



SITC 2017

November 8-12

NATIONAL HARBOR
MARYLAND

Gaylord National Hotel
& Convention Center



Society for Immunotherapy of Cancer

November 8-12 • NATIONAL HARBOR, MD

SITC
2017

Multiplex IHC Immuno-Oncology Panel for standardized profiling based on spatial and functional characterization of the tumor microenvironment

Dr. Svenja Lippok (Definiens AG)



Society for Immunotherapy of Cancer

#SITC2017

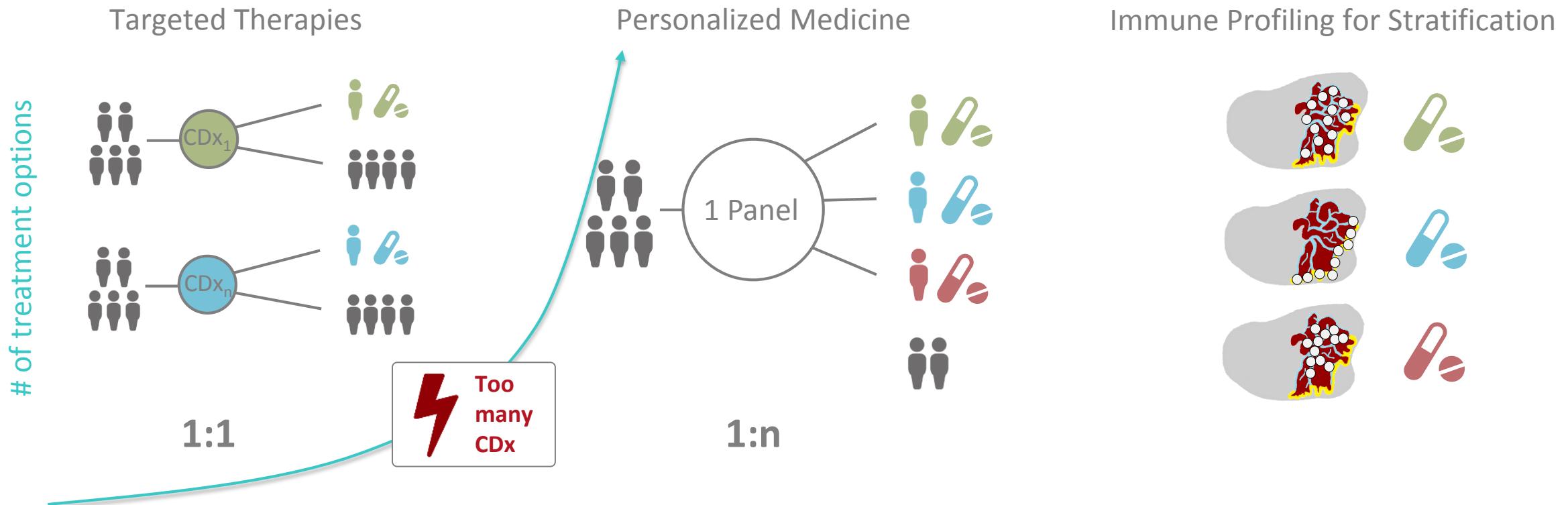
Presenter Disclosure Information

Dr. Svenja Lippok

The following relationships exist related to this presentation:

Svenja Lippok is a full-time employee of Definiens AG

Combinatorial & diagnostic challenge





Biomarkers for therapy & patient stratification*

CD8 (TE**) CD8 (NE**) PD-L1 FoxP3



Adaptive Immune Resistance

Immune Tolerance

Acquired Checkpoint Inhibitor Resistance

Impaired Tumor Parenchyma Infiltration

Immune Ignorance

Intrinsic Checkpoint Inhibitor Resistance

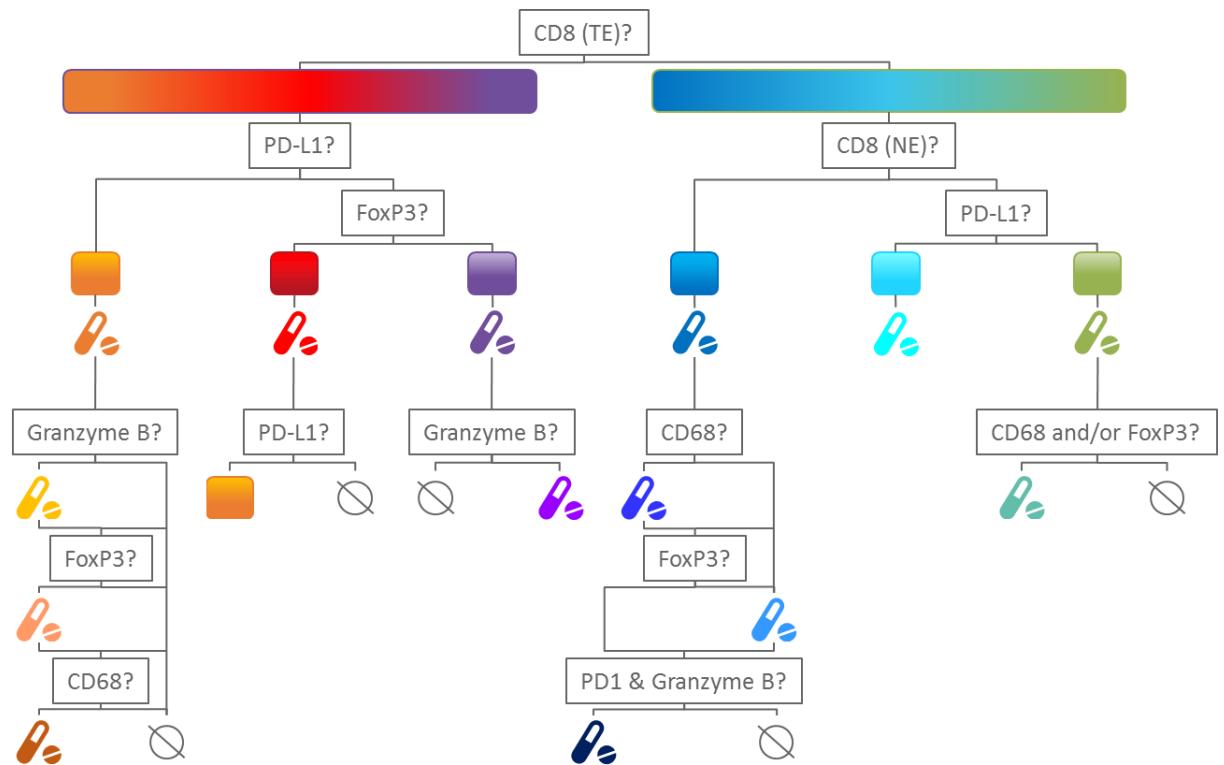
Biomarkers for therapy & patient stratification*

CD8 (TE**) CD8 (NE**) PD-L1 FoxP3



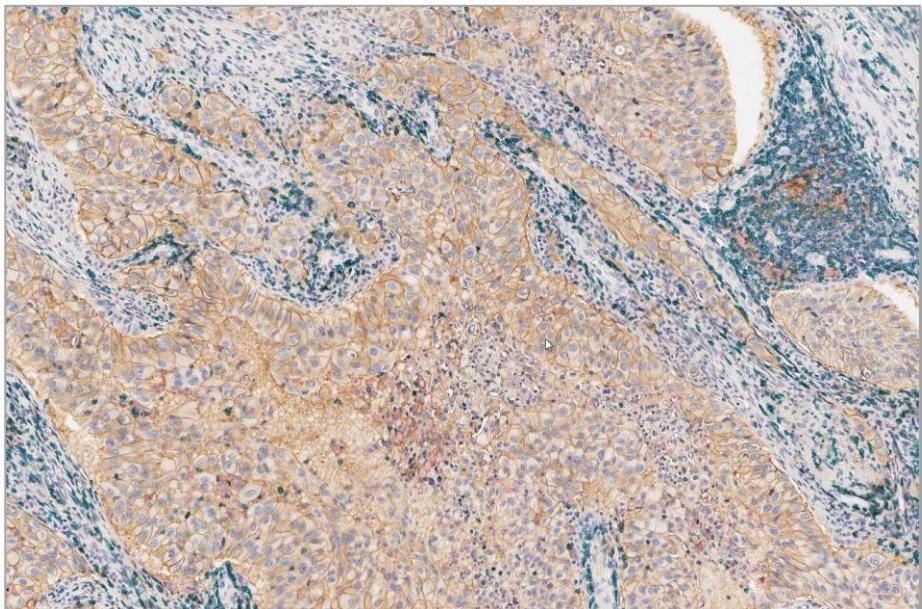
- Adaptive Immune Resistance
- Immune Tolerance
- Acquired Checkpoint Inhibitor Resistance
- Impaired Tumor Parenchyma Infiltration
- Immune Ignorance
- Intrinsic Checkpoint Inhibitor Resistance

+ CD68 PD1 Granzyme B (CD3)

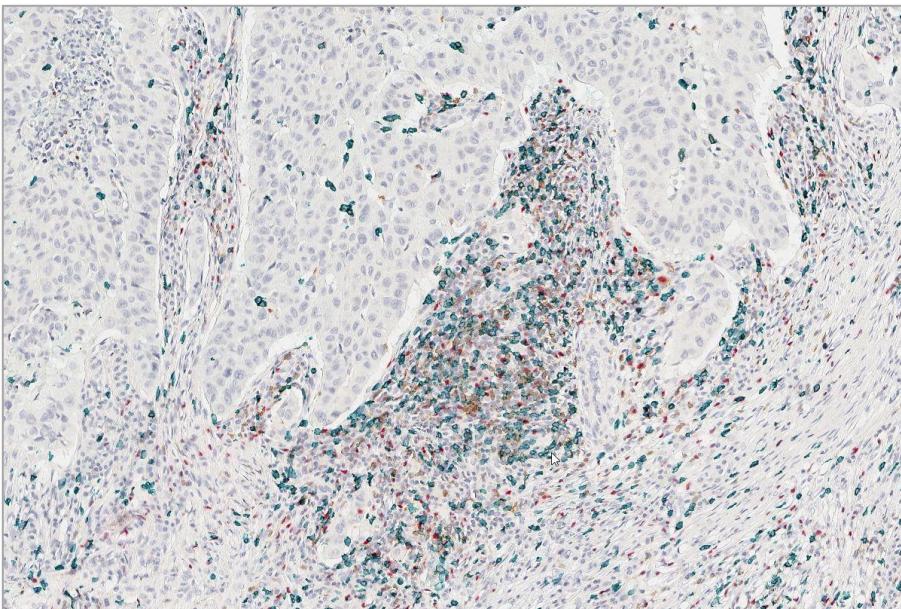


* In analogy to Teng et al *Cancer R* 2015 &
Hedge et al *Clin. Cancer Res* 2016

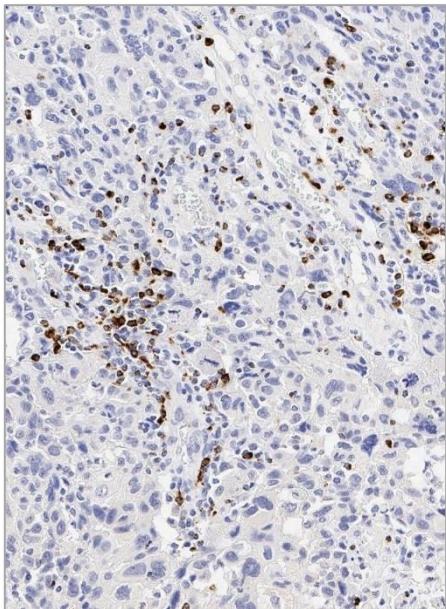
Multiplex approach optimizes spatial information



● CD3 ● CD68 ● PD-L1



● CD8 ● FoxP3 ● PD1

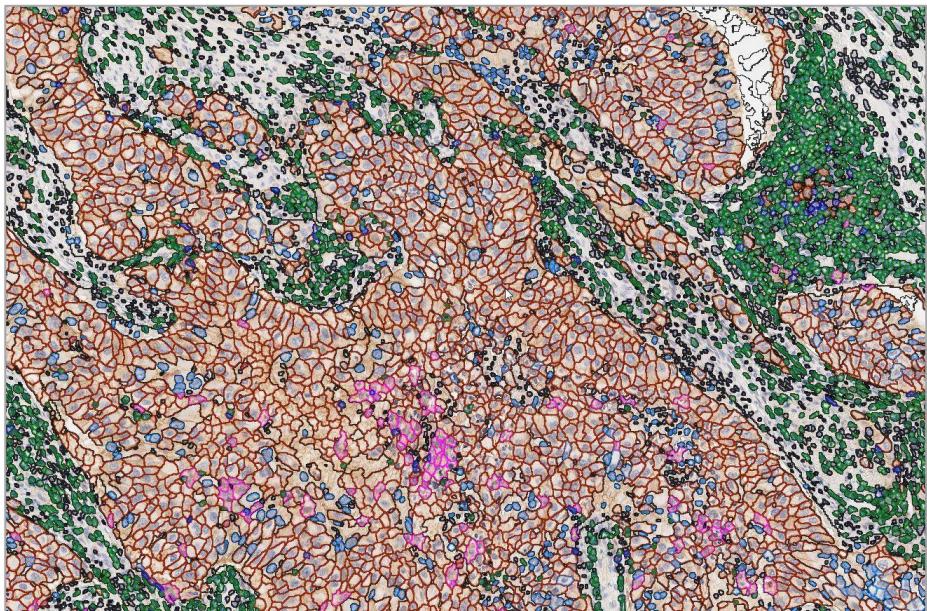


● Granzyme B

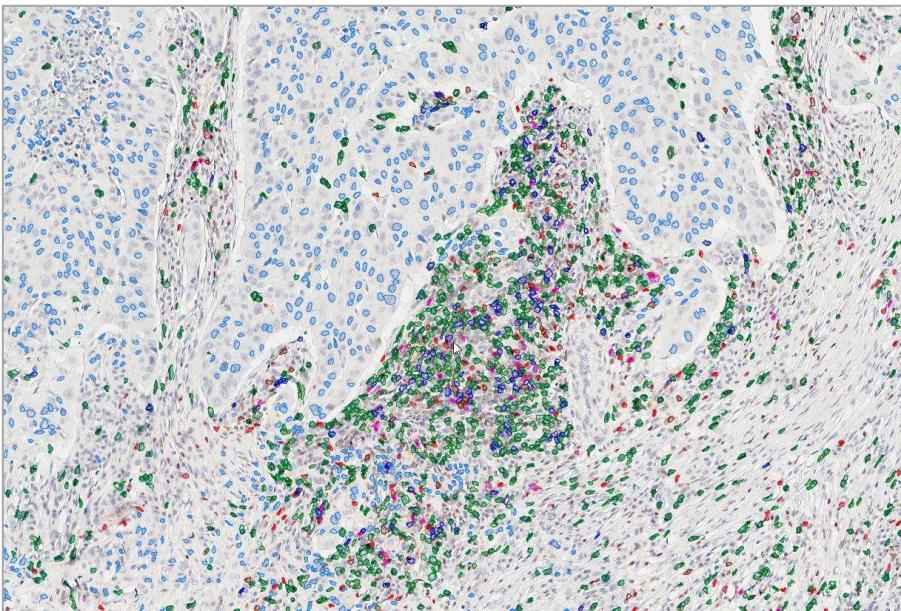
Slide Images: Courtesy Mosaic Laboratories, LLC, Lake Forest, CA

ADVANCING CANCER IMMUNOTHERAPY WORLDWIDE

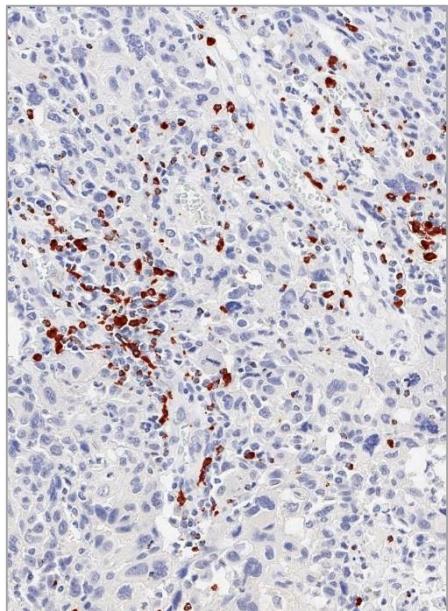
Multiplex approach optimizes spatial information



- CD68- PD-L1+ CD3-
- CD68+ PD-L1+ CD3-
- CD68- PD-L1- CD3+
- CD68- PD-L1+ CD3+
- CD68+ PD-L1- CD3-



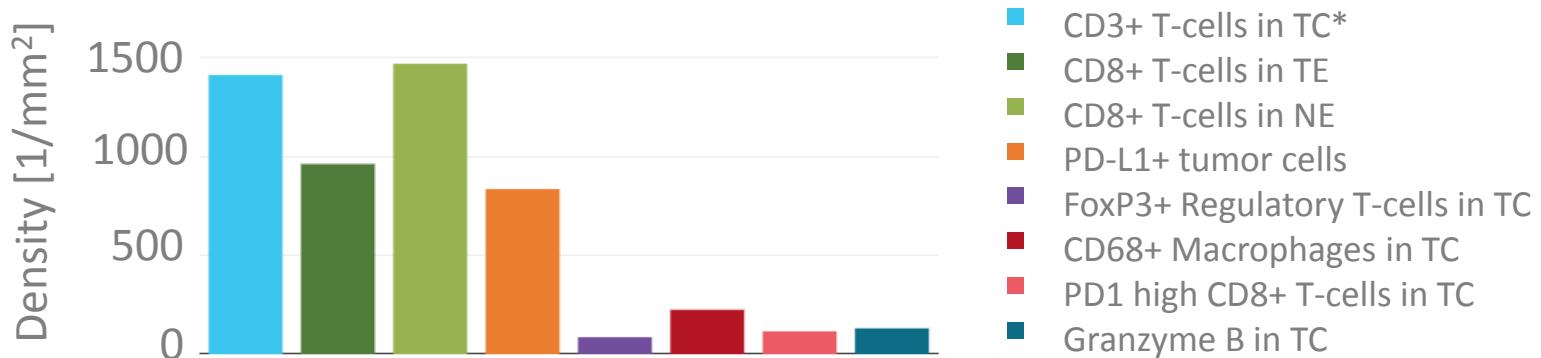
- FoxP3- PD1+ CD8-
- FoxP3+ PD1+ CD8-
- FoxP3 - PD1- CD8+
- FoxP3 - PD1+ CD8+
- FoxP3 + PD1- CD8-
- Negative cells TE
- Negative cells NE



- Granzyme B

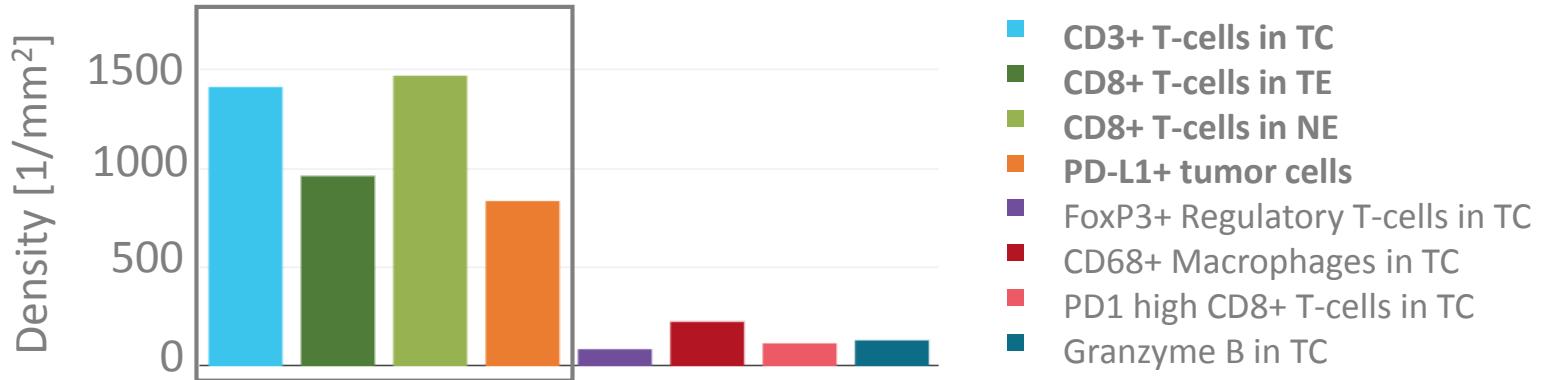
Slide Images: Courtesy Mosaic Laboratories, LLC, Lake Forest, CA

Case A



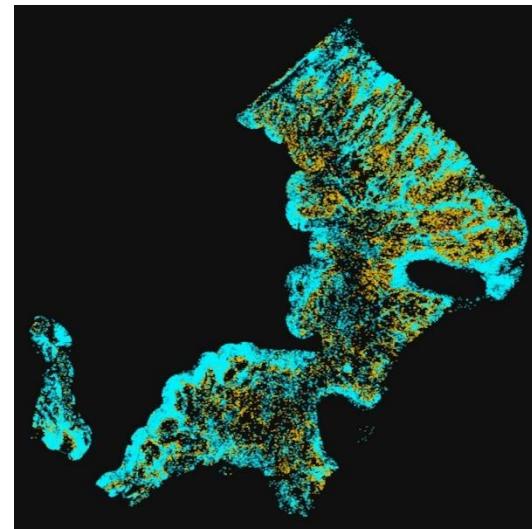
*TC = Tumor Center
IM = Invasive Margin
TE = Tumor Epithelium
NE = Non-Epithelium

Case A

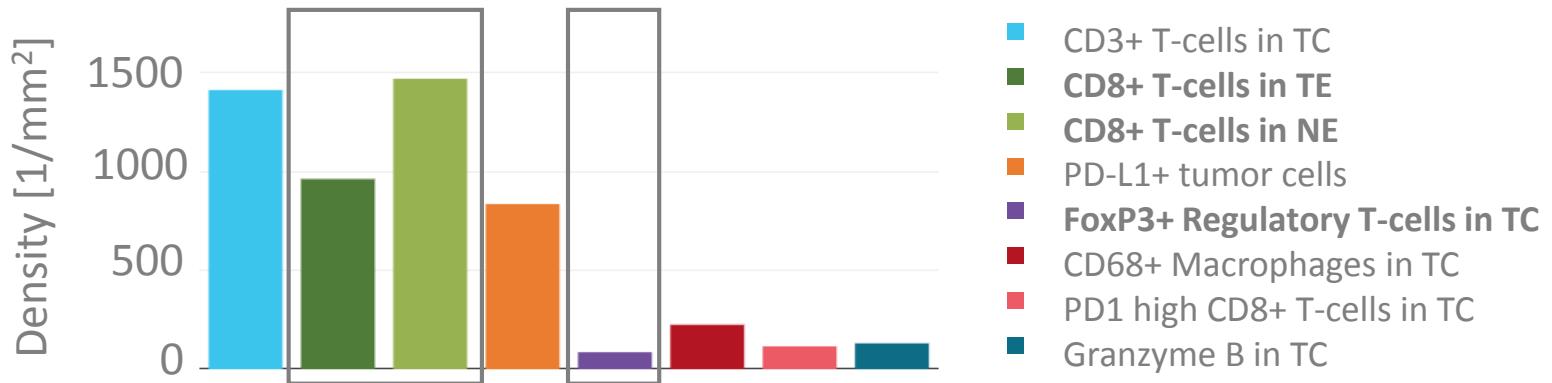


Adjacent localization

- CD3+ T-cells and
- PD-L1+ tumor cells

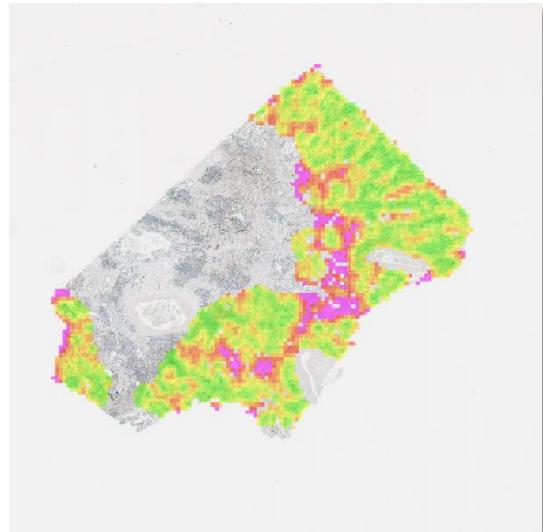


Case A



Distance of CD8+ to neighboring FoxP3+ cells

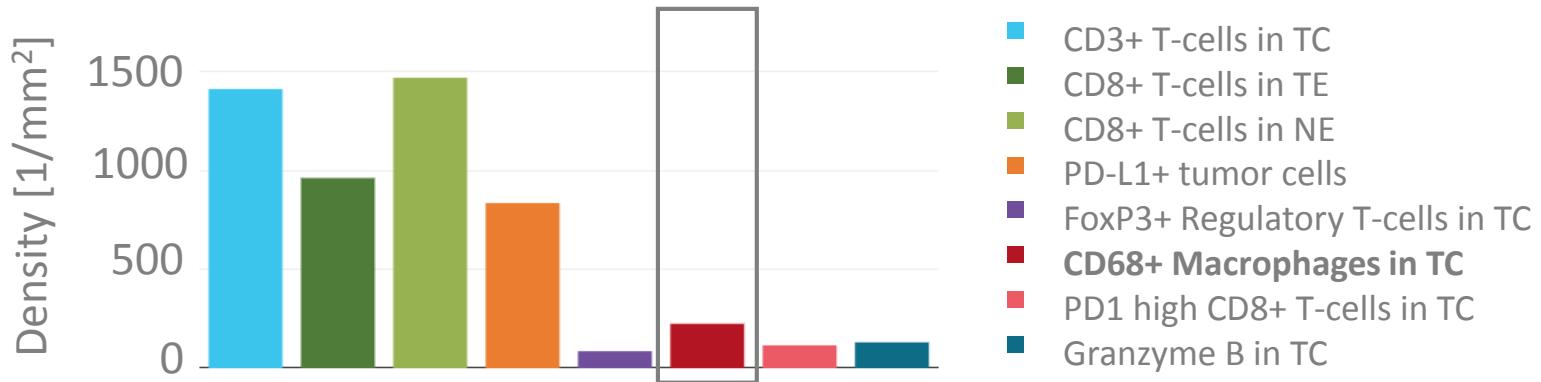
12% of CD8+ T-cells might be inhibited in TE*



ADVANCING CANCER IMMUNOTHERAPY WORLDWIDE

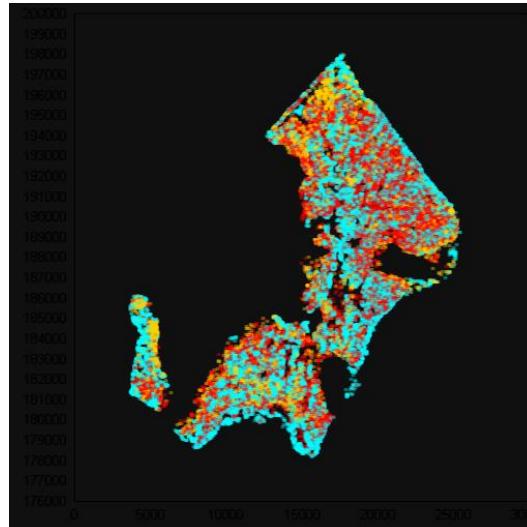
* CD8+ T-cells within <30μm distance of a FoxP3+ T-cell

Case A

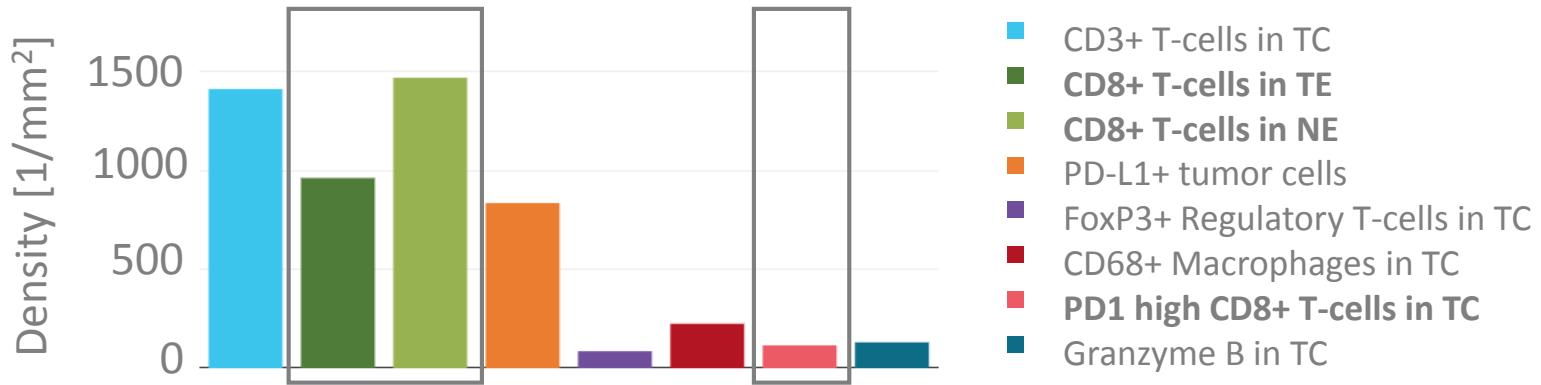


Macrophages sparsely
populate the tumor

- PD-L1+ tumor cells
- PD-L1- tumor cells
- Macrophages

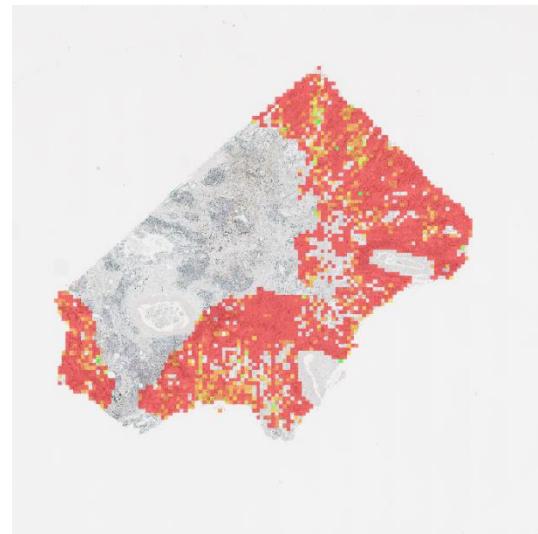


Case A

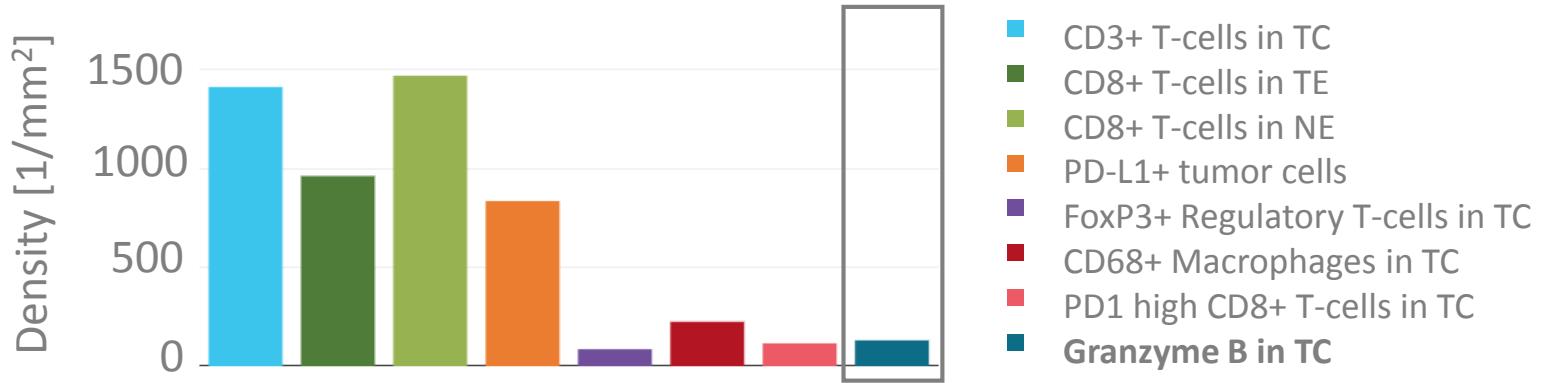


Visualization of the ratio
CD8+PD1 low/CD8+PD1 high

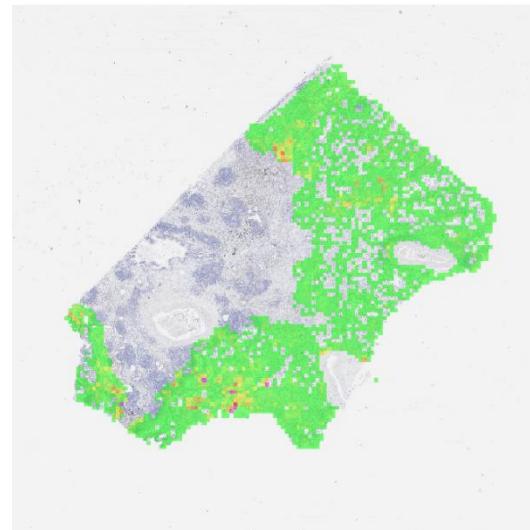
10% of all CD8+ T-cells are PD1 high



Case A



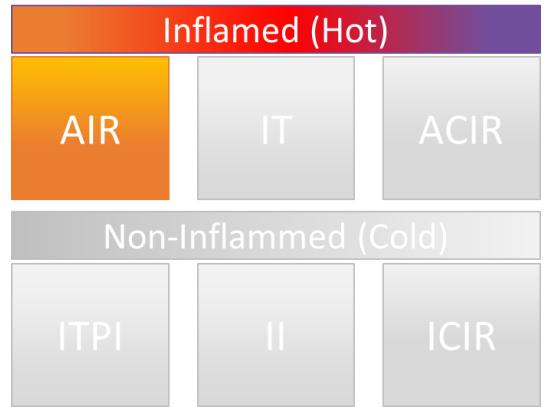
Granzyme B
Coverage Score*: 1



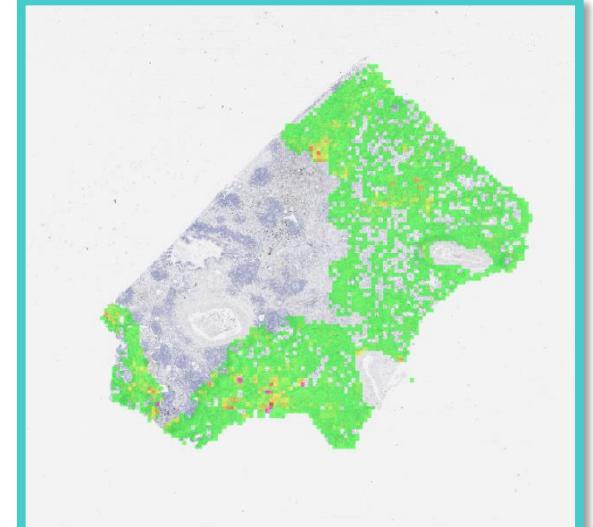
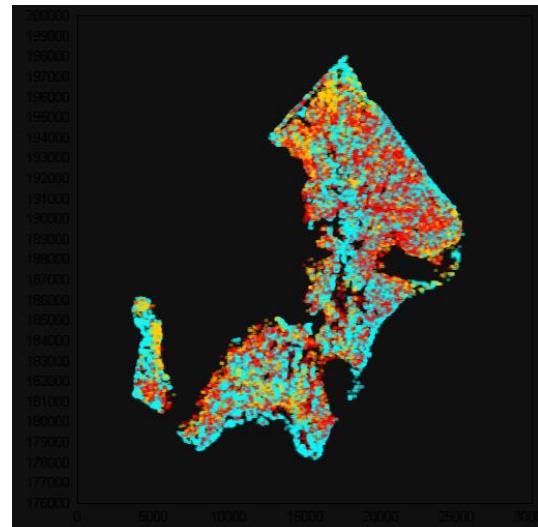
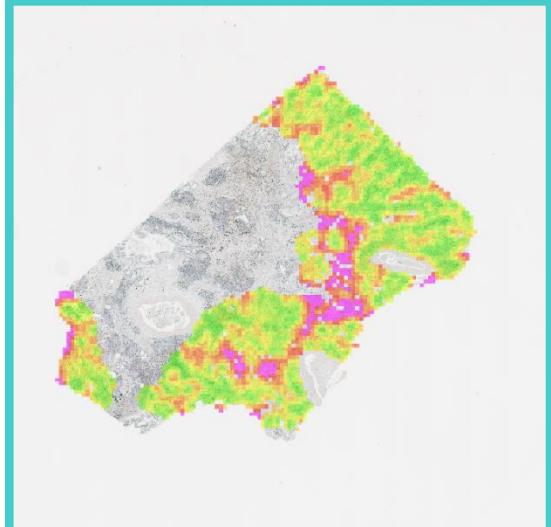
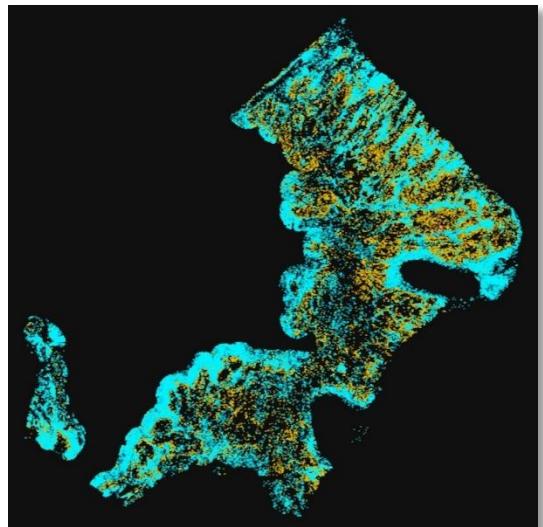
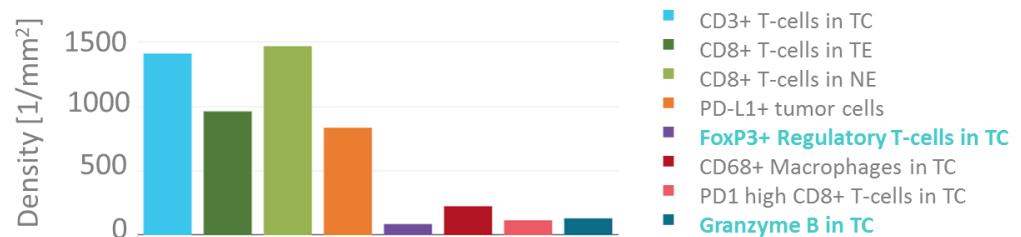
ADVANCING CANCER IMMUNOTHERAPY WORLDWIDE

* Score [0:4]: GranzB+ area related to number of CD8+ T-cells

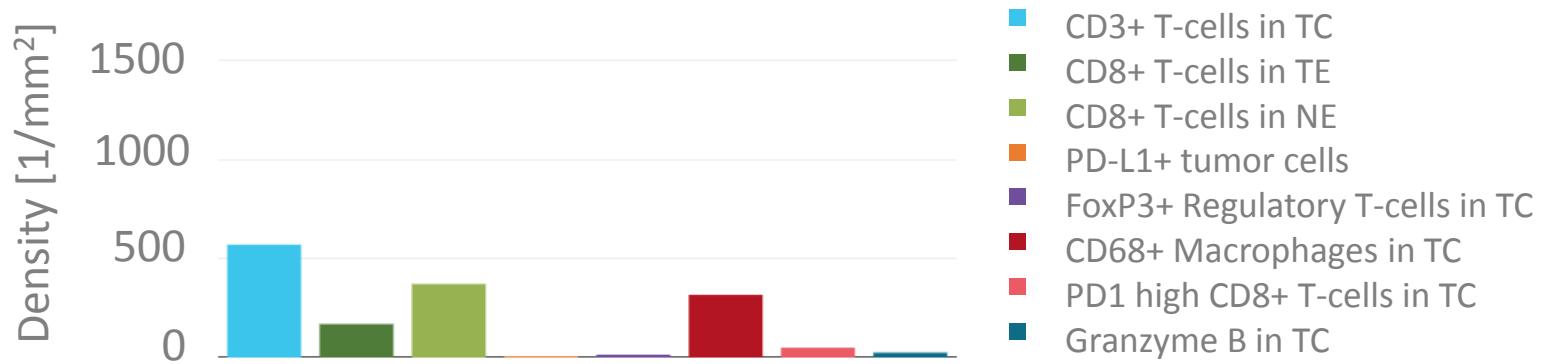
Case A



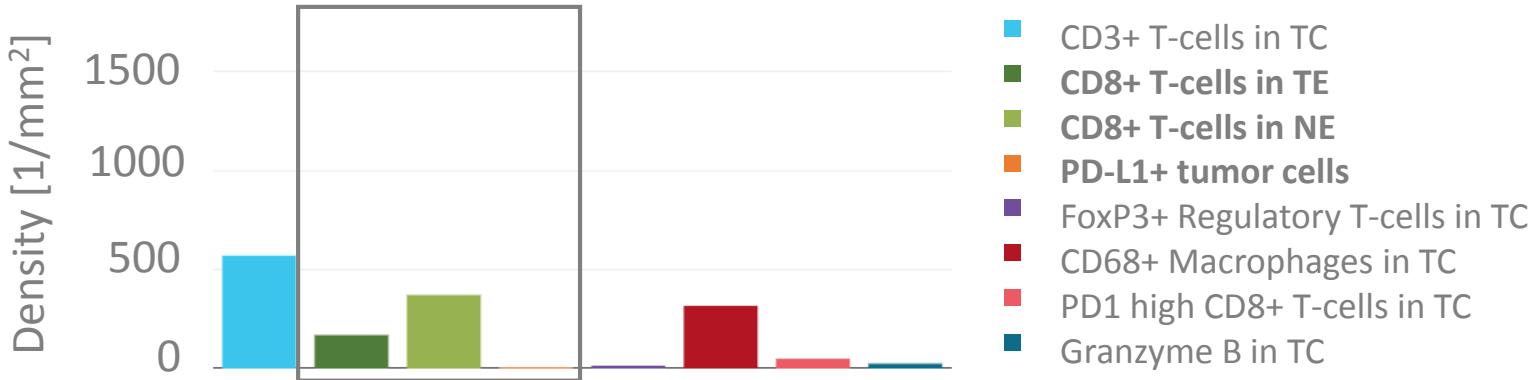
Adaptive Immune Resistance
CD8 (TE): ↑ PD-L1 : ↑



Case B



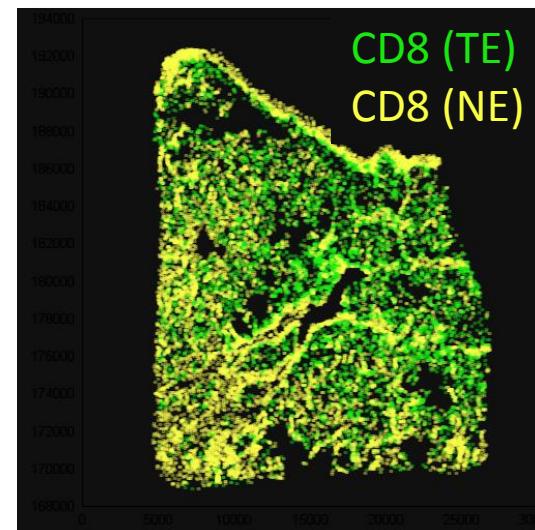
Case B



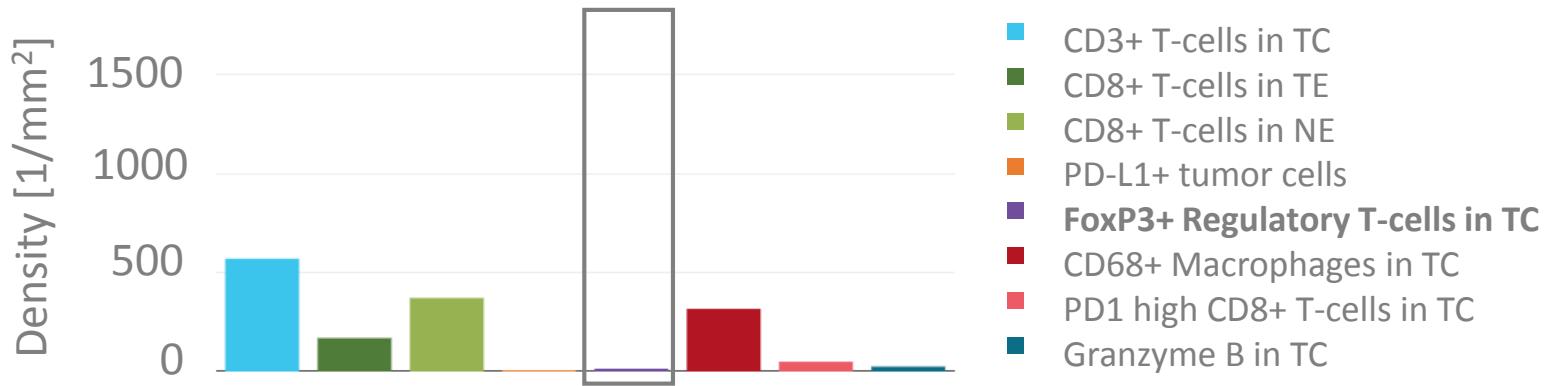
Ratio of CD8+ T-cells:

NE/TE = 2.2

IM/TC = 2.2

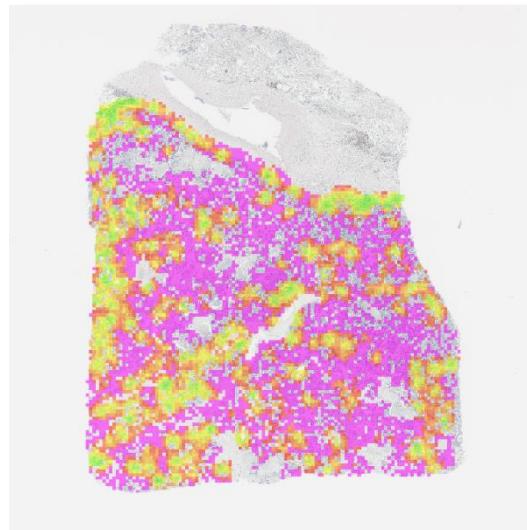


Case B

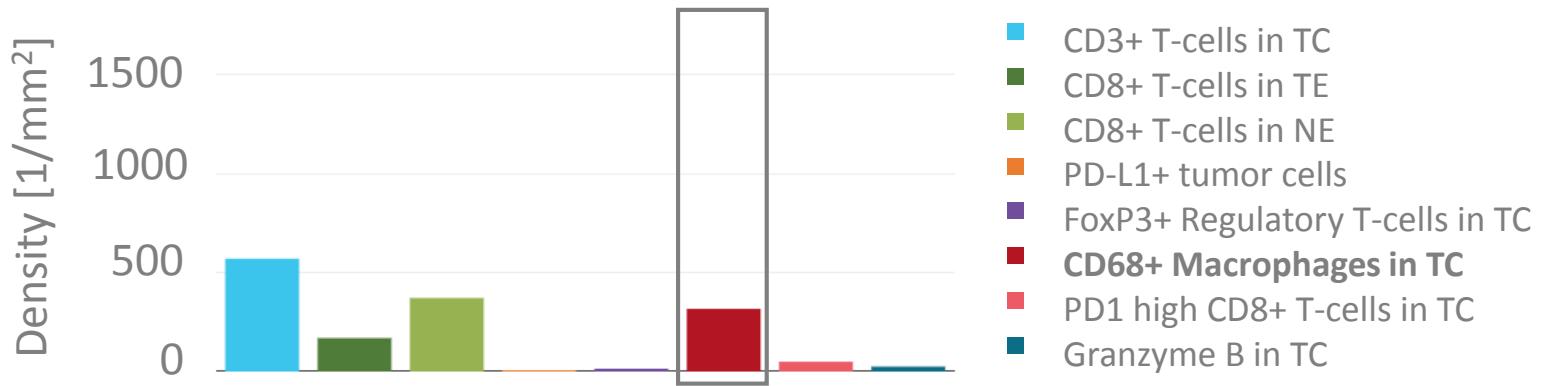


Distance of CD8+ to neighboring FoxP3 cells

4% (TE), 8% (NE) and 19% (IM) of CD8+ T-cells might be inhibited



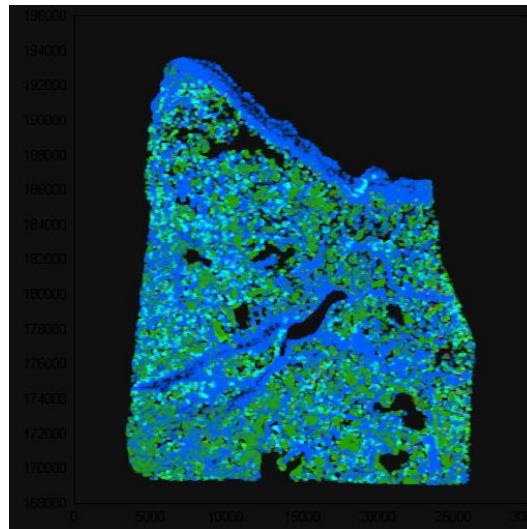
Case B



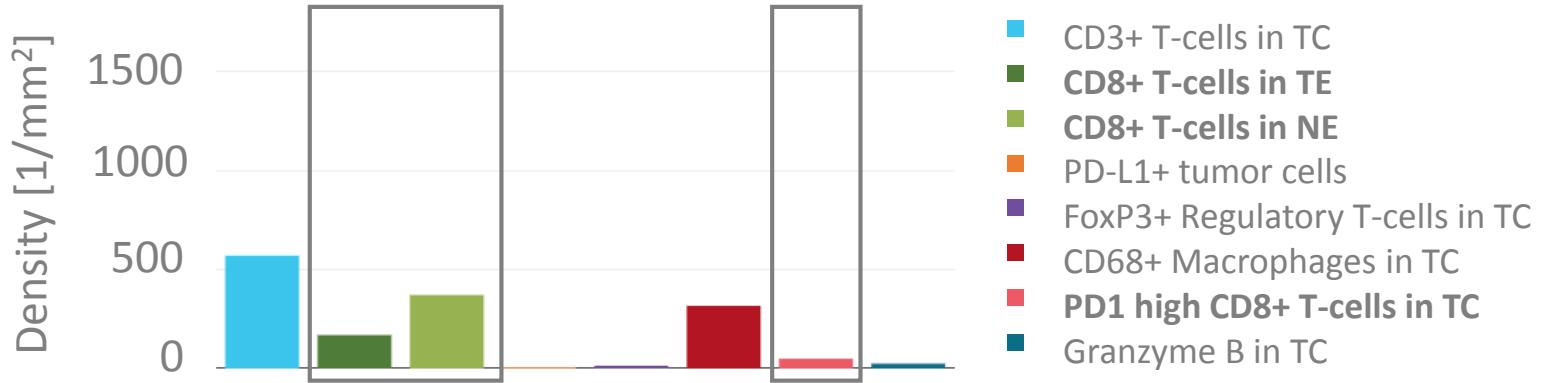
Ratio Macrophages TC/IM =
6.6

40% (TC), 48% (IM) of
Macrophages PD-L1+

- CD3+ T-cells in TE
- CD3+ T-cells in NE
- Macrophages

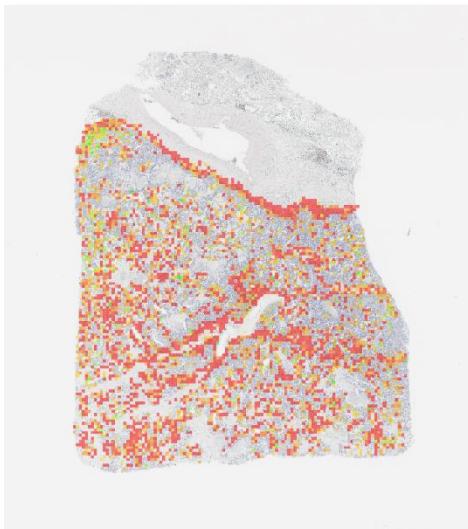


Case B

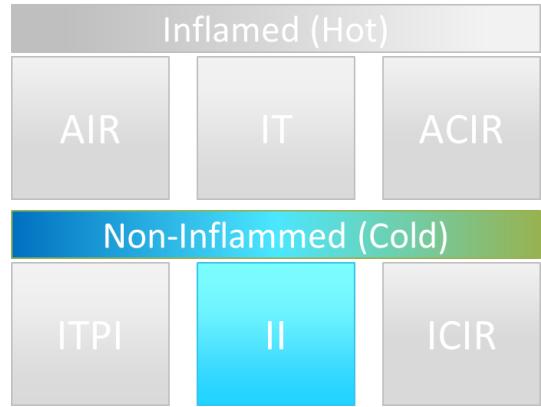


Visualization of the ratio
CD8+PD1 low/CD8+PD1 high

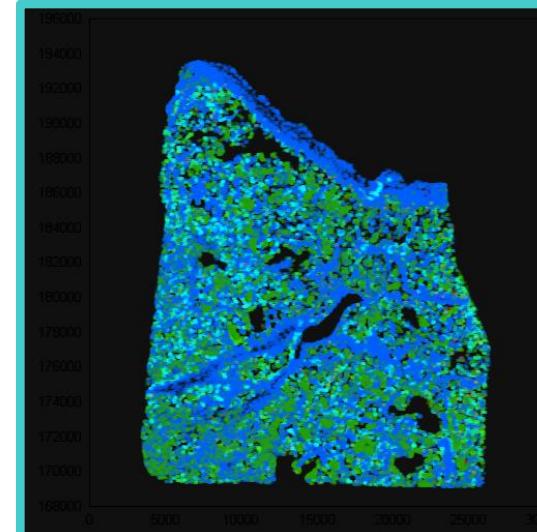
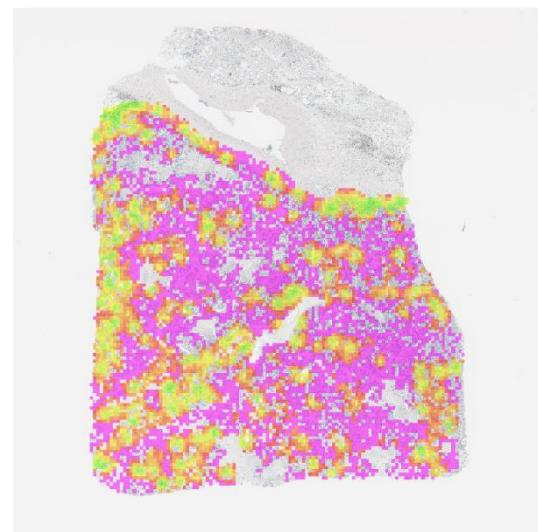
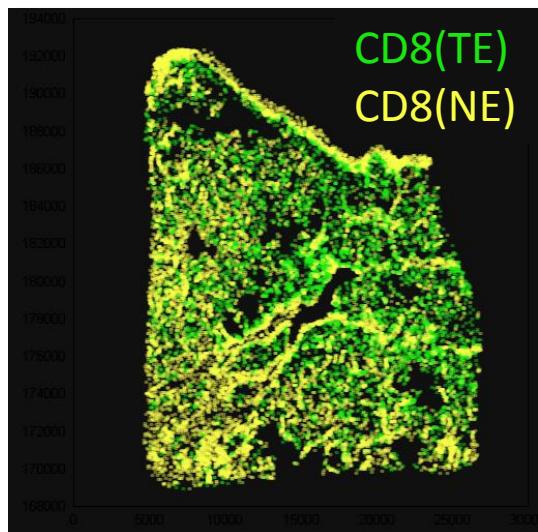
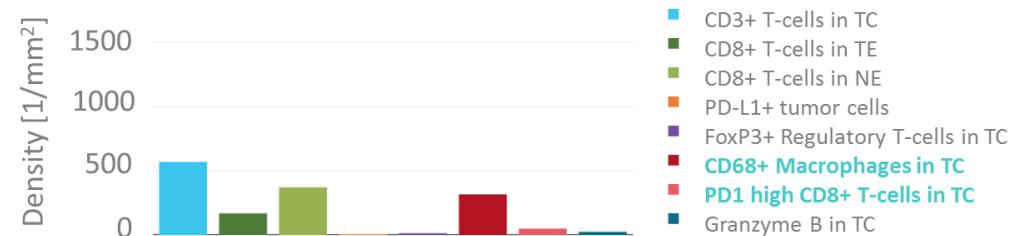
19% PD1 high of all CD8+ cells



Case B



Immune Ignorance
CD8 (TE): ↓ PD-L1 : ↓





Lessons and Take Home Messages

Definiens IO-Panel enables:

- **Quantitative analysis** of immune cells **in the context of tumor tissue** from multiplex IHC assays provided by Mosaic Laboratories
- Identification of **interactions** between the immune system and the tumor on a **single-cell resolution level**
- **Construction of immune landscapes** within the tumor-microenvironment
- Visualization of **prevalent immune populations**, hotspots **of interaction** and **tumor heterogeneity**

Generated **insights** provide a comprehensive assessment of a **patient's tumor immune status** and provide indispensable **information for personalized medicine**



Acknowledgements

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