

Basic Principles of Cancer Immunotherapy

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Disclosures

- Consulting Fees:
 - AstraZeneca, Incyte, Dynavax
- Contracted Research:
 - AstraZeneca, BMS, Transgene, Incyte, Dynavax, Merck, Genentech
- I will not be discussing non-FDA approved indications during my presentation.









The Premise of Cancer Immunotherapy

- Normally, the immune system eliminates mutated and/or damaged cells
- To exist, tumors must evolve mechanisms to locally disable and/or evade the immune system.

The goal of immunotherapy is to restore the capacity of the immune system to recognize and reject cancer.









Why Does the Immune System Fail to Eliminate Cancer?

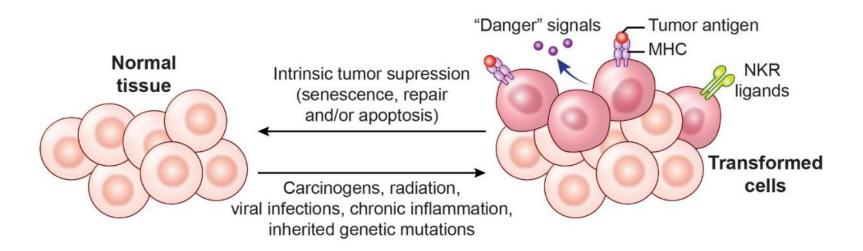
- Cancer cells grow progressively in immunocompetent hosts without evidence of <u>T cell exhaustion</u> or <u>systemic anergy</u>
 - T cell Exhaustion: CD8+ T cells often become dysfunctional, entering a state known as exhaustion, during certain chronic infections or when they enter a suppressive tumor microenvironment
 - Systemic Anergy: A state of immune unresponsiveness. Induced when the T cell's antigen receptor is stimulated, effectively freezing T cell responses pending a "second signal" from the antigen-presenting cell

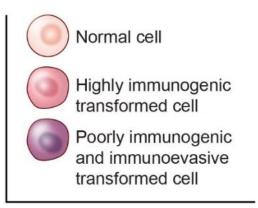










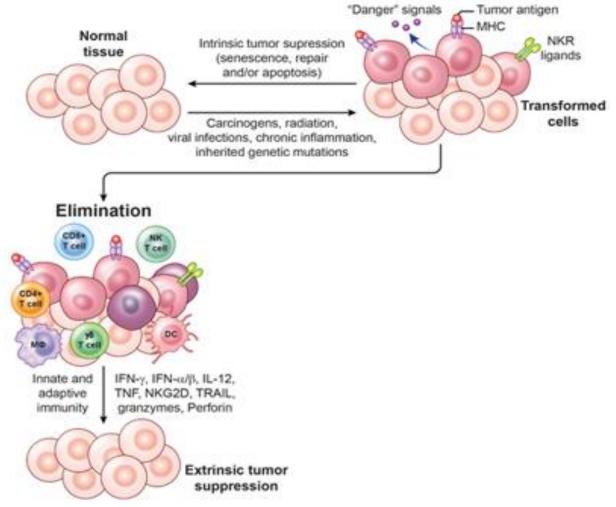


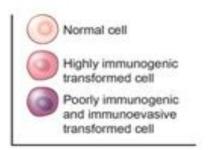








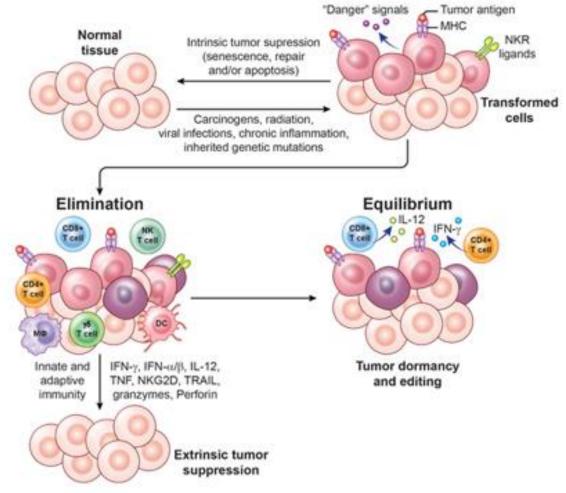


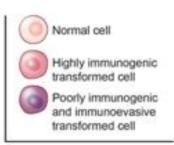










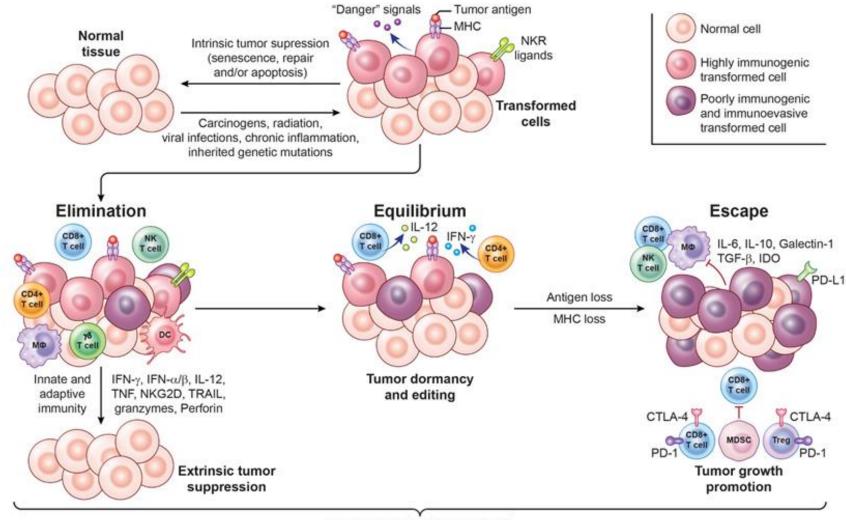


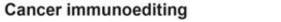














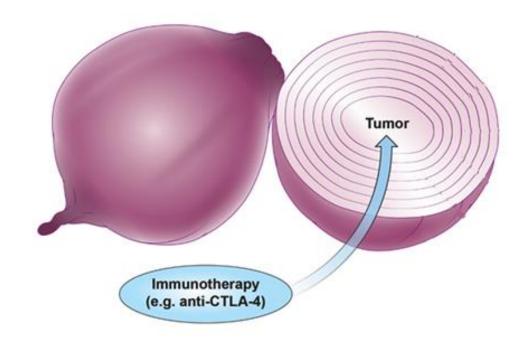






Multi-layered Immunosuppression

- Tumors insulate themselves with dense layers of immunosuppressive stroma
- Overcoming the many layers of interconnected and often functionally redundant immune suppressive mechanisms represents a daunting challenge for tumor-specific T cells
- Immunotherapy can "peel back" the layers of local immune suppression, thereby restoring the capacity of T cells to eradicate the tumor



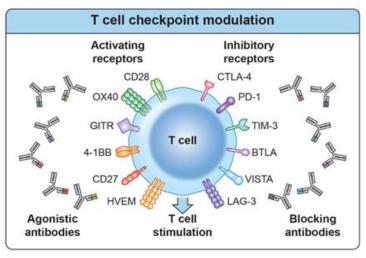


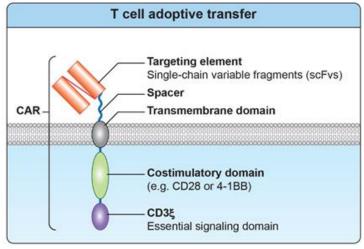


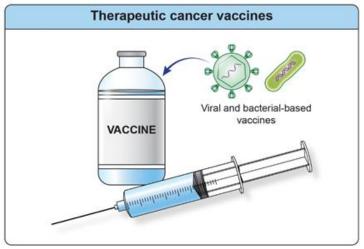


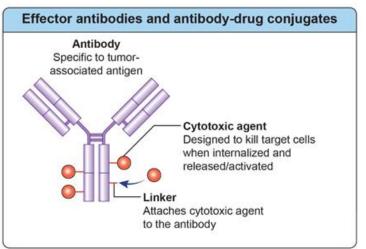


Types of Immunotherapy









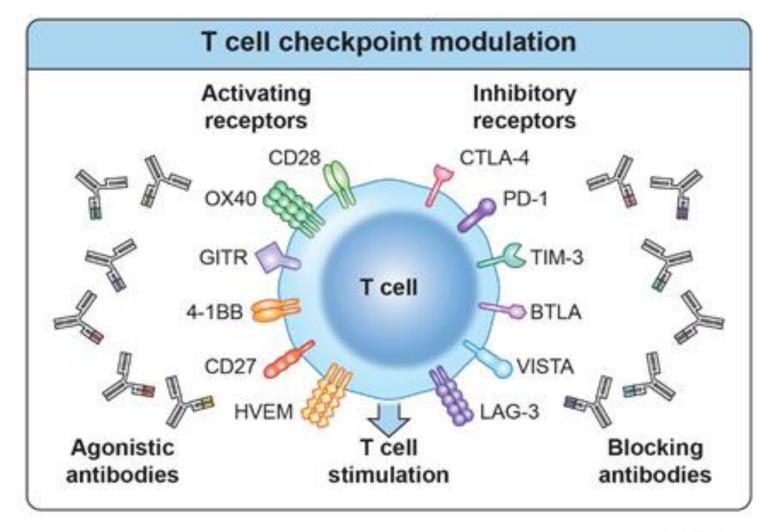








T cell Checkpoint Modulation



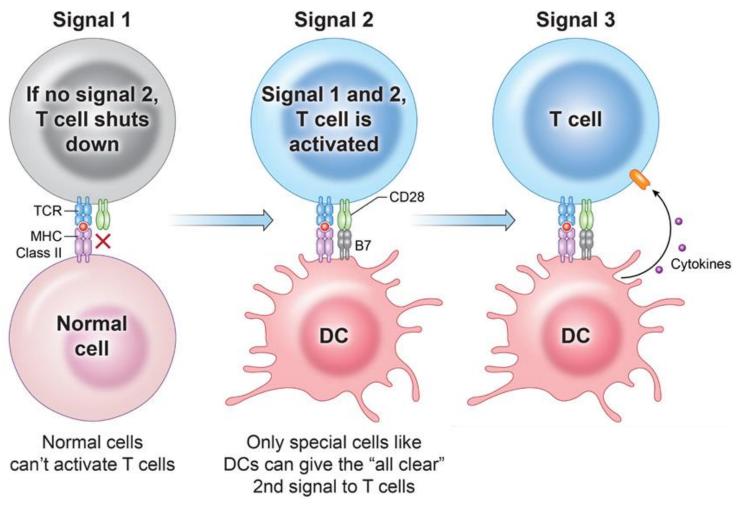








Antigen-specific T cell Activation





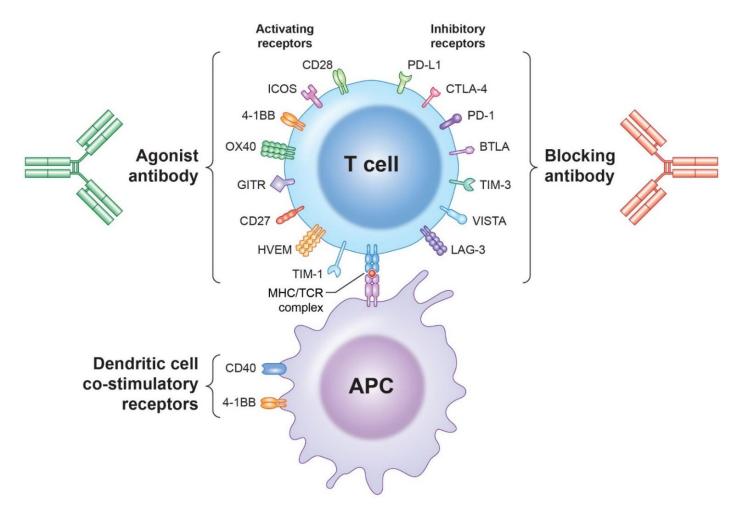






T Cell Checkpoint Modulation

- To exist, tumors must evolve mechanisms to locally disable and/or evade the immune system.
- The goal of T cell checkpoint blockade is to make T cell "off-switches" inaccessible to tumor cells, thus restoring tumor-specific immunity.





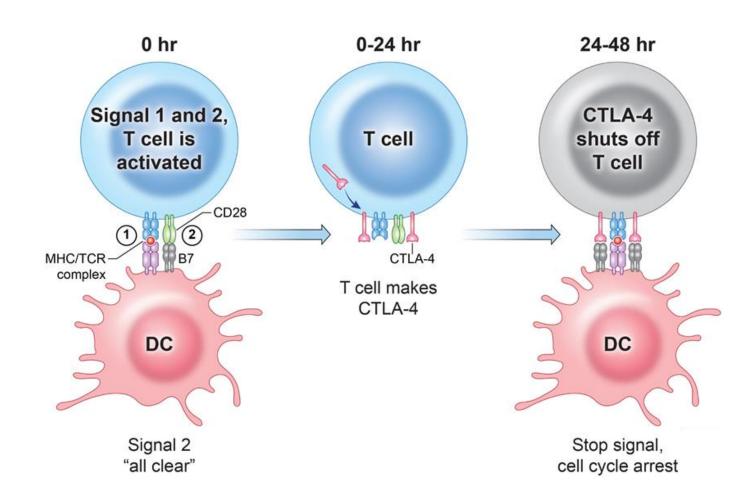






The CTLA-4 Checkpoint

- <u>C</u>ytotoxic <u>T</u>-<u>L</u>ymphocyte
 <u>A</u>ssociated Protein <u>4</u>
- Also known as CD152
- Negative regulator of T cell activation



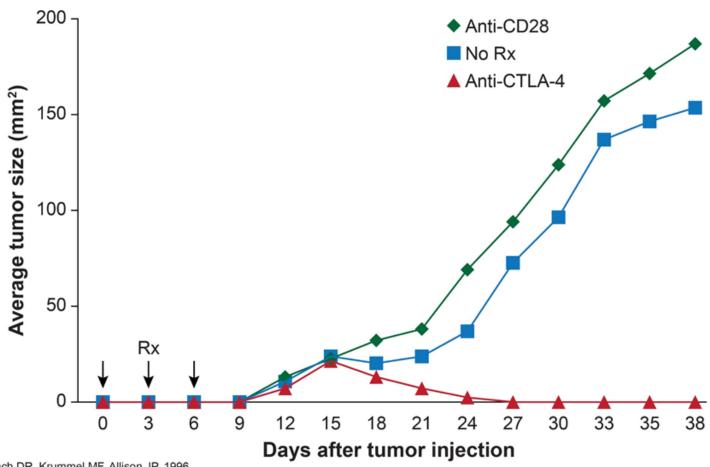








Anti-CTLA-4 induces regression of transplantable colon carcinoma



Leach DR, Krummel MF, Allison JP. 1996. Enhancement of antitumor immunity by CTLA-4 blockade. Science. 217(5256): 1734-6.



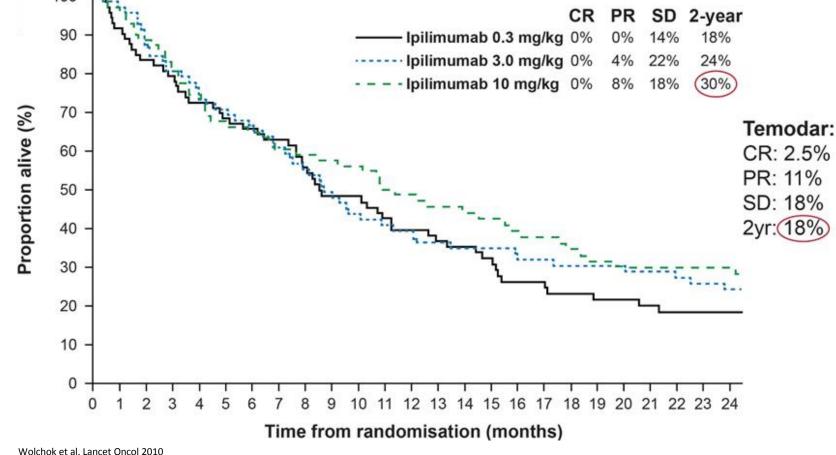






Ipilimumab (human anti CTLA-4)

 Granted FDA approval for treatment of patients with metastatic melanoma in 2010



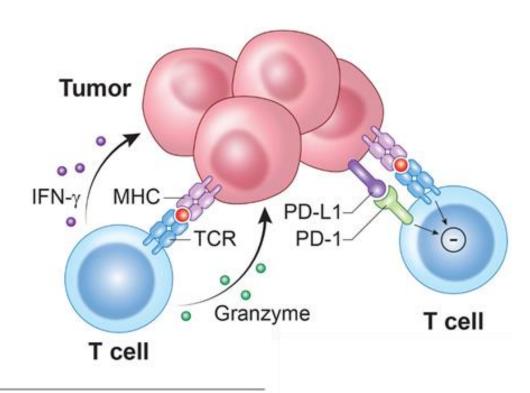






The PD-1/PD-L1 Checkpoint

- Promotes T cell tolerization through inhibiting activation signaling
- T cell PD-1 interacts with PD-L1 and PD-L2
- Many cells express PD-L1/PD-L2 and can suppress T cell activation
- Tumors express PD-L1 through two primary mechanisms
 - TIL production of IFN-y
 - Oncogenic signaling pathways



Francisco, L. et al. *Immunol Rev.* 2010. 236: 219. Pardoll, D.M. *Nat Rev Cancer*. 2012. 12: 252.



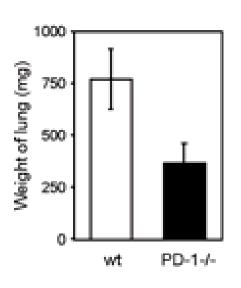




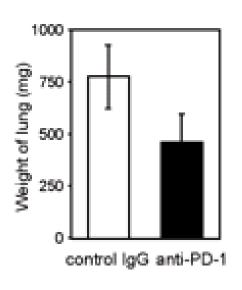


Anti-PD-1 Slows Tumor Growth in Pre-clinical Models

• PD-1 deletion or inhibition reduced CT26 colon cancer cell growth in BALB/c mice









Iwai et al. Internat. Immunol 2004



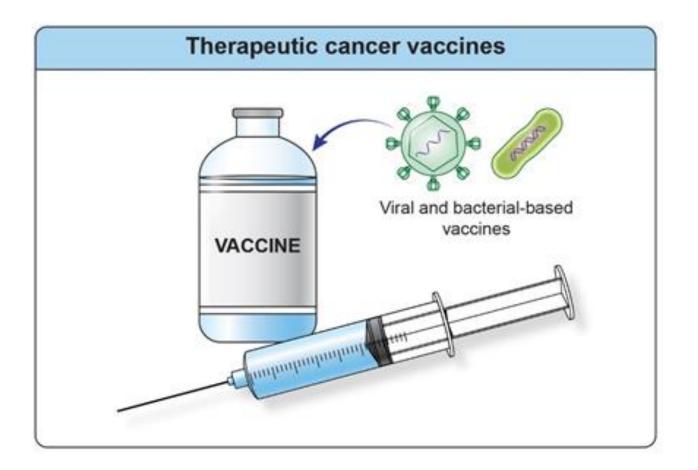






Therapeutic Cancer Vaccines

 The goal of therapeutic cancer vaccination is to increase the immunogenicity of tumor antigens in order to generate a high frequency of tumorspecific T cells.



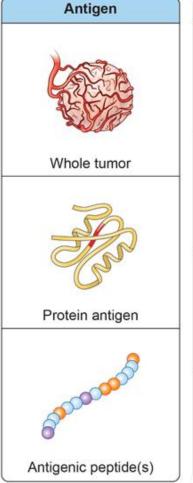


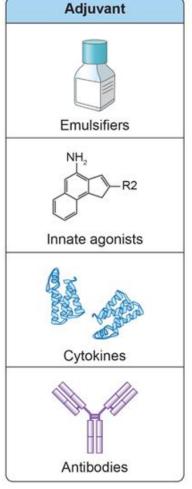


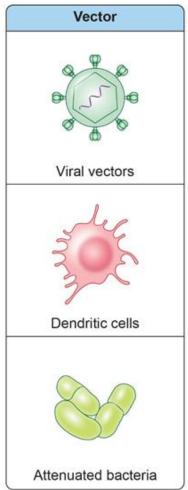


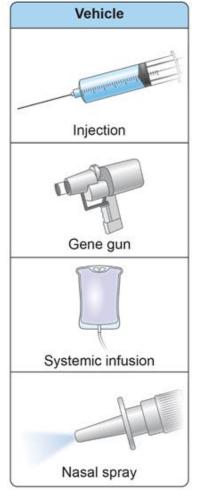


Components of a Cancer Vaccine









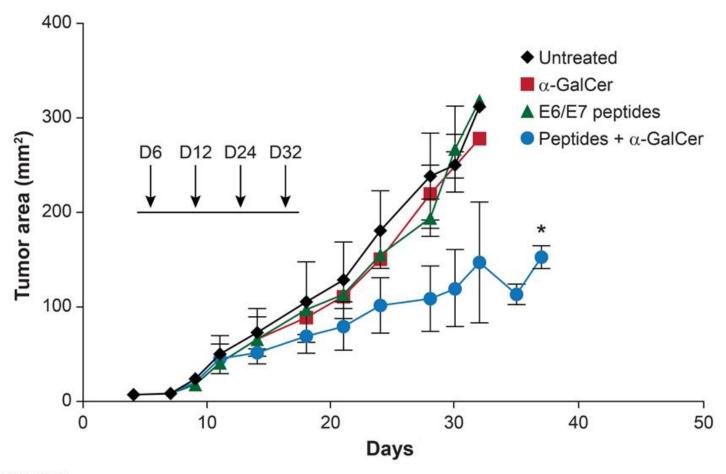








An intra-nasal HPV E6/E7: α -GalCer vaccine slows growth of TC-1 tumors



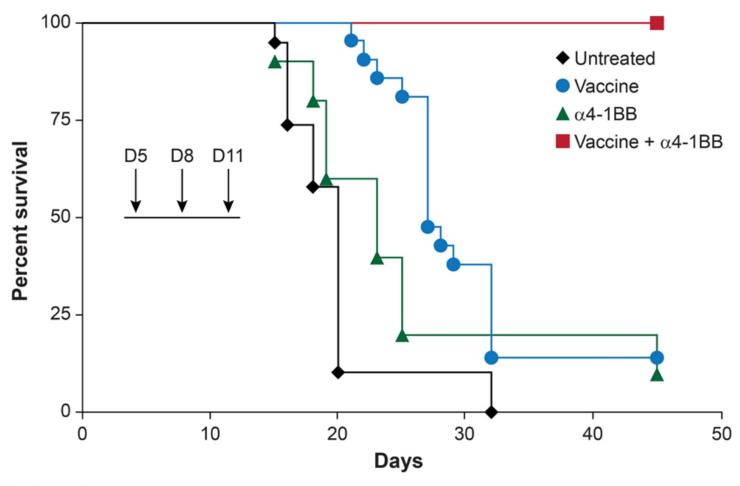








4-1BB agonist antibody and HPV E6/E7 vaccine synergize in curing TC-1 Tumors



Todd Bartkowiak, M.S.





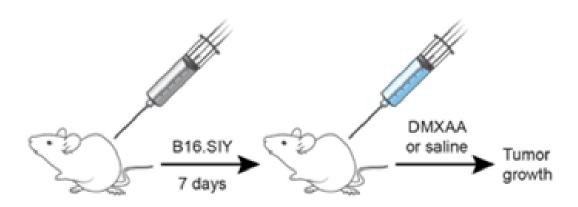


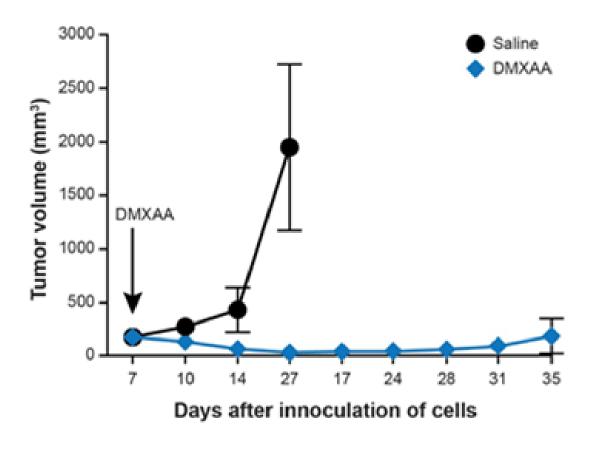


Intratumoral Injection of Innate Immune Agonists:

Direct Vaccination Approach

 Intratumoral DMXAA (mouse STING agonist) triggers rejection of B16 melanoma







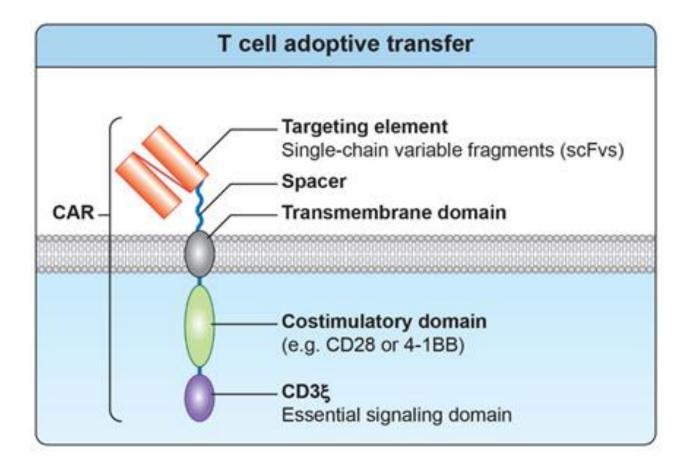






Adoptive Cell Transfer

 The goal of adoptive cell transfer is to overwhelm the tumor with a higher frequency of tumorspecific immune cells and/or engineer immune cells to target cancer



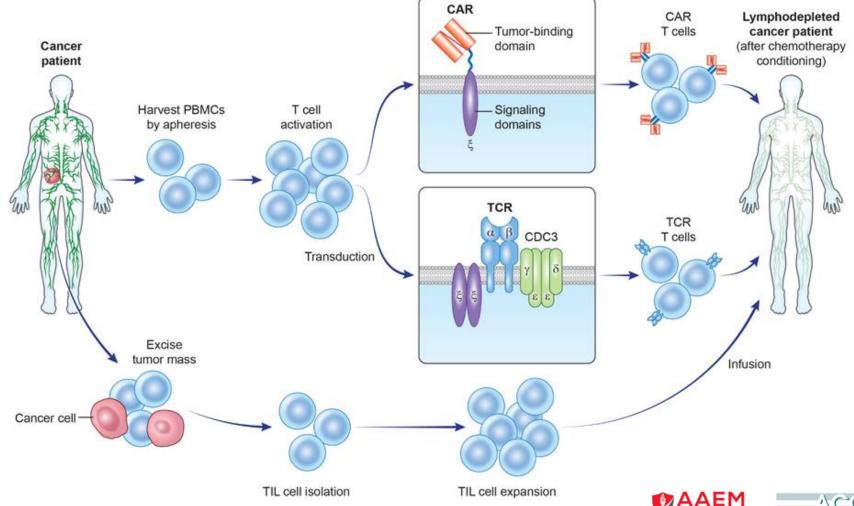






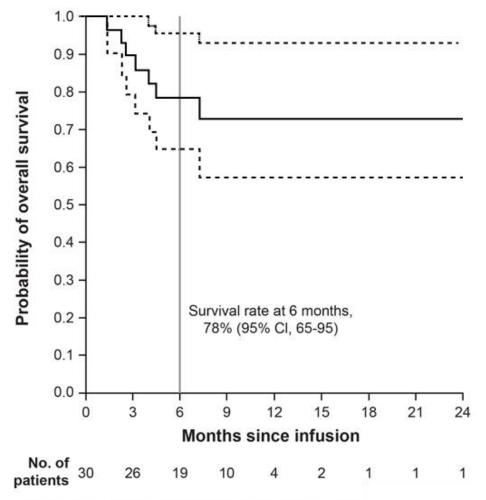


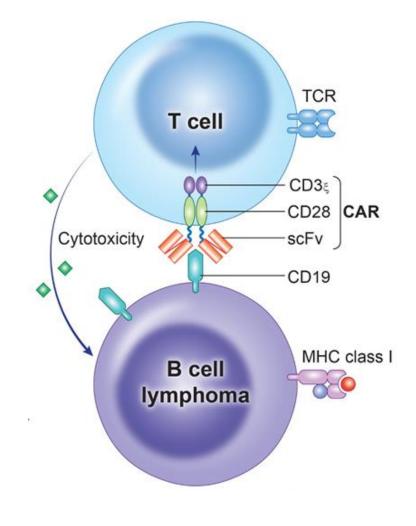
Adoptive Cell Therapy Process





CD19 CAR T Cell Therapy for Relapsed B Cell ALL







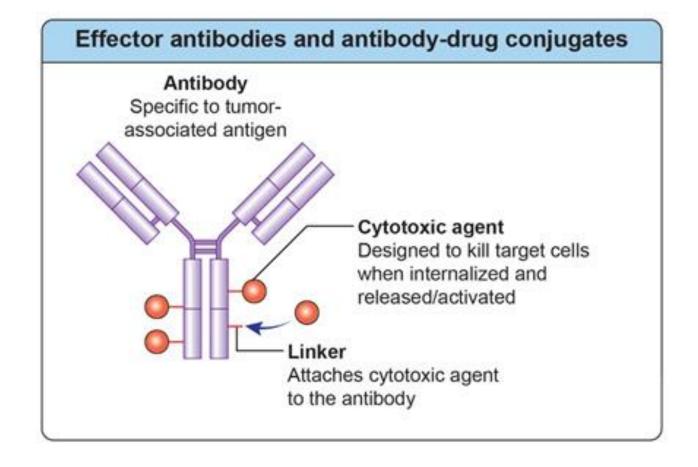






Effector Antibodies and Antibodydrug Conjugates (ADCs)

 The goal of effector antibodies is to specifically target and kill tumor cells using innate mechanisms which are difficult to evade of suppress and/or through delivery of cytotoxic agents











Key ADC/Antibody Principles

• **Specificity:** The more tumor specific the target antigen is, the higher the agent can be dosed without limiting toxicity

• Internalization: The target tumor surface protein must internalize to deliver the toxin – it should do so frequently and to a suitable endosomal compartment

• **Stability:** The toxin must remain inert and tethered to the antibody until it is delivered to its target cell



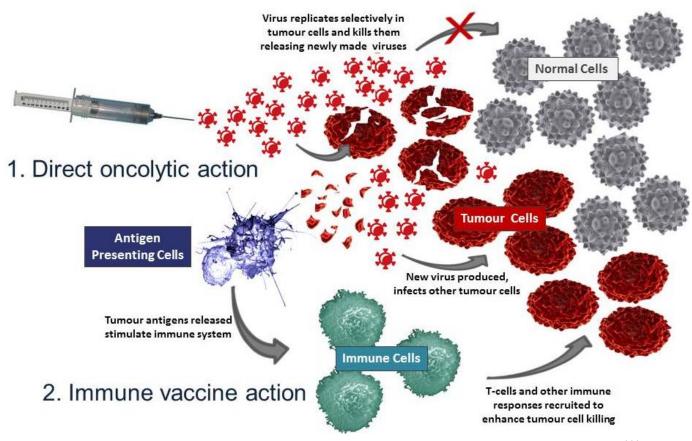






Oncolytic Viruses

 The goal of an oncolytic virus is to specifically target and kill tumor cells through viral replication



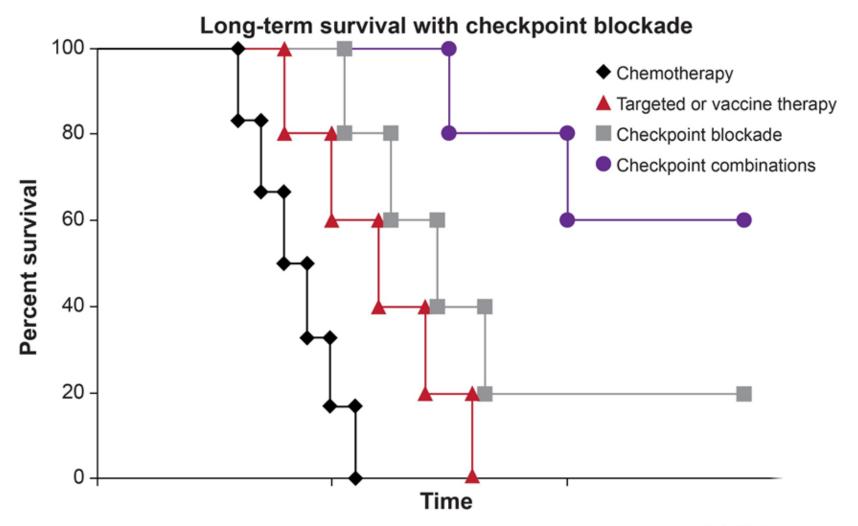
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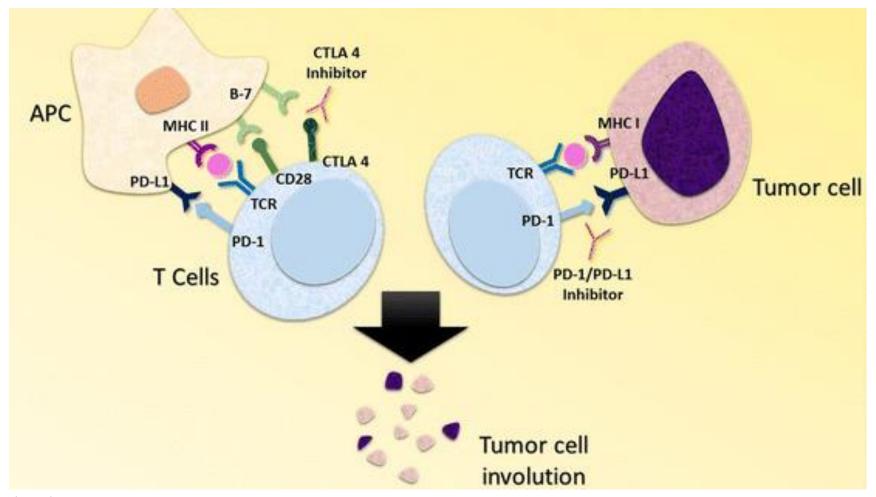








Dual CTLA-4 and PD-1 inhibition



Chae et al. JITC 2018

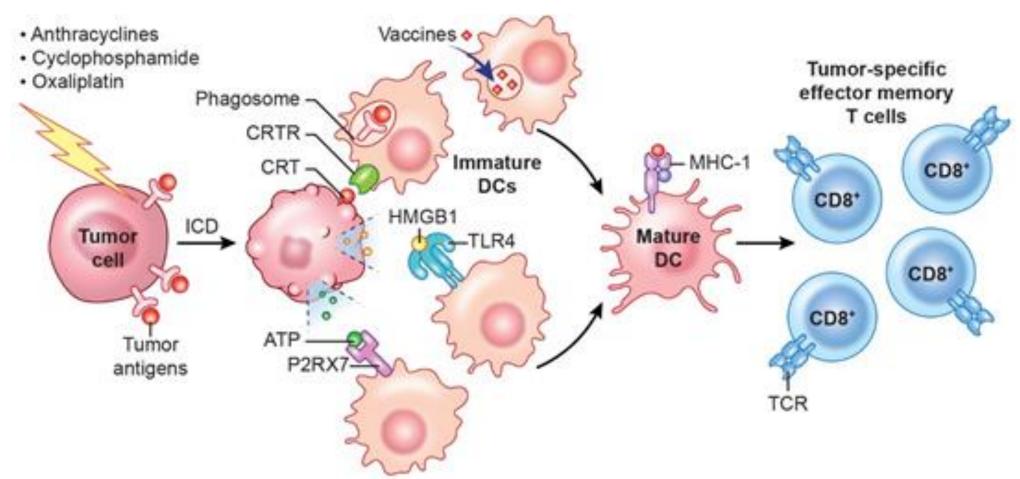








Chemotherapy can induce an immune response



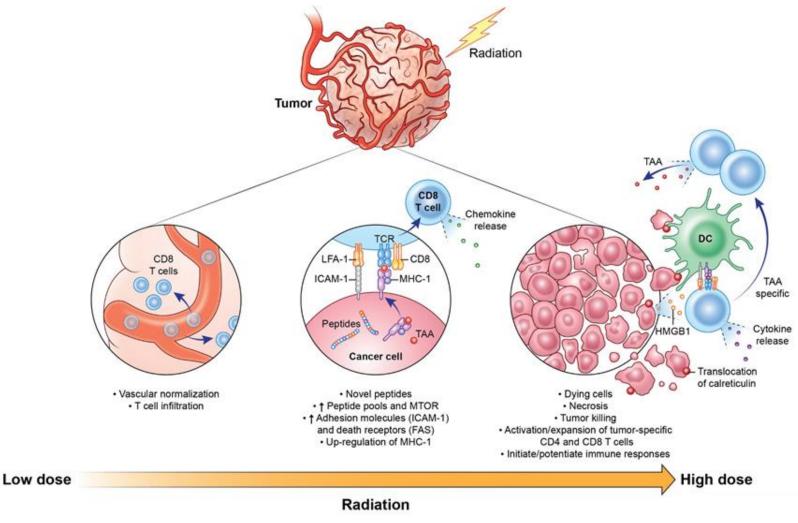








Radiotherapy can induce an immune response



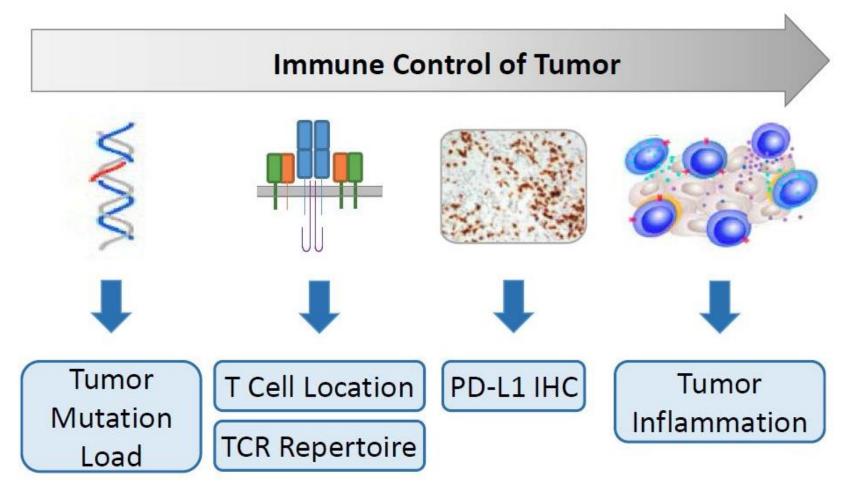








Immunotherapy Biomarkers



Cesano et al. Biomedicines 2018

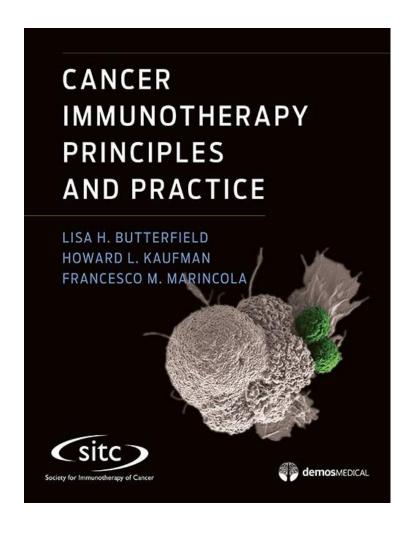








Further Resources



SOCIETY FOR IMMUNOTHERAPY OF CANCER







