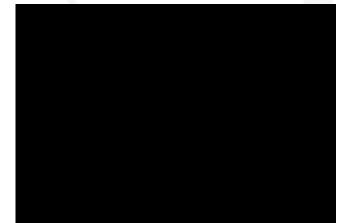




Society for Immunotherapy of Cancer

Macrophage Immune **Checkpoint CD47** is a Novel Therapeutic Target





Samuel H. Cheshier, MD PhD Associate Professor of Pediatric Neurosurgery Katherine S.R. Lowry Endowed Chair of Pediatric Neurosurgery Director of Pediatric Surgical Neuro-Oncology Ty Louis Campbell Foundation St. Baldrick's Scholar Primary Children's Hospital Huntsman Cancer Institute University of Utah

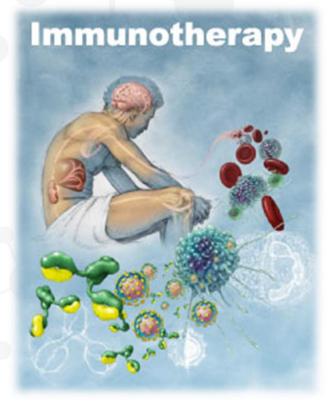


No Disclosures





Promise of Immune System Based Cancer Therapies



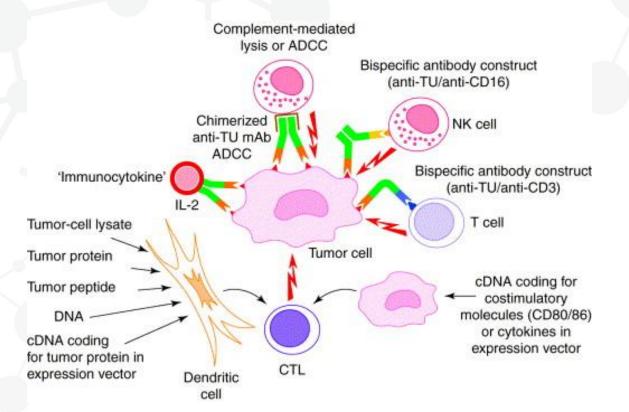


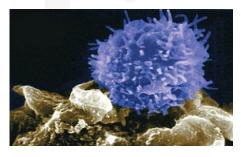
Use immune system to attack cancer

 Immune system can recognize self and destroy non self

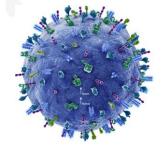
 Cancers are caused by mutations and these mutations are potentially "non-self targets" to the immune system

Cellular Mediators of Anti-Tumor Immunotherapies





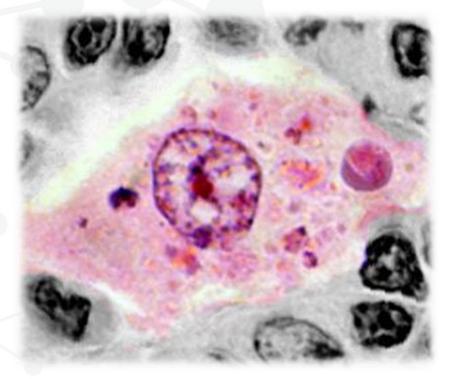
T-Cells

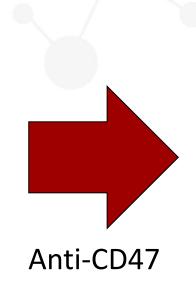


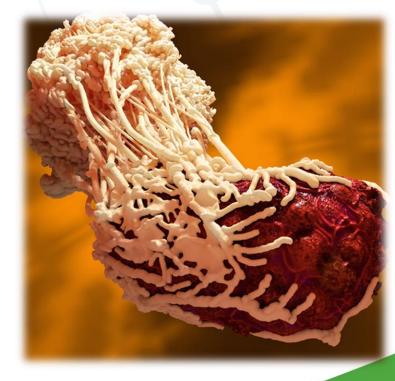
B-Cells



Macrophage: The Not So Boring Cell of the Immune System



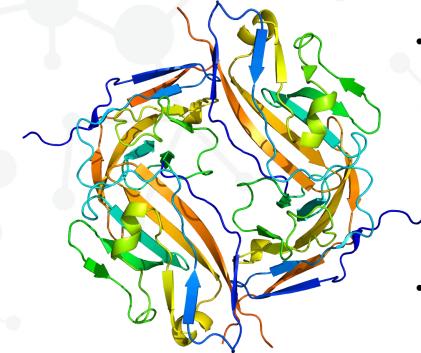




Blocking Monoclonal Antibody to CD47 can stimulate macrophages into "eating" tumor cells



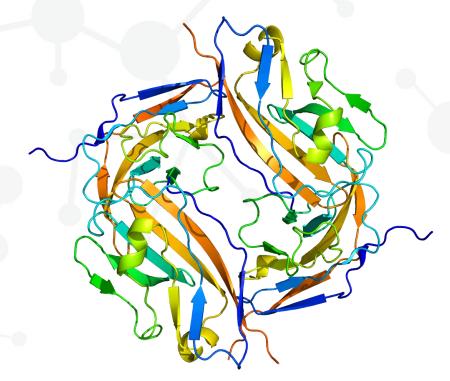
CD47

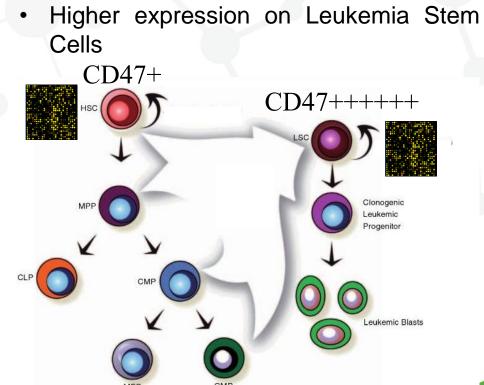


- CD47 is a 50 kDa transmembrane protein that belongs to the immunoglobulin superfamily and partners with membrane integrins and also binds the ligands thrombospondin-1 (TSP-1) and signal-regulatory protein alpha (SIRPα).
- CD47 is involved in a range of cellular processes, including apoptosis, proliferation, adhesion, and migration.
 Furthermore, it plays a key role in immune and angiogenic responses.



Discovery CD47 As Cancer Target: Leukemia . Higher expression



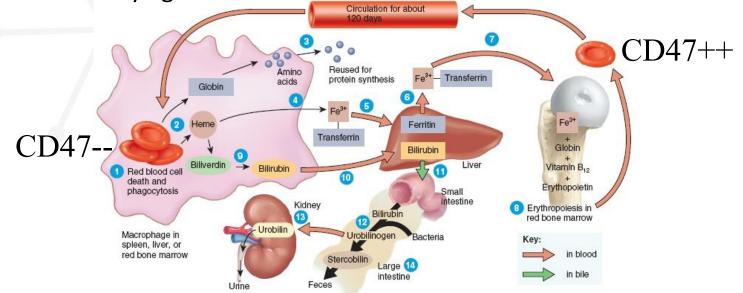


 Increased expression of CD47 on cancer cells from most human solid tumors: lymphoma, breast cancer, ovarian cancer, colon cancer, bladder cancer, glioblastoma, and many others



CD47 Inhibits Phagocytosis of RBC

 Expressed on red blood cells and prevents them from being eaten by macrophages in the spleen and liver until they are sufficiently aged



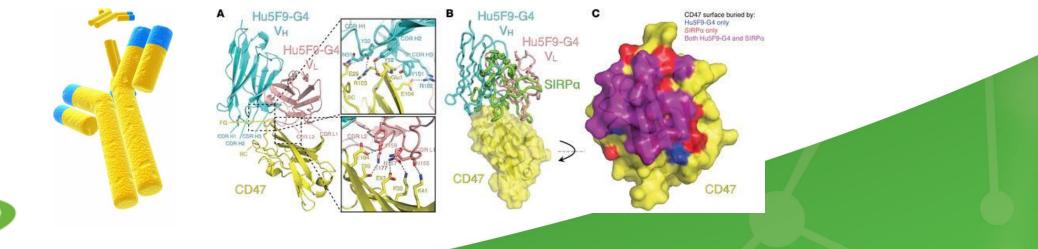
• Since it is expressed on cancers and CD47 degradation results in RBC phagocytosis,

does blocking CD47 interaction lead to tumor cell phagocytosis?



Humanized Anti-CD47 Antibody – Hu5F9-G4

- A humanized anti-CD47 antibody (Hu5F9-G4) has been developed
- Hu5F9-G4 was engineered as IgG4 variant to reduce Fc function
- Hu5F9-G4 exhibits potent anti cancer properties
- Now in Phase 2 Clinical Trials





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Anti-CD47 Eliminates Cancer

Cell

PNA

CD47 Is an Adverse Prognostic Factor and Therapeutic Antibody Target on Human Acute Myeloid Leukemia Stem Cells

Ravindra Majeti, ^{1,3,7,*} Mark P. Chao, ^{3,7} Ash A. Alizadeh, ^{1,3} Wendy W. Pang, ³ Siddhartha Jaiswal, ³ Kenneth D. Gibbs, Jr., ^{4,5} Nico van Rooijen, ⁶ and Irving L. Weissman^{2,3,*} ¹Department of Internal Medicine, Division of Hematology ²Department of Pathology ³Institute for Stem Cell Biology and Regenerative Medicine, Stanford Cancer Center, and Ludwig Center at Stanford ⁴Program in Immunology ⁵Baxter Laboratory in Genetic Pharmacology ⁵Stanford University, Palo Alto, CA 94304, USA ⁶Department of Molecular Cell Biology, Vrije Universiteit, VUMC, Amsterdam, The Netherlands ⁷These authors contributed equally to this work ⁶Correspondence: rmajeti@stanford.edu (R.M.), irv@stanford.edu (I.L.W.) DOI 10.1016/j.cell.2009.05.045

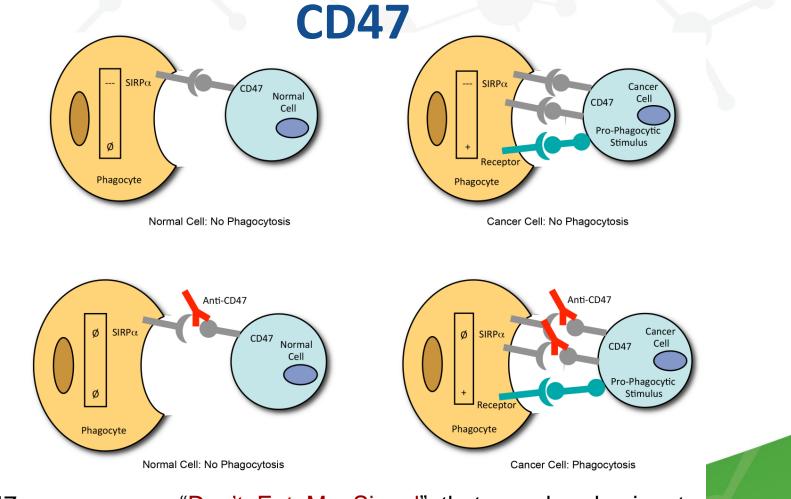
The CD47-signal regulatory protein alpha (SIRPa) interaction is a therapeutic target for human solid tumors

Stephen B. Willingham^{a,1}, Jens-Peter Volkmer^{a,b,1}, Andrew J. Gentles^c, Debashis Sahoo^a, Piero Dalerba^{a,d}, Siddhartha S. Mitra^a, Jian Wang^{e,f}, Humberto Contreras-Trujillo^a, Robin Martin^a, Justin D. Cohen^a, Patricia Lovelace^a, Ferenc A. Scheeren^a, Mark P. Chao^a, Kipp Weiskopf^a, Chad Tang^a, Anne Kathrin Volkmer^a, Tejaswitha J. Naik^a, Theresa A. Storm^a, Adriane R. Mosley^a, Badreddin Edris^a, Seraina M. Schmid^g, Chris K. Sun^h, Mei-Sze Chua^h, Oihana Murillo^a, Pradeep Rajendran^a, Adriel C. Cha^a, Robert K. Chin^{a,i}, Dongkyoon Kim^a, Maddalena Adorno^a, Tal Raveh^a, Diane Tseng^a, Siddhartha Jaiswal^a, Per Øyvind Enger^{e,f}, Gary K. Steinberg^j, Gordon Li^j, Samuel K. So^h, Ravindra Majeti^{a,k}, Griffith R. Harsh^{1,j}, Matt van de Rijn^m, Nelson N. H. Tengⁿ, John B. Sunwoo^{a,I}, Ash A. Alizadeh^{a,k}, Michael F. Clarke^{a,d}, and Irving L. Weissman^{a,m,2}

^aInstitute for Stem Cell Biology and Regenerative Medicine and the Ludwig Cancer Center, ^bDepartment of Urology, 'Stanford Research Initiative for Systems Biology of Cancer, ^{4D}Department of Internal Medicine, Division of Oncology, ^{1D}Asian Liver Center, ^{1D}Department of Radiation Oncology, ^{1D}Department of Neurosurger, ^{1D}Department of Internal Medicine, Division of Hematology, ^{1D}Department of Otolaryngology, Head and Neck Surger, ^{1D}Department of Pathology, and ^{1D}Department of Obstetrics and Gynecology, Stanford University Medical Center, Stanford, CA 94305; ^{1D}Department of Neurosurgery, Haukeland University Hospital 5021 Bergen, Norway; ^{1D}Department of Biomedicine and Department of Neurosurgery, University of Bergen, 5009 Bergen, Norway; and ^{1D}Department of Obstetrics and Gynecology, University Women's Hospital Basel, 4031 Basel, Switzerland



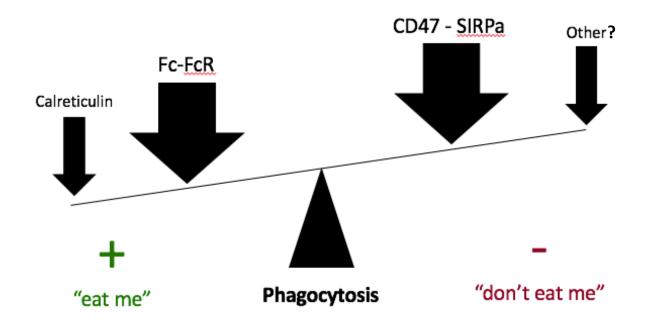
Model for Mechanism of Action in Targeting



CD47 serves as a "Don't Eat Me Signal" that can be dominant over prophagocytic signals on cancer cells. Blocking antibodies against CD47 unmask Society for Immunotherapy of Cancethe "Eat Me Signal" leading to phagocytic elimination of cancer cells.

Majeti. Oncogene. 2011

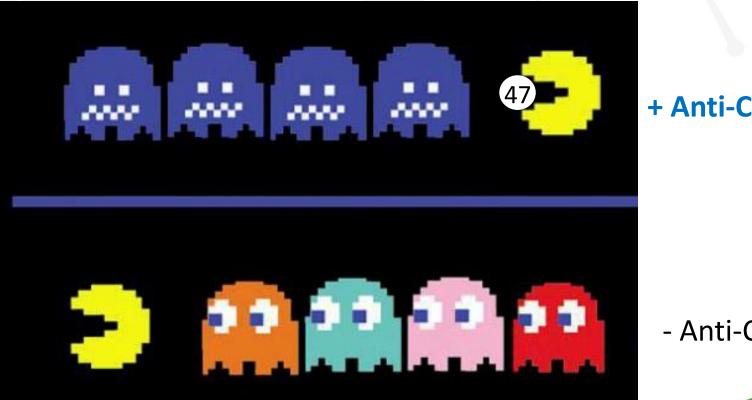
To Eat or Not to To Eat: The Balancing Act





- Phagocytosis is the result of a dominance of stimulatory "eat me" signals over inhibitory " don't eat me signals"
- These signals can be cell intrinsic (CD47, calreticulin) or extrinsic (Fc molecules of cancer-targeting monoclonal antibodies)

Simplified Model for Mechanism of Action in Targeting CD47



+ Anti-CD47

- Anti-CD47



Pediatric Primary Malignant Brain Tumors

- # 1 Solid Tumor in Children
- #1 Cause of Cancer Death in Children
- Many are resistant to therapy
 - Inoperable
 - Resistant to all therapies
- Patients Pay the "Price of Treatment"
 - Diminished neurocognitive function
 - Hydrocephalus
 - Neurologic deficits
 - Organ damage
 - Secondary cancers

Specific considerations of immune therapy in the brain





CD47 is Highly Expressed in Pediatric Brain Tumors

Percent Cells Expressing CD47

80-

60-

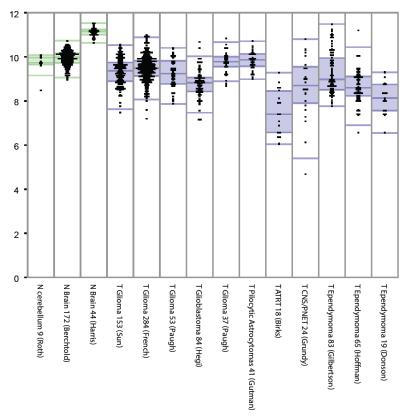
DIPC

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edsCBM

oendymor

A CD47 Expression across Pediatric Brain Tumors





Gholamin, Mitra, Cheshier. Science- Translational Medicine. March 2017

H

CD47 is Highly Expressed in Pediatric Brain Tumors

Percent Cells Expressing CD47

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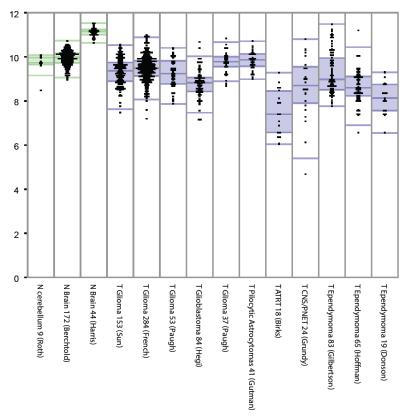
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A CD47 Expression across Pediatric Brain Tumors

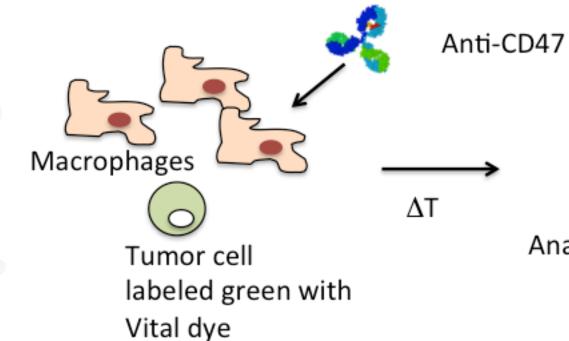


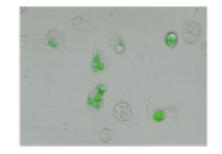


Gholamin, Mitra, Cheshier. Science- Translational Medicine. March 2017

H

In vitro Phagocytosis Assay

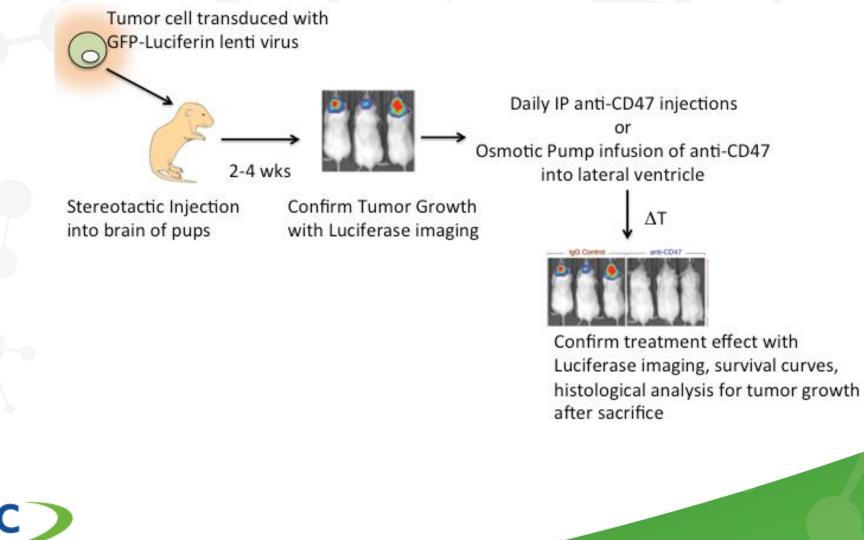




Analyze phagocytosis with microscopy or FACS

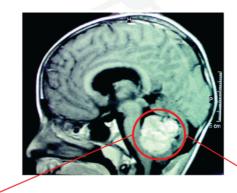


In vivo Effect of Anti-CD47 Treatment

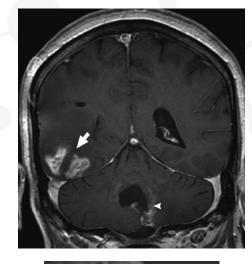




Medulloblastoma



WNT (10%)	SHH (30%)	Group 3 (25%)	Group 4 (35%)
CTNNB1 mutation Monosomy 6	PTCH1/SMO/SUFU mutation MYCN amplification	MYC amplification PVT1-MYC fusion	<i>CDK6</i> amplification Isochromosome 17q <i>SNCAIP</i> duplication
WNT signaling	SHH signaling PI3K signaling	Photoreceptor/GABAergic signaling TGF-ß signaling	Neuronal/Glutamatergic signaling NF-kB signaling
MYC +	MYCN +	MYC+++	Minimal MYC/MYCN
5y OS 94% Rare M+	5y OS 87% Uncommon M+	5y OS 32% Very frequent M+	5y OS 76% Frequent M+

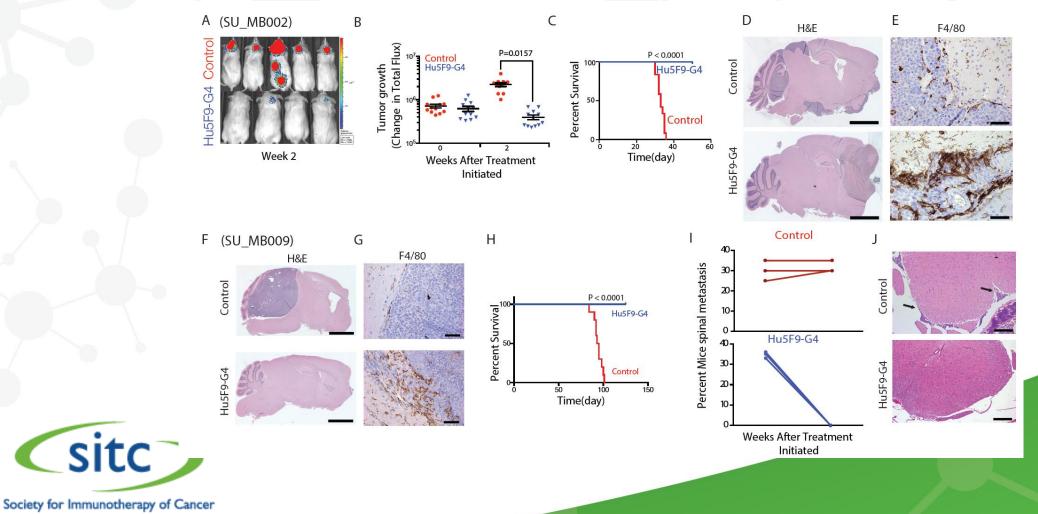




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Hu5F9-G4 Inhibits Pediatric Brain Cancer Growth

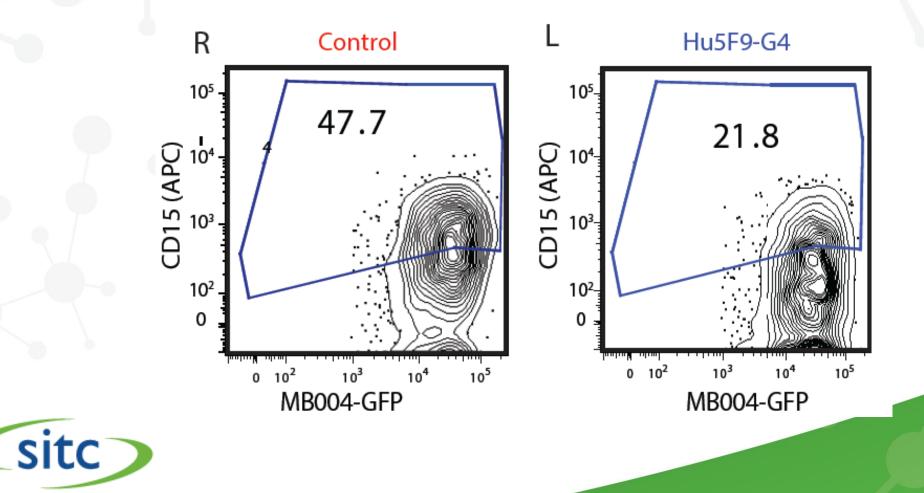
C-Myc Medulloblastoma (Group 3)



Gholamin, Mitra, Cheshier. Science- Translational Medicine. March 2017

Hu5F9-G4 Inhibits Pediatric Brain Cancer Growth

C-Myc Medulloblastoma (Group 3)

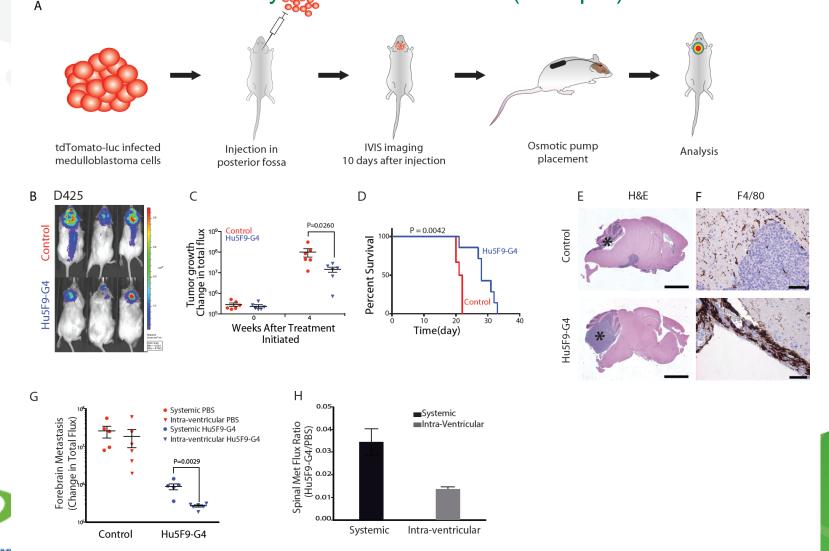


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Gholamin, Mitra, Cheshier. Science- Translational Medicine. March 2017

Intraventricular infusion of Hu5F9-G4 accelerates Spinal and Leptomeningeal Metastasis Treatment

C-My Medulloblastoma (Group 3)

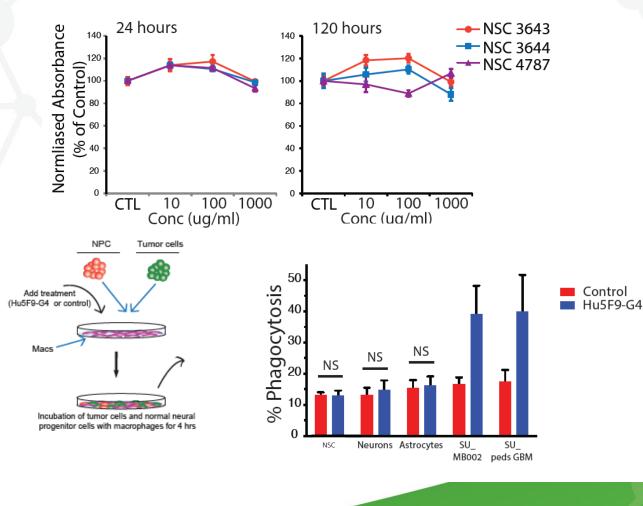


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Gholamin, Mitra, Cheshier. Science- Translational Medicine. March 2017

Hu5F9-G4 Does Not Promote Phagocytosis of Normal Nerual Tissues Including NSC

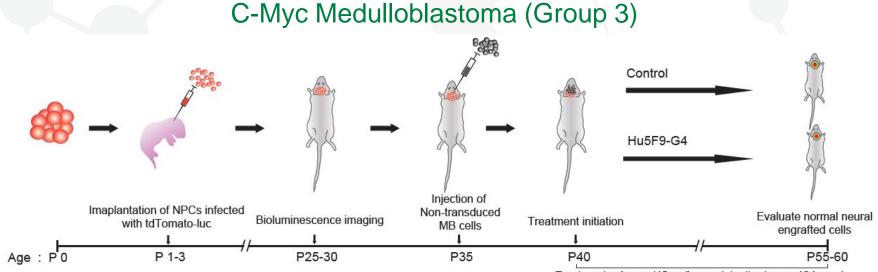
C-Myc Medulloblastoma (Group 3)





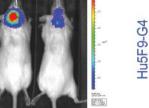
Gholamin, Mitra, Cheshier. Science- Translational Medicine. March 2017

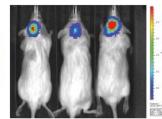
Hu5F9-G4 Does Not Promote Phagocytosis of Normal Neural Tissues Including NSC

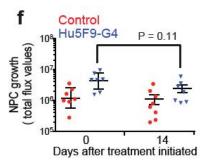


Treatment scheme (10mg/kg per injection/every 48 hours)











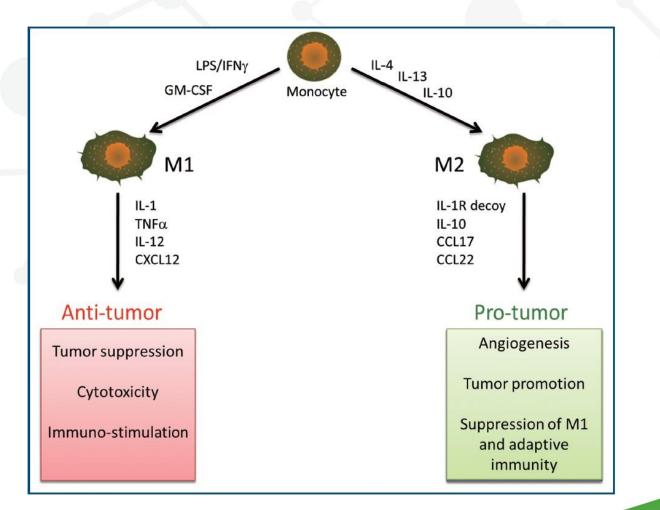
Gholamin, Mitra, Cheshier. Science- Translational Medicine. March 2017

Summary

- CD47 Expressed on all tumors
- Anti-CD47 highly efficacious in vitro and in vivo in all leukemias and solid tumors tested in the preclinical setting
- Anti-CD47 highly efficacious in vitro and in vivo in all brain cancers tested in the preclinical setting (Medulloblastoma, Pediatric Glioblastoma, Adult Glioblastoma, DIPG, ATRT, PNET)
- No toxicity to normal CNS tissue including progenitors

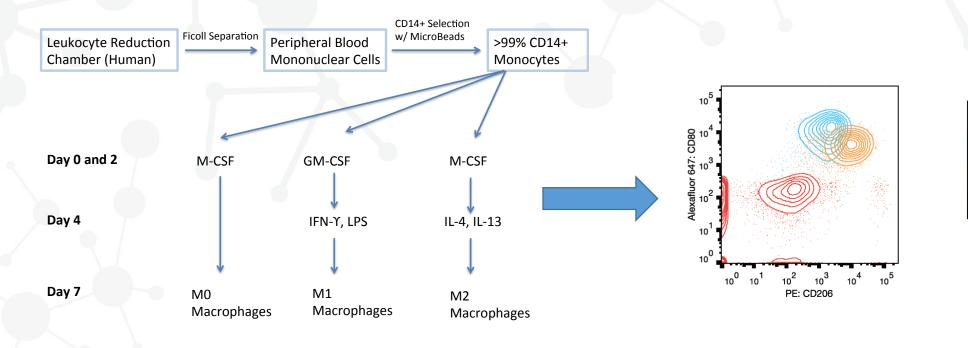


Macrophage Activation Subtypes





Enforced Macrophage Polarization to Generate M0, M1, and M2 Macrophages



Subset Name	
M1 Macrophages	
M2 Macrophages	
GBM Cells	

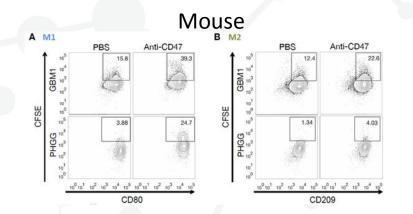


Zhang, Hutter, Mitra, Cheshier. PLOS-One. 2016

Anti-CD47 Promotes Tumor Phagocytosis by M1 and M2 Polarized Mouse and Human Macrophages

aCD47

+ aCD47



D M2 40

Phagocy

%

GBM4

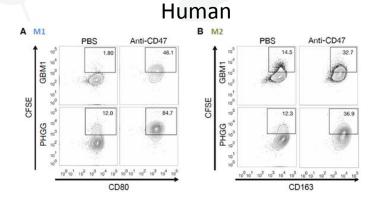
PGBM1

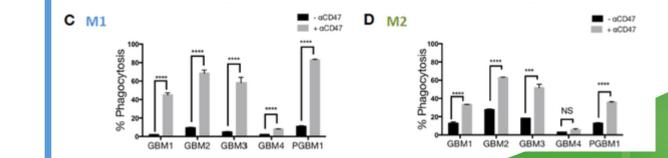
GBM1

aCD47

+ aCD47

PGBM1







GBM4

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GBM1

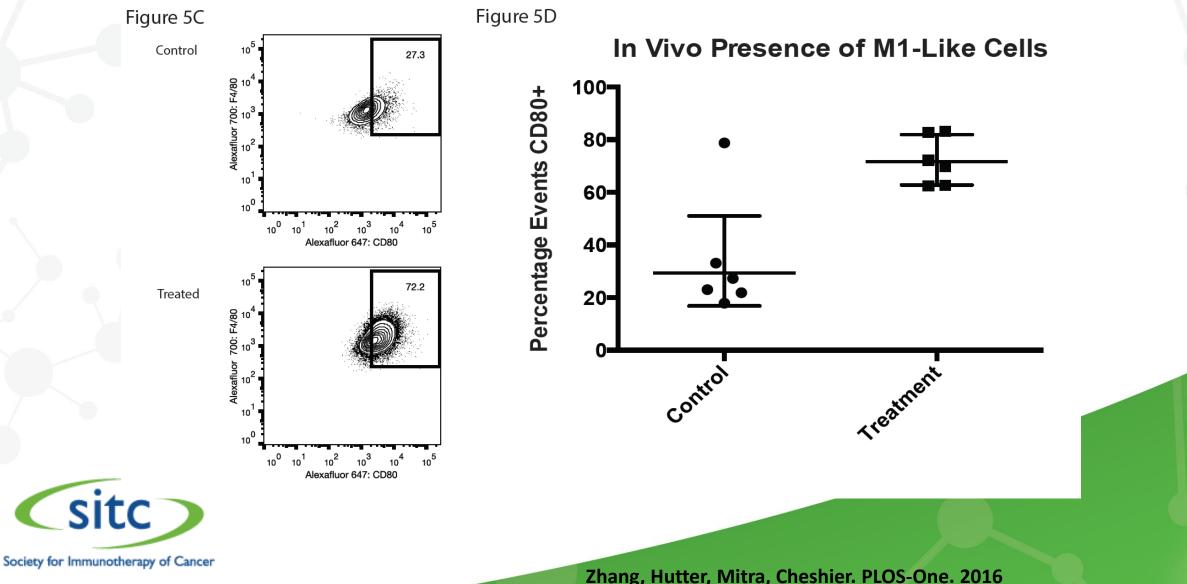
C M1

Phagocytosis

%

Zhang, Hutter, Mitra, Cheshier. PLOS-One. 2016

Anti-CD47 Promotes an M1 Phenotype of Macrophages within Brain Tumors In Vivo



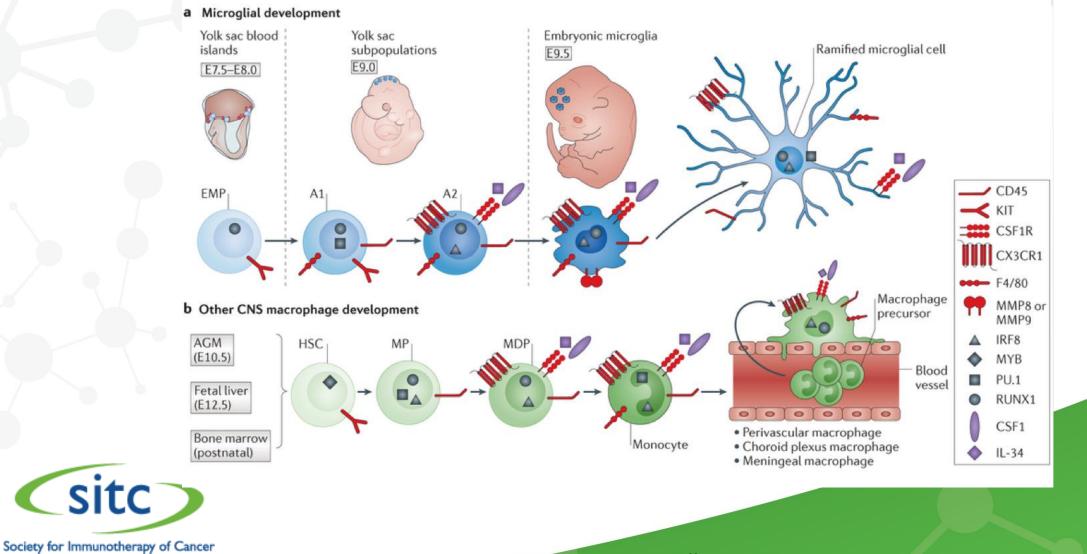
Summary

 M1 and M2 polarized macrophages are capable of responding to anti-CD47 with increased tumor phagocytosis

• Tumor associated macrophages in the setting of in vivo anti-CD47 treatment possess the M1 phenotype



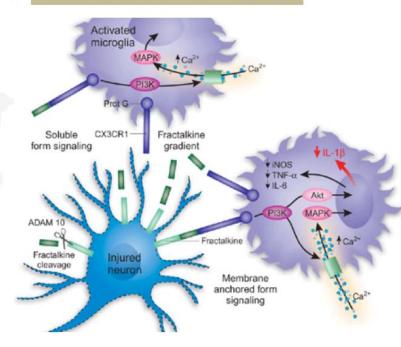
Macrophages vs. Microglia



Prinz M, Priller J.Nat Rev Neurosci. 2014

Microglia are Cx3cr1+ Macrophages are Ccr2+

Cx3cr1 (Fractalkine receptor)

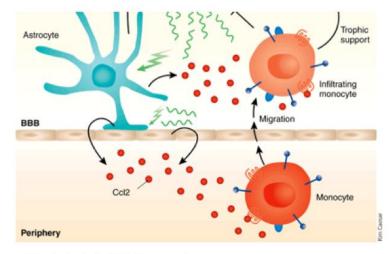


Diane <u>Bérangère Ré</u> & Serge <u>Przedborski</u> <u>Nature Neuroscience</u> 9, 859 - 861 (2006)



Expressed on microglia from <u>embryonal</u> stages through adulthood

Ccr2 (chemokine receptor 2)

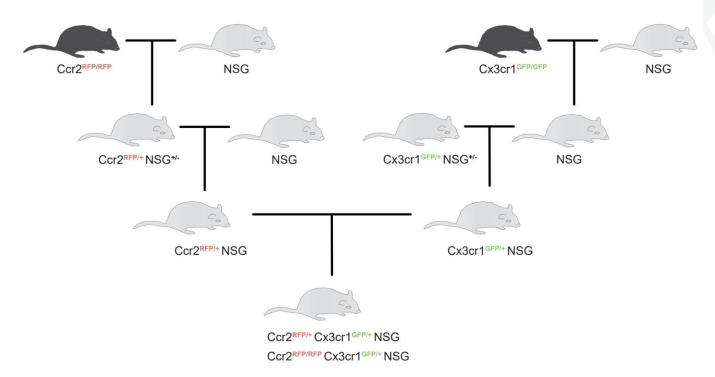


Britschgi et al. Nat. Neuroscience

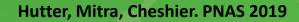
CCR2 plays an important role in the extravasation and transmigration of **monocytes during inflammation**.

It controls the entry of bone-marrow-derived Ly6C^{hi} monocytes into the brain

Generation of Mice to Distinguish Macrophages from Microglia

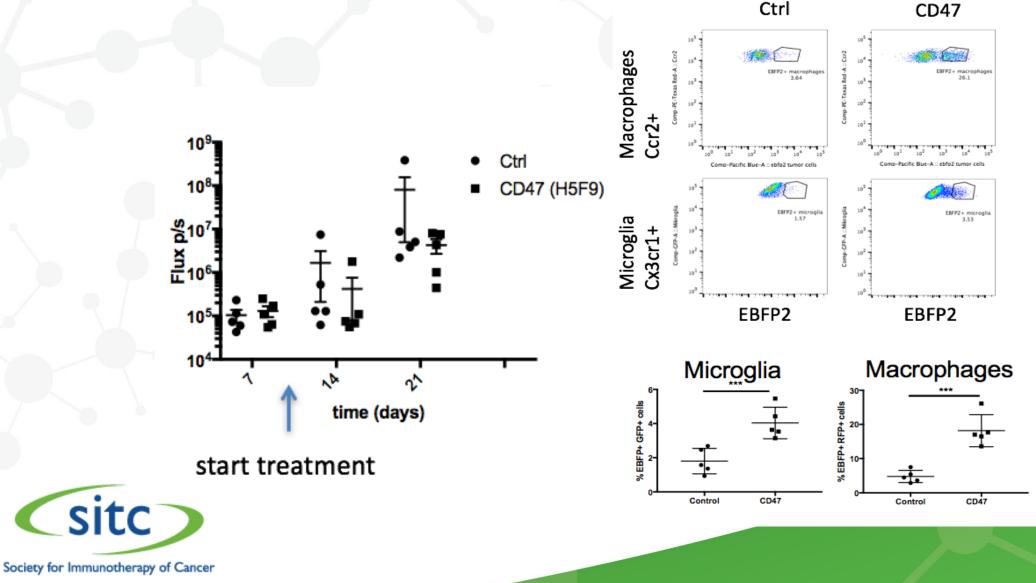


- Graft intracranially with human brain tumors
- Definitive separation of microglia from macrophages
- Direct invivo assessment of phagocytosis modulation





Macrophage and Microglia Within Implanted GBM Respond to Anti-CD47 Treatment



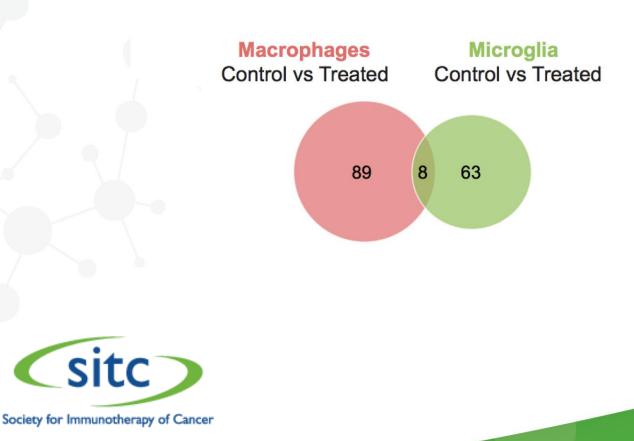
RNAseq of Macrophage and Microgila in Response to Anti-CD47 Treatment

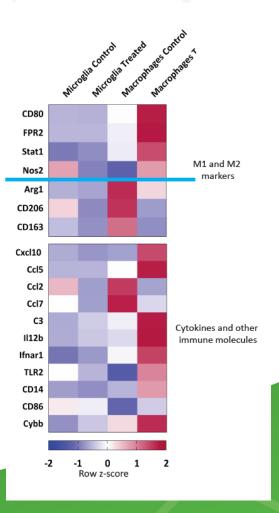


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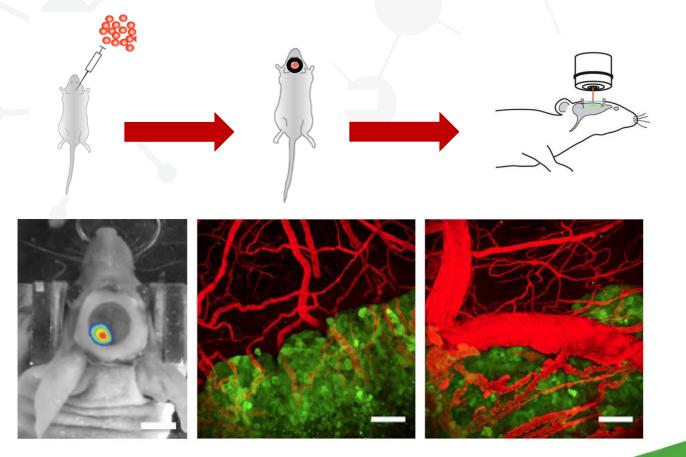
Iniate mesenchymal glioma (T387) in NSG-Ccr2RFP/wt Cx3cr1GFP/wt mice 3 weeks of treatment

Isolation of TAMs Macrophages: sorted for RFP bright GFP low Microglia: sorted for GFP bright RFP low





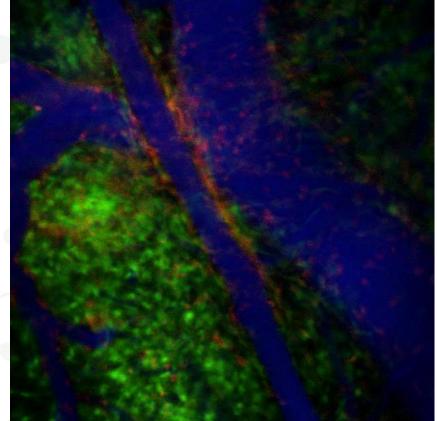
Cranial Windows Allow for Live Videos of Macrophages and Microglia within Implanted Human Malignant Glioma





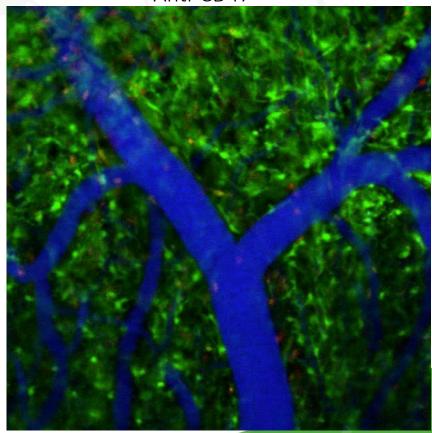
Live Videos of Macrophages in Human Malignant Glioma

+ Anti-CD47



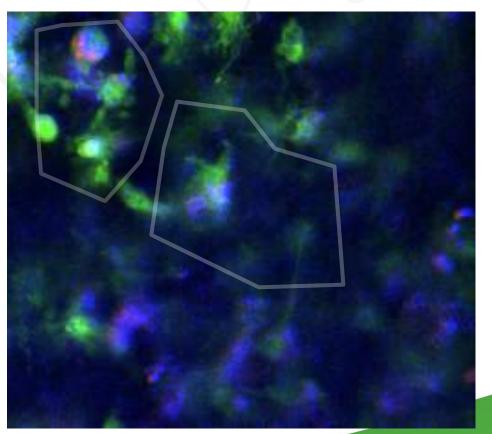


- Anti-CD47



Live Videos of Microglia in Human Malignant Glioma

Microglia (Green) Eating Tumor (Blue)



+ Anti-CD47



Summary

- Macrophages and Microglia can be isolated from brain tumors of xenographted mice using the Cx3cr1 X CCL2 mouse model
- Macrophages and Microglia can respond to anti-CD47 treatment with increased tumor phagocytosis
- Macrophages and Microgila display very different gene expression changes in response to anti-CD47 with macrophages being more pro-inflammatory



CD47 Clinical Trials

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

CD47 Blockade by Hu5F9-G4 and Rituximab in Non-Hodgkin's Lymphoma

Ranjana Advani, M.D., Ian Flinn, M.D., Ph.D., Leslie Popplewell, M.D.,
Andres Forero, M.D., Nancy L. Bartlett, M.D., Nilanjan Ghosh, M.D., Ph.D.,
Justin Kline, M.D., Mark Roschewski, M.D., Ann LaCasce, M.D.,
Graham P. Collins, M.D., Thu Tran, B.S., Judith Lynn, M.B.A.,
James Y. Chen, M.D., Ph.D., Jens-Peter Volkmer, M.D., Balaji Agoram, Ph.D.,
Jie Huang, Sc.D., Ravindra Majeti, M.D., Ph.D., Irving L. Weissman, M.D.,
Chris H. Takimoto, M.D., Ph.D., Mark P. Chao, M.D., Ph.D.,
and Sonali M. Smith, M.D.

NEJM 2019

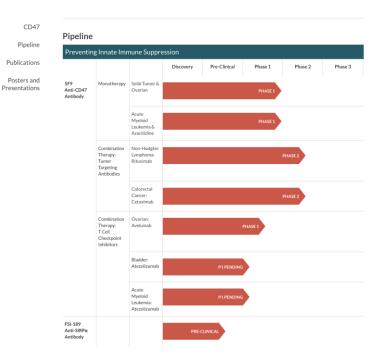
First-in-Human, First-in-Class Phase I Trial of the Anti-CD47 Antibody Hu5F9-G4 in Patients With Advanced Cancers

Branimir L. Sike, MD¹, Nebal Lakhani, MD, PhD¹, amia Patnaik, MD², Samit A, Shah, MD¹, Steenivasa R. Chandana, MD, PhD², Iower Ratos, MD², A Dimitriso Glovaro, MD¹ Timothy Orostenk, RD¹ Siglian Aranyana, MD¹, Kythake Papadopuoks, MD¹ George A, Fisher, MD, PhD¹, Shaij Agaroma, MD¹, Simot, Noraka, PhD¹, Maureen Hosard, PhD¹, Marialdhar Beseram, MD¹, Mark P, Chao, MD, PhD¹, Shaij Agaroma, RD¹, James V, Denn, MD, PhD², Huang, SO¹, Matthew Art, Jia Liu, PhO, MD¹, Jans-Peter Vollemee, MD¹, Rainida Maglel, MD, PhD^{1,5} Irving L. Weissnan, MD¹; Chris H, Takimoto, MD, PhD¹; Dana Supan, RN¹; Heather A, Waleen, MD¹; Rainida Maglel, MD, PhD^{1,5} Irving L. Weissnan, MD¹; Chris H, Takimoto, MD, PhD¹; Dana Supan, RN¹;

JCO 2019



• Forty Seven



NIH U.S. National Library of Medicine

ClinicalTrials.gov

19 Anti-CD47 Clinical Trials



Thank You









