

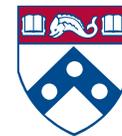
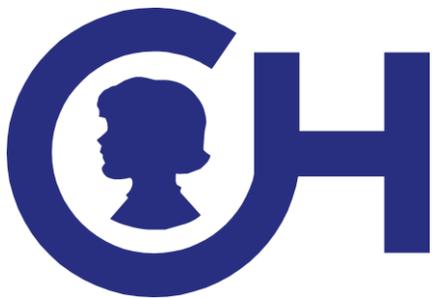


Society for Immunotherapy of Cancer



T cell-intrinsic and -extrinsic determinants of response to CAR T cell therapy

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Disclosure Information

Jos Melenhorst

I have the following financial relationships to disclose:

Consultant for: Shanghai Unicar Therapy, Simcere Pharmaceutical

Scientific Advisory Board member for: IASO Biotherapeutics

Grant/Research support and royalties / IPR from: Novartis, NCI, Incyte, Parker Institute for Cancer Immunotherapy, AACR/Lustgarten/SU2C

Honoraria from: None

Speakers bureau: Jefferies, Novartis

Patents: Related to T cell engineering, biomarkers

Employee of: University of Pennsylvania, Children's Hospital of Philadelphia

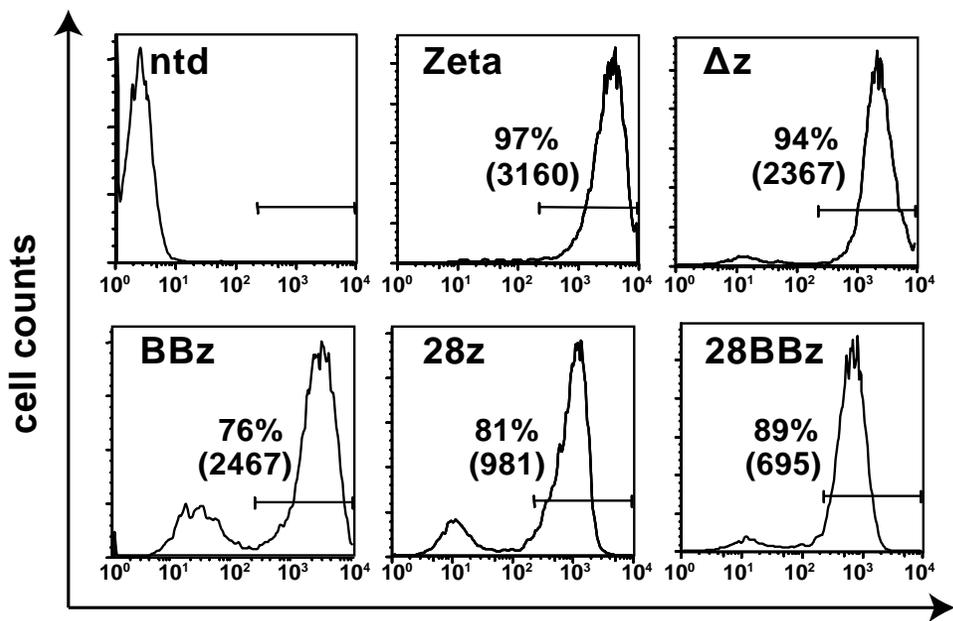
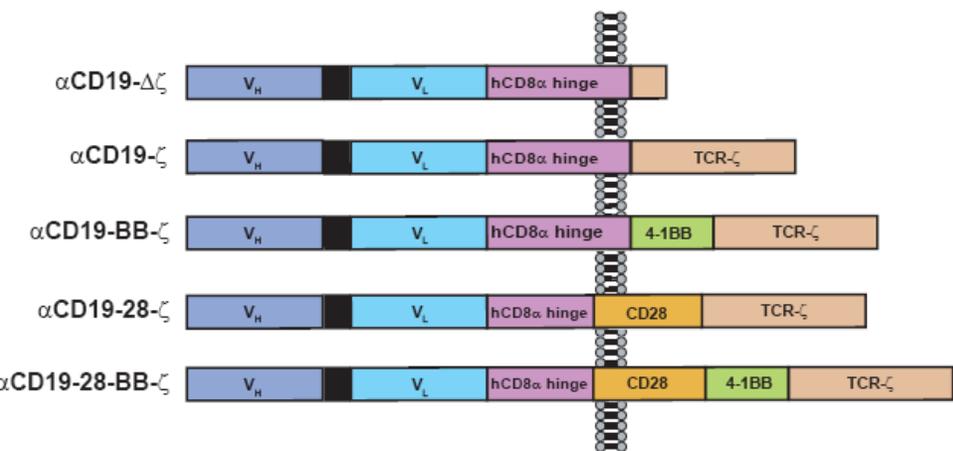
- and -

I will discuss investigational use in my presentation: Tisagenlecleucel/Kymriah

CLL Background

- Chronic lymphocytic leukemia (CLL) accounts for 25% of all newly diagnosed leukemias, with 20,940 new cases diagnosed in the US in 2018
- Average at diagnosis: 70 years
- Male:female ratio is 2:1
- Current drug-based therapies e.g.
 - first and second generation Bruton's tyrosine kinase inhibitors (e.g. Ibrutinib),
 - PI3K δ inhibition (e.g. Idelalisib),
 - Bcl-2 inhibition (e.g. Venetoclax) or
 - antibody-based therapies (e.g. Rituximab; targets CD20)
- ***are not curative and all come with severe clinical and financial toxicities***
- Cell-based therapies, on the other hand, can be curative

CAR Costimulatory Domains Do Appear to Influence T Cell Engraftment – mouse data

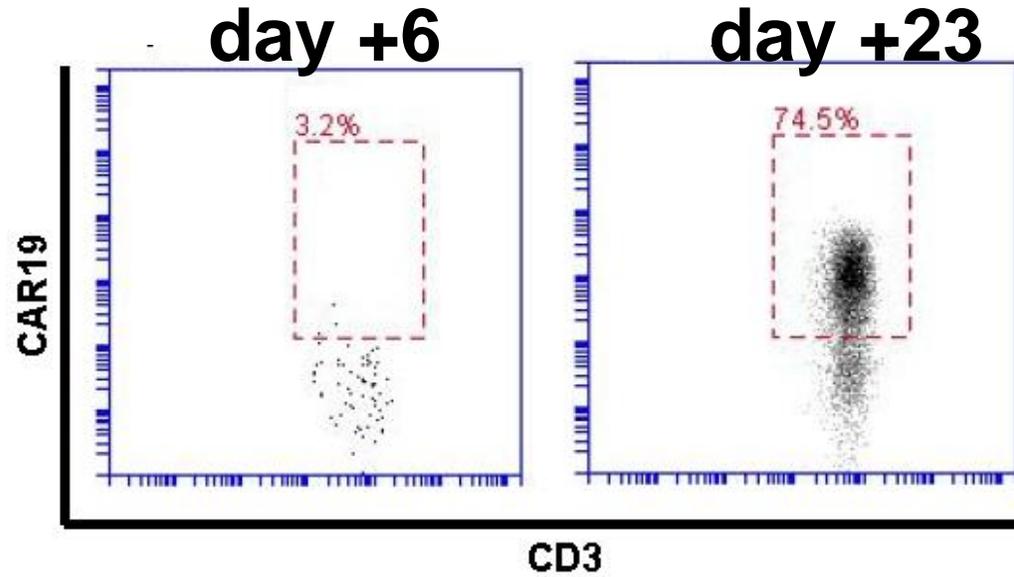


Group	Median Human T-cells/mcL at peak (10/mcL threshold)	Duration of T cell engraftment in peripheral Blood (days)
Mock	26 ± 8	10 ± 4
19-zeta	$124 \pm 41^*$	$32 \pm 5^*$
19-28-zeta	$102 \pm 70^*$	$36 \pm 5^*$
19-28-41BB-zeta	$327 \pm 72^*, **$	$45 \pm 3^*, **$
19-41BB-zeta	$6494 \pm 1180^*, **$	$35 \pm 4^*$
Meso-41BB-zeta	18 ± 5	7 ± 2
Saline	7 ± 3	0

Carpenito; Milone; Barrett

Expansion CAR T Cells & Clinical Efficacy go Hand-in-Hand

T Cells

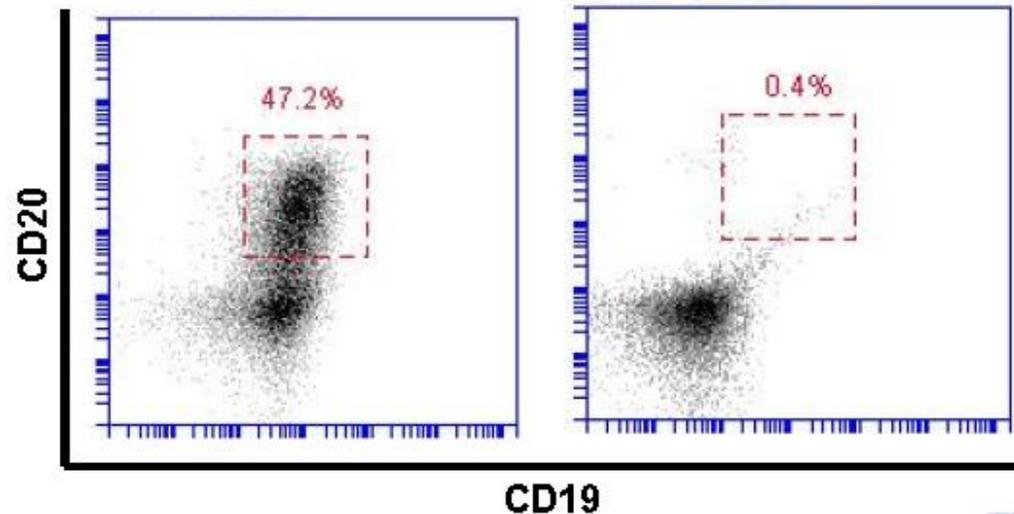


- Deep remission induced in 23 days

- 0% blasts seen

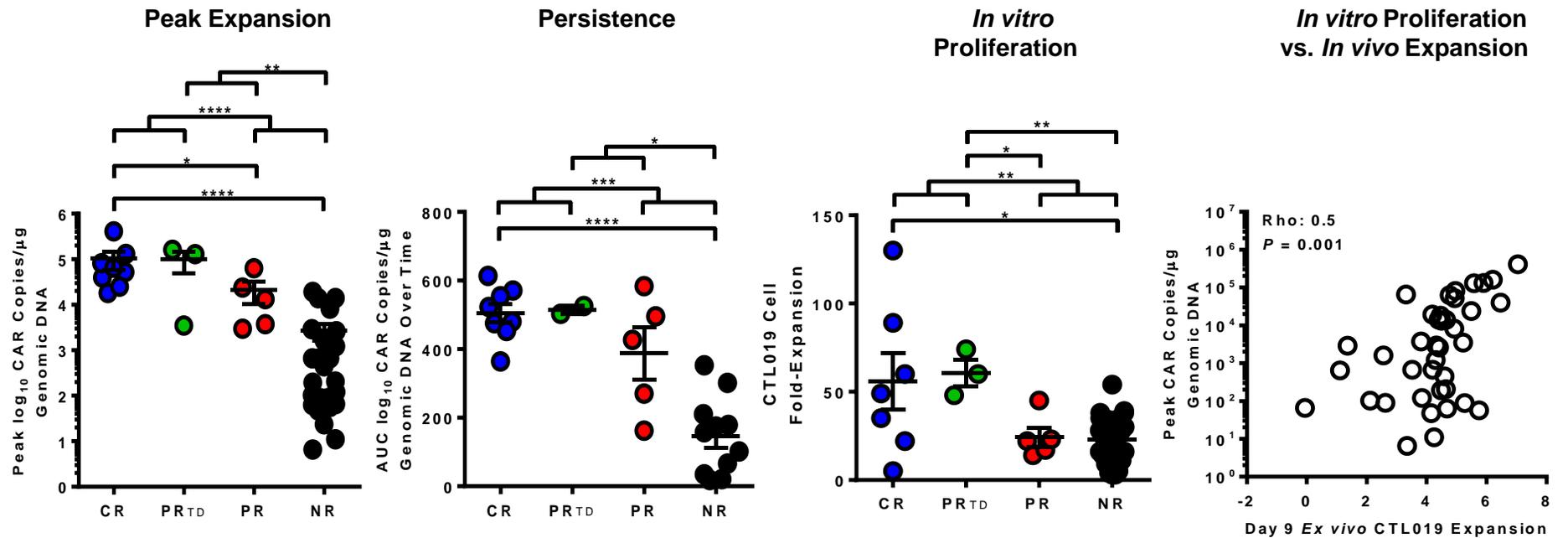
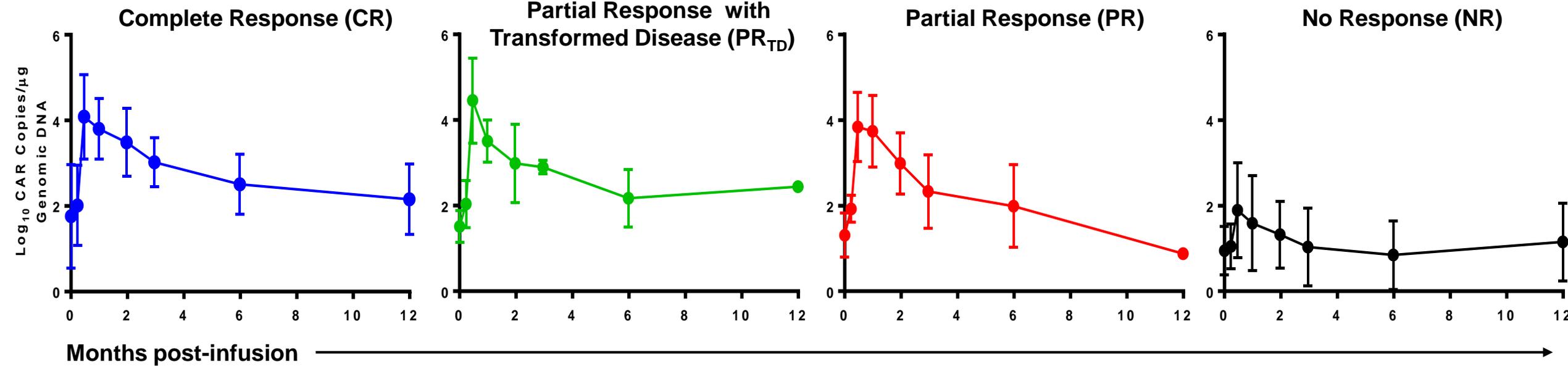
- flow MRD negative

Blasts (ALL)



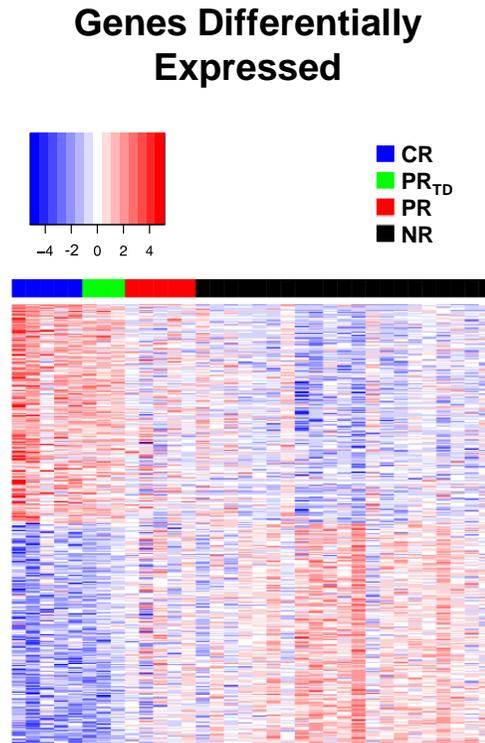
- CR maintained out to 5 mo

Longest Persistence of Functional CAR T-Cells

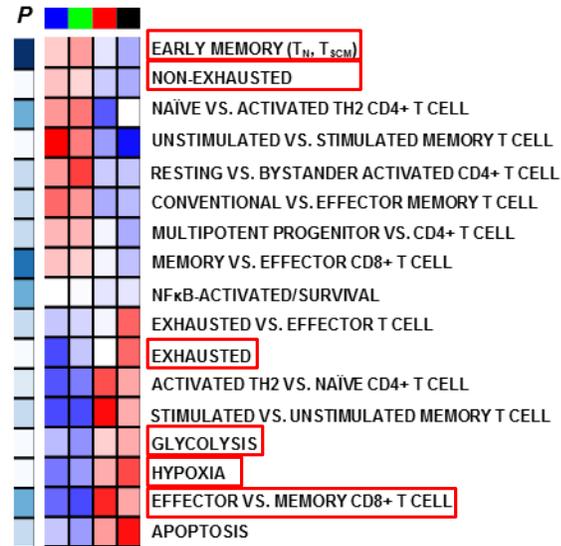
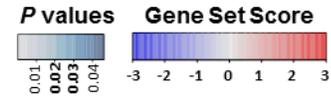


Fraietta et al.,
(2018). *Nature*
Med 24:563-571

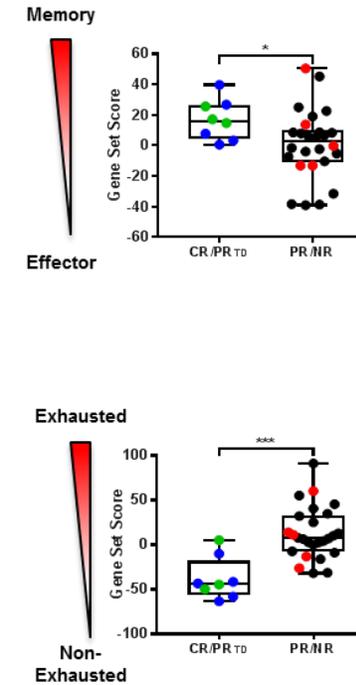
Mechanism(s) of Response to CAR T-Cell Therapy



Selected Pathways

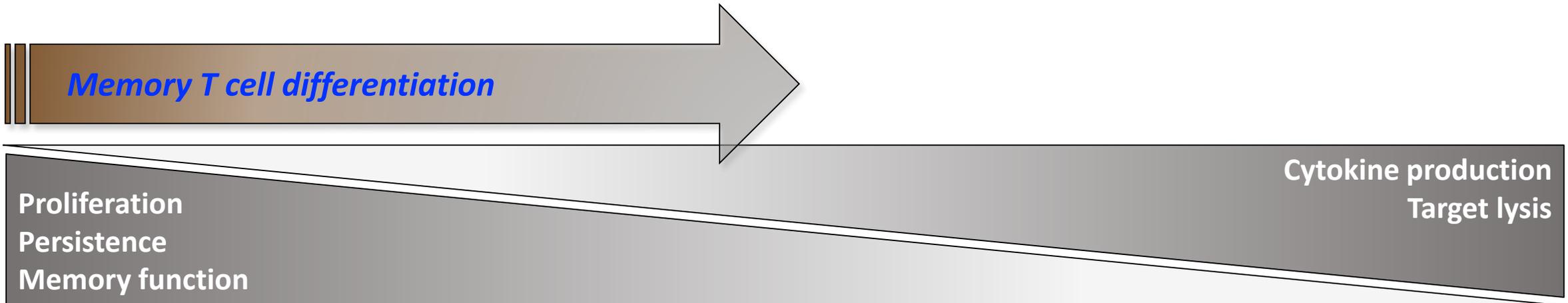
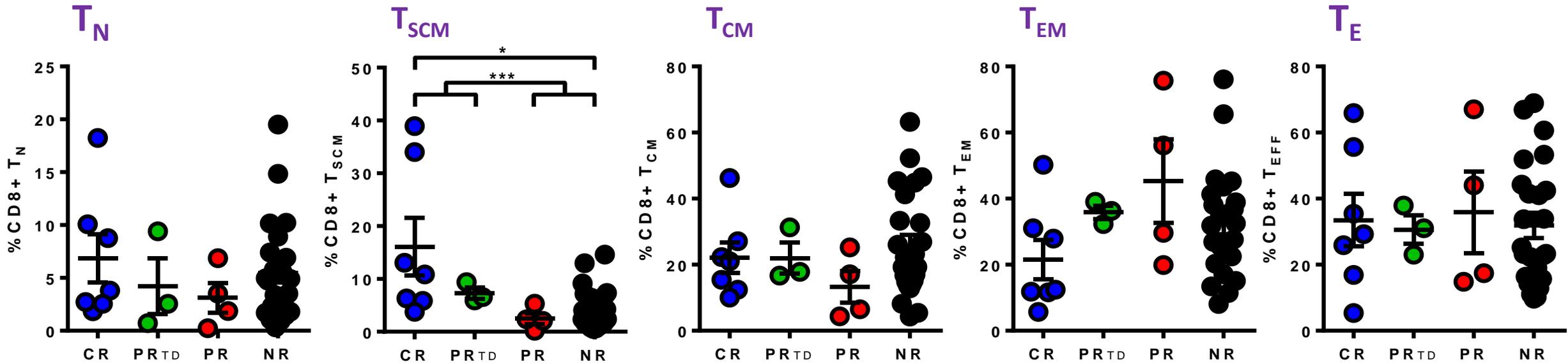


GSEA: T cell Memory and Exhaustion

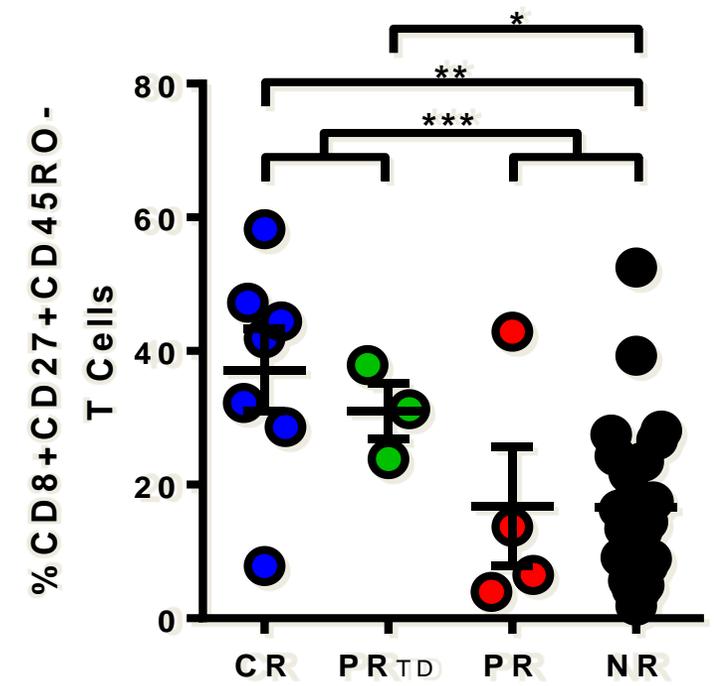
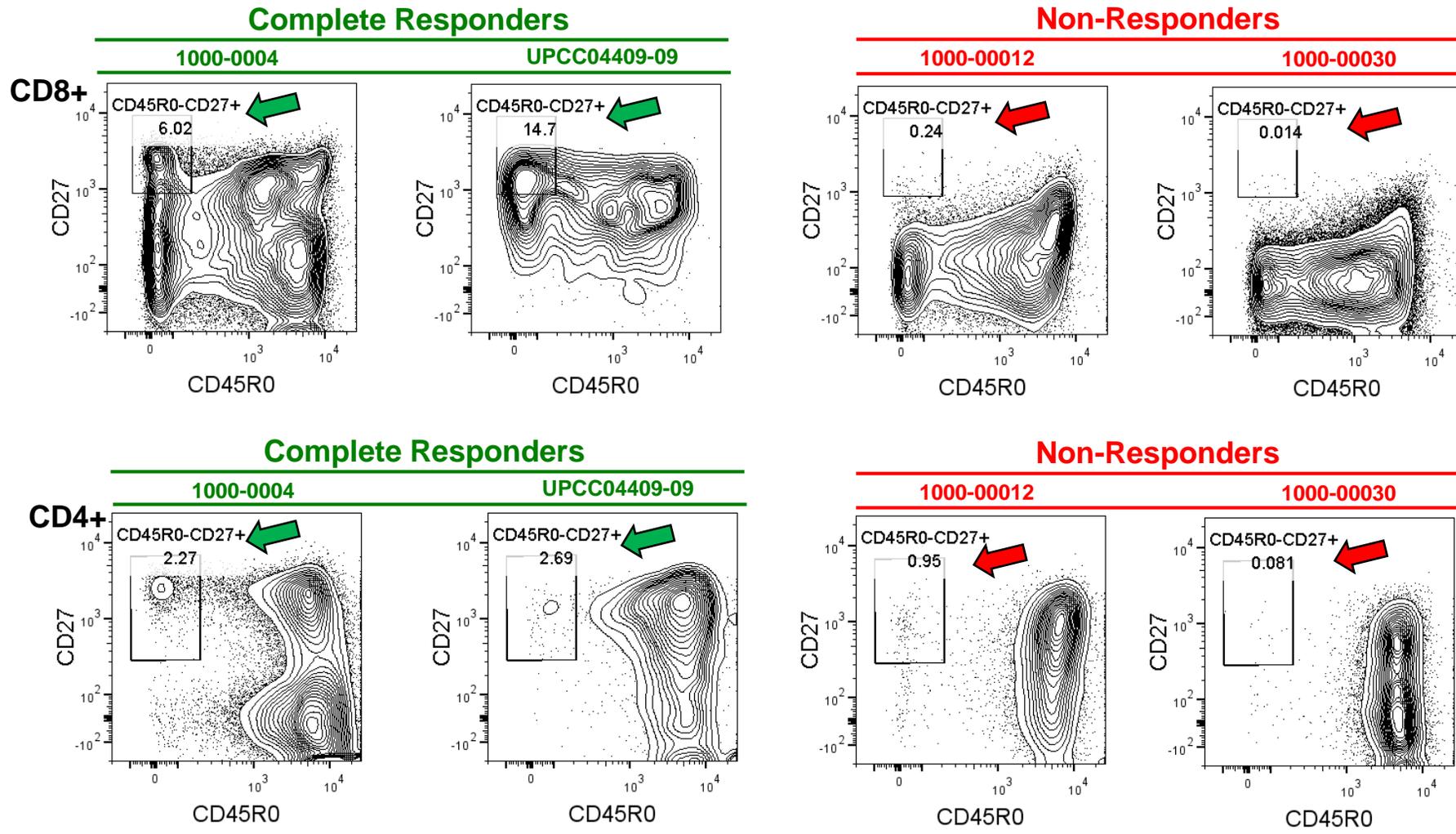


- Gene expression profiles of CTL019 cells generated from CR and PR_{TD} patients exhibit **marked differences** compared to those from PR and NR patients
- Gene set enrichment analysis (GSEA) revealed that CTL019 cells from CR and PR_{TD} patients were enriched in gene expression profiles involved in **early memory differentiation**
- CTL019 cells from PR and NR patients exhibited increased expression levels of key regulators of late **memory** cell as well as effector differentiation, pro-**apoptotic** signaling and **exhaustion**

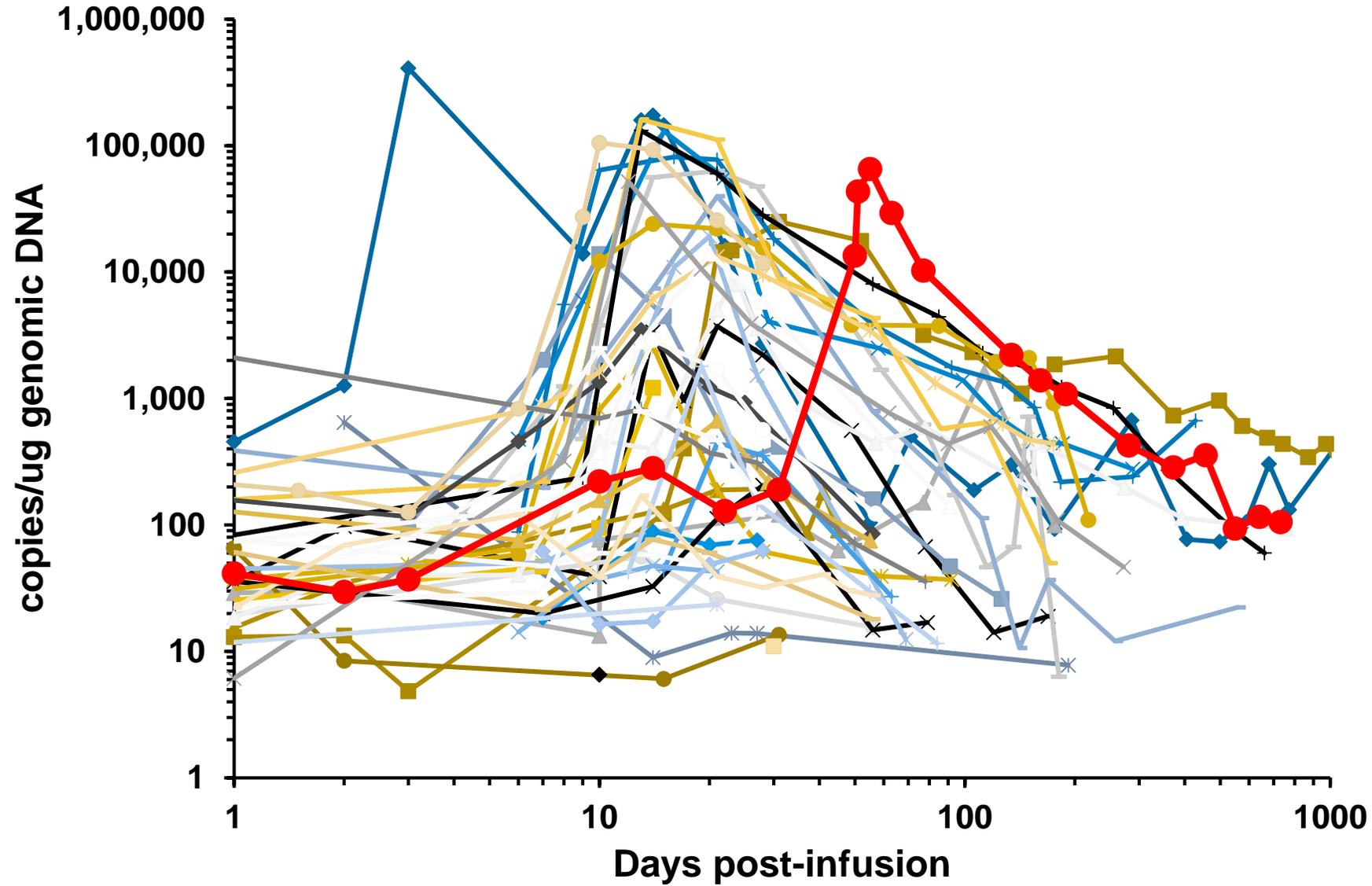
Frequencies of Canonical CD8+ T cell Subsets in Pre-manufactured Cells and Response to CTL019



Analysis of Pre-Manufacturing T Cells Identifies an Immunophenotype Predictive of Response to CTL019

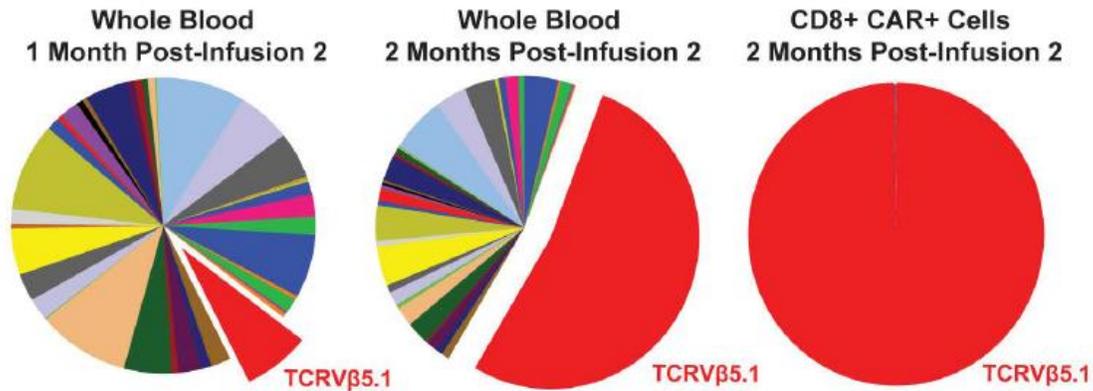


Lessons Learned From Exceptional Cases: CLL Patient 10

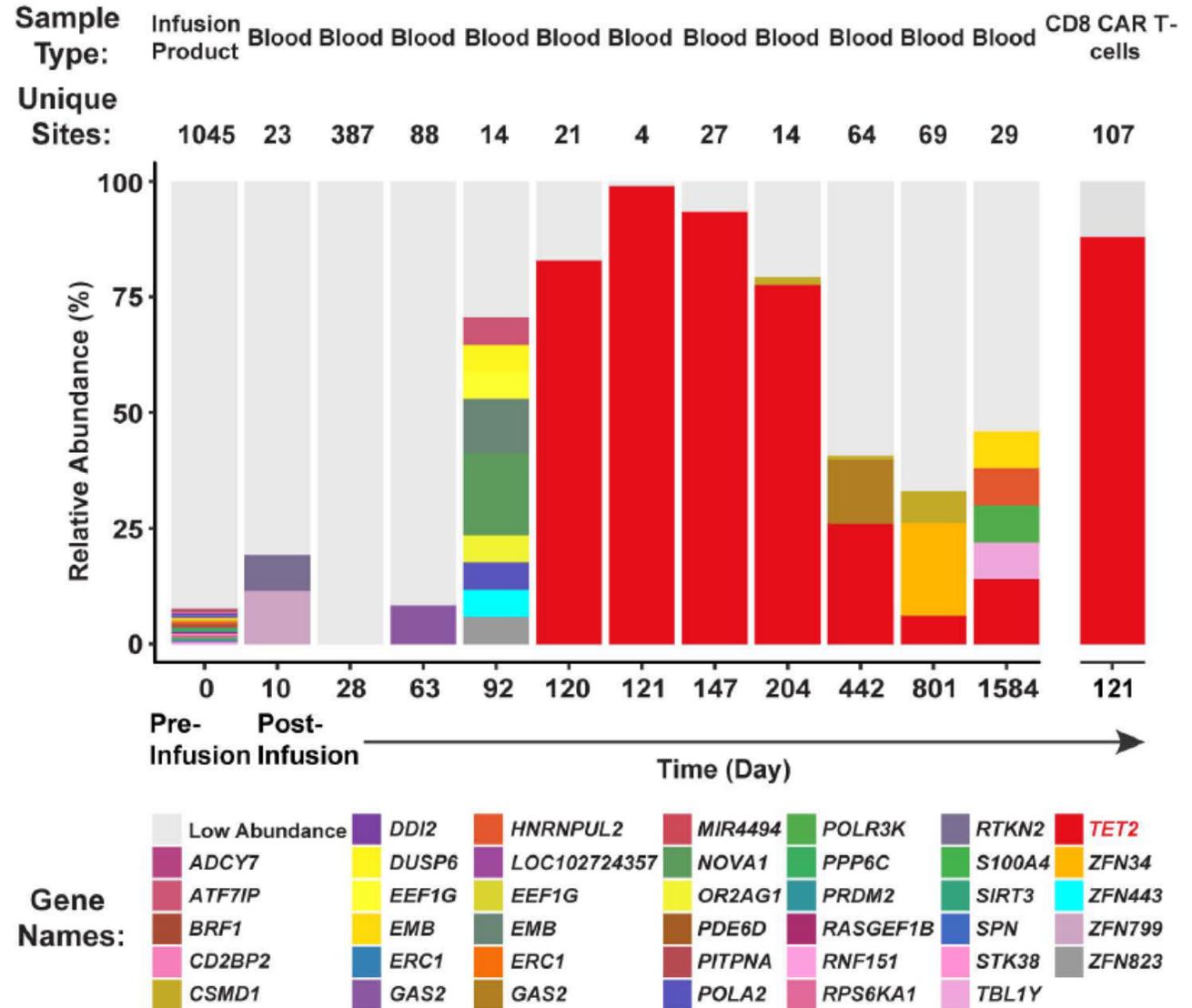
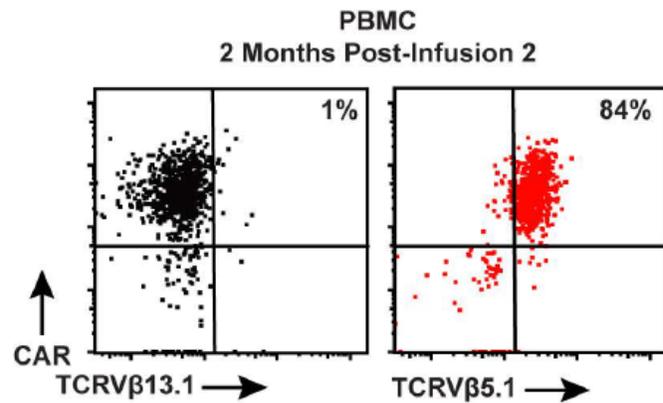


Massive expansion of clonal CART cell population in patient #10

a

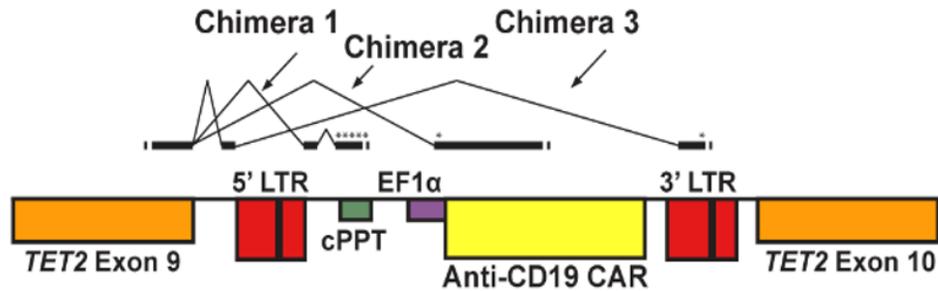


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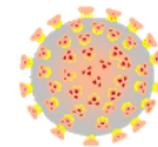
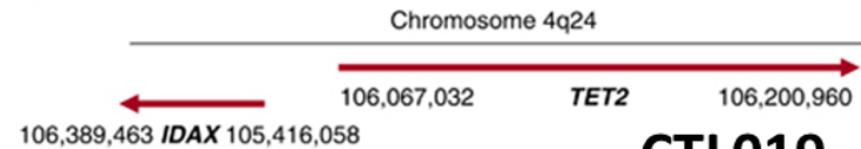


Mapping CAR Integration Site in Pt #10

Single copy of integrated CAR: 4q24



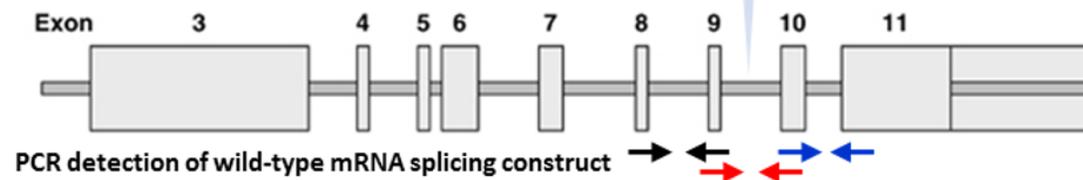
Chimera	Splice Site	Donor Sequence	Sequence	Acceptor Sequence	Sequence
1	1 st	ACAUUG	<u>GUAAGU</u>	CUCUAG	CAGUGG
1	2 nd	GACUGG	UGAG <u>UA</u>	GUUAGG	CAGGGA
2	1 st	ACAUUG	<u>GUAAGU</u>	UUUCAG	GUGUCG
3	1 st	ACAUUG	<u>GUAAGU</u>	UAACAG	GUAGGA
3	2 nd	CAACUA	AUG <u>UAG</u>	GGGGAC	UGGAAG



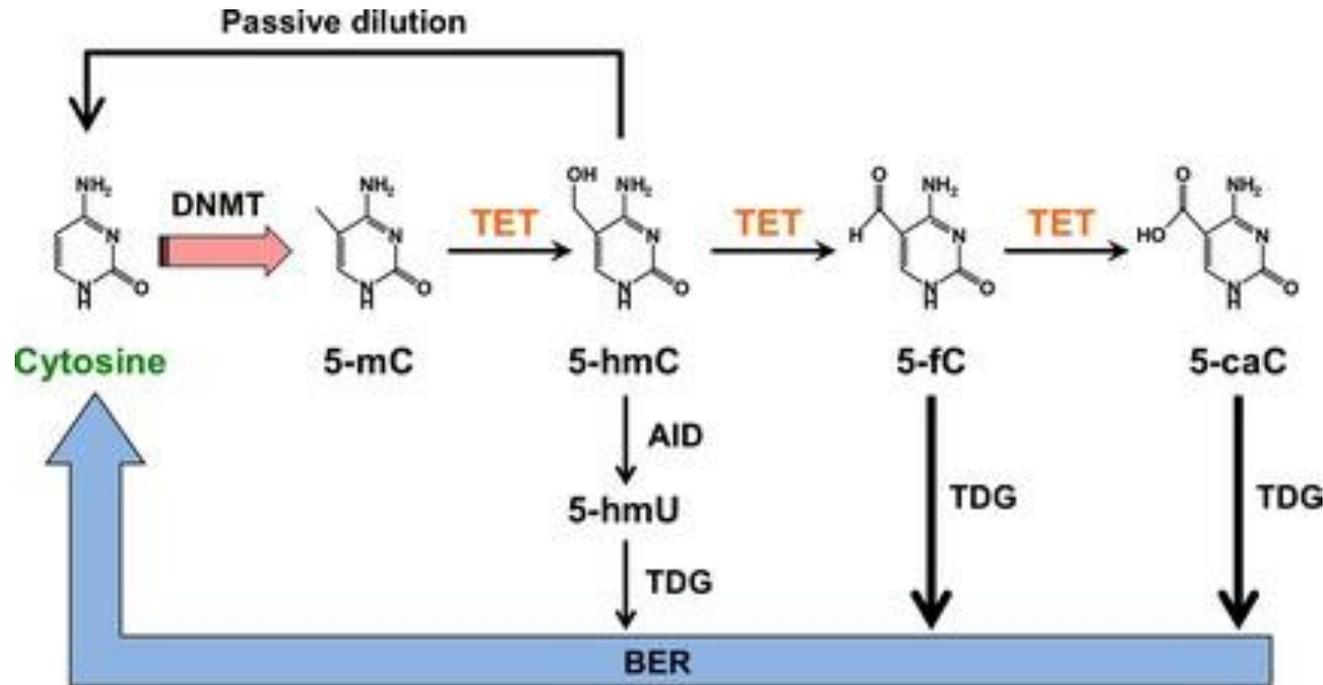
CTL019



2-OG & Fe-binding sites are dependent on exon-11-encoded sequences

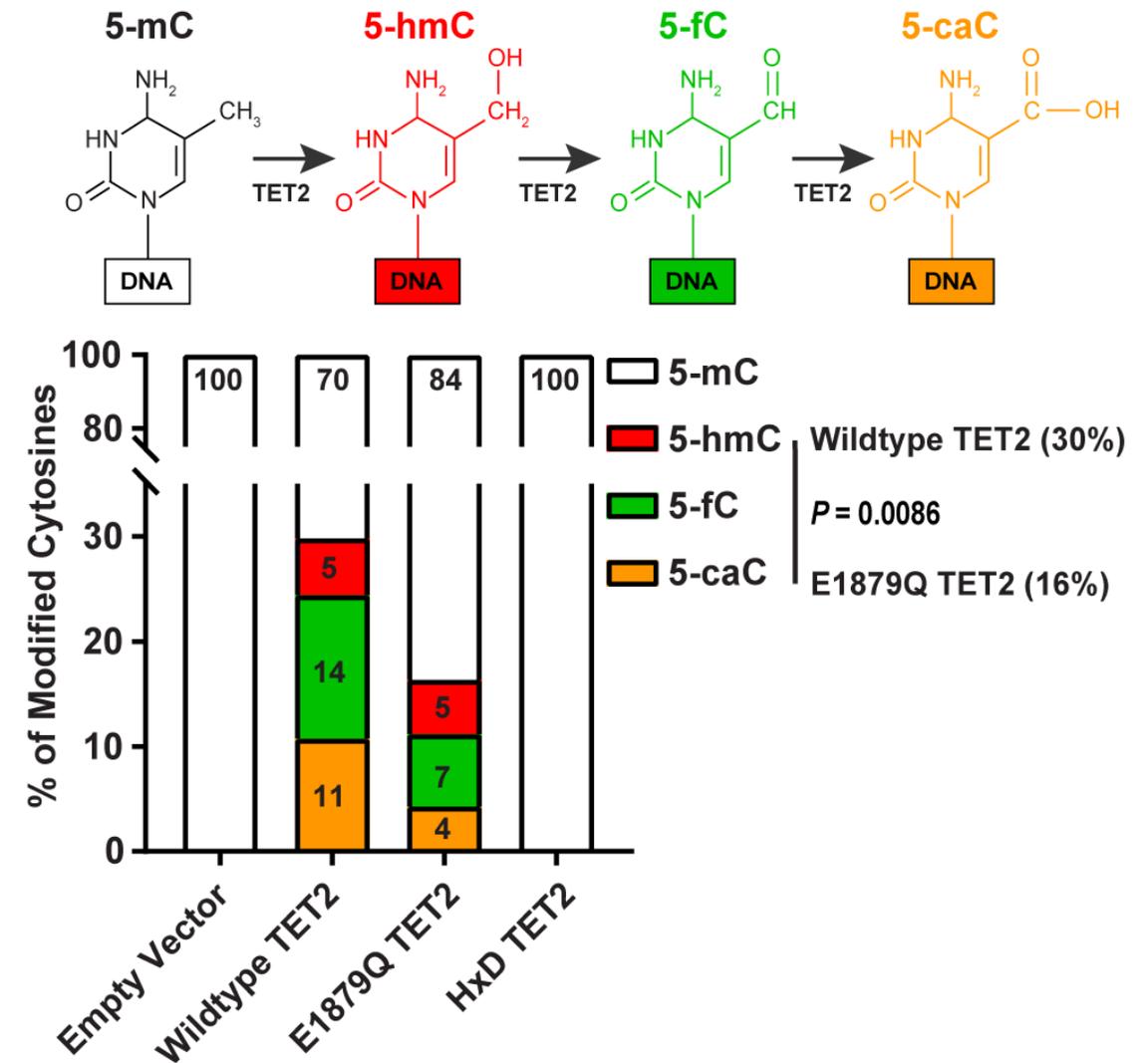
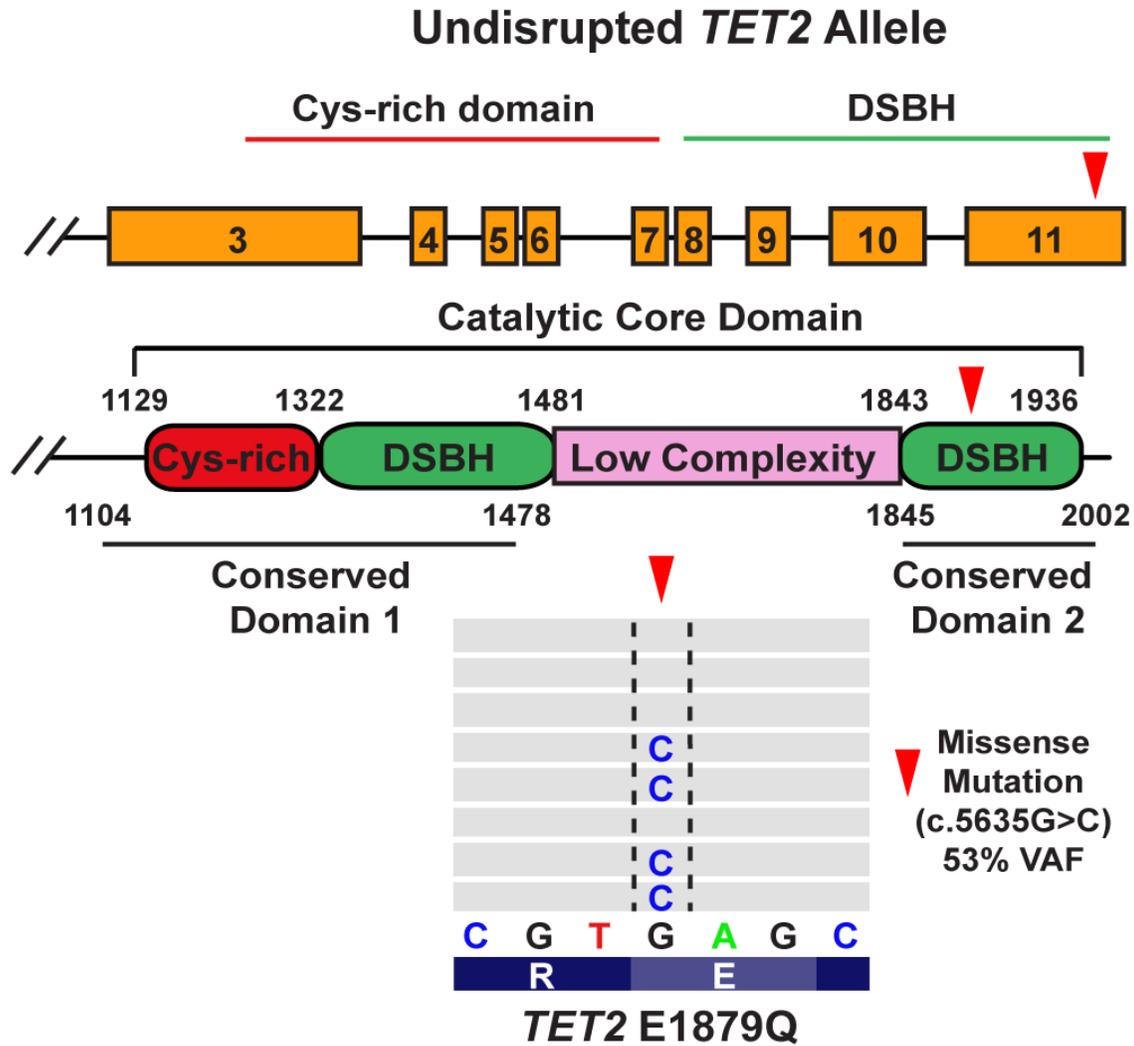


TET (Ten-eleven translocation) Proteins

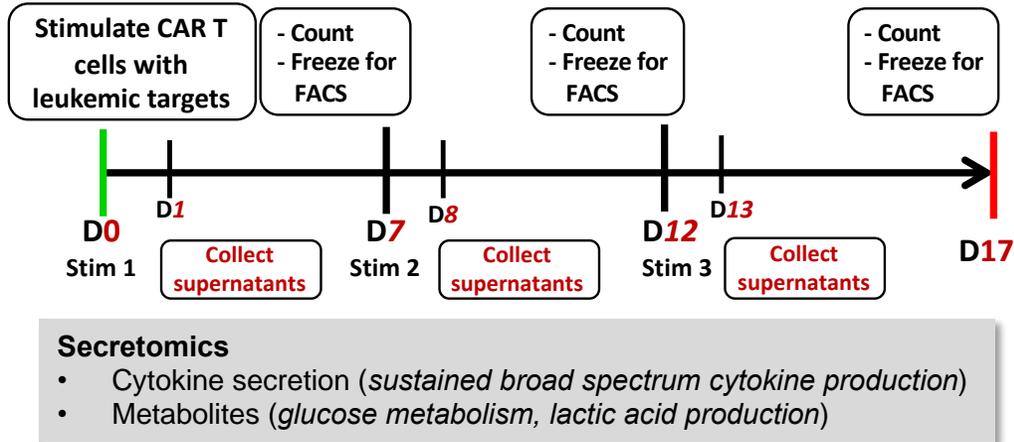


- All TET enzymes contain a C-terminal catalytic domain (CD) that belongs to the dioxygenase superfamily and oxidizes 5mC in a 2-oxoglutarate- (2-OG) and Fe(II)-dependent manner
- TET2 mutations frequently occur in hematological malignancies, including myeloid malignancies, T cell lymphomas and adult T cell leukemia
- TET2 mutation not sufficient for transformation
- TET2 LOF mutations frequent in clonal hematopoiesis

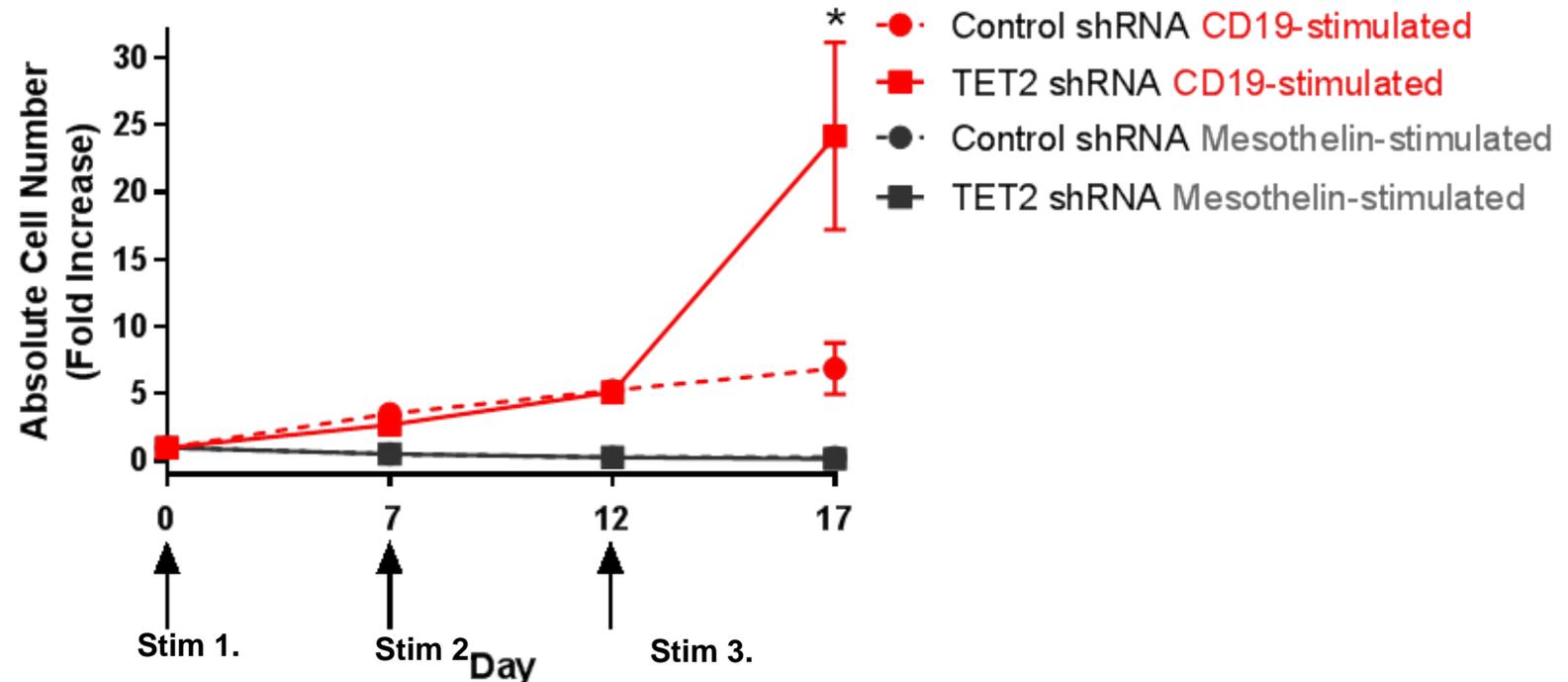
TET2 SNP on Non-Disrupted Allele Creates Hypomorphic Enzyme



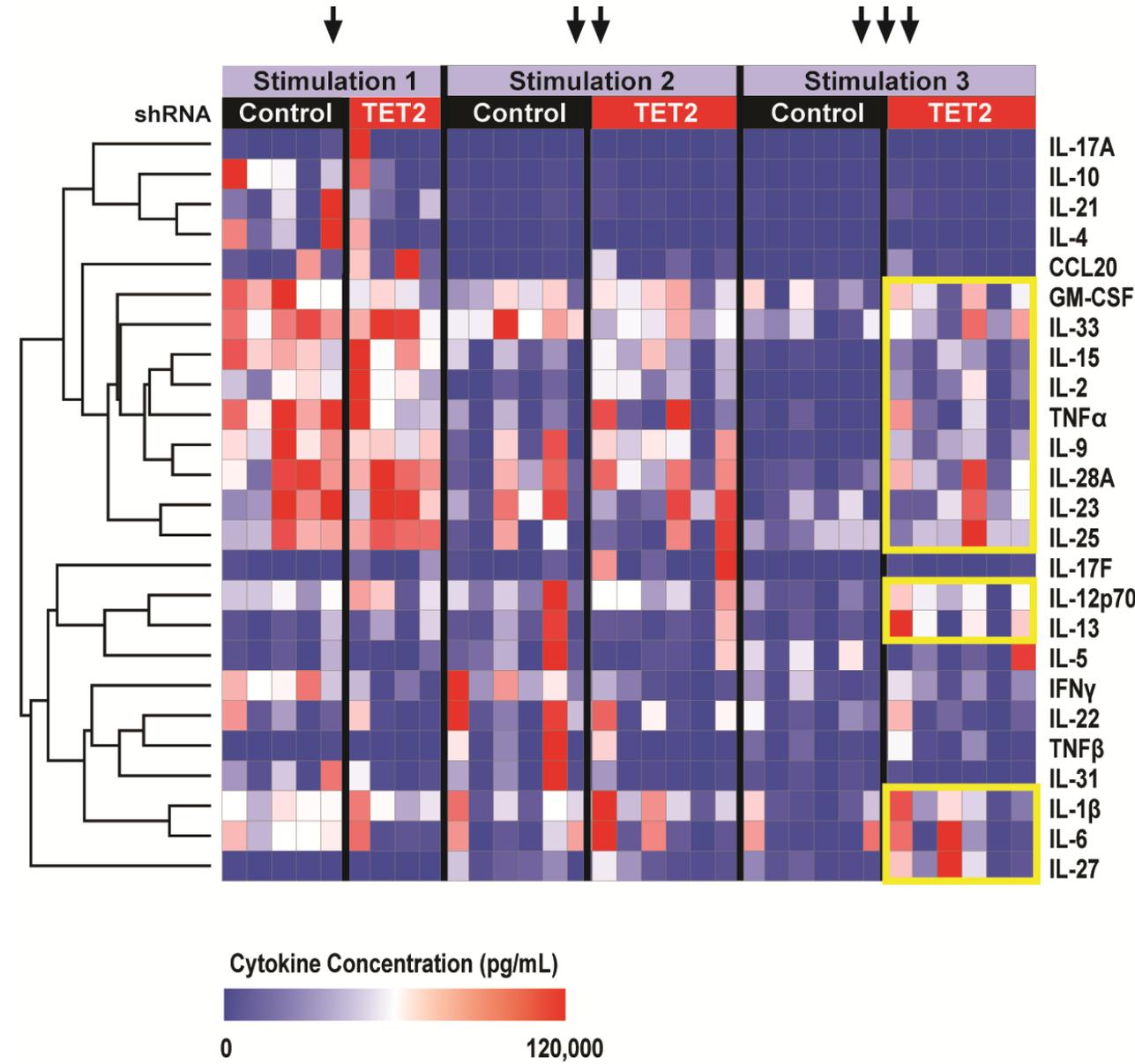
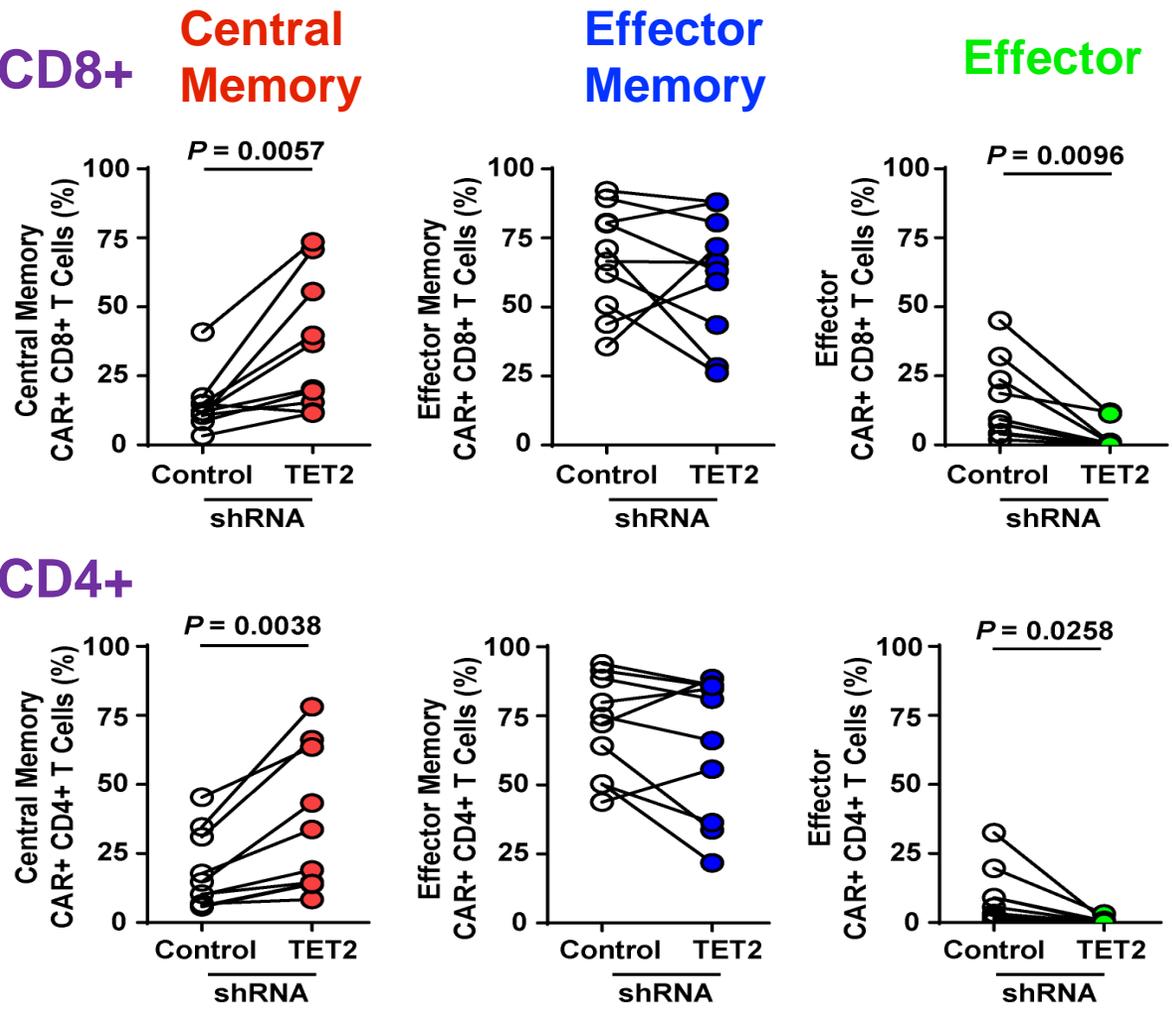
TET2 Deficiency Increases CAR T-Cell Proliferative Capacity



- CAR T cells expressing TET2-targeting or non-targeting shRNA generated in 9d culture
- Cells were sorted prior to restimulation assay



TET2 Deficiency Alters T-Cell Differentiation



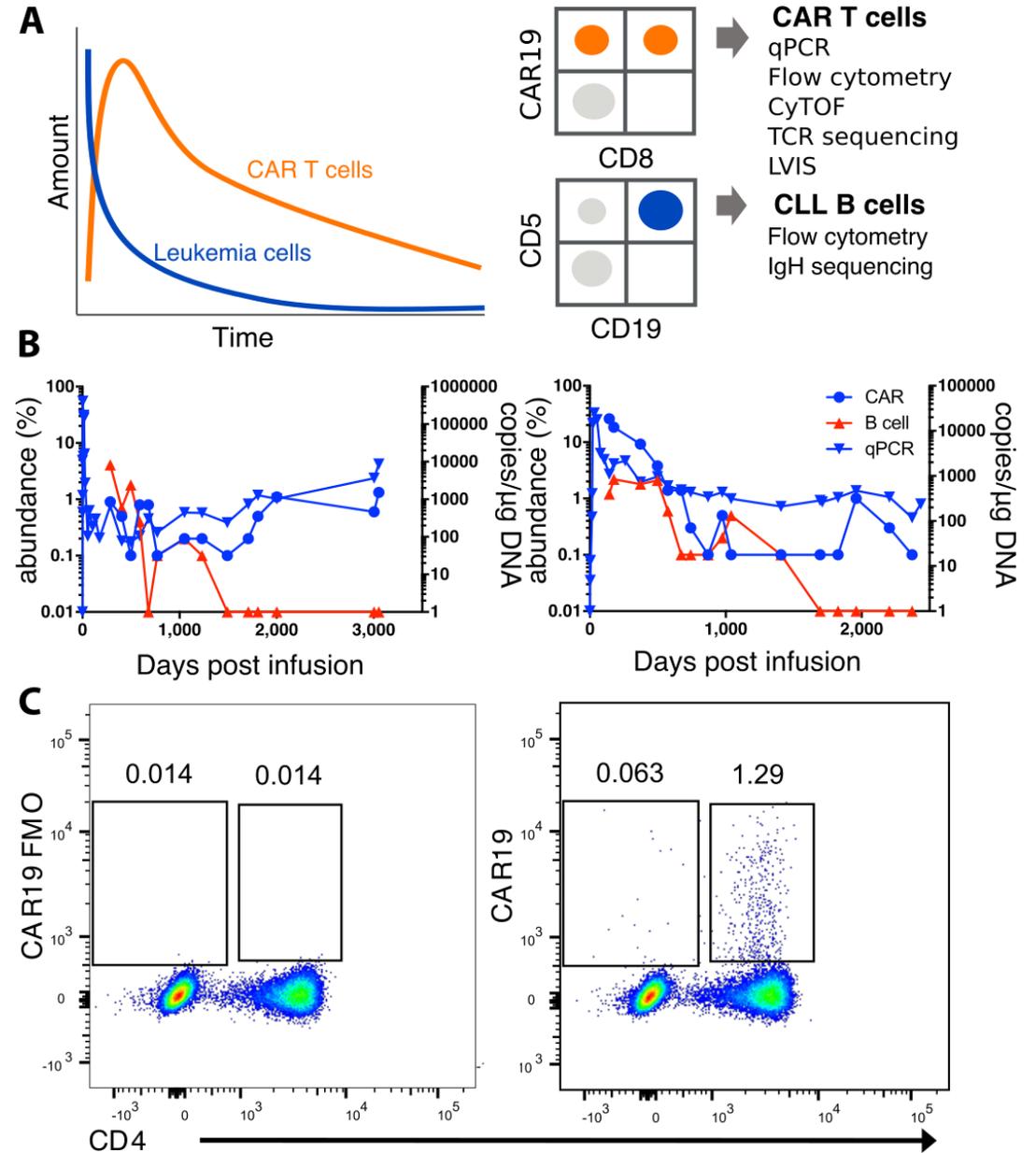
TET2 Disruption in CAR T Cells: Tumor Tamed by Clonal CAR T-Cells¹

- A CLL patient developed delayed response to CAR T cell re-infusion, 2 months after the first
- CAR T cells peaked by day 50, coincident with significant tumor reduction and cytokine release syndrome
- CAR T cells at the peak of expansion displayed early memory T cell phenotype, unlike typical responders who are predominantly effector-memory T cells
- This CAR T cell population was a) clonal and b) carried a disrupted TET2 allele; second allele was hypomorphic
- Knock-down of TET2 in normal donor T cells recapitulated phenotype and enhanced memory function of T cells
- Q: Does TET2 knockdown prevent T cell differentiation/exhaustion, or possibly reprogram to early memory/non-exhausted state?

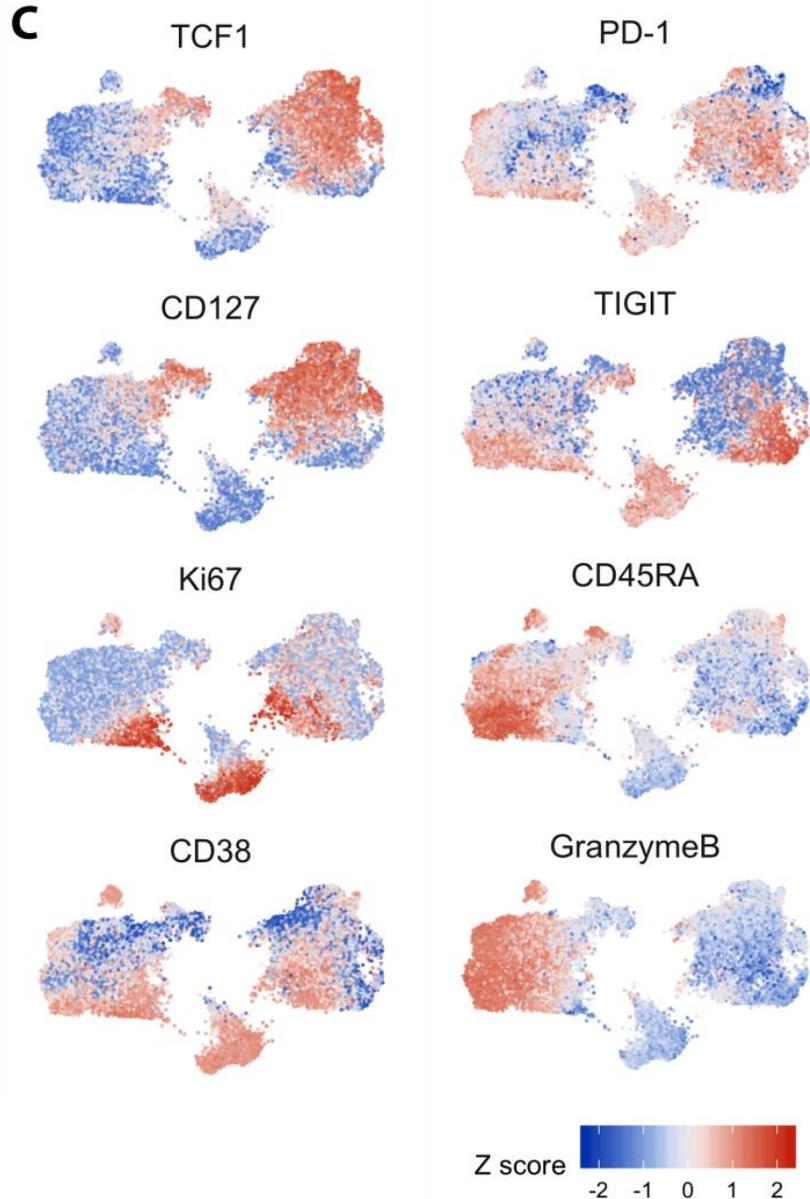
¹Marcela Maus, *New & Views* with Fraietta et al. *Nature* 2018

Fate Mapping of CAR T Cells

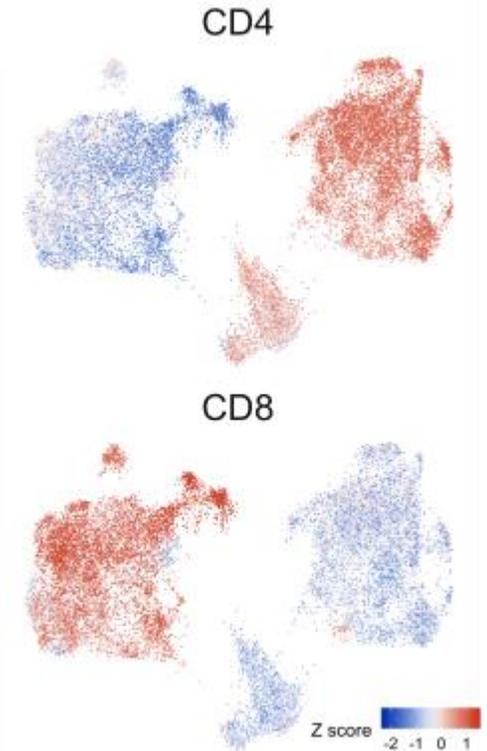
- Patients with longest follow-up (7-8 years) and persistence studied
 - Both patients had advanced, chemotherapy-resistant CLL, treated with CTL019 in July, 2010
 - Patient 1: 1.1×10^9 CAR T cells
 - Patient 2 1.4×10^7 CAR T cells; delayed kinetics
 - Both patients in remission
- 40-marker cyTOF panel designed to interrogate T cell differentiation, activation (status), and exhaustion plus anti-CAR19 idiotype mAb
- Use Spearman correlation matrix, UMAP, and Phenograph



UMAP-Based Dimensionality Reduction Visualization

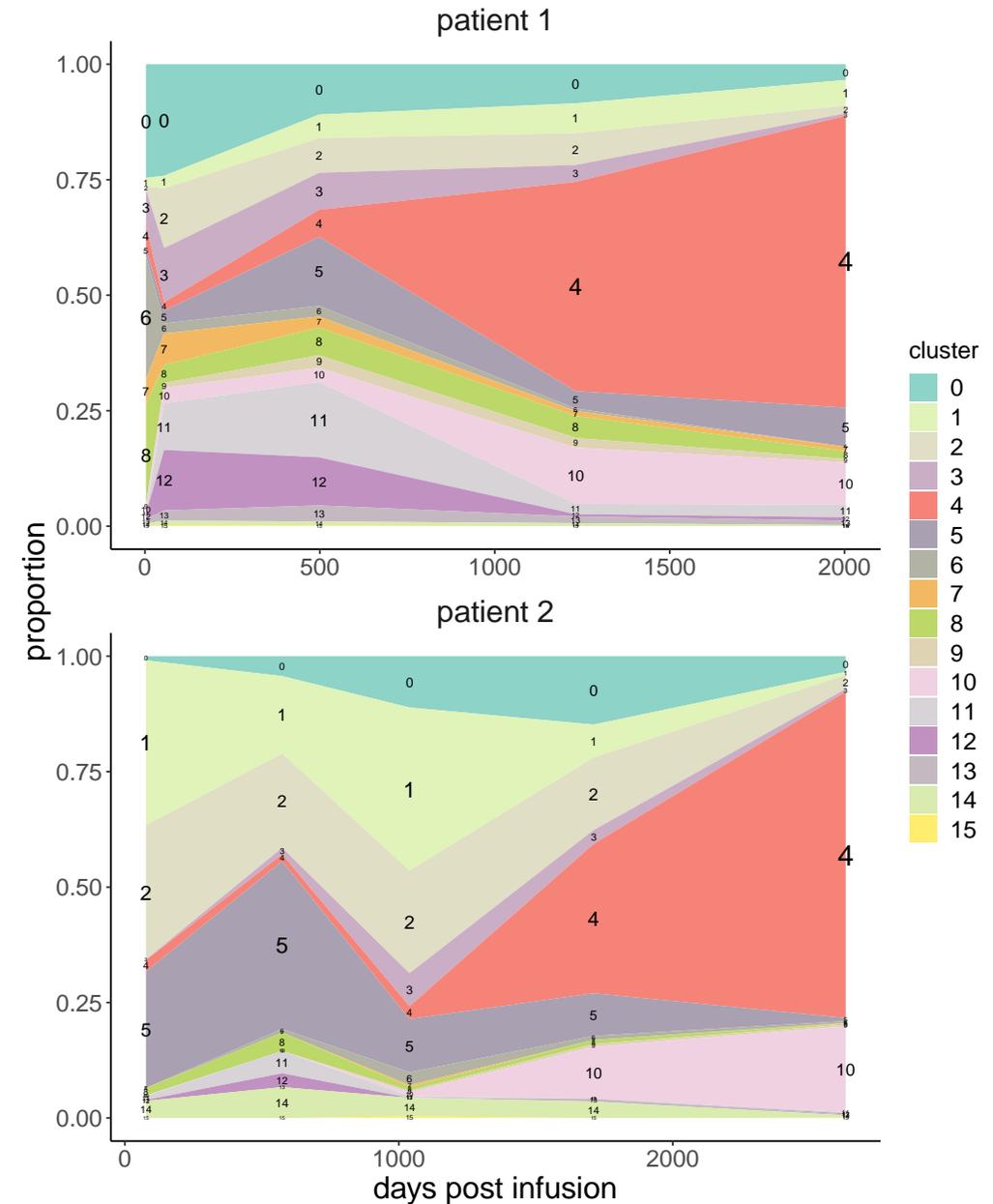
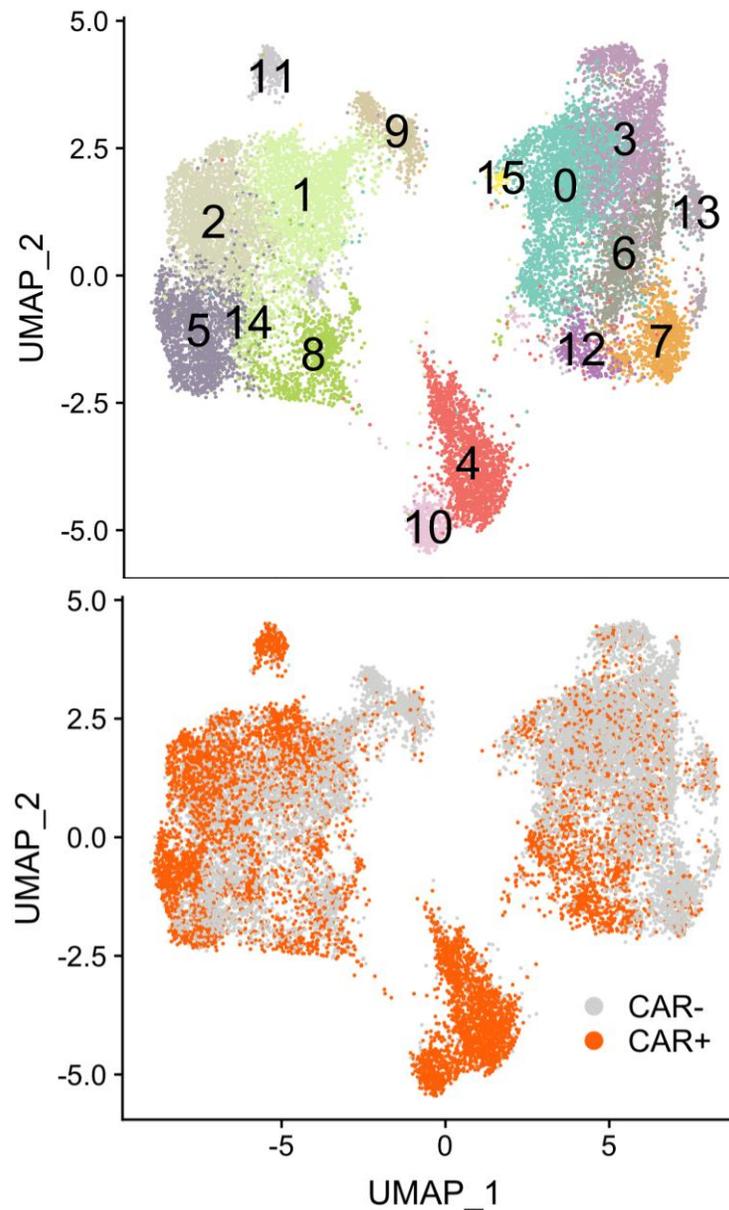


- Clustering of TCF1 with CD127 away from Ki67 and CD38, confirming correlation matrix analysis
- Granzyme B and CD45RA mostly found in the same domain, and some of CD45RA in CD127/TCF1 domain, highlighting bimodal expression pattern for CD45RA during T cell differentiation
- Granzyme B and Ki67 non-overlapping molecules

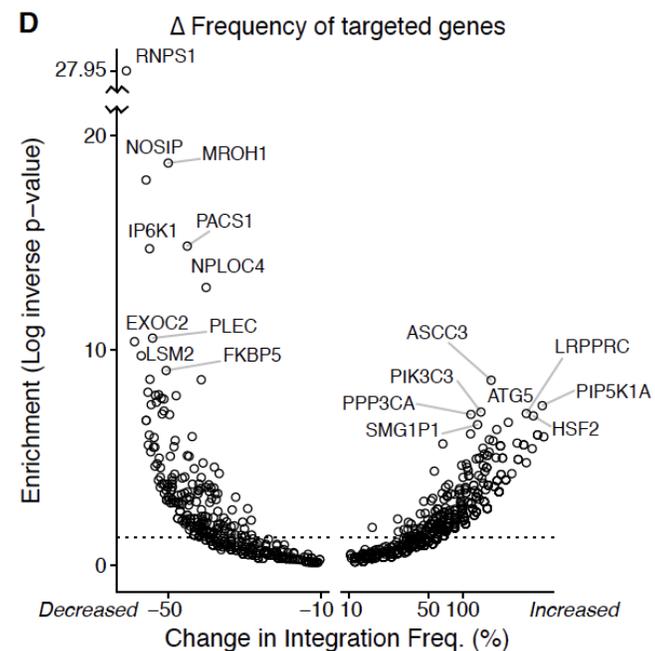
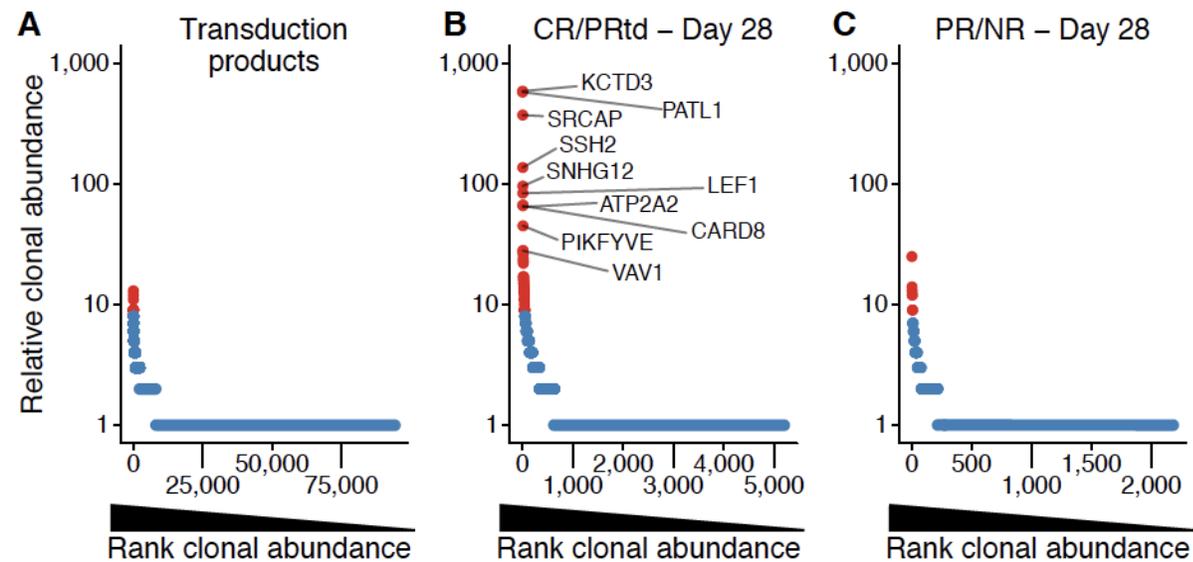
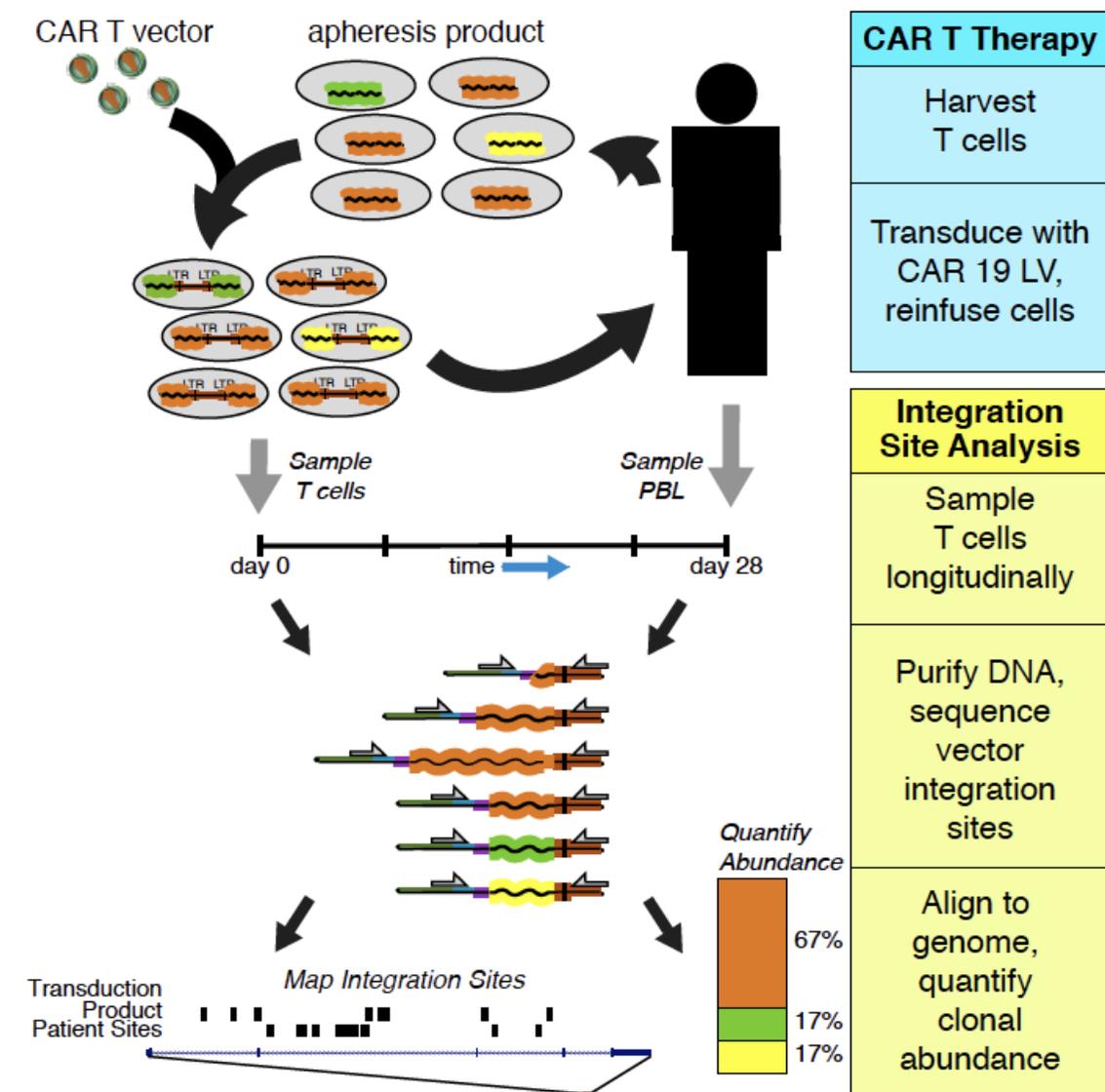


Identification of Phenotypically Stable Clusters with Phenograph

- 16 phenotypically distinct T cell clusters
- Distinct clusters dominated T cell repertoire in both patients
- CD4+ CAR T cells gradually dominated CAR T cell repertoire in both patients, suggesting a prominent role for CD4+ CAR T cells in sustained remissions
- In both patients, clusters 4 and 10 most prominent: Actively cycling, negatively regulated CD4+ CAR T cells
- Low-level persistence of CD8 CAR T cell clusters 2 and 5

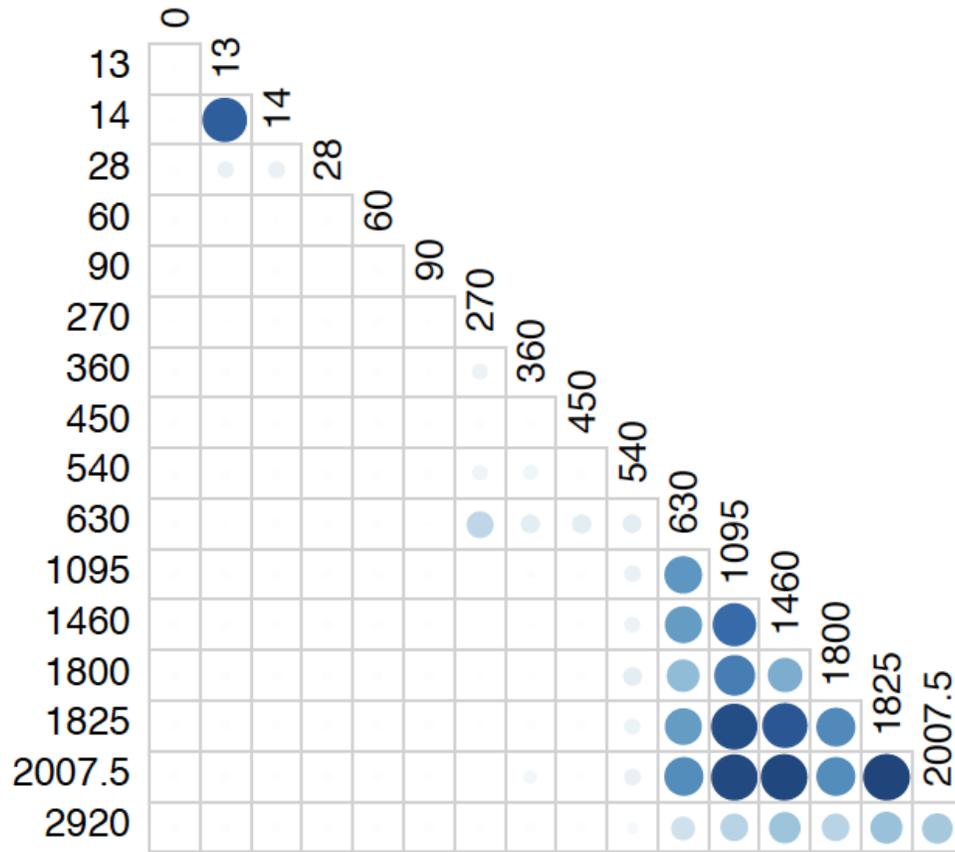


Fate Mapping of CAR T-Cells via Vector Integration Site Sequencing

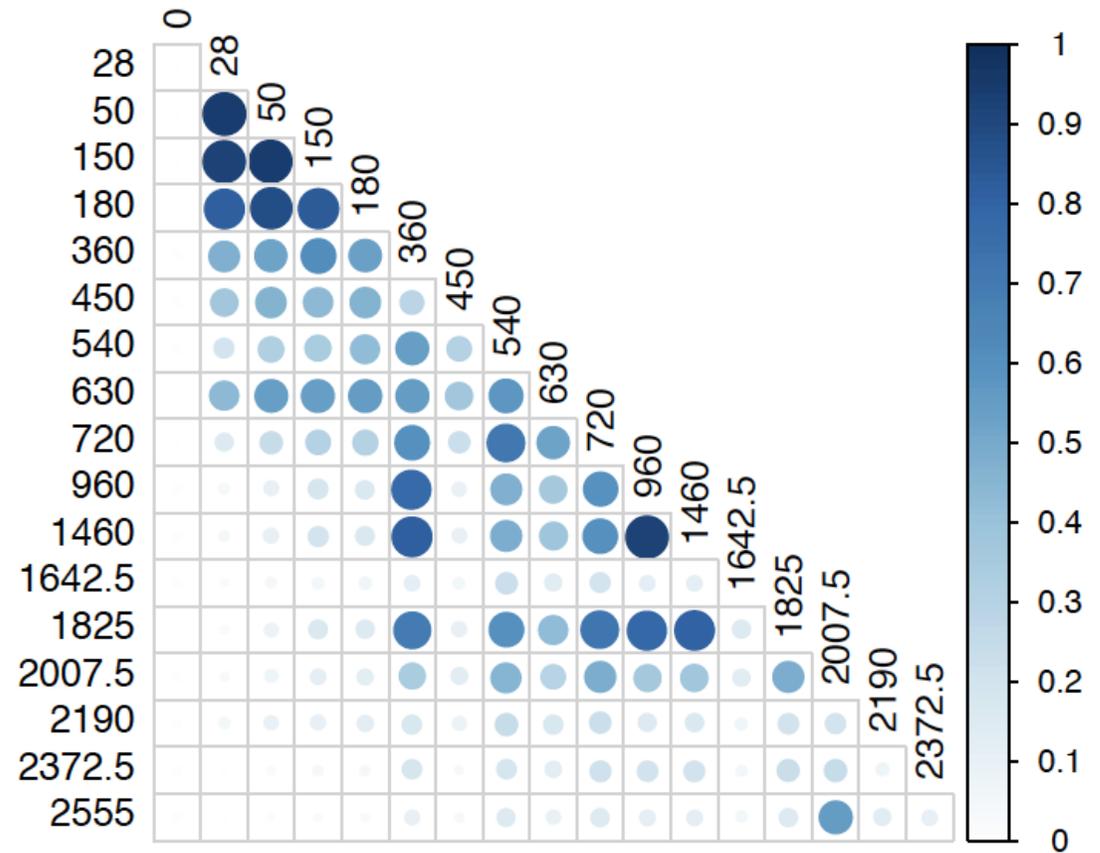


Sustained Remission in Pts 1, 2 by Few Persisting CAR T Cell Clones

CLL patient 1

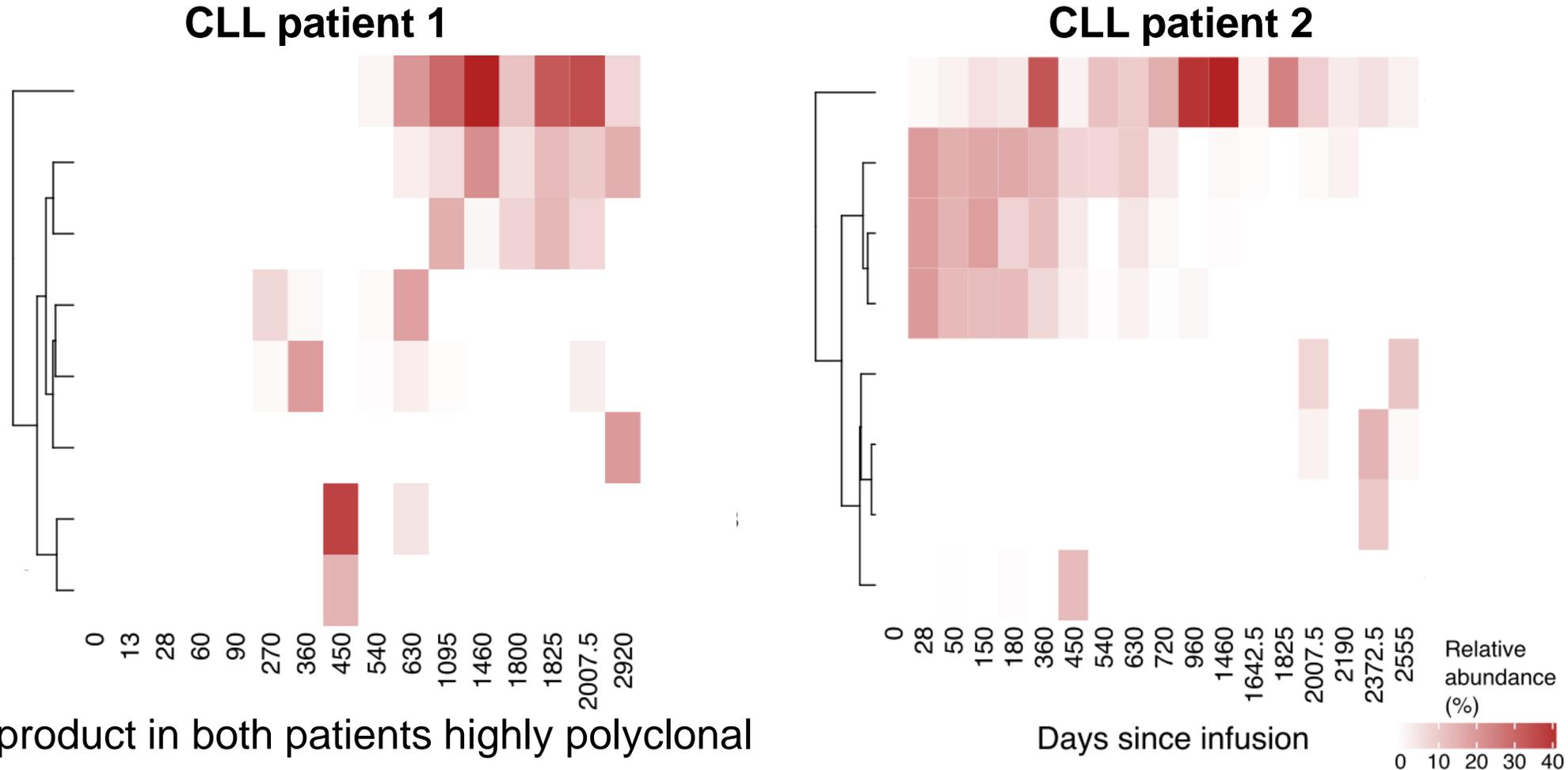


CLL patient 2



- High degree of sharing of the integration sites within each patient but not between
- Same CAR T cells continue to control the tumor

Oligoclonal Composition of Memory CAR-T Cells



- Infusion product in both patients highly polyclonal
- CAR integration site landscape in both patients demonstrates selective clonal expansion and persistence
- CAR integration site repertoire in both patients appears to come in two separate waves, coincident with switch from CD8 to CD4 dominance

Sustained Remission of CLL Following CART19 Therapy

- Two patients infused 9 years ago with anti-CD19 CAR T cells with durable molecular remission, B cell aplasia
- Memory function of CAR T cells critical for this clinical efficacy
- Mass cytometry with UMAP and Phenograph-based data analyses revealed initial dominant role of effector CD8+ CAR T cells, followed by CD4+ CAR T cells
- Initial 2-3 years post-infusion showed diverse phenotypes, which converged on actively proliferating, immune checkpoint inhibitor molecule-expressing CD4+ CAR T cells
- CAR T cells sustain high level of activation throughout, but also expression of negative regulatory molecules such as CTLA4, PD1, and TIGIT
- Fate mapping experiments demonstrates rapid clonal focusing after infusion with maintenance of some of the same clones
- This data suggest that remission in CTL019 treated CLL patients is induced and sustained by a pauciclonal repertoire of CAR T cells

Acknowledgements



Melenhorst lab

McKensie Collins

Mamie Wang

Stefan Lundh

Ethan Jung

Kimbery Apodaca

Hongxing Sun

Jie Xu

Rahul Arya

Camara lab

Pablo Gonzalez-

Camara

Steven Woodhouse

Biostatistics

Department

Wei-Ting Hwang

Lentiviral vector

Integration site

analysis

Rick Bushman

Chris Nobles

Fraietta lab

Joe Fraietta

Weimin Kong

PDL

Edward Pequignot

Jun Xu

January McKee

Mercy Gohil

TCEL

Yangbing Zhao

Xiaojun Liu

UPenn Clinical

David Porter

Noelle Frey

Al Garfall

Adam Cohen

Steve Schuster

Ed Stadtmauer

Wherry lab

John Wherry

Alex Huang

Cécile Aliano

Takuya Ohtani

CHOP

Steve Grupp

David Barrett

Shannon Maude

David Teachey

TCSL

Simon Lacey

Lifeng Tian

Harit Parakandi

Vanessa Gonzalez

Jeff Finklestein

Farzana Nazimuddin

Tatiana Mikheeva

Chelsie Bartozek

Brett Menchel

Irina Kulikovskaya

Minnal Gupta

Rachel Reynolds

Angela Kim

Fang Chen

Natalka Koterba

Mohsin Mahir

CCI & June lab

Carl June

Anne Chew

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CVPF

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Alex Malykhin

Matt O'Rourke

Novartis

Jen Brogdon

Hans Bitter

Elena Orlando

Iulian Pruteanu