

# **Presenter Disclosure Information**

Stock ownership: Bristol Myers Squibb and Lion Biotechnologies



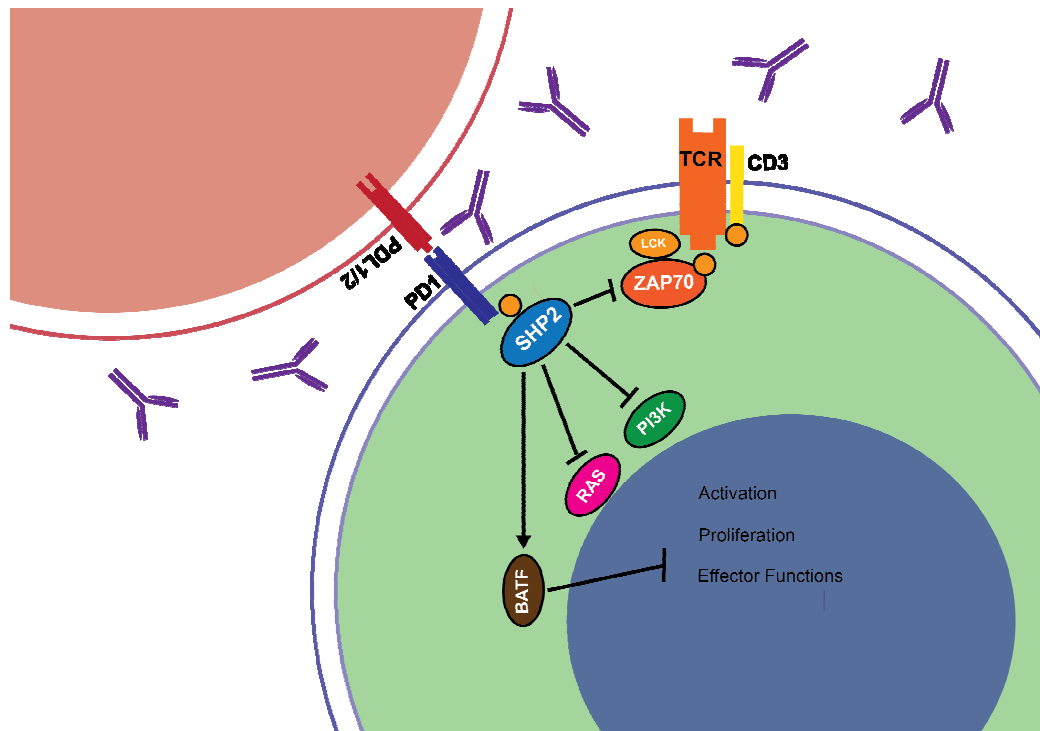
Society for Immunotherapy of Cancer

Increased STAT3 signaling and decreased suppressive function of regulatory T-cells are biomarkers of positive patient outcome to nivolumab therapy

David M. Woods Ph.D., Anders Berglund Ph.D., Rupal Ramakrishnan Ph.D., Jeffrey Weber M.D. Ph.D.



## PD-1 Blockade for the Treatment of Melanoma



Clinical Trial MCC15651 (Cohorts 1-3)

Anti-PD-1 Antibody MDX-1106

Resected Stages IIIC/IV Melanoma.

Clinical Trial MCC15400 (Cohorts 1-3)

Anti-PD-1 Antibody MDX-1106

Unresectable Stages III/IV Melanoma.

Clinical Trial MCC17365 (Cohort A)

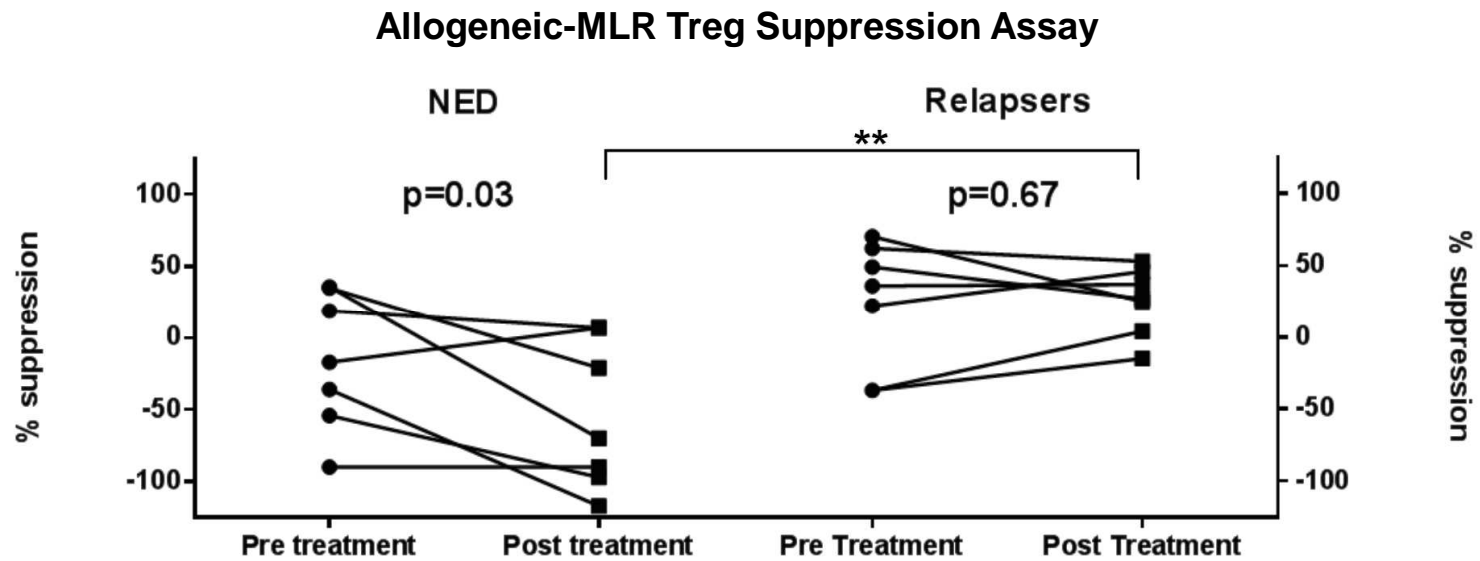
Nivolumab Given Sequentially with Ipilimumab

Unresectable Stages III/IV Melanoma.

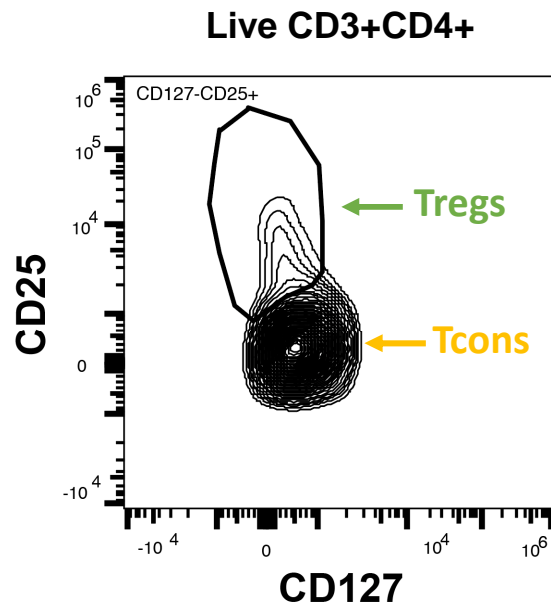
\*All samples assessed were ipilimumab naïve.

### Lack of Biomarkers

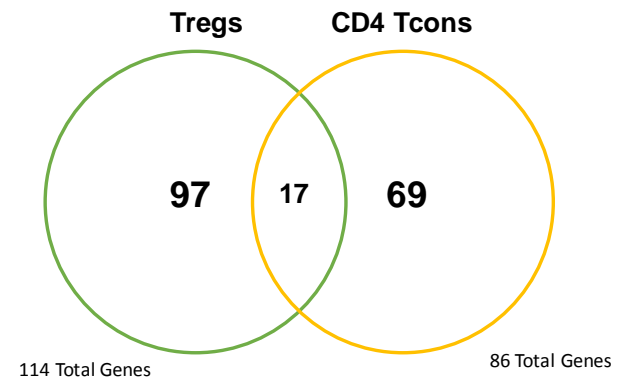
## Patients Benefiting from Nivolumab Therapy Have Decreased Treg Suppressive Function



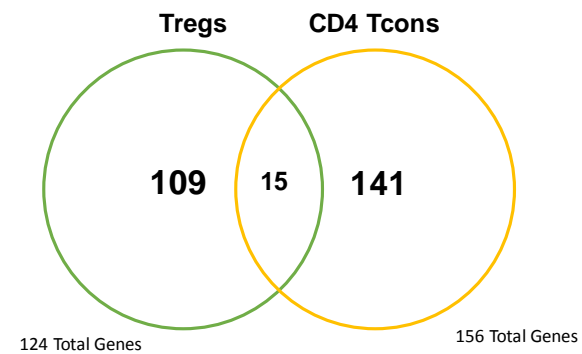
## Tregs and Conventional T-cells Have Distinct Gene Profile Changes in Response to Nivolumab



### Upregulated Genes (Pre vs. Post)



### Downregulated Genes (Pre vs. Post)



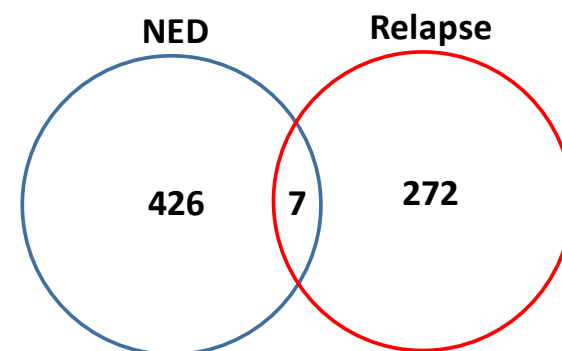
## Tregs from Patients with No Evidence of Disease (NED) and Relapsing Patients have Distinct Gene Profile Changes in Response to Nivolumab

### Significantly Changed Genes: Same Direction

		Relapse Pre vs. Post	NED Pre vs. Post
PCDHA9	protocadherin alpha 9	-1.06	-1.12
GZMK	granzyme K (granzyme 3; tryptase II)	0.99	1.08
CX3CR1	chemokine (C-X3-C motif) receptor 1	1.01	1.19
CCNB1	cyclin B1	1.24	0.87
PDCD1	programmed cell death 1	1.41	1.31
GZMA	granzyme A (granzyme 1, cytotoxic T-lymphocyte-associated serine esterase 3)	1.55	0.76
DLGAP5	discs, large (Drosophila) homolog-associated protein 5	1.99	0.96

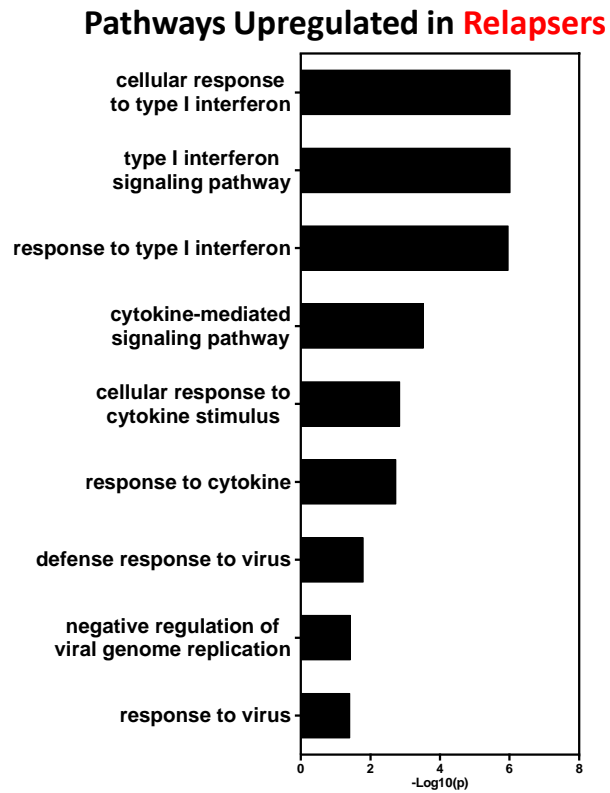
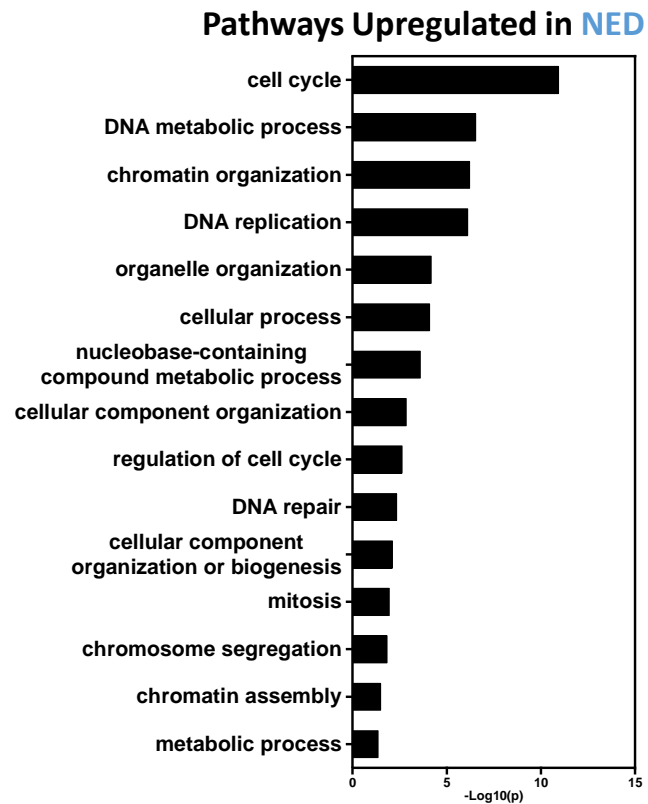
### Significantly Changed Genes: Opposite Direction

		Relapse Pre vs. Post	NED Pre vs. Post
POLQ	polymerase (DNA directed), theta	-2.36	1.13
SESTD1	SEC14 and spectrin domains 1	-1.41	1.81
NEFL	neurofilament, light polypeptide	-0.83	0.99
SNORA76	small nucleolar RNA, H/ACA box 76C	-0.56	0.68
IFI44L	interferon-induced protein 44-like	1.39	-0.65
WDR61	WD repeat domain 61	3.72	-0.49



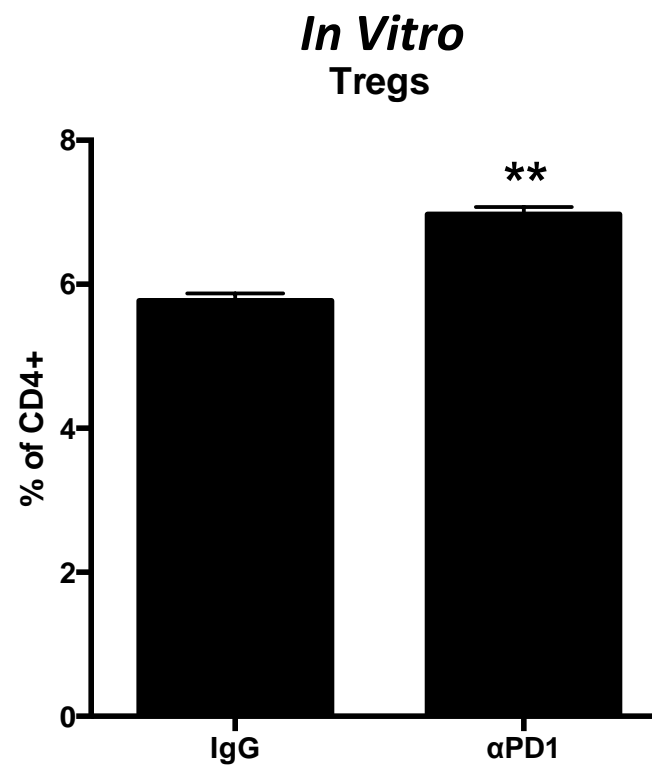
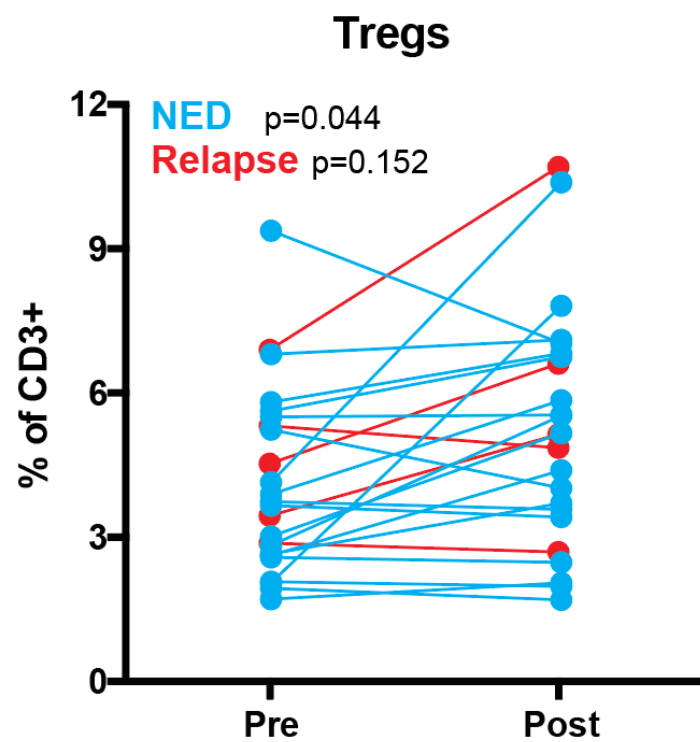
All values given in log2 scale

## Tregs from Relapsed and NED Patients have Distinct Pathways Upregulated in Response to Nivolumab



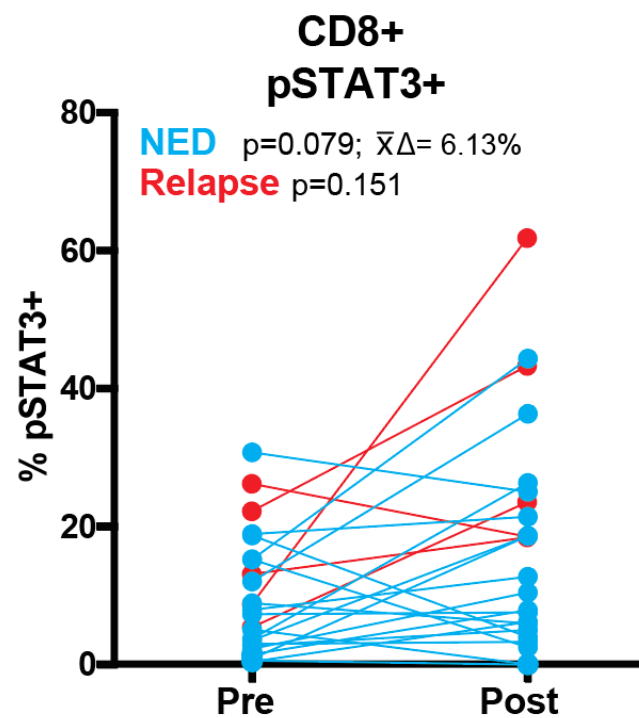
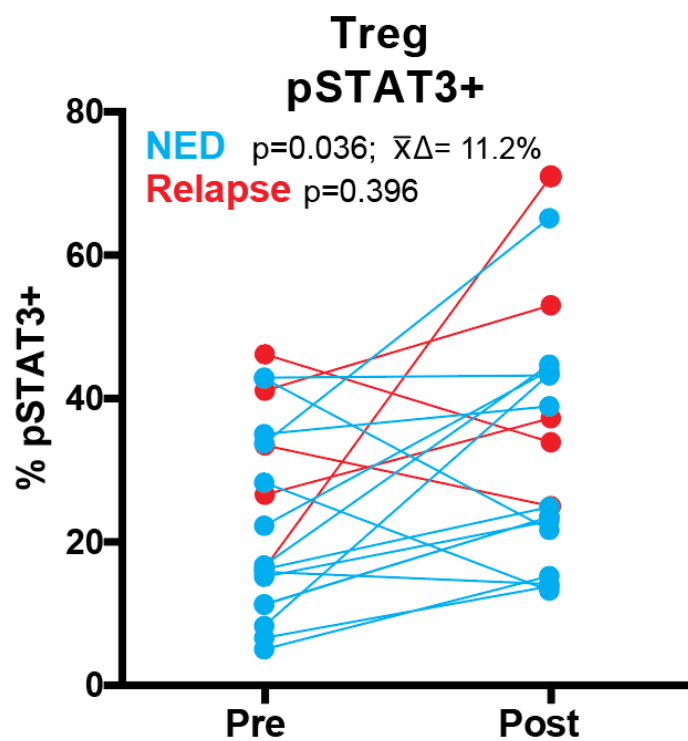
Results from Panther (similar results with GeneGo)

## PD-1 Blockade Increases the Proportion of Tregs

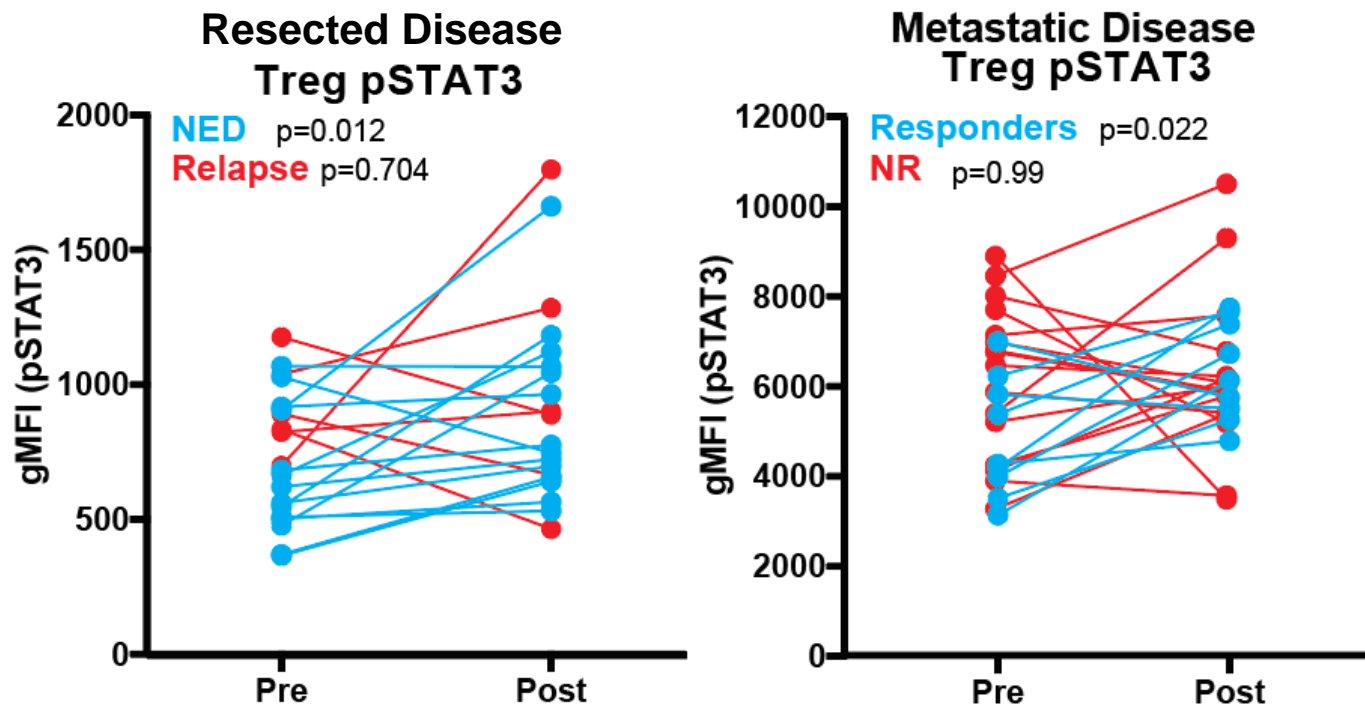




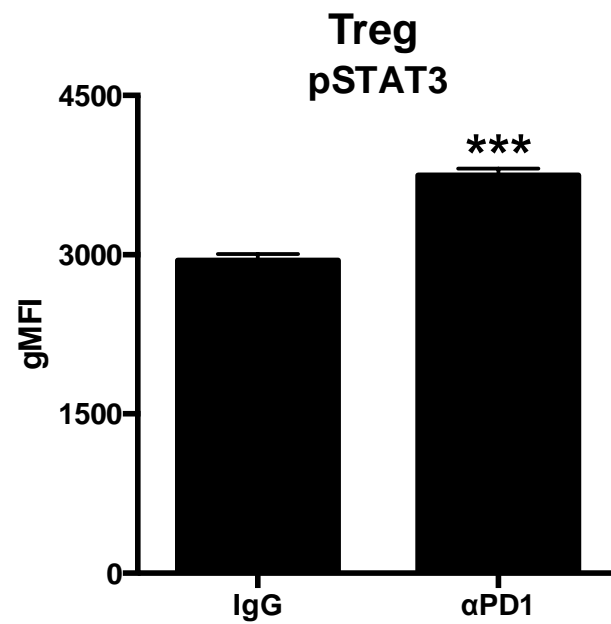
Resected Patients that are NED after Nivolumab Therapy  
have Increased Phospho-STAT3 Expression in Tregs



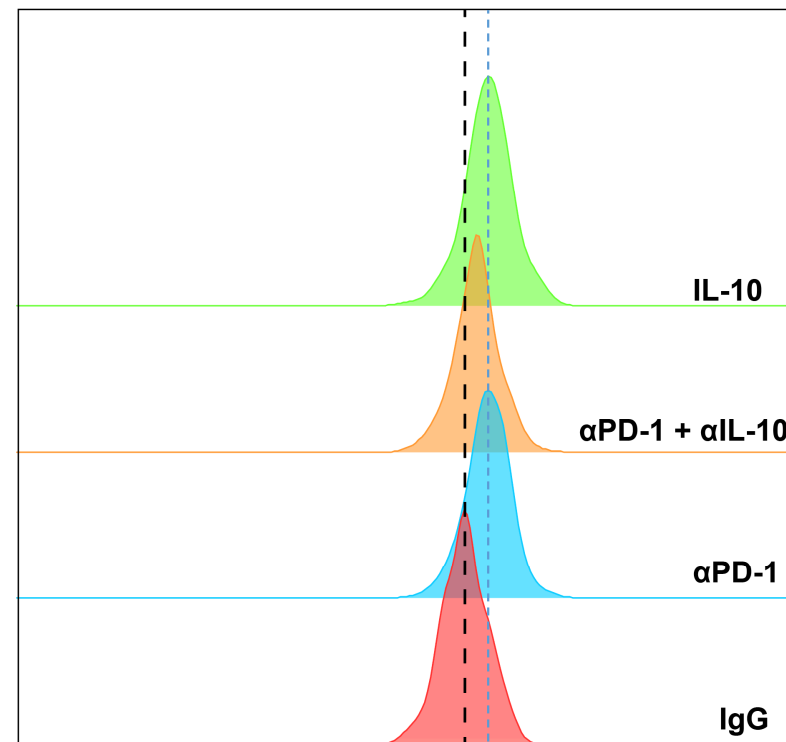
## NED Resected Patients and Responding Metastatic Patients Have Induction of pSTAT3 in Tregs Post-Nivolumab



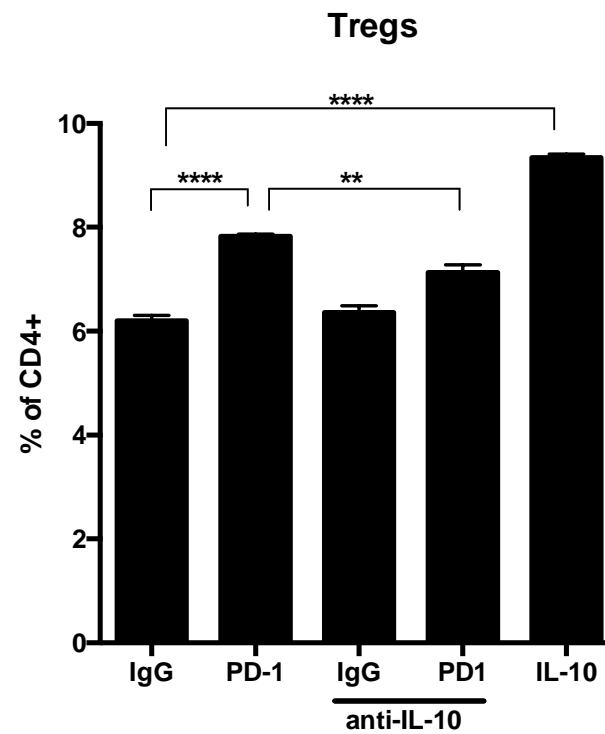
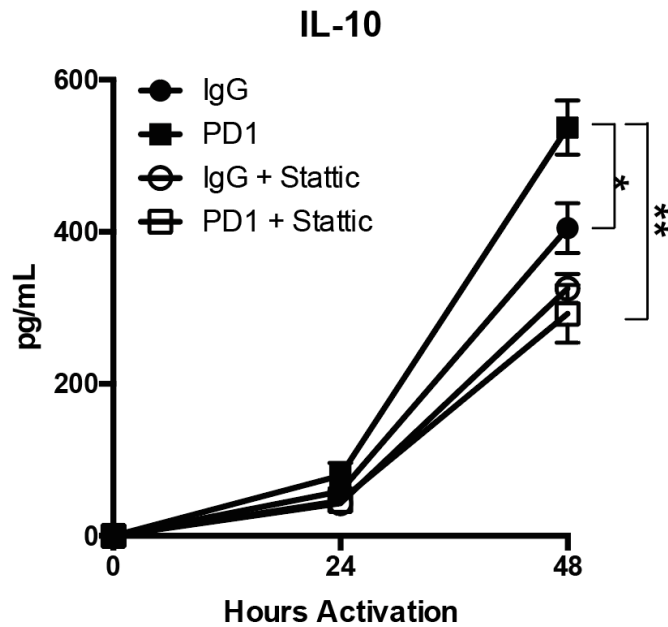
## PD-1 Blockade Induces pSTAT3 in Tregs *In Vitro*



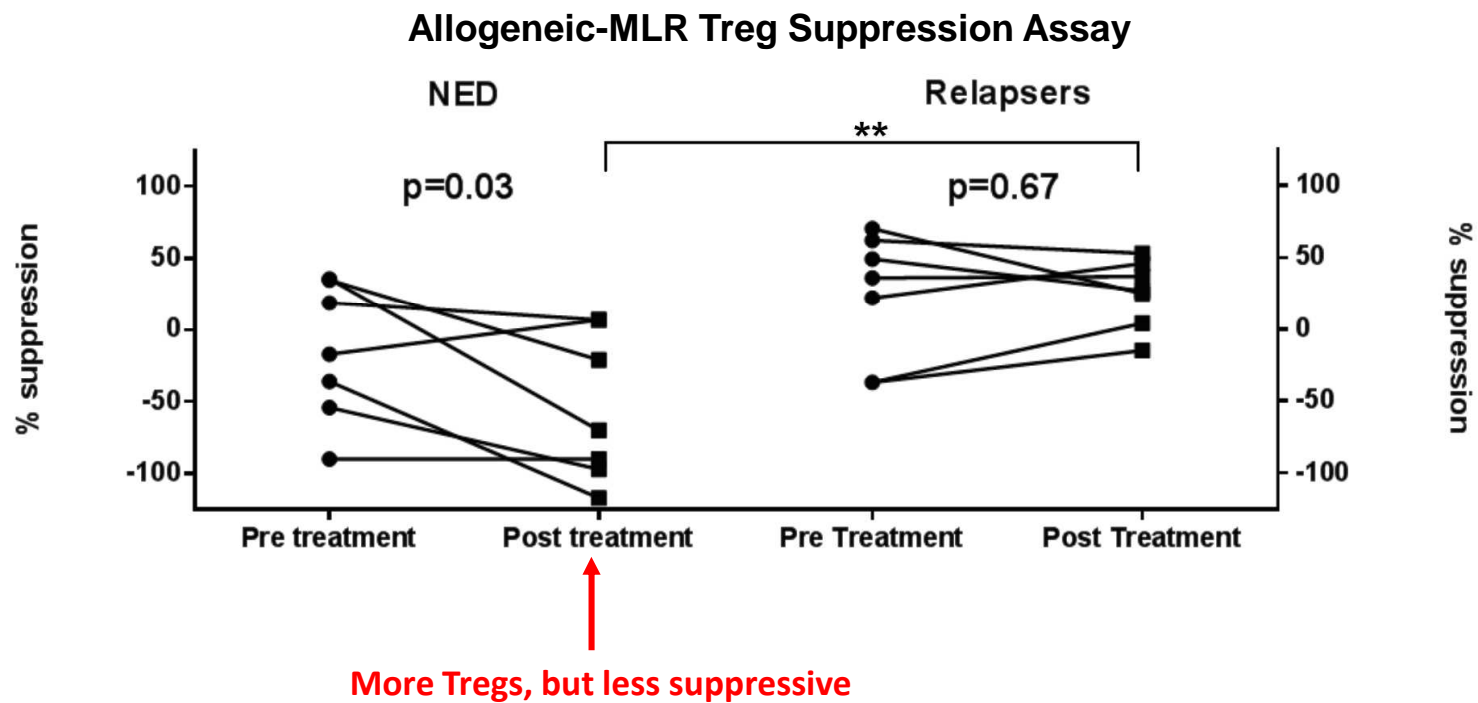
*In Vitro*



## PD-1 Blockade Increases IL-10 Expression by T-cells



## NED Resected and Responding Metastatic Patients Show a Decrease in Treg Suppressive Function after Nivolumab Treatment



# Summary

- Tregs have distinct changes to nivolumab compared to Tcons and based on patient outcome.

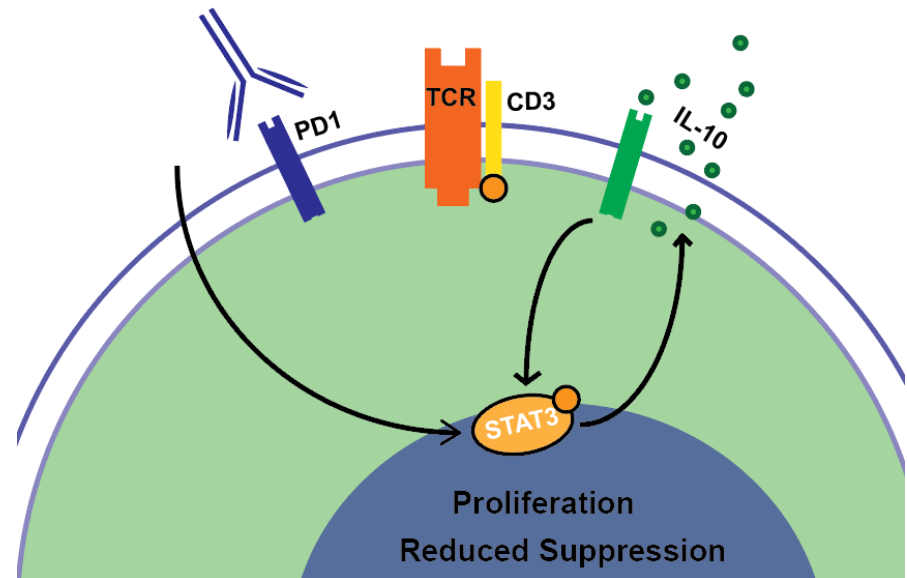
- Clinical benefit to nivolumab therapy is associated with:

- Decreased suppressive Tregs
- Increased pSTAT3 expression in Tregs
- Increased percentages of circulating Tregs
- Gene profile associated with proliferation pathways

- Lack of clinical benefit is associated with:

- Treg gene profile associated with type I interferon signaling
- Treg gene profile associated with STAT1/2 signaling

- PD-1 blockade leads to a pSTAT3 dependent increase in IL-10 production, which contributes to increased percentages of Tregs.





## Acknowledgements



Jeffrey Weber  
Andressa L. Sodré



Anders Berglund  
Rupal Ramakrishnan

### **Funding:**

NIH/NCI SPORE Grant 1P50CA168536-01A1  
Sullivan Fund at Moffitt Cancer Center