



# SITC 2016

NATIONAL HARBOR, MD  
NOVEMBER 9-13, 2016



Society for Immunotherapy of Cancer



**SITC 2016**

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# T cell function and specificity in colorectal cancer

Arnold Han, MD, PhD

Columbia University



Society for Immunotherapy of Cancer

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# Presenter Disclosure Information

*Arnold Han, MD, PhD*

The following relationships exist related to this presentation:

*Provisional U.S. patent related to TCR sequencing*

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# Systemic Analysis of Human CRC

1.

Sample acquisition



Tumor/Normal



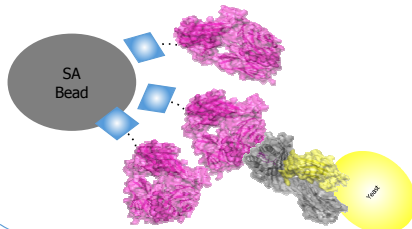
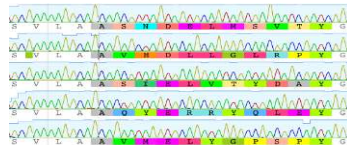
T cell phenotyping



Understand phenotypes of  
tumor-specific T cell repertoire

2.

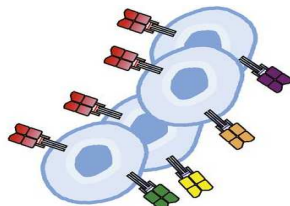
Screening

Deep-Sequencing &  
Bioinformatics Analysis

Determine T cell antigen specificities

3.

TCR-based therapies



Investigate therapeutic potential

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Arnold Han, MD, PhD

1.

Sample acquisition



Tumor/Normal

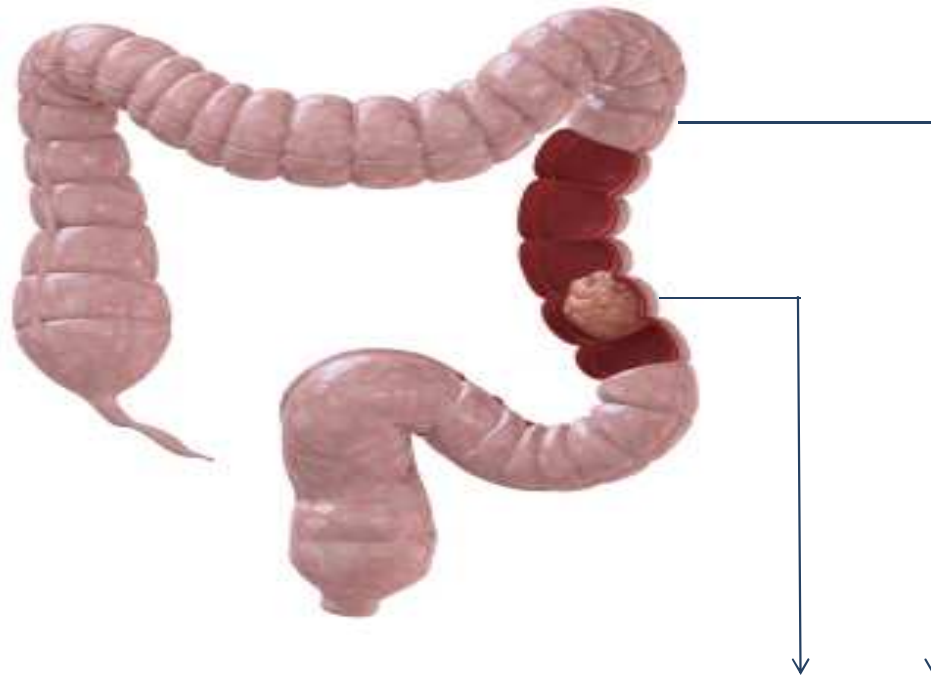


T cell phenotyping



Understand phenotypes of  
tumor-specific T cell repertoire

# Experiment



Extract and Analyze Single T cells

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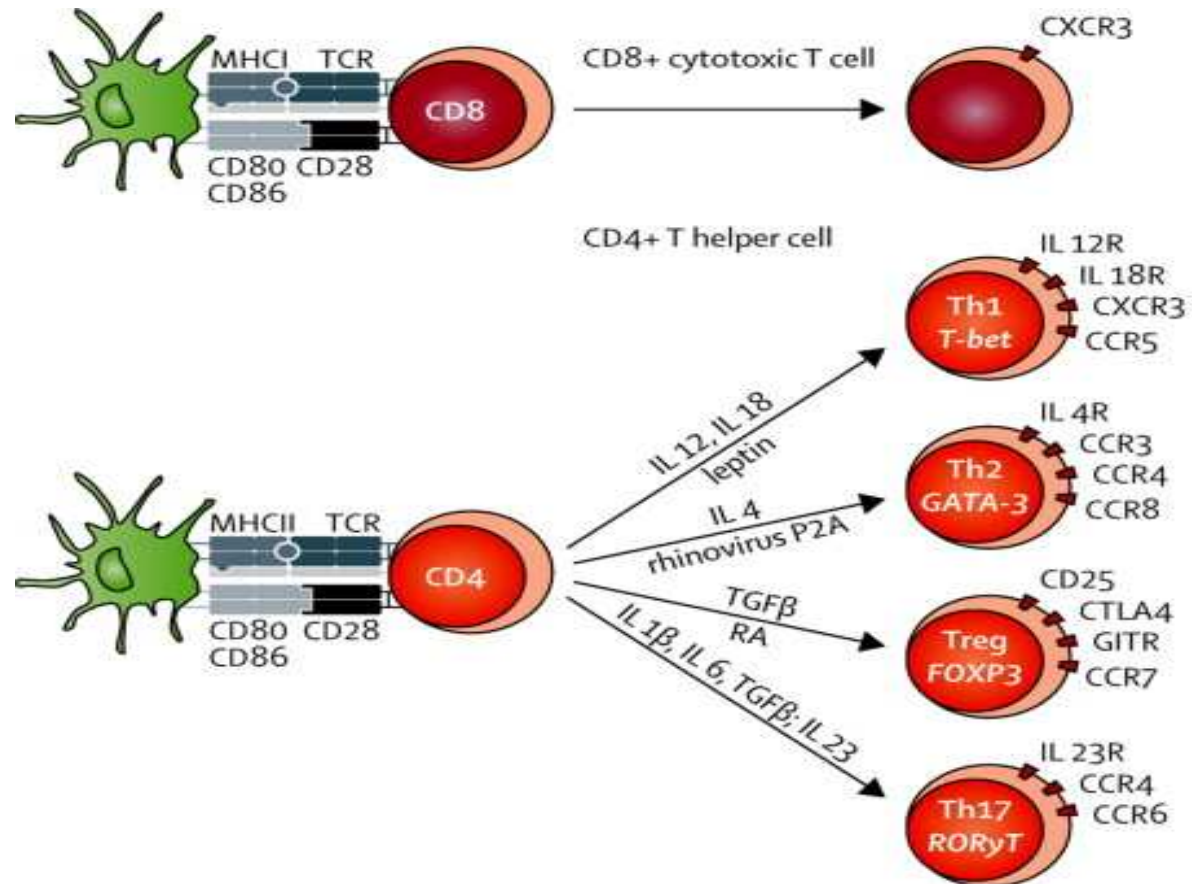


## Single-Cell vs Bulk Analysis



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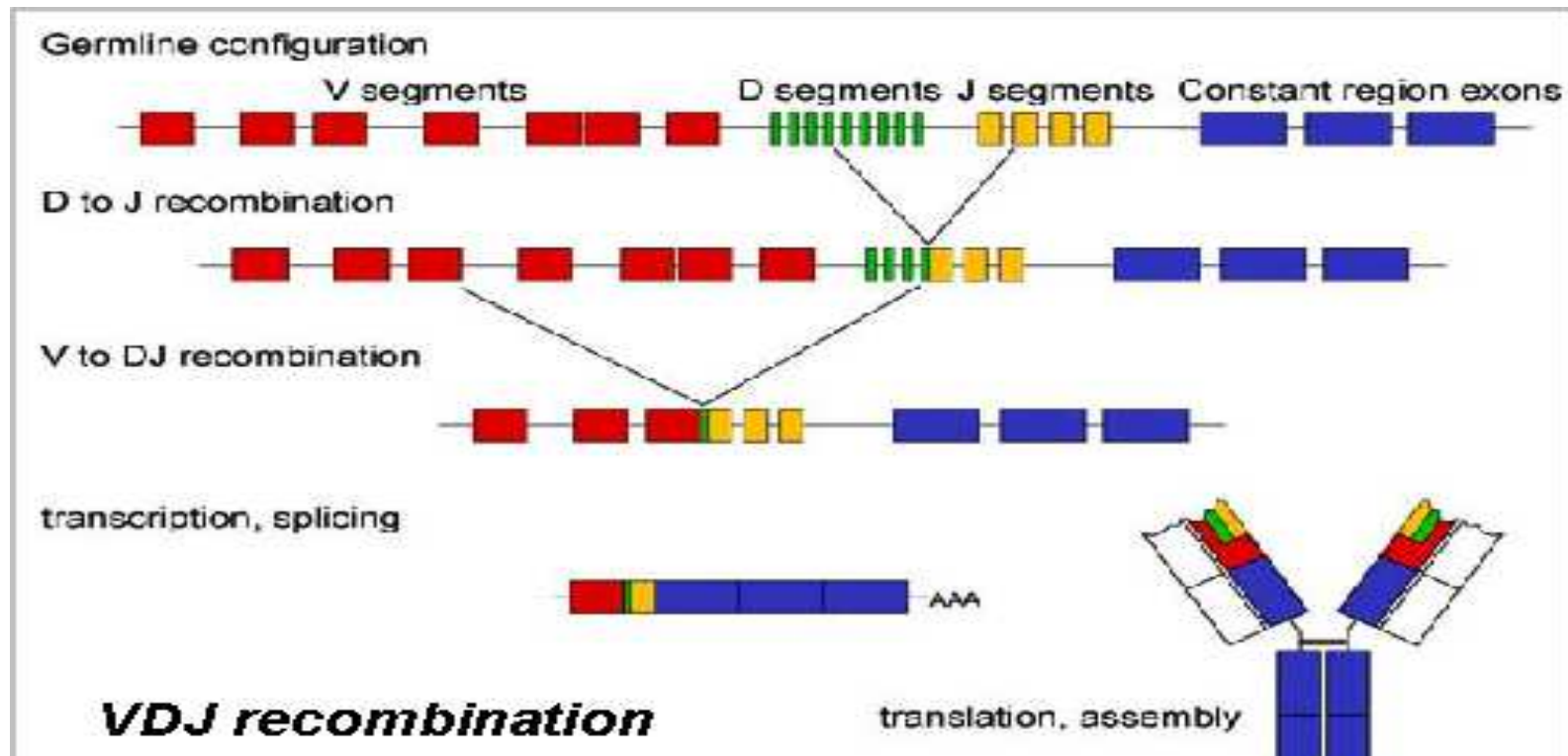
# The Complexity of T cell Function



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# TCR diversity: V(D)J Recombination

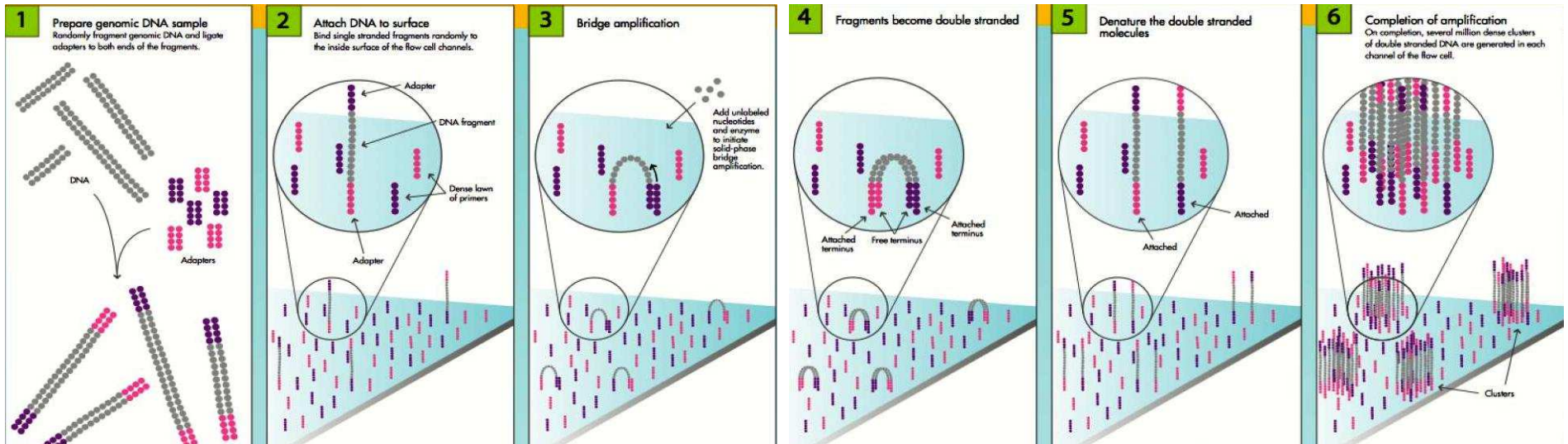


Diversity  $\sim 10^{15}$

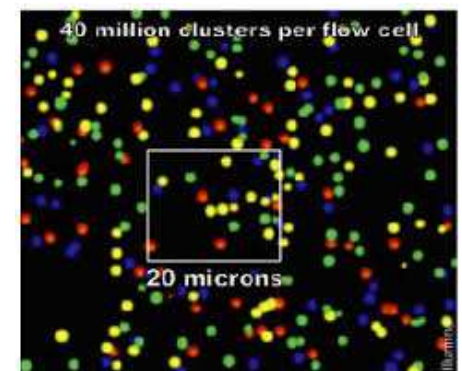
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Janeway et al

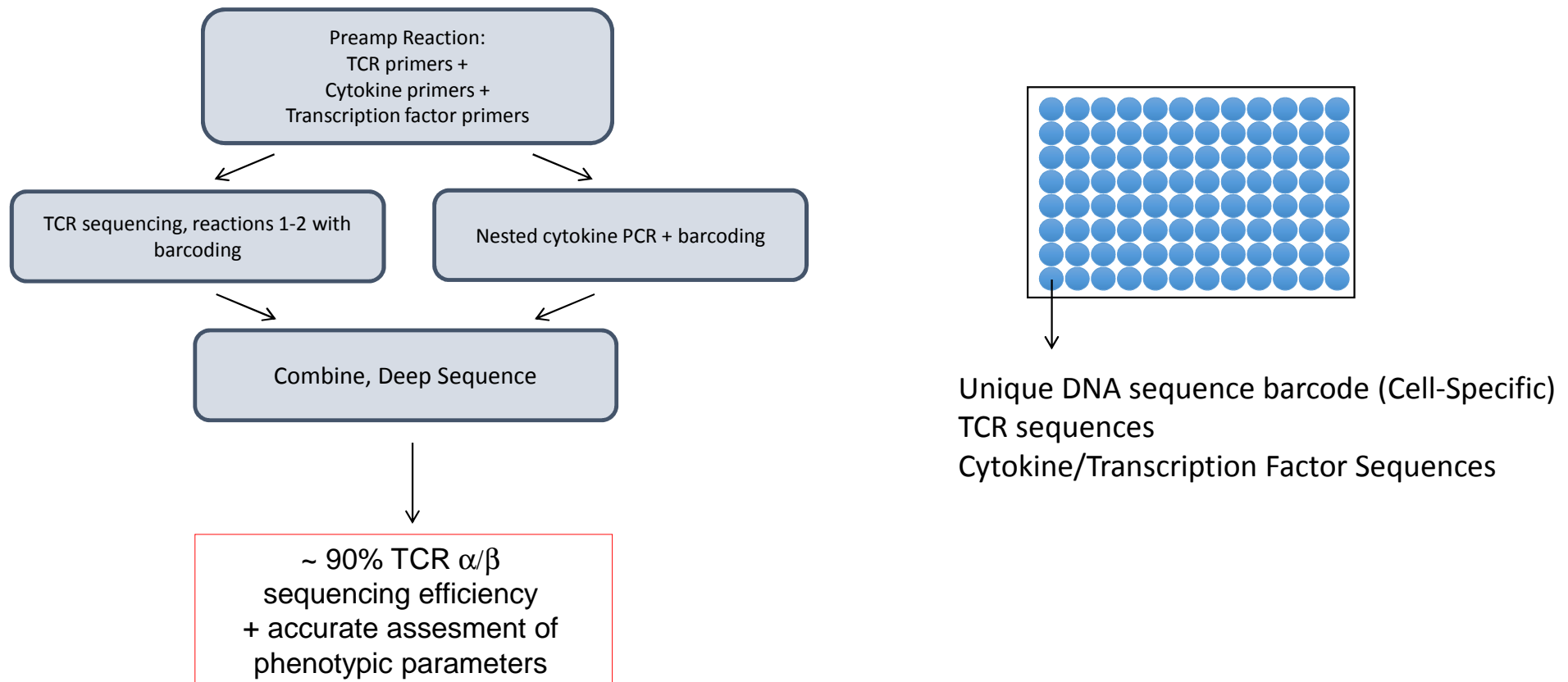
## Deep Sequencing



VS. Conventional (Sanger Based Sequencing):  
Single Molecules are Sequenced  
Throughput >  $10^7$



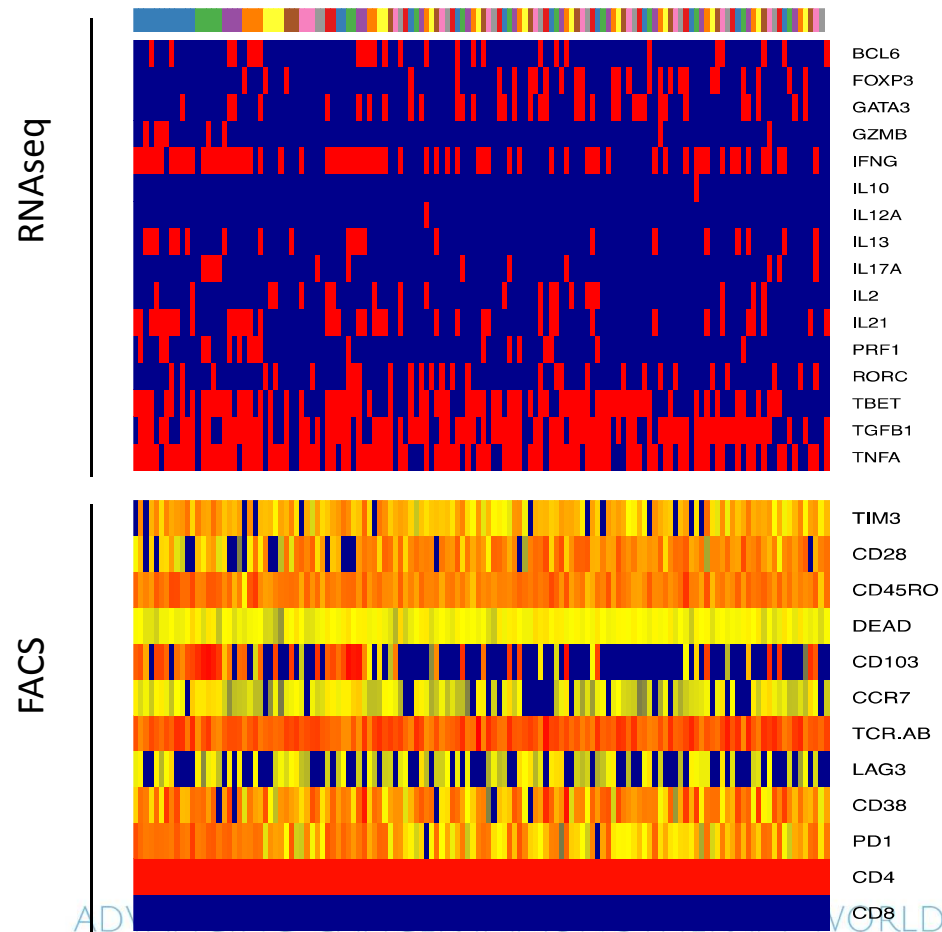
## Single-cell gene expression and TCR sequencing by deep sequencing



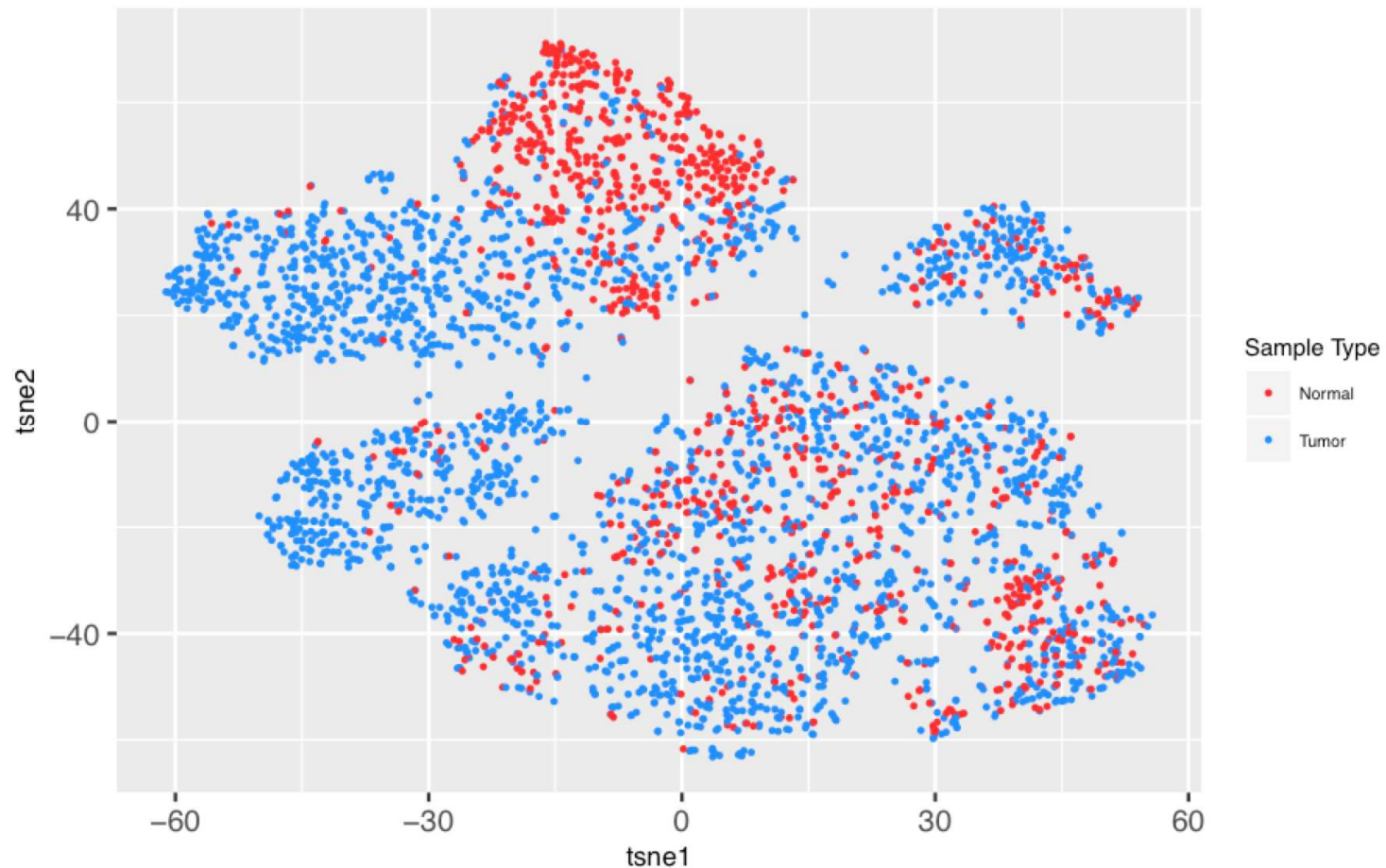
Han et al, *Nature Biotechnology*, 2014

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## Paired TCR and phenotypic analysis: 35+ parameters/cell

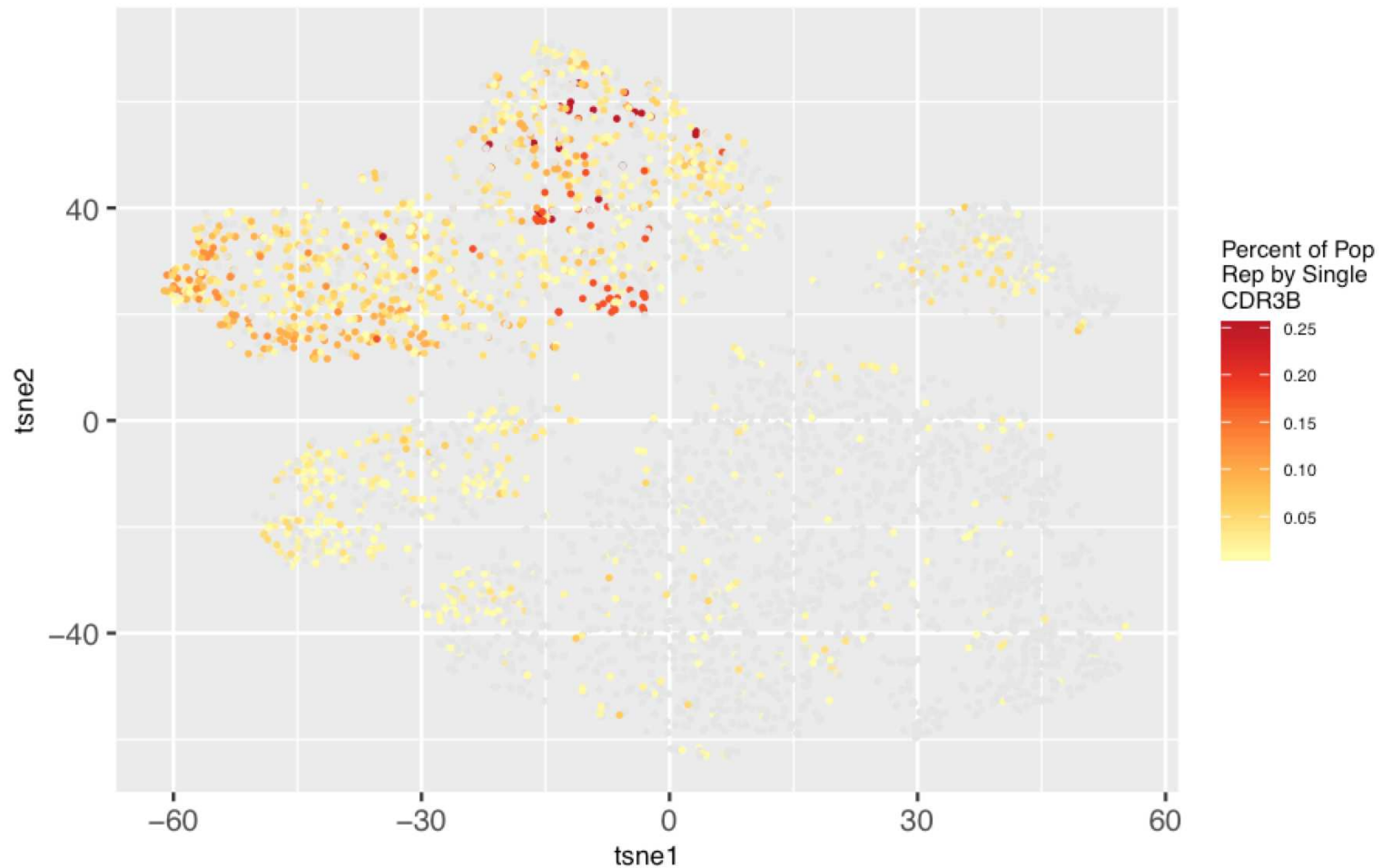


# Visualizing high dimensional T cell data: T-SNE



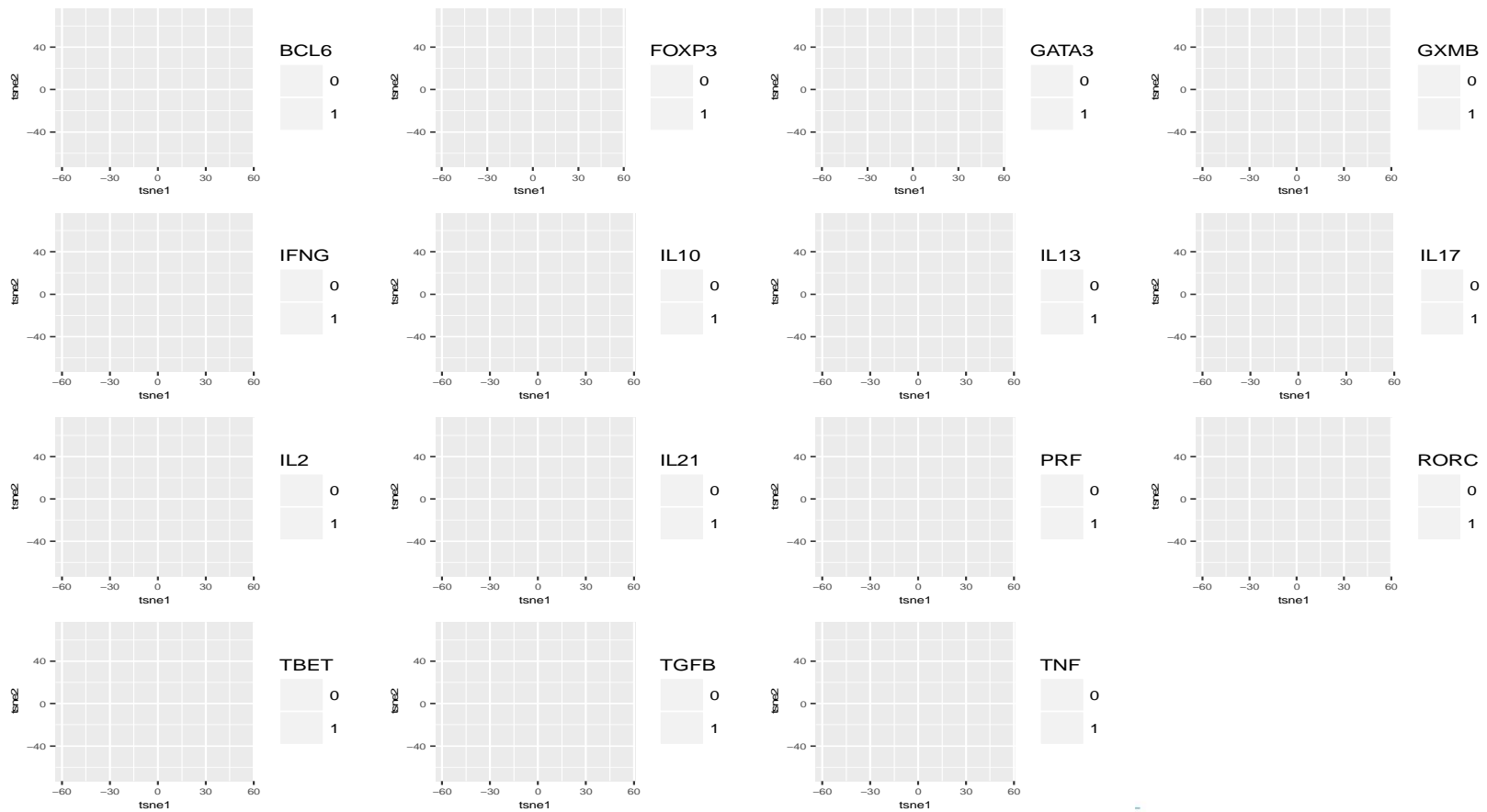


# Visualizing high dimensional T cell data: T-SNE



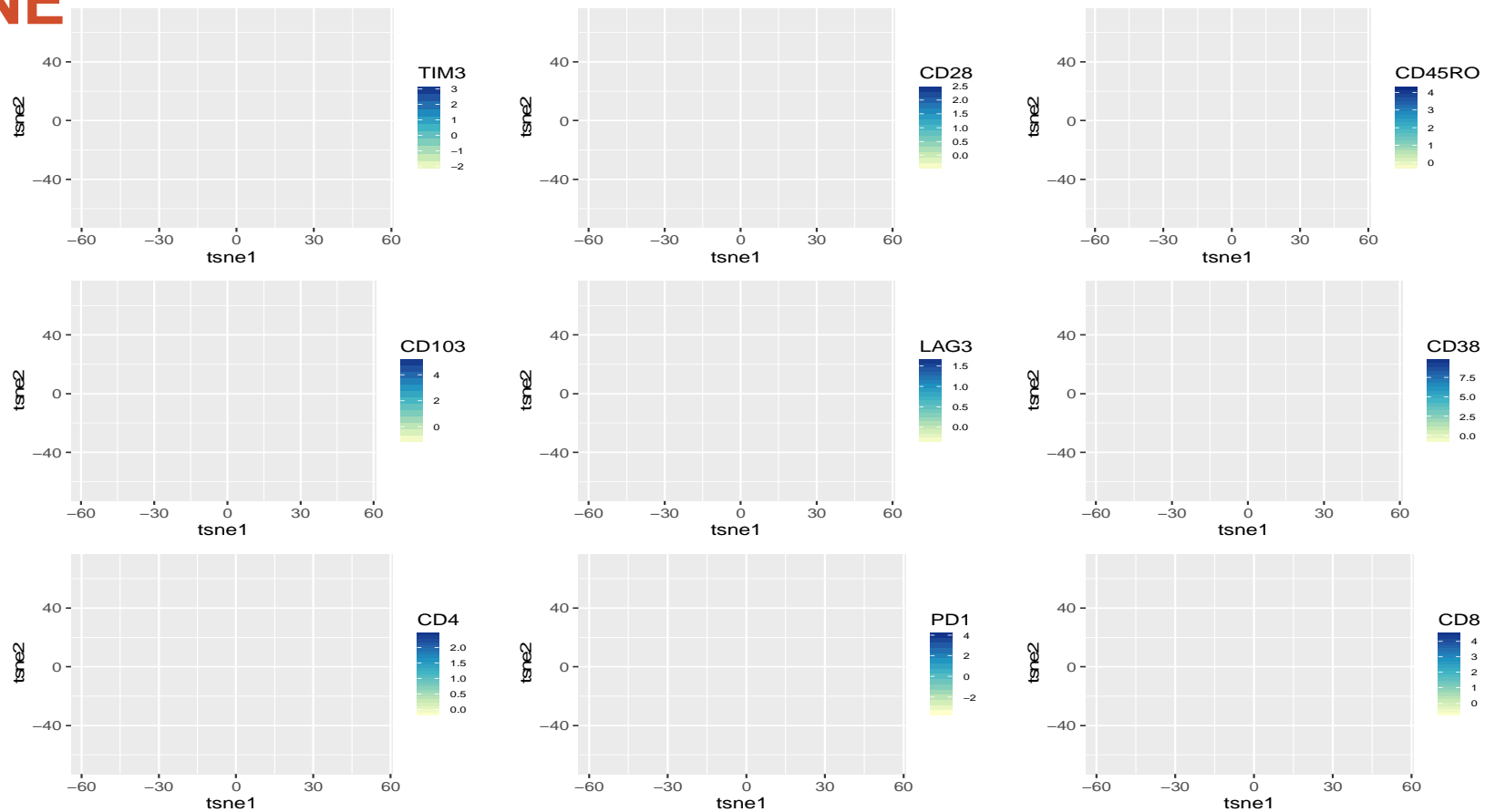


# Visualizing high dimensional T cell data: T-SNE



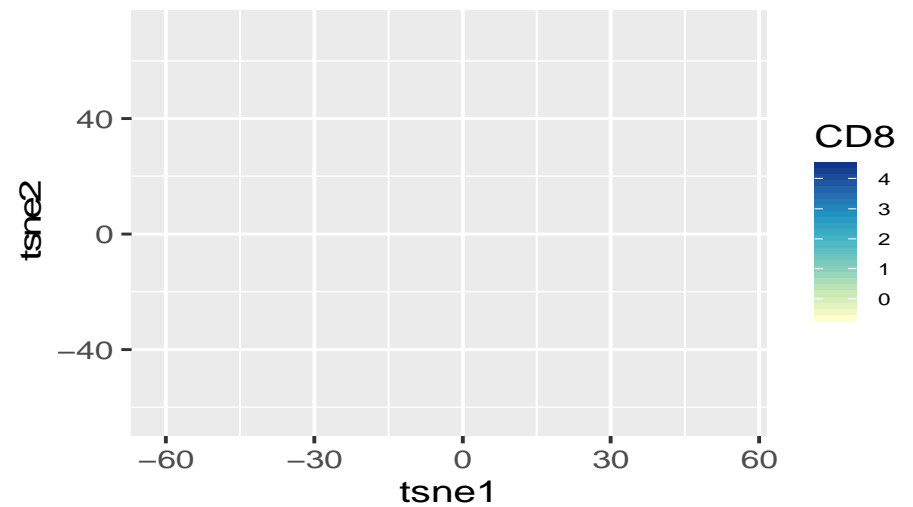
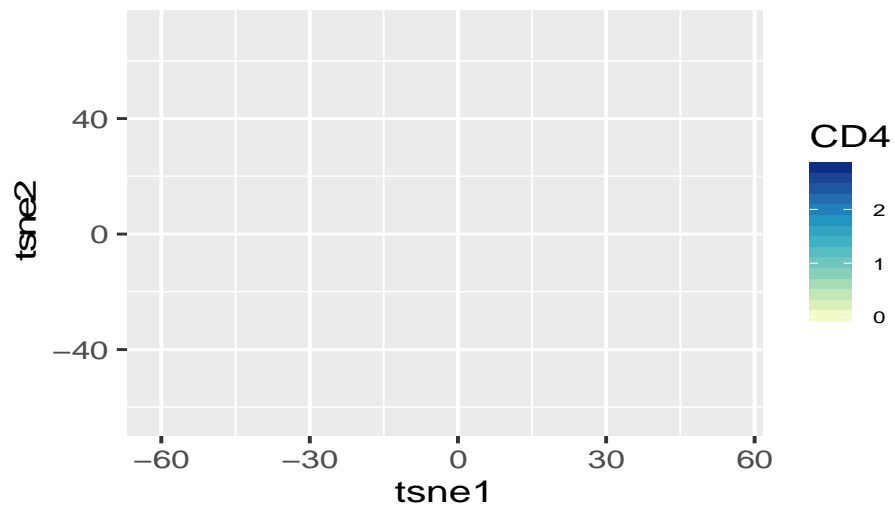
ADVANCING CANCER IMMUNOTHERAPY WORLDWIDE

# Visualizing high dimensional T cell data: T-SNE

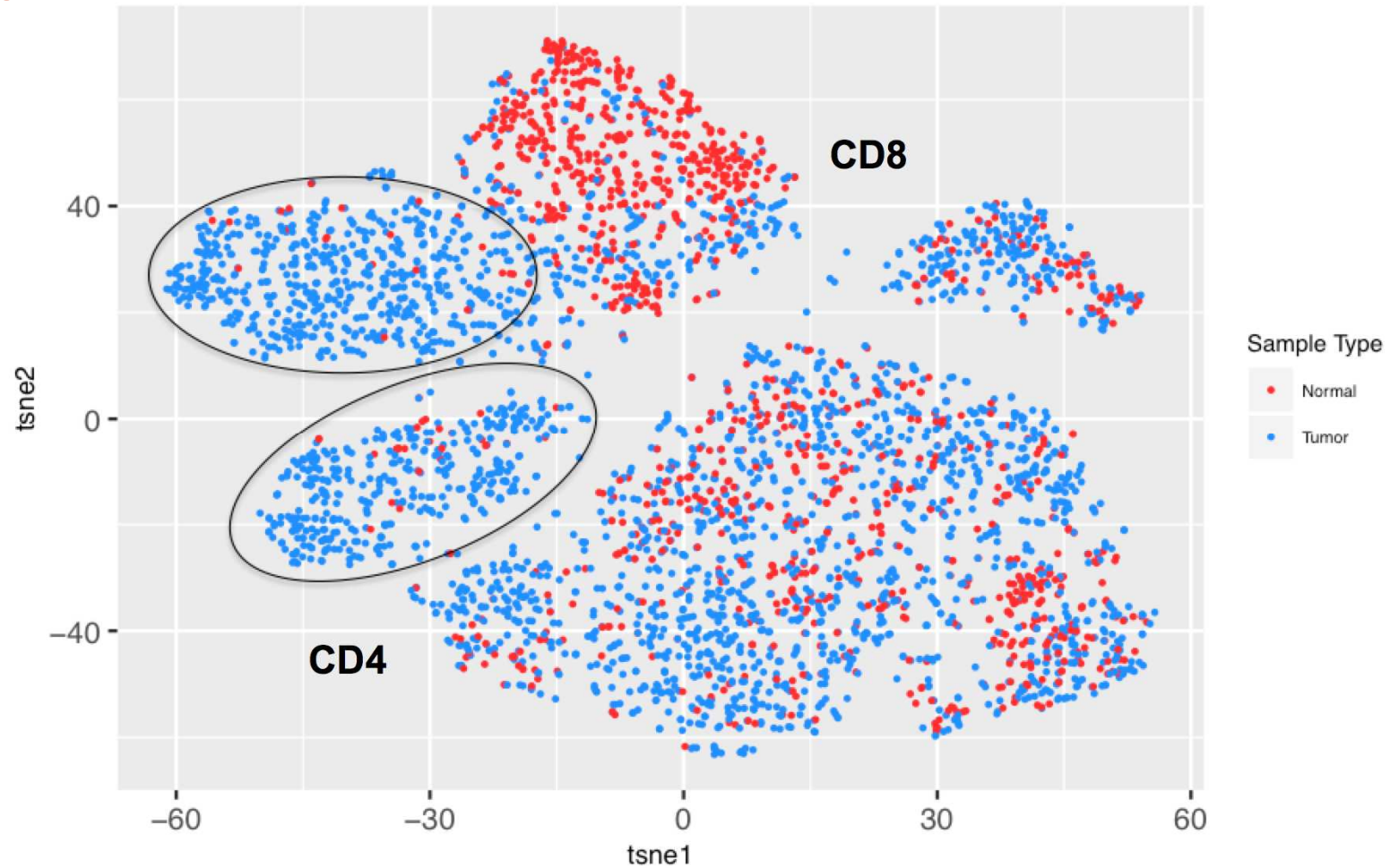


ADVANCING CANCER IMMUNOTHERAPY WORLDWIDE

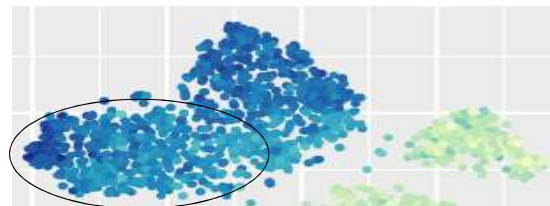
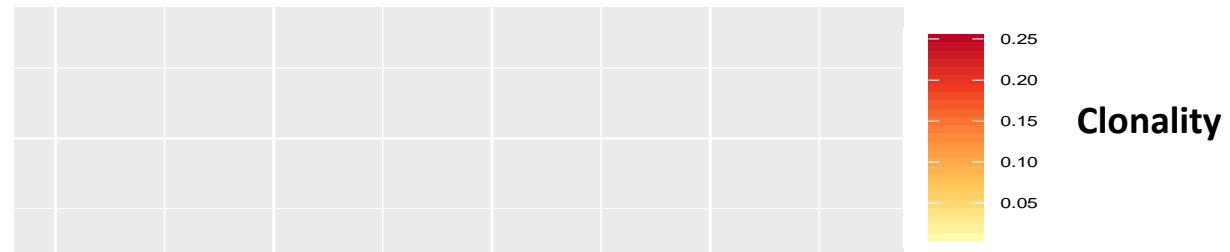
# Visualizing high dimensional T cell data: T-SNE



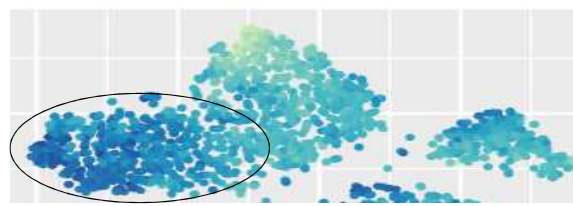
# Phenotypes of TILs



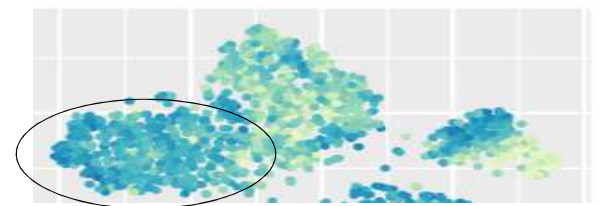
# Distinguishing features of CD8 TILs



CD103

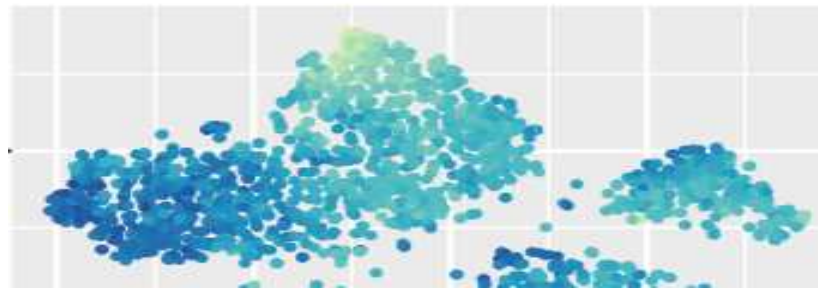


PD1

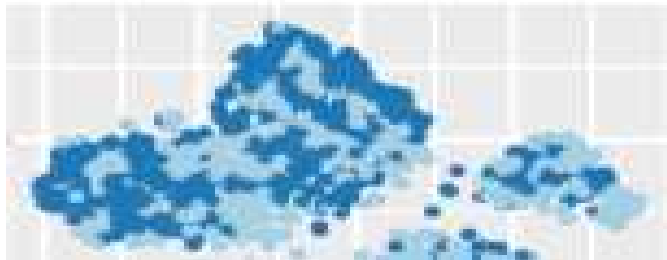


CD45RO

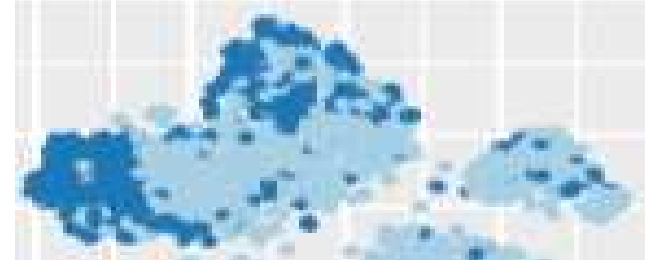
## PD1 and exhaustion? : CD8



**PD1**



**Perforin**



**Granzyme**



## **Ongoing: T cells in cancer**

### **All cells/cancers are NOT equal**

- Compare T cell profiles between tumors
  - correlate with disease stage, prognosis, and degree of mutation (MSS, MSI)
- Identify functionally significant cell types
  - Identify targets for therapy
  - Adoptive Transfer

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## Single-Cell RNAseq is coming

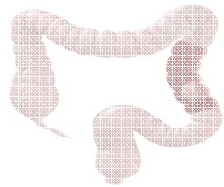


ADVANCING... WIDE

# Systemic Analysis of Human CRC

1.

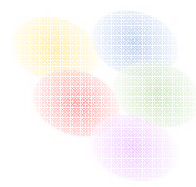
Sample acquisition



Tumor/Normal



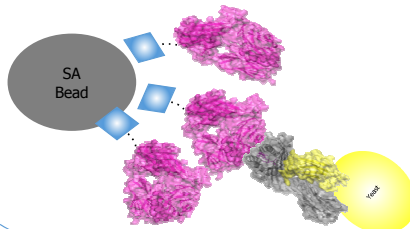
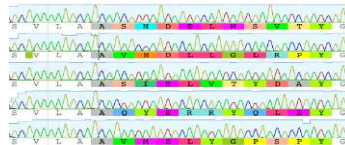
T cell phenotyping



Understand phenotypes of  
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2.

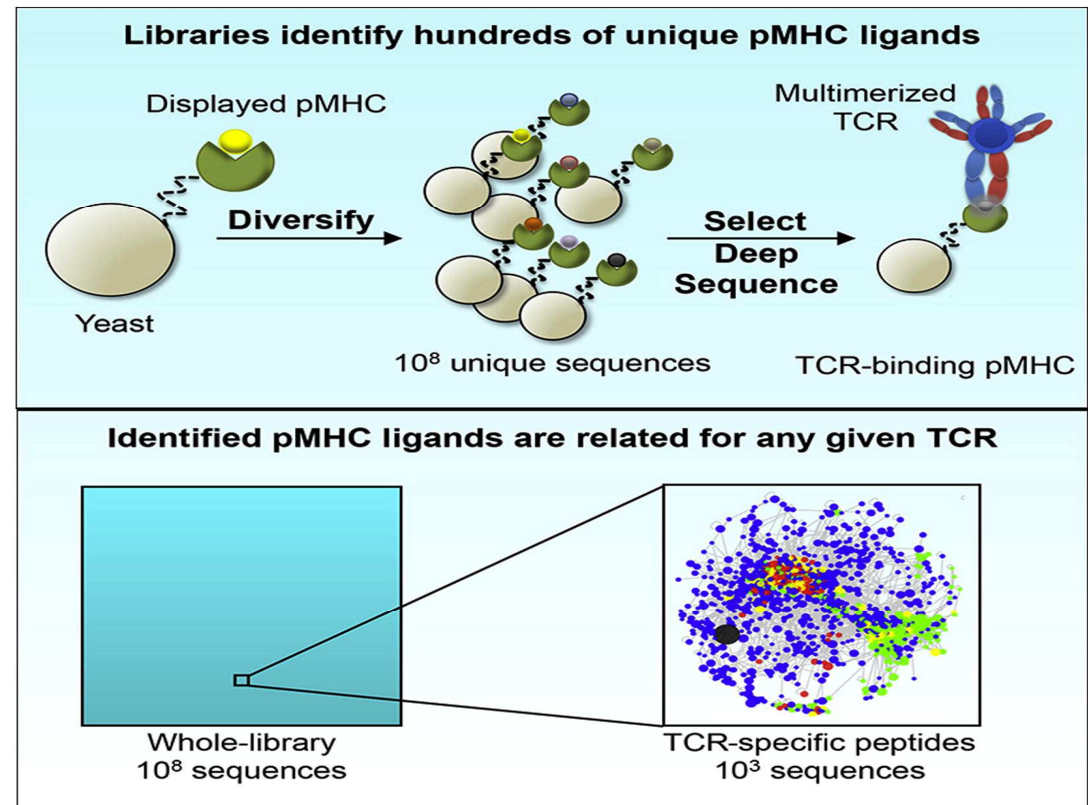
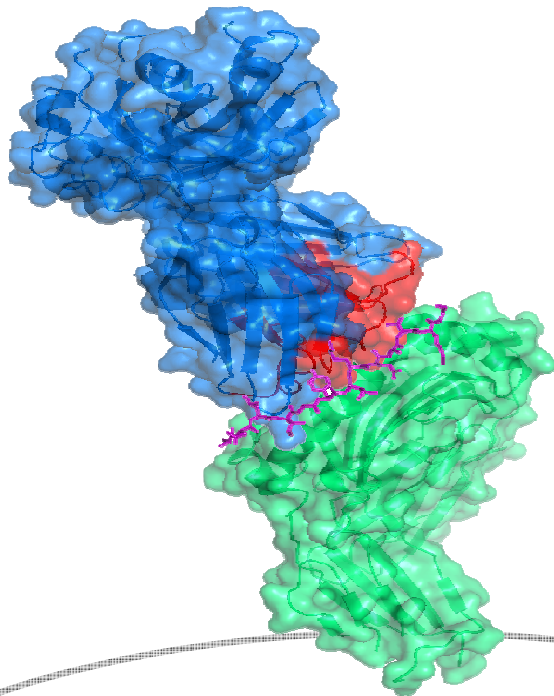
Screening

Deep-Sequencing &  
Bioinformatics Analysis

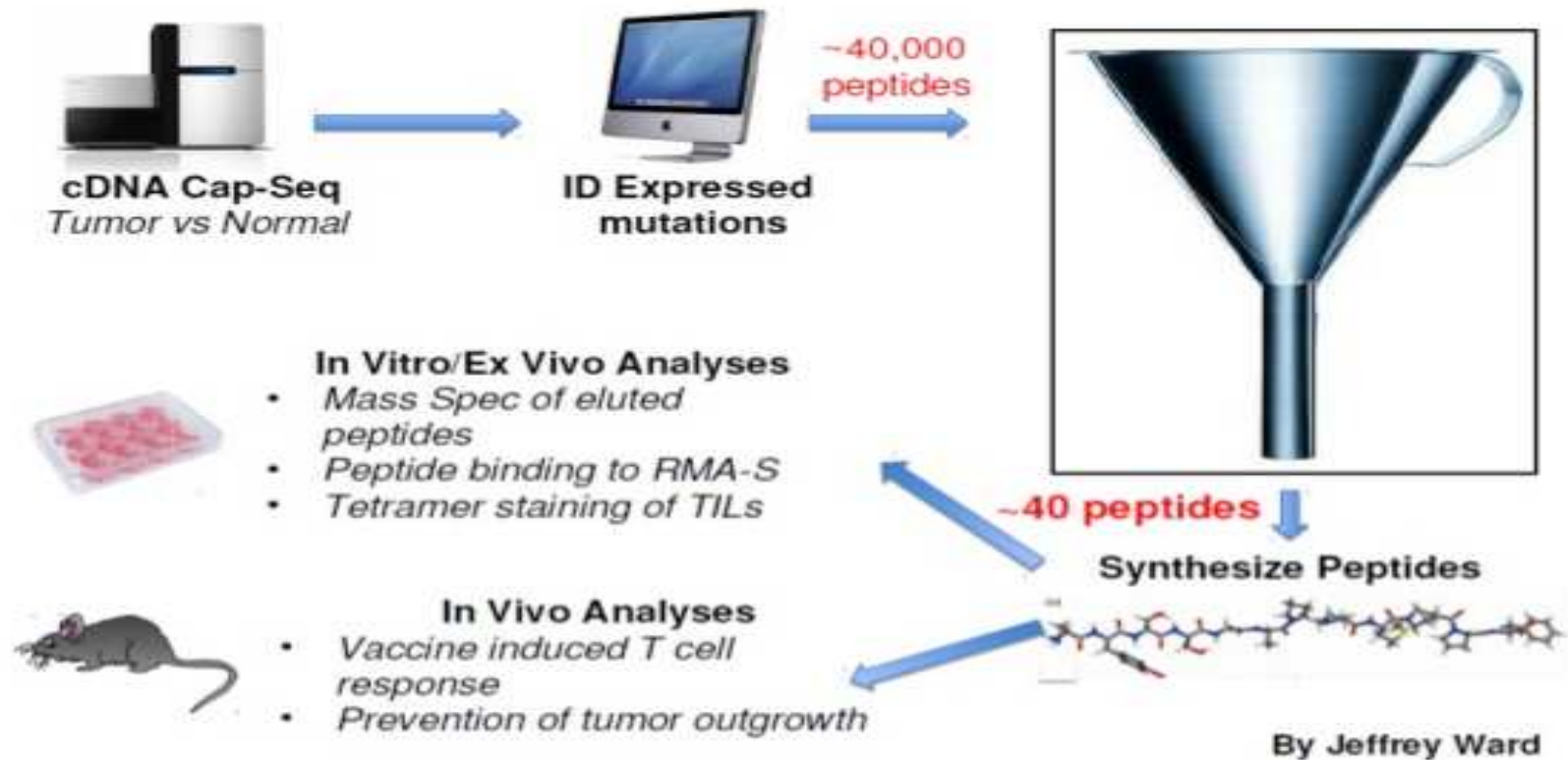
Determine T cell antigen specificities

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# T cell antigen discovery



# Neo-antigens: Personalized Tumor Vaccines



Nature Medicine,  
2013

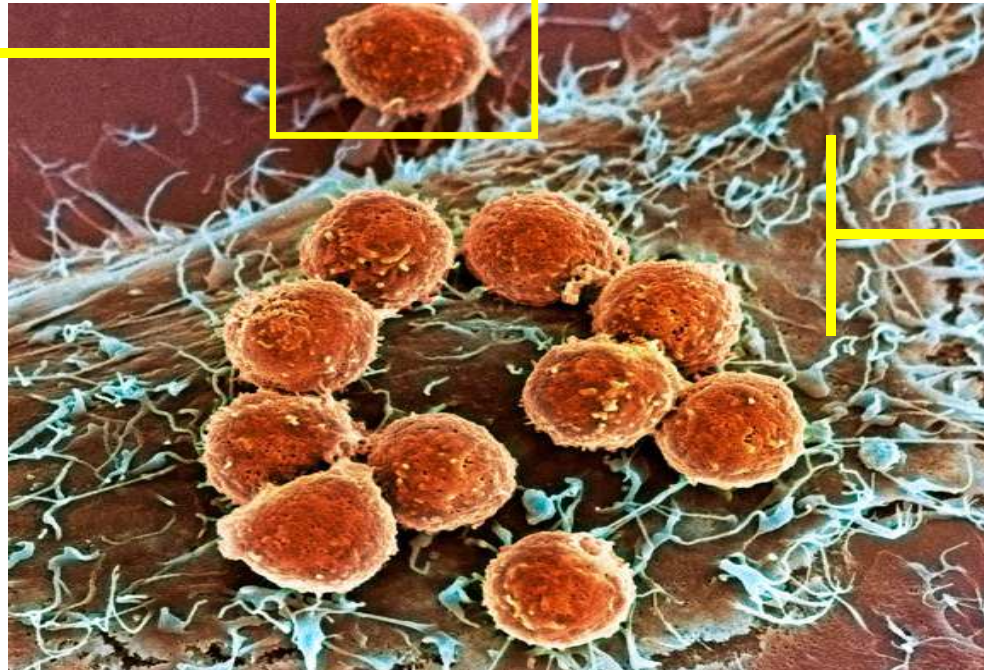


## TCR specificity: Different approaches to the same question

### Begin with T cell

Sequence TCR

Screen Random Libraries



### Begin with tumor

Sequence tumor

Predict Neo-Epitopes

Test Epitopes

#### Pros:

Unbiased method

Let tumor tell us what antigens are relevant

Self-Antigens, CT antigens, Exogenous Antigens

#### Cons:

Peptide Length

MHC restriction

Undercoverage of peptide space

CANNOT DETERMINE A SINGLE ANTIGEN



## TCR sequences isolated from single clones

Patient A (HLA A:02:01/02:01)

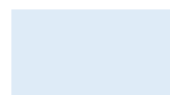


CDR3α	CDR3β	Pair Frequency
CAGGGGADGLTF	CASSLGLEQFF	22
CVVTETNAGKSTF	CASSADTGVNQPQHF	4
CALSEAEAAGNKLTF	CASSLGGGHTEAFF	3
CALSEAGMDSNYQLIW	CASSLVNGLGYTF	3
CAMREGRYSGAGSYQLTF	CATSRDRGQDEKLFF	3
CAVNSGNTGKLIF	CSARDYQGSQPQHF	1
CAVPFLYNQGGKLIF	CSARDYQGSQPQHF	1
CAVGEIVGTASKLTF	CASSYYIKFEQYF	1
CAVNDFNKFYF	CASSADTGVNQPQHF	1

Patient B (HLA A:02:01/02:06)



CDR3α	CDR3β	Pair Frequency
CALMNYGGATNKLIF	CASMGRSYGYTF	9
CAVETSNTGKLIF	CASSQGVGQFKNTQYF	4
CALSAGASGAGSYQLTF	CASSSSGGLVDTQYF	3
CAASSTGNQFYF	CASSLSGRQGGSYEQYF	2
CAVDSGGYNKLIF	CASSIPRGSSQPQHF	1



= CD8<sup>+</sup> PD1<sup>-</sup>



= CD8<sup>+</sup> PD1<sup>+</sup>

CALSEARGGATNKLIF	CASSRDTVNTEAFF	4	CALSEARGGATNKLIF	CASSRDFVSNEQYF	2
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## 3 TCRs converge the HLA\*A2:01 library

### Patient A

5	TRBV7-9	CASSLVNGLGYTF	TRAV19	CALSEAGMDSNYQLIW		TCR 9
4	TRBV10-1	CASSRDTVNTEAFF	TRAV19	CALSEARGGATNKLIF		CD8-1s

### Patient B

1	TRBV10-1	CASSRDFVSNEQYF	TRAV19	CALSEARGGATNKLIF	*	CD8-2s
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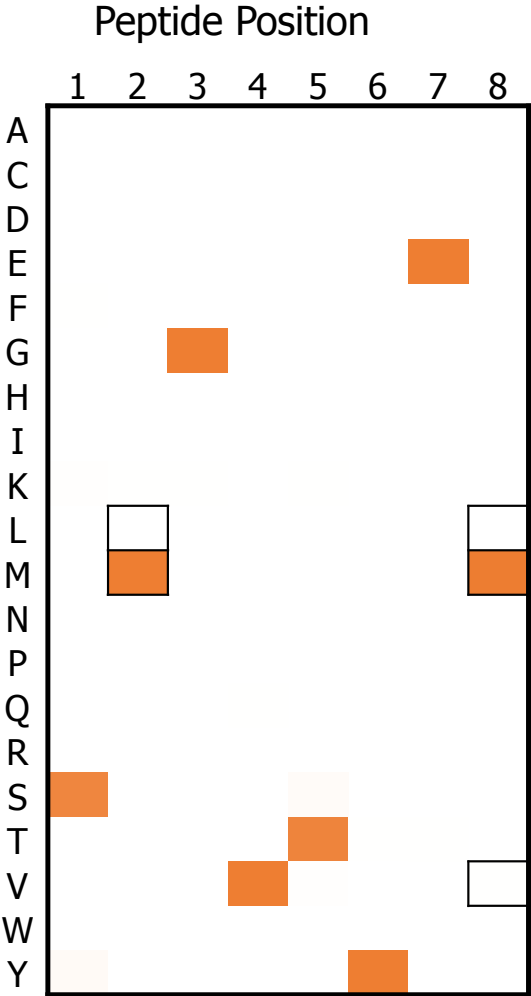
Patient A	C	A	S	S	R	D	T	V	N	T	E	A	F	F
Patient B	C	A	S	S	R	D	F	V	S	N	E	Q	Y	F
				↑	↑	↑		↑		↑				

\* = Shared with Normal Tissue

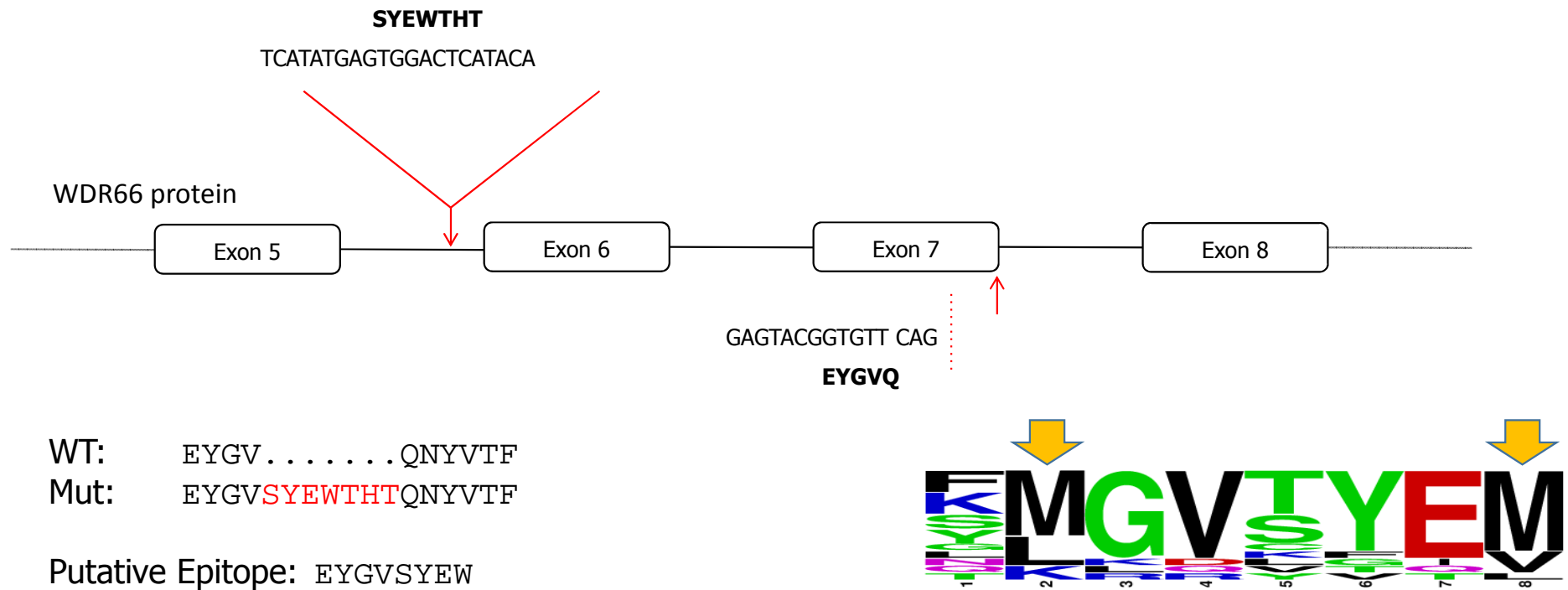
TCR 9



Peptide								Naïve	RD 1	RD 2	RD 3	RD 4
S	M	G	V	T	Y	E	M	0	3	6744	71690	141732
Y	M	G	V	S	Y	E	M	0	0	55	2430	1781
Y	M	G	V	V	Y	E	M	0	1	158	1070	142
K	M	G	V	T	Y	E	M	0	0	9	511	183
K	K	K	Q	K	T	T	V	0	1	100	430	98
F	M	G	V	T	Y	E	M	0	0	18	275	181
F	M	G	V	S	Y	E	M	0	0	5	165	60
G	L	G	V	S	Y	E	M	0	0	4	152	62
N	L	G	V	S	Y	E	M	0	0	4	93	13
T	L	G	V	T	Y	E	M	0	0	3	74	0
K	M	G	V	L	Y	E	M	0	0	3	61	88
Q	L	R	R	C	V	I	L	0	3	225	60	89
L	K	L	D	Y	G	Q	M	0	2	160	34	43
F	M	G	V	T	Y	E	V	0	0	0	19	176
S	M	G	V	T	F	E	V	0	0	8	14	0



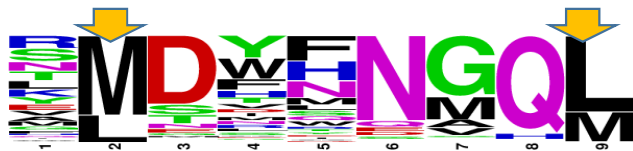
## Exome sequencing results reveal putative epitope for TCR 9



## TCRs isolated from Patient A and Patient B share peptide motif

### CD8-1s TCR

Peptide	Naïve	RD 1	RD 2	RD 3	RD 4
L M D M H N G Q L	0	16	10775	20608	39700
R L D A M N G Q L	0	7	6484	11464	807
R M D Y N N M Q M	0	3	3656	8193	5229
S M D T F Q G Q M	0	7	4053	6926	1074
G M D Y H N G H L	0	3	3518	6103	217
Y L D F H N G Q L	0	7	3341	6022	19091
L M D Y T N M Q L	0	5	2536	4742	186
N L D W A N V Q L	0	4	2359	4702	150
M M D L H N G Q L	0	3	2271	4439	21190
K M D Y H E G Q L	0	1	2256	4434	410
T L D G F N G Q M	0	1	2177	3982	359
V M S H F E G Q L	0	1	2388	3830	376
A M D Y L N A Q L	0	4	1911	3440	215
Q L D W N N M Q M	0	8	1726	3433	102
R M G Y H N G Q L	0	2	2010	3261	367



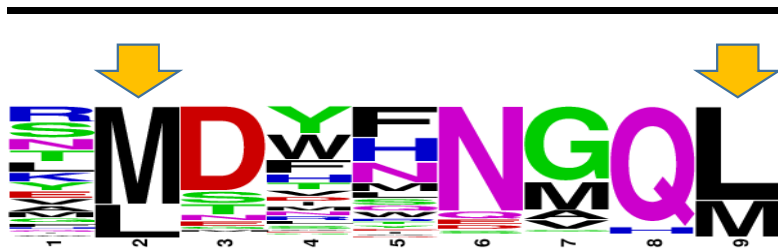
### CD8-2s TCR

Peptide	Naïve	RD 1	RD 2	RD 3	RD 4
T M D F Y Q G Q L	0	0	2185	105899	170631
K M D Y F S G Q L	0	0	2214	83644	22803
S M D W F Q G Q M	0	0	894	50234	137230
L M D Y W Q G Q L	0	0	1104	31733	14304
N M M W F Q G Q L	0	0	352	8382	1456
K M H W F N G Q L	0	0	397	7366	451
T M D Y W Q G H L	0	0	332	6050	309
R M D R F N G Q L	0	0	591	5962	199
S M D T F Q G Q M	0	0	604	5601	197
V M S H F E G Q L	0	0	376	4065	83
L M D Y T N M Q L	0	0	322	2750	68
K M D Y H I G Q M	0	0	226	2403	83
V M D H F Q A Q L	0	0	170	1975	69
N M G F E N M Q L	0	0	132	1144	22
Y L D H K T L R L	0	15	866	881	285

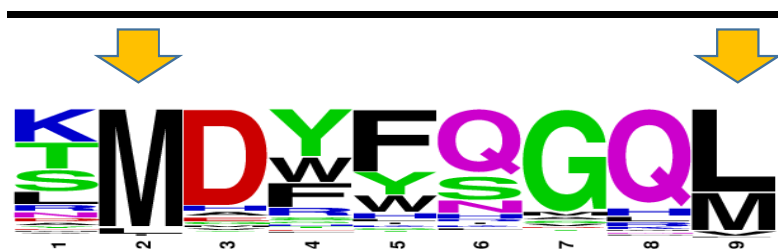


## CD8-1s and CD8-2s share a common prediction: wild-type MED23

CD8-1s TCR



CD8-2s TCR



MED23 = Mediator of RNA polymerase II transcription subunit 23

TLHYEYEMHL

Role in Ras-active lung cancer

Yang X et al. PNAS. (2012)

Role in tumorigenesis for hepatocellular carcinoma.

Guo Y et al. J Gastroenterol Hepatol. (2015)

Role in esophageal squamous cell carcinoma.

Shi J et al. Mol Carcinogenesis. (2014)

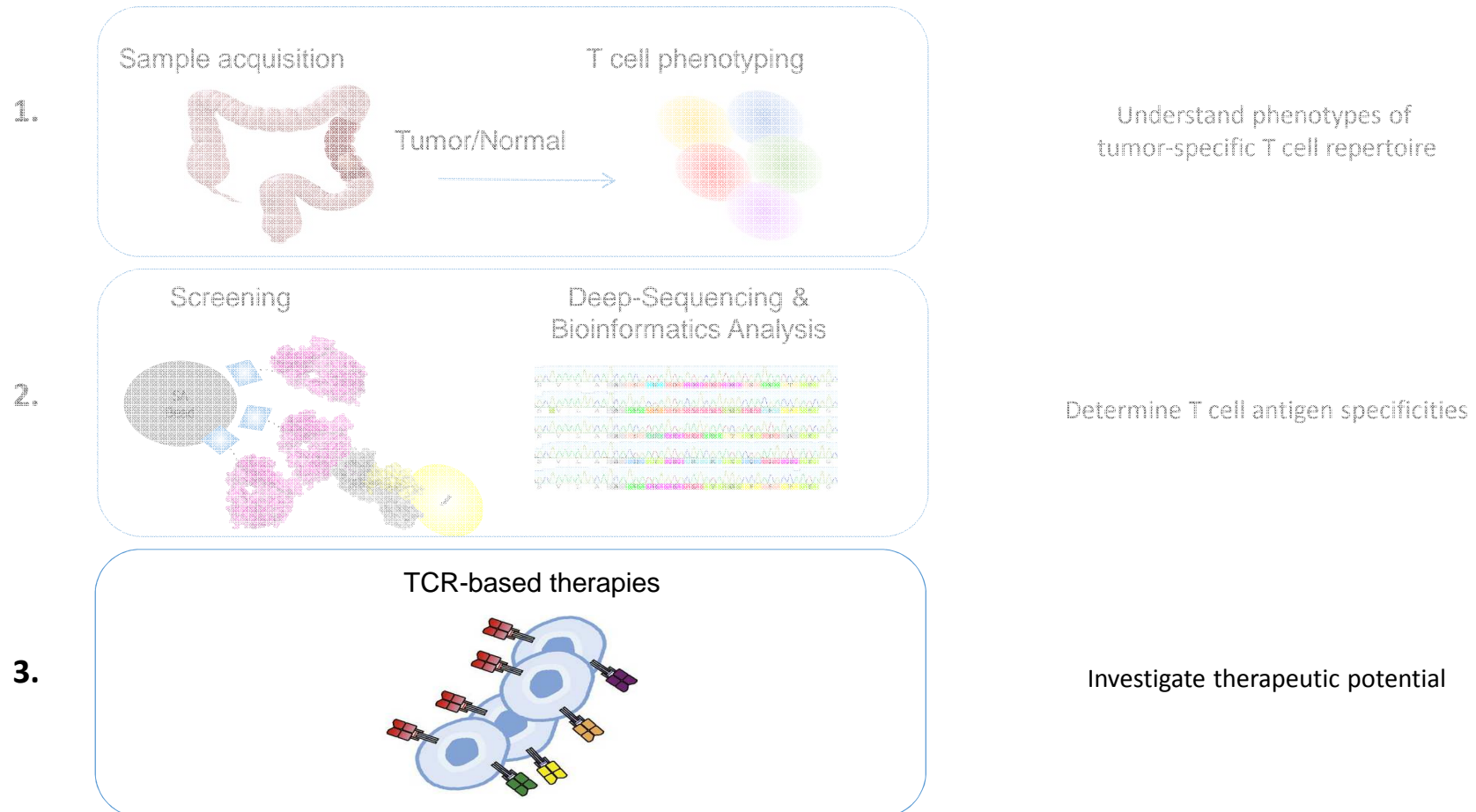
Putative role in colorectal cancer

Jo YS et al. Pathol. Oncol. Res. (2015)



## Future Directions: Antigens driving T cells in colorectal cancer

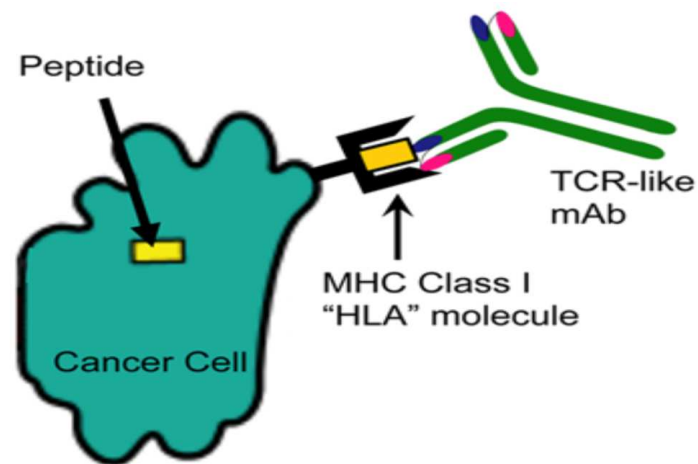
- Link antigen specificities to T cell phenotypic profiles
- Can we find common TCR motifs or specificities across different patients?
- Systematic identification of tumor antigens in mouse models



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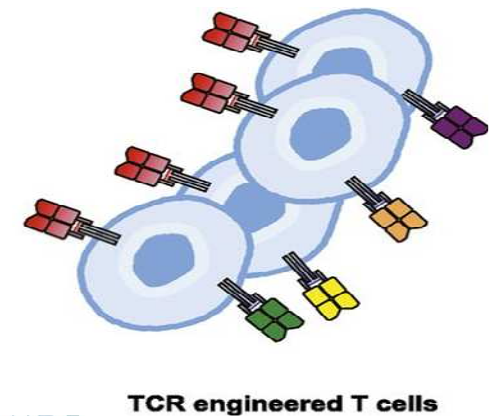
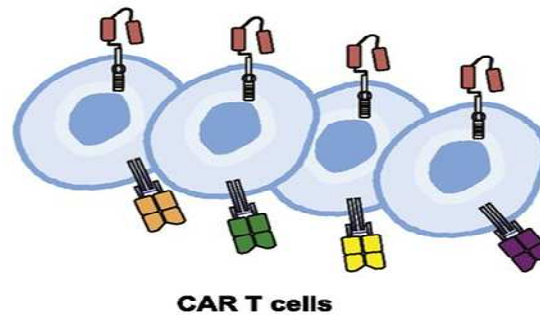
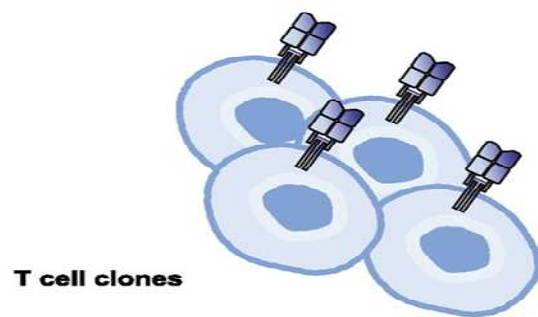
## Future Directions: Therapeutic Implications

### 1. TCR mimic antibodies



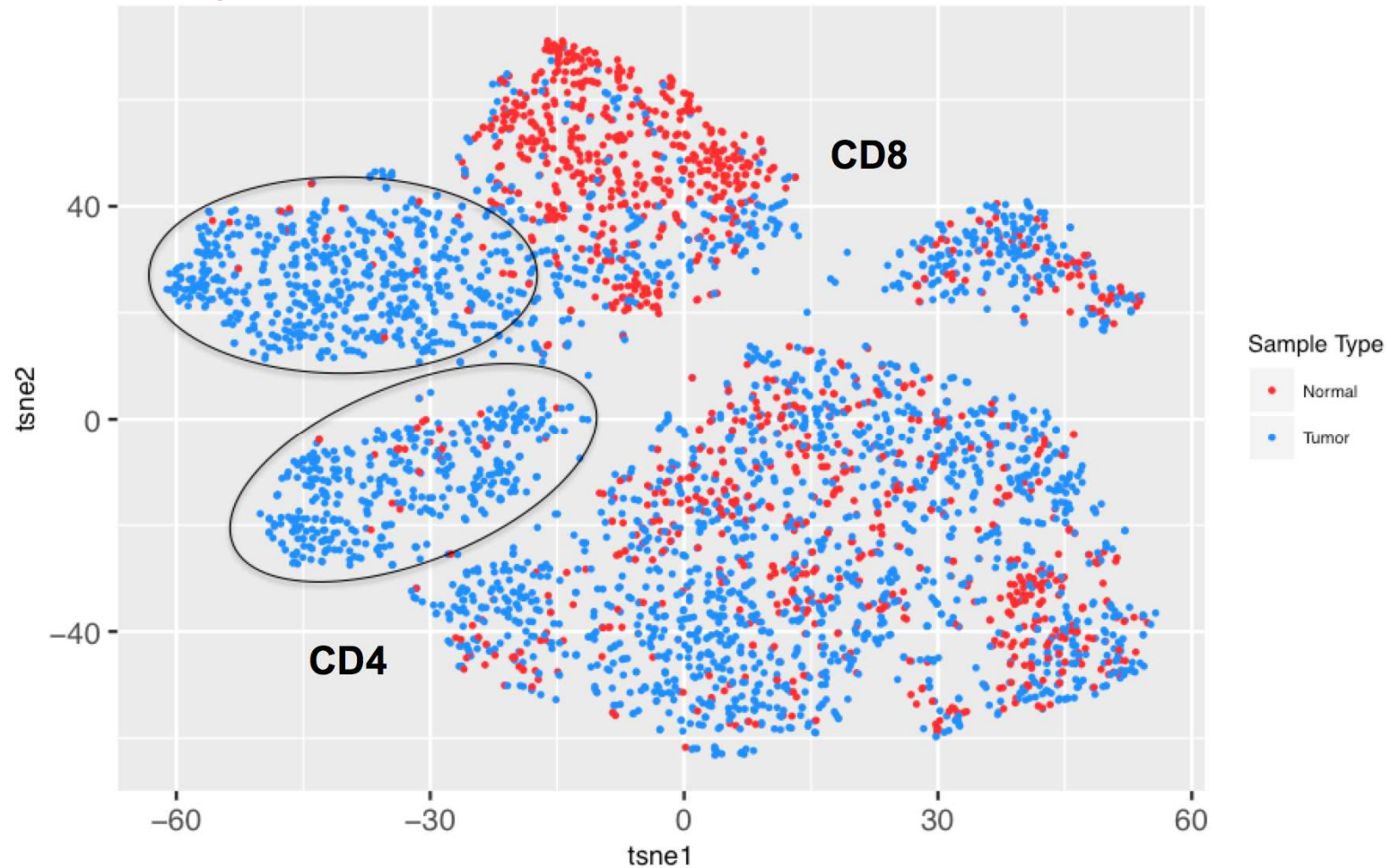
Scheinberg,  
2013

### 2. Adoptive transfer of TCR engineered T cells



Maus,  
2014

## Therapeutically Relevant TIL TCRs





Davis Lab  
Mark Davis  
Trevor Hinshaw  
Leo Hansmann  
Jake Glanville

Garcia Lab  
K. Christopher Garcia  
Marvin Gee  
Michael Birnbaum  
Suzanne Fisher  
Juan Mendoza



Quake Lab  
Stephen Quake  
John Beausang

Khatri Lab  
Purvesh Khatri  
Shane Lofgren

