 165: 302–319

Marc K. Jenkins and Ronald H. Schwartz

ECDI-APC/splenocytes
with Ag or w/o Ag

310

T CELL UNRESPONSIVENESS IN VITRO AND IN VIVO



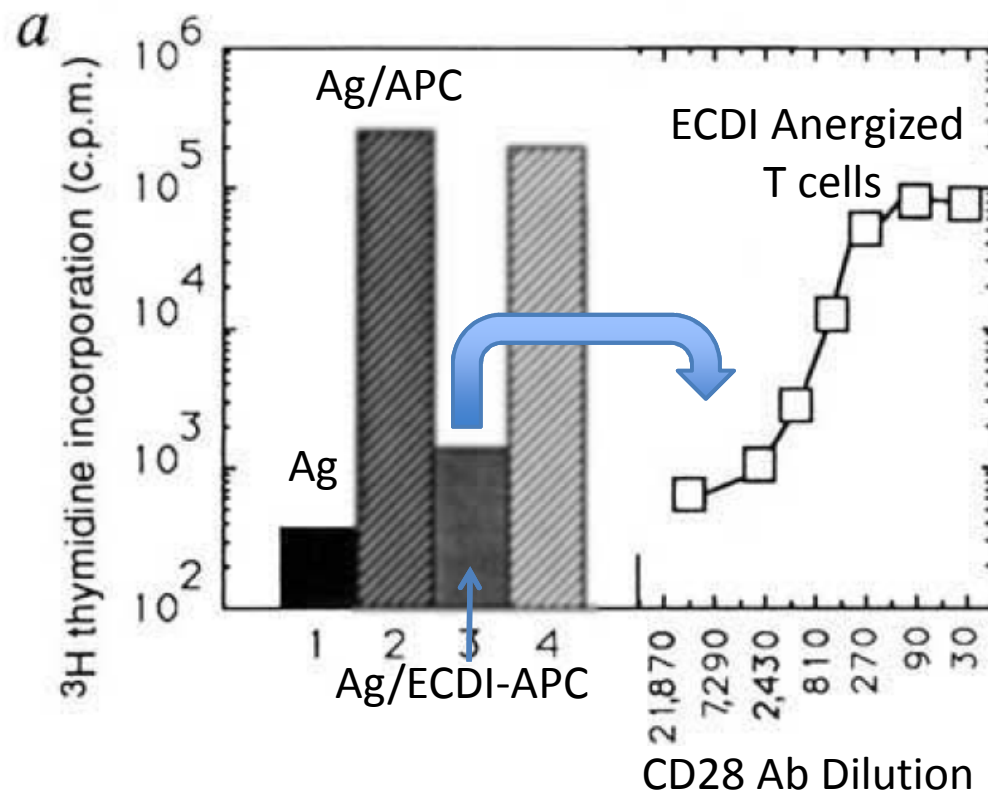
Signal 1 without Signal 2
Leads to Unresponsive T Cells

FIGURE 6. Time course of the induction of T cell unresponsiveness in vitro. T cell clone A.E7 (5×10^5) was preincubated with 5×10^6 ECDI-treated B10.A splenocytes with (open circles) or without (filled circles) 5 μ M pigeon fragment 81-104 for the indicated times, after which the T cells were reisolated and restimulated as described in the legend to Fig. 2. The results are expressed as Δ cpm.

CD28-mediated signalling co-stimulates murine T cells and prevents induction of anergy in T-cell clones

Fiona A. Harding^{*†}, James G. McArthur^{*†},
Jane A. Gross[‡], David H. Raulet^{*} & James P. Allison^{*§}

NATURE · VOL 356 · 16 APRIL 1992

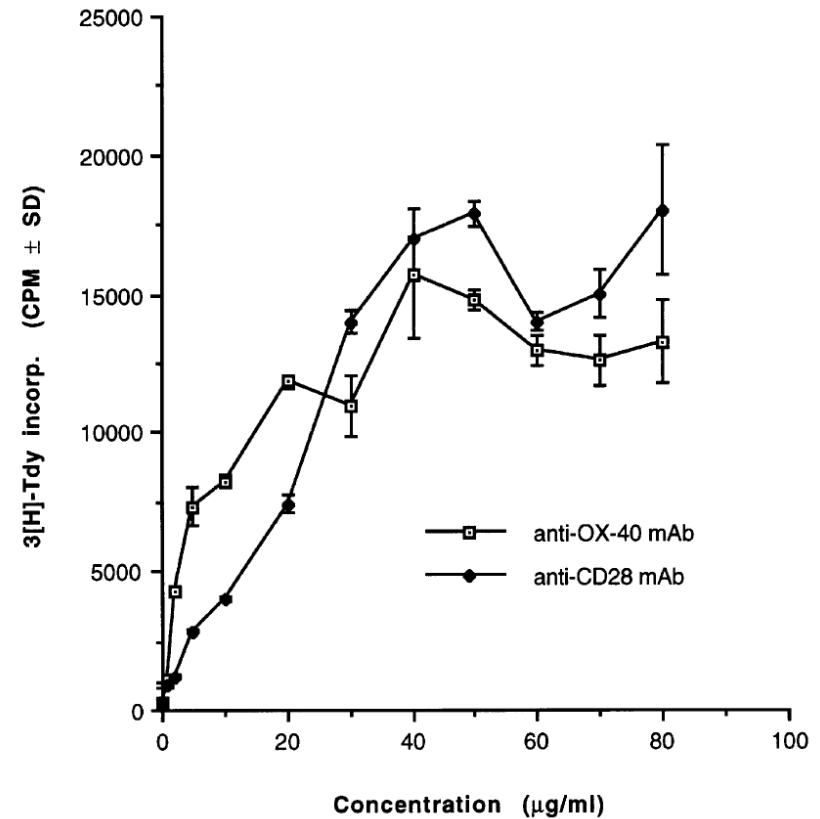
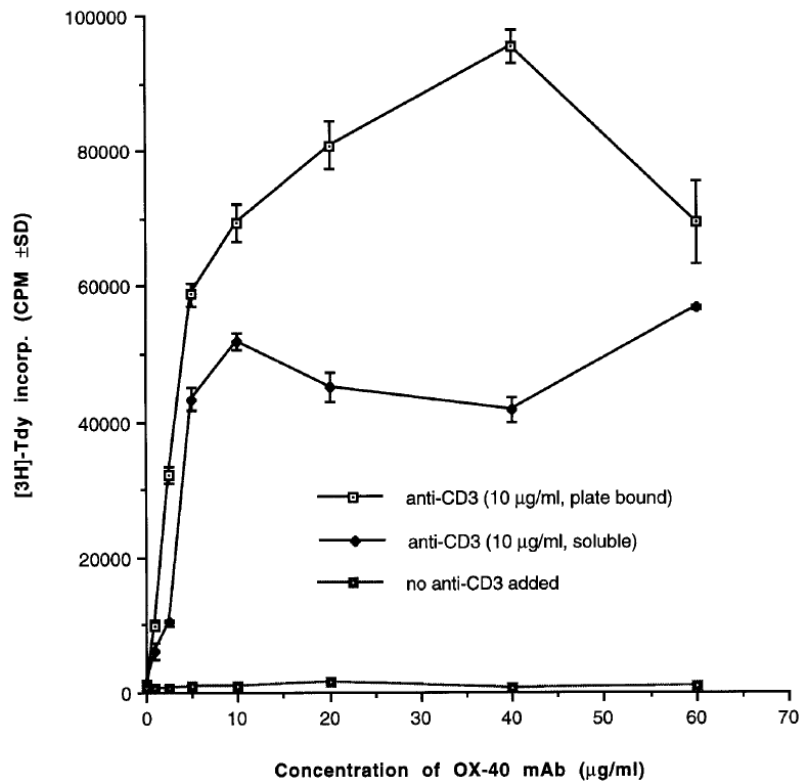


OX40 Abs Costimulate T cells In Vitro

International Immunology, Vol. 10, No. 4, pp. 453–461 1998

J. A. R. Kaleeba¹, H. Offner^{2,3}, A. A. Vandembark^{1–3}, A. Lublinski⁴ and
A. D. Weinberg^{1,4}

Co-stimulation of CD4⁺ T cells through OX-40



OX40 Costimulates Effector T Cells

OX40 Abs Costimulate **In Vivo** Leading to Enhanced T Cell Survival

***The Journal of Immunology*, 2000, 164: 107–112.**

Joseph R. Maxwell,^{2*} Andrew Weinberg,^{2†} Rodney A. Prell,[†] and Anthony T. Vella^{3*}

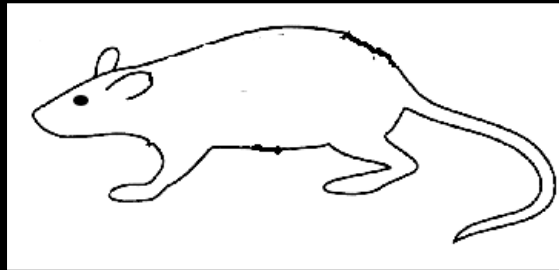
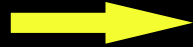
Table II. *Optimal long-term memory T cell survival of Ag-activated CD4⁺ T cells is obtained when OX40 engagement occurs in a proinflammatory environment^a*

Treatment	Spleen Cells ^b	LN ^b
No OVA	2.62 ± 0.91	1.76 ± 0.17
OVA/IgG	3.21 ± 1.54	1.26 ± 0.59
OVA/anti-OX40	39.63 ± 20.25	7.63 ± 4.67
OVA/LPS/IgG	5.24 ± 0.19	1.88 ± 0.11
OVA/LPS/anti-OX40	191.85 ± 30.92	12.06 ± 2.23

60 Days Post-Immunization

EFFECT of mOX40L:Ig or anti-OX40 Solid Tumor Growth In Vivo

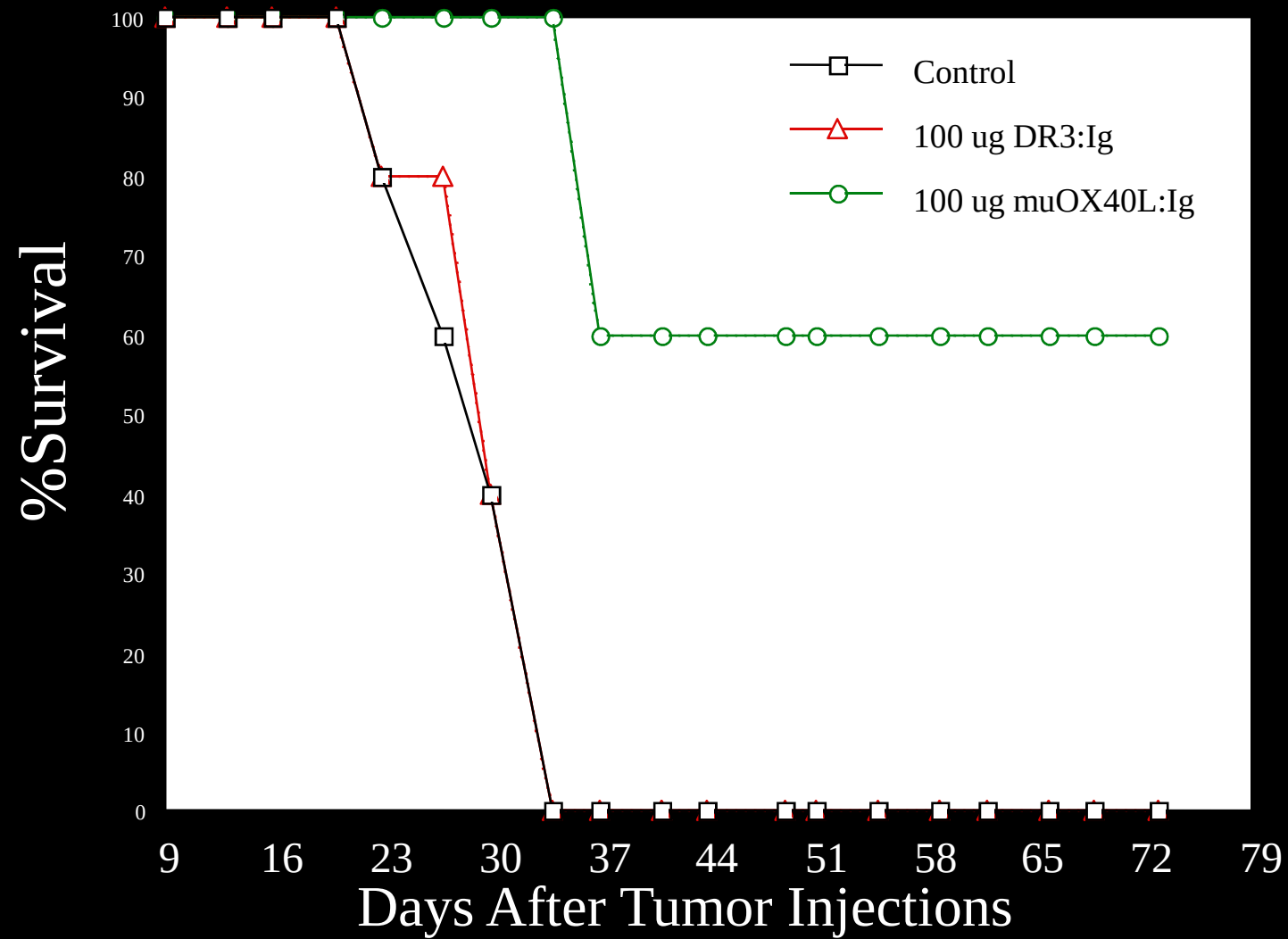
Solid Tumor
Administered s.c.



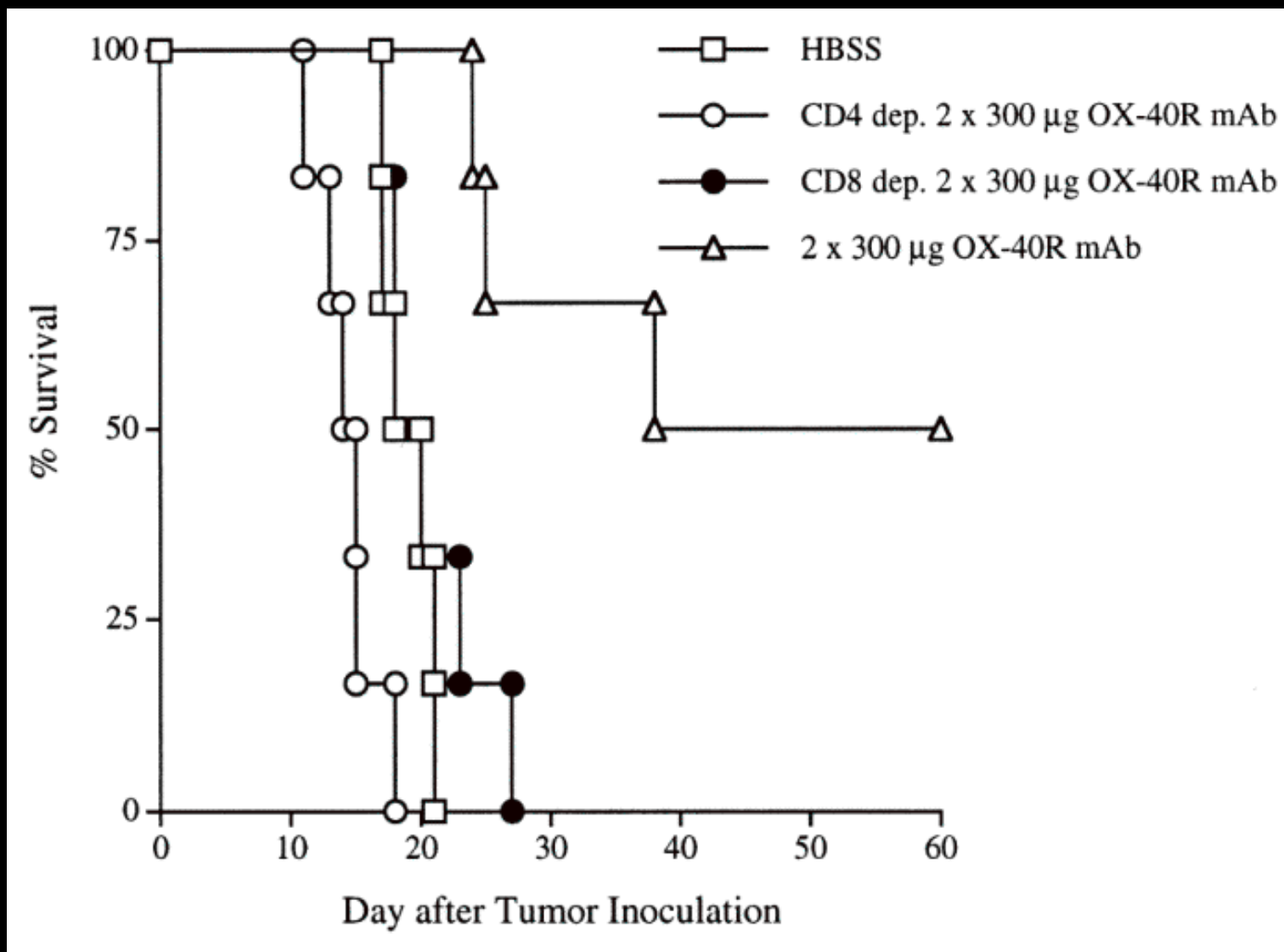
Days 3 and 7 after tumor injection

- Control
- 150 μ g Sol. mu OX40L
- 150 μ g anti-OX40
- Control

OX40L:Ig Treatment of MCA 303



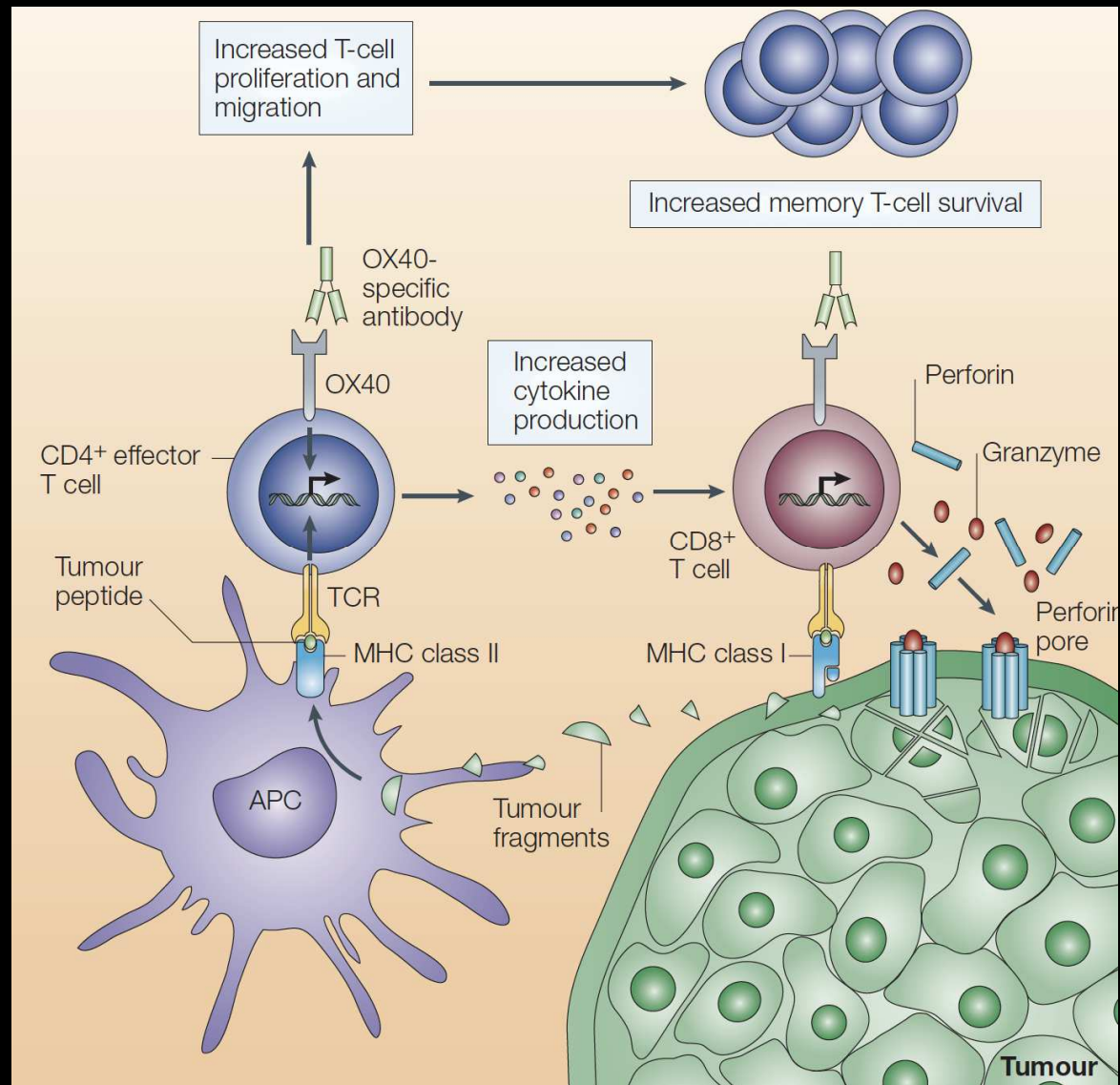
CD4 and CD8 T cells Roles in anti-OX40 Enhanced Tumor Immunity (Glioma Model)



Tumor Models Successfully Treated with OX40 Engagement

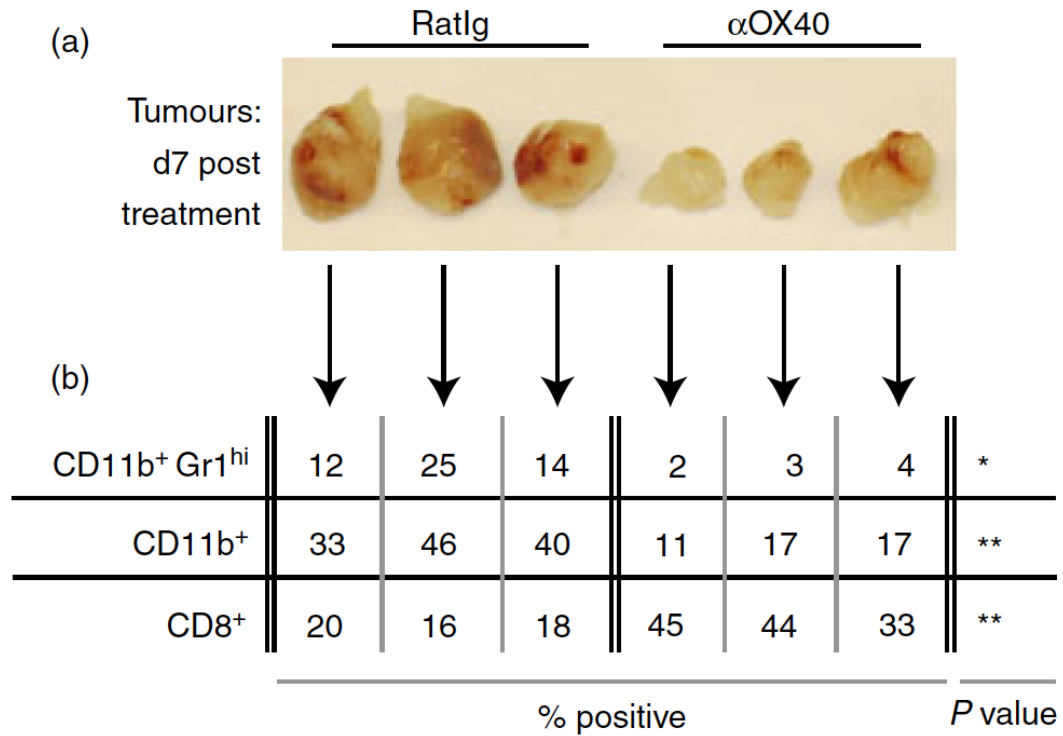
- Breast (4T1, SM1, EMT-6)
- Sarcoma (MCA 303, 205, 203)
- Colon (CT-26)
- Glioma (GL261)
- Melanoma (B16/F10)
- Prostate (TRAMP-C1)
- Lung (Lewis Lung)

Schematic Representation of OX40-enhanced Tumor Immunity



OX40 Agonists Impact the Immune Environment within the Tumor

Gough et al., Cancer Research. 2008, 68:5206



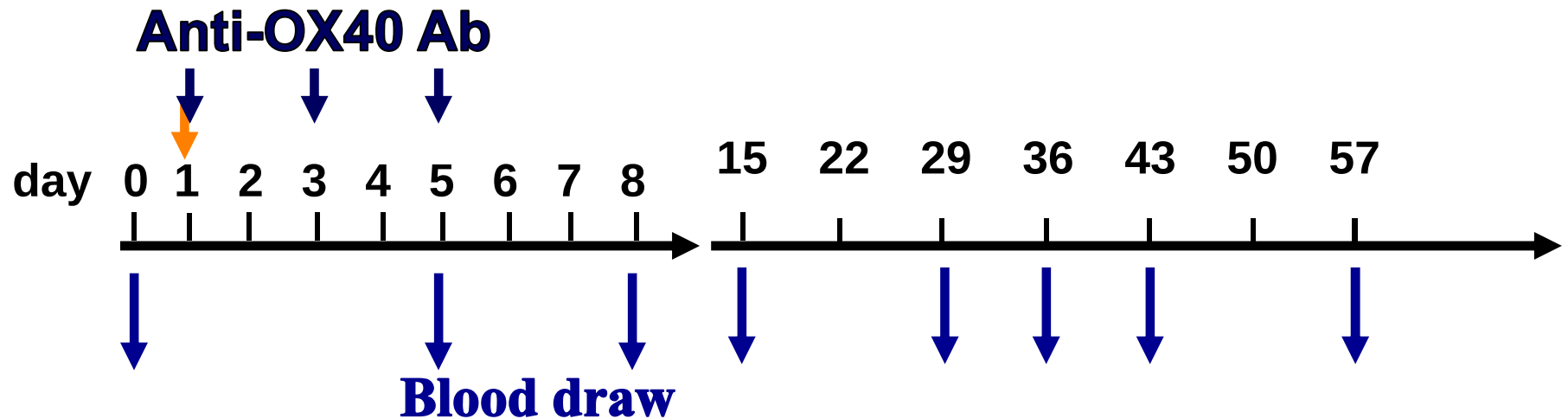
Taking OX40 Agonists to the Clinic

- Treated patients with all solid malignancies
- Anti-OX40 was well-tolerated.
- The maximum tolerated dose was not reached.
- All patients made HAMA
- No CRs or PRs; however,
 - 12 patients had regression of at least one tumor nodule
 - 17/30 had SD by RECIST criteria for 56 days
 - Median survival 392 days after receiving anti-OX40

Curti et. al., Cancer Research, 2013. 73(24):7189 – 7198.

Anti-OX40 Phase I Clinical Trial

Time Course



**Immune
function tests**

**Did we observe an increased in T cell proliferation
in the patients treated with anti-OX40?**

Flow Cytometry Panel

CD3

CD4

CD8

CD95

CD25

FoxP3

CD28

CCR7

CD127

Ki-67 (proliferation)

Strategy adapted from Louis Picker (SIV monkey studies)

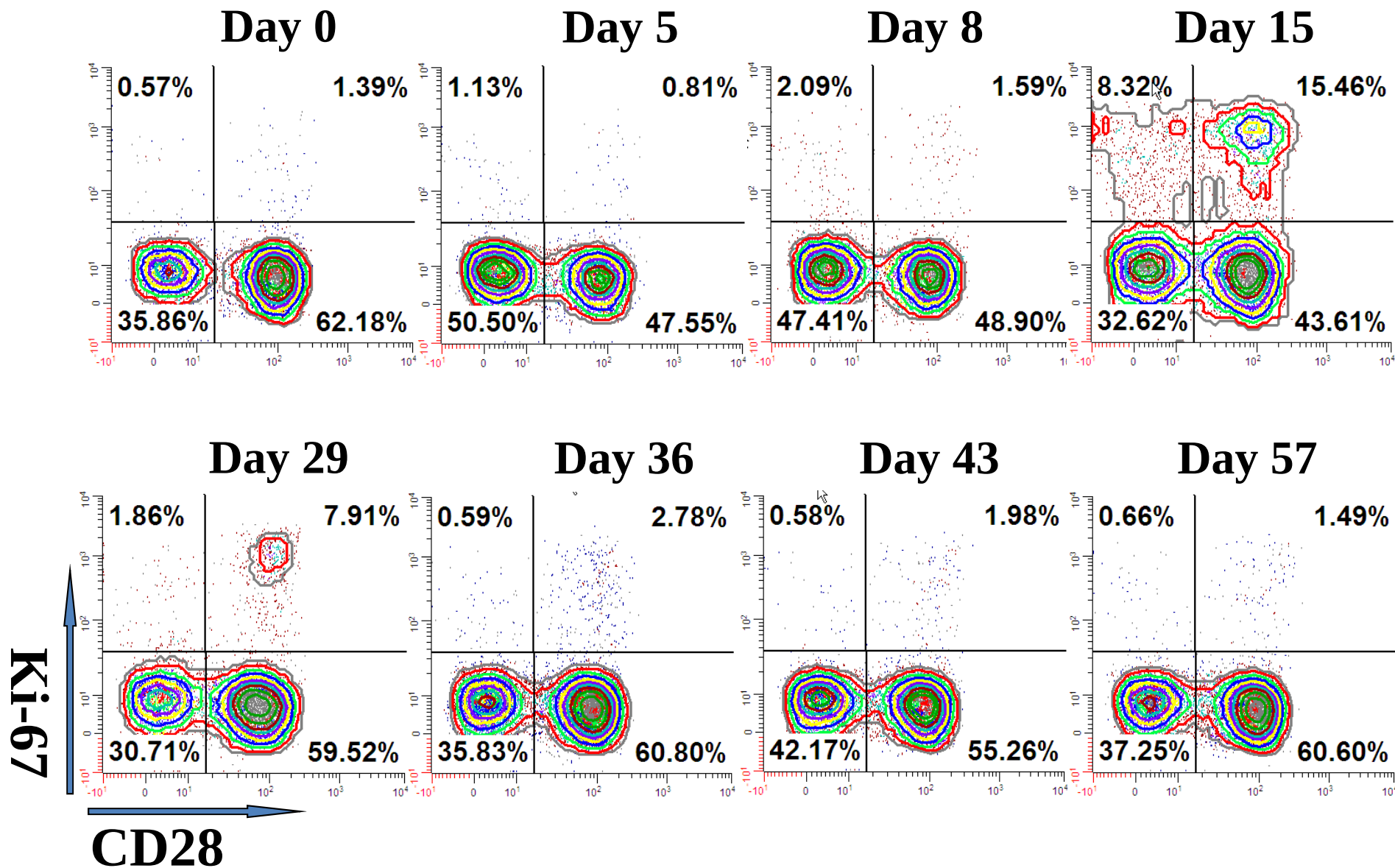
J Immunol, 2002, 168:29.

J Exp Med, 2004, 200:1299.

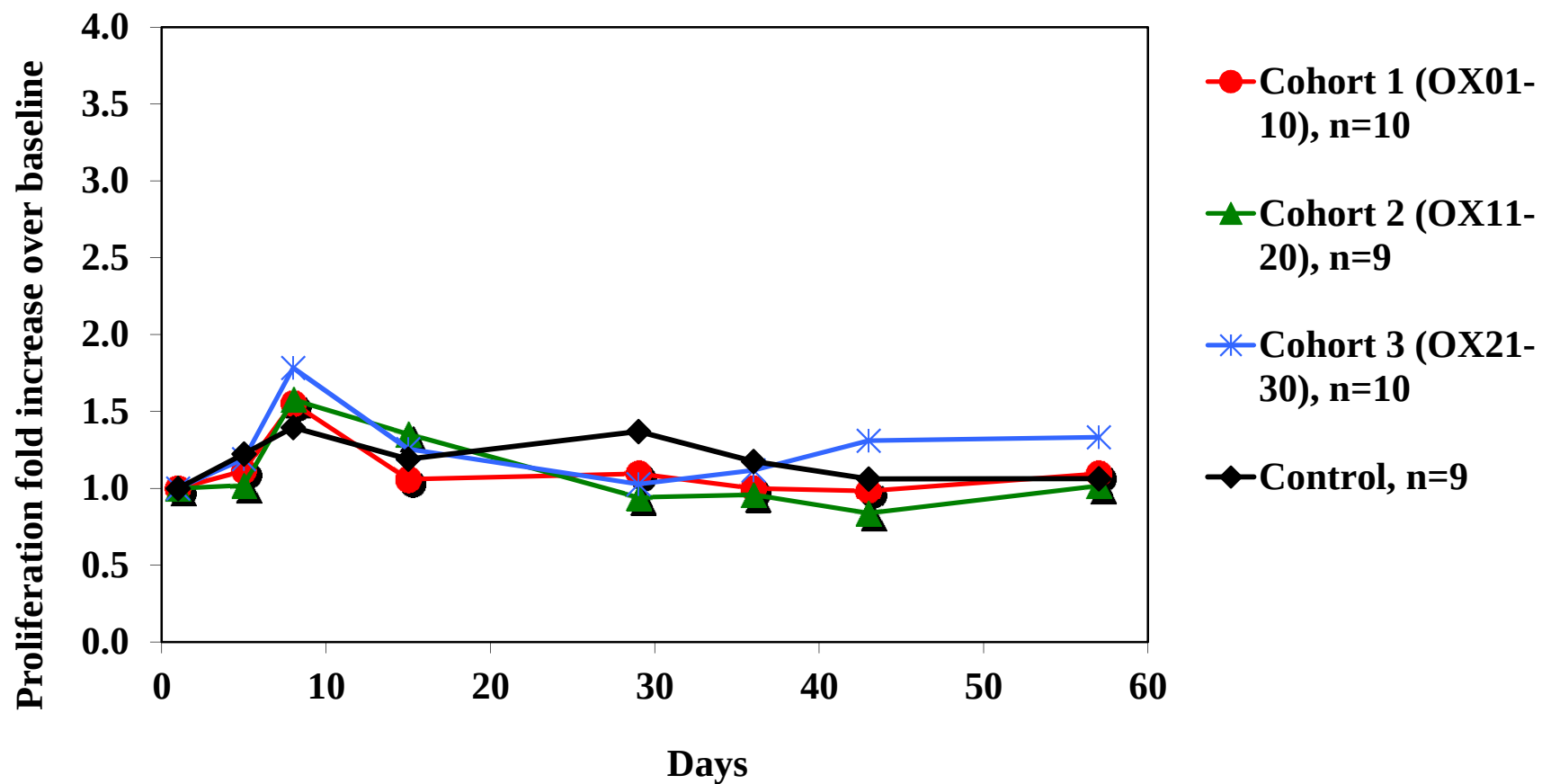
J Clin Invest, 2006, 116:1514.

Patient #14

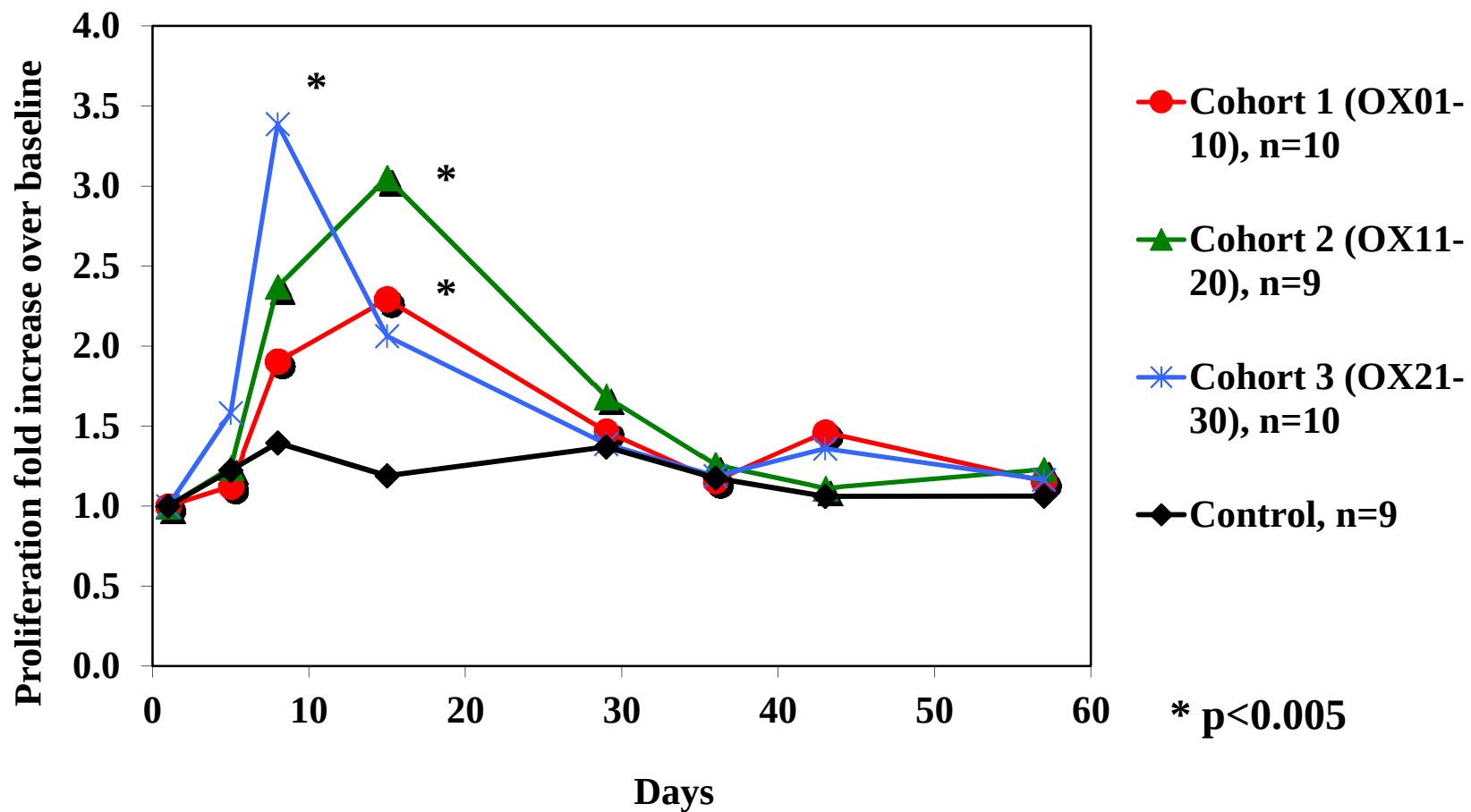
CD8⁺CD95⁺ T cell



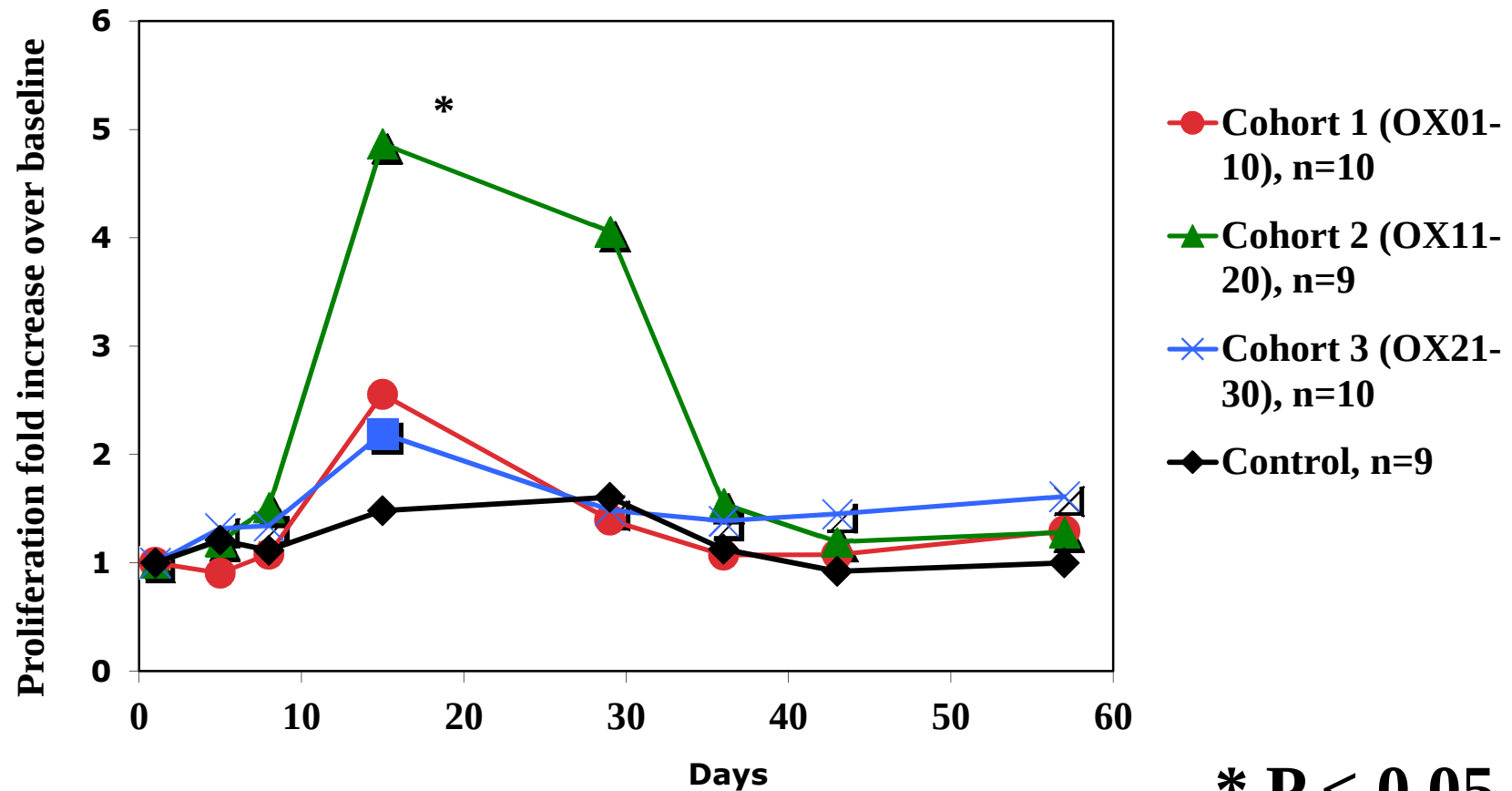
OX40 Study CD3+ CD4+ **Foxp3+** T cells



OX40 Study CD3⁺ CD4⁺ Foxp3⁻ T cells

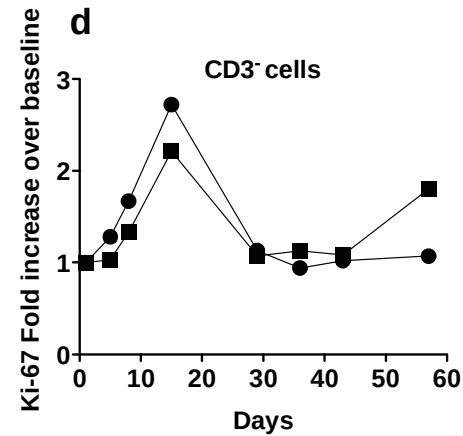
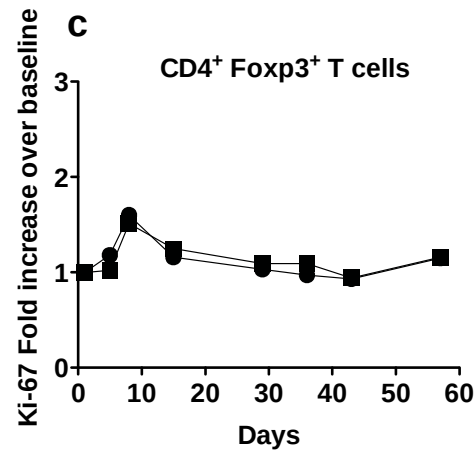
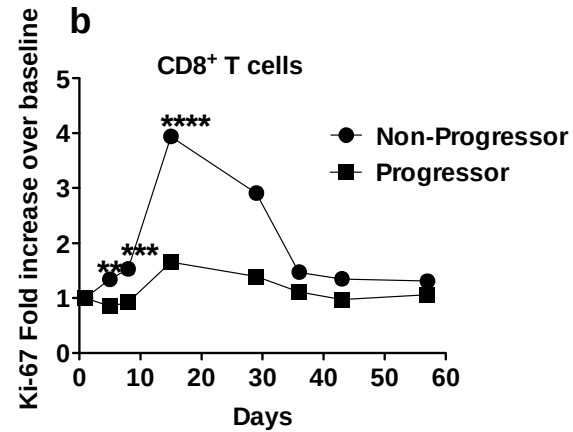
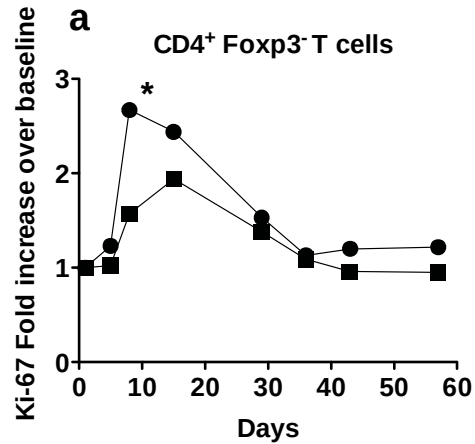


CD3⁺ CD8⁺ T cells



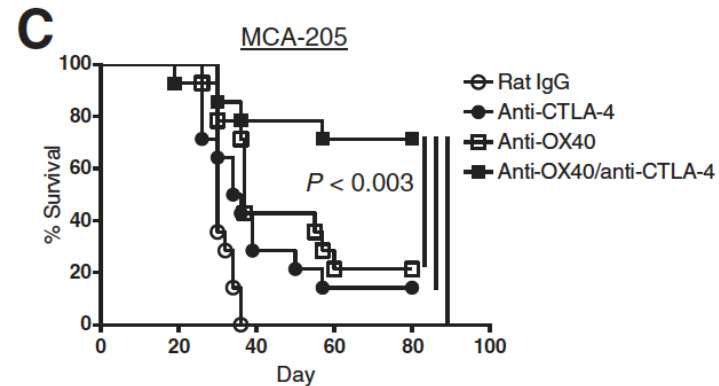
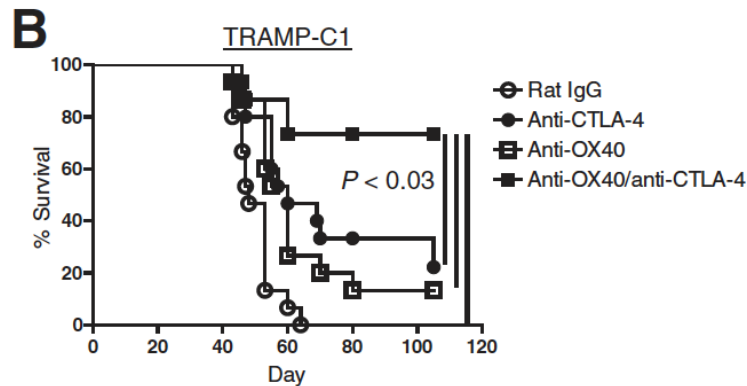
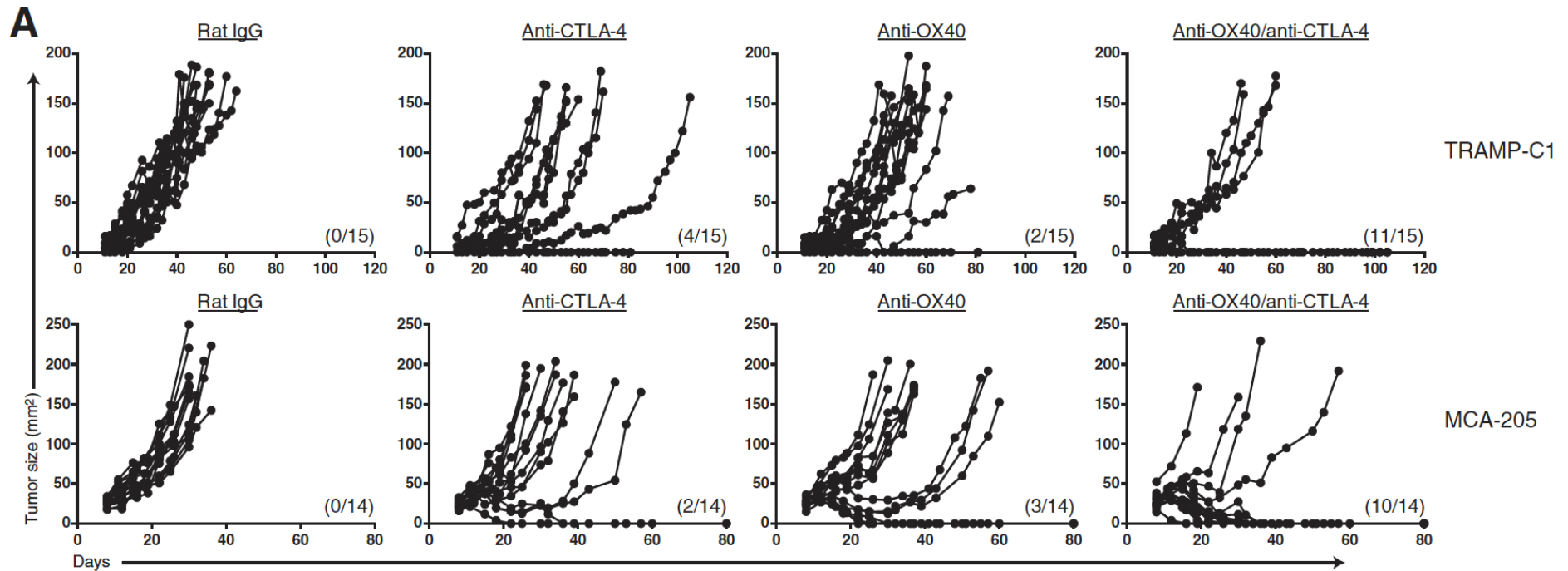
* $P < 0.05$

Do increases in Ki-67 predict clinical outcome?



Combination Immunotherapy

Checkpoint Blockade with TNF-R Agonists *anti-OX40 and anti-CTLA-4*



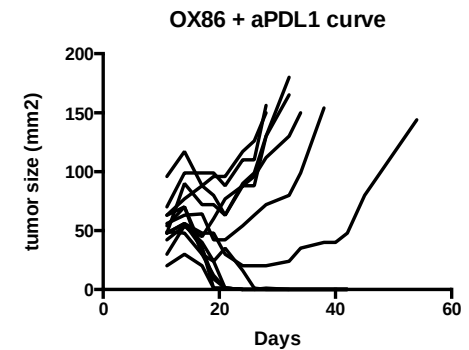
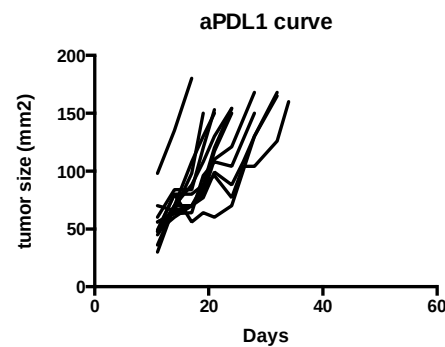
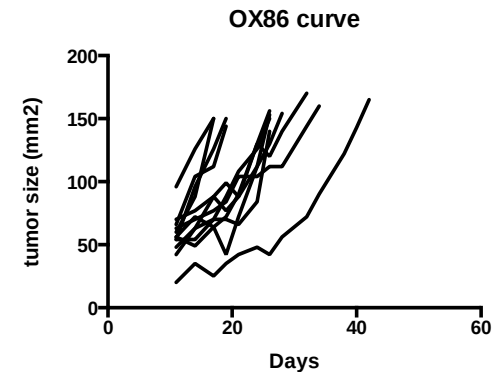
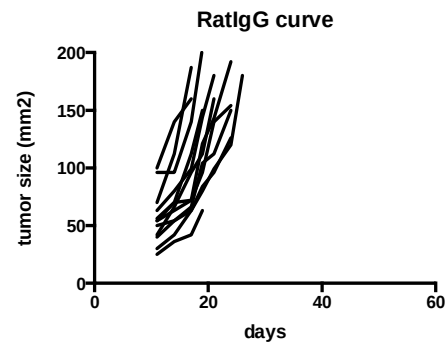
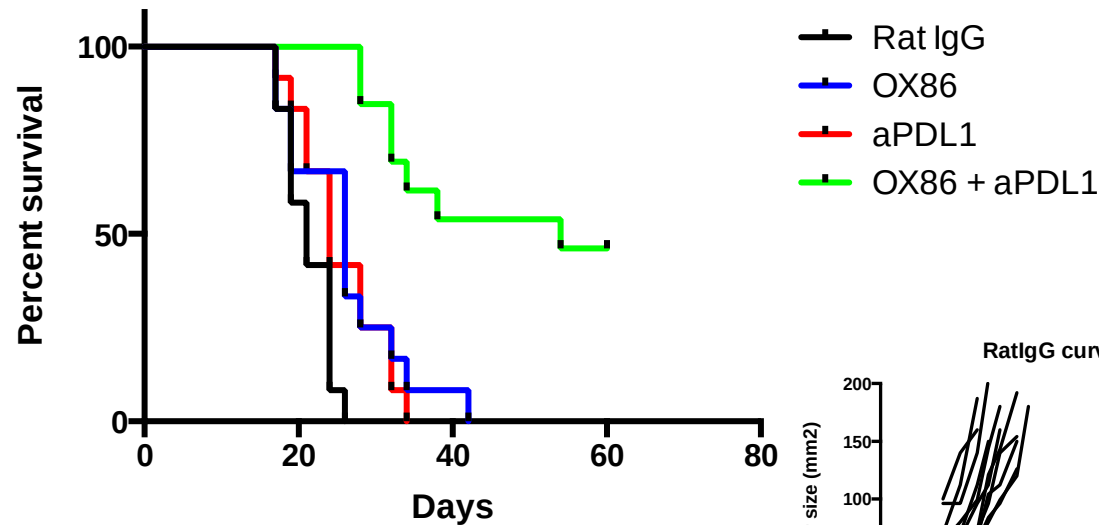
Redmond, W. et al., Cancer Immunology Research, 2013, 2(2):1

Anti-OX40/PDL1 Combo in MCA205 Tumor Model

α -PDL1 (clone 10F9-G2) injections (200ug) on day 11, 14, 17 and 20.

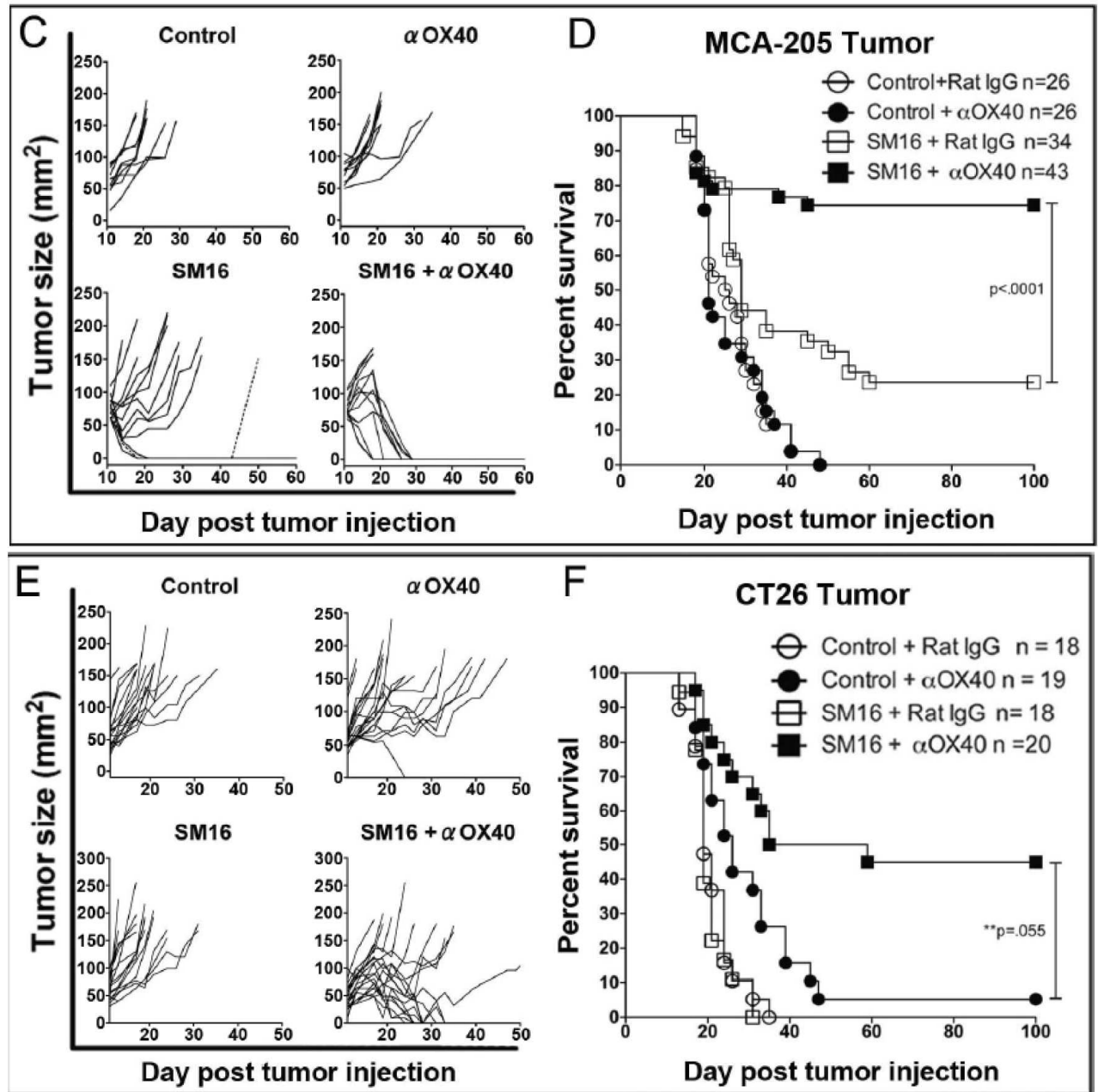
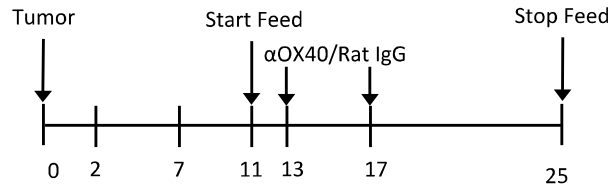
α -OX40 or RatIgG injections (250ug) on day 11 and 15

Survival proportions: Survival of survival



TNF-R Agonist with Cytokine Blockade

Anti-OX40 and TGF β -receptor inhibitor (SM16)



Providence Cancer Center

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Statistics

Todd Coffey
Helena Hoen

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IML

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Iliana Gonzales
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Nelson Sanjuan
William Miller
Edwin Walker
Keith Bahjat

Clinical Work

Brendan Curti
Walter Urba
Todd Crocenzi

Patients

Healthy volunteers
Patient Coordinators