

# ***Old and Emergent Players in Human Autoimmunity: Lessons from Patient Immune Profiling***

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# Disclosures

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# Two Ends of an Immune Spectrum

*Inappropriate recognition of our own cells/tissues*



## CPI Induce Immune-related Adverse Events (IrAEs)

- **Common and typically mild, but can be severe/fatal**  
*Vitiligo, colitis, endocrinopathies...*
- **Mainly “Organ-Specific” rather than “Systemic”**
- **More common with CTLA-4 than with PD1 blockade**
- **Tend to improve with treatment interruption**  
*Corticosteroids, anti-TNF, anti-IL6, switch from CTLA-4 to PD1 blockade*

# Opportunities

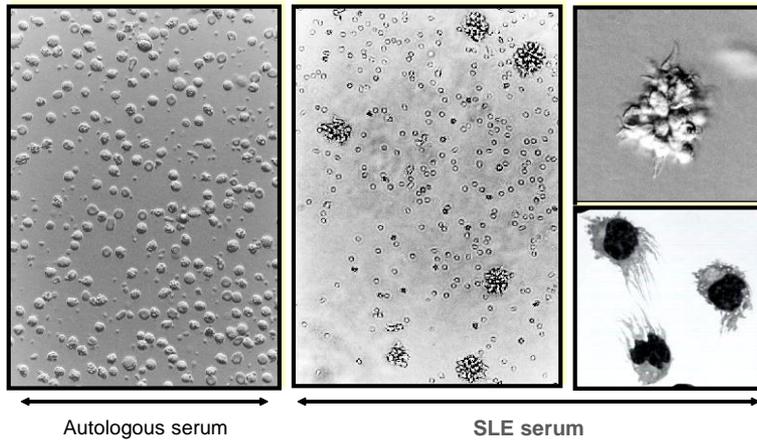
- Improve our understanding of cancer immunology
- Improve our understanding of mechanisms leading to inflammation/autoimmunity
- New therapeutic strategies

# *SLE*

- *Breakdown of Tolerance to Nucleic Acids*
  - *Tremendous clinical heterogeneity*

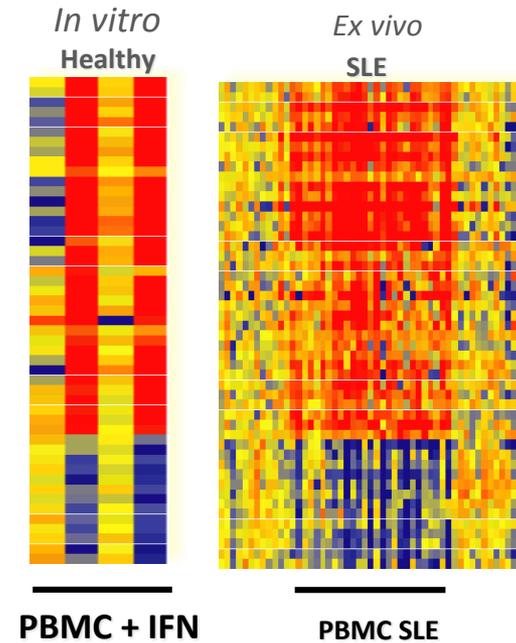
# Monocytes differentiate into dendritic cells when exposed to SLE serum

*This effect is Type I IFN-dependent*



Blanco et al. *Science*. 2001;294(5546):1540-3

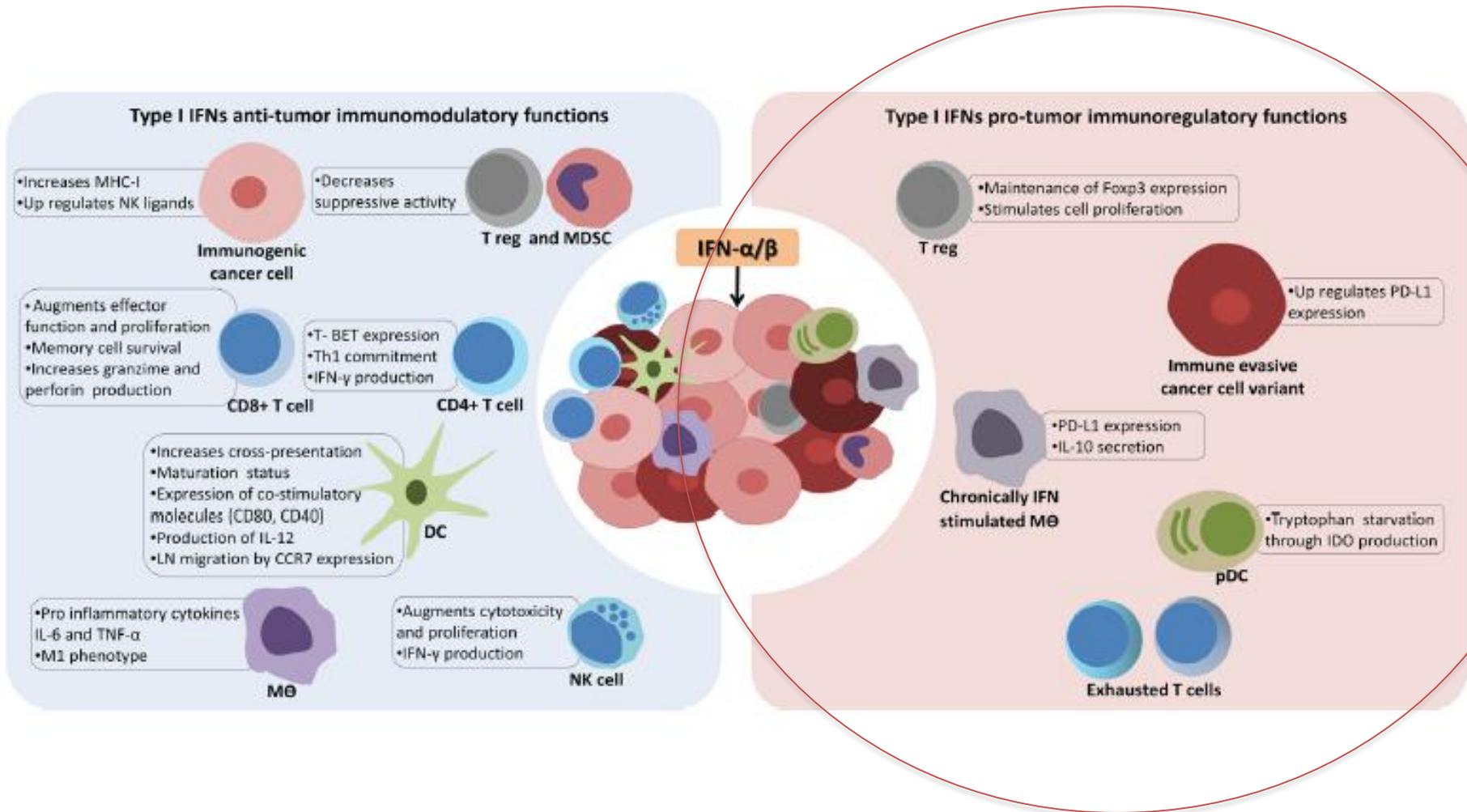
# A Blood IFN Signature is detected in the majority of patients



Bennett et al. *J Exp Med* 2003



# The complex and context-dependent role of Interferon in cancer immunity



# The Growing Spectrum of Autoimmune “Interferonopathies”

**SLE**

**Sjögren’s**

**Dermatomyositis  
Polymyositis**

**Systemic Sclerosis  
Blood**

**Subset of Rheumatoid Arthritis**

**Type I IFN**

**Monogenic  
Interferonopathies**

AGS (*TREX1*<sup>+</sup>) \*

SPENCD (*TRAP*) \*\*\*

*ISG15* Deficiency

*USP18* Deficiency

*ADA2* Deficiency

CANDLE (*PSM8*)

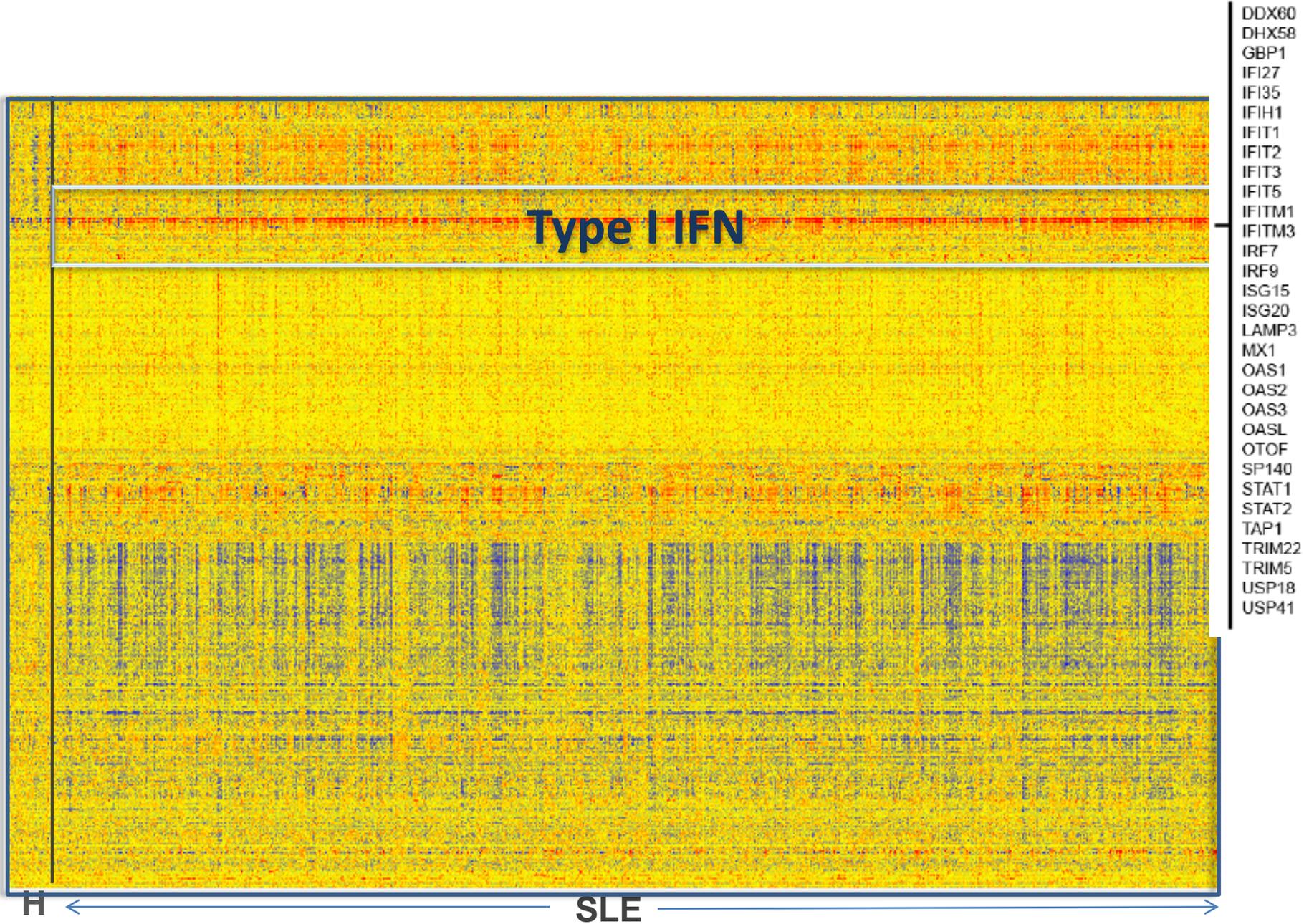
SAVI (*TMEM173*/STING)

**Thyroiditis**

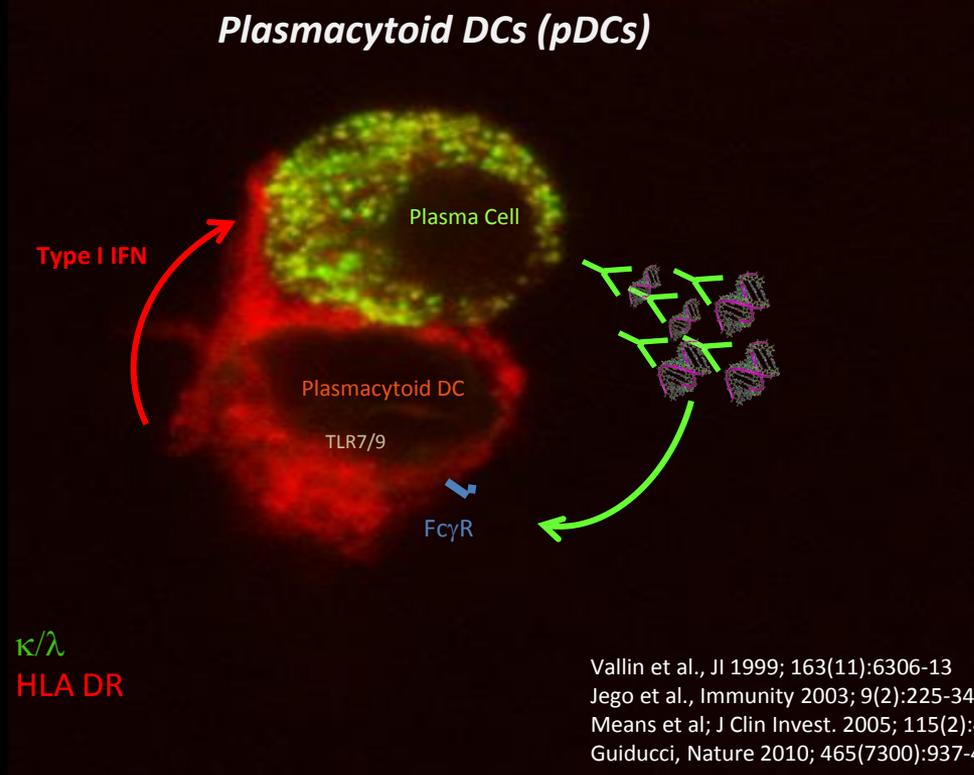
**Type I Diabetes**

# Scanning 960 pediatric SLE blood samples highlights the IFN signature prevalence

PALO\_50std (18,737 Transcripts)

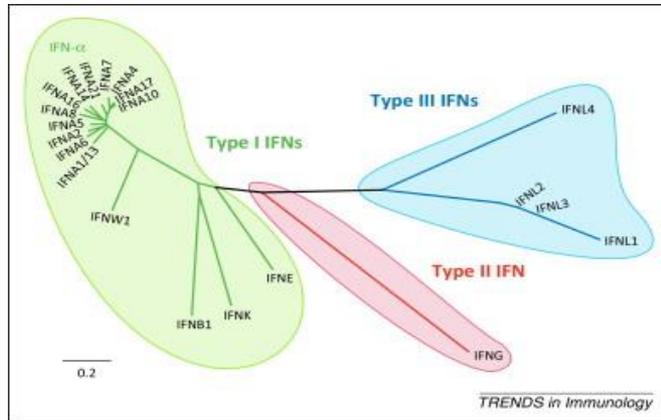


***A self amplifying SLE pathogenic loop  
through autoantibodies and endosomal Nucleic Acid sensing by  
Plasmacytoid DCs (pDCs)***



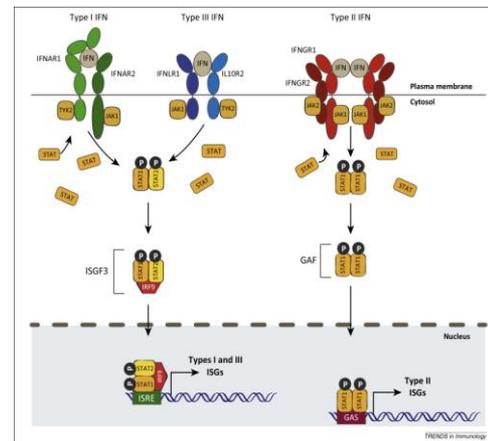
*The origin of the Interferon signature and the role of IFN in non-familial SLE is NOT resolved yet*

Endosomal/Cytosolic NA Sensors



There are 21 IFN proteins belonging to 3 IFN families

Professional/Non Professional IFN-producing Cells

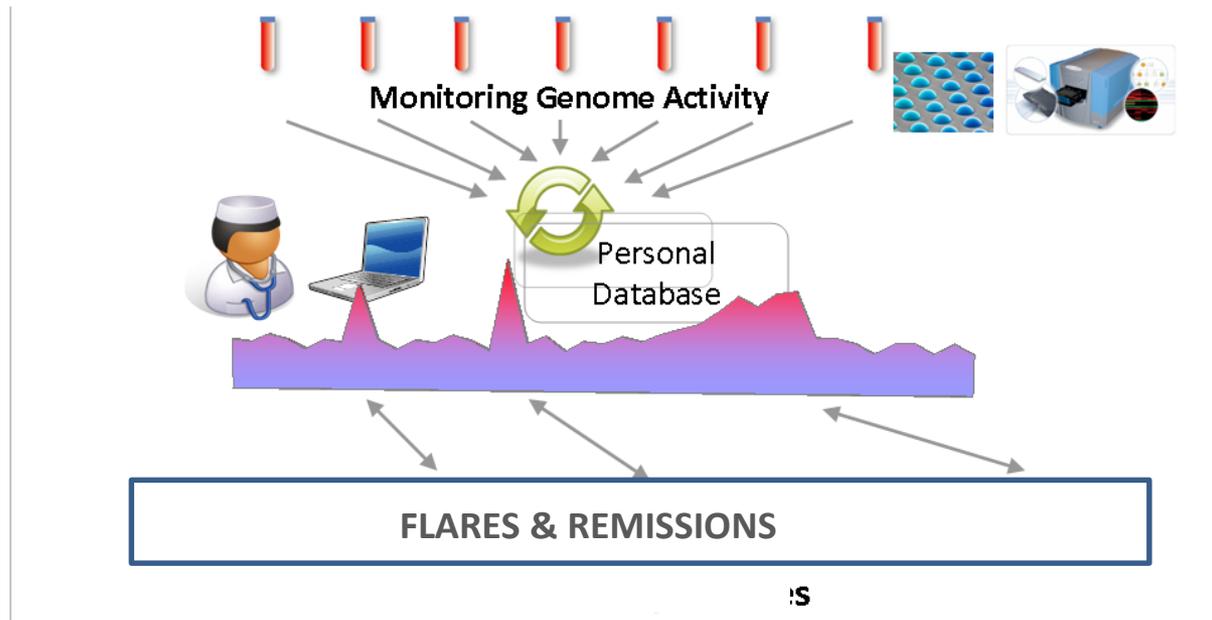


Hans-Heinrich Hoffmann, William M. Schneider, Charles M. Rice.

- *IFN is not alone in SLE*

# LONGITUDINAL STUDIES TO UNDERSTAND PATHOGENESIS OF ACTIVE SLE and IDENTIFY BIOMARKERS

~500 children with SLE followed from 1-15 years every 2-3 months

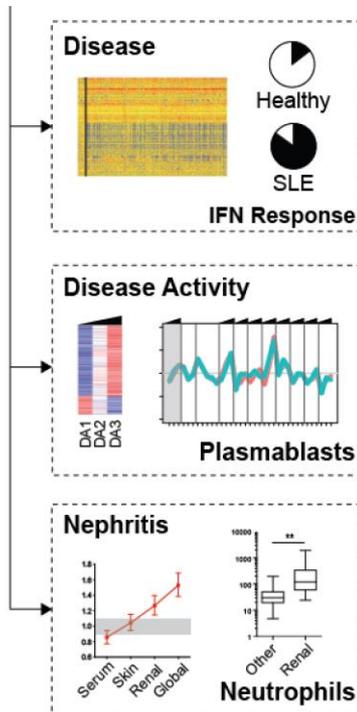
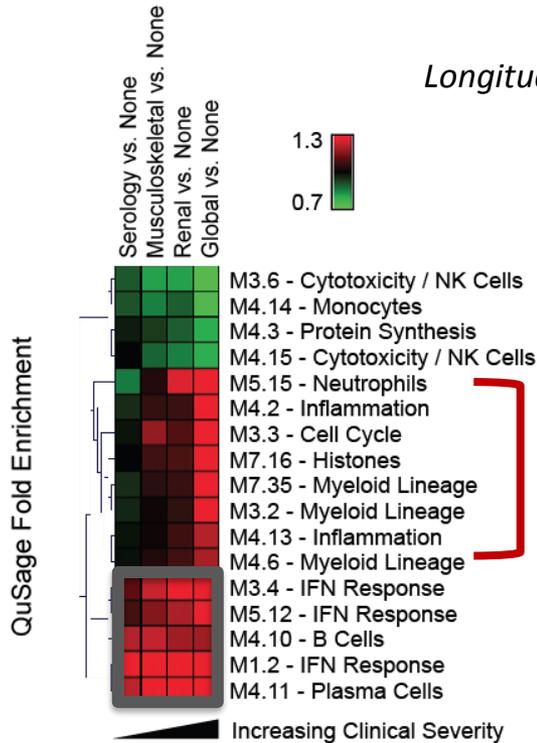


BIIR

# LESSONS FROM LONGITUDINAL MONITORING OF PEDIATRIC SLE PATIENTS



Longitudinal Follow Up of 158 Children with SLE for up to 4 years

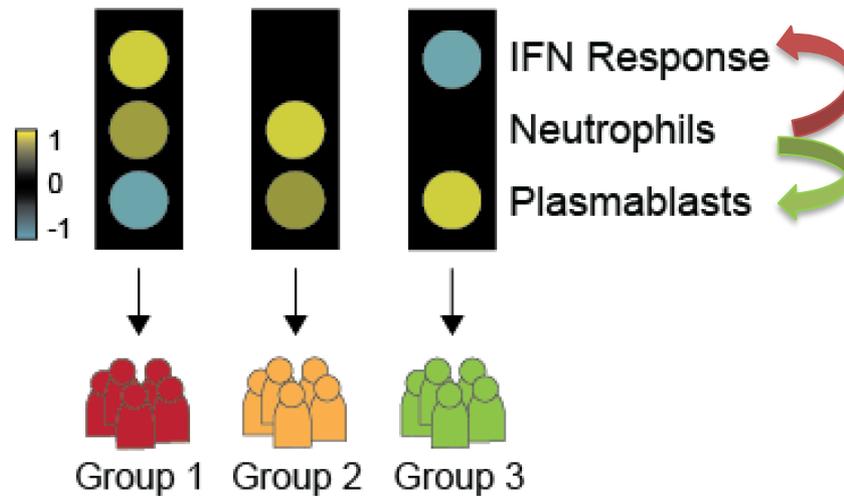


*An IFN response is detected in 85% of patients*

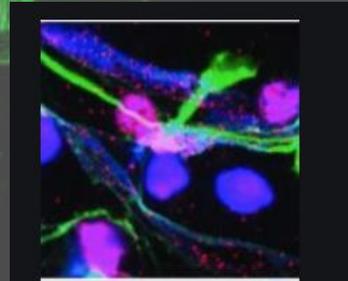
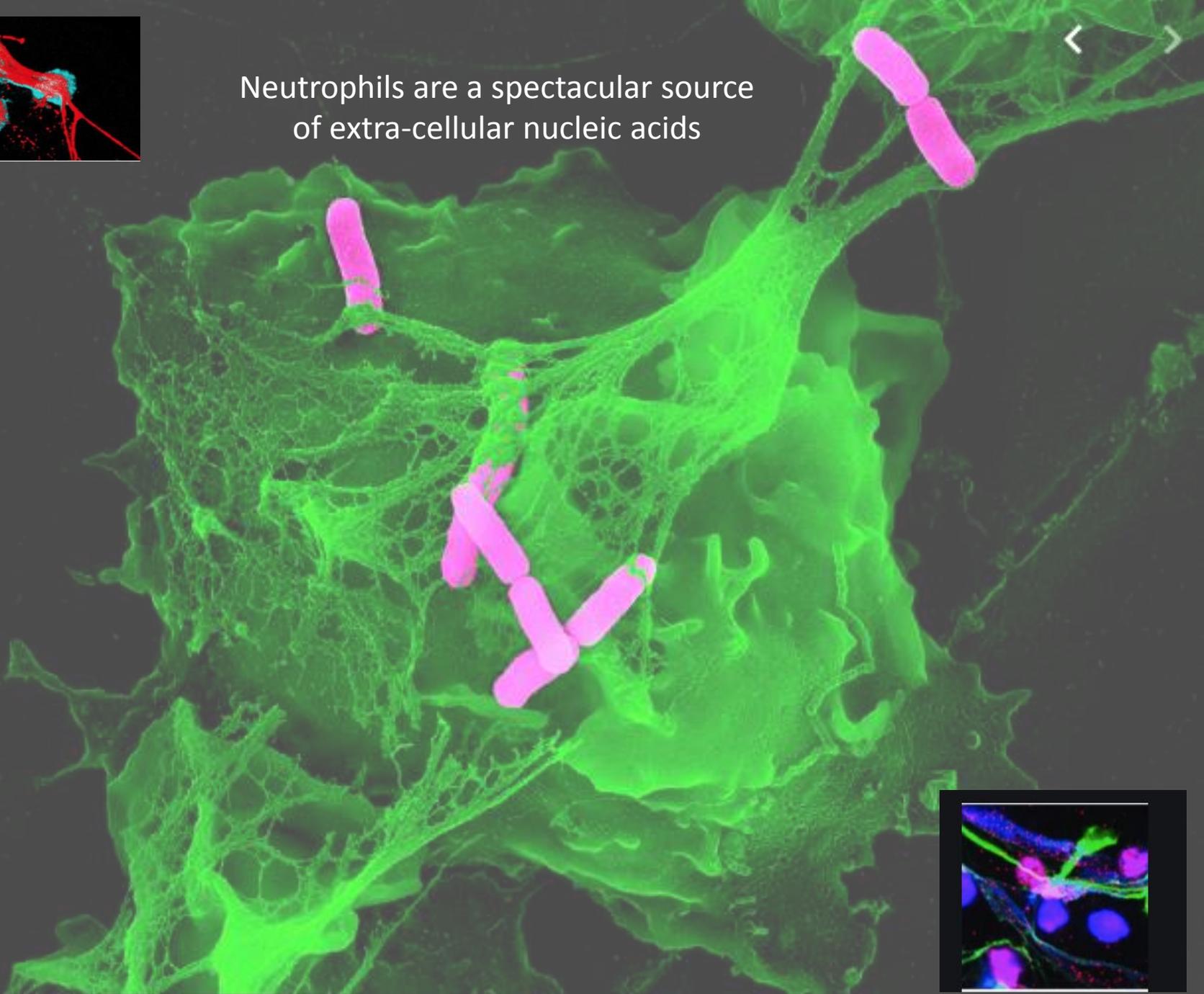
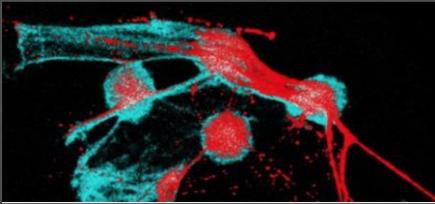
*A plasmablast signature correlates with disease activity, especially in African American patients*

*A neutrophil signature appears with nephritis*

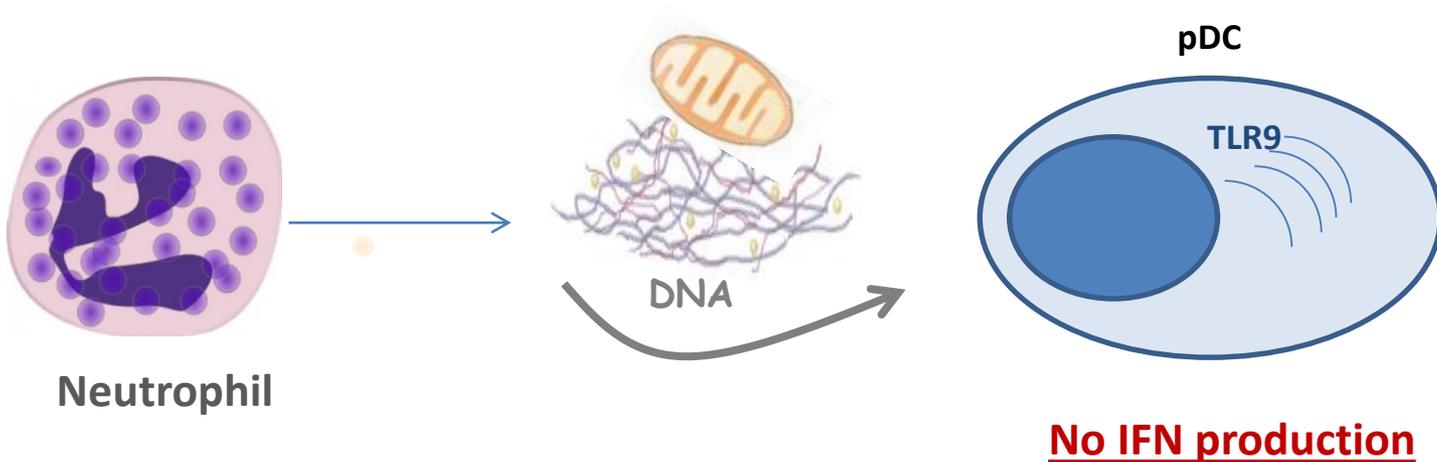
## Longitudinal profiling of INDIVIDUAL SLE PATIENTS reveals molecular heterogeneity in signatures that correlate with DISEASE ACTIVITY



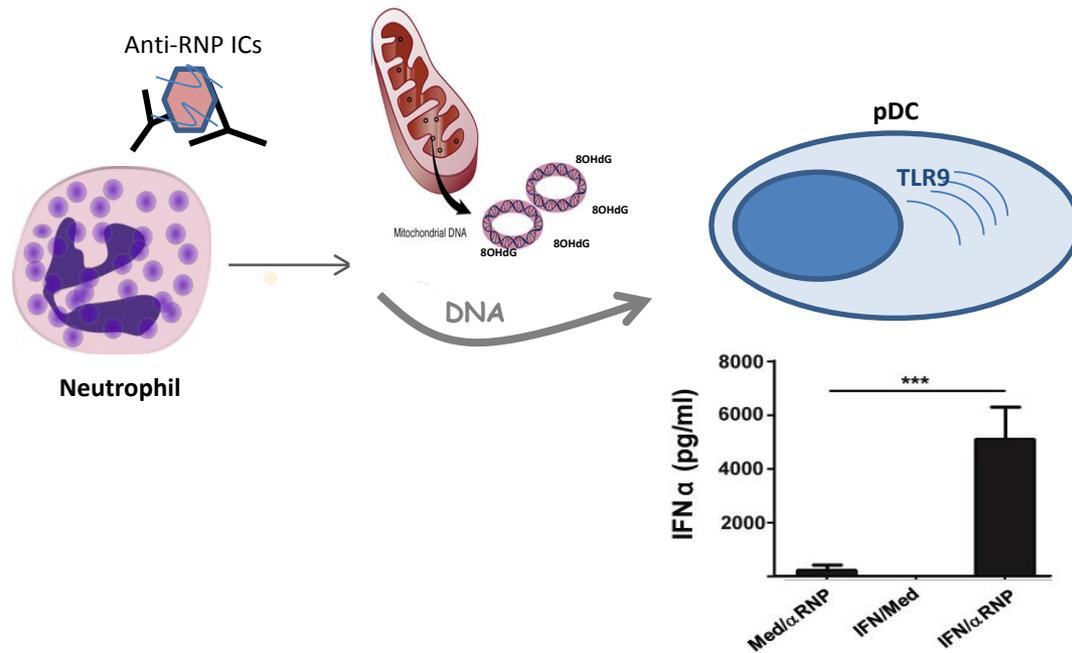
Neutrophils are a spectacular source  
of extra-cellular nucleic acids



## Live Human Neutrophils Release Inert Mitochondrial DNA-Protein Complexes in the Steady State

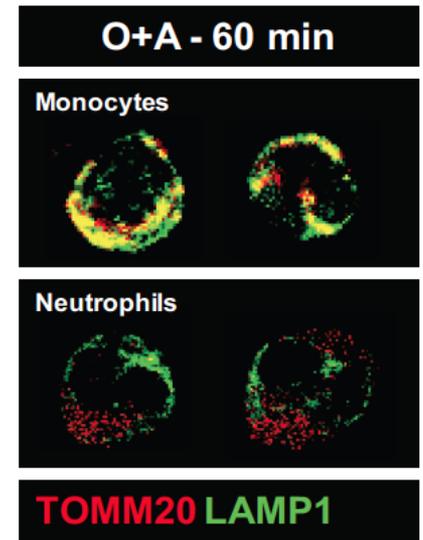


# Lupus Neutrophils Exposed to SLE Anti-RNP Immune Complexes Release Interferogenic DNA

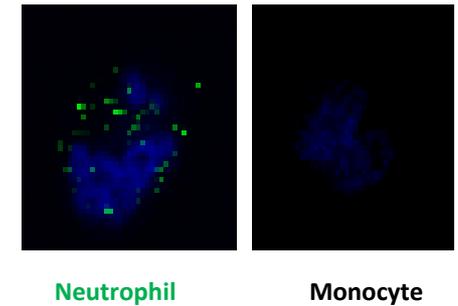


Caielli et al; J Exp Med, 2016; 213(5):697-713

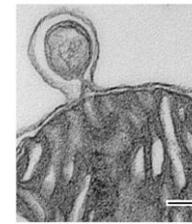
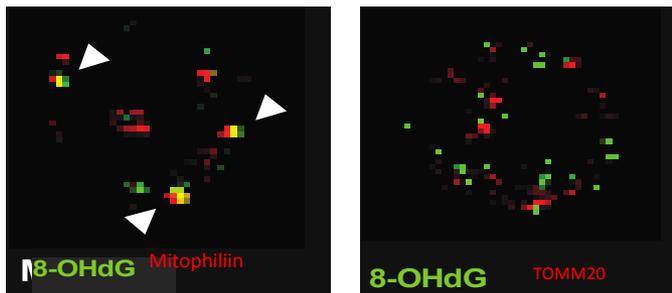
1. Healthy human neutrophils do not complete Mitophagy



2. The cytosol of healthy neutrophils is loaded with Oxidized Mitochondrial DNA routed for lysosomal degradation

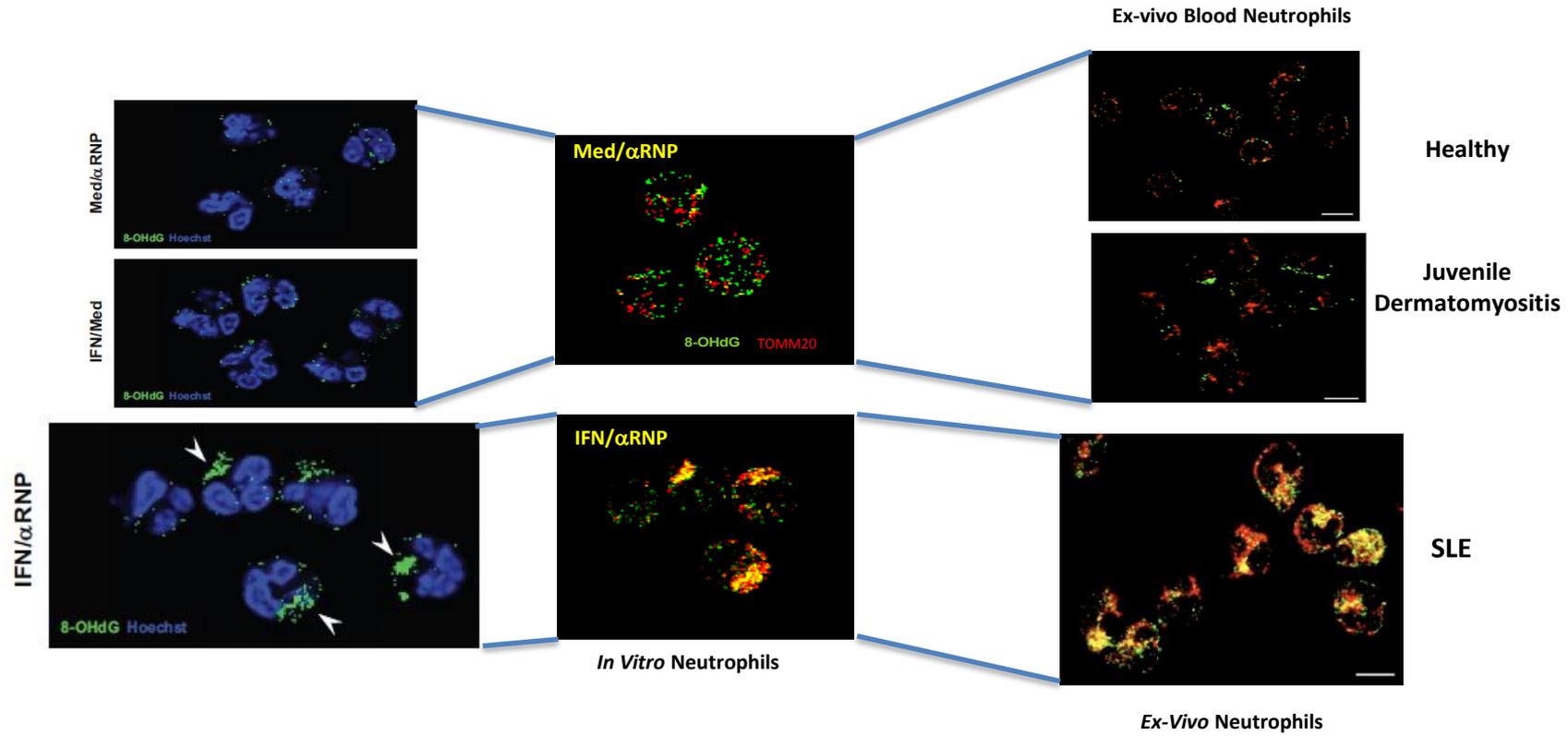


Neutrophil cytoplasmic vesicles display cargo selectivity



*Curr Biol.* 2012  
A vesicular transport pathway shuttles cargo from mitochondria to lysosomes.  
*Soubannier et al.*

“Lupus-like” activation (IFN and TLR7/8-agonistic autoantibodies) increases the load and mitochondrial retention of oxidized mtDNA



Caielli et al; J Exp Med, 2016; 213(5):697-713

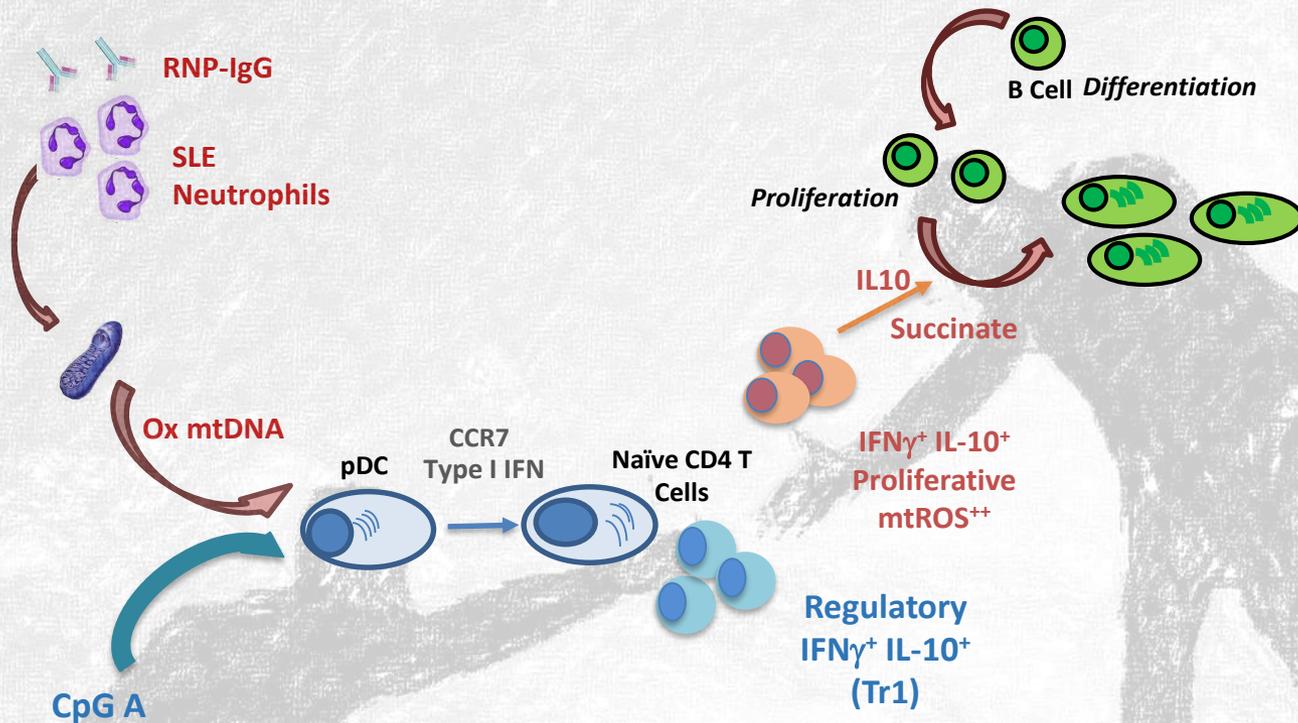
**SLE autoantibodies + INTERFERON**

**INTERFEROGENIC DNA**

**Simone Caielli**



The identification of a neutrophil signature led to the elucidation of novel human neutrophil biology and the discovery of novel adaptive immunity pathways in human SLE

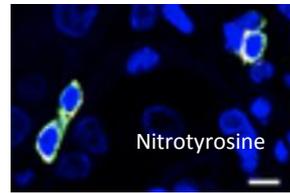
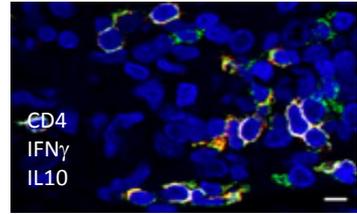
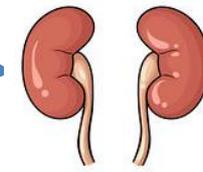
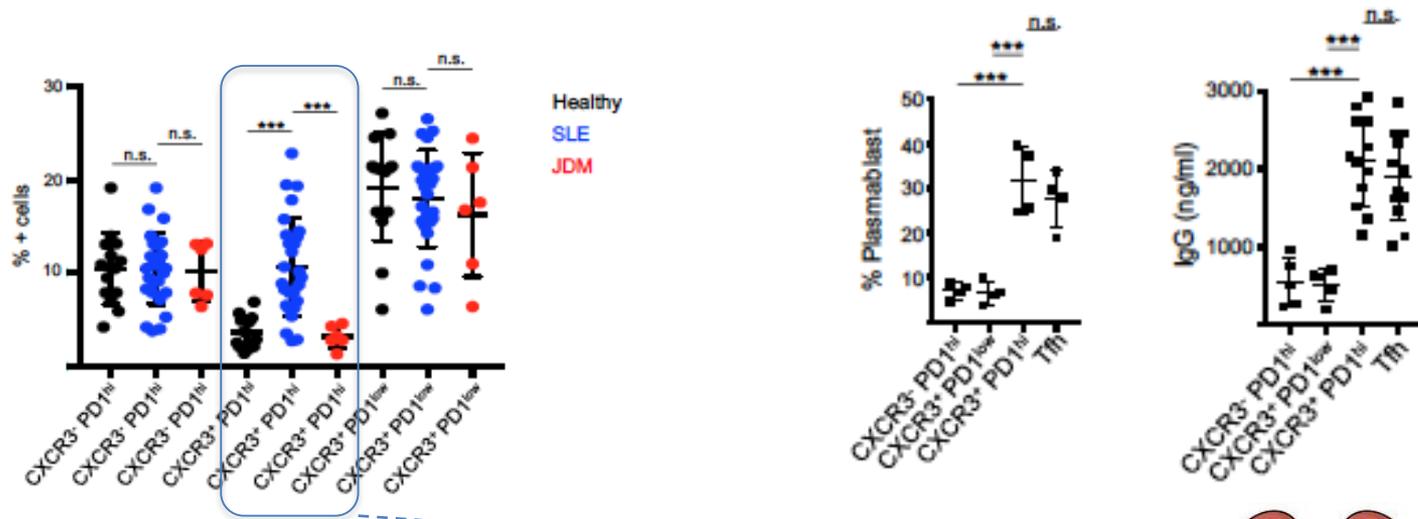


*As opposed to Tr1 cells, CD4+ T cells exposed to Ox mtDNA-activated pDCs:*

- Are not anergic
- Acquire a Th1-like phenotype characterized by high expression of IFN $\gamma$  and **IL10**
- Express high levels of **PD1**
- Accumulate **Succinate** and undergo RET; RET generates high amounts of **ROS**
- *Help B cells independently of IL21 through IL10 + Succinate*

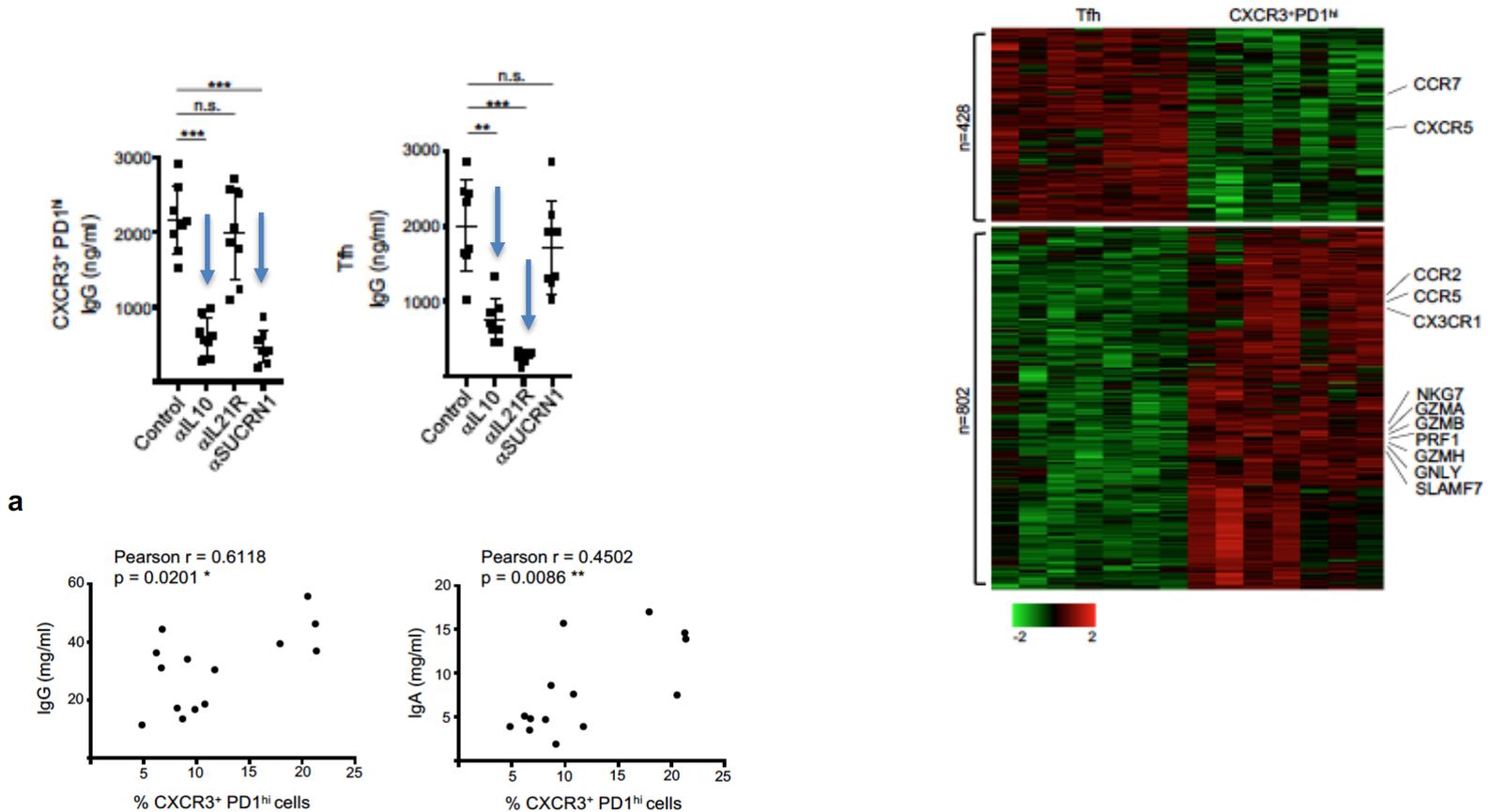
*Are these cells relevant to Patients?*

# A distinct CXCR5<sup>-</sup> CXCR3<sup>+</sup> PD1<sup>+</sup> CD4<sup>+</sup> T helper cell subset sharing the features of Ox mtDNA CD4<sup>+</sup> T cells is expanded in SLE blood



Caielli et al., Nat Med 2019

# SLE blood CXCR3+ PD1+CD4+ T cells help as efficiently as Tfh but through a distinct mechanism



*Role in other immune/autoimmune responses?*

# The Expanding Spectrum of Disease-Associated T helper Cells

## $T_{PH}$ HELP IN RHEUMATOID ARTHRITIS

”Like PD-1<sup>hi</sup>CXCR5<sup>+</sup> T follicular helper cells,  $T_{PH}$  (CXCR5<sup>-</sup> PD1<sup>hi</sup> CD4<sup>+</sup> T cells) induce plasma cell differentiation in vitro through **IL-21** secretion and SLAMF5 interaction”

nature  
medicine

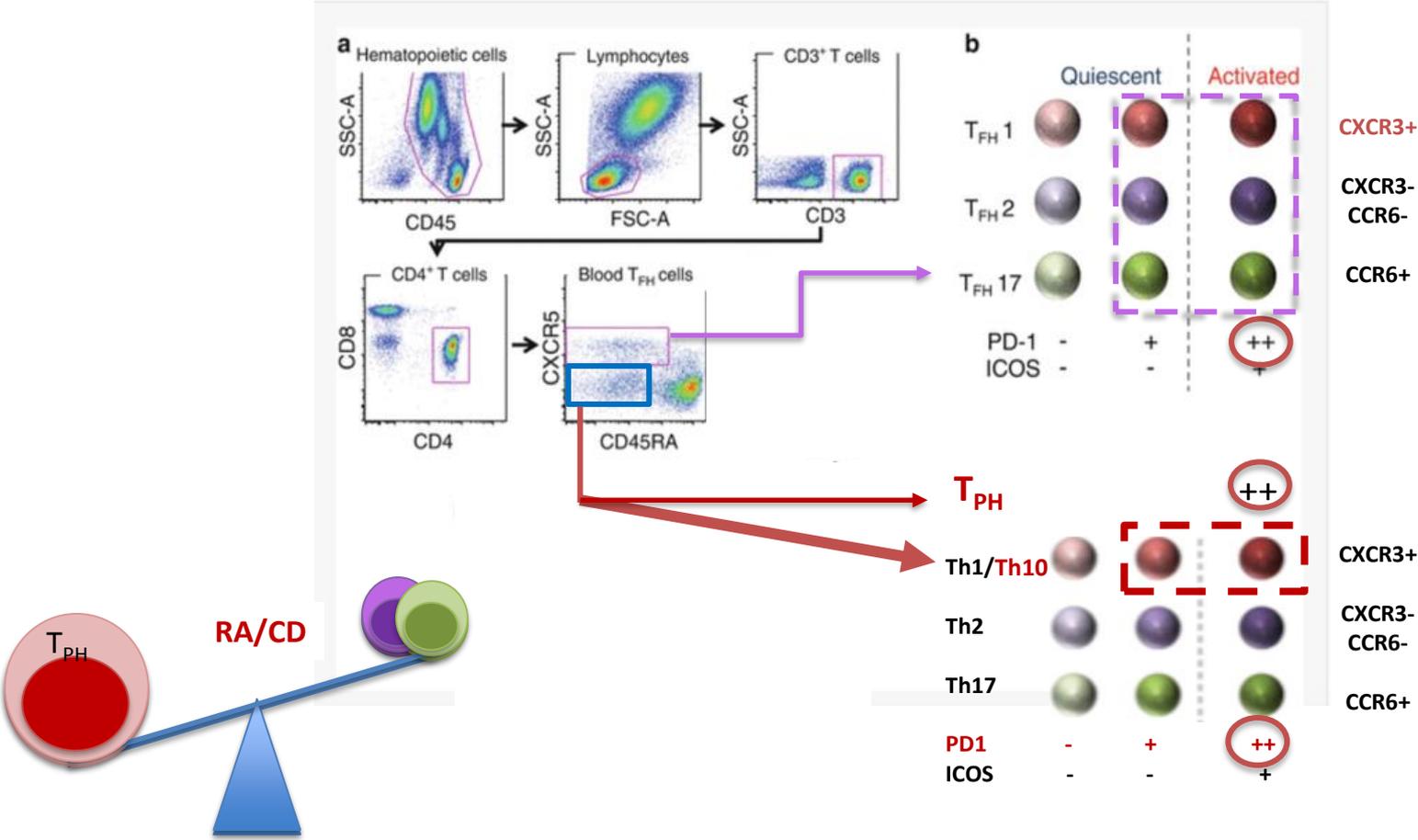
BRIEF COMMUNICATION

<https://doi.org/10.1038/s41591-019-0403-9>

## Distinct phenotype of CD4<sup>+</sup> T cells driving celiac disease identified in multiple autoimmune conditions

Asbjørn Christophersen<sup>1,2,3,4</sup>, Eivind G. Lund <sup>1,2,3,14</sup>, Omri Snir<sup>1,2,3,14</sup>, Elsa Solà<sup>4,5</sup>, Chakravarthi Kanduri<sup>1,6</sup>, Shiva Dahal-Koirala<sup>1,2,3</sup>, Stephanie Zühlke<sup>1,2,3</sup>, Øyvind Molberg<sup>2,7</sup>, Paul J. Utz<sup>4</sup>, Mina Rohani-Pichavant<sup>4</sup>, Julia F. Simard<sup>8</sup>, Cornelia L. Dekker <sup>9</sup>, Knut E. A. Lundin<sup>1,2,10</sup>, Ludvig M. Sollid <sup>1,2,3,11,15\*</sup> and Mark M. Davis <sup>4,12,13,15\*</sup>

# The expanding SLE CD4<sup>+</sup> T cell helper landscape in human autoimmunity



## Acknowledgements

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Research

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- Natalie Rosenwasser
- Nadine Saad
- Jacob Spitznagle

## Patients/Families

Baylor Scott & White System

## Lessons Learned

*Transcriptional studies point towards new targets in SLE:*

*Neutrophils,  
Mitochondrial Dysfunction  
Extra-cellular Nucleic Acids...*

*Combination Therapies with  
DNases/RNases?*

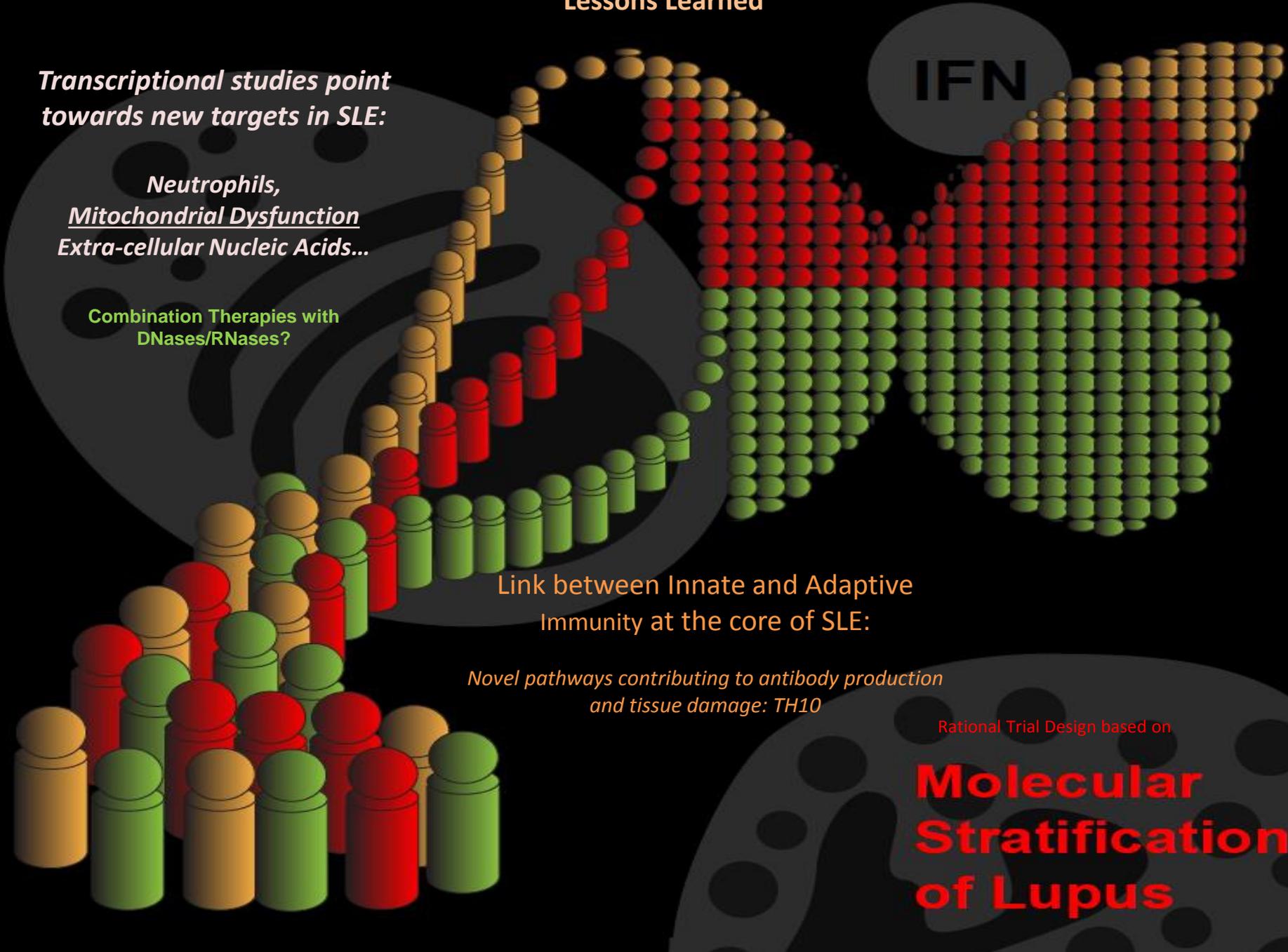
**IFN**

*Link between Innate and Adaptive  
Immunity at the core of SLE:*

*Novel pathways contributing to antibody production  
and tissue damage: TH10*

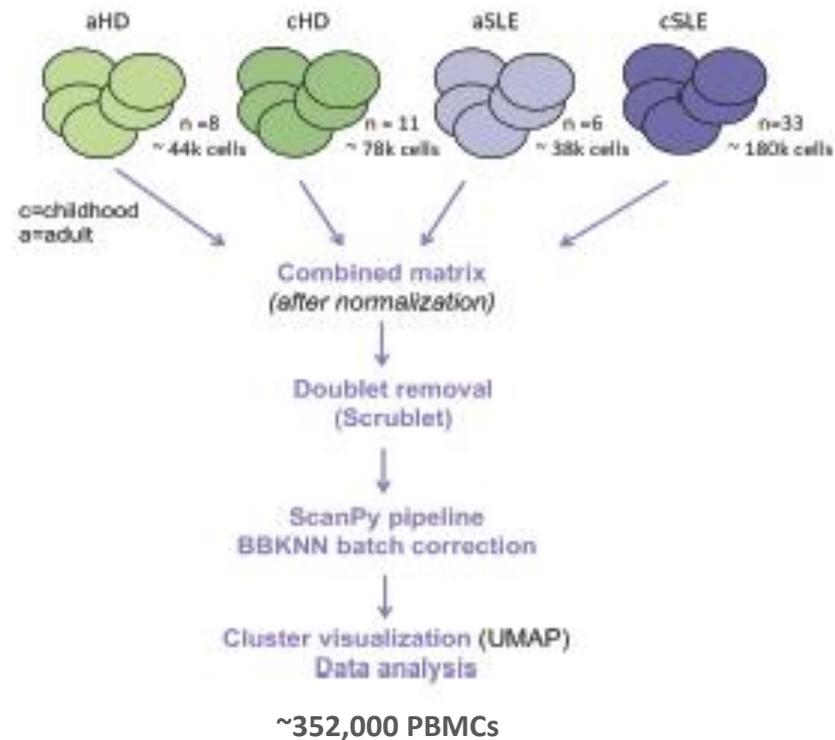
*Rational Trial Design based on*

**Molecular  
Stratification  
of Lupus**



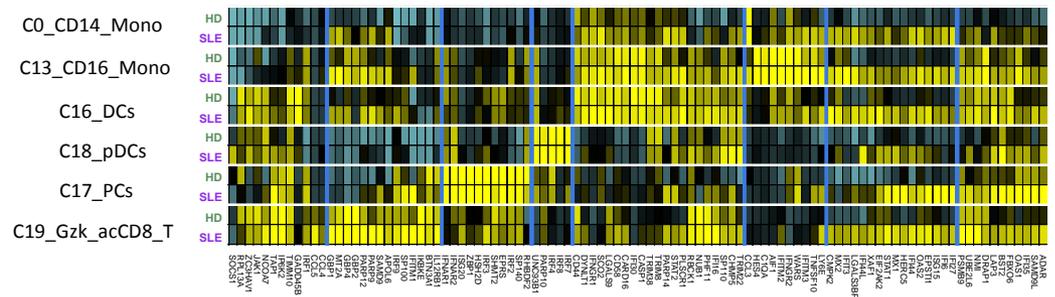
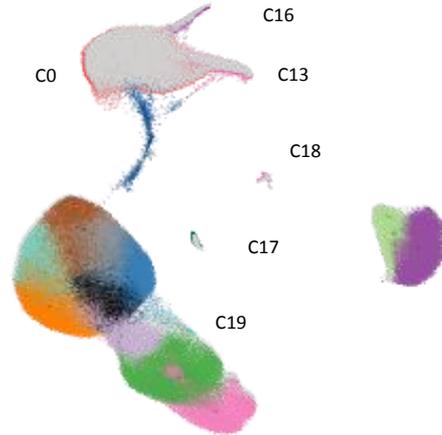
## Cellular origin of the Interferon signature?

### Increasing the Resolution of SLE Molecular Signatures (From Whole Blood to scRNAseq)



From Whole Blood to Single Cells to unravel the origin of the SLE IFN Signature

**A fraction of PBMC Clusters Contribute Disproportionately to the SLE Interferon Signature**



Nehar-Belaid et al., Submitted