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## **Licensed Patents**

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(SPOUSE): Jounce



# **Immune Checkpoint Blockade in Cancer Therapy:**

*New insights into therapeutic mechanisms of  
anti-CTLA4 and anti-PD-1*

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*Regental Professor and Chair, Department of Immunology  
Executive Director, Immunotherapy Platform*

*Co-Director, Parker Institute for Cancer Immunotherapy at MDACC  
Olga Keith Weiss Distinguished University Chair for Cancer Research*

***Mechanistic Understandings and Misunderstandings  
SITC 2020***

**November 14, 2020**

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MDACC Immunotherapy Platform

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Stand UP to Cancer

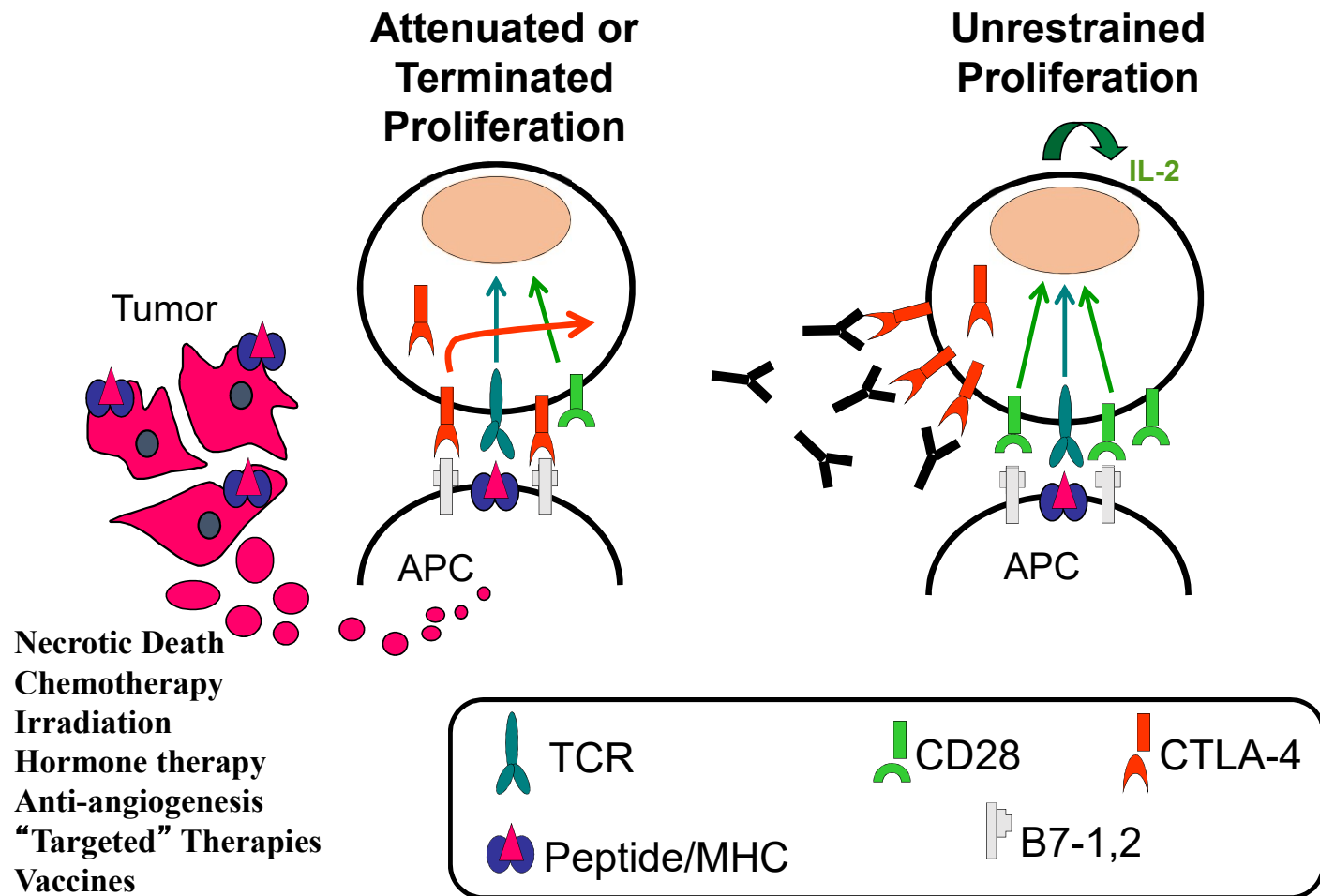


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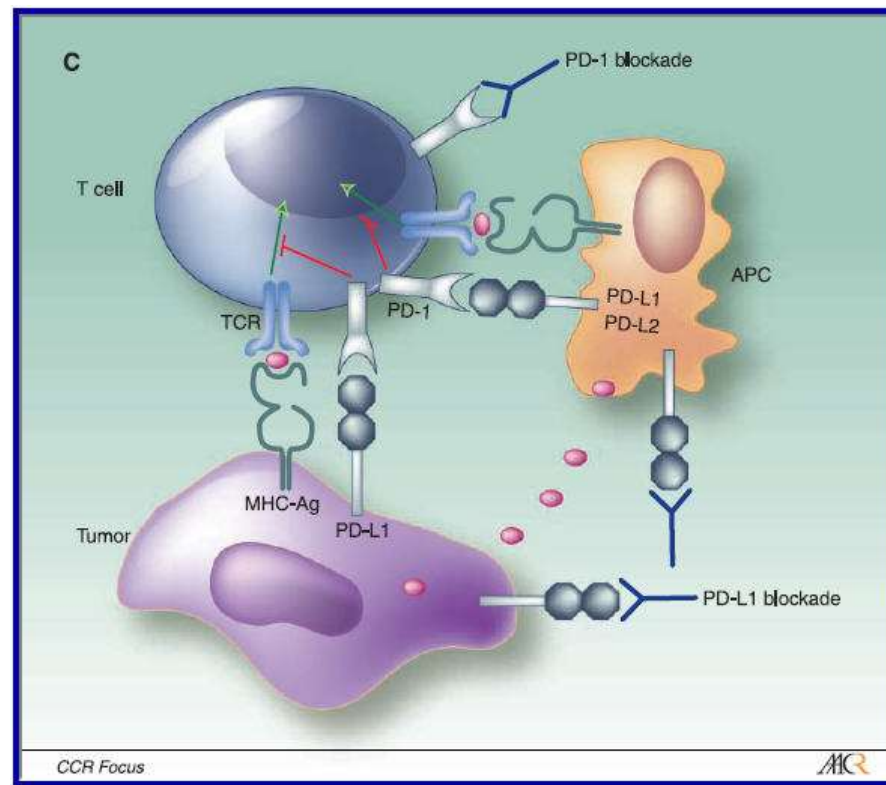
CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

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*for* CANCER IMMUNOTHERAPY

# CTLA-4 Blockade Enhances Tumor-Specific Immune Responses



# Programmed Death 1 (PD-1)



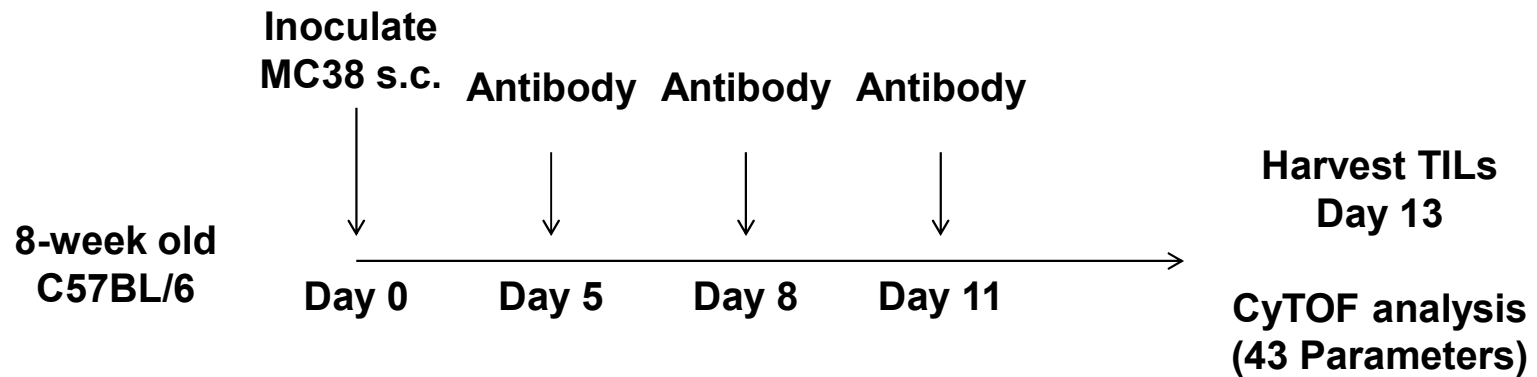
## **Anti-CTLA-4**

- **Hard wired**
- **Targets CD28 pathway**
- **Works during priming**
- **Expands clonal diversity**
- **Responses often slow**
- **Primarily effects CD4 T cells**
- **Can move T cells into “cold” tumors**
- **Adverse events relatively frequent**
- **Disease recurrence after response rare**

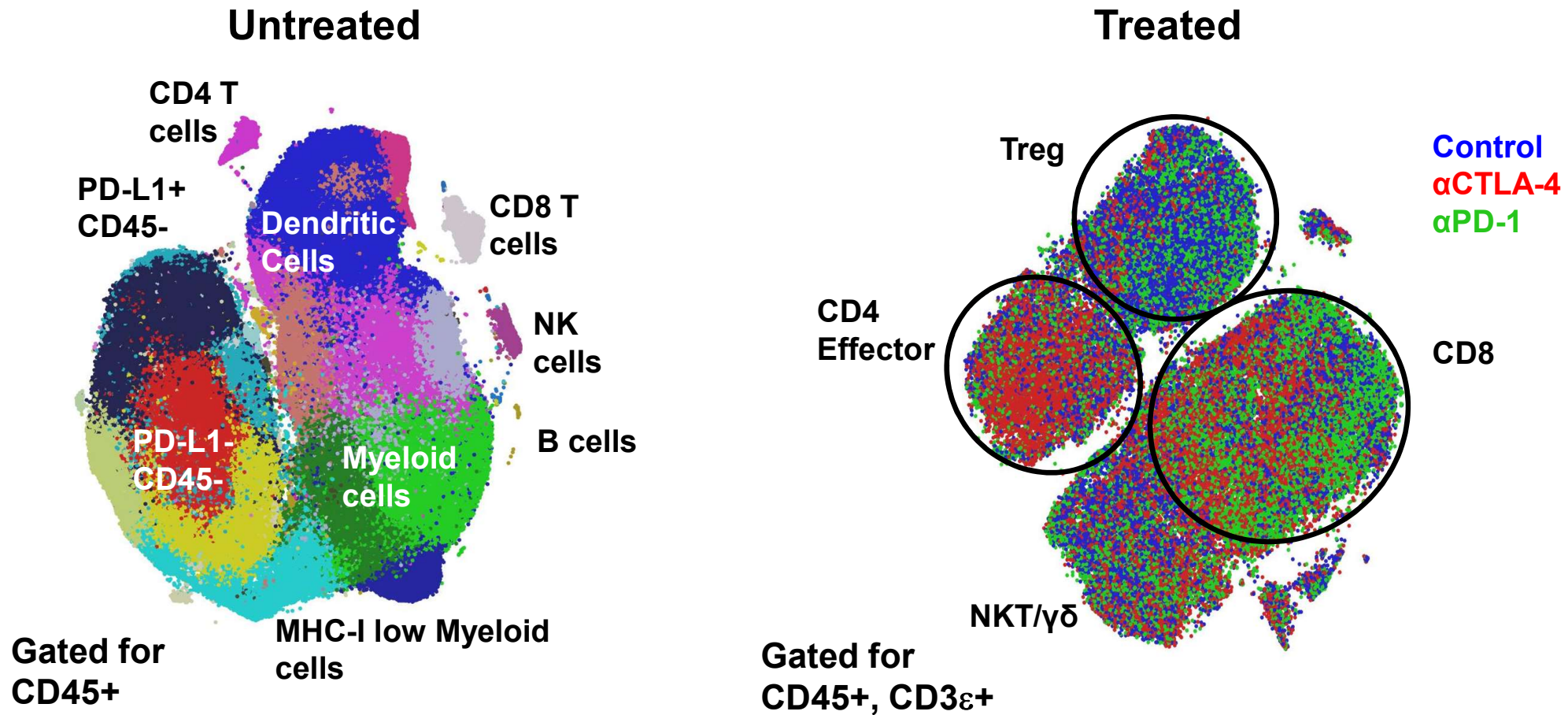
## **Anti-PD-1**

- **Induced resistance**
- **Targets TCR pathway**
- **Works on differentiated T cells**
- **Does not expand clonal diversity**
- **Responses usually rapid**
- **Only effects CD8 T cells**
- **Does not move T cells into tumors**
- **Adverse events less frequent**
- **Disease recurrence after response significant**

# Mass cytometry analysis of MC38 TILs

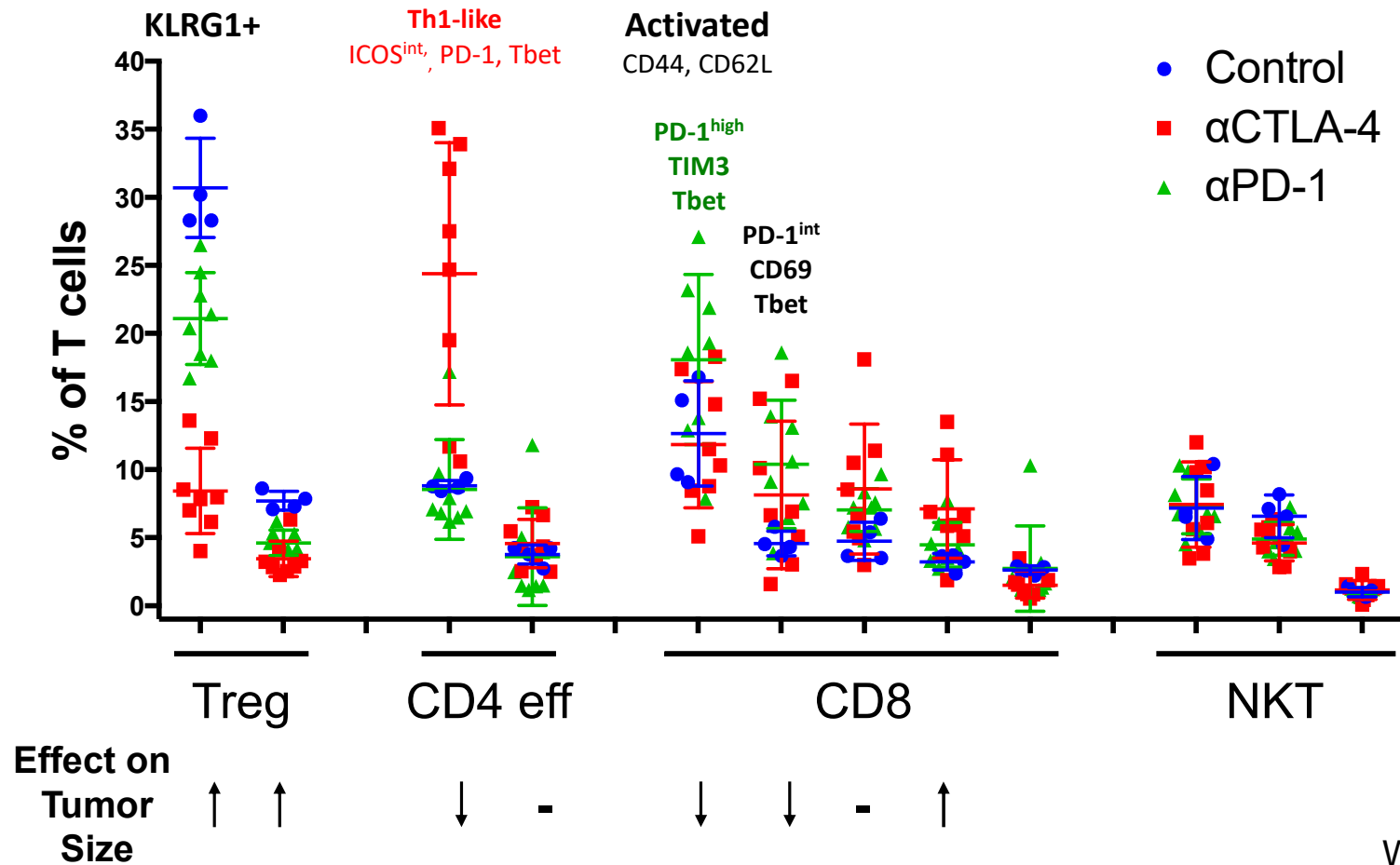


# Mass Cytometry Analysis of MC38





# Checkpoint blockade modulates MC38 infiltrating T cell population frequencies



# CELLULAR TARGETS OF CHECKPOINT BLOCKADE

## Monotherapy:

### CTLA-4

CD4 ICOS+ Tbet+Th1-like Effector

CD8 Tbet+ EOMES+ Effector

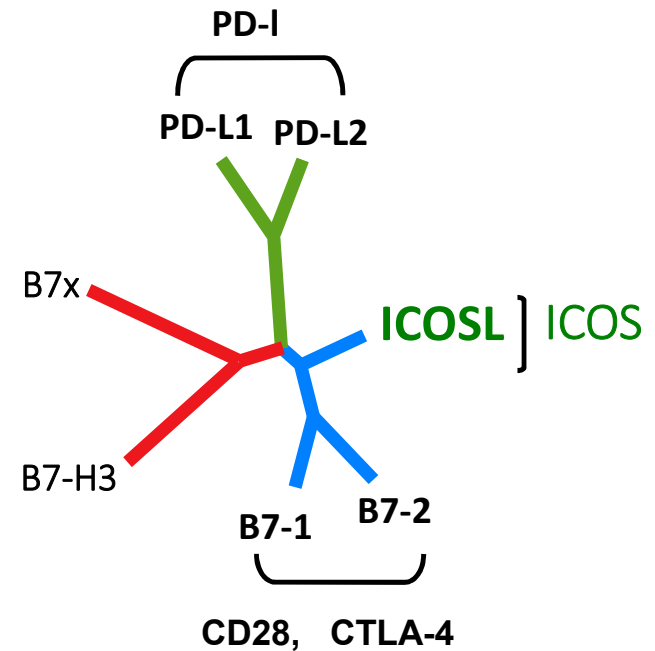
### PD-1

CD8 Tbet+ EOMES+ Effector

CD8 Tbet+ PD-1++ Lag2++ Tim3++ “Exhausted”

# Inducible Costimulator (ICOS)

- Member of CD28/CTLA-4 superfamily
- Usually associated with Tfh or Treg CD4 cells
- Role in cancer shown by Sharma (2006) *ICOS+Th1-like CD4 cells expanded by CTLA-4 blockade, critical for optimum efficacy*

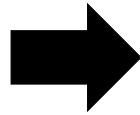


Does negative costimulation effect the regulation of T cell differentiation?

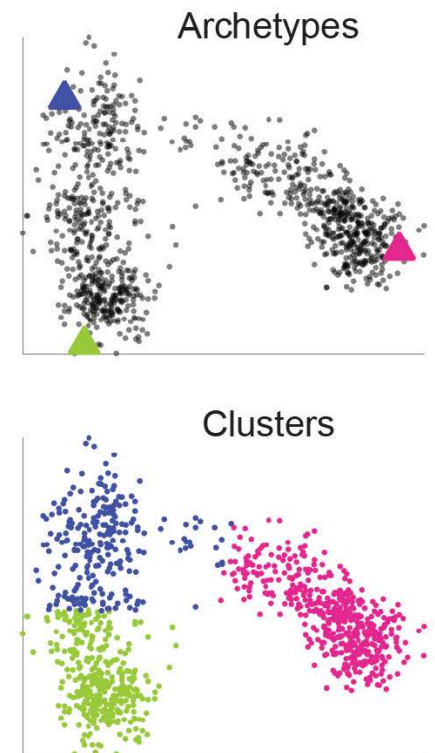
# Comprehensive profiling of cell types in the genetic absence of CTLA-4 or PD-1



Mass cytometry analysis of  
*Ctla-4*<sup>-/-</sup> and littermate controls

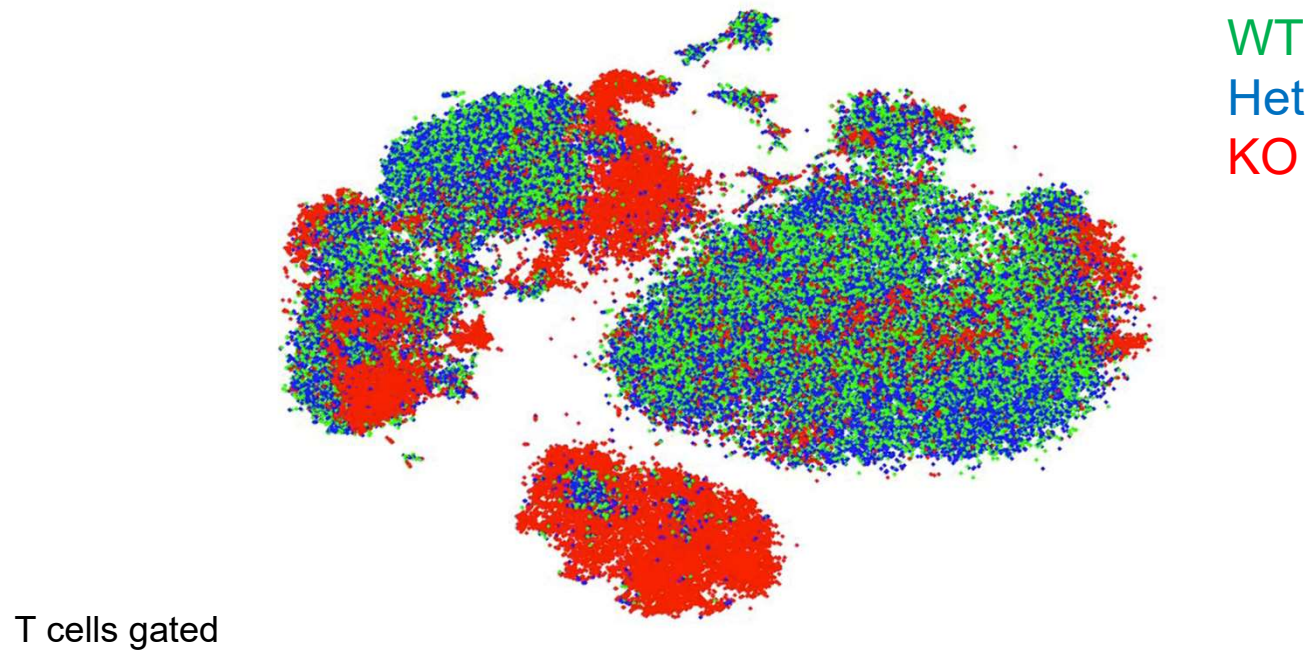


Single-cell data

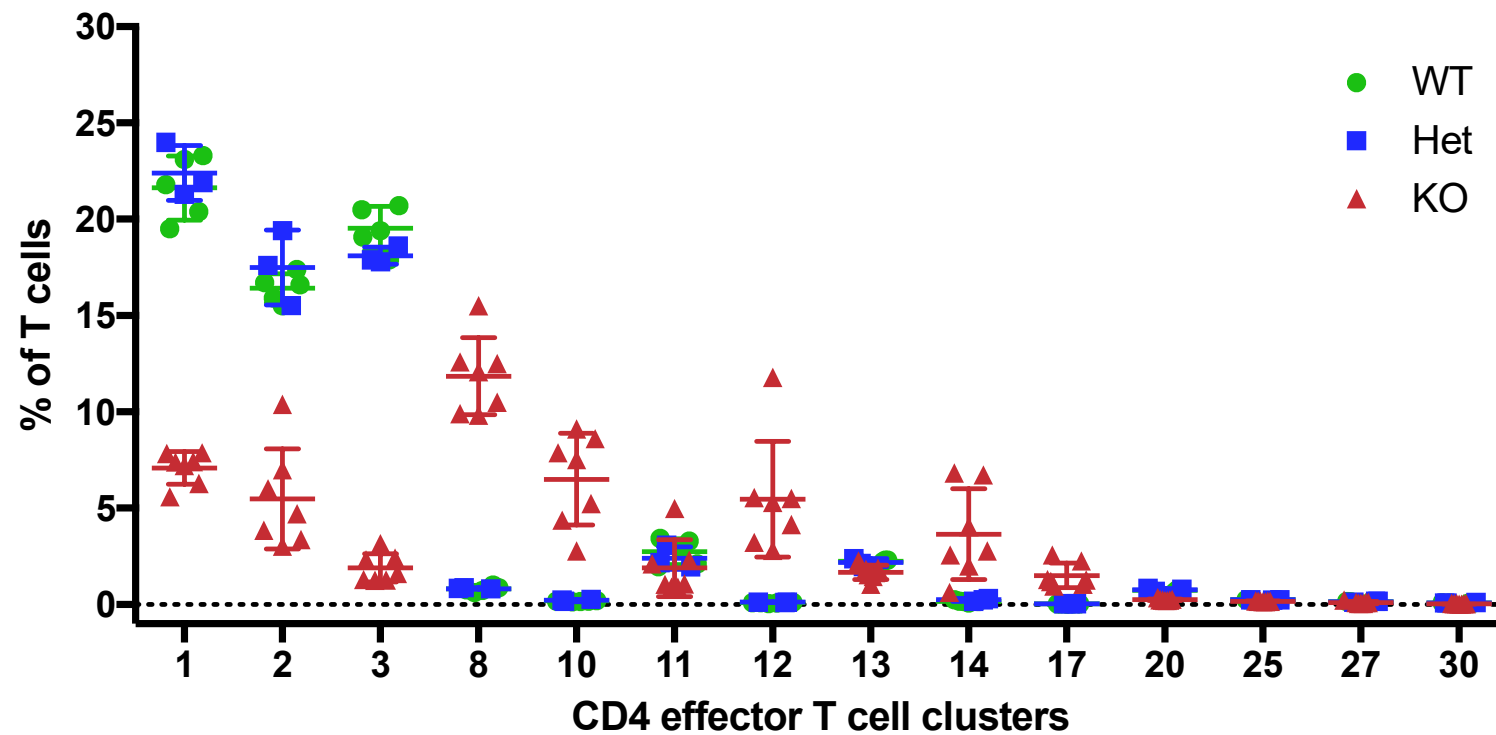


Wei et al *Immunity* 2019

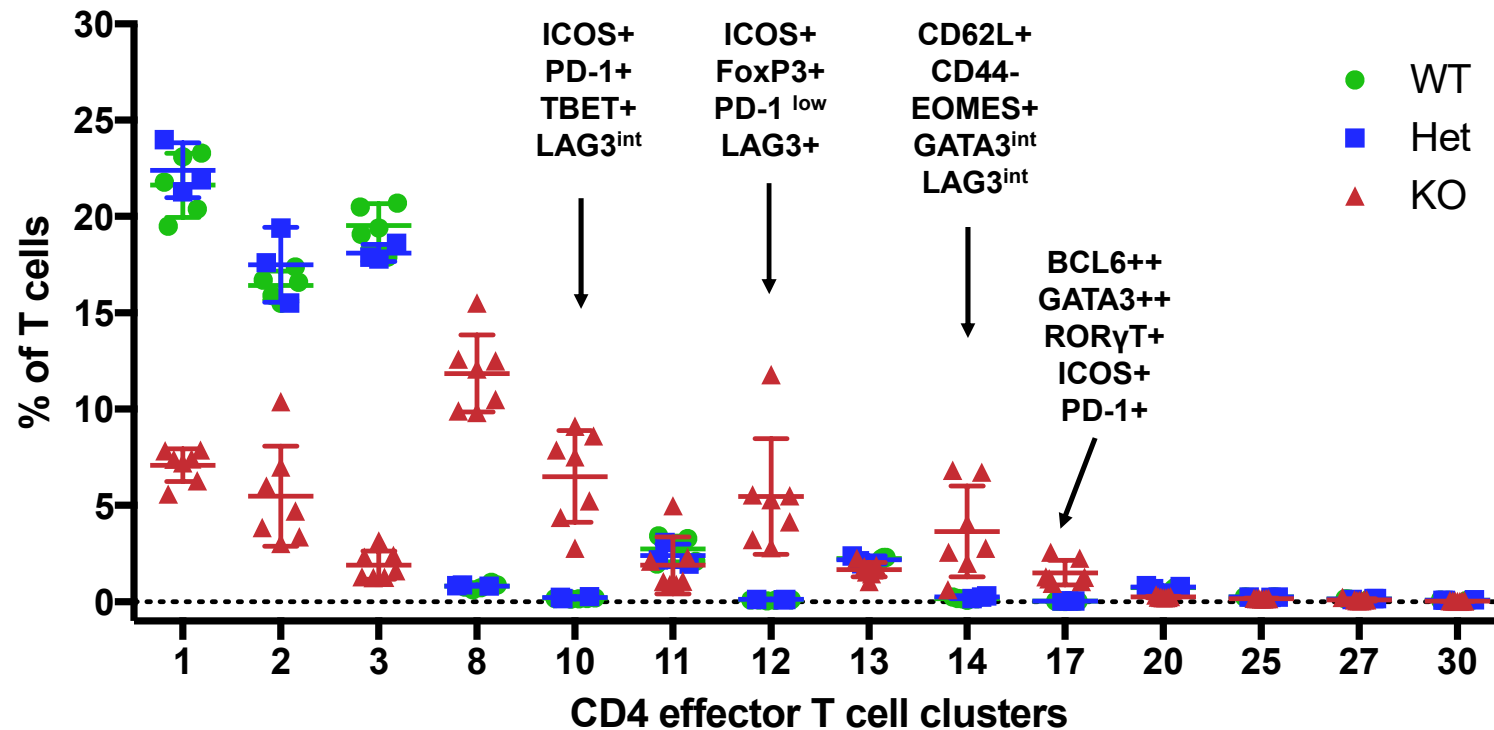
# New T cell phenotypes arise in the absence of CTLA-4



## Multiple non-canonical CD4 T cell subsets arise in the absence of CTLA-4



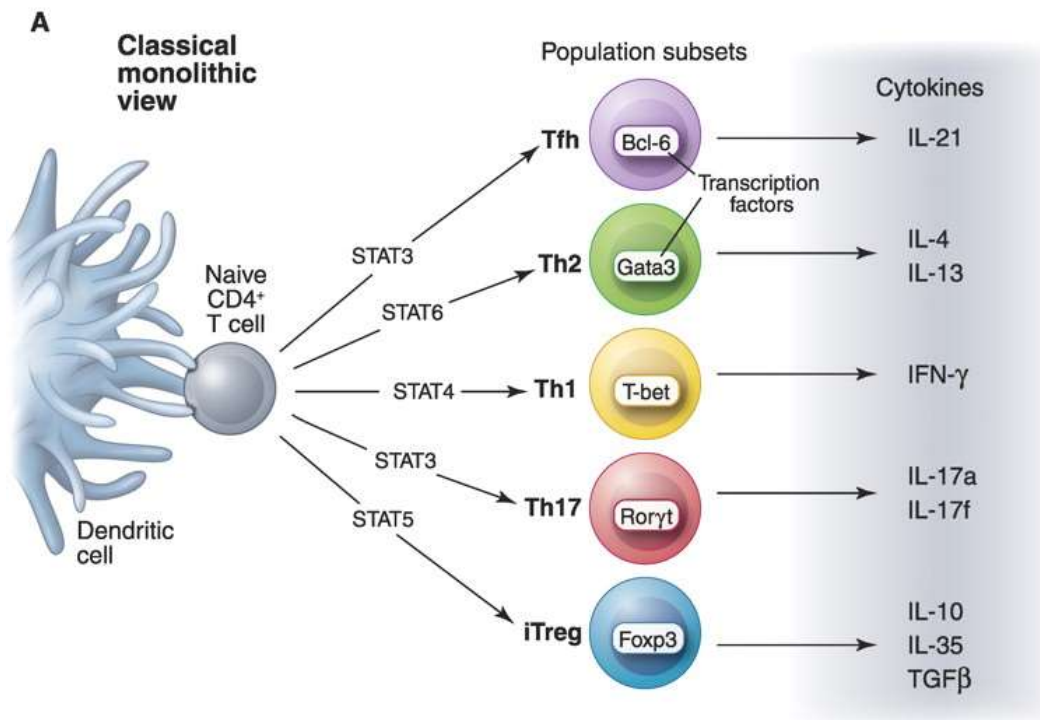
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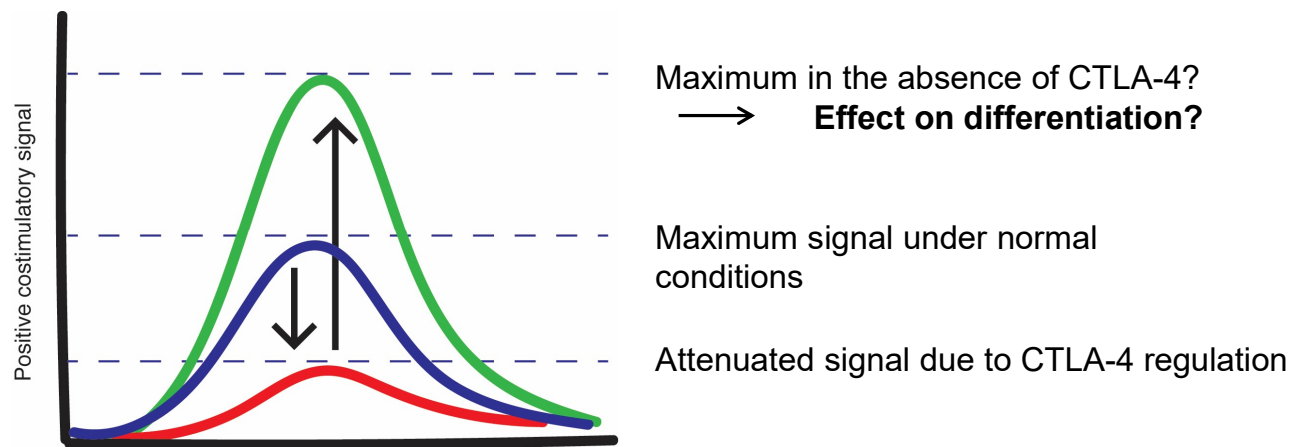


# CD4 T cell differentiation is complex

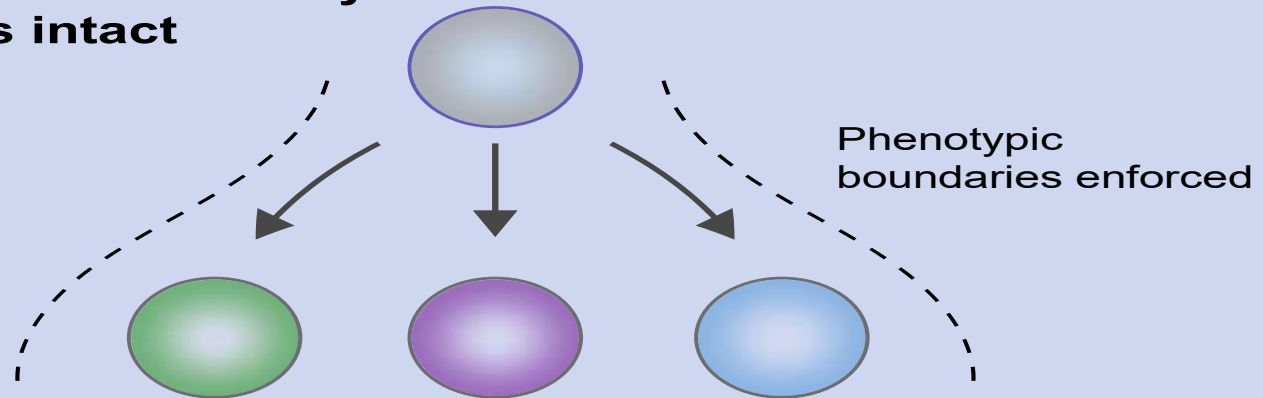
## How are phenotypes, lineages, and boundaries defined?



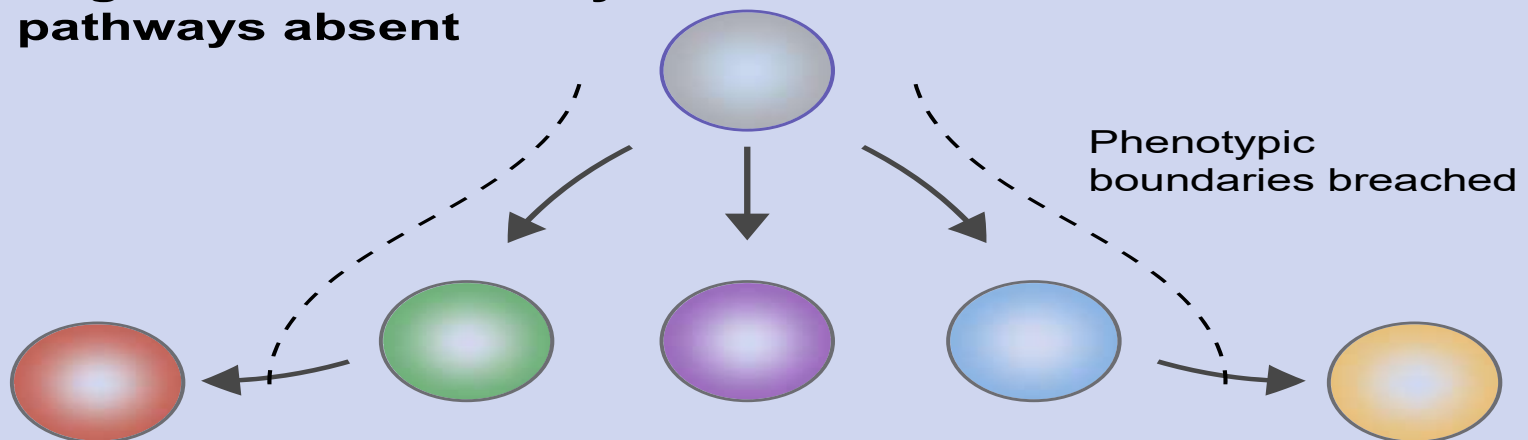
# Does negative costimulation regulate T cell differentiation?



**Negative costimulatory pathways intact**



**Negative costimulatory pathways absent**



Does negative costimulation effect the regulation of T cell differentiation?

Absence of CTLA-4

CD4: Appearance of atypical ICOS+ Th1 cells

CD8: No change in range of phenotypes

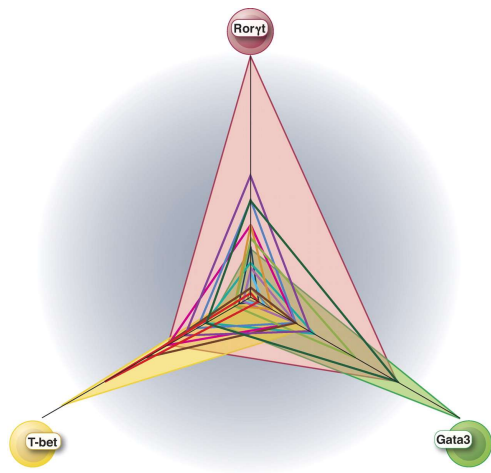
Absence of PD-1

CD4: No change in range of phenotypes

CD8: No change in range of phenotypes

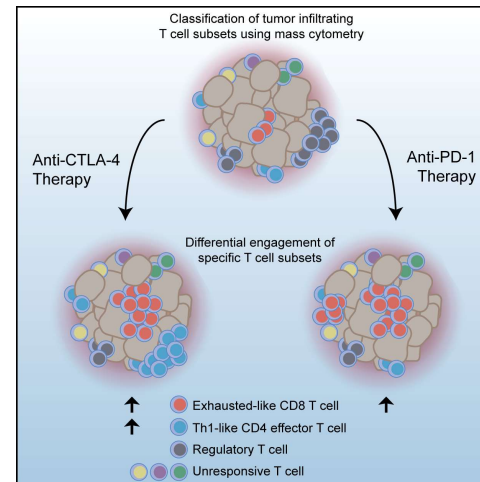
## Potential implications

Evidence for a 'nuanced model' of T cell differentiation



O'Shea and Paul. *Science* (2010)

Role of T cell differentiation in mechanisms of immunotherapies

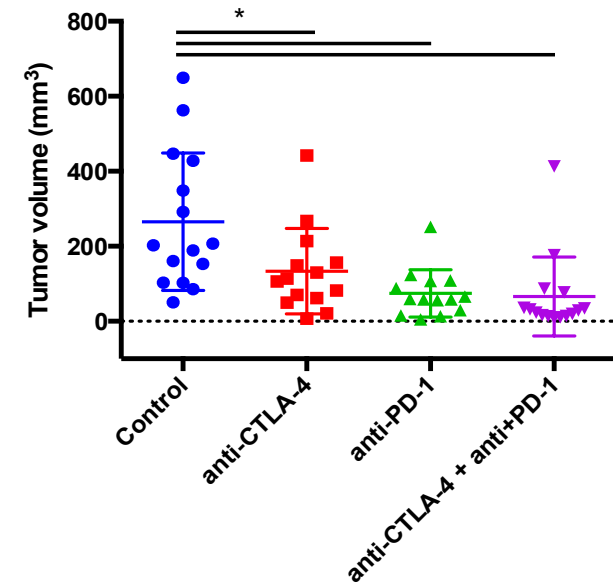
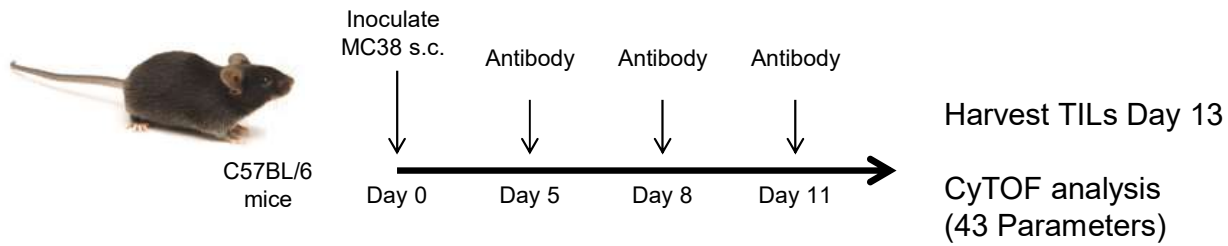


Wei et al. *Cell* (2017)

How do the cellular mechanisms of  
checkpoint blockade by CTLA-4 and interact?

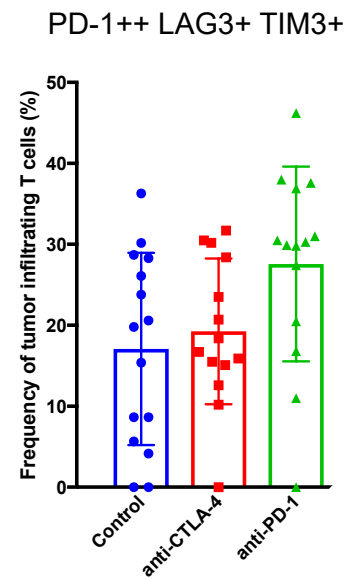
$$A + B = AB \quad \text{or} \quad A + B = C$$

# Mass cytometry analysis of MC38 TILs



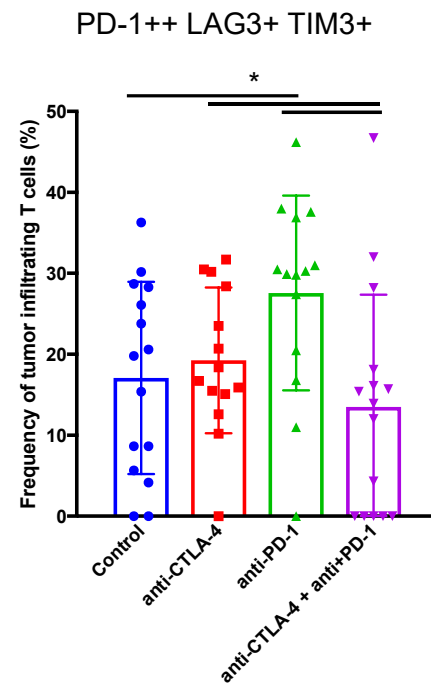
Wei et al *PNAS* 2019

# Expansion of phenotypically exhausted CD8 T cells

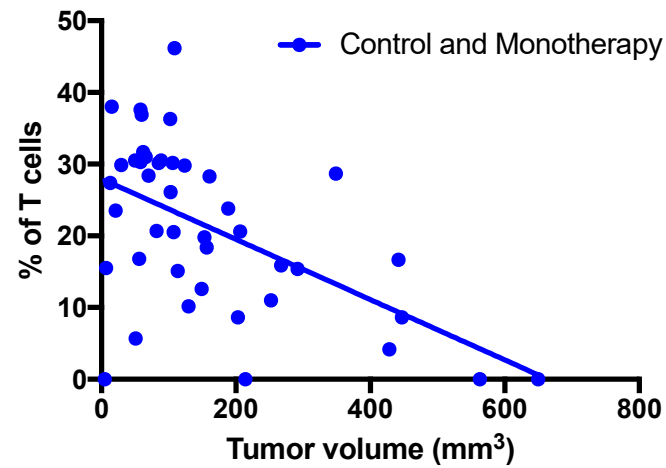




# Combination therapy differentially affects CD8 subsets

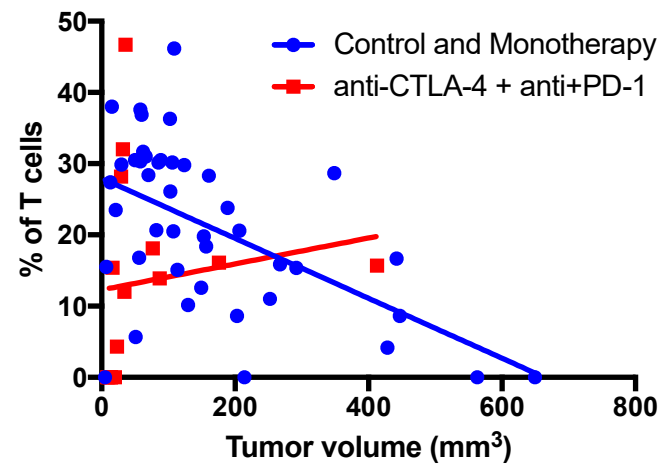


Do phenotypically exhausted CD8 T cells have the same function in the context of combination therapy?

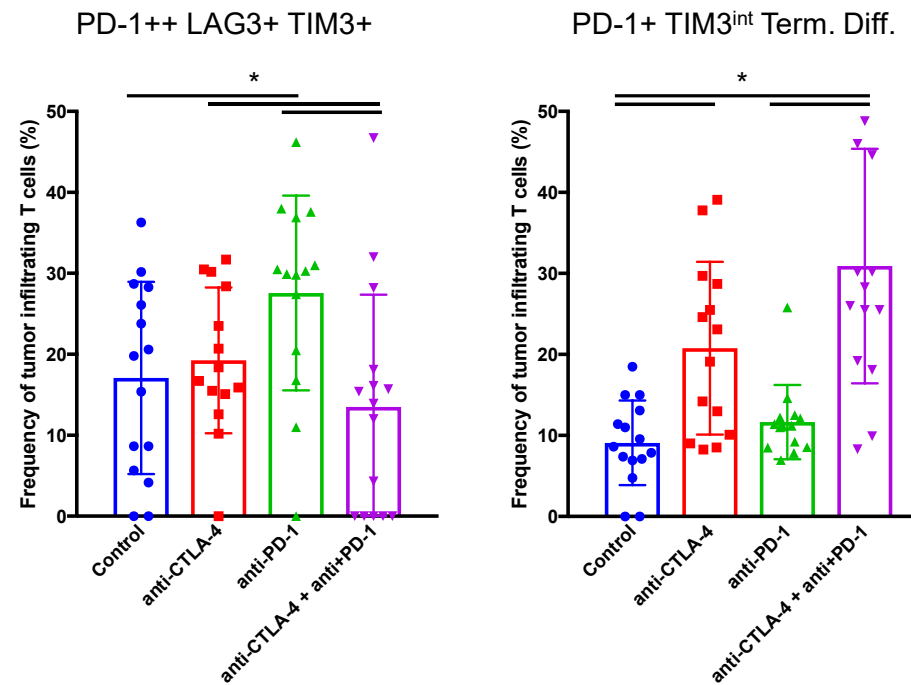


Wei et al in press *PNAS* 2019

Do phenotypically exhausted CD8 T cells have the same function in the context of combination therapy?

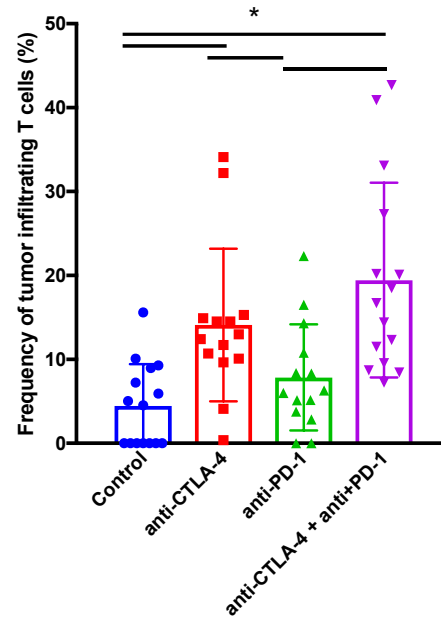


# Combination therapy differentially affects CD8 subsets



# Expansion of Th1-like CD4 T cells following combination therapy

PD-1<sup>+</sup> ICOS<sup>int</sup> TBET<sup>+</sup>  
Th1-like CD4 effector



# Cellular Targets of Checkpoint Blockade

## Monotherapy:

CTLA-4

CD4 ICOS+ Tbet+Th1-like Effector

CD8 Tbet+ EOMES+ KLRG-1+ Effector

PD-1

CD8 Tbet+ EOMES+ KLRG-1+ Effector

CD8 Tbet+ PD-1++ Lag2++ Tim3++ “Exhausted”

## Combination Therapy:

CD4 ICOS+ Tbet+Th1-like Effector

CD8 Tbet+ EOMES+ KLRG-1+ Effector

## Cellular Targets of Checkpoint Blockade

What happens to “Exhausted” (PD1<sup>hi</sup>Lag3<sup>hi</sup>Tim3<sup>hi</sup>) CD8 cells in presence of combination blockade of PD-1 and CTLA-4?

## Cellular Targets of Checkpoint Blockade

What happens to “Exhausted” (PD1<sup>hi</sup>Lag3<sup>hi</sup>Tim3<sup>hi</sup>) CD8 cells in presence of combination blockade of PD-1 and CTLA-4?

- Converted into CD8 effector T cells? *Unlikely, epigenetically fixed*



## Cellular Targets of Checkpoint Blockade

What happens to “Exhausted” (PD1<sup>hi</sup>Lag3<sup>hi</sup>Tim3<sup>hi</sup>) CD8 cells in presence of combination blockade of PD-1 and CTLA-4?

- Converted into CD8 effector T cells? *Unlikely, epigenetically fixed*
- Exhaustion of effectors prevented in presence of continued CD28 costimulation allowed by CTLA-4 blockade?

# Improving survival with combination therapy

