

Disclosure information

International Reviews of Cell and Molecular Biology

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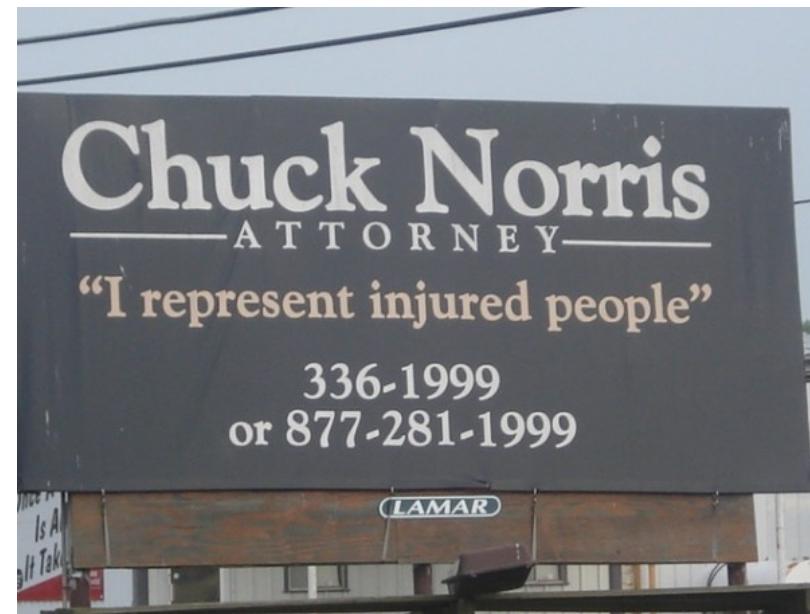
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OmniSEQ, VL47

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Medicine

Autophagy in cancer (immuno)therapy

Paris – 2018, Sep 20th



Lorenzo Galluzzi, Ph.D.

Weill Cornell Medical College – New York, US



The Quantity-Quality dilemma

Paris – 2018, Sep 20th



Lorenzo Galluzzi, Ph.D.

Weill Cornell Medical College – New York, US



Weill Cornell
Medicine

The Starbucks-Espresso dilemma

Paris – 2018, Sep 20th



Lorenzo Galluzzi, Ph.D.

Weill Cornell Medical College – New York, US

General organization of stress responses

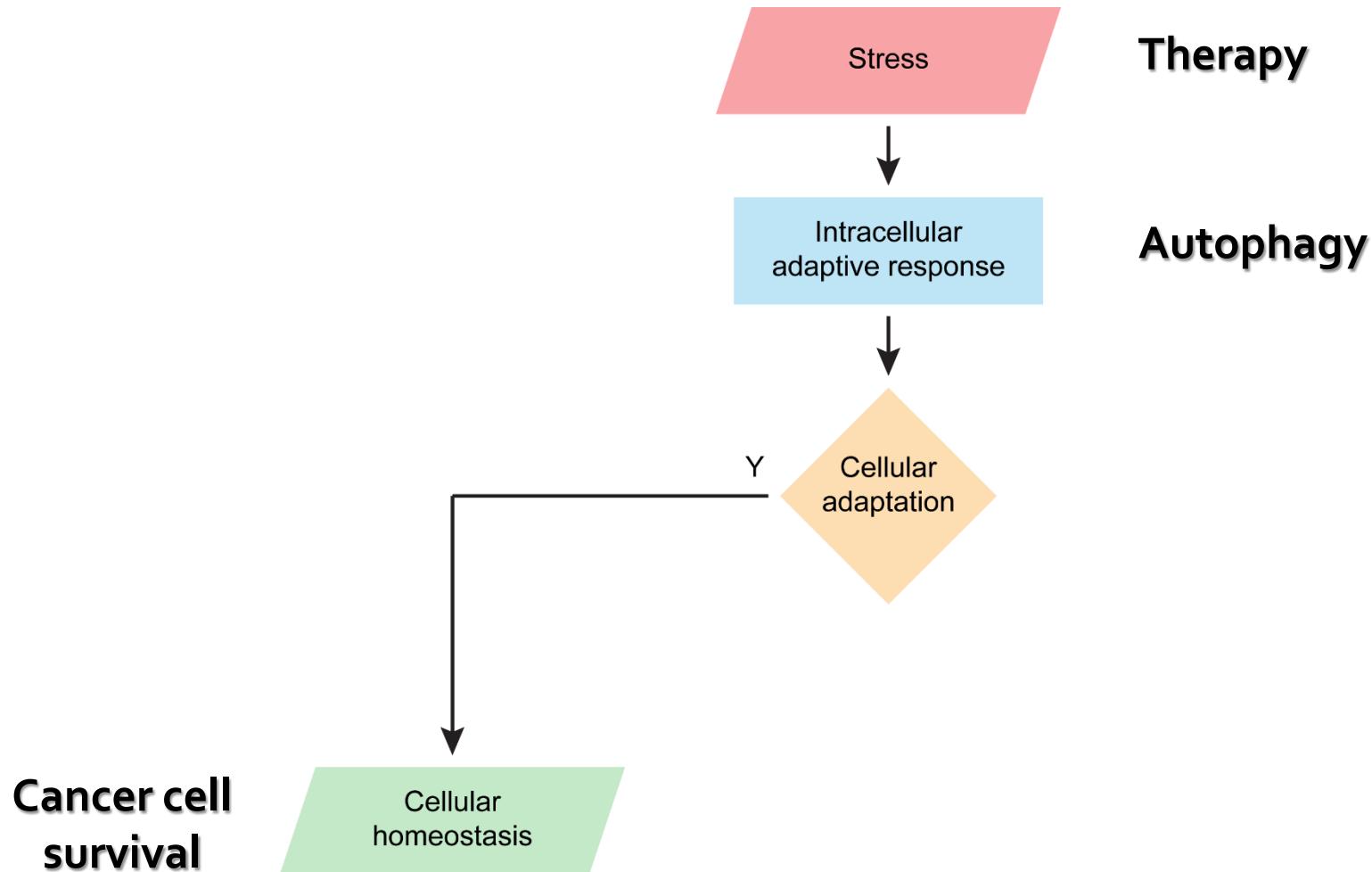
Stress

Text Message
Today 5:38 pm

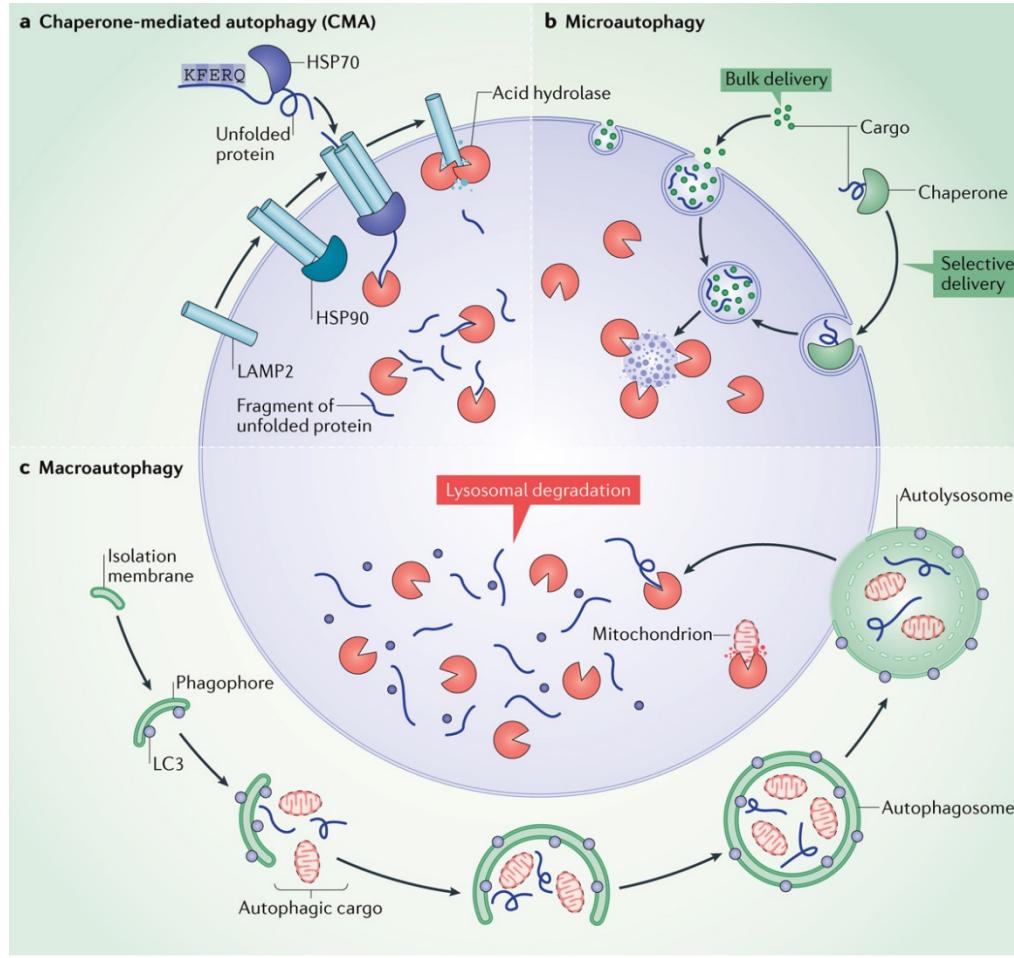
Hey we need to talk



General organization of stress responses

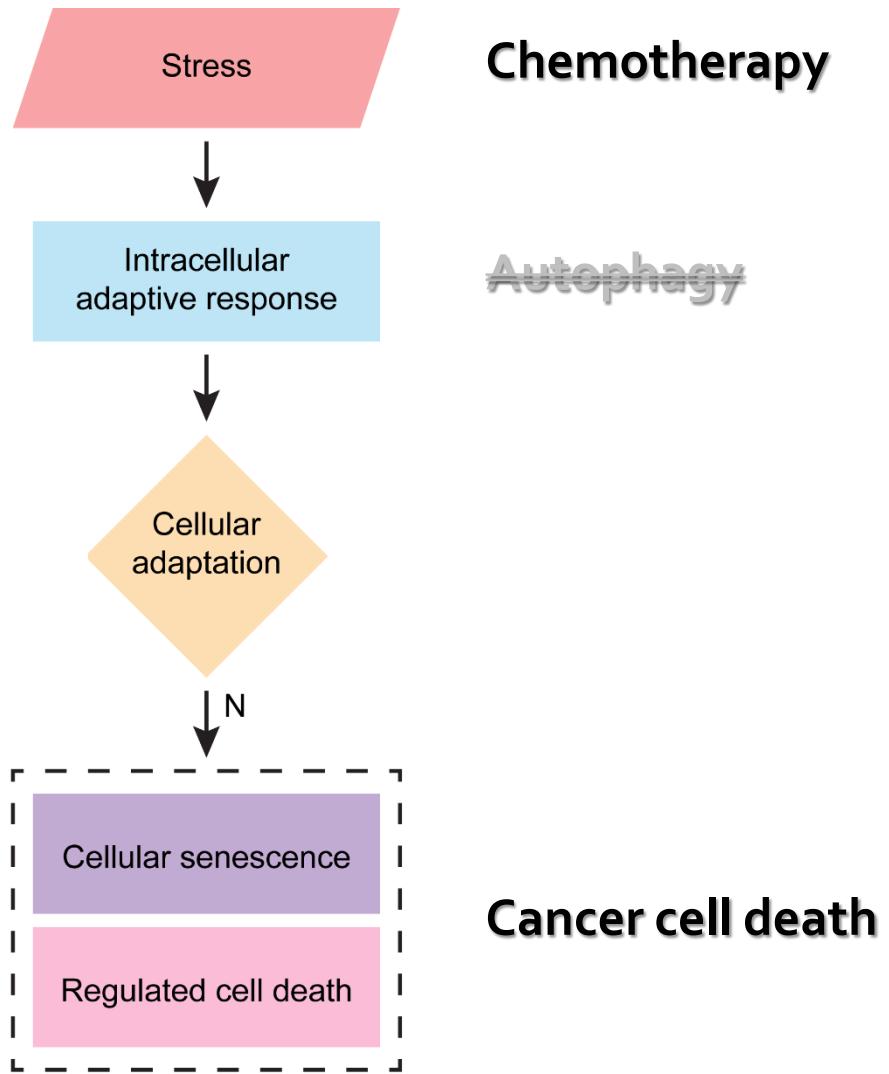


Autophagy

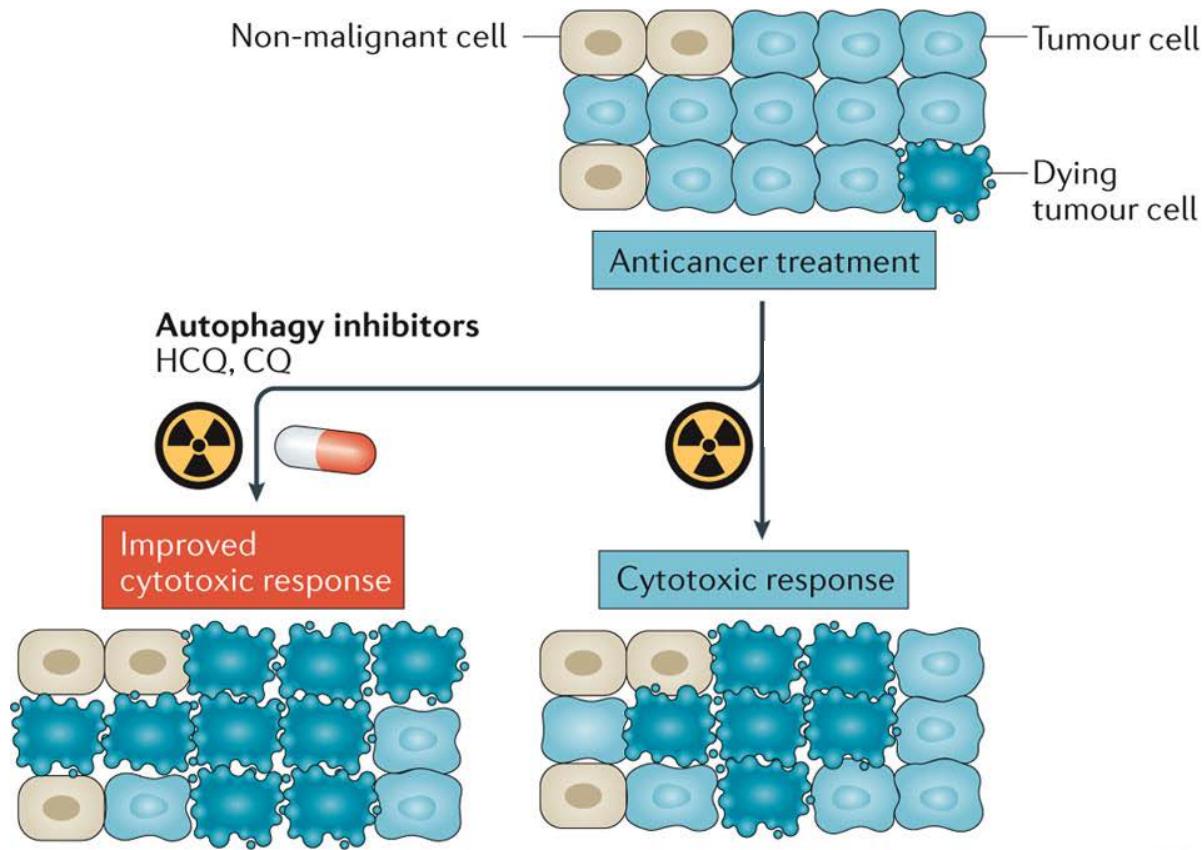


Evolutionary old mechanism that delivers cytosolic entities to lysosomal degradation, with prominent cytoprotective effects

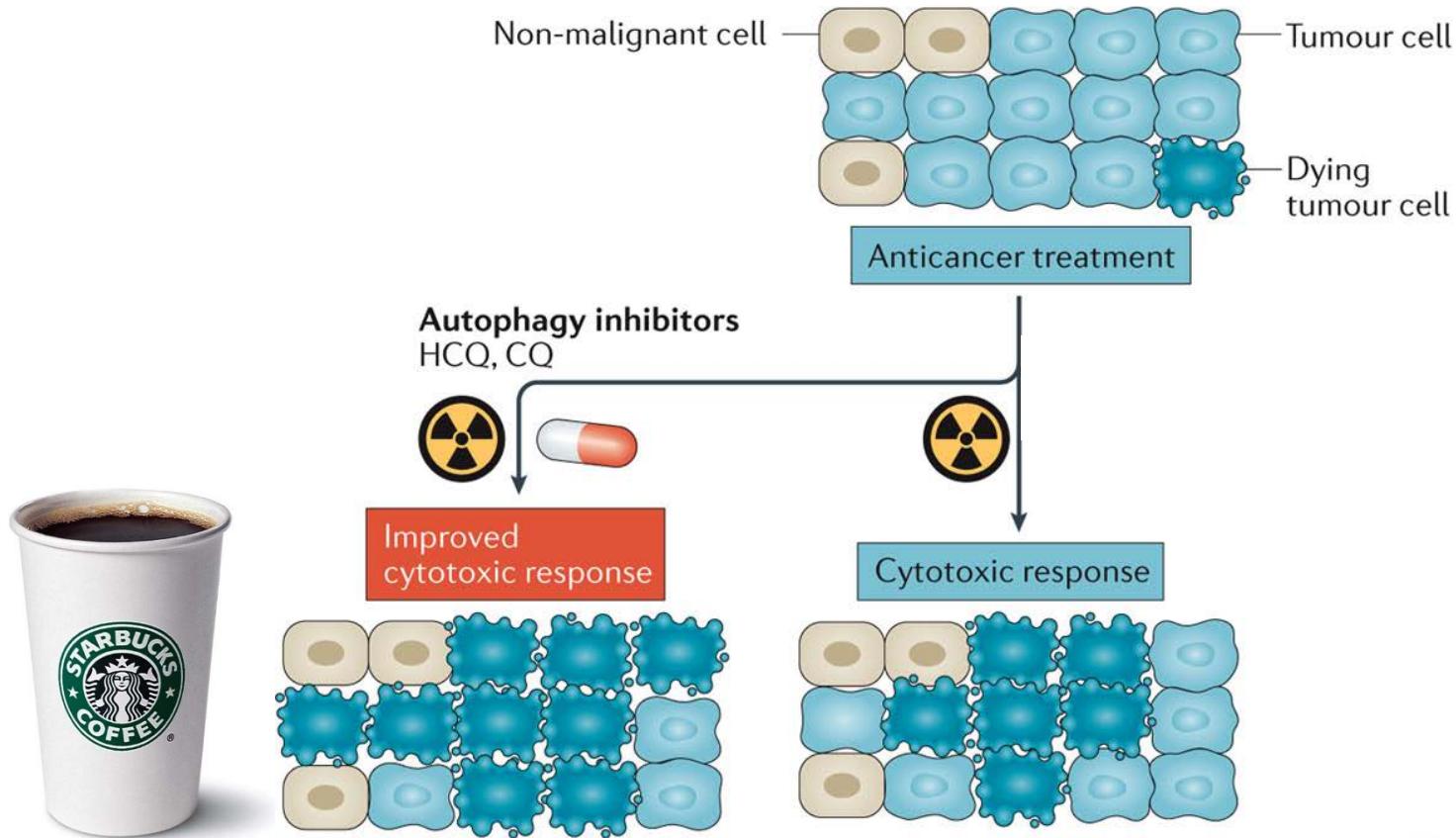
General organization of stress responses



Classical approach



The “Starbucks” approach



Inhibition of autophagy for cancer therapy

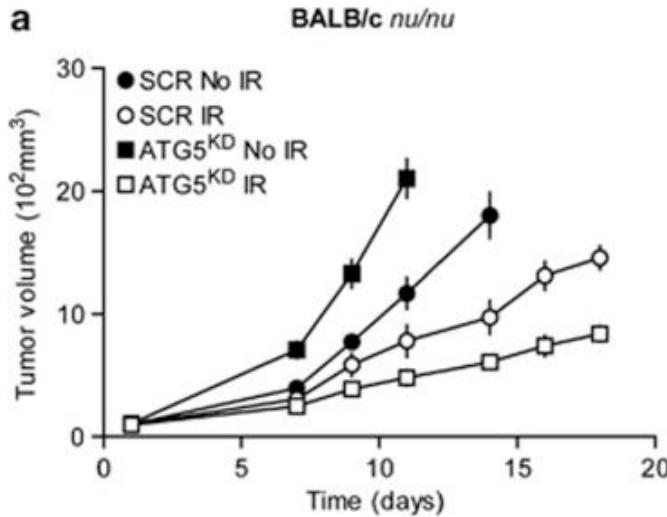


Table 1 | Selected examples of the effects of autophagy modulation on the efficacy of anticancer therapy in mouse models

Intervention	Host	Tumour type	Therapy	Notes	Refs
<i>Therapeutic benefits from autophagy inhibition or detrimental effects from autophagy activation</i>					
3-Methyladenine	nu/nu mice	HepG2 cells (H)	Radiation therapy	Hepatocellular carcinoma model; improved response to treatment in immunodeficient mice; pharmacological specificity issues	61
	nu/nu mice	EC9706 cells (H)	Radiation therapy	Oesophageal carcinoma model; improved response to treatment in immunodeficient mice; pharmacological specificity issues	62
Chloroquine, Lys05	nu/nu mice	1205Lu cells (H), C8161 cells (H), HT29 cells (H)	None	Melanoma and CRC models; standalone therapeutic effect in immunodeficient hosts; pharmacological specificity issues	48
Chloroquine	nu/nu mice	U87MG cells (H)	Temozolomide	Glioblastoma model; improved response to treatment in immunodeficient mice; pharmacological specificity issues	52
	SCID mice	HT29 cells (H)	Bevacizumab, oxaliplatin	CRC models; improved response to treatment in immunodeficient mice; pharmacological specificity issues	58
	C57BL/6 mice	B16-F10 cells (M)	Cisplatin, dacarbazine	Melanoma model; improved response mechanically linked to vessel normalization, independent of autophagy inhibition	65
C57BL/6 × 129 mice	MYC-driven lymphoma	Cyclophosphamide	Transgene-driven lymphoma model; pharmacological specificity issues	56	
	Patient-derived pancreatic cancer (H)	None	Pancreatic cancer model; standalone therapeutic effect in immunodeficient hosts; pharmacological specificity issues	49	
	SCID mice	H929 cells (H)	Doxorubicin, melphalan	Multiple myeloma model; improved response to treatment in immunodeficient mice; pharmacological specificity issues	53
	Rag2 ^{-/-} mice	MDA-MB-231 cells (H)	Epirubicin	Breast cancer model; improved response to treatment in immunodeficient mice; pharmacological specificity issues	54
Hydroxychloroquine	Rag2 ^{-/-} mice	JIMT-1 cells (H)	Gefitinib	Breast cancer model; improved response to treatment in immunodeficient mice; pharmacological specificity issues	57
	C57BL/6 mice	B16-F10 cells (M)	Silver nanoparticles	Melanoma model; pharmacological specificity issues	59
ATG4B-targeting shRNA, NSC185058	nu/nu mice	Saos-2 cells (H)	None	Osteosarcoma model; standalone therapeutic effect in immunodeficient hosts	71
ATG5-targeting shRNA, ATG7-targeting shRNA, chloroquine	nu/nu mice	MDA-MB-231 cells (H)	Cyclophosphamide and/or doxorubicin	Breast cancer model; improved therapeutic response in immunodeficient mice	55
ATG5-targeting shRNA, chloroquine	NOD/SCID mice	HT29 cells (H)	Photodynamic therapy	CRC model; improved therapeutic response in immunodeficient mice	60
Atg5-targeting shRNA, ATG5-targeting siRNA, BECN1-targeting siRNA	nu/nu mice	CT26 cells (M), A549 cells (H), H460 cells (H)	Radiation therapy	CRC and NSCLC models; improved therapeutic response in immunodeficient mice	74
ATG7-targeting siRNA, 3-Methyladenine	nu/nu mice	DLD-1 cells (H), HCT116 cells (H)	5-Fluorouracil	CRC models; improved therapeutic response in immunodeficient mice	50
ATG7-targeting shRNA, chloroquine	nu/nu mice	GBM39 cells (H)	Bevacizumab	Glioblastoma models; improved therapeutic response in immunodeficient mice	73
BECN1-targeting shRNA, chloroquine	nu/nu mice	FaDu cells (H)	Cisplatin	HNC model; improved therapeutic response in immunodeficient mice	51
MAP1LC3B-targeting shRNA, rapamycin	nu/nu mice	SK-N-BE2 cells (H), IMR-32 cells (H)	Genistein	Brain cancer models; improved therapeutic response in immunodeficient mice	72

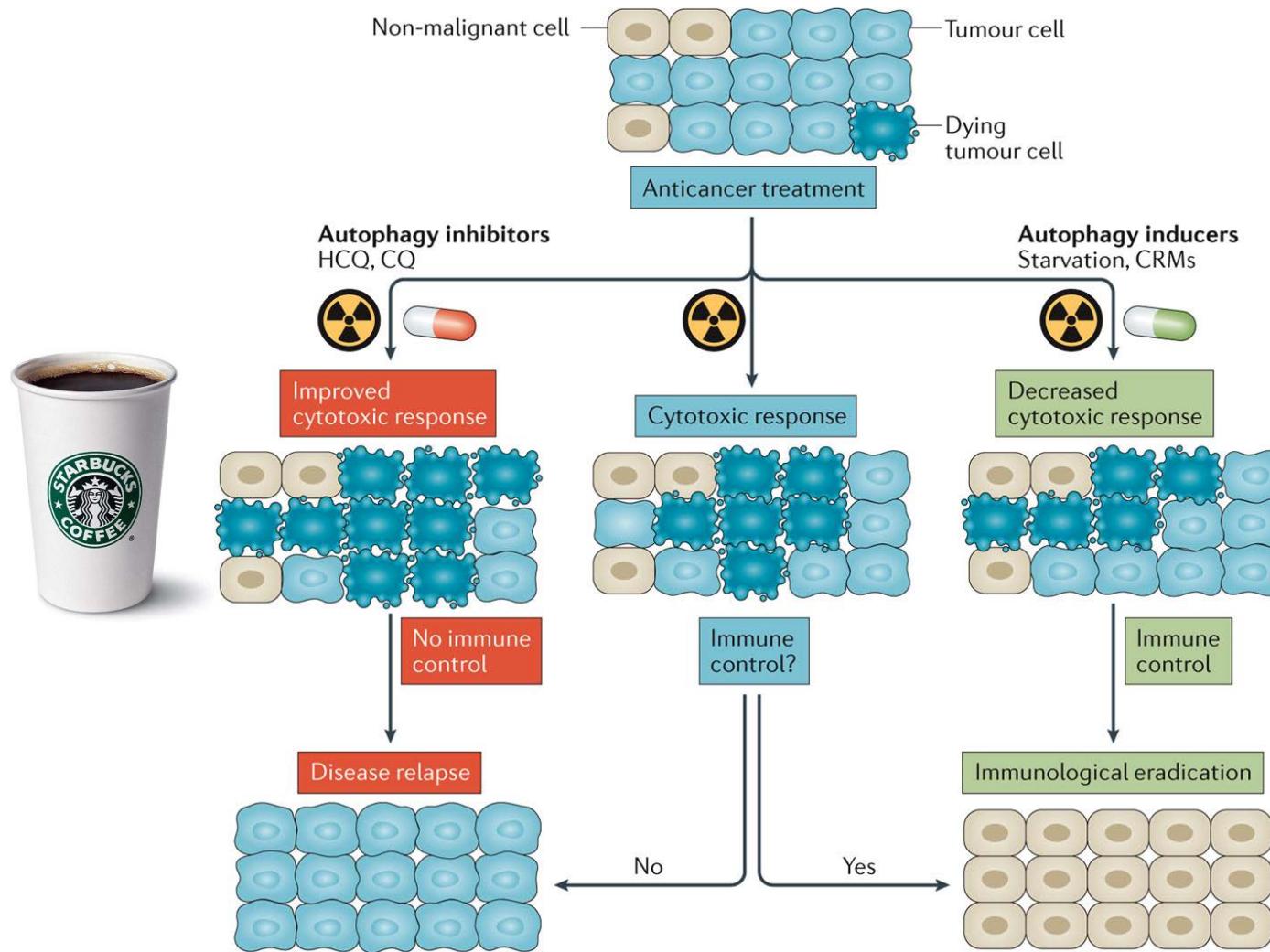
Clinical trials

Table 2 | Selected clinical trials evaluating inhibition of autophagy

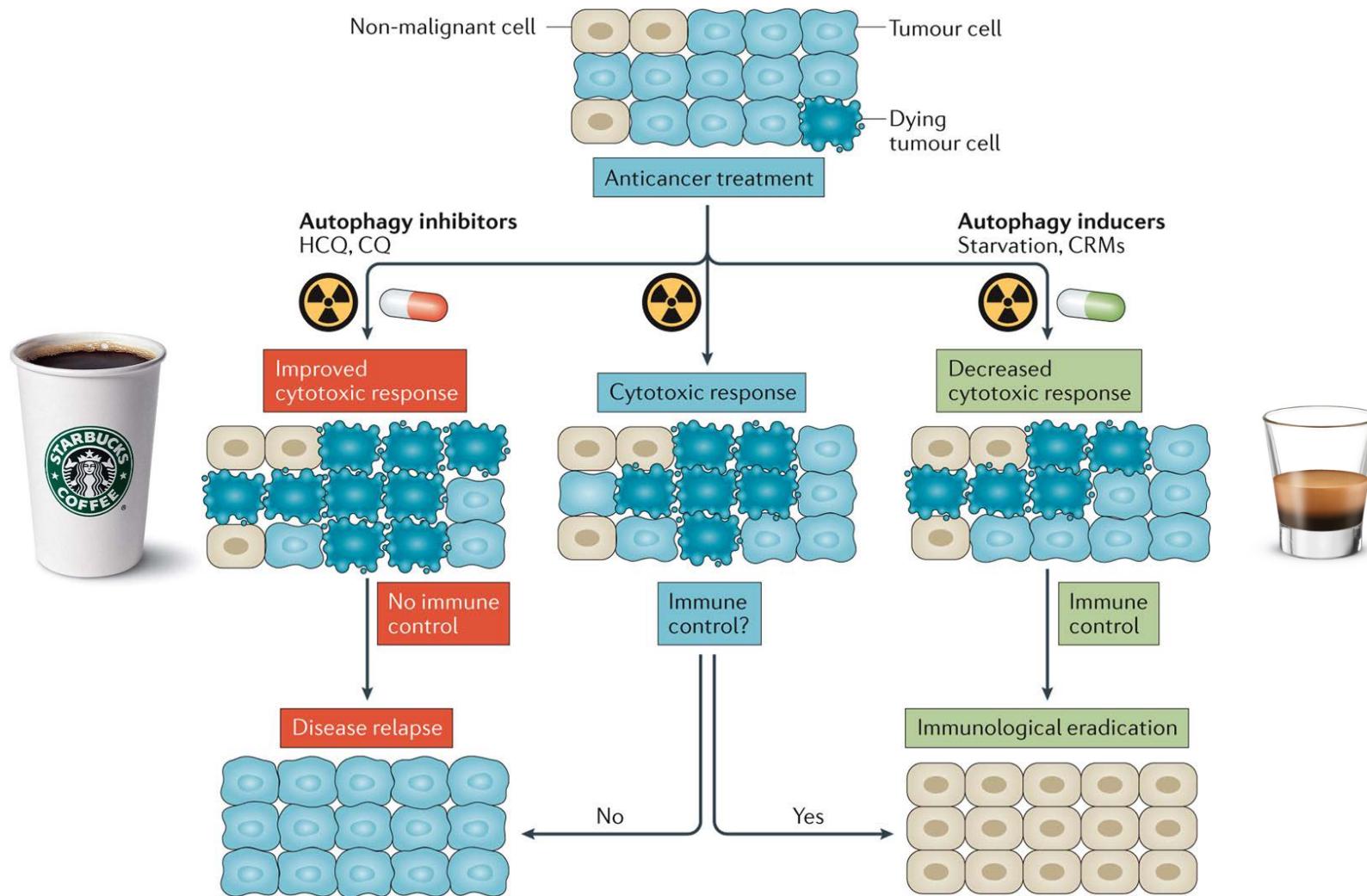
Drug	Tumour type	Number of patients	Therapy	Observations	Refs
Chloroquine	Brain metastases	73	Whole-brain irradiation	Improved control of metastases: RR 0.31, 95% CI 0.1–0.9; $P=0.046$; but no significant differences in response rate or overall survival	88
Hydroxychloroquine	Advanced-stage NSCLC	8	None	Mostly grade 1–2 adverse effects; no responses to hydroxychloroquine	86
		19	Erlotinib	Mostly grade 1–2 adverse effects; a single objective response to hydroxychloroquine plus erlotinib was observed	86
	Advanced-stage solid tumours	25	Rapamycin (sirolimus)	Overall response rate: 40%, disease control rate: 84%	90
		27	Vorinostat	Mostly grade 1–2 adverse effects; a single objective response and a further two patients had stable disease	84
		39	Temsirolimus	Mostly grade 1–2 adverse effects; no objective response, but the disease stabilization rate was >65%	89
		40	Temozolamide	Mostly grade 1–2 adverse effects; three partial responses and six incidences of disease stabilization (amongst patients with melanoma)	83
	Glioblastoma multiforme	76	Radiation therapy plus temozolamide	No significant improvement in overall survival	87
	Pancreatic carcinoma	20	None	Only 10% of patients had stable disease at 2 months	82
	Refractory myeloma	25	Bortezomib	Six patients had partial responses (of which three were minor) and 10 patients had stable disease	85

CI, confidence interval; NSCLC, non-small-cell lung cancer; RR, relative risk.

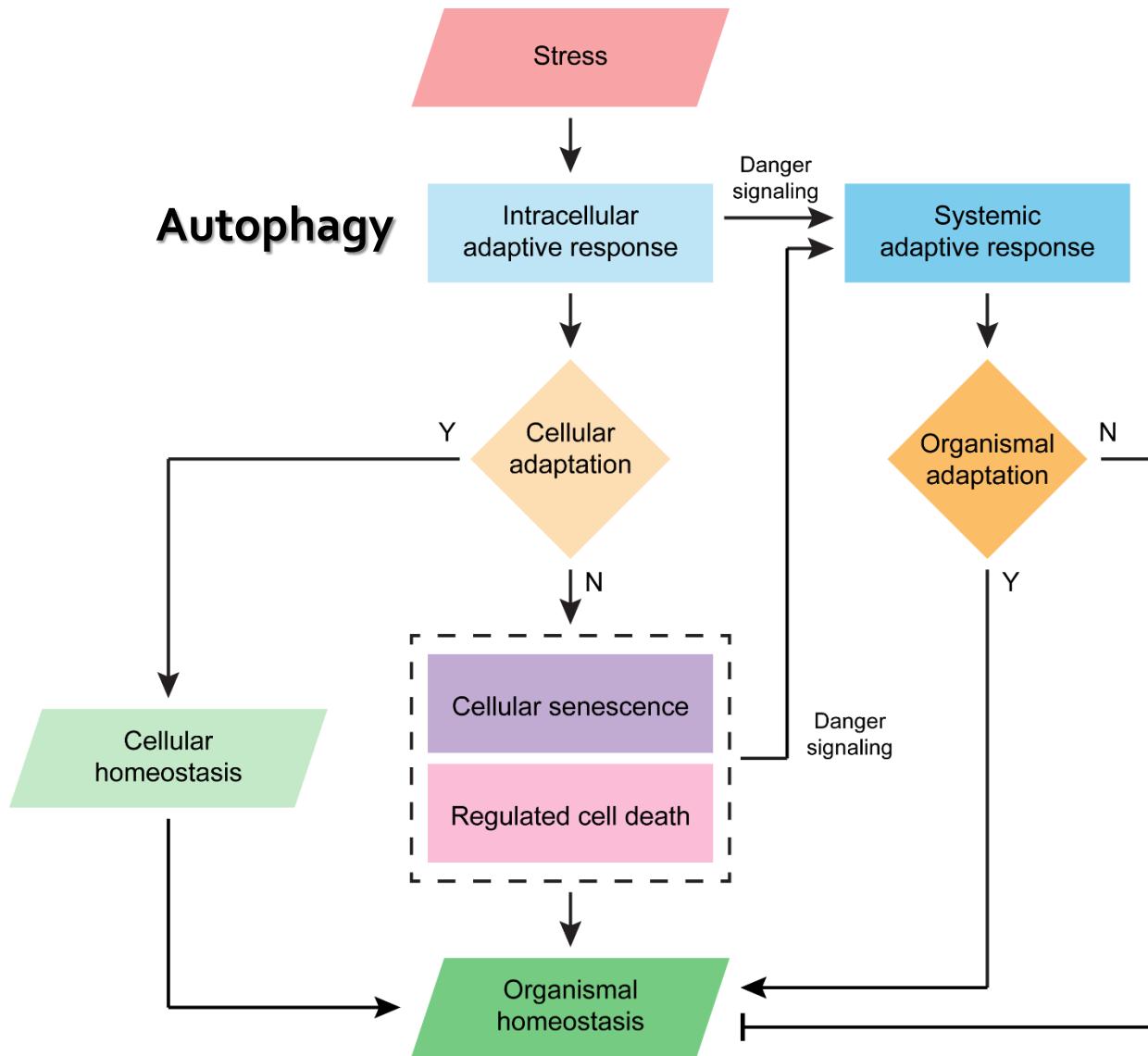
Alternative approach



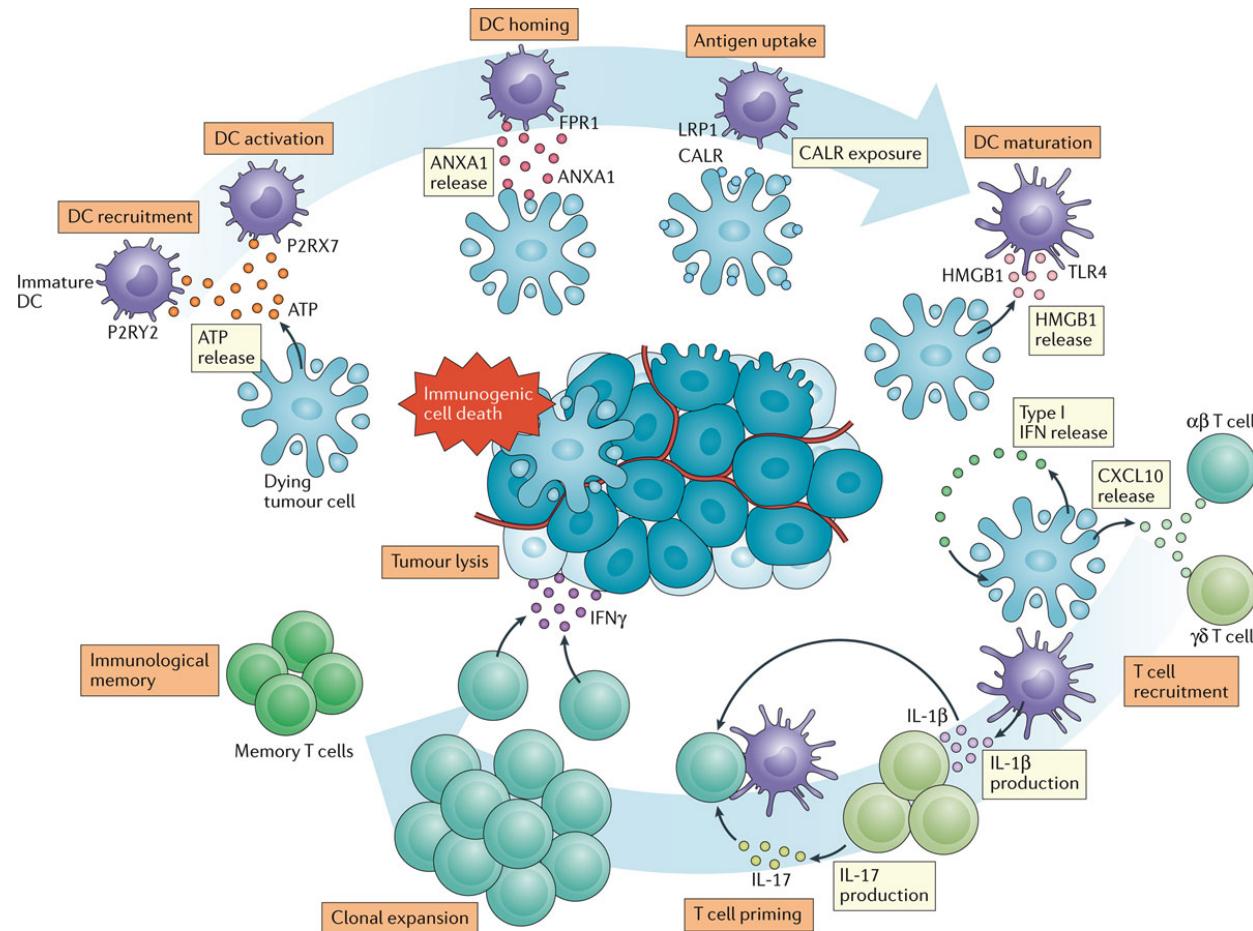
The “Espresso” approach



Cellular adaptation and organismal homeostasis



Immunogenic cell death

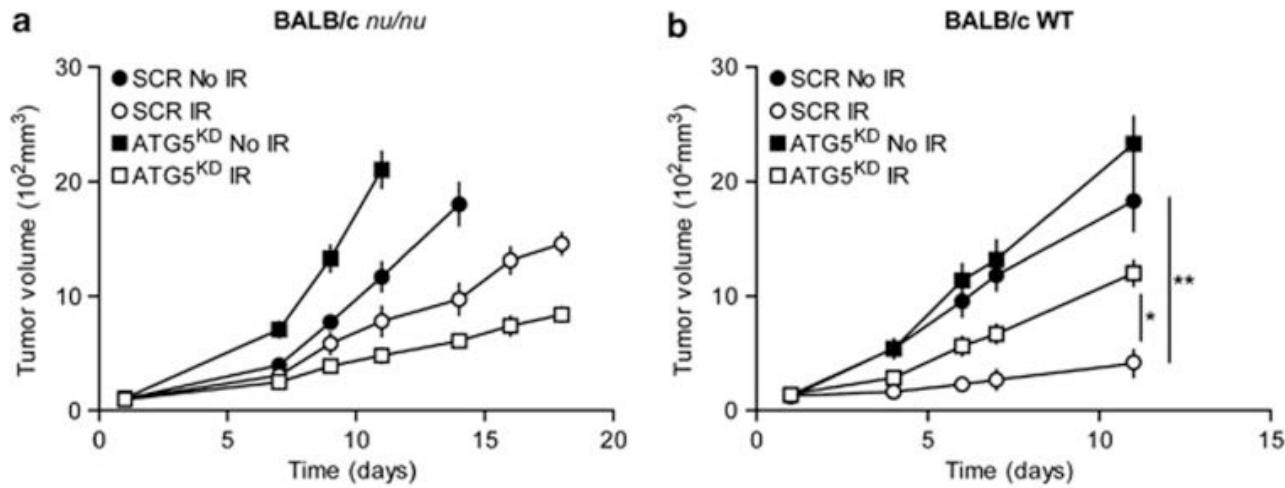


Nature Reviews | Immunology

A peculiar variant of RCD that, in immunocompetent hosts, is sufficient to elicit an adaptive immune response against DCAAs

Autophagy activation for cancer therapy

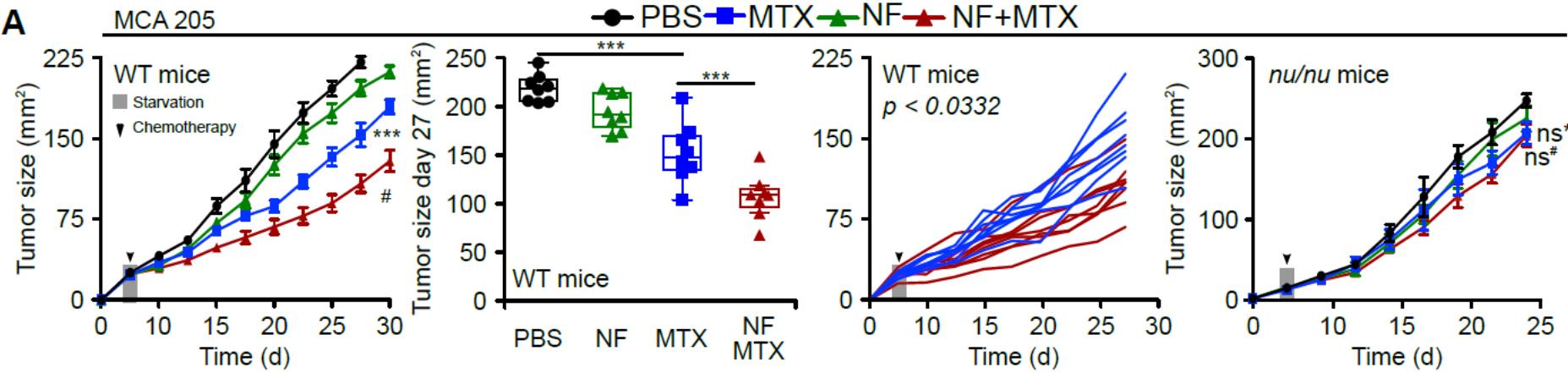
Detrimental effects of autophagy inhibition



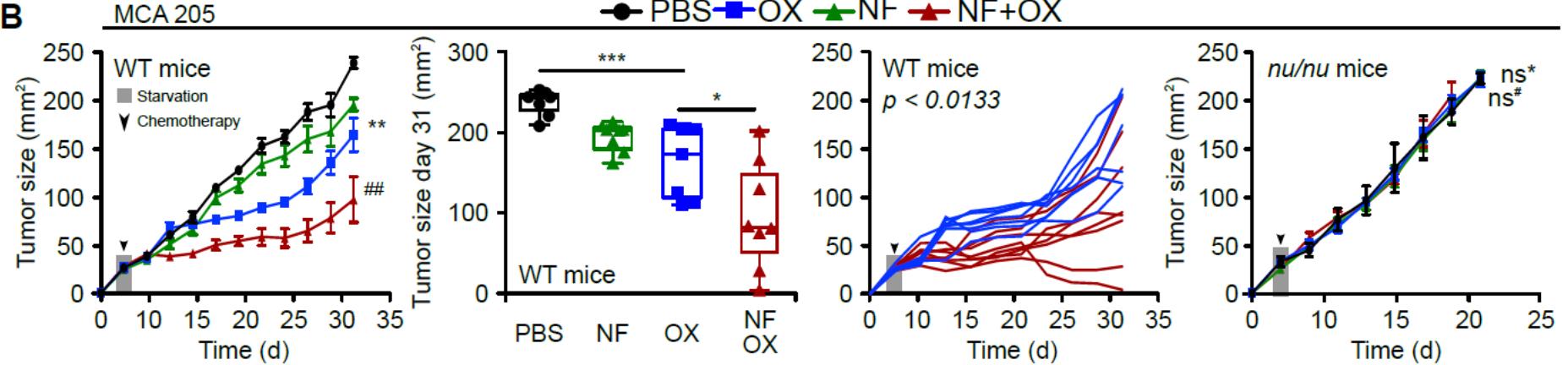
Activation of autophagy for cancer therapy

Anticancer effects of caloric restriction

A



B

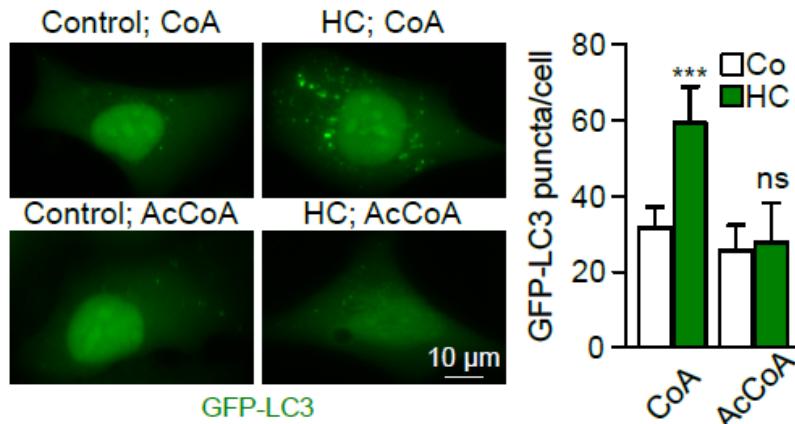


...depend on the immune system

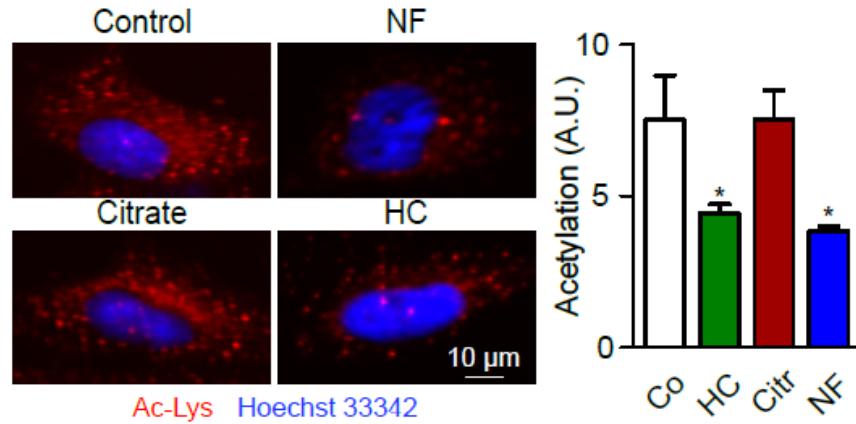
Activation of autophagy for cancer therapy

Molecules that mimic the cellular effects of fasting
but do **NOT** induce a sizeable weight loss

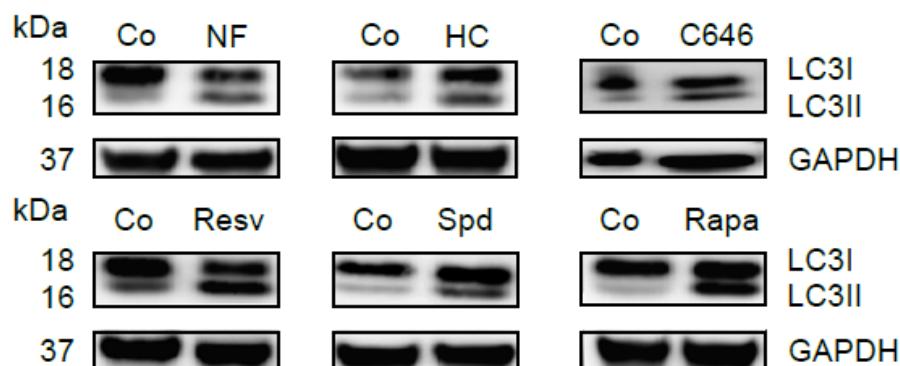
A



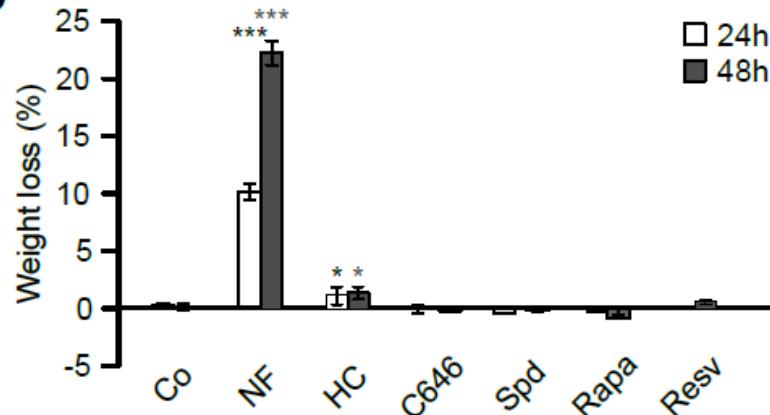
B



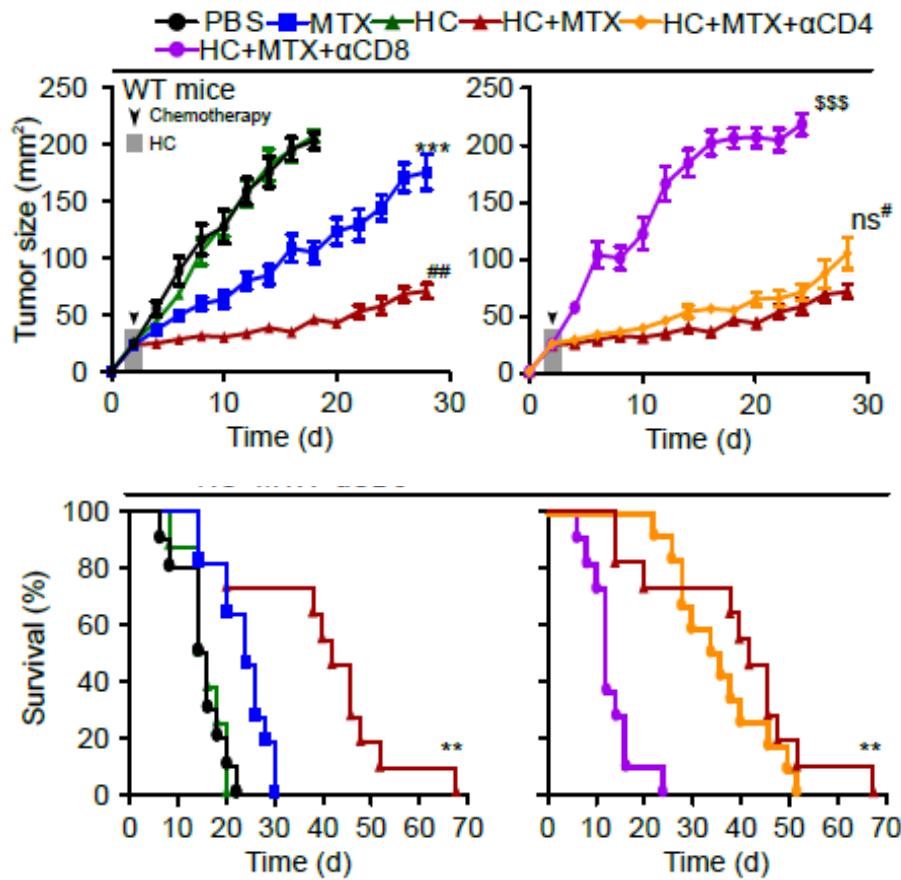
C



D



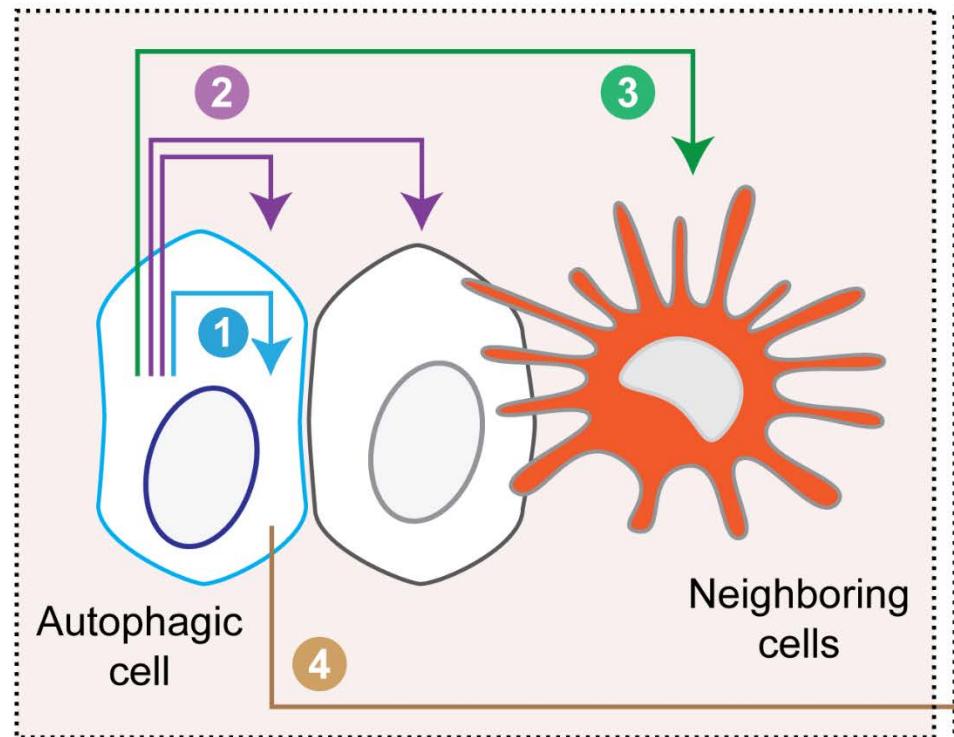
Activation of autophagy for cancer therapy



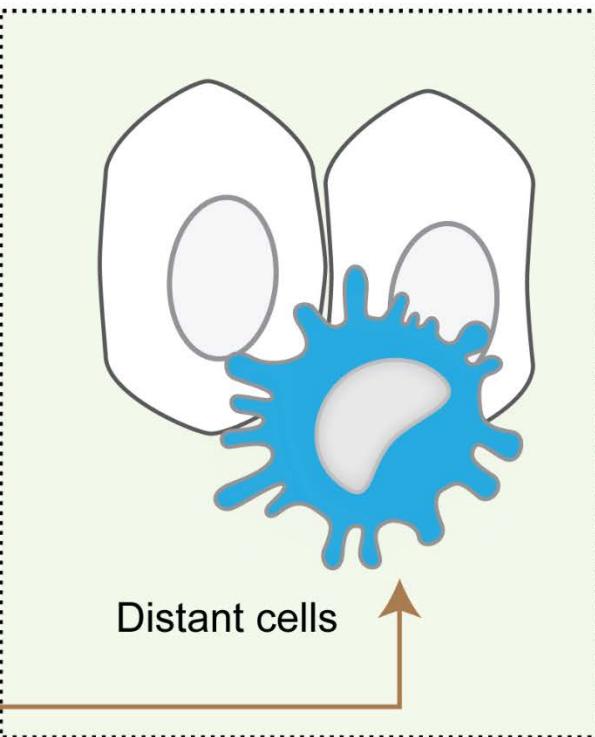
...also in models of carcinogen-driven breast cancer

Not as simple as it looks like

Local microenvironment



Distant microenvironment



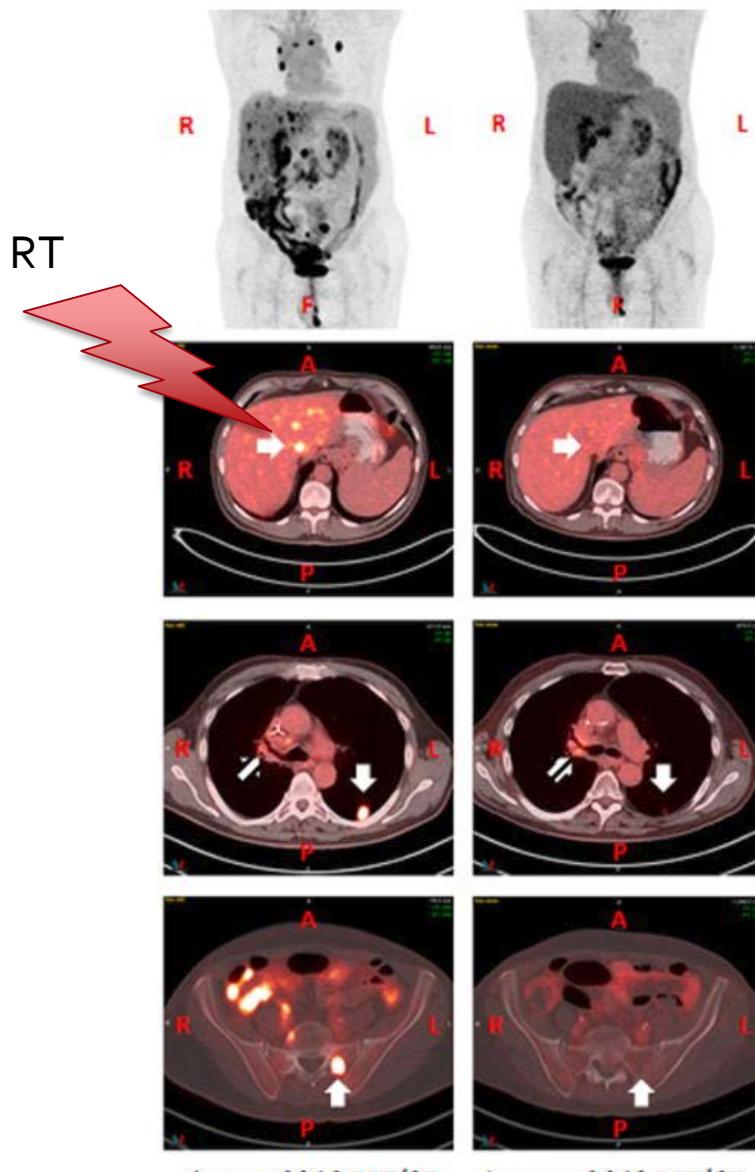
1 Cell-autonomous

2 Homologous autocrine/paracrine

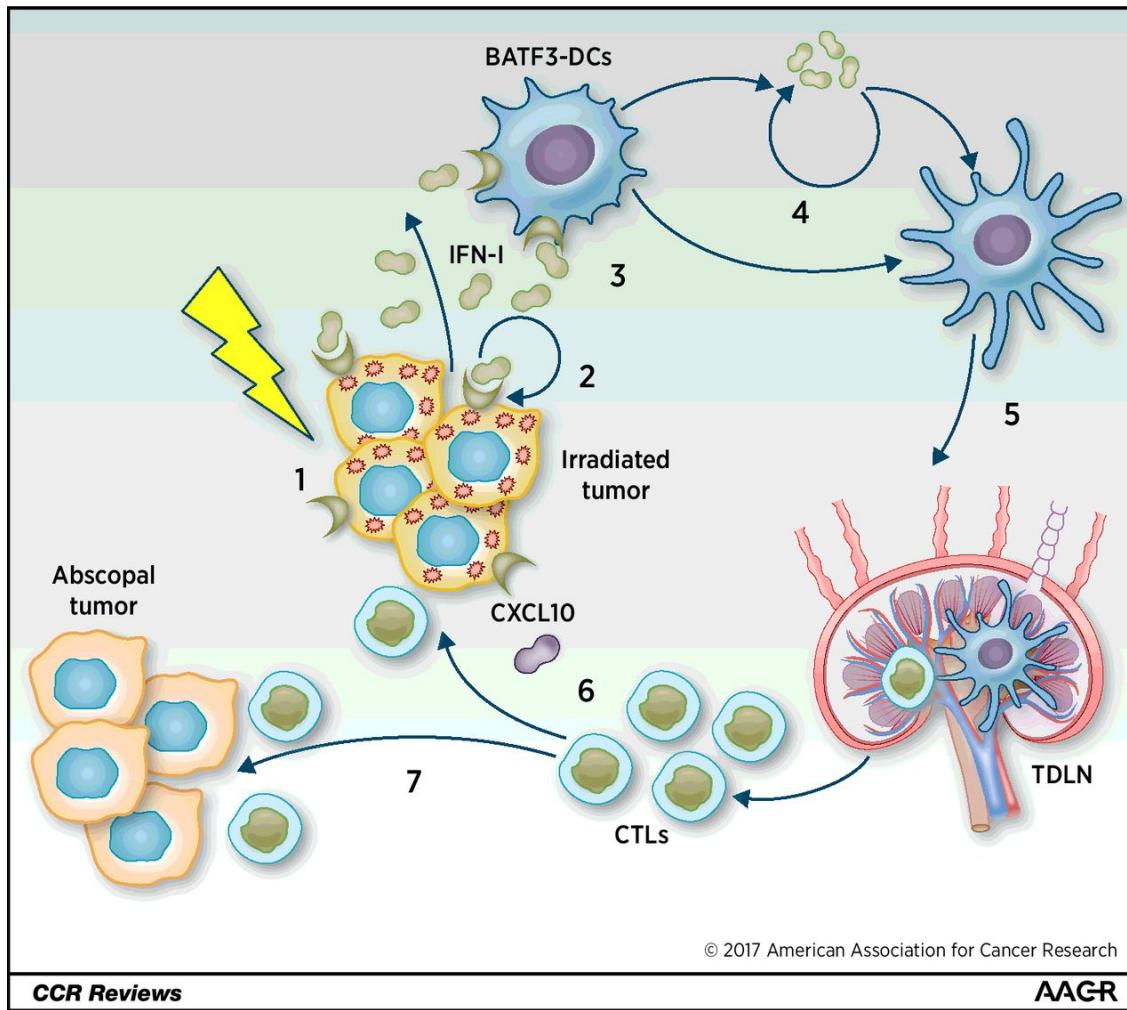
3 Heterologous autocrine/paracrine

4 Heterologous systemic

The abscopal response



Abscopal responses in mice require type I IFN



Autophagy inhibits type I IFN secretion

Published online: March 1, 2018

Article



THE
EMBO
JOURNAL

Attenuation of cGAS-STING signaling is mediated by a p6 activator

LETTER

doi:10.1038/nature10992

Thaneas Praba
Maria H Christ
Morten K Skou
Ganes C Sen⁷,
Martin R Jakob

Mitochondrial DNA that escapes from autophagy causes inflammation and heart failure

Takafumi *Cell Death & Differentiation* (2018) 25:782–794
Tomokazu
& Kinya
https://doi.org/10.1038/s41418-017-0017-z

Cell Death &
Differentiation

Heart fail
industrial
is not inv
inflamma

Autophagy induced during apoptosis degrades mitochondria and inhibits type I interferon secretion

Lisa M. Lindqvist
Jonathan S. Oakh

LETTER

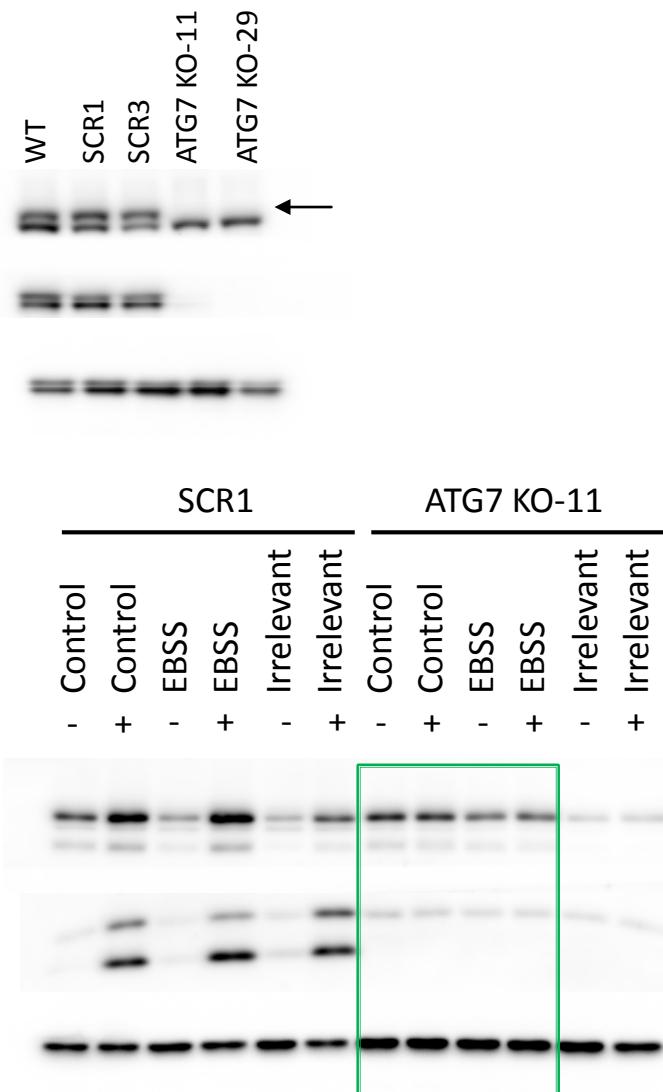
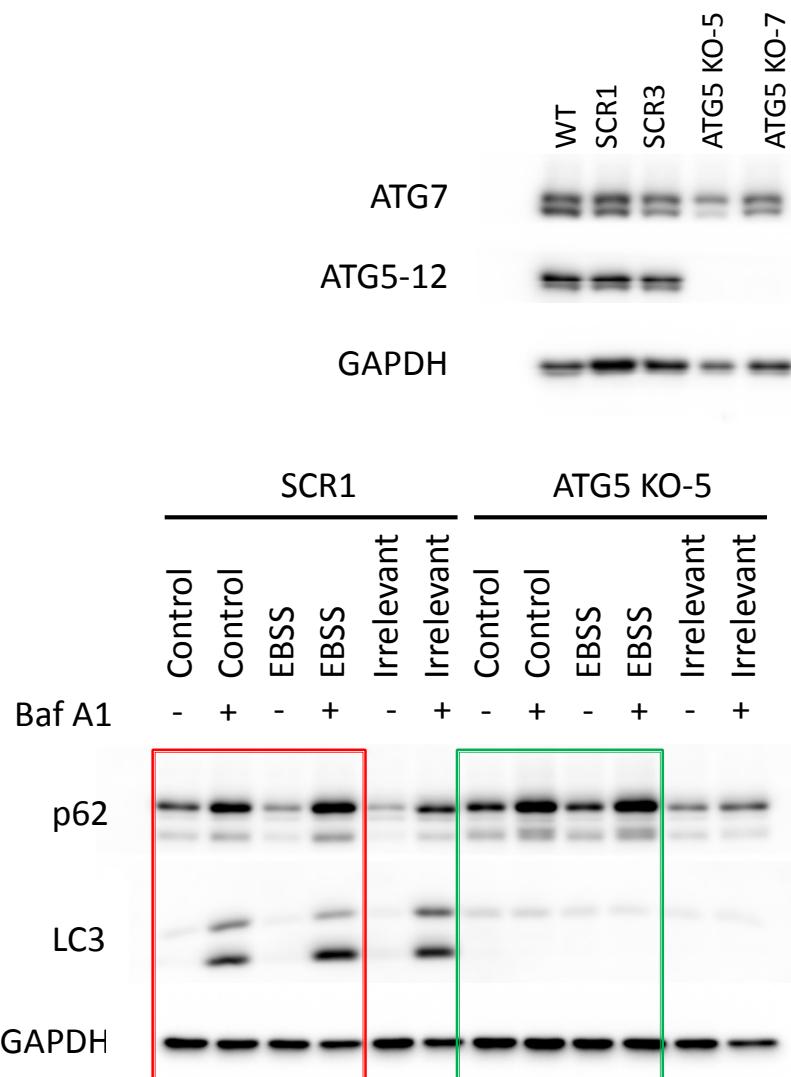
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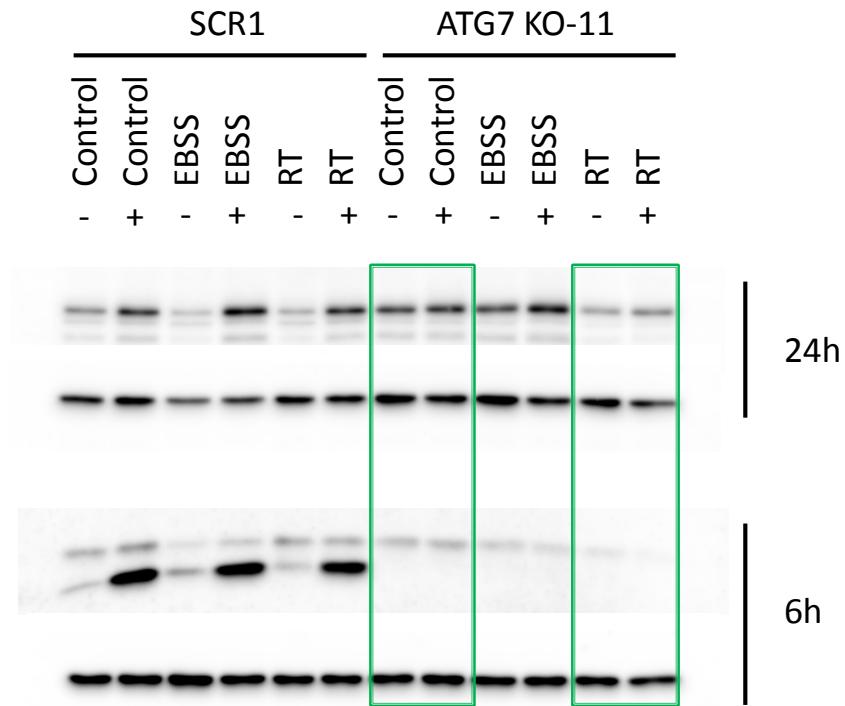
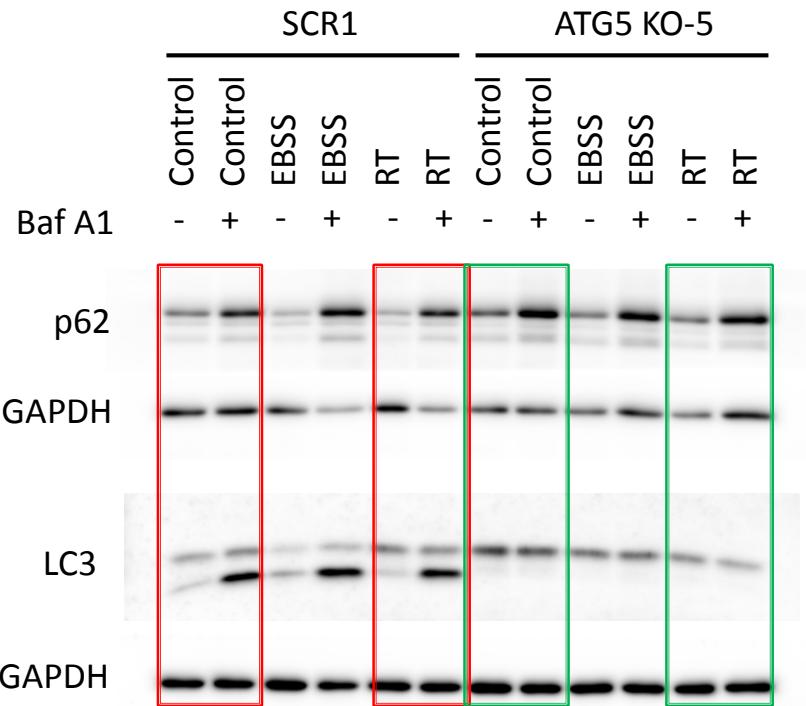
Parkin and PINK1 mitigate STING-induced inflammation

Danielle A. Sliter¹, Jennifer Martinez², Ling Hao¹, Xi Chen³, Nuo Sun⁴, Tara D. Fischer¹, Jonathon L. Burman¹, Yan Li⁵, Zhe Zhang¹, Derek P. Narendra⁶, Huaibin Cai³, Max Borsig⁷, Christine Klein⁷ & Richard J. Youle^{1*}

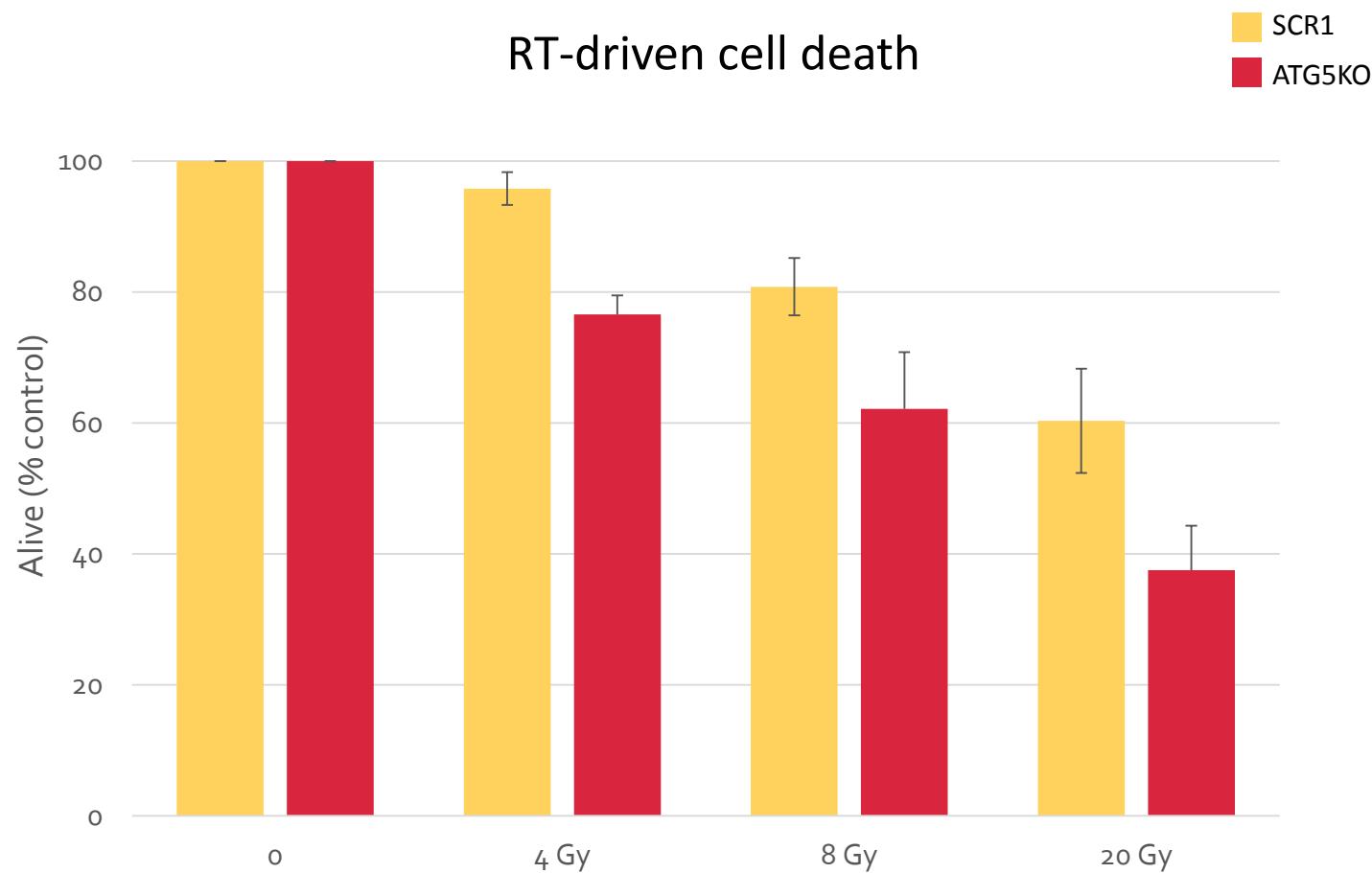
CRISPR model of autophagic deficiency



RT drives bona fide autophagic flux

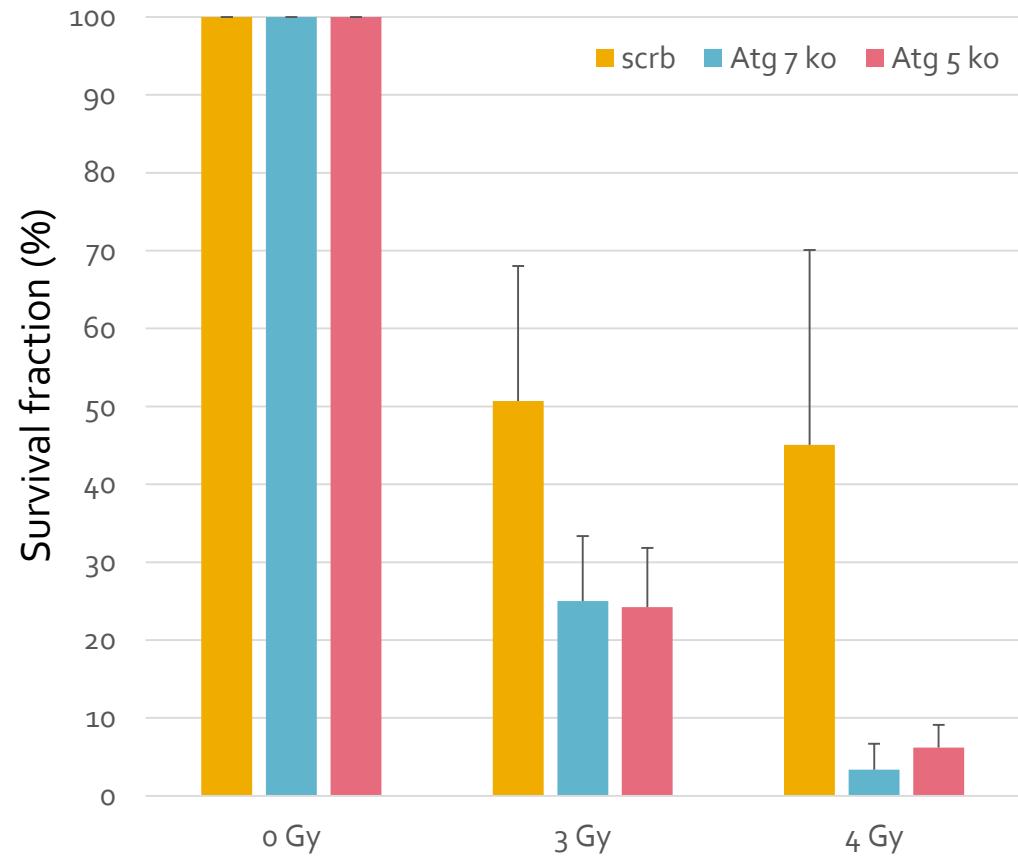
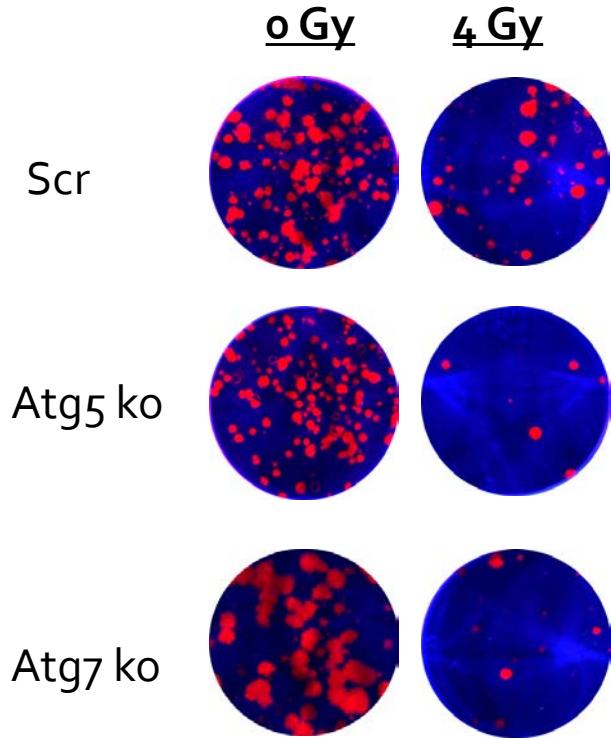


Autophagy supports cancer cell survival

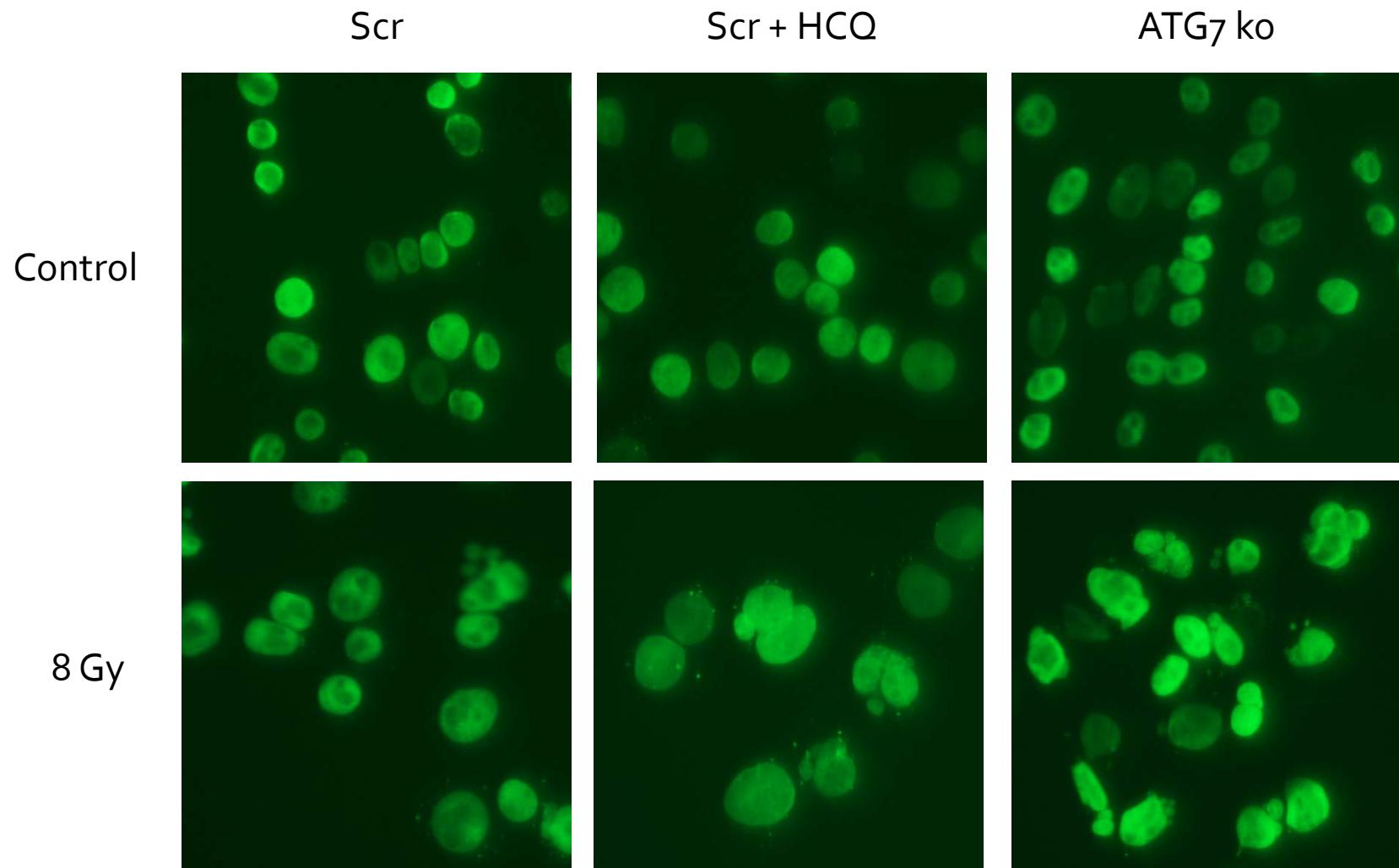


Autophagy supports cancer cell survival

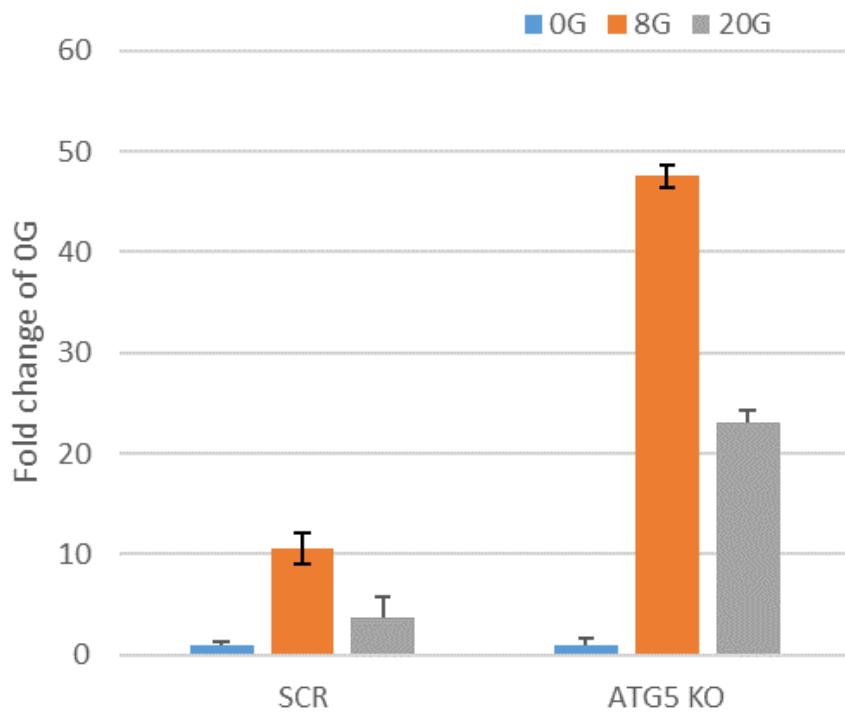
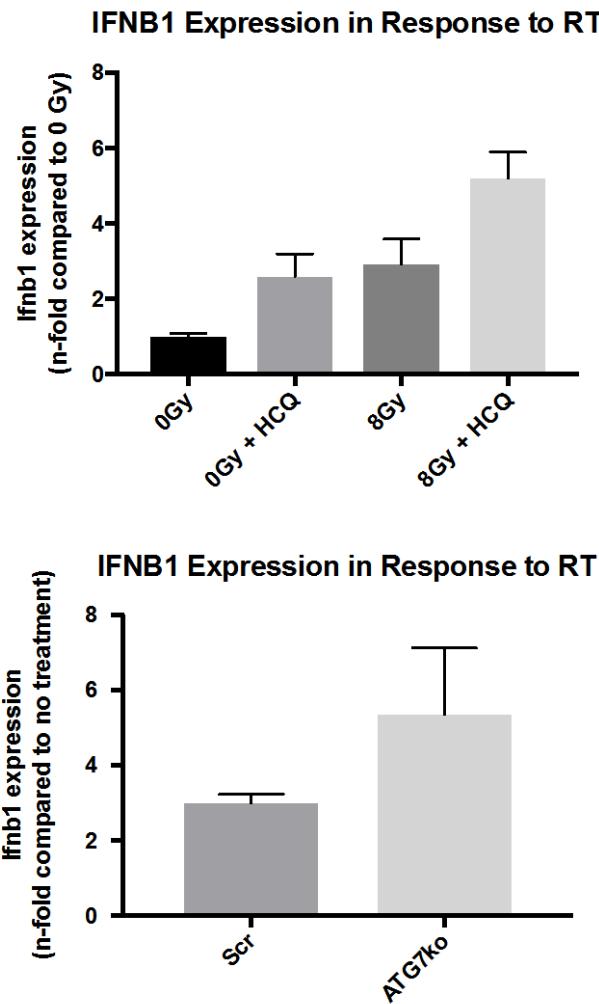
Clonogenic response to RT



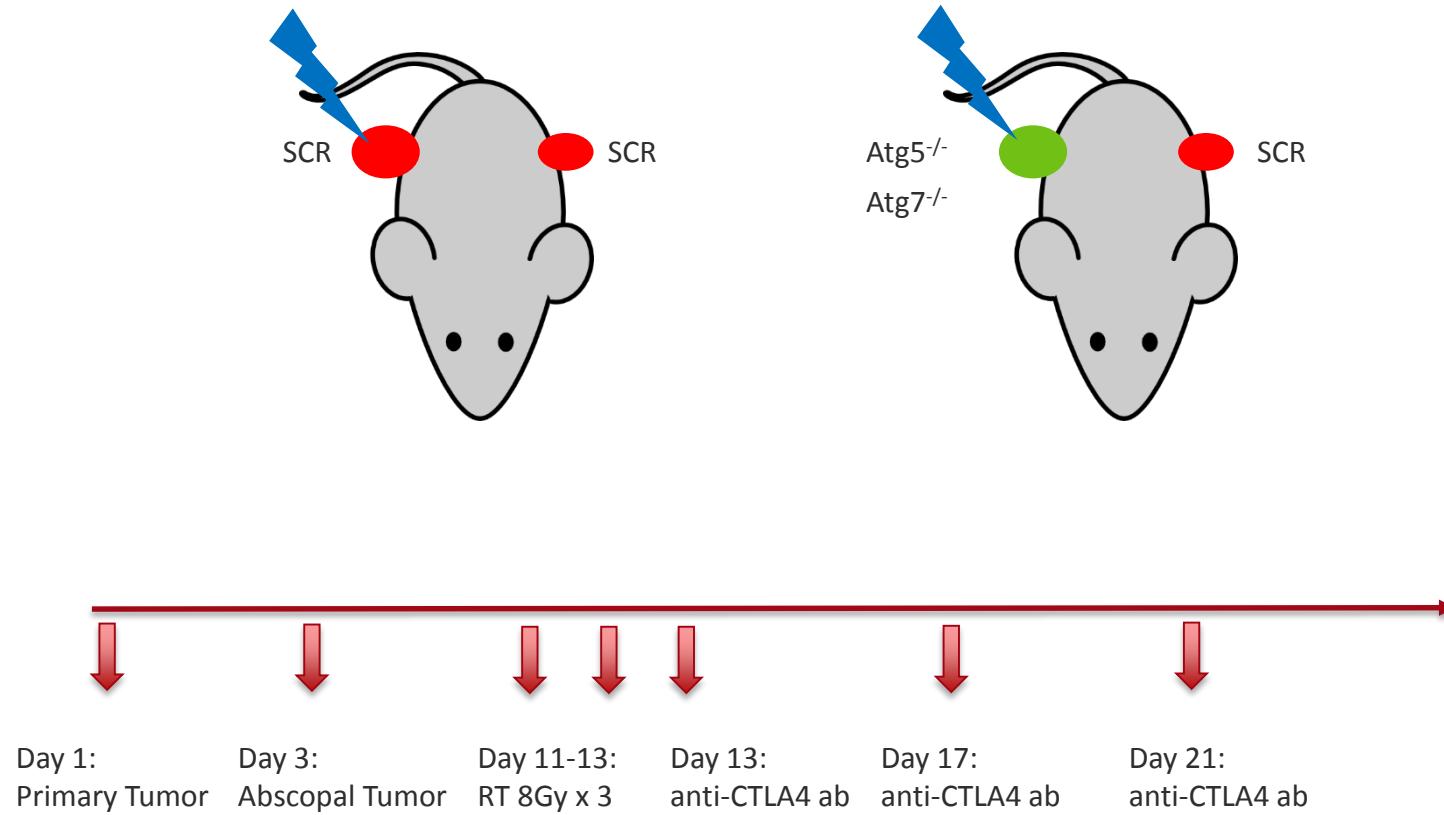
Autophagy limits cytosolic DNA accumulation



Autophagy inhibits RT-driven type I IFN

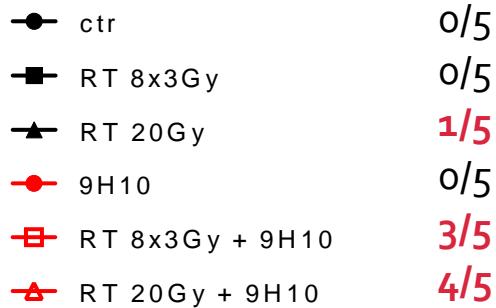


Autophagy inhibits abscopal responses

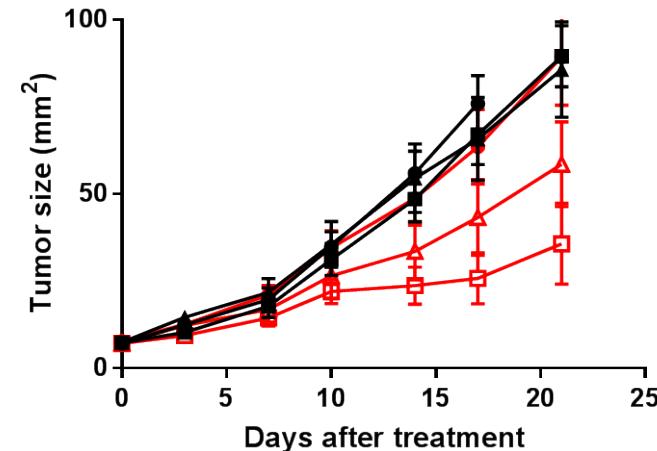
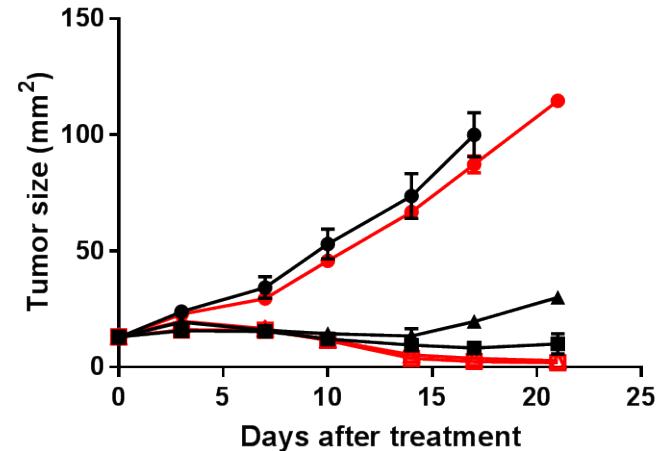


Autophagy inhibits abscopal responses

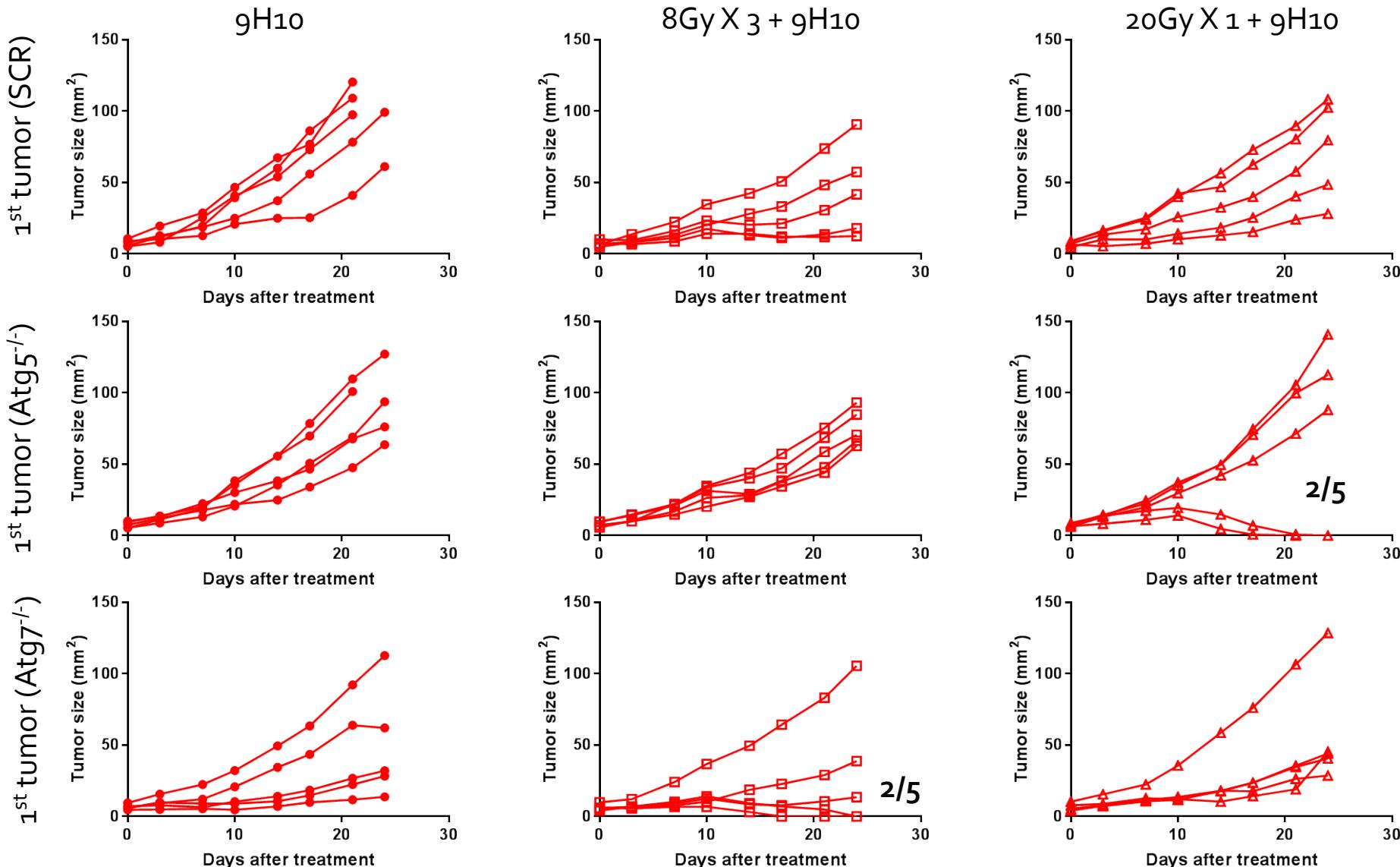
1st tumor (SCR)



2nd tumor (SCR)

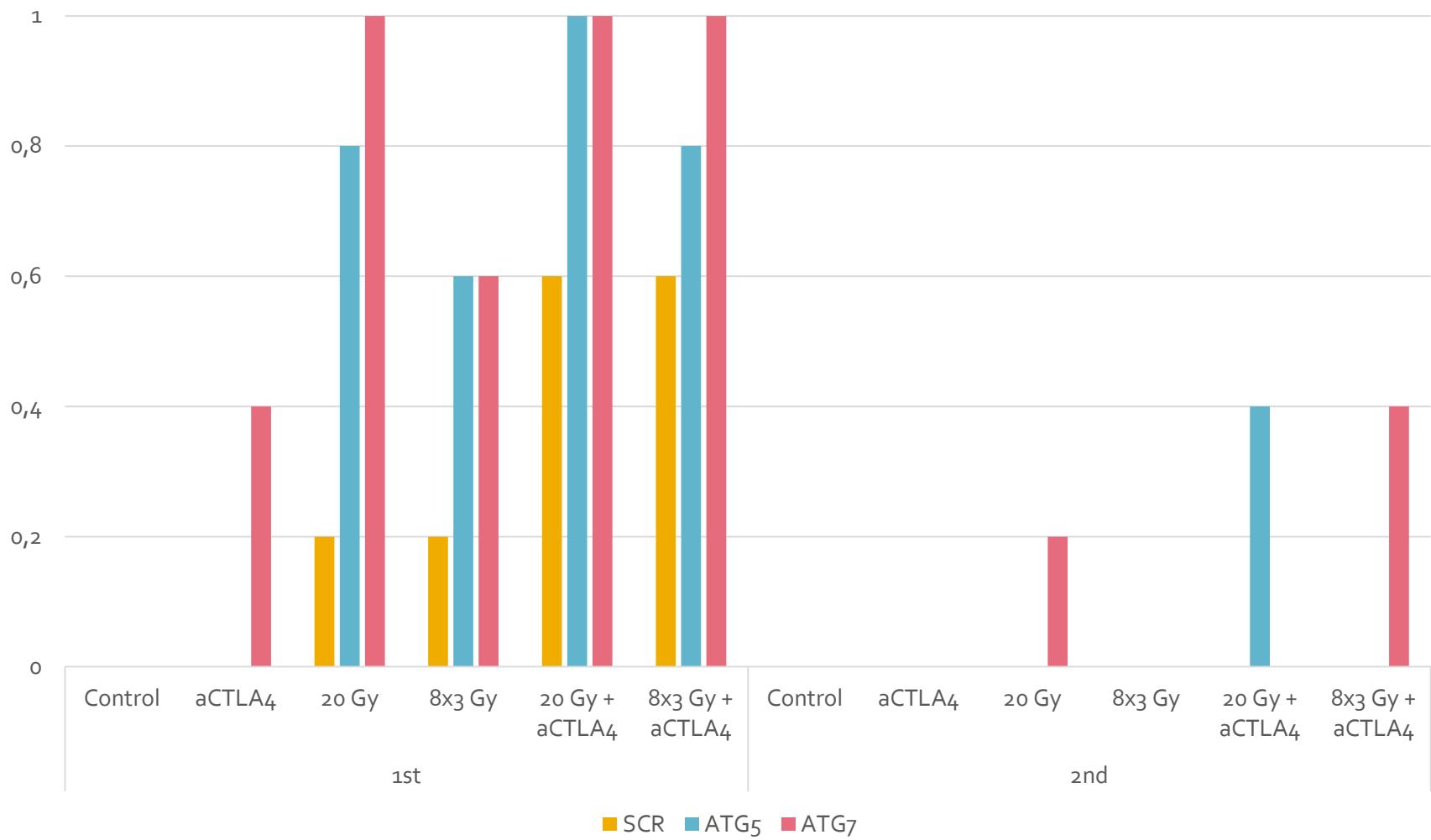


Autophagy inhibits abscopal responses

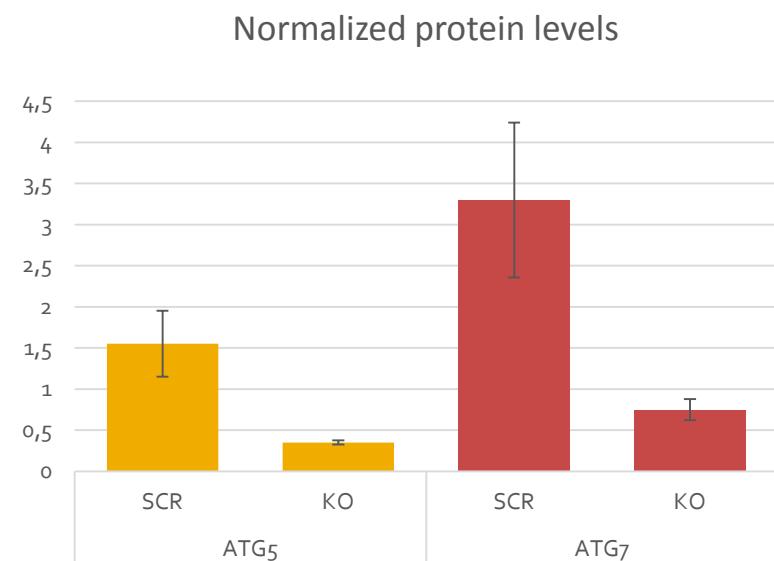
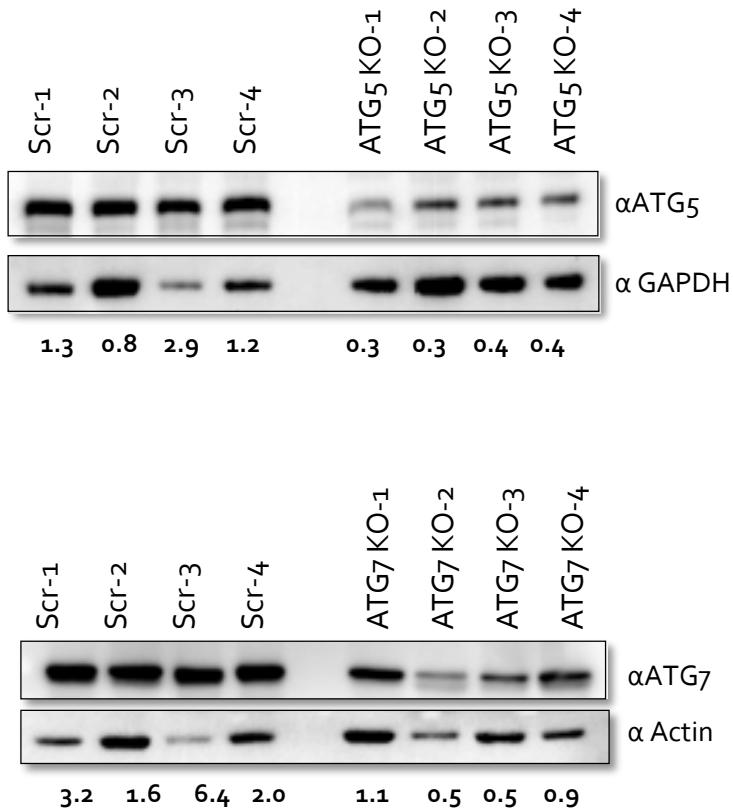


Autophagy inhibits abscopal responses

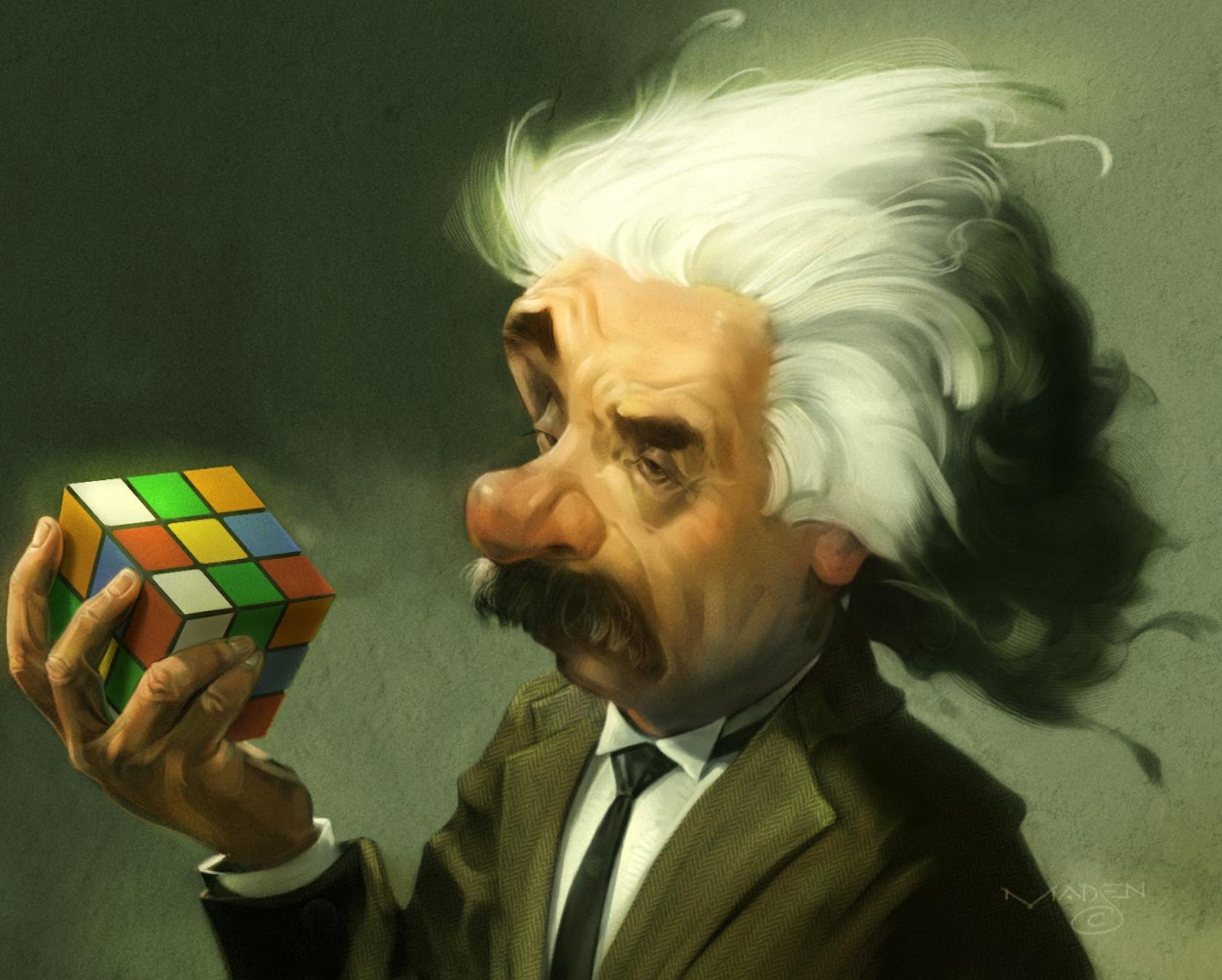
Percentage of tumor eradication



Autophagy inhibits abscopal responses



Autophagy inhibition or activation?



The Starbucks-Espresso dilemma



A lot of cell death



Immunogenic cell death

The Starbucks-Espresso conundrum



A lot of immunogenic cell death (?)

The quantity-quality dilemma

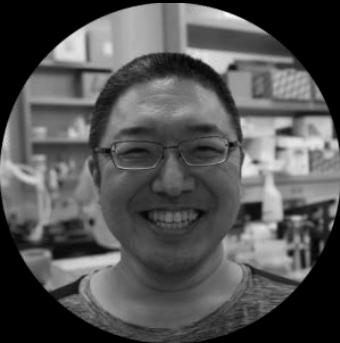


Read the room!



Rule for New Yorkers #1





*Takahiro
Yamazaki*



*Aitziber
Buqué*



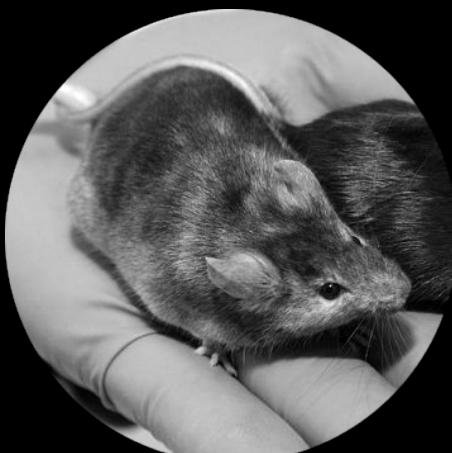
*Ai
Sato*



*Jonathan
Chen*



*Marissa
Rybstein*



*Mr. Mouse
and family*



*Spritz
(#lazygolden)*

Acknowledgements

The Kroemer Lab

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Karsten Pilones

Nils Rudqvist

Erik Wennerberg

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Medicine**



Ilio Vitale

Chema Bravo-San Pedro