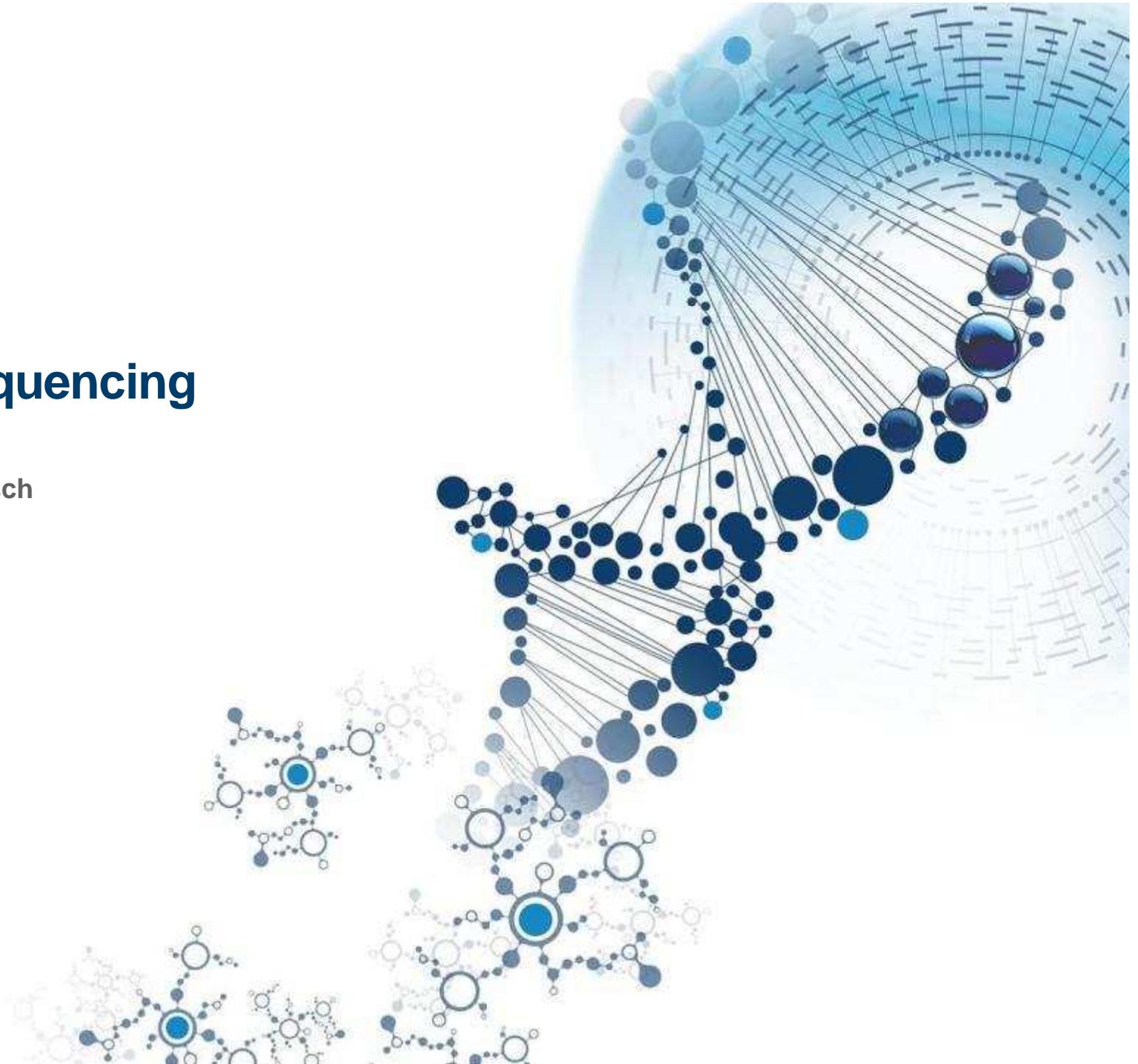


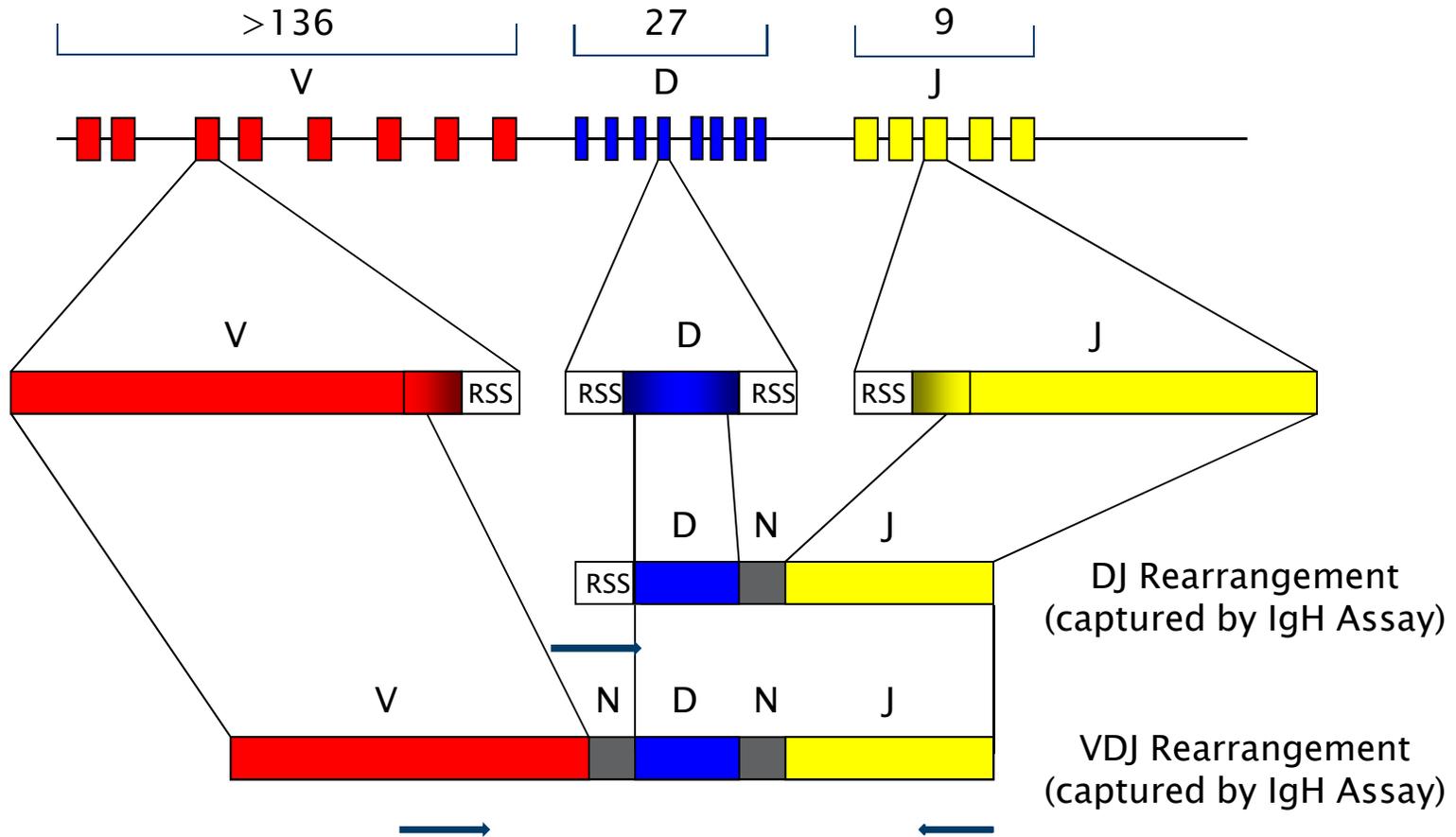
Immunosequencing

Ilan “Lanny” Kirsch

April, 2016

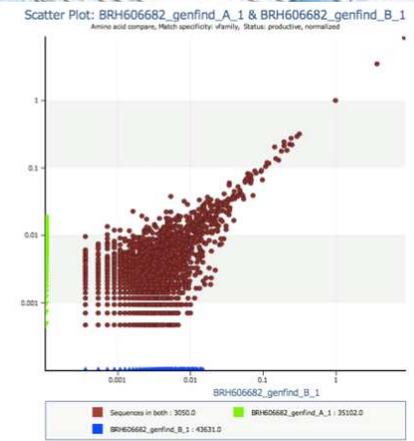
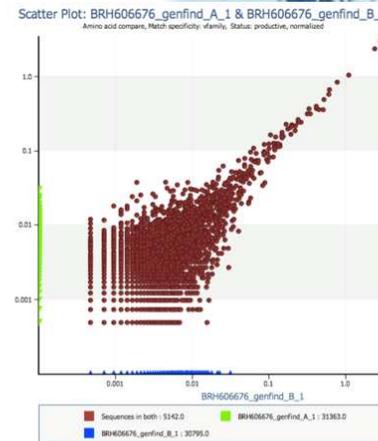
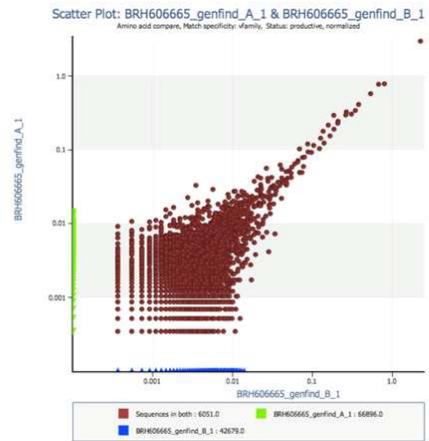


Immunoglobulin Heavy Chain Locus



Assay Development Process Leads to High Reproducibility

Within Sample Variability
($r^2=0.98$)

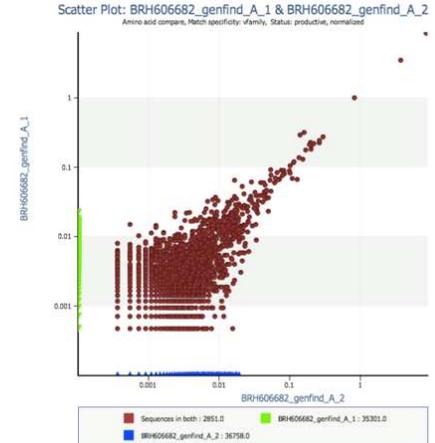
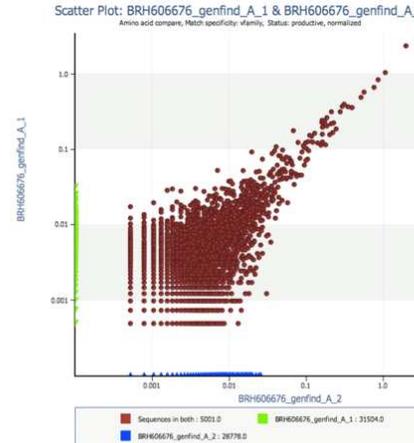
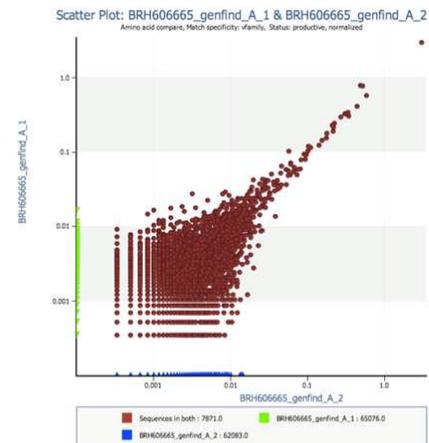


Sample #1 - 2.5% clone

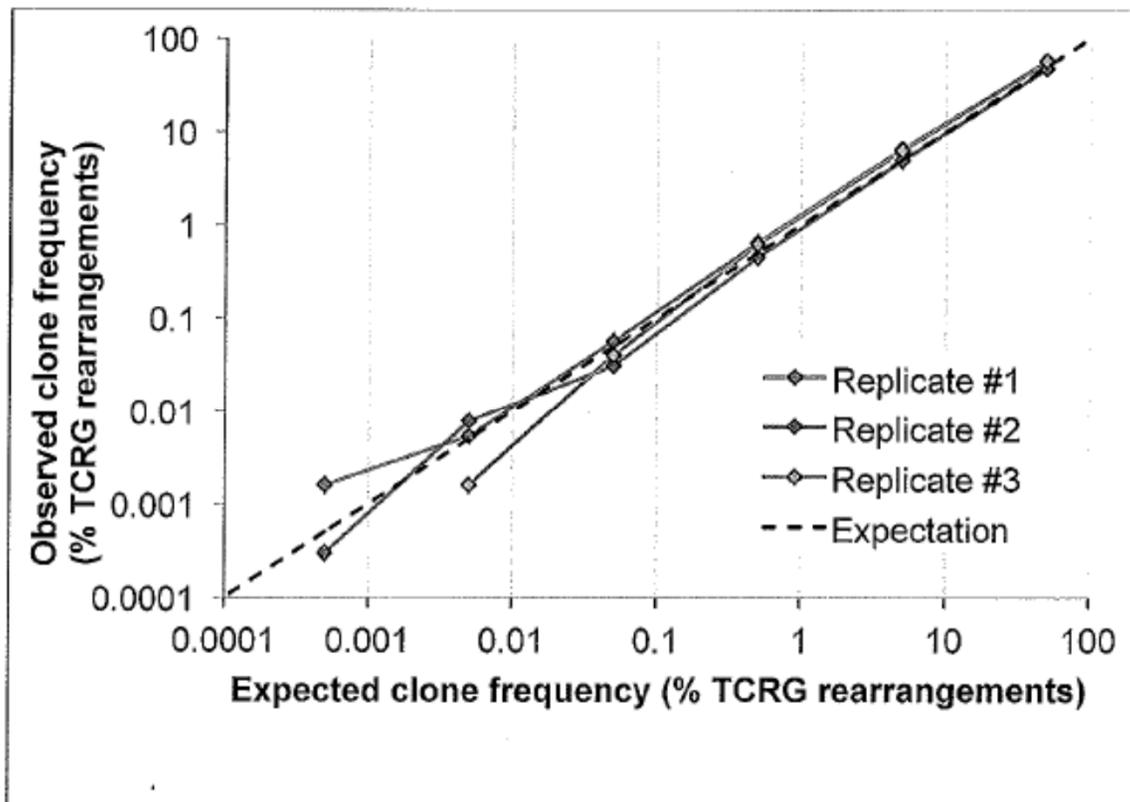
Sample #2 - 3% clone

Sample #3 - 8% clone

Between Experiment Variability
($r^2=0.98$)



“Spike-in” Experiment Using a T-ALL Cell Line



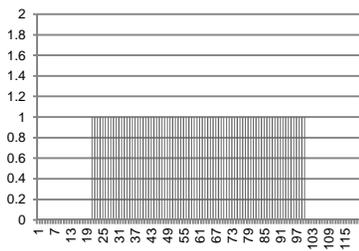
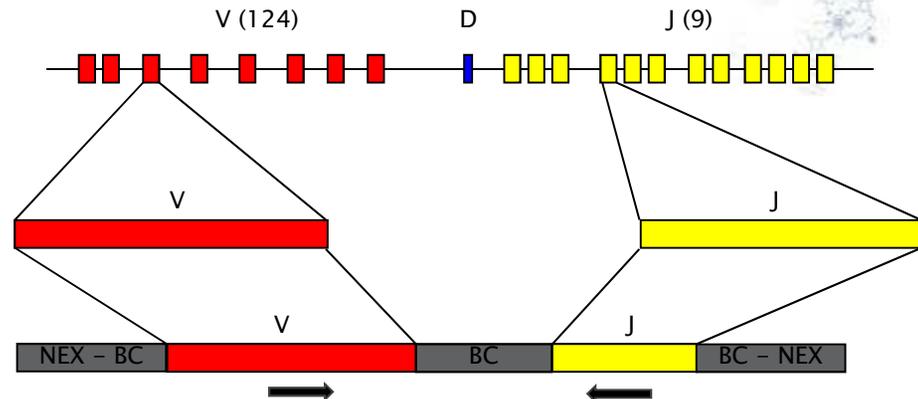
80% fibroblast DNA; 20% Lymphocyte DNA (mixtures of PBMC and T-ALL DNA at different ratios). Two of three replicates + at 1/1,000,000 (=0.0005% of TCRG sequences)

Process Validation / Optimization

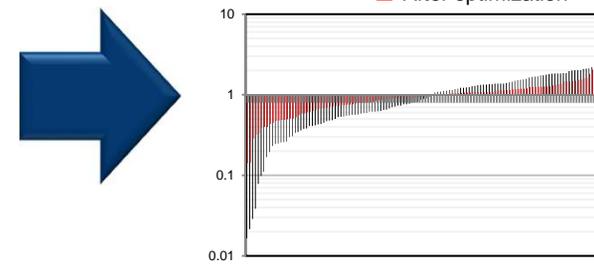
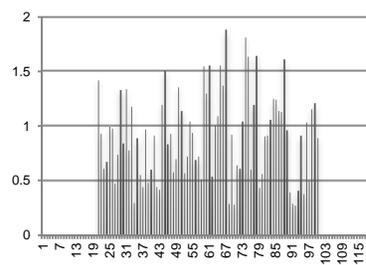
Synthetic Immune System Standard (Measurement of PCR and sequencing bias)

- Synthesized 500 base molecules
- Terminal/internal identifying barcodes
- PCR primer hybridization sequences

hsTCRB: ~860 molecules
 hsIGH: ~1000 molecules
 hsTCRG: ~70 molecules



PCR +
SEQUENCING



Equalized Template Input
Synthetic Immune
Molecules

Measure Bias
(due to PCR & Sequencing)

Quantify and remix primers
to correct bias

Optimize Primer Mix

The immunoSEQ Kit

Now amplifying discoveries locally



Control

You determine where and when samples are sequenced

Consistency

Unmatched accuracy and reproducibility from lab to lab

Convenience

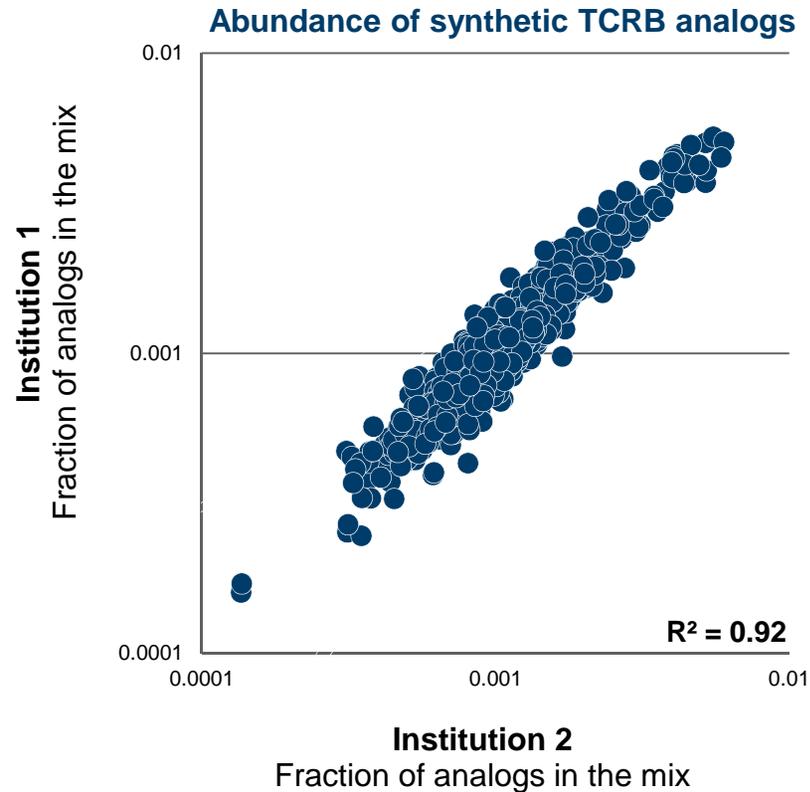
Only 4 hours of hands-on time

Customization

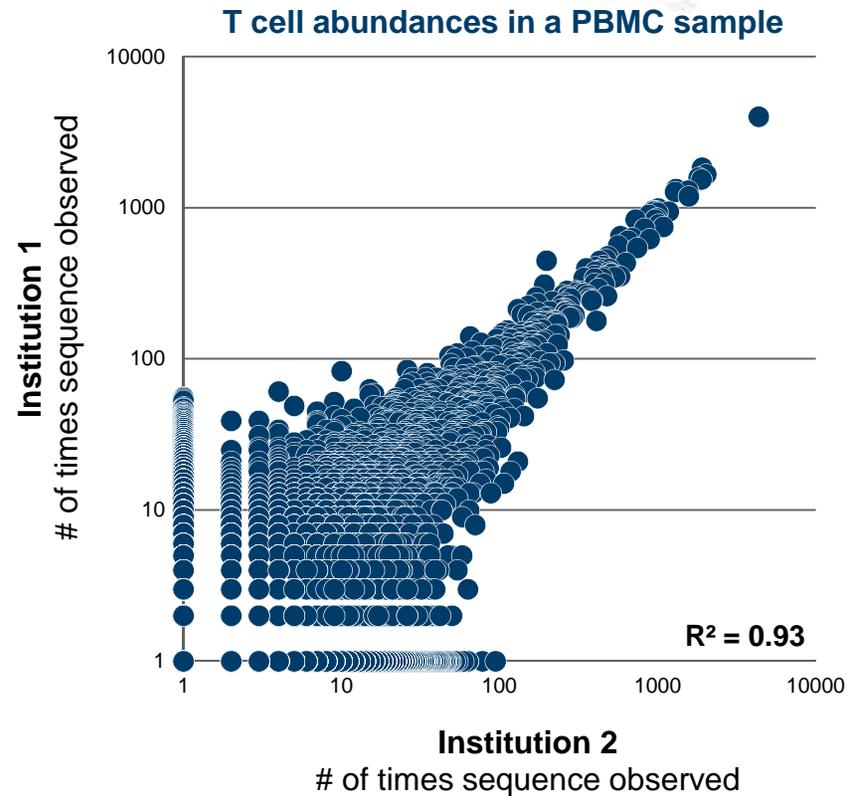
Scalable barcode setup facilitates flexibility in design

The power of the immunoSEQ Assay is now available as a Research Use Only (RUO) Kit

Lab-to-Lab Consistency



Pool of synthetic templates run at different institutions



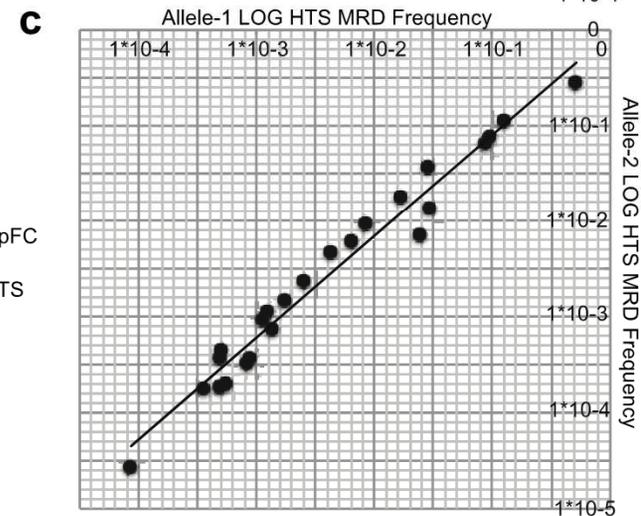
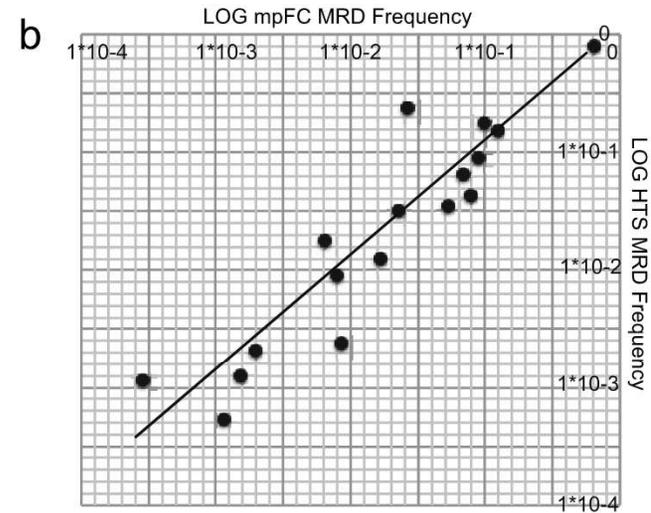
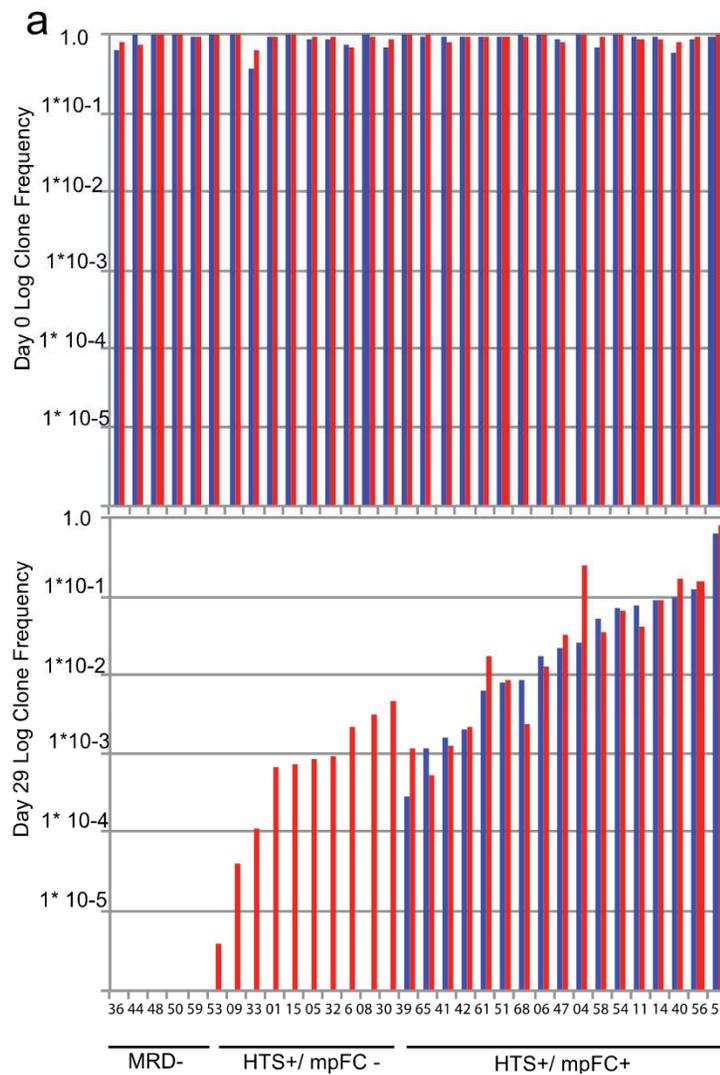
Sequencing reads for each T cell clone, from PBMC samples run at different institutions

The Three Pillars of Immunosequencing

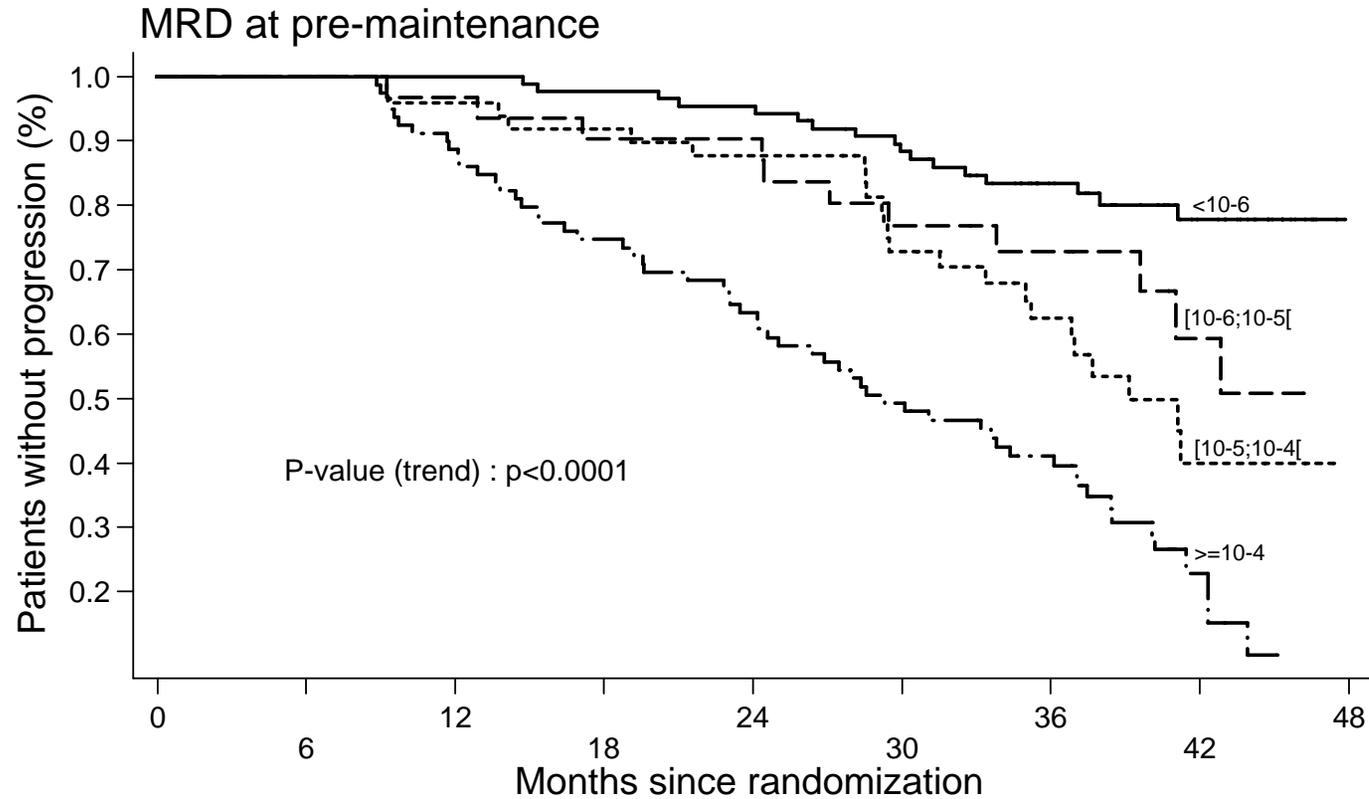


- Clonality assessment
 - Define the number and diversity of T- and/or B-cells
 - Monoclonal? More likely to be malignant
 - More diverse? More likely to be inflammatory
 - More clonal? More likely to represent an immune response to cancer
- Clone tracking
 - Track a malignant lymphocyte in response to therapy
 - Track clones from tissue to tissue
 - Track “public” responses from one person to another
- Mutation detection
 - Follow affinity maturation over time as immune response improves
 - Identify stages of healthy and malignant lymphocyte development

Accuracy: HTS TCRG Assay detects T-ALL MRD



Sensitivity is Key to Prognostic Value in MM



N at risk
(events)

| | | | | | | | | | | | | | | | | | |
|---------------------|----|-----|----|-----|----|------|----|-----|----|------|----|-----|----|-----|----|-----|---|
| $<10^{-6}$ | 87 | (0) | 87 | (0) | 87 | (2) | 85 | (2) | 83 | (6) | 74 | (4) | 54 | (3) | 31 | (0) | 8 |
| $[10^{-6};10^{-5}[$ | 31 | (0) | 31 | (1) | 30 | (2) | 28 | (0) | 27 | (4) | 22 | (1) | 17 | (2) | 8 | (1) | 4 |
| $[10^{-5};10^{-4}[$ | 49 | (0) | 49 | (2) | 47 | (2) | 45 | (2) | 43 | (7) | 34 | (4) | 22 | (6) | 8 | (0) | 2 |
| $[10^{-4};10^{-3}[$ | 79 | (0) | 79 | (9) | 70 | (11) | 59 | (9) | 50 | (11) | 38 | (6) | 28 | (9) | 6 | (3) | 0 |

tiSEQ — A New Class of Immune Molecular Diagnostics

What is tiSEQ?

tiSEQ Accurate and reliable TIL quantitation

TIL Frequency

Absolute TIL counts

TIL Density

Sum total # of clonal TCR rearrangements per total cell #

TIL Clonality

Evenness of clone frequency distribution; inverse of Shannon's Entropy (scale of 0 → 1)

TIL Tracking

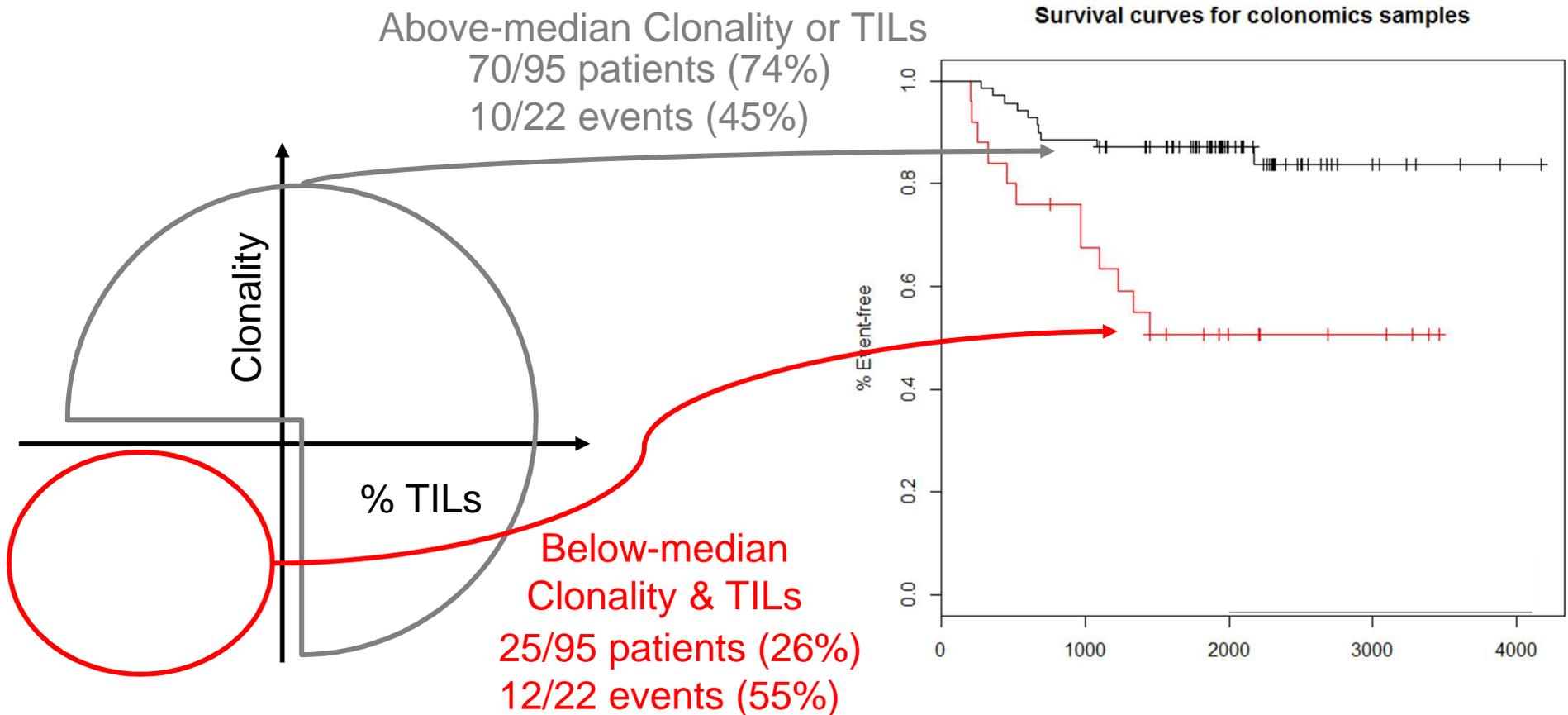
Track tumor-specific TCR clones in the blood; subtract blood TCR clones not in the tumor ('noise')

Key Applications

- Understand **drug MOA**
- Measure immune system **dynamics**
- Better **stratify patients**
- **Predict response** to treatments
- Develop smart **drug combinations, sequential** therapies

tiSEQ Prognostic Potential

Tumor DNA from 95 stage II colon cancer patients with outcomes*

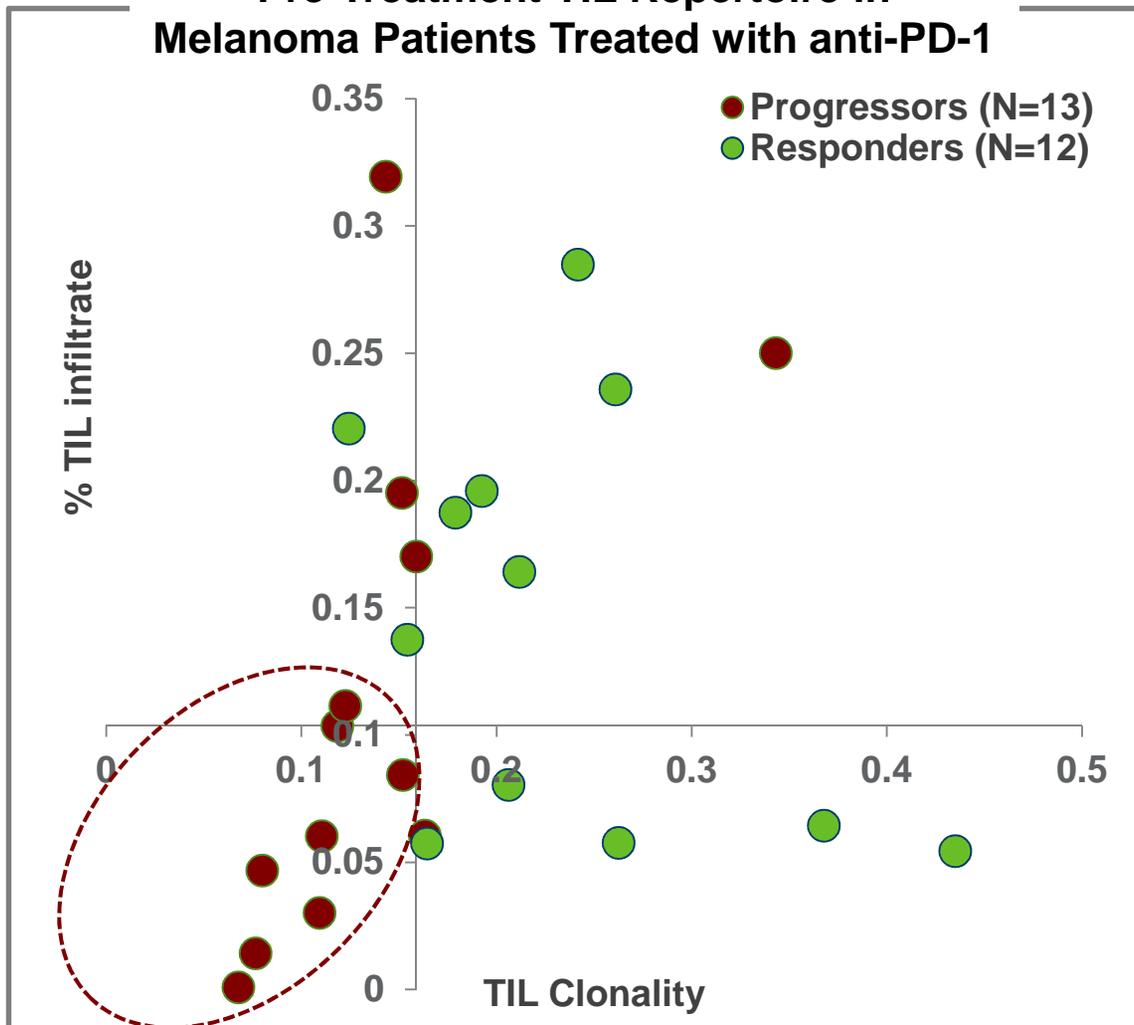


Patients with below-median TILs & clonality are at higher risk ($p = 0.00095$)

* Catalan Institute, Dr. Moreno, Spain.

TIL sequencing may predict anti-PD-1 response

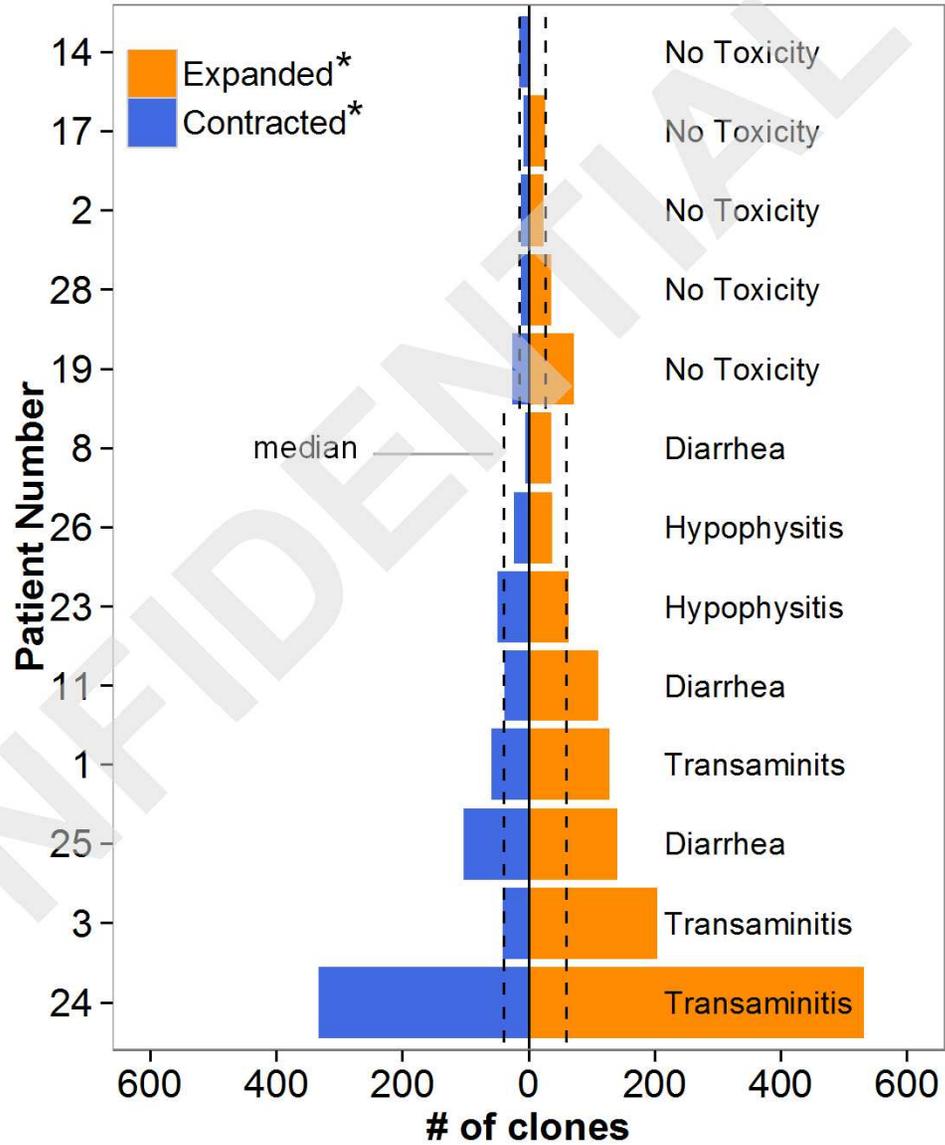
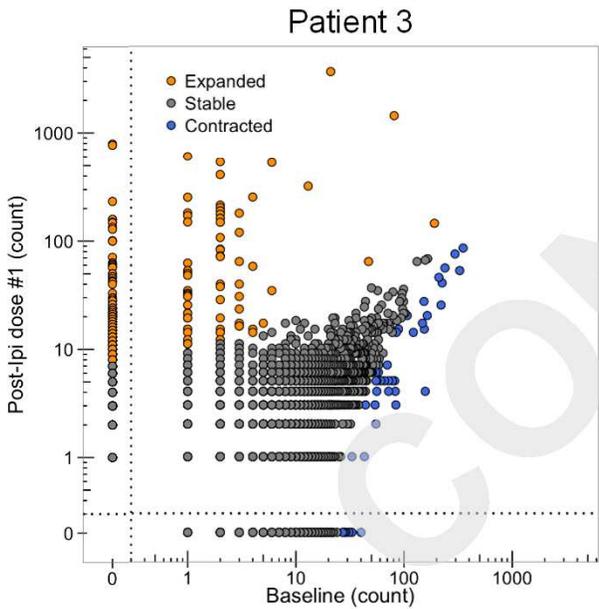
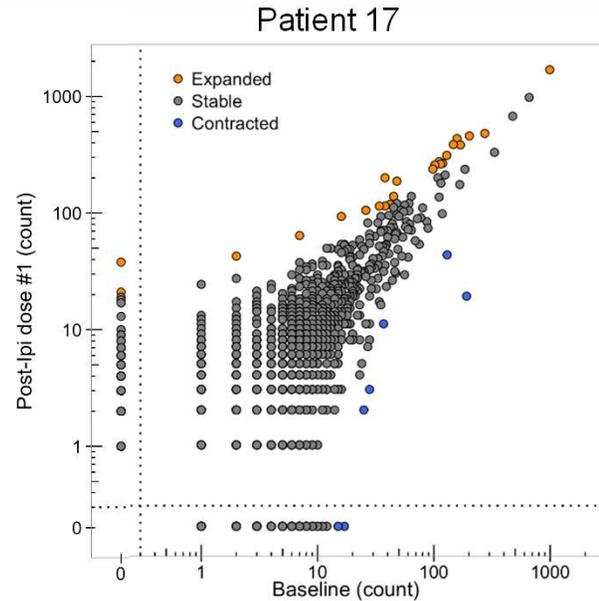
Pre-Treatment TIL Repertoire in Melanoma Patients Treated with anti-PD-1



Conclusions

- Progressors (●) were associated with:
 - Lower levels of TILs
 - Lower TIL clonality (a more diverse TIL repertoire)
- TIL profiling has predictive value in evaluating response to anti-PD-1 therapy

Increased repertoire turnover through clonal expansion and contraction of CD8+ PBMCs precedes irAEs as a result of anti-CTLA4



*Toxicity vs. no toxicity:
p = 0.019 and 0.045

THANK YOU!

