

## VANDERBILT-INGRAM CANCER CENTER



# Immunotherapy in Malignancies of the Immune System – Early Lessons for a New Age

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# Relevant Disclosures

## Advisory Committee or Board

Celgene, Incyte, Novartis, TG Therapeutics, Karyopharm

## Consultancy

Celgene, Incyte, Gilead

## Research Funding

TG Therapeutics, Sunesis, Incyte, Karyopharm, Astex, Bayer

## Equity

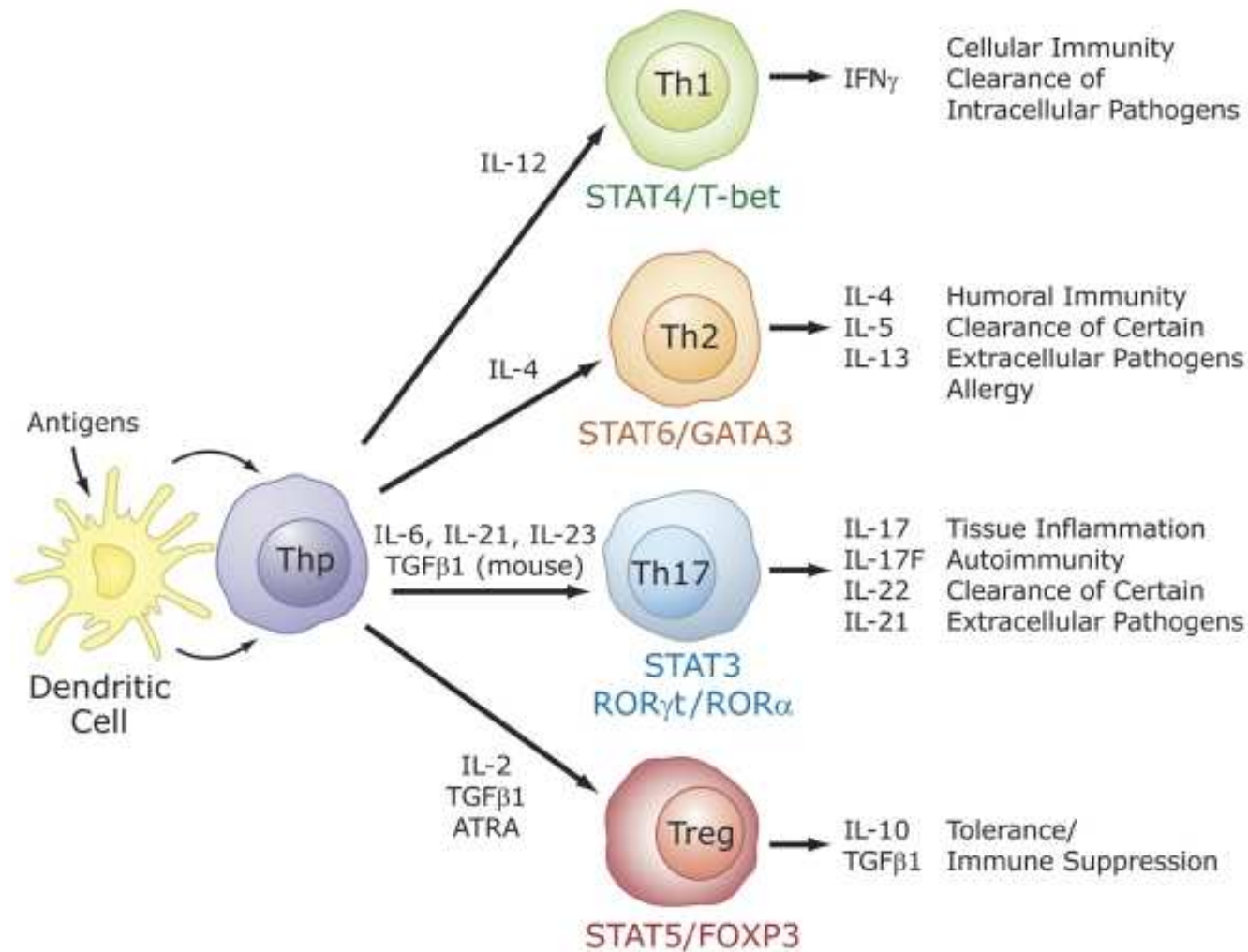
Karyopharm

I will be discussing investigational/non-FDA approved treatments and will make note of this as they are presented.

# Blood Cancers – Immunotherapy for the Rogue Immune System

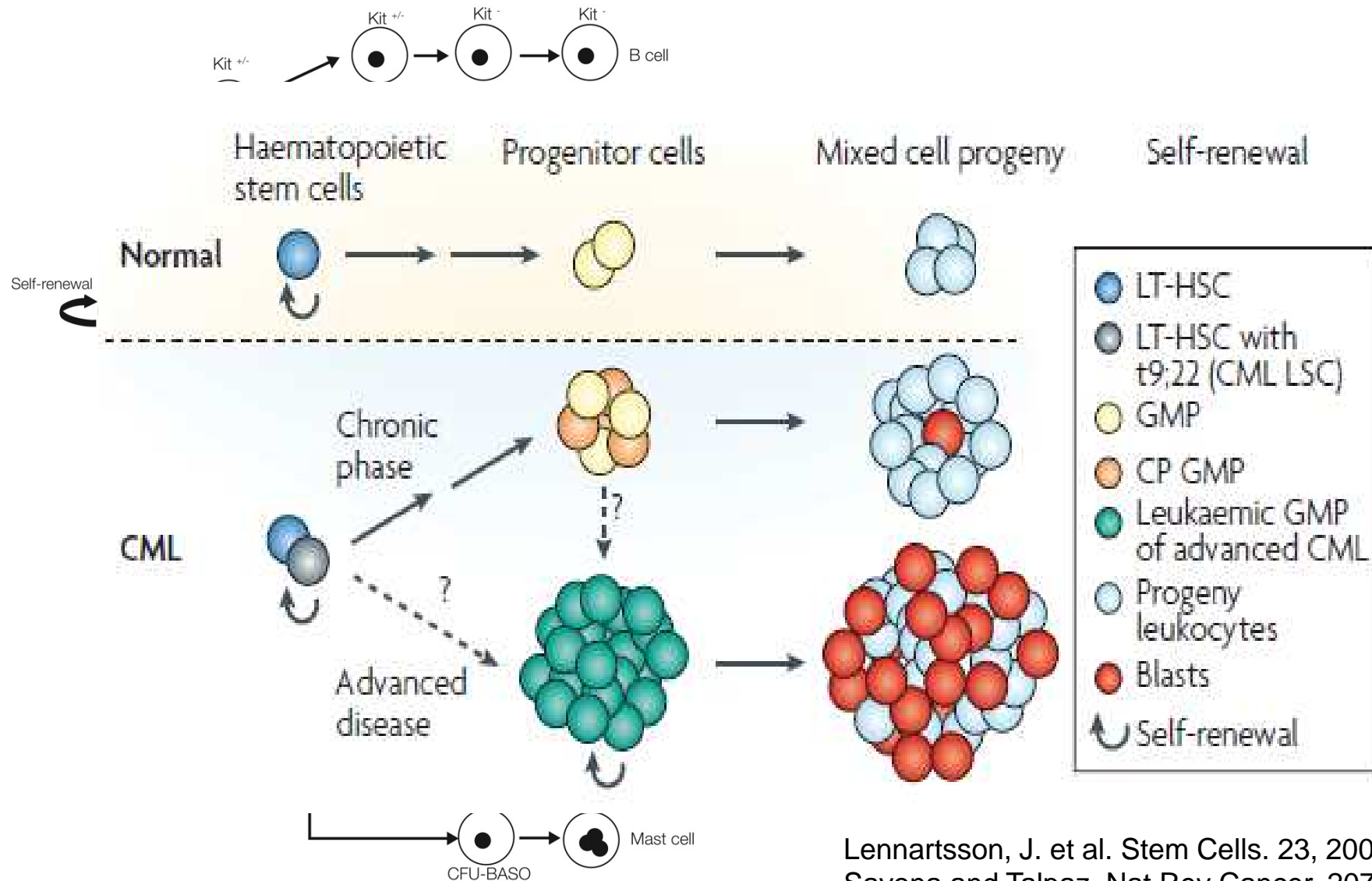
- Easy access of tissue for sampling
- Cellular origins as antigen-presenting cells for most heme malignancies
- Unique and clear delineation of hierarchy and discrimination of disease and normal tissue
  - To survey
  - To separate (purging or treatment)
- Unique scenario of generation of tumor *within* the immune bed – and manipulation of the leukemia-immune system interaction

# Cytokine Drivers are Influenced by Tumor



Jetten. Nucl Recept Signal, 7, 2009.

# Hematopoietic Hierarchy

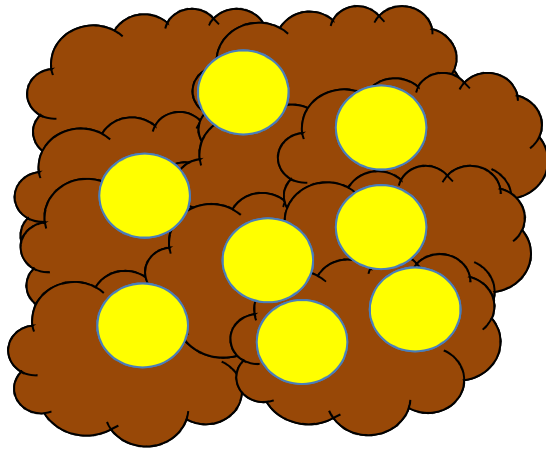


Lennartsson, J. et al. Stem Cells. 23, 2005.  
Savona and Talpaz. Nat Rev Cancer. 207; 2008.



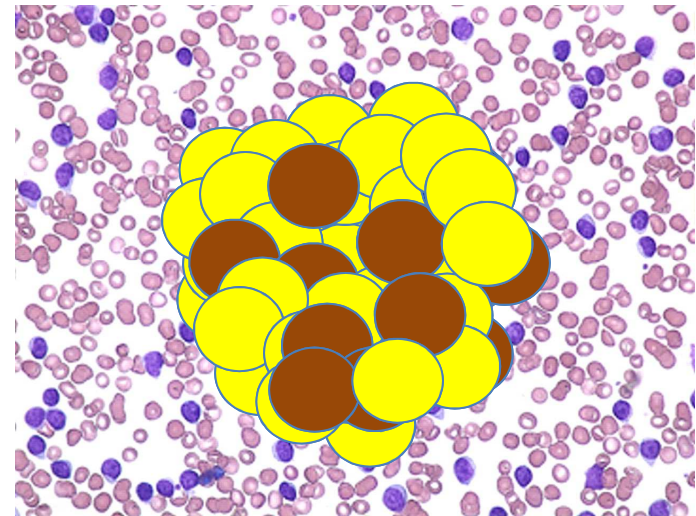
# Invasion / Corruption

Tumor Infiltrating Lymphocytes



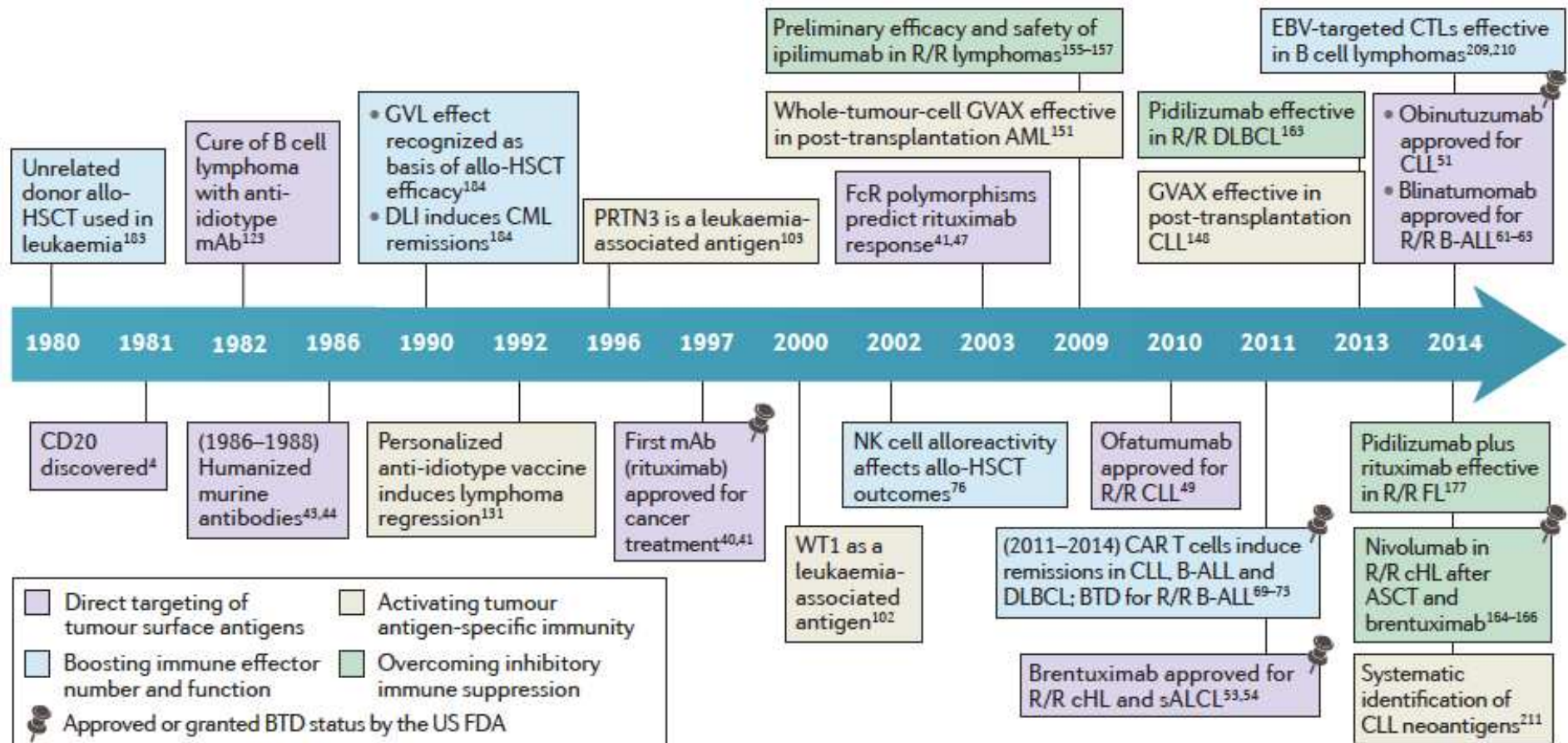
Epithelial Tumor Bed:  
Lymphocytes within the tumor

Clonal lymphocytes



Blood Cancer in Lymph Node:  
Immune Tumor within the  
Immune Organ

# Immunotherapy in Hematology



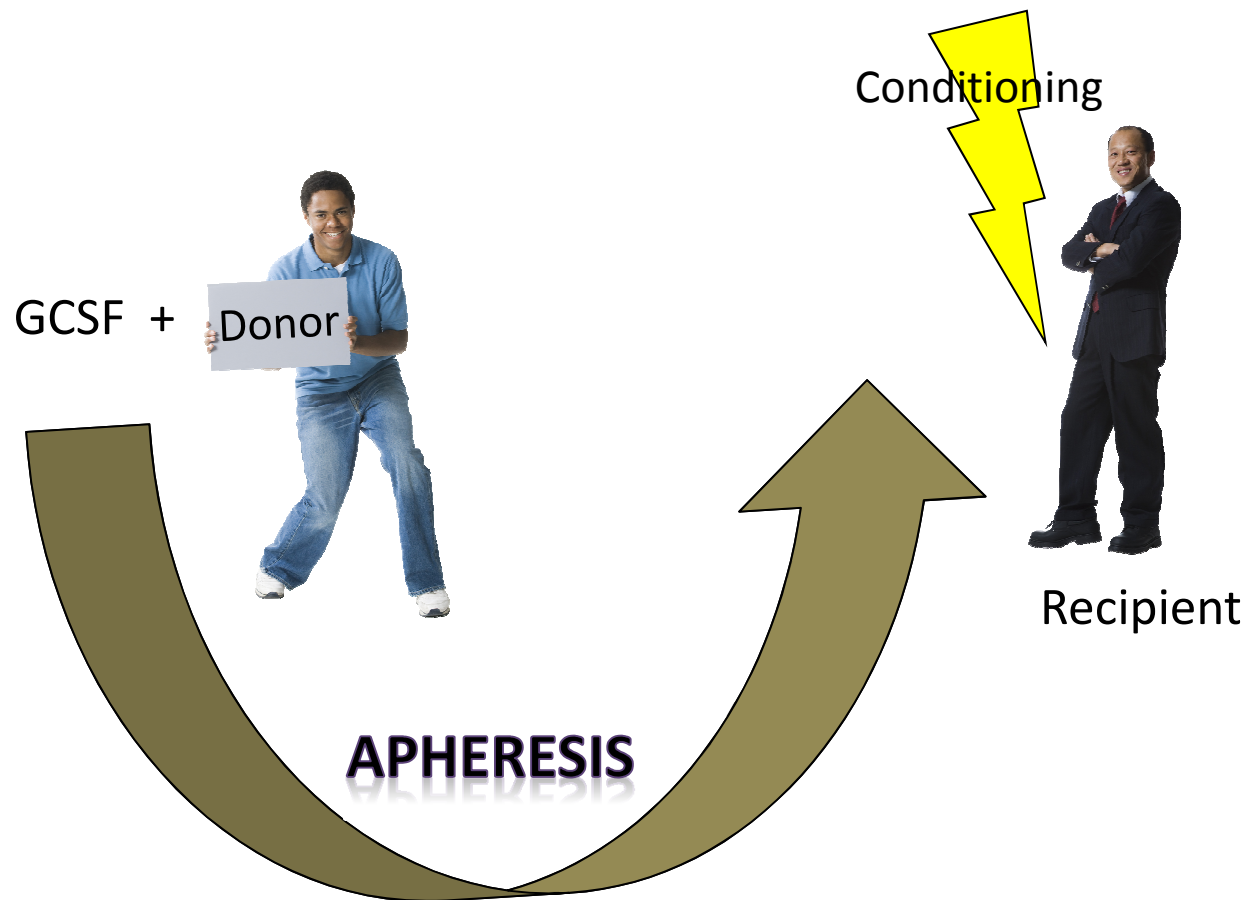
Bachireddy et al, Nature Rev Can, 15, 2015.

# Immunologic treatment of Hematologic Malignancies

1. Direct targeting of tumor surface antigens
2. Stimulating immune effector cells
3. *Activation of tumor antigens/vaccines*
4. *Overcoming inhibitory immune signal from tumor*
5. Small molecules or TKIs which accomplish above via 'pro-immunoactive' cytokine signaling

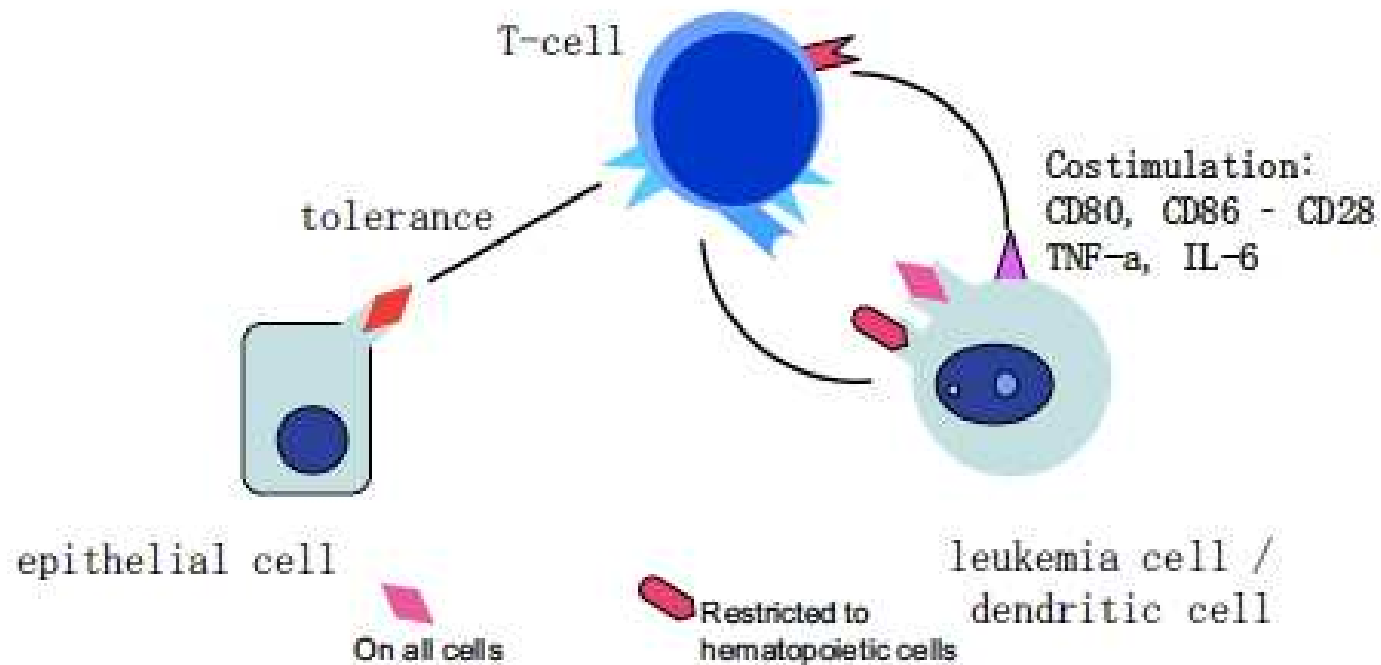


# Stimulating immune effector cells: Allogeneic Stem Cell Transplant is an Immune System Transplant

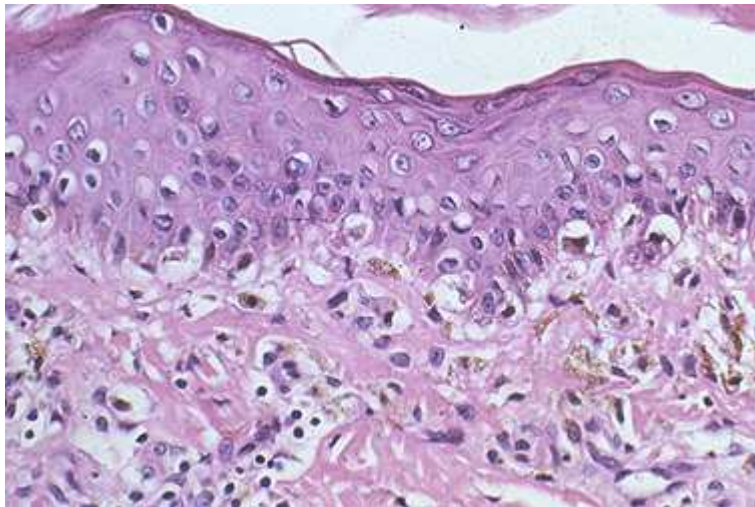


# Adoptive Immunotherapy in Chimerism

## GVL-Reaction



Kolb. Blood 112 (12), 2009.



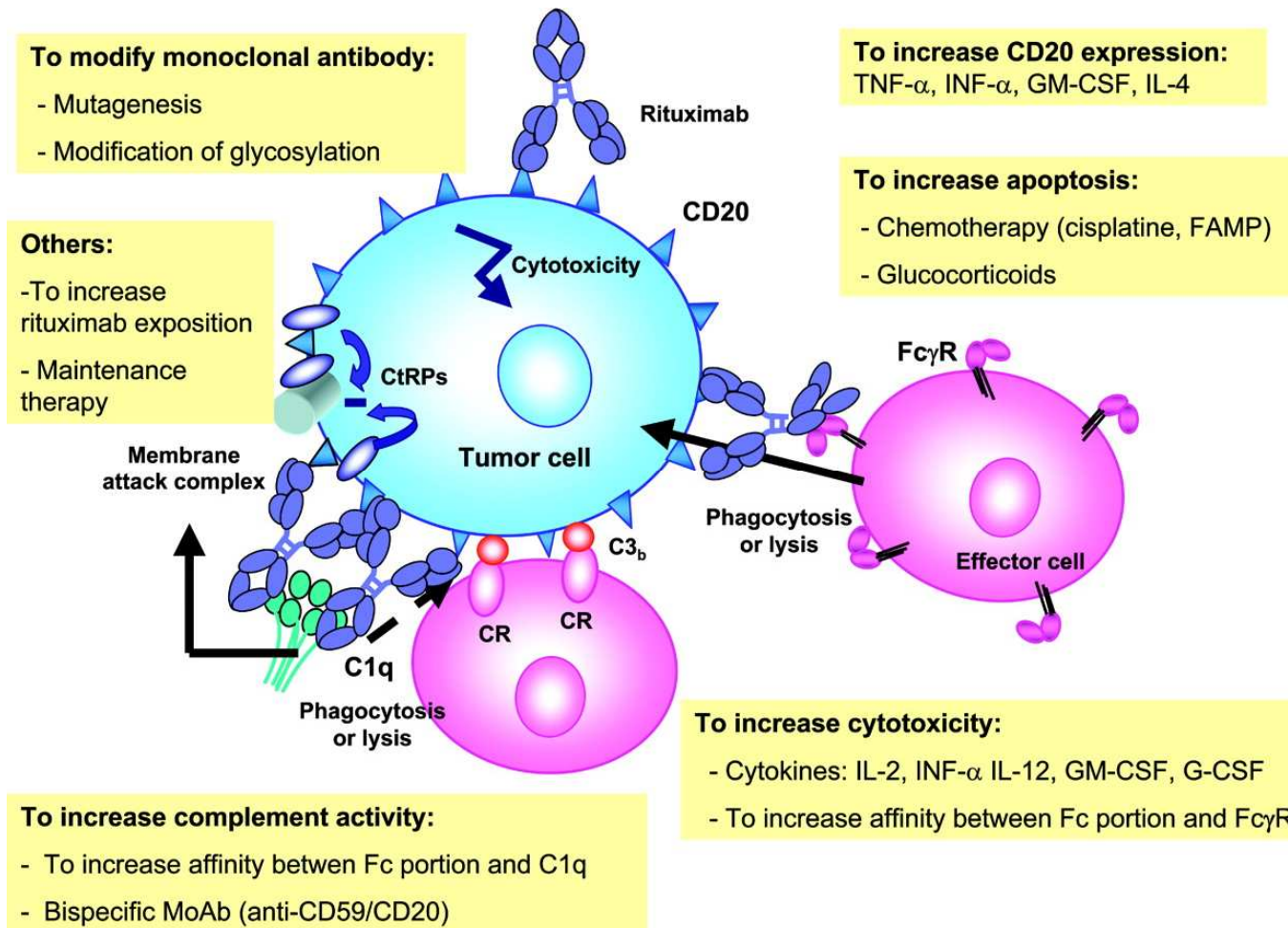
Skin Biopsy in Acute GVHD



Disease/study cohorts	No. of patients responding/no. treated	% CCR (y)
<b>CML molecular/cytogenetic relapse</b>		
EBMT study	40/50	80% (4 y)
North American	3/3	
<b>Chronic phase</b>		
EBMT	88/114	60% (4 y)
North American	25/34	
Japan	11/12	82% (3 y)
<b>Transformed phase</b>		
EBMT	13/36	20% (4 y)
North American	5/18	
Japan	3/11	0% (3 y)
<b>AML/MDS</b>		
EBMT	15/58	15% (4 y)
North American	8/44	
Prospective US study	25/51	19% (2 y)
Japan	13/32	7% (2/3 y)
		33% (2/3 y)
Korean	10/17	31% (2 y)
Lille, France	2/14	2/14 (4 y)
<b>ALL</b>		
EBMT	3/20	0% (4 y)
North American	2/11	ND
IBMTR	11/44	13% (3 y)
Japan	6/23	0% (3 y)
Korean	7/10	10% (2 y)
<b>CLL</b>		
German Multicenter trial on molecular relapse and persistence	7/9 molecular remission	7/9 (> 2 y)
Bristol multicenter	1/7	0
DFCI	6/7	NK
<b>NHL</b>		
North American study	0/6	NK
EBMT study	10/14 OR	NK
Progressive and refractory	6/14 CR	
UC London	LG-NHL 6/10	NK
Relapsed and refractory	HG-NHL 3/9	
<b>Myeloma</b>		
EBMT study	5/17	45% (2 y)
Relapse/progression		
North American Study relapse/progression	2/4	
US multicenter study persistent/progressive	7/22	4/7 (> 1 y)
Dutch multicenter study relapse and progression	14/27 OR	5/27 (> 2.5 y)
	10/27 CR	
Preemptive in chemosensitive MMY	6/20 CR/PR → 7/14 CR/PR	30% (2 y)
Relapse/progression		
	24/63	
	12 CR	~ 45% (3 y)
	12 PR	
Relapse/progression Johns Hopkins Hospital	8/16 6 CR 2PR	5 > 2 y

# Donor lymphocyte infusion

# Directly Targeting Tumor Specific Antigens: Maximizing Efficacy of Rituximab



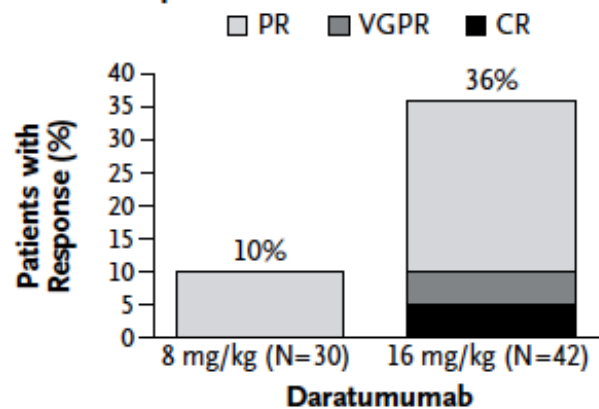
Cartron. *Blood*. 2004;104:2635.



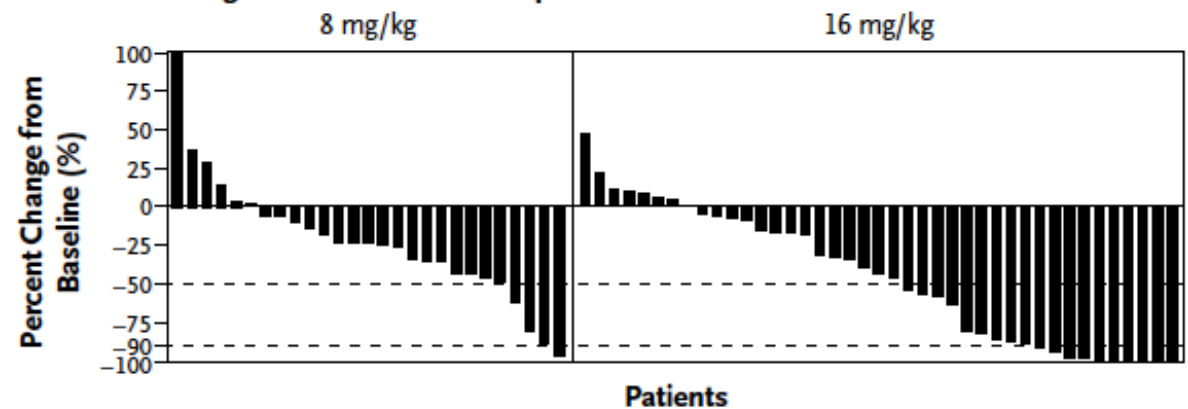
# Daratumumab in Multiple Myeloma

Targeting CD38 in patients with highly refractory multidrug resistant disease

**A Overall Response Rate**

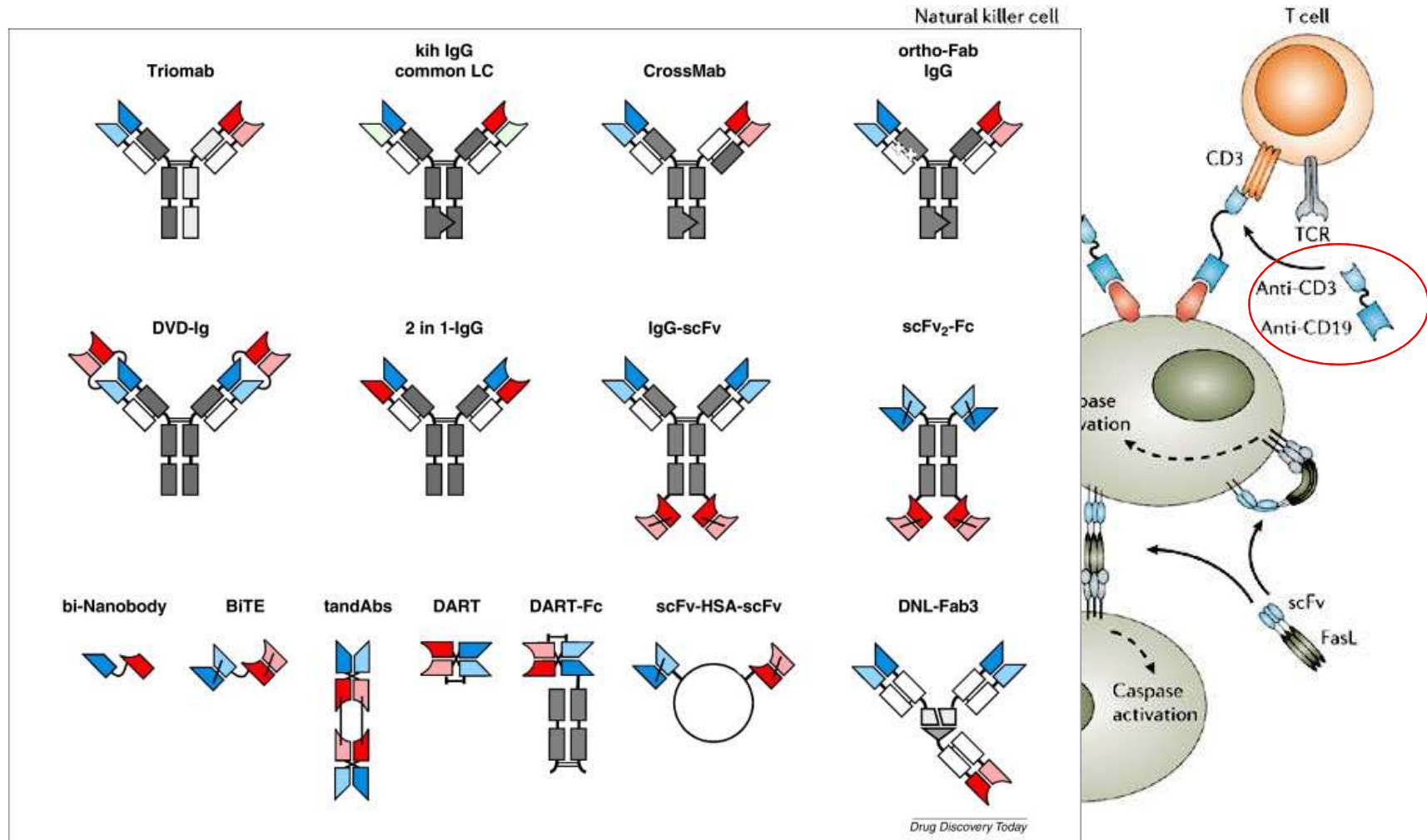


**B Relative Change from Baseline in Paraprotein Level**



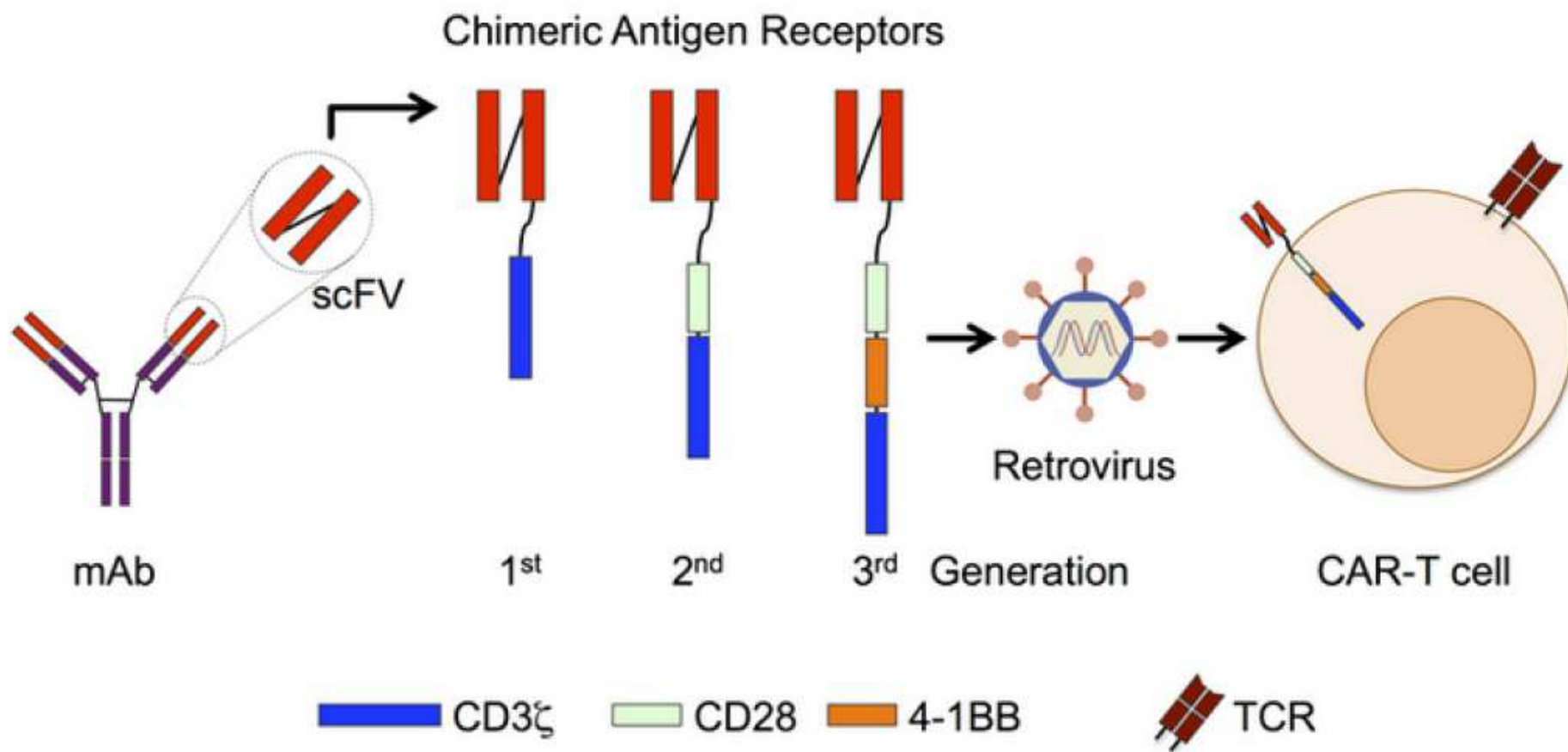
Lokhorst et al, NEJM, 373, 2015.

# Bi-Specific Antibodies



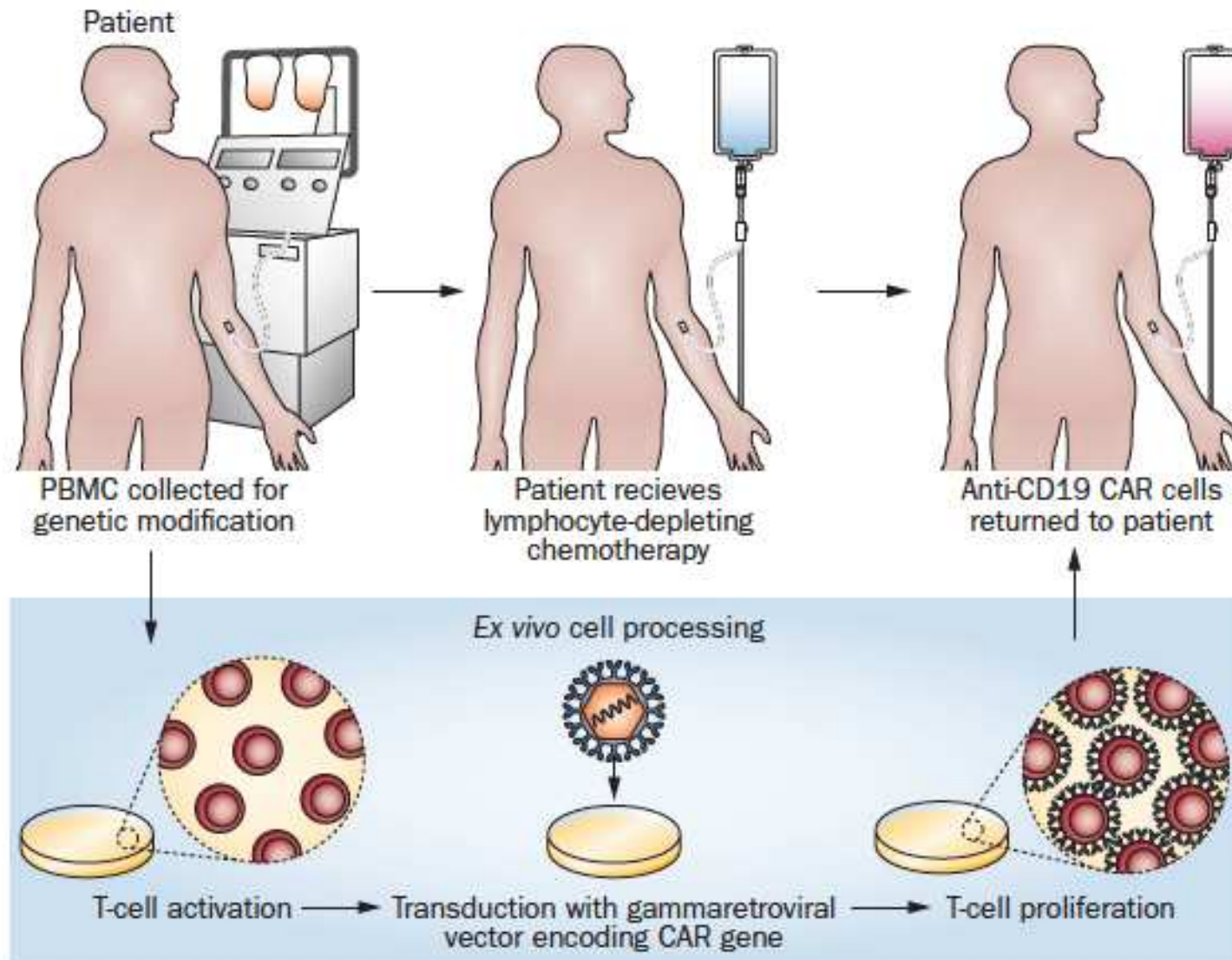
Kontermann and Brinkman. *Drug Dis Today*, 20(7), 2015.  
 Scharma et al, *Nature Reviews Drug Dis*, 5, 2006.

# Chimeric Antibody Receptor T-Cell



Magee and Snook. Disc Med, 20(108), 2014.

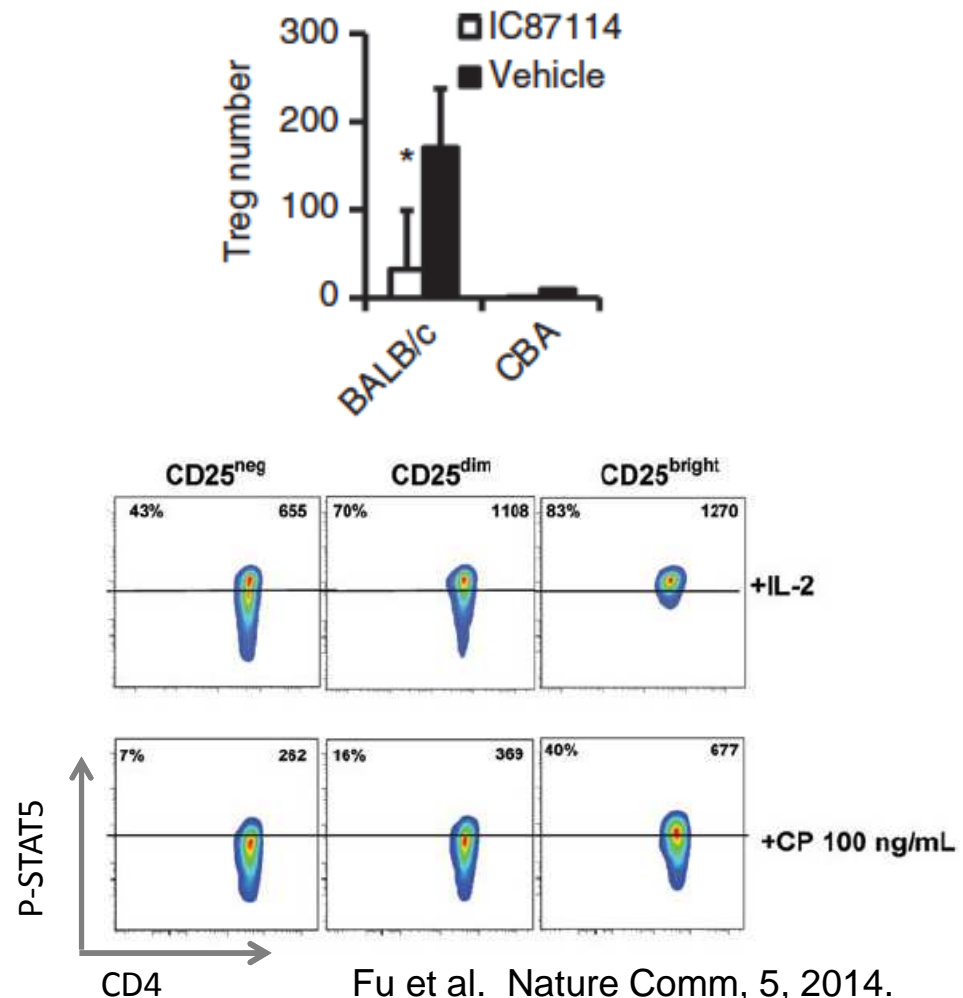
# CAR-T Process – B-ALL



Kochenderfer and Rosenberget al, Nat Rev Clin Oncol. 10, 2013.

# Blood Tumors Hijack Intracellular Signaling which Promotes Tolerance

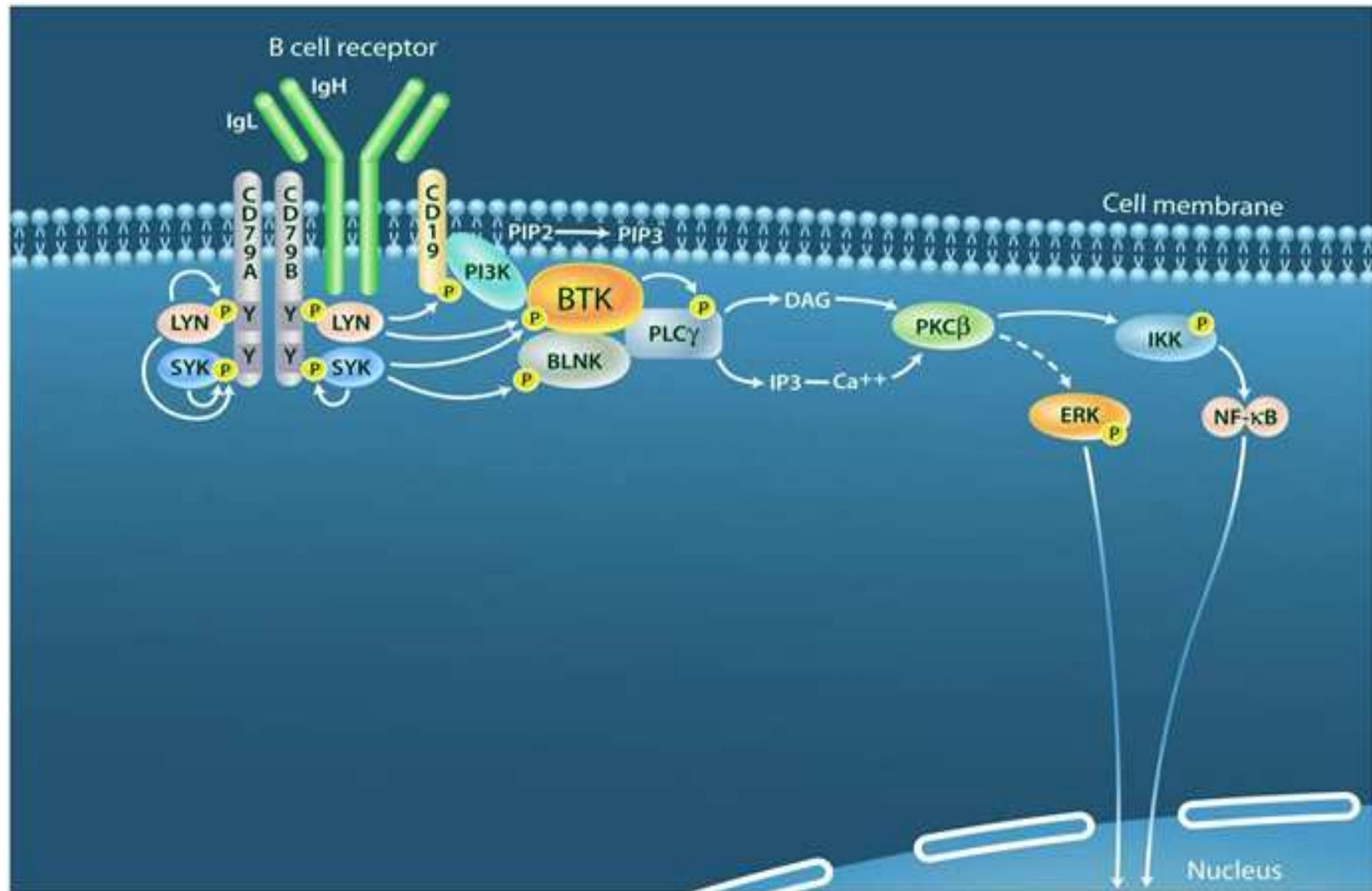
- BCR/PI3K delta signaling stimulates T-regs, MDSCs and TAMs
- JAK-STAT signaling blocks T-effs



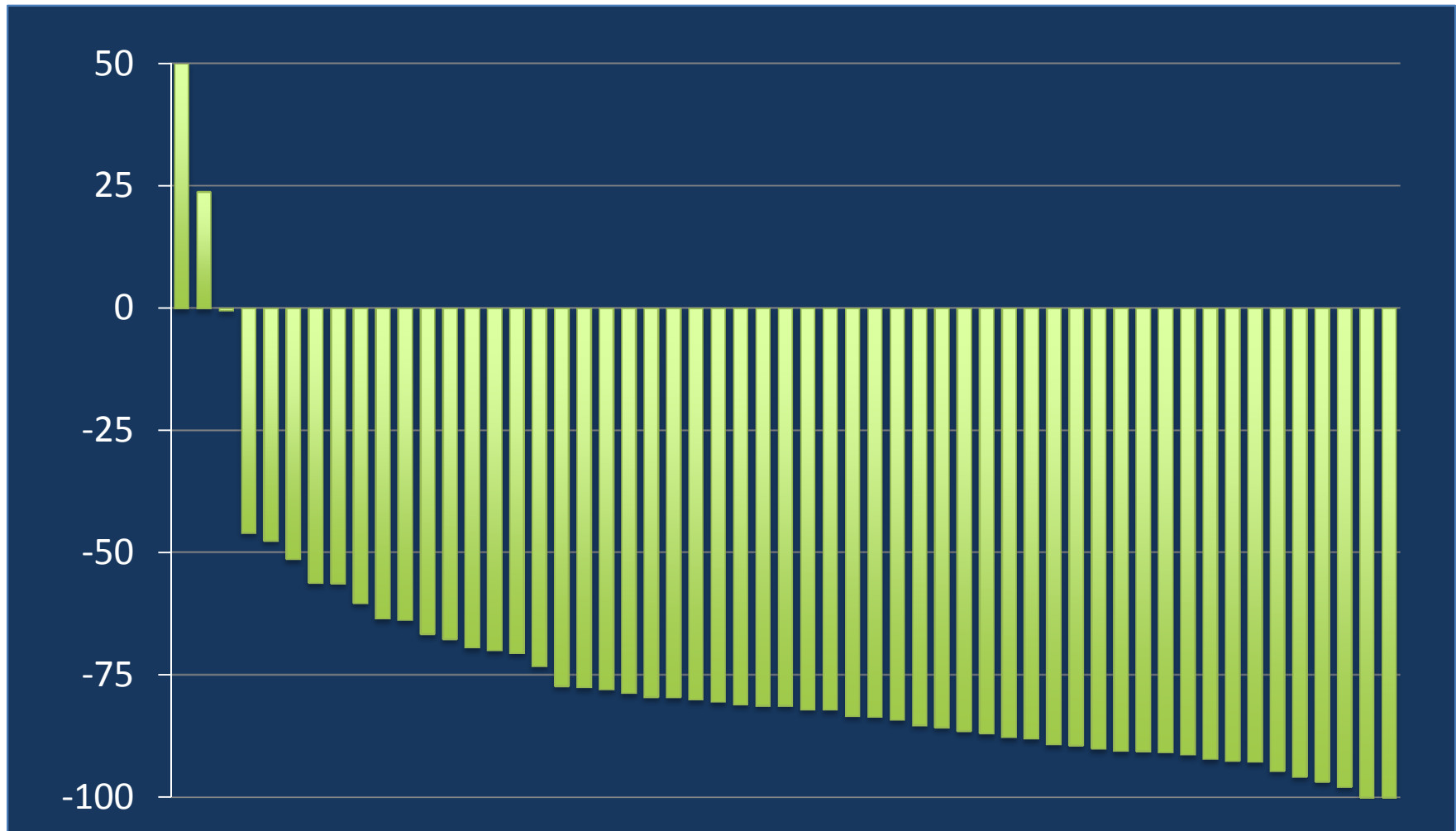
Fu et al. Nature Comm, 5, 2014.  
Sewgobind et al. Amer J of Transp, 10, 2010.



# Subversion of Physiologic Pathways and Treatment with B Cell Receptor Antagonists

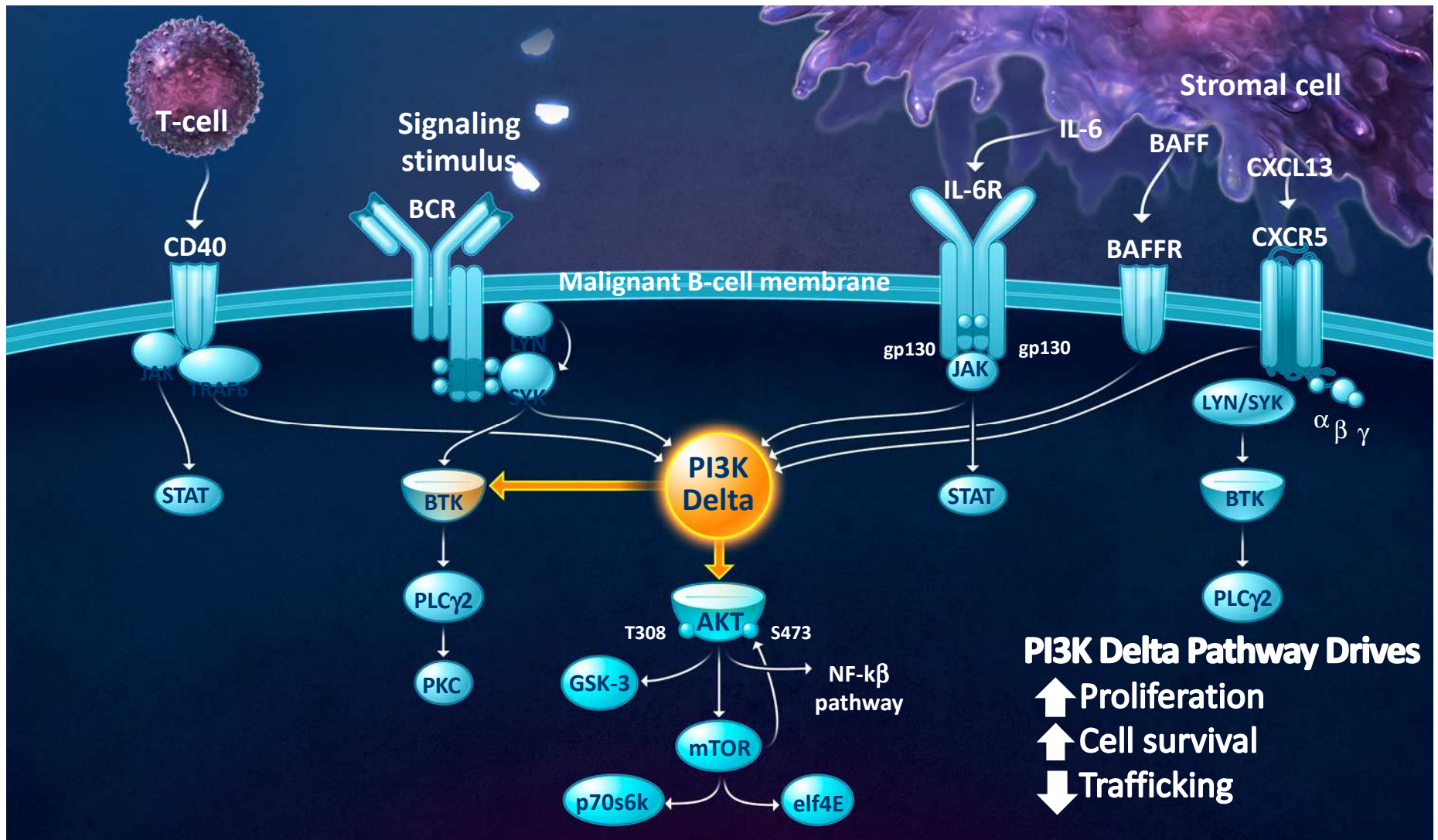


# BTK Inhibitor – Ibrutinib in CLL

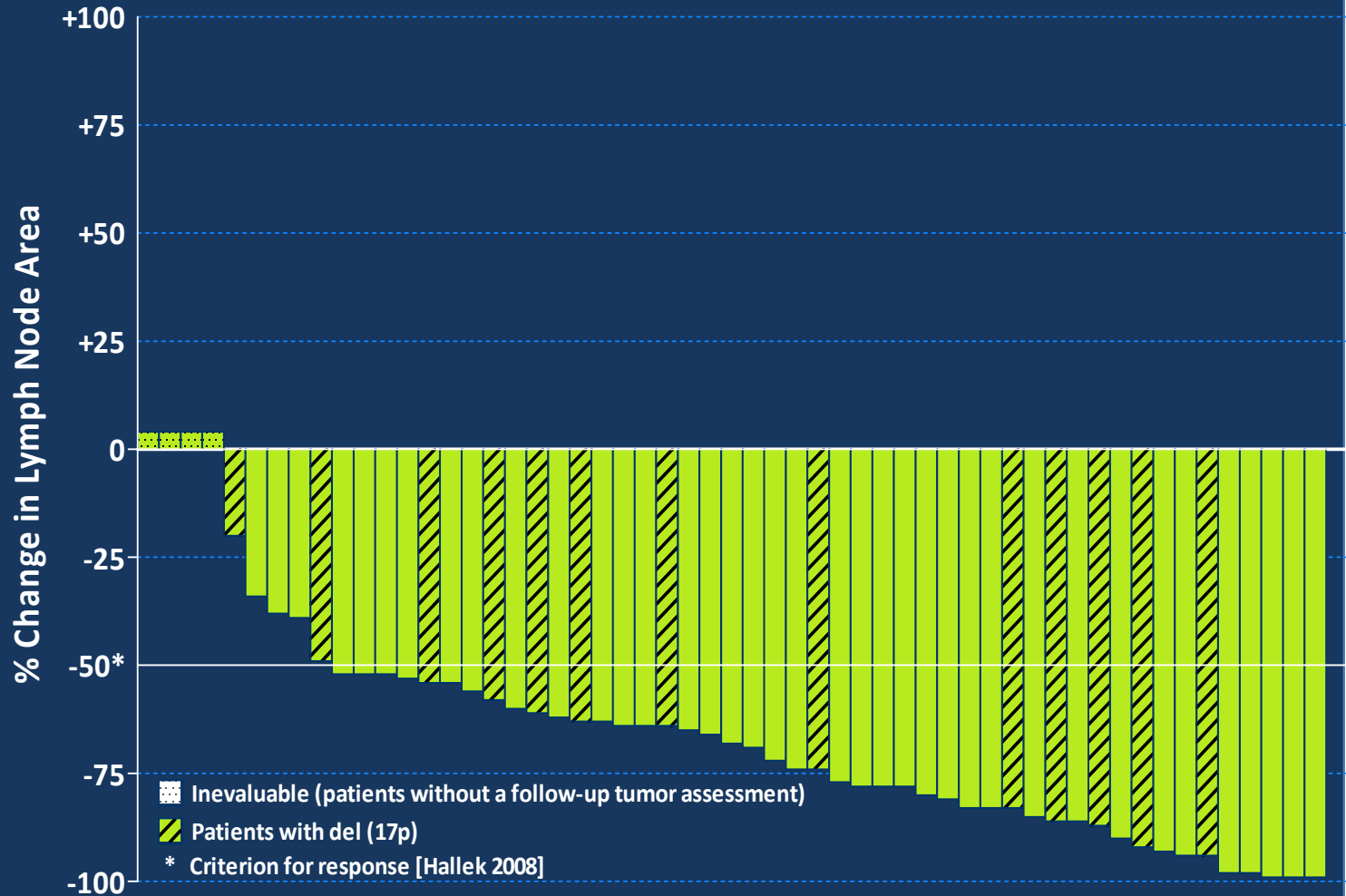


Bryd et al, Blood 2013.

# PI3-K at the Crossroads



## Best On-Treatment Change in Tumor Size (ITT Analysis, N=55)



Single-Agent  
CAL-101  
(Idelalesib)  
Resulted in  
Tumor  
Shrinkage in  
CLL,  
Including  
del(17p)

Kahl et al, Blood 123(22) 2014.

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# Thank you

