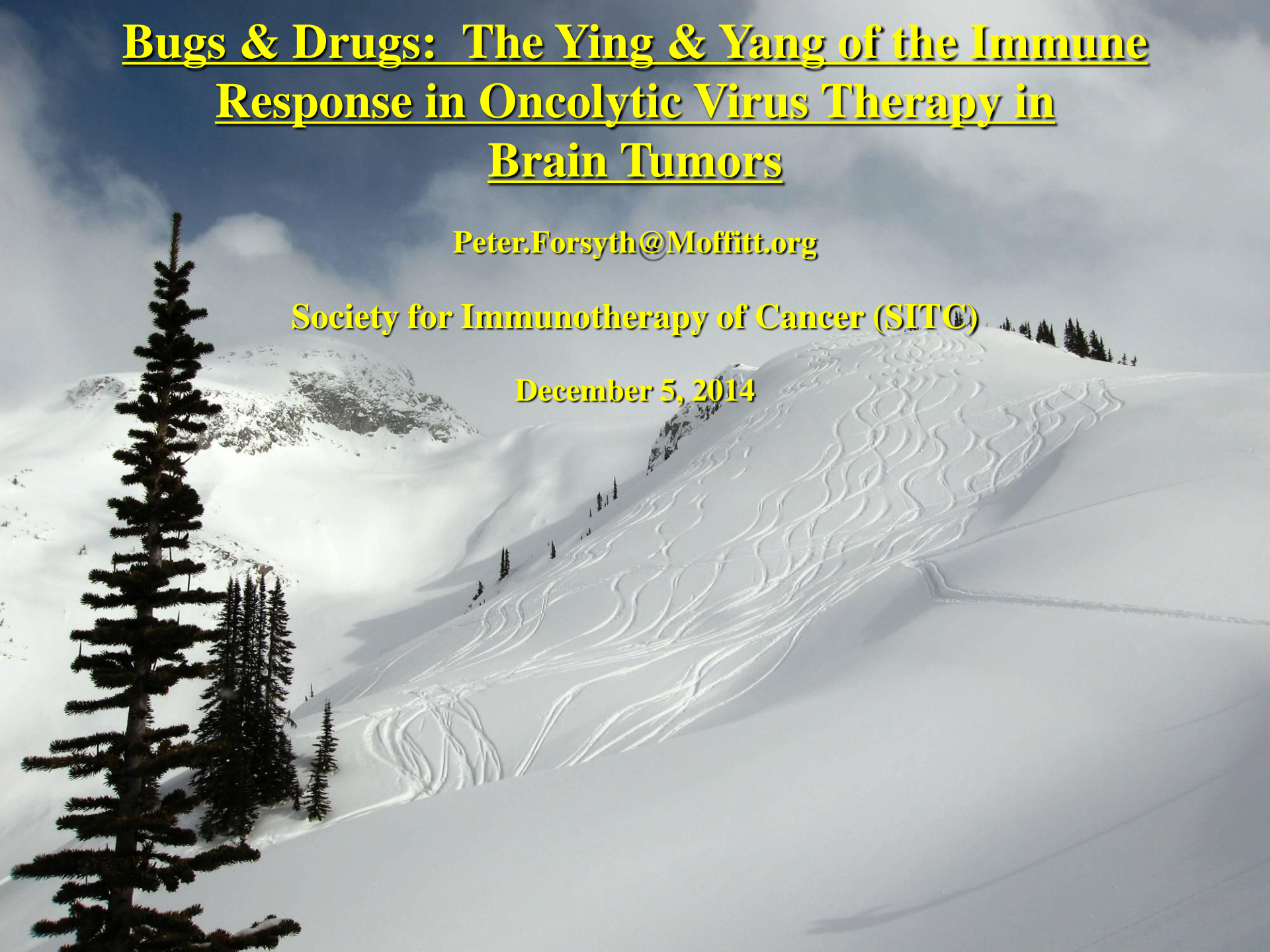


# Bugs & Drugs: The Ying & Yang of the Immune Response in Oncolytic Virus Therapy in Brain Tumors

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Society for Immunotherapy of Cancer (SITC)

December 5, 2014



# Summary

## Oncolytic Viruses (Ovs) in Brain Cancer

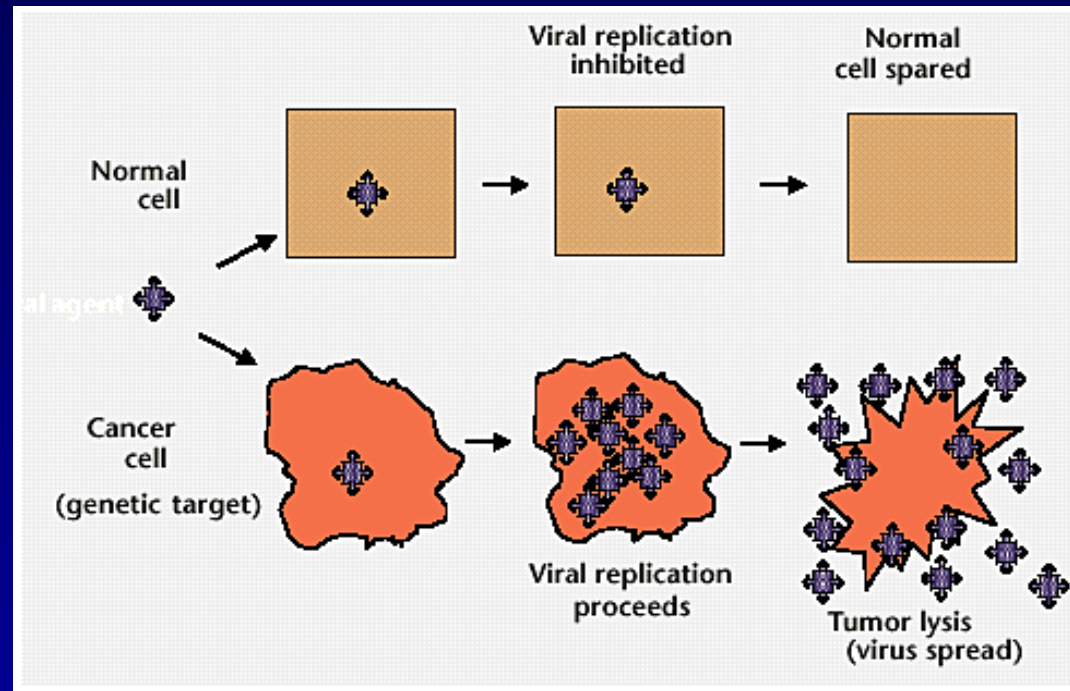
### 1) Experiments & Patients

### 2) Myxoma Virus as an Experimental Therapeutic:

- **Ying** = Immune system limits infection and killing
- **Yang** = Immune system is required for killing

### 3) Lessons & Take Home Messages

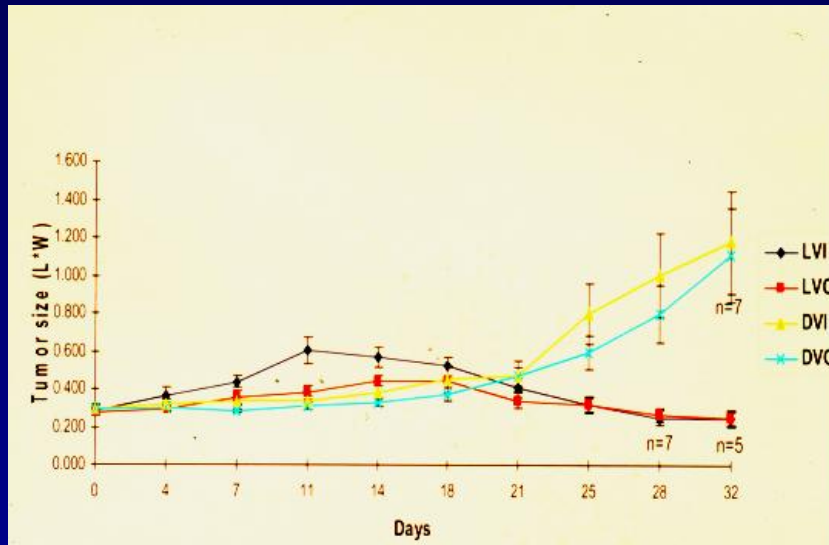
# 1) Oncolytic Viruses: The Old Concept



**Tumor cells & viruses use similar pathways to proliferate & survive**

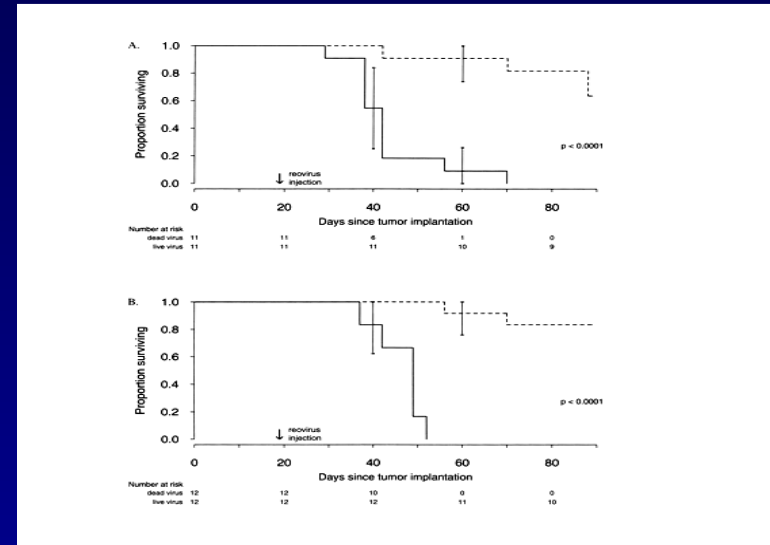
**Kirn Nat. Med 7: 781, 2001**

# Reovirus: naturally occurring segmented DS RNA virus - initial studies



Infected & killed tumors on the contralateral limb (s.c. U87)

Coffey et al, Science 282:1332, 1998



Survival of MGs in the Brain: U251N (A) & U87 (B) tumors in Nudes

Wilcox et. al., JNCI 93: 903, 2001

# First Clinical Trial using Reovirus



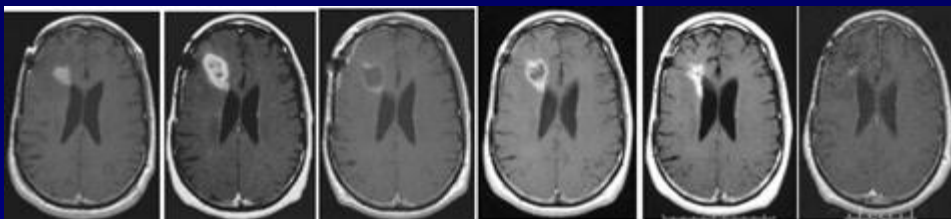
- Evidence of viral activity in 11/18 (61%) patients
- Safe



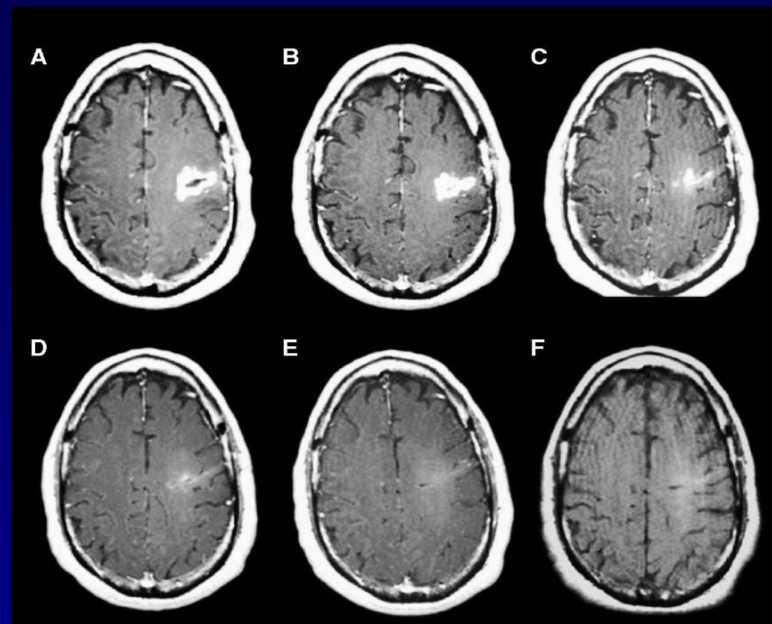
# Tumor Response To Virus Treatment: Reovirus & New Castle Disease Virus (NDV)

Days after reovirus administration

0      3      43      88      167      537



- I.T. reovirus: 46 y.o. man with second recurrence of anaplastic astrocytoma. Survival > 5yrs
- 1/12 patients had a CR; 11/12 SD or PD



I.V. NDV. :

(A) Patient at baseline,  
(B) SD 1<sup>st</sup> F/U, (C) PR 2<sup>nd</sup> F/U,  
(D) 20 wks , F) CR at 30 wks from start  
of virotherapy.

# Clinical Trials of Ovs in MGs

<u>Virus</u>	<u>Genetics</u>	<u>Study Type</u>	<u>#Pts</u>	<u>Dose/schedule/ Route/Response</u>	<u>Reference</u>
HSV-1 (G207)	$\gamma$ 1-34.5 gene deletion lacZ insertion in UL39	Phase I	21	$\leq 3 \times 10^9$ pfu/single injection/ IT/No MTD	Markert, JM. 2000
HSV-1	$\gamma$ 1-34.5 gene deletion lacZ insertion in UL39	Phase I	9	$\leq 1 \times 10^9$ pfu/IT/pre-and post-resection/ No MTD	Markert, JM. 2000
HSV-1 (HS-1716)	$\gamma$ 1-34.5 gene deletion	Phase I	9	$\leq 1 \times 10^5$ pfu/IT/No MTD	Rampling, R. 2000
HSV-1 (HS-1716)	$\gamma$ 1-34.5 gene deletion	Phase I	12	$\leq 1 \times 10^5$ pfu/ IT/No MTD	Papanastassiou, N. 2002
HSV-1 (HS-1716)	$\gamma$ 1-34.5 gene deletion	Phase I	12	$\leq 1 \times 10^5$ pfu/IT/resection cavity/ No MTD	Harrow, S. 2004
AdV (ONYX-015)	E1B-55kD gene deletion	Phase I	24	$\leq 1 \times 10^{10}$ pfu/single injection/tumour bed post-resection/No MTD	Chiocca, EA. 2004
Reovirus	Wildtype virus	Phase I	12	$\leq 1 \times 10^{10}$ pfu/single injection/ /intratumoural/No MTD	Forsyth, P. 2008
NDV (NDV-HUJ)	selected NDV (lentogenic)	Phase I/II	14	$\leq 1.1 \times 10^{10}$ IU/No MTD	Freeman, AI. 2006
Reovirus	Wildtype virus	Phase I	18	$\leq 10^8$ - $10^{10}$ TCID <sub>50</sub> /CED	Markart, JM. Unpub.
Measels MV-CEA		Phase I	“40”	IT	Galanis, E. 2013

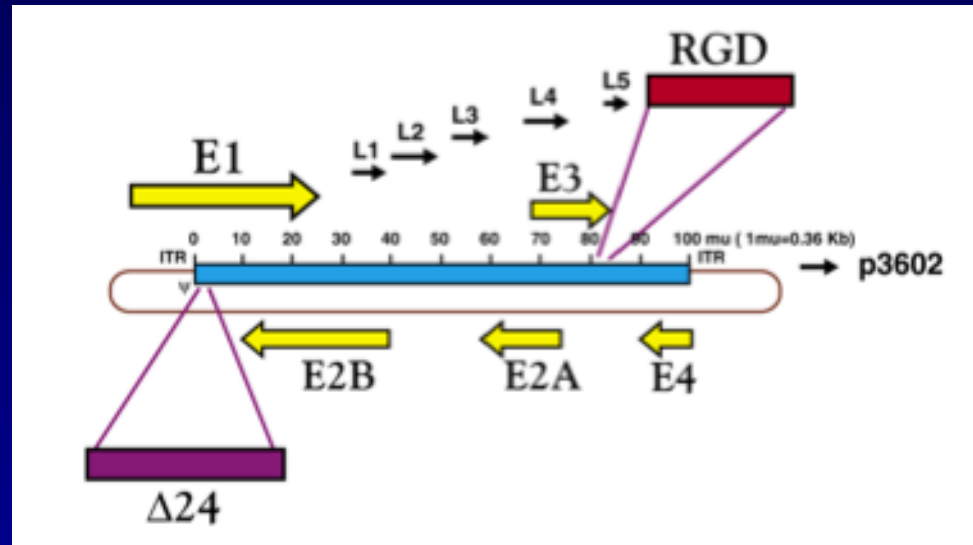
# Clinical Trials of Ovs in MGs (cont'd)

<u>Virus</u>	<u>Genetics</u>	<u>Study Type</u>	<u>#Pts</u>	<u>Dose/Schedule/ Route/</u>	<u>Reference</u>
Ad-24-RGD)	24bp deletion in E1A and RGD fiber	Phase I	28	I.T./≤ 3 X 10E10 PFUs	Lang F, unpubl
HSV-1 (HSV-1716)	ICP34.5 deletions	Phase III			www.crusadelab.com
HSV-1 (M032)	ICP34.5 deletions, expression of human IL-12 subunits	Planned			Parker JN
Poliovirus Gromier M (PV-RIPO)	Native IRES replaced with human rhinovirus type-2 IRES	Phase I			unpubl.

**Total = 7 viruses, ~120 patients, 0 DLT or MTD, several L.T. responses**



# Adenovirus with E1A deleted (replicates in RB-activated cells & expresses RGD (“Ad-24-RGD”))



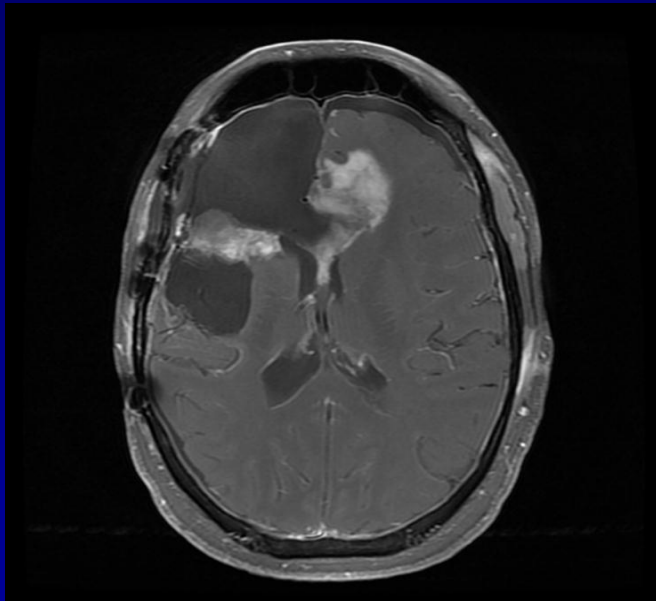
- Infection does not require CAR but is enhanced by  $\alpha v$  integrins (present in tumors but not normal brain).

Fueyo J , JNCI 95: 652, 2003

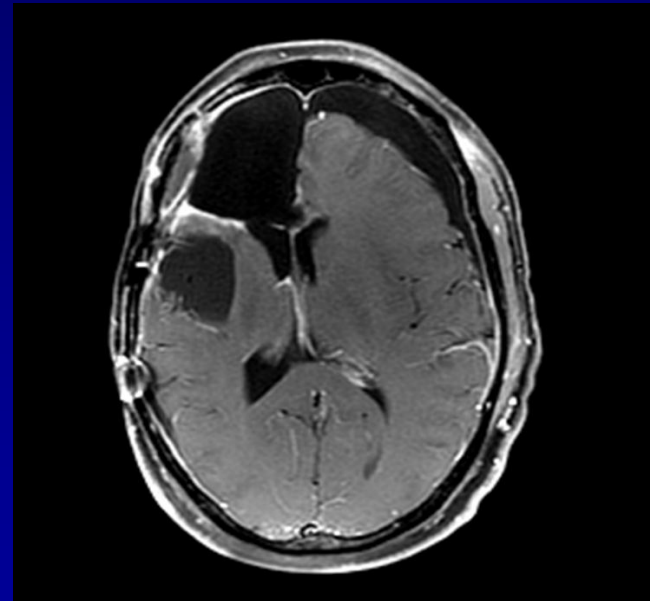
# Ad-24-RGD Treatment Results (Rx A)

- 28 pts  $1 \times 10^7$  –  $3 \times 10^{10}$  pfus I.T.
- Arm A: 4 CR, 3 PR and 6 SD; ? Immune response?
- Mdn. Survival is 15 mos. Longest CR is 40 months.

## Patient #4-1: Injection of cavity



9/25/2012

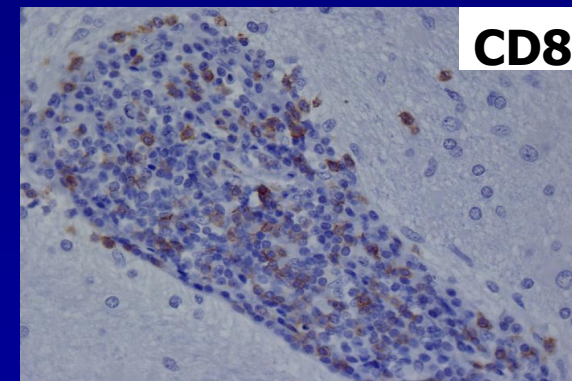
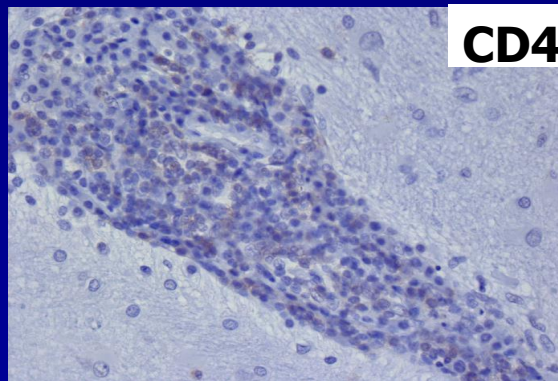
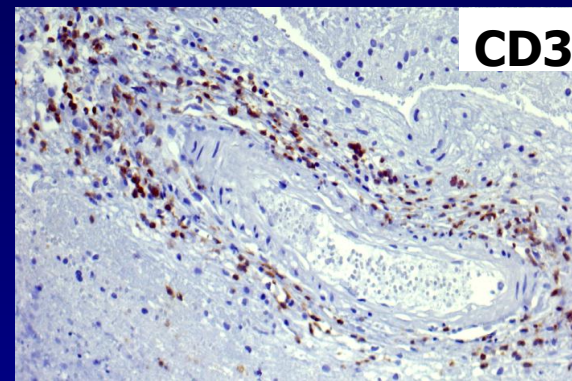
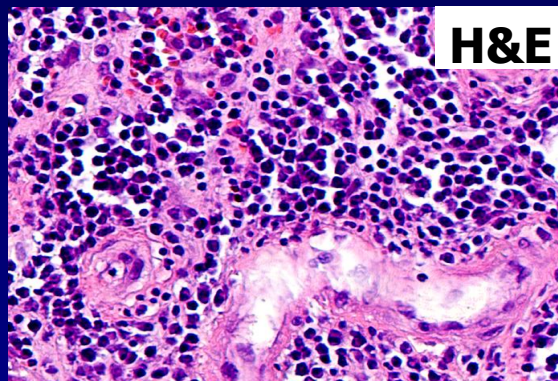


3/19/2013

Courtesy Drs. F Lang, Fueyo, Conrad MDA & Tufaro DNATRIX; *unpubl.*

## Ad-24-RGD Treatment (Rx B)

- Inflammatory infiltrates



Courtesy Drs. F Lang, Fueyo, Conrad MDA & Tufaro DNATRIX; *unpubl.*

# What have we learned from clinical trials in MGs?

- Safe and well tolerated, no MTD
- All have a few “responders” and one “cure”.
- MRIs may have to get worse before getting better ?immune response?
- Trials are small & little biology
- Immune contribution not understood







# Myxoma Virus (MYXV)

Ying = Immune system limits infection and killing



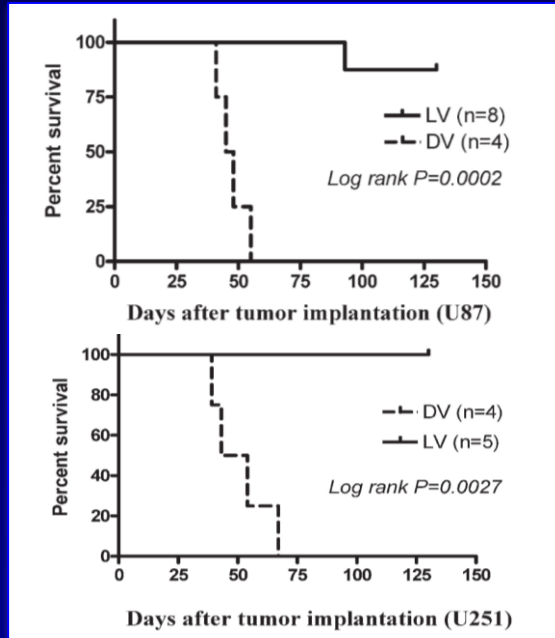
Myxomatosis in  
European Rabbit

- Selective for rabbits & cancer cells
- Large, engineerable genome
- No acquired immune responses
- Replicates in cytoplasm
- ~170 genes
- ~20 KO/transgenic viruses available
- **Wonderful collaborator in Gainesville (McFadden)**

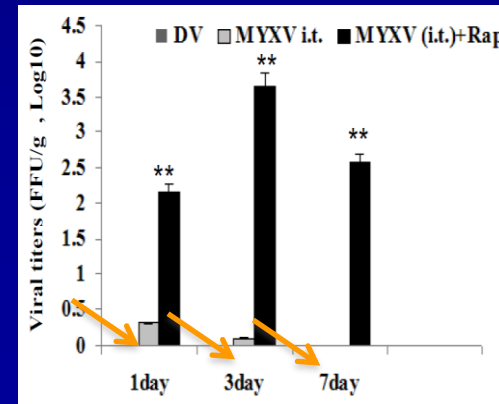
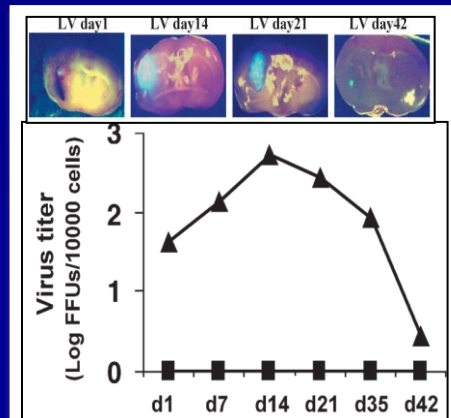
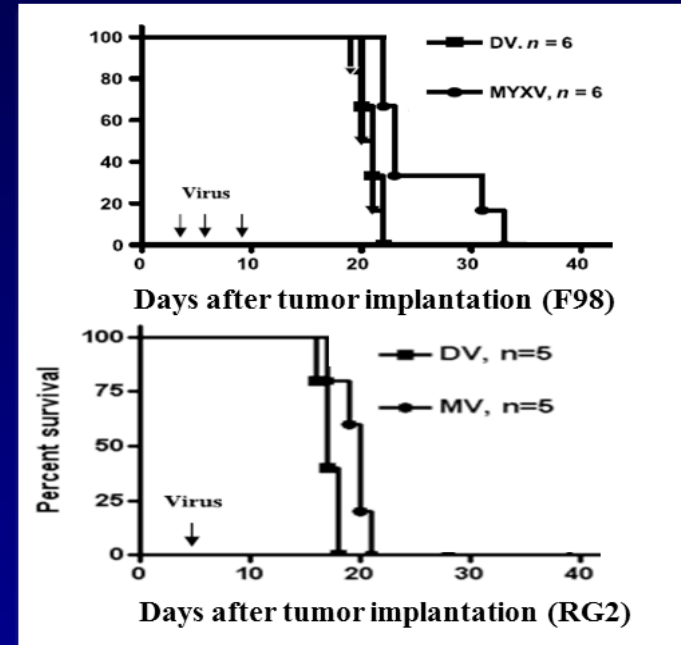


# Little replication or cures in immunocompetent or syngeneic MGs

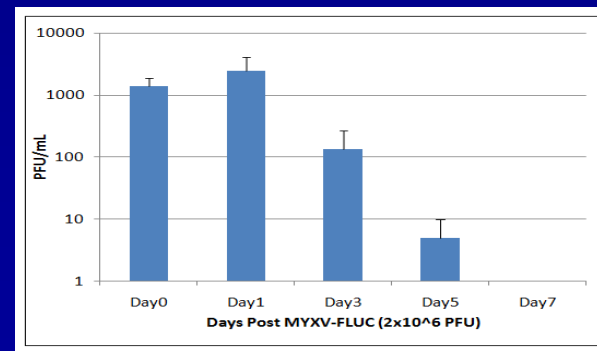
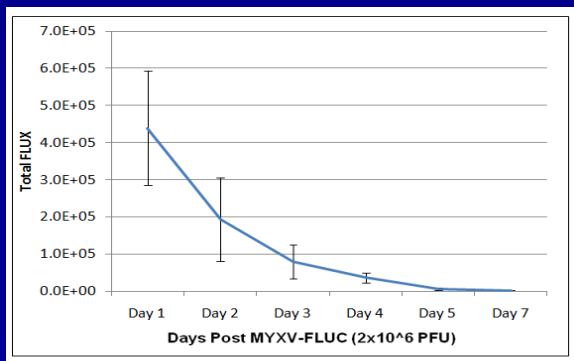
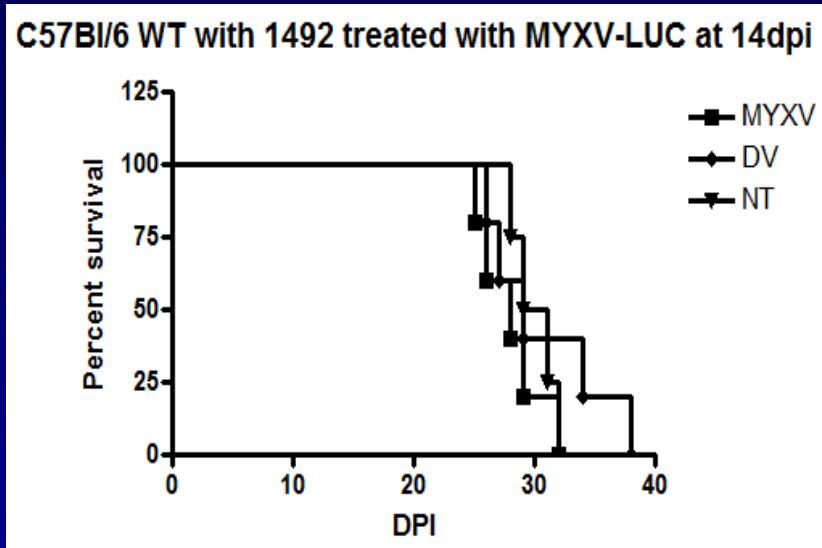
## Xenografts in SCIDs



## Syngeneic in Rats



# T53<sup>+/-</sup> / NF<sup>+/-</sup> line 1492 susceptible *in vitro* but resistant *in vivo*

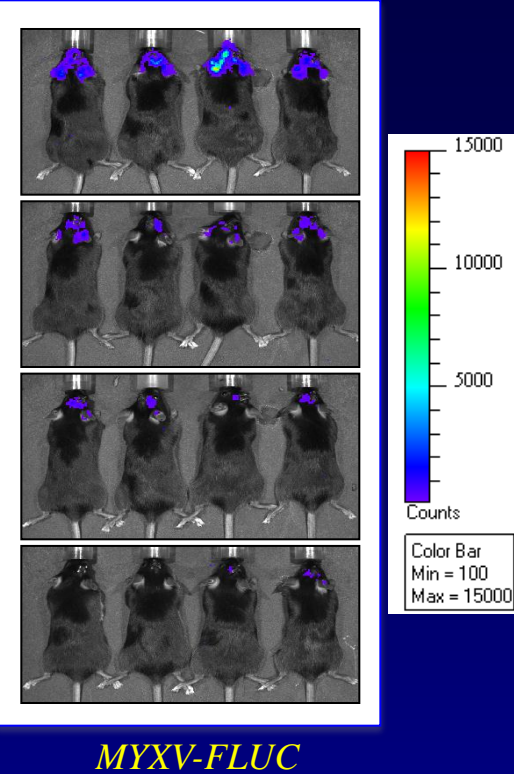


1dpRx

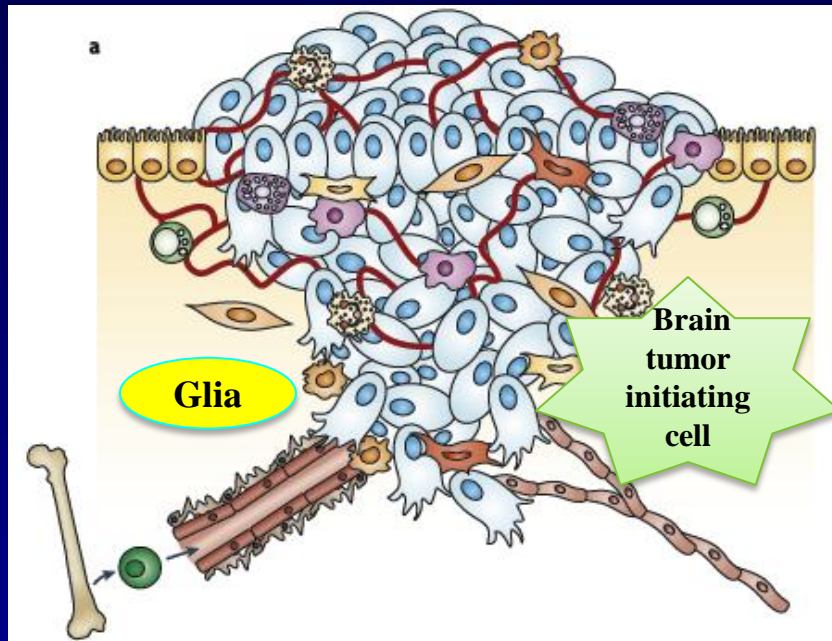
3dpRx

5dpRx

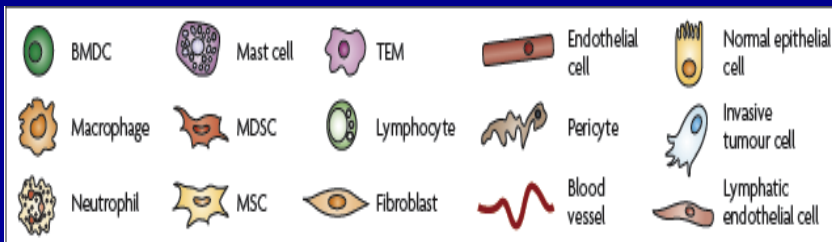
7dpRx



# MGs are a mixture of tumor cells, stromal cells and immunocytes

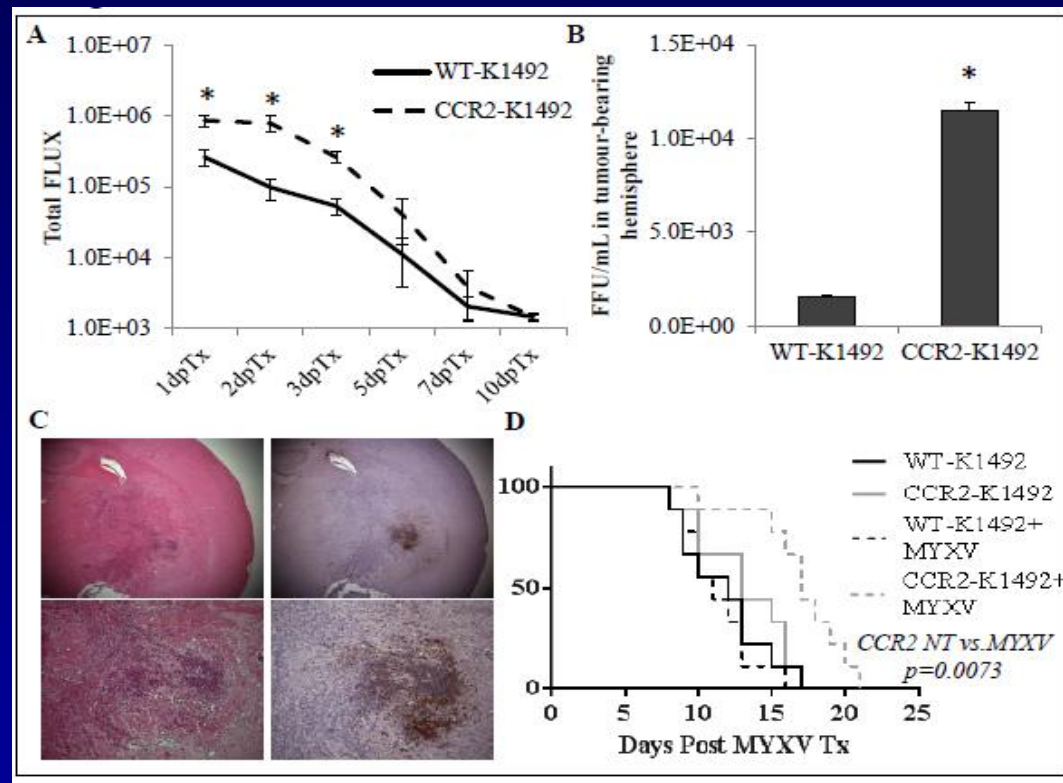


- Different immunocytes in limiting infection/distribution
- Identify factor that inhibits replication *in vivo*
- **Macrophage/microglia, T & B cells, NK cells, TLRs** ) – little importance here individually.
- Many overlapping & redundant immunocytes to protect the brain!



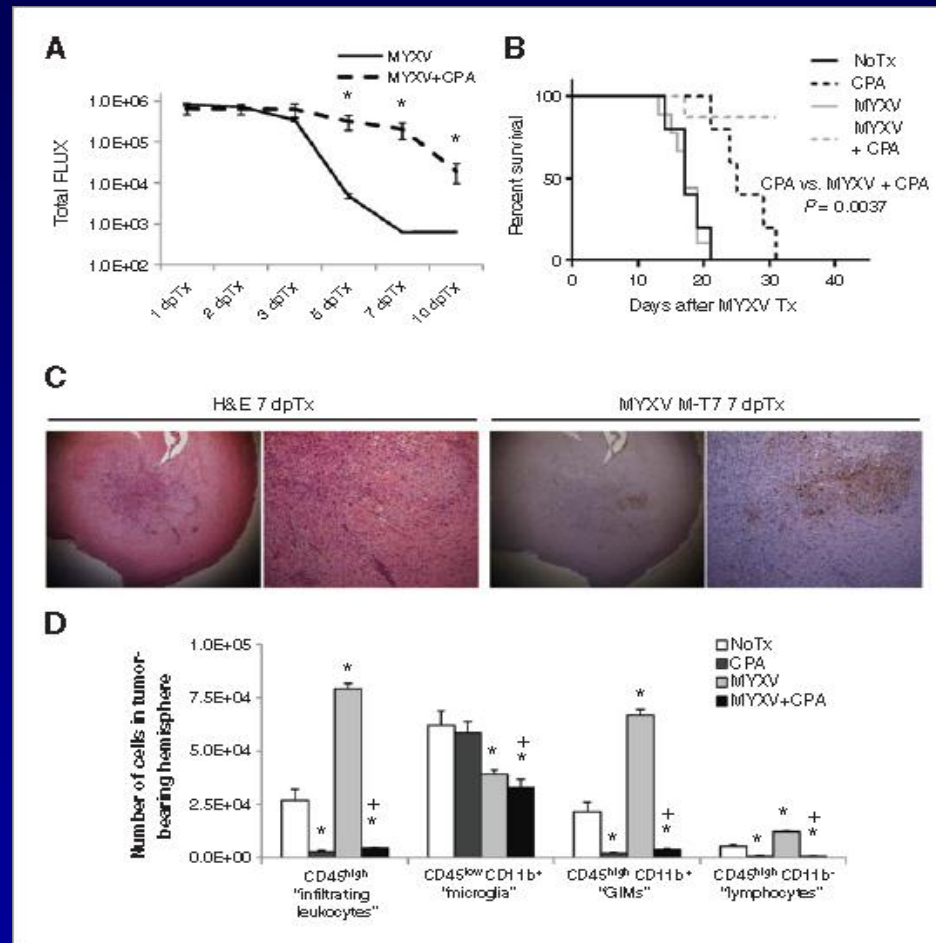
adapted from Joyce & Pollard. Nat. Rev. Cancer 9: 239, 2009

# Myxoma virus initial replication is limited by CCL2 resident immunocytes (GIMs)- these will be tricky to deplete



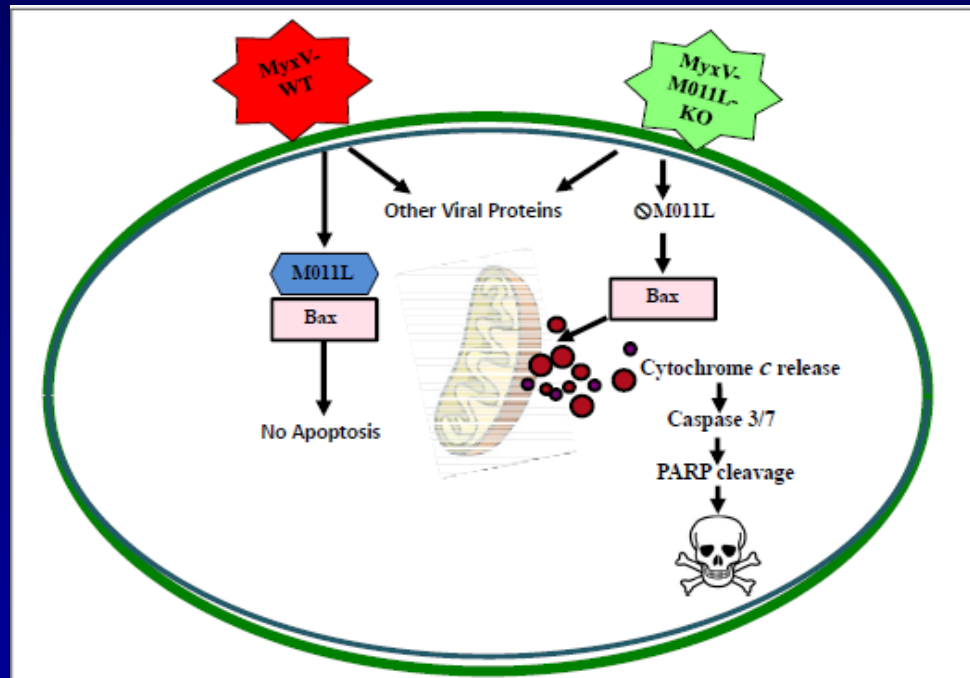
CCR2  $-/-$  mice (don't recruit macrophages/monocytes)

# Myxoma Virus & the Immunocyte-depleting Cyclophosphamide Prolongs Survival in Immunocompetent Mice



# Myxoma virus produces immunomodulatory and anti-death signals

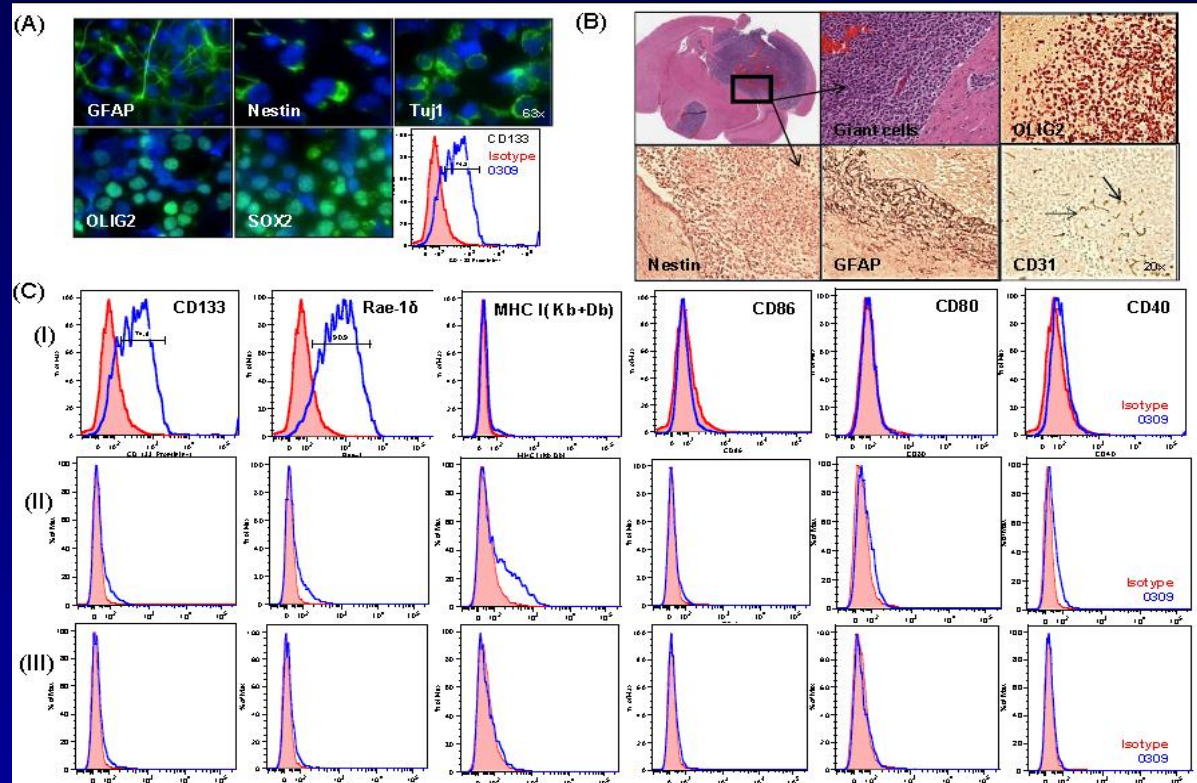
Yang = Immune system is required for killing



M11L is an anti-apoptotic protein encoded by wild type Myxoma Virus

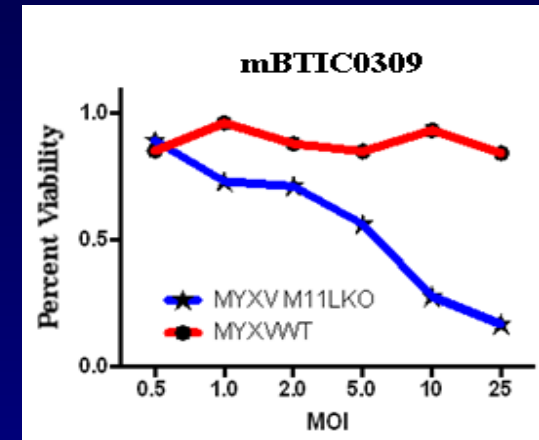
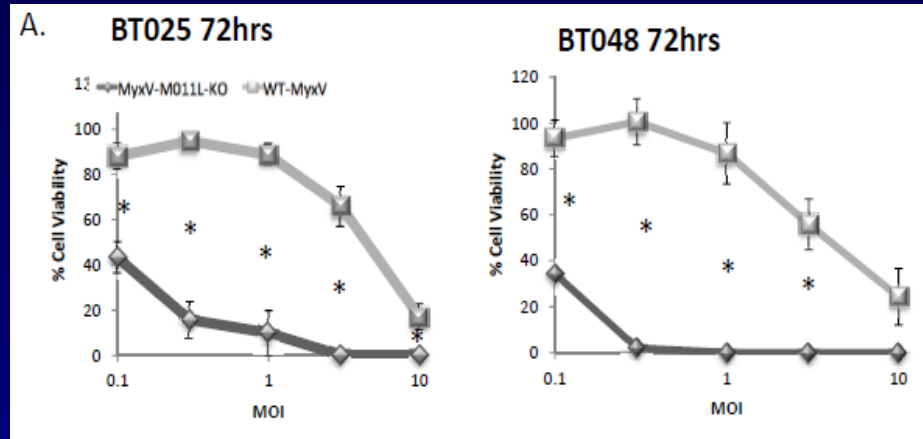


# The murine BTIC 0309 in an immunocompetent host resembles a human GBM & stem cells

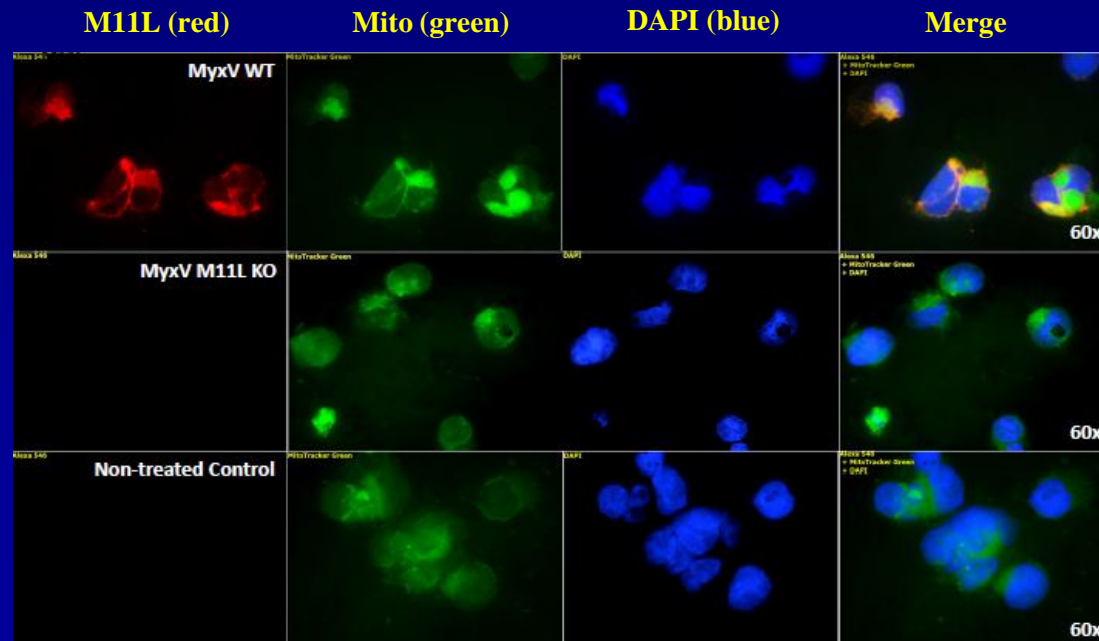


From gliomas arising in NF1<sup>+/-</sup> Tp53<sup>+/-</sup> mice  
& implanted in C57BL6 mice

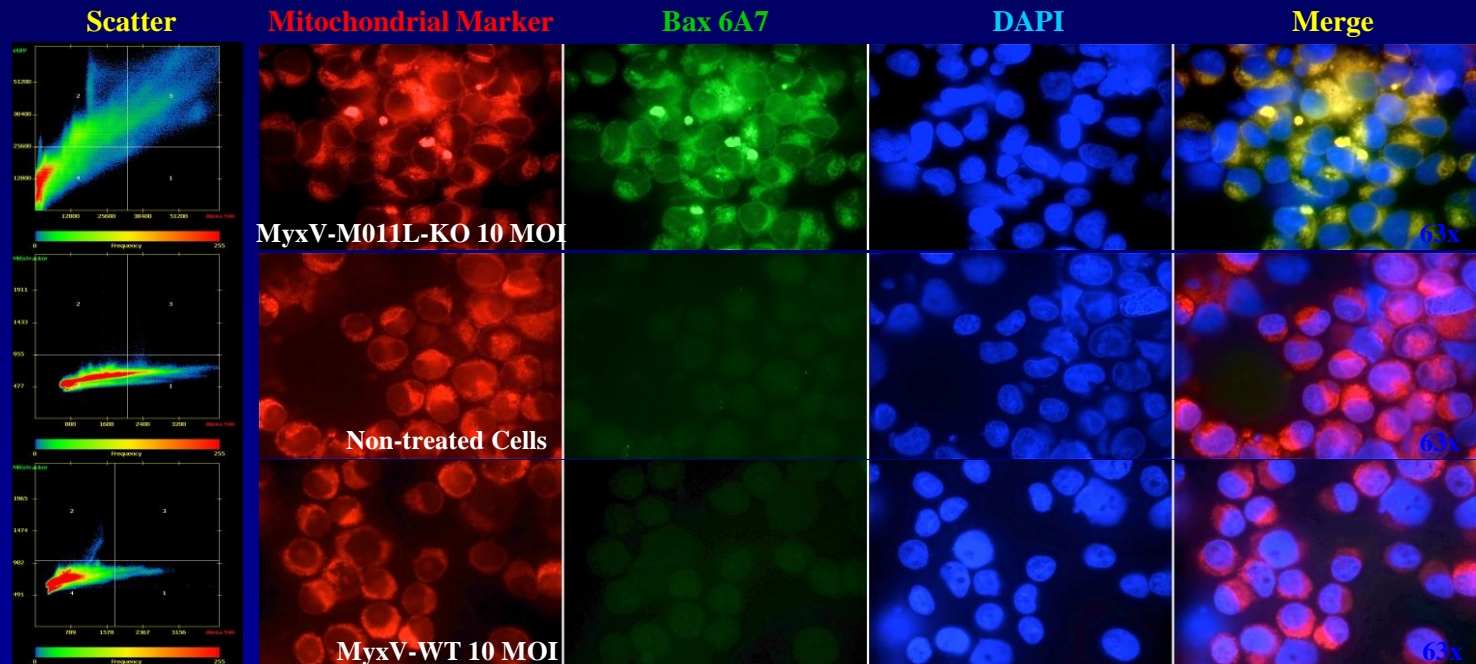
# Myxoma virus deleted for an anti-apoptotic protein (M011L KO) has superior killing *in vitro*



Murine  
BTIC

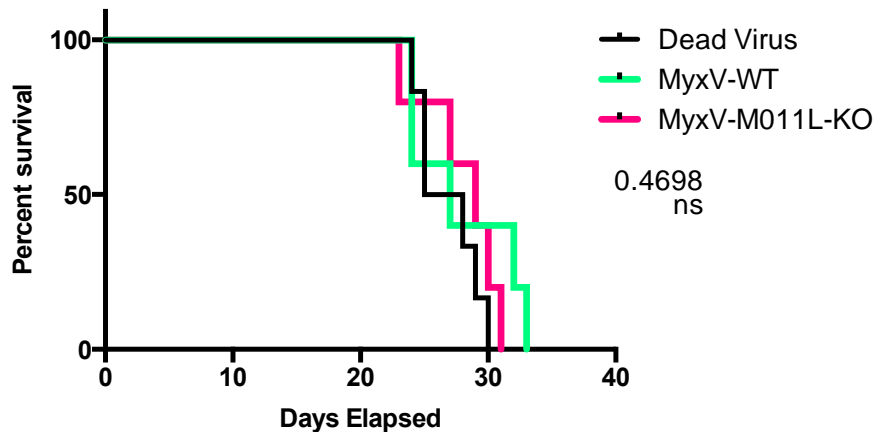


# Bax localizes to mitochondria and causes apoptosis in myxoma virus deleted from M11L

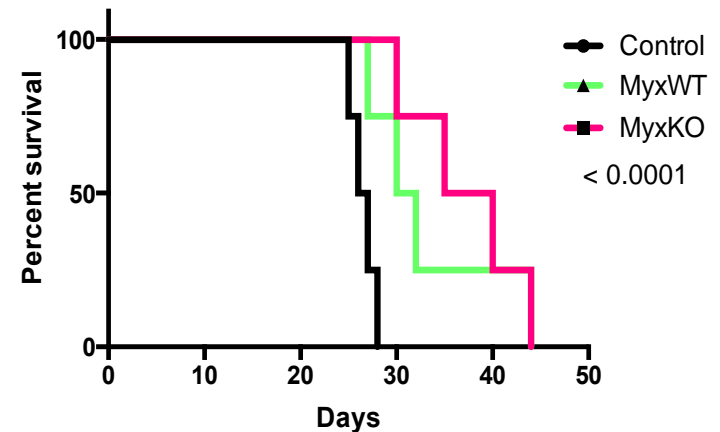


# M11L-KO MyxV prolongs survival in an immunocompetent murine BTIC model

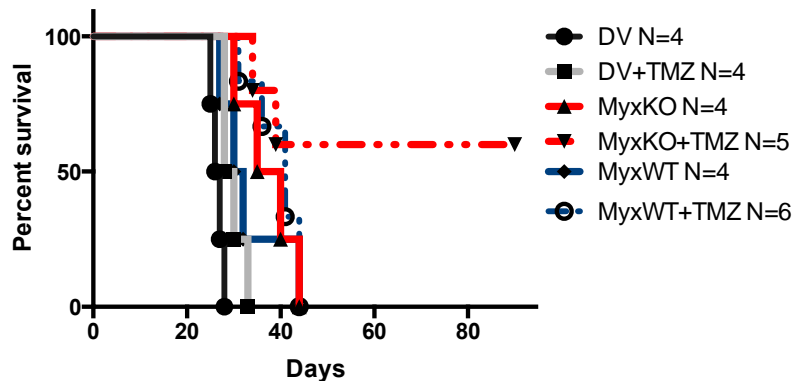
Survival proportions: mBTIC0309 in SCID NSG mice



Survival proportions: mBTIC0309 in C57/Bl6 mice

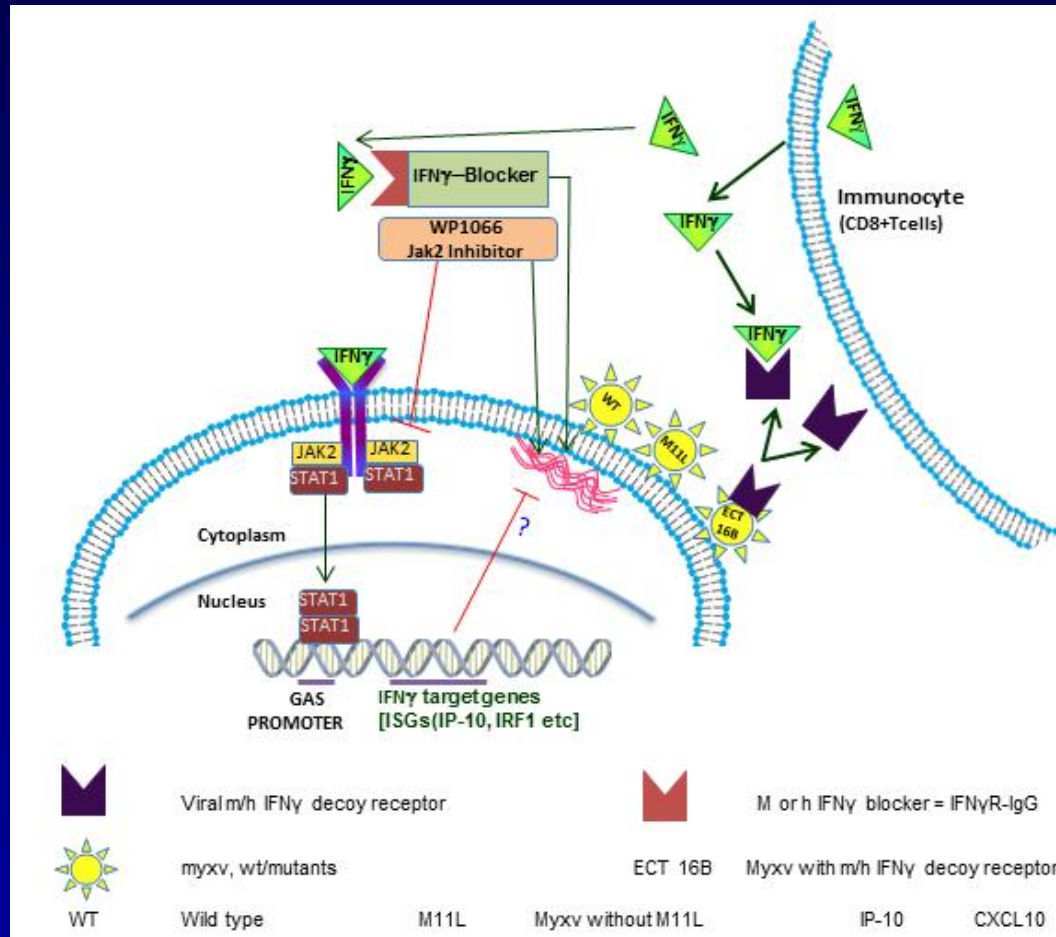


Survival: mBTIC0309 in C57/Bl6 combination with TMZ



M11L pro-apoptotic virus with Temozolomide (TMZ) produces cures in immunocompetent mice

# Manipulate INFγ in Host and Virus









# Lessons and Take Home Messages

- **Key points:** Human orthografts in immunocomp. mice are misleading
- **Potential impact on the field:** Too early to tell but promising
- **Lessons learned:**
  - Viruses in the brain are potential treatments for gliomas
  - Immune system can both “hurt” and “help” therapy
  - Much work remains to be done

# Thanks!

## Forsyth Moffitt Lab

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Barbara Miller



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