

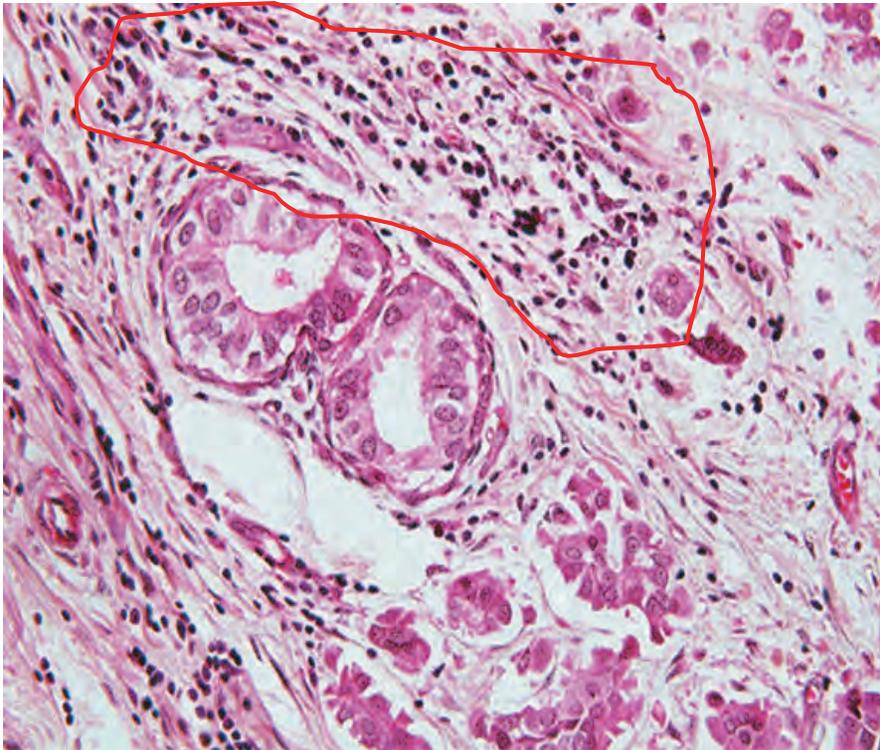
Host Tumor Relationship

Augusto C. Ochoa, M.D.
Stanley Scott Cancer Center
Louisiana State University
New Orleans

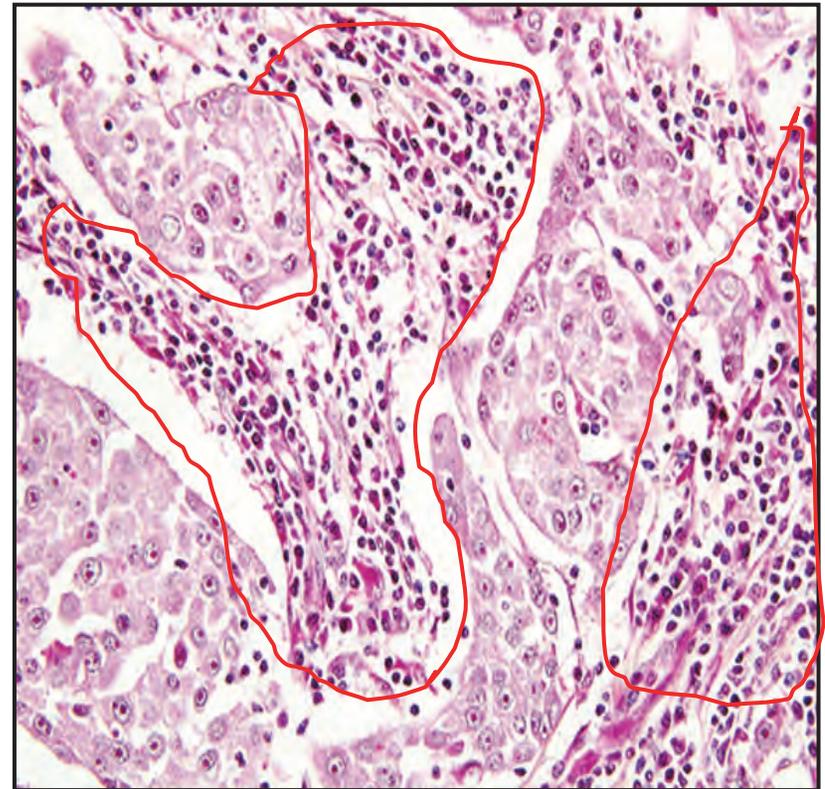


Inflammation and Cancer: What are the cells doing there?

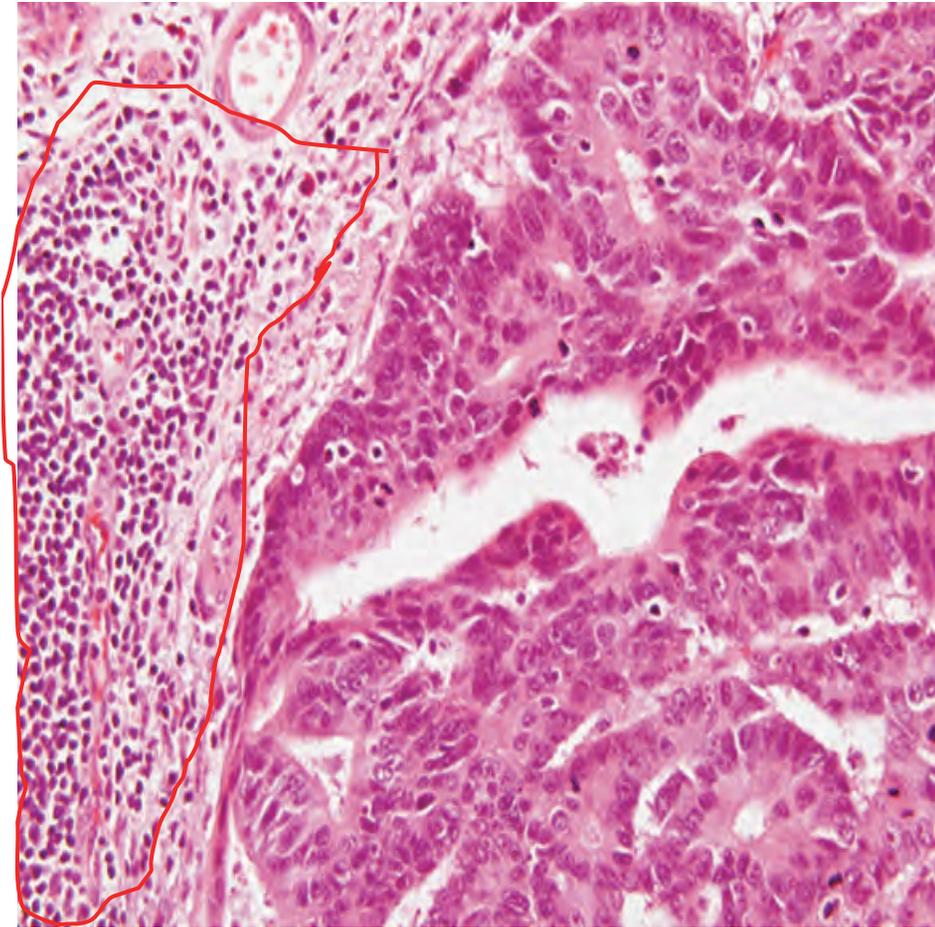
Breast Medullary CA



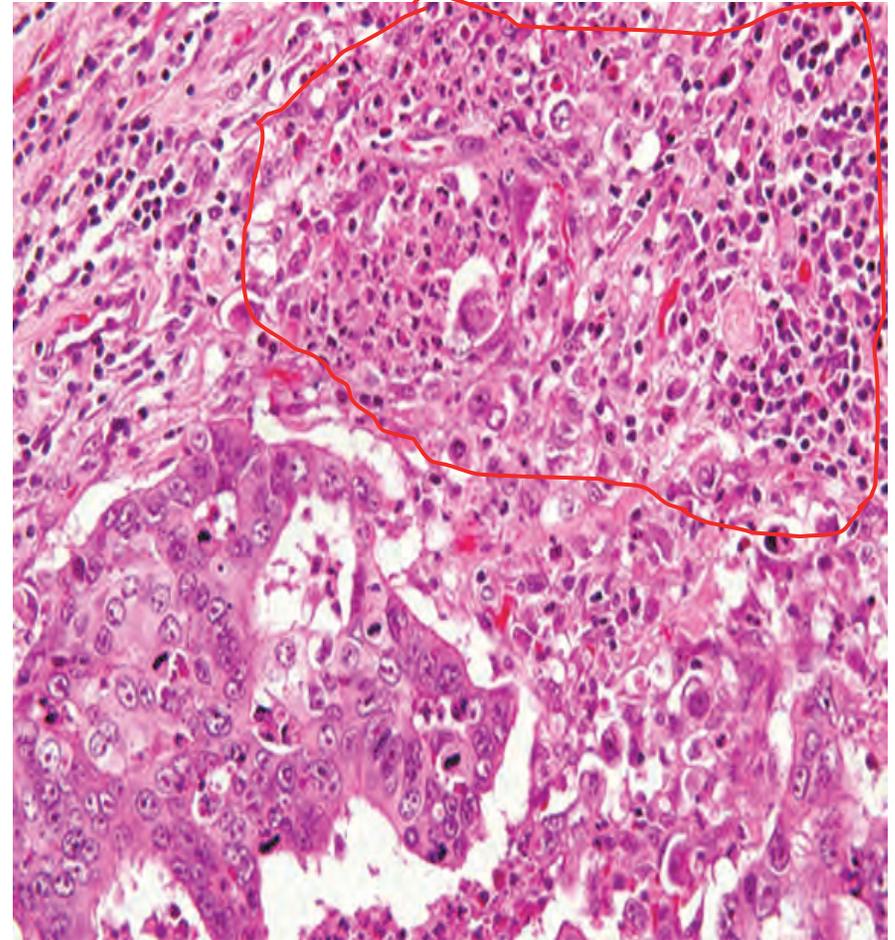
Breast Ductal CA

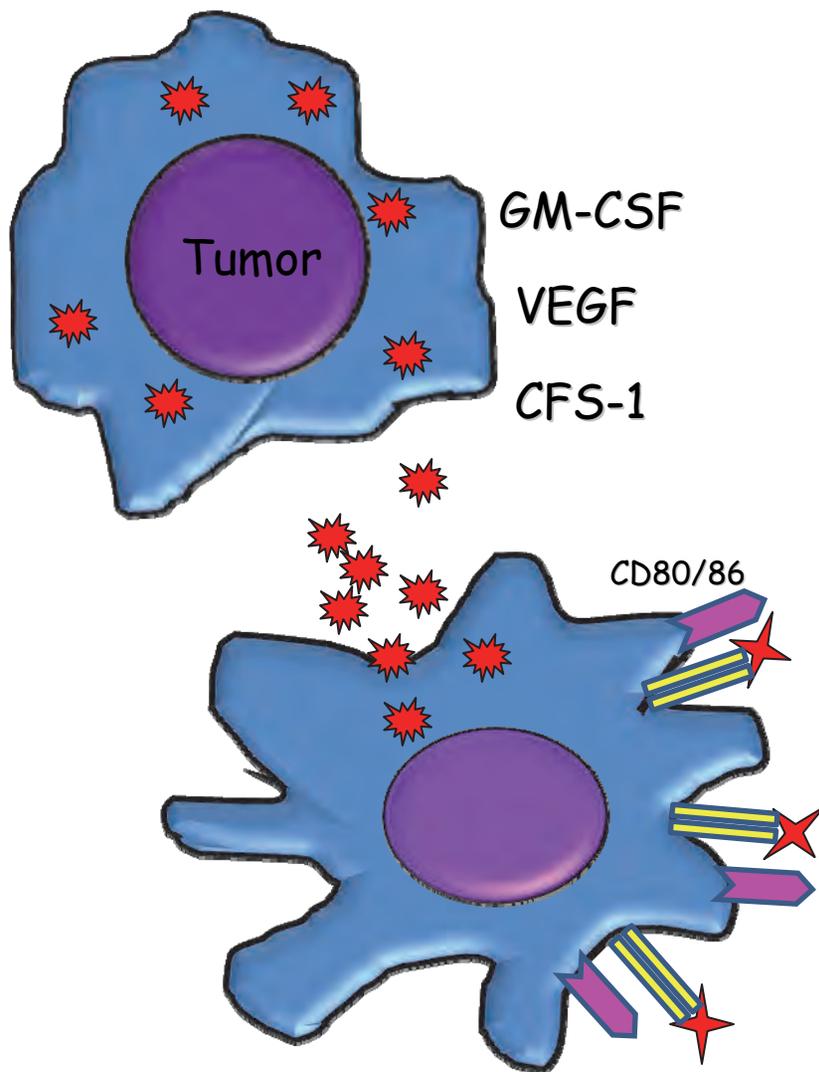


Colon Adenocarcinoma

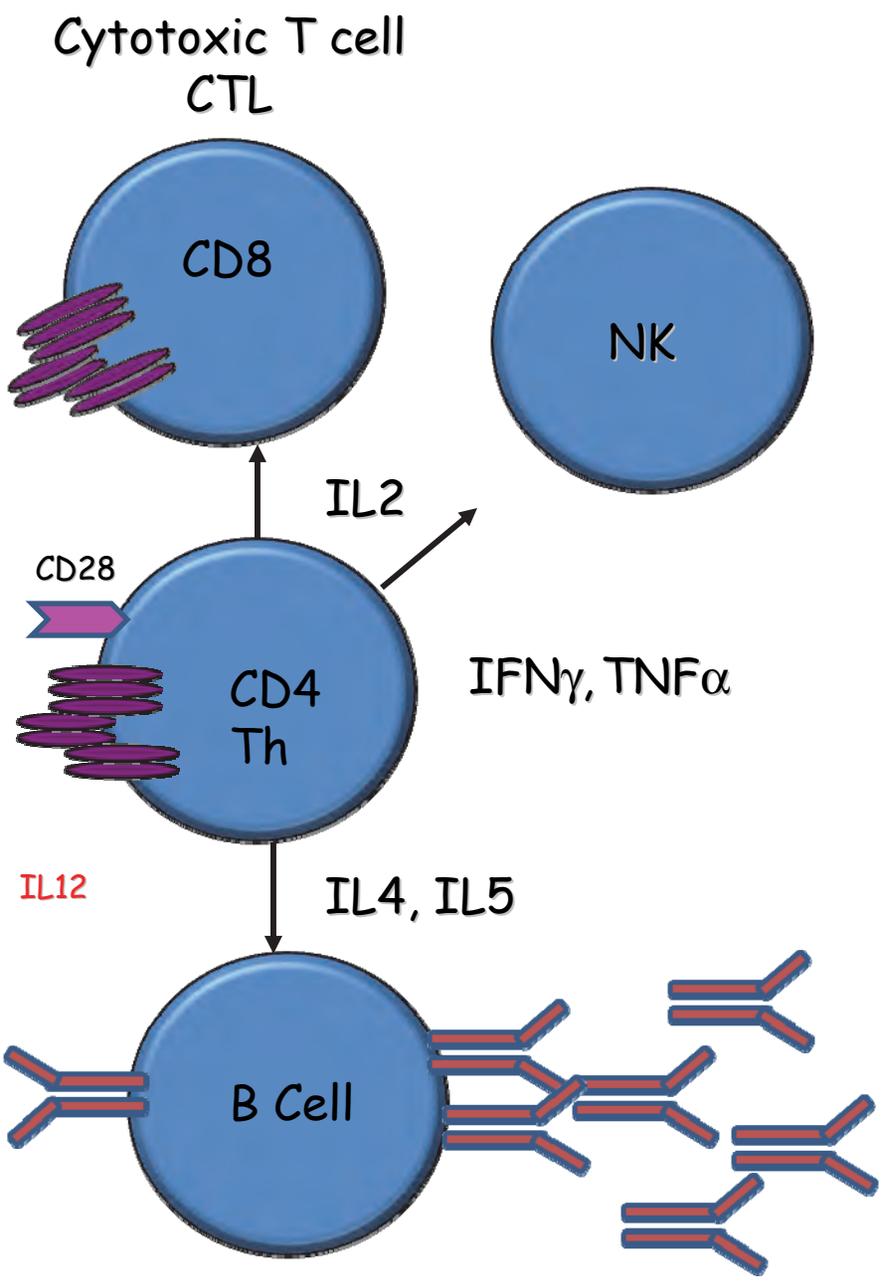


Glioblastoma





Antigen Presenting Cell
(Dendritic Cell, Macrophage)



Cytotoxic T cell
CTL

NK

CD8

IFN γ , TNF α

CD4
Th

IL12

IL4, IL5

B Cell

CD28

IL2

GM-CSF

VEGF

CFS-1

Tumor

CD80/86

Inflammation (Immunity) and Cancer

Prevent or Treat

- At least 20% of cancers have a preventable infectious component: HPV, HBV, H. pylori
- NK and T cells can eradicate established tumors (renal and melanoma)

Promote

- "Cancer originates in sites of chronic inflammation" Virchow 1863
- Chronic inflammatory cells promote tumor growth (Coussens et al Imm. Rev 2008)
- NSAIDS prevent colon CA
- Hodgkin's disease: Loss of DTH to DNCB and candida (Hersch and Oppenheim - 1963)

Cellular Immunotherapy



3-5 days

Immunotherapy:
cytokines, T cells

Anti-tumor response

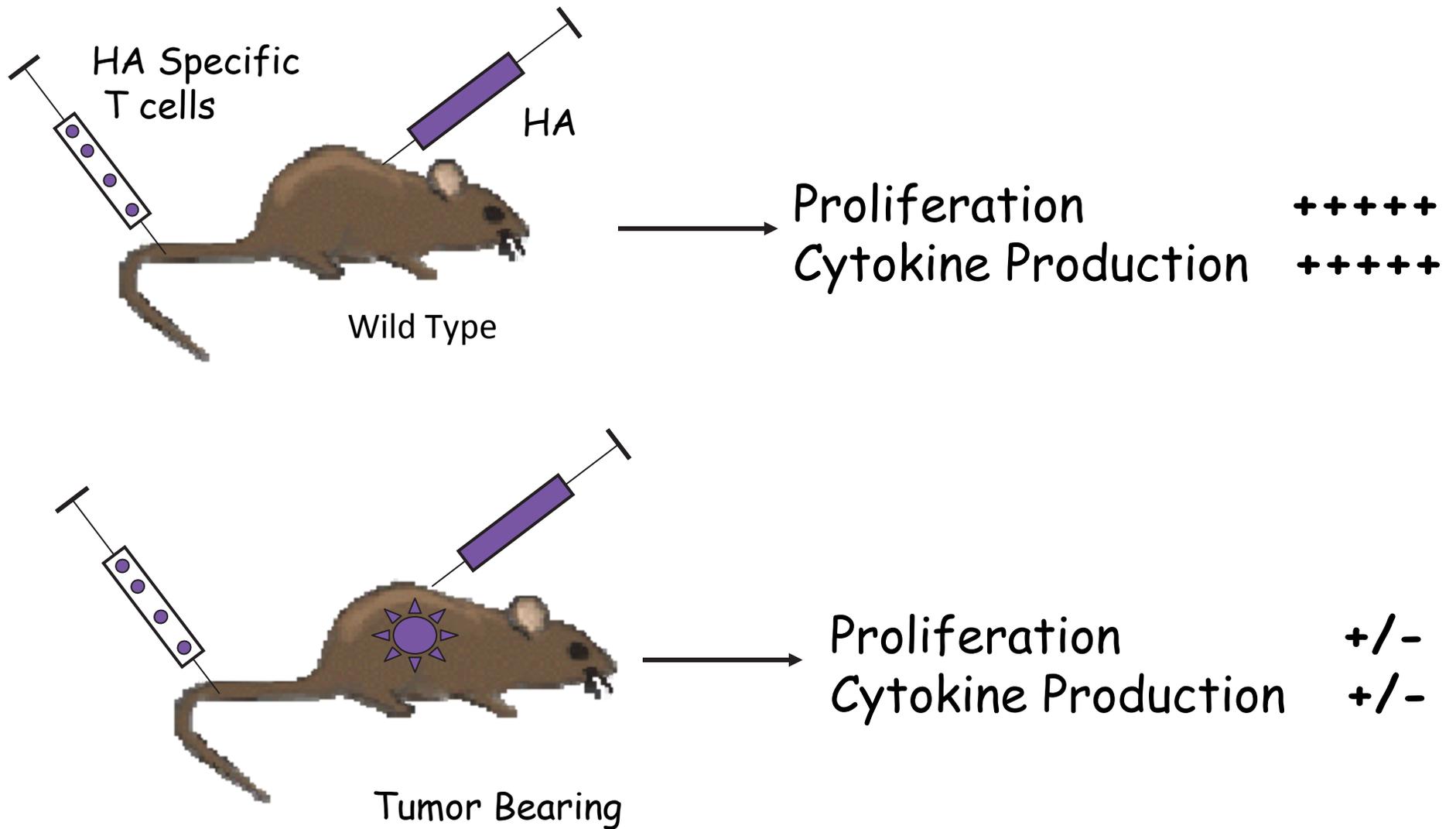
Cancer Patient

Immunotherapy:
cytokines, T cells

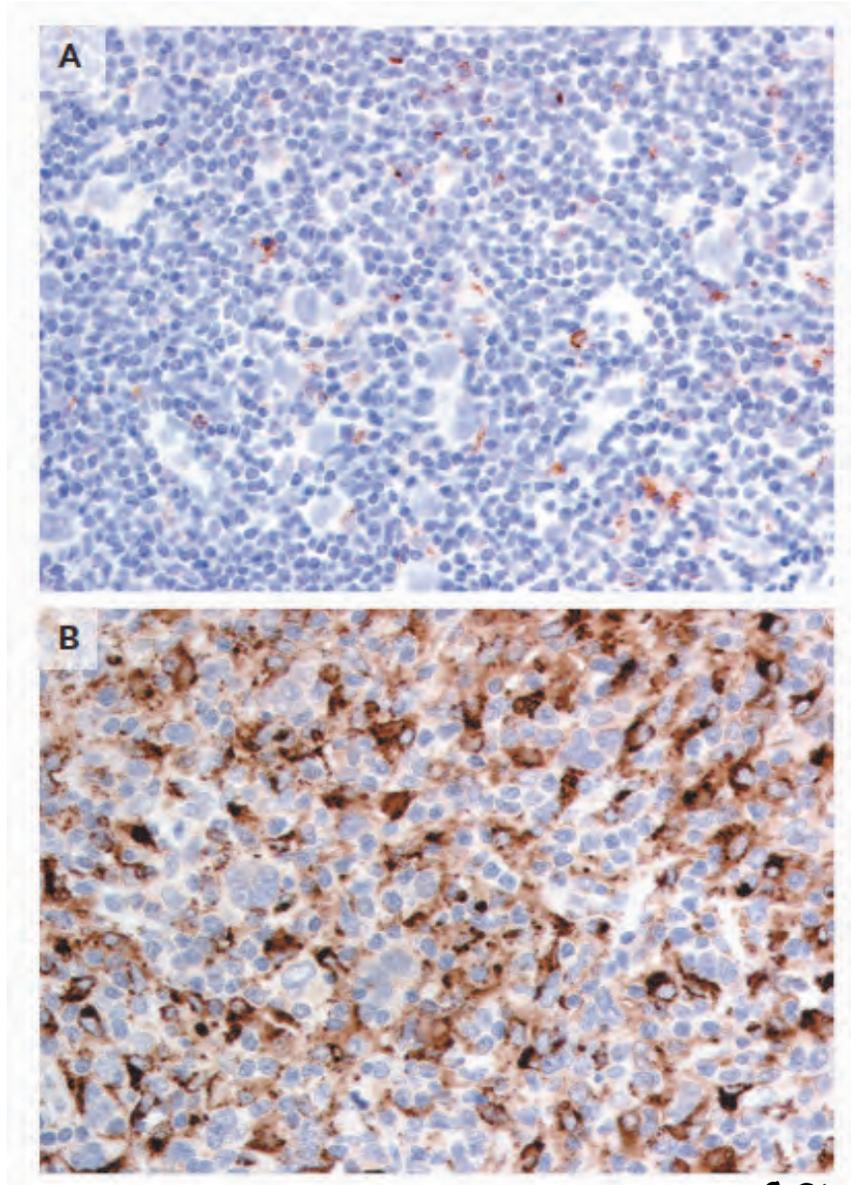
Few Responses

**Immune
Tolerance**

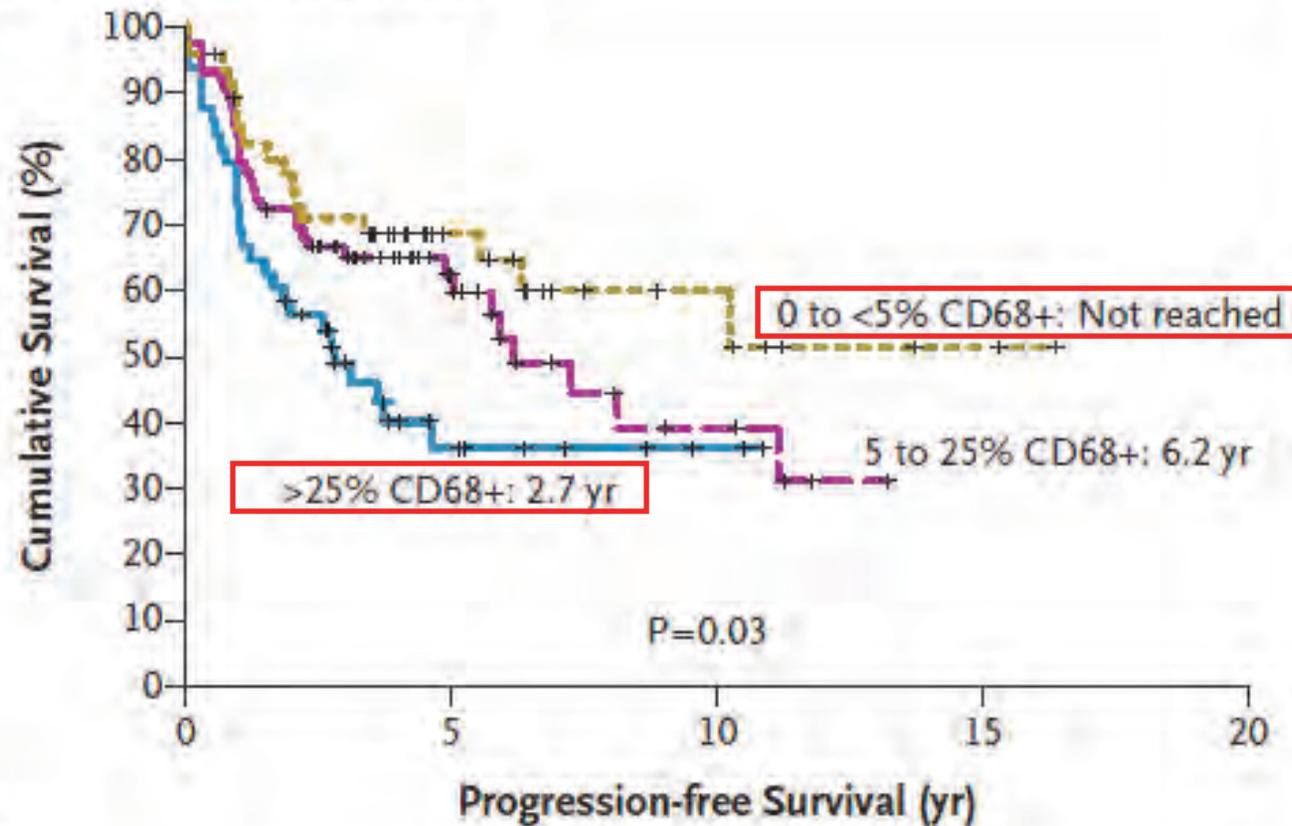
Tumor Induced Tolerance



Tumor Associated Macrophages (TAM) in Hodgkins Lymphoma



A Median Progression-free Survival



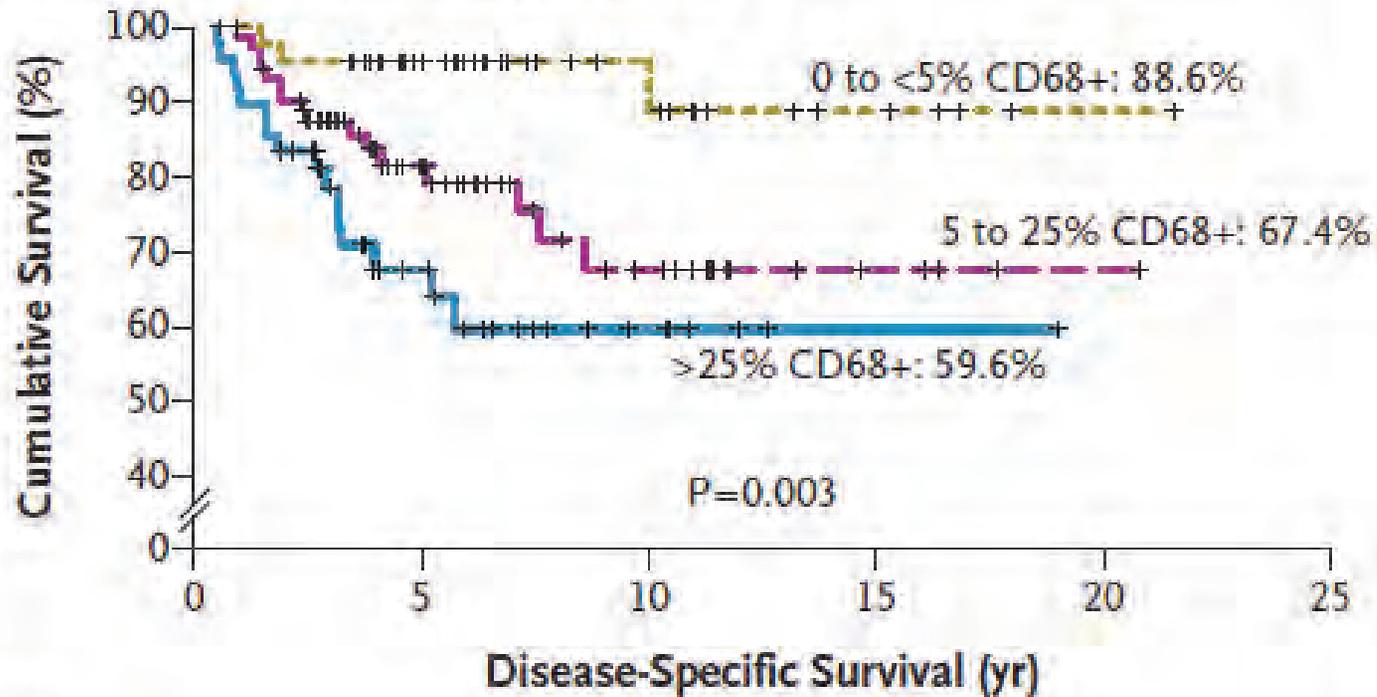
No. at Risk

CD68+ Group	0	5	10	15	20
0 to <5% CD68+	46	17	7	2	0
5 to 25% CD68+	72	21	6	0	0
>25% CD68+	48	9	2	0	0

Validating cohort , n=166
 Screening cohort, n=130

C Steidl, et al, NEJM, 362:10, 2010
 British Columbia + U Nebraska

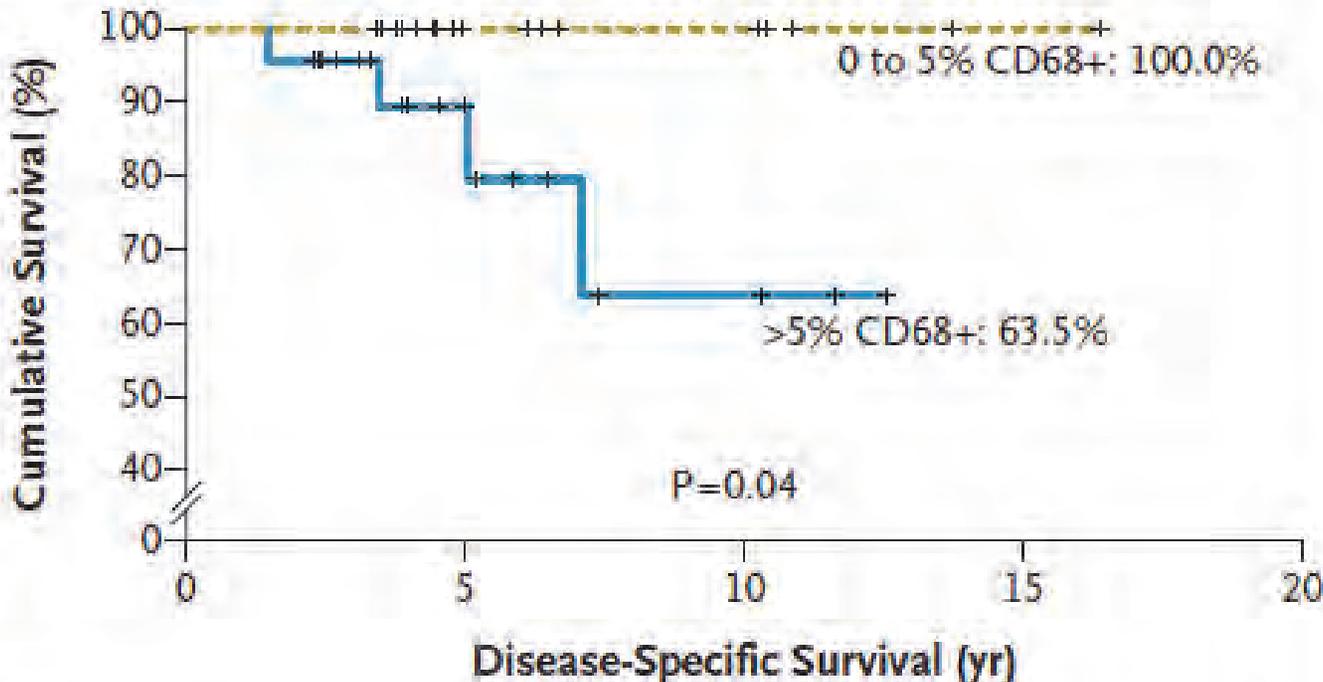
B 10-Yr Disease-Specific Survival in All Patients



No. at Risk

0 to <5% CD68+	46	28	13	5	1	0
5 to 25% CD68+	72	33	14	4	1	0
>25% CD68+	48	19	6	1	0	0

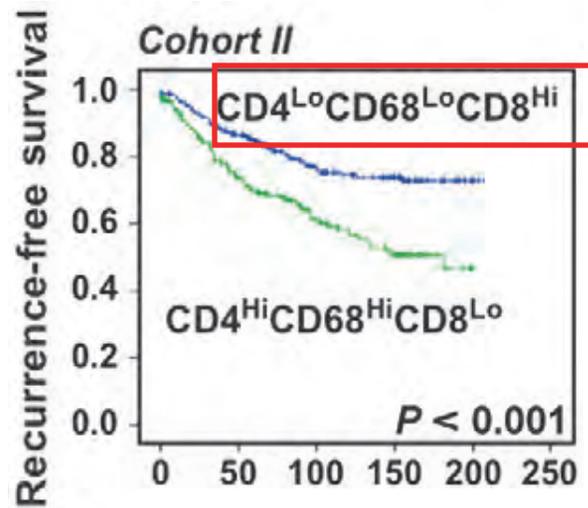
C 10-Yr Disease-Specific Survival in Patients with Limited Disease



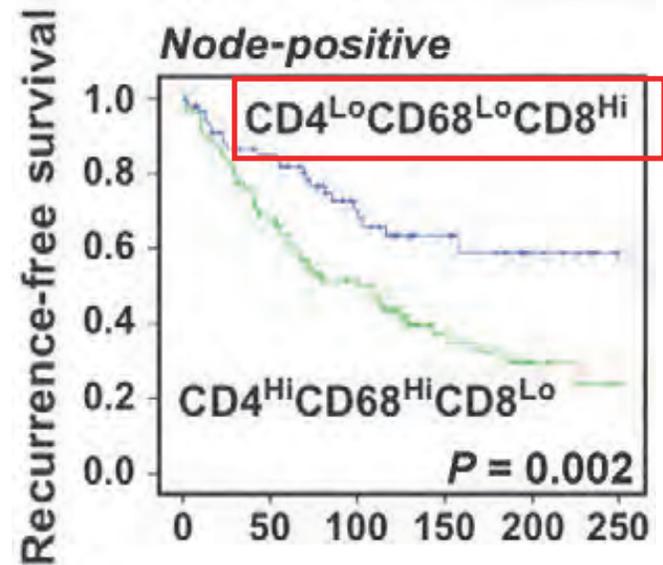
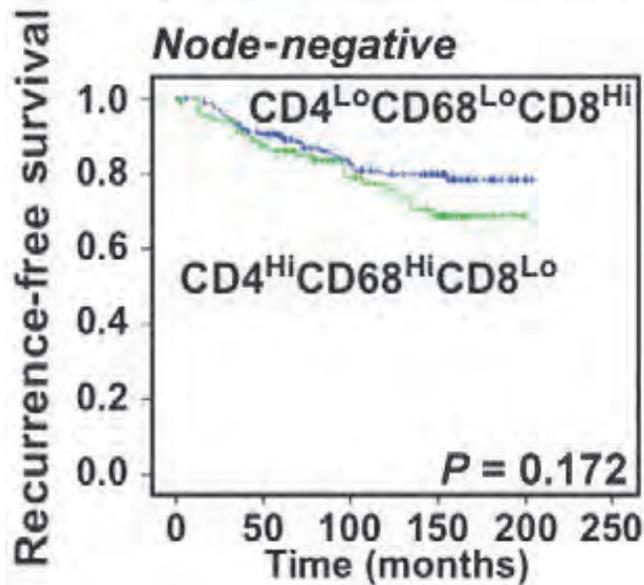
No. at Risk

0 to 5% CD68+	18	9	6	1	0
>5% CD68+	23	10	3	0	0

Immune Infiltrates and RFS in Breast Cancer



n=498
Validating Cohort

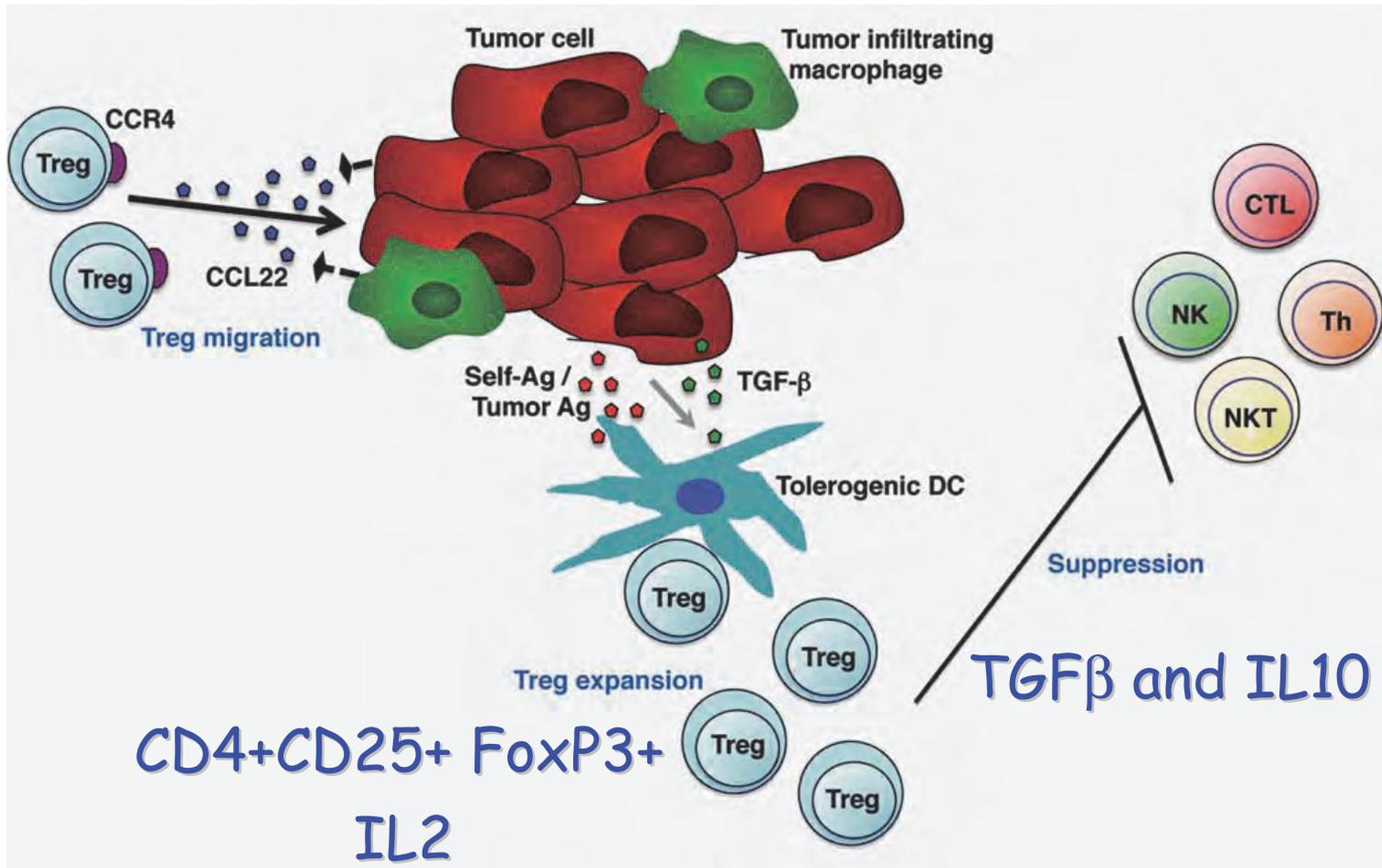


Mechanisms of Tumor Escape

1990-2010

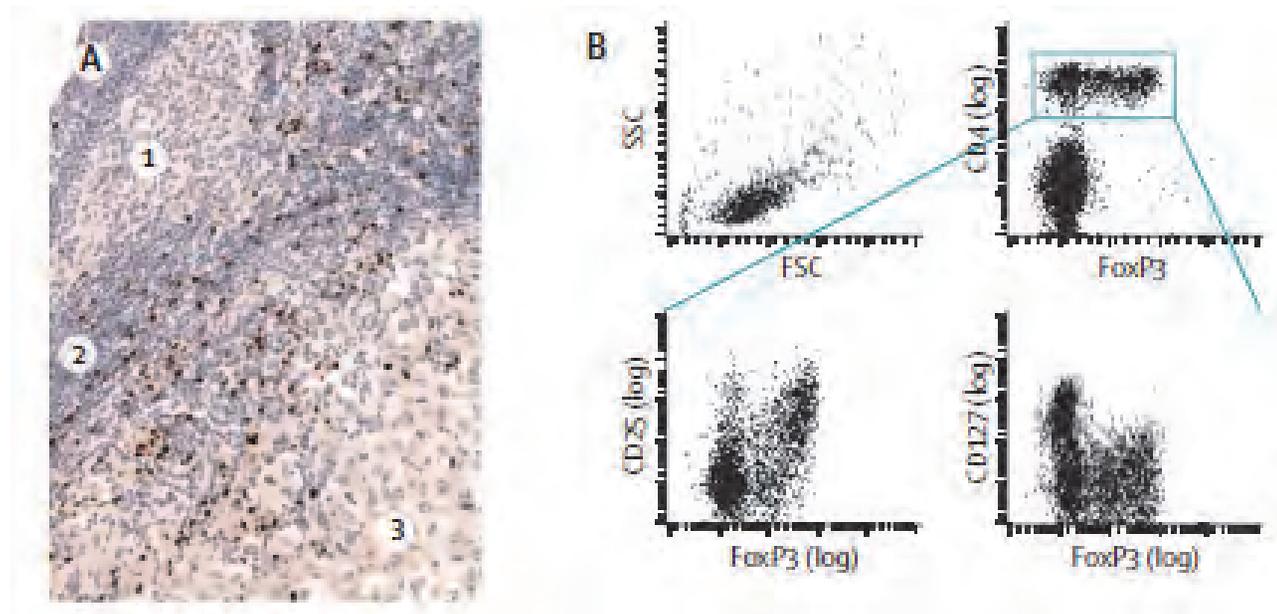
- Factors produced by the tumors
 - TGF β , IL10 ,IL17
- Intrinsic changes in the tumor
 - Loss of MHC (immuno-editing)
 - Lack of co-stimulatory signals B7.1, B7.2
 - Expression of checkpoint signals B7H1, B7H4 (CTLA4), PD-1
- Immunosuppressive cells stimulated by tumors
 - Regulatory T cells (T-regs)
 - Plasmacytoid dendritic cells producing IDO
 - Myeloid-derived suppressor cells (MDSC)
 - Tumor Associated Macrophages (TAM)

Regulatory T cells in Cancer



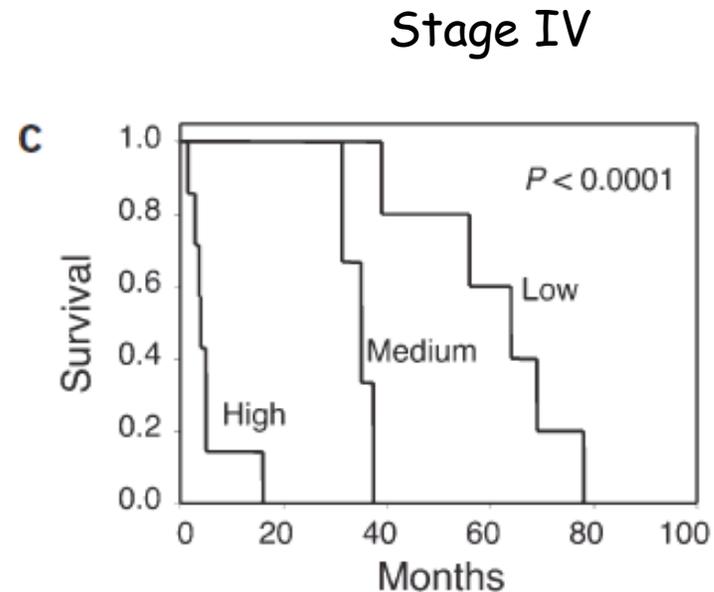
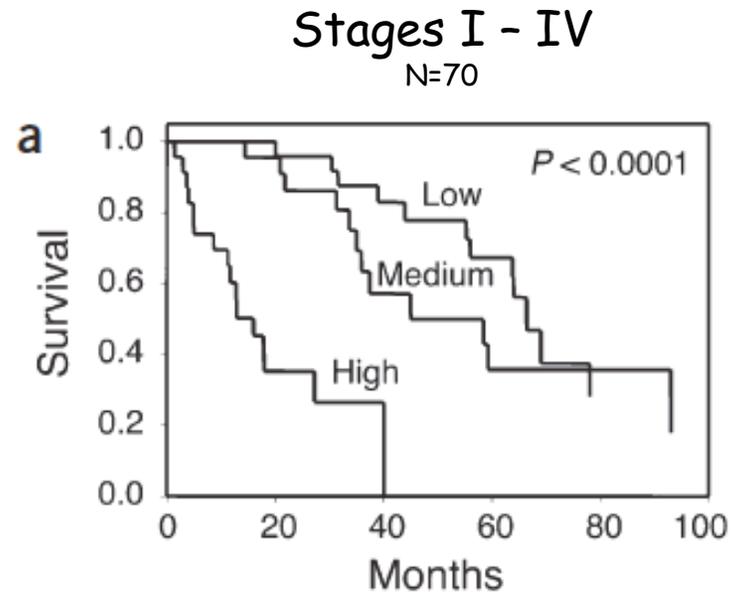
Nishikawa and Sakaguchi, Int. J. Cancer 127 (2010)

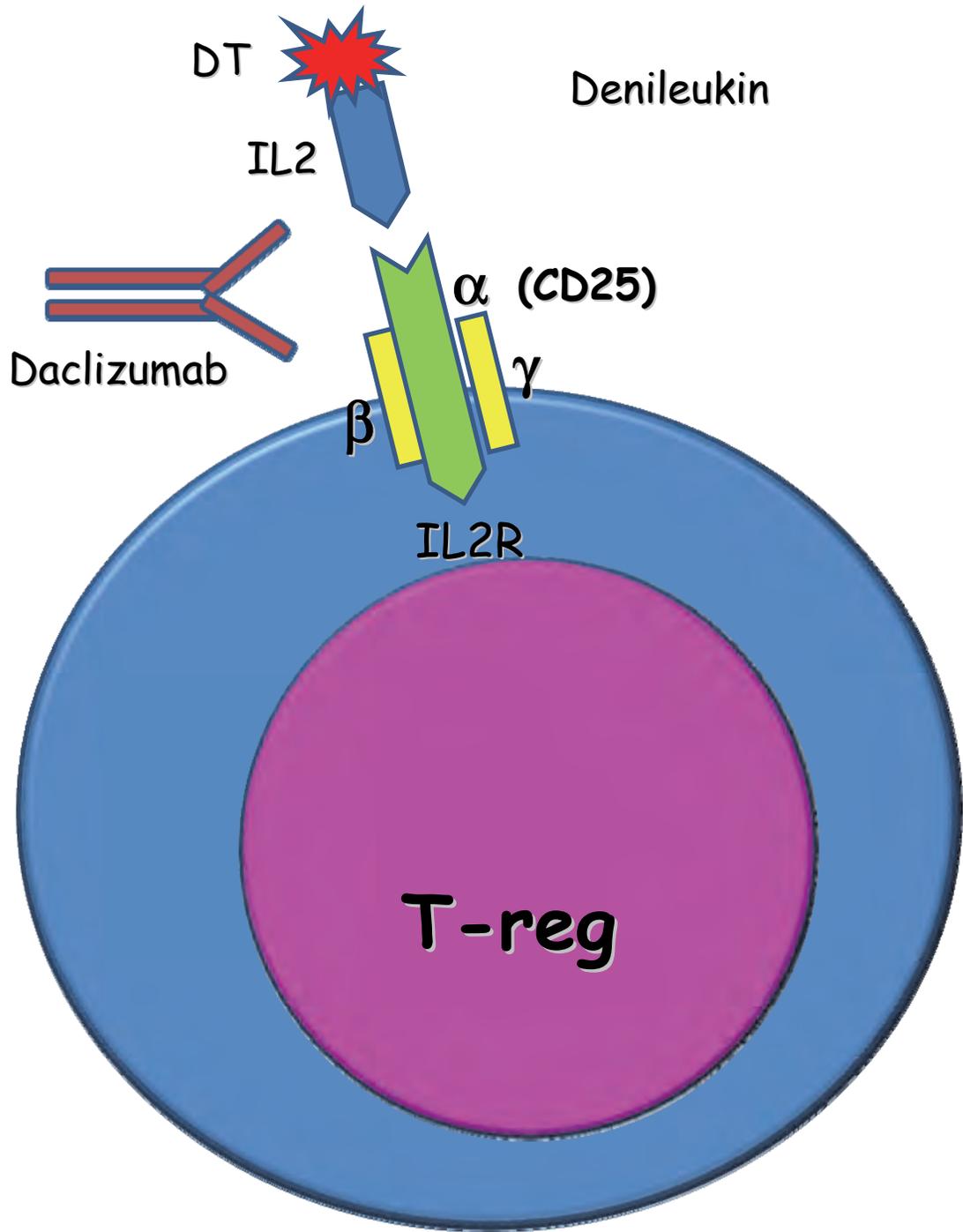
Regulatory T cells (T-Regs) in Melanoma



Jacobs JFM et al, The Lancet 13, 2012

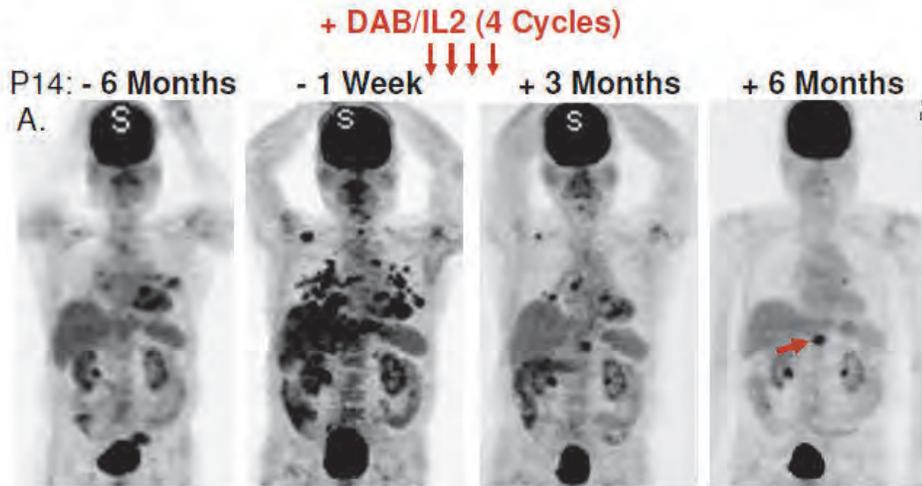
T-Reg Infiltration and Survival in Ovarian CA





Denileukin Difitox in Melanoma

S. Telang et al BioMed Central 11, 2011



Denileukin Difitox in NHL

NH Dang et al, JCO 20, 2004

CR + PR = 24%

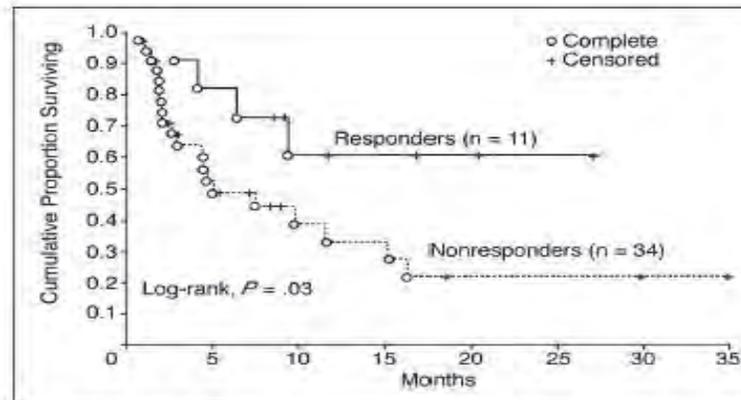
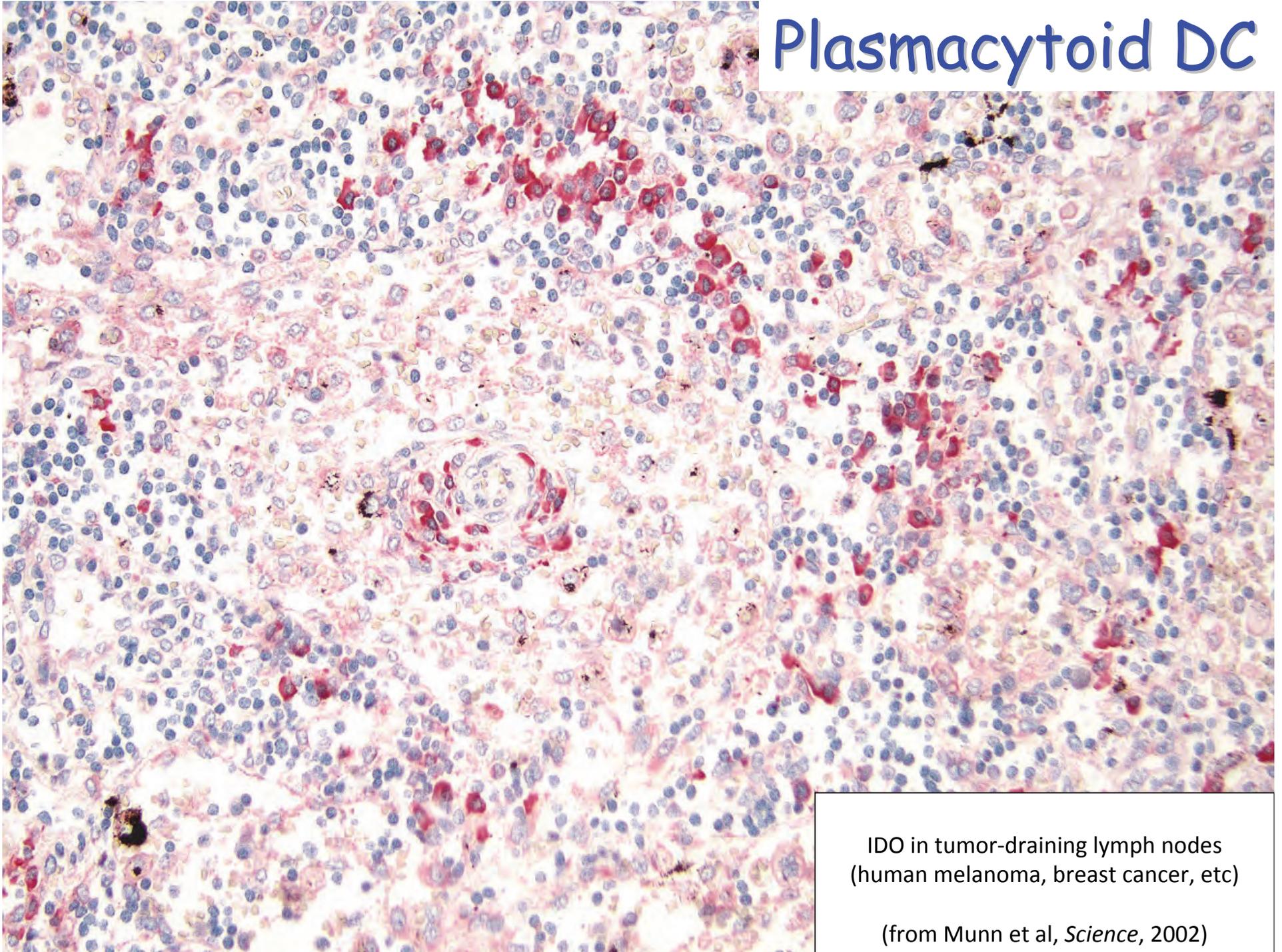


Fig 2. Overall survival comparison between patients responding and not responding to denileukin difitox, based on Kaplan-Meier estimates.

Plasmacytoid DC

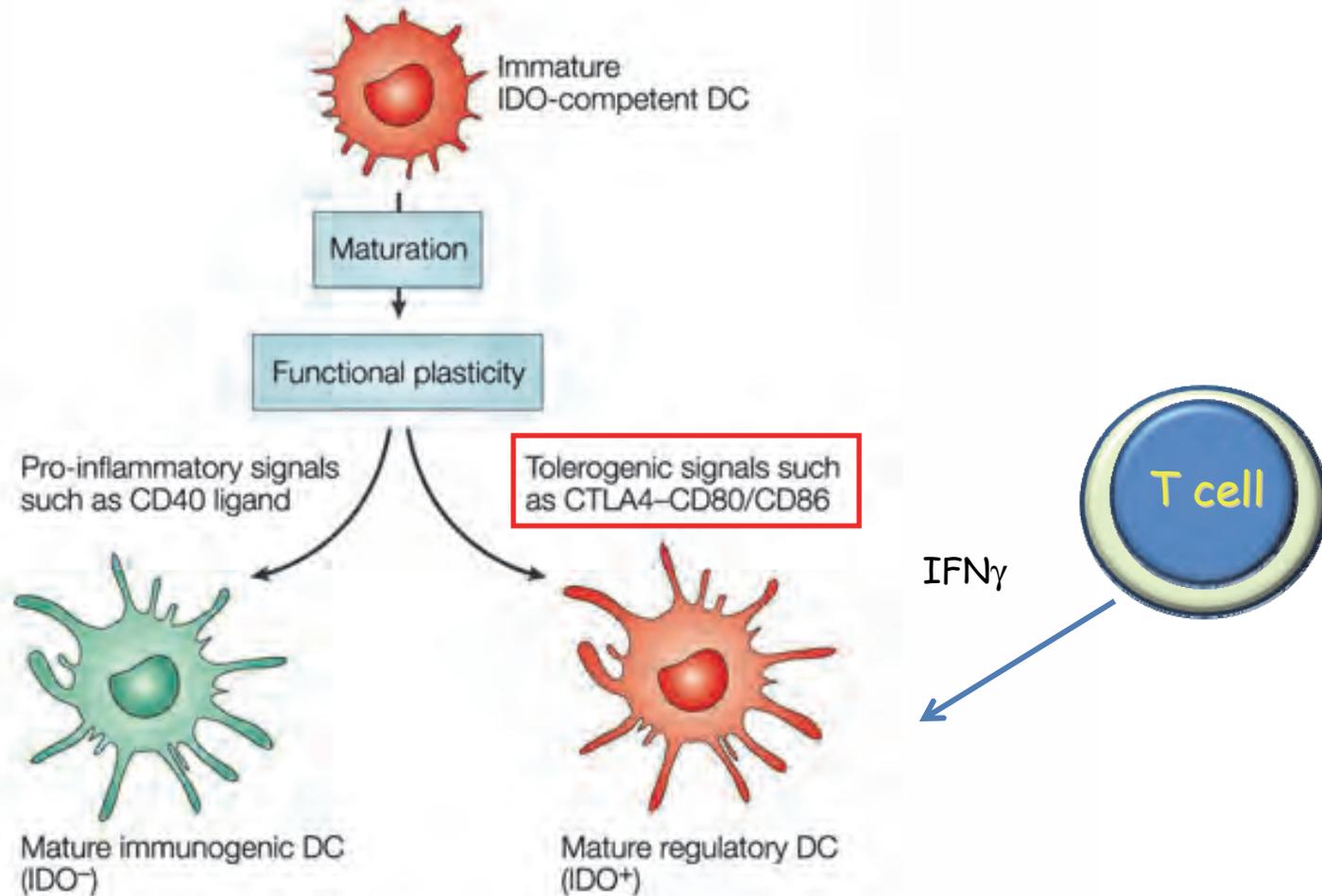


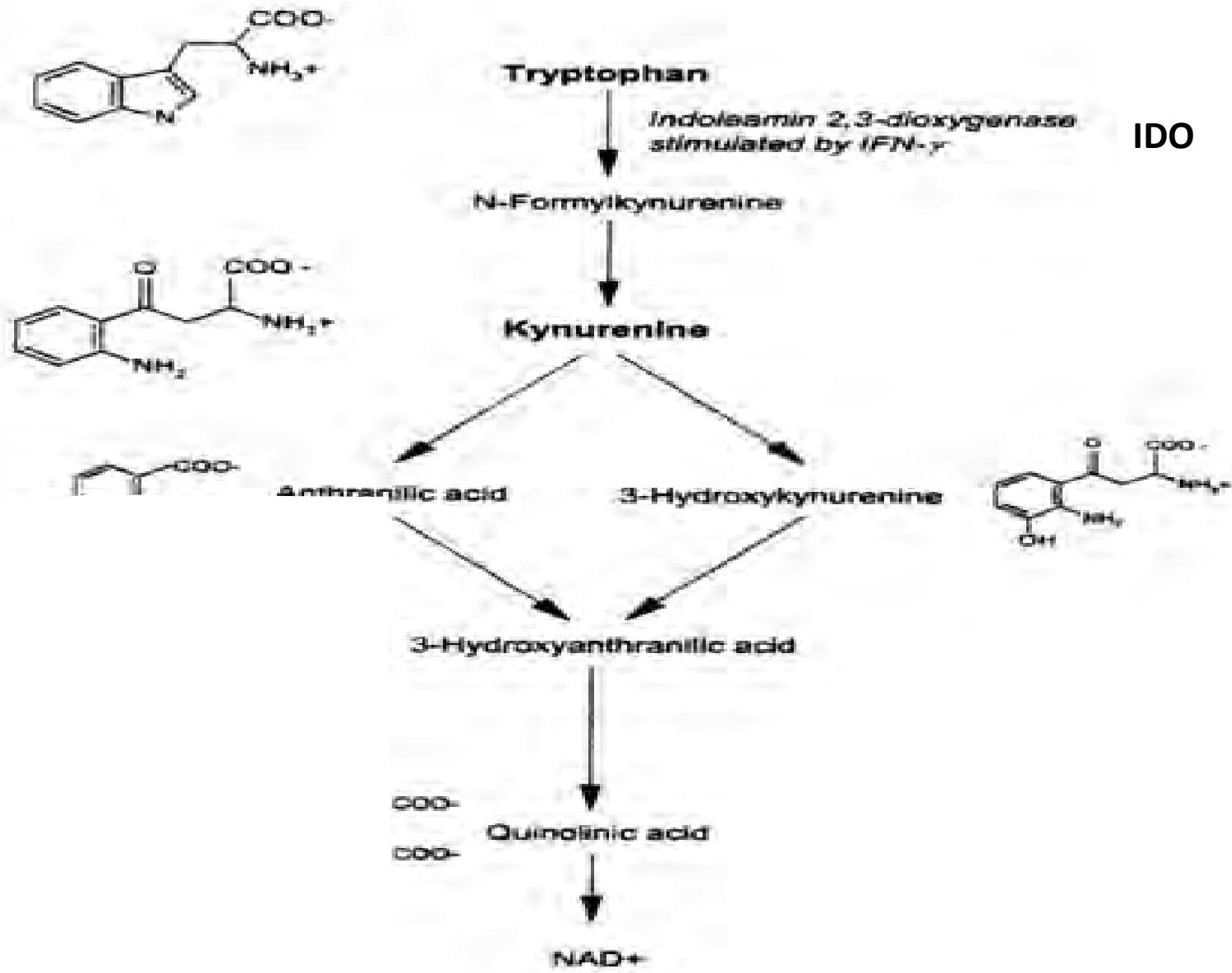
IDO in tumor-draining lymph nodes
(human melanoma, breast cancer, etc)

(from Munn et al, *Science*, 2002)

IDO (Indoleamine 2,3-dioxygenase)

David H. Munn and Andrew L. Mellor



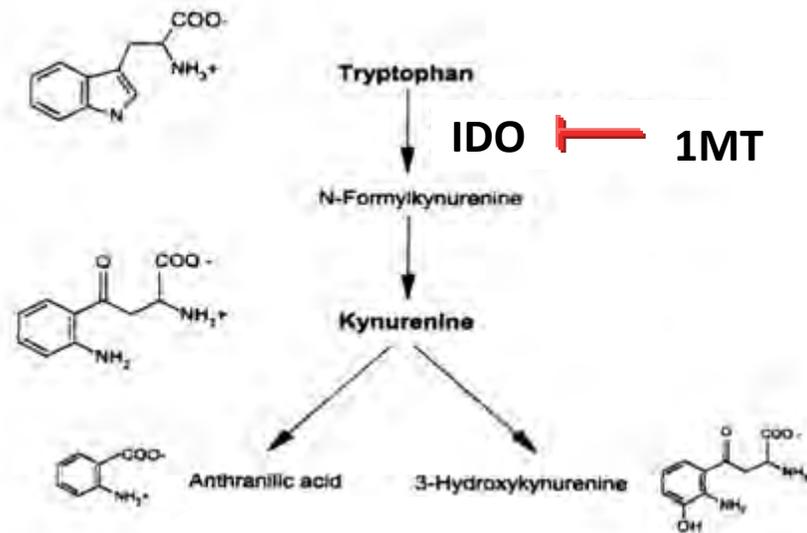
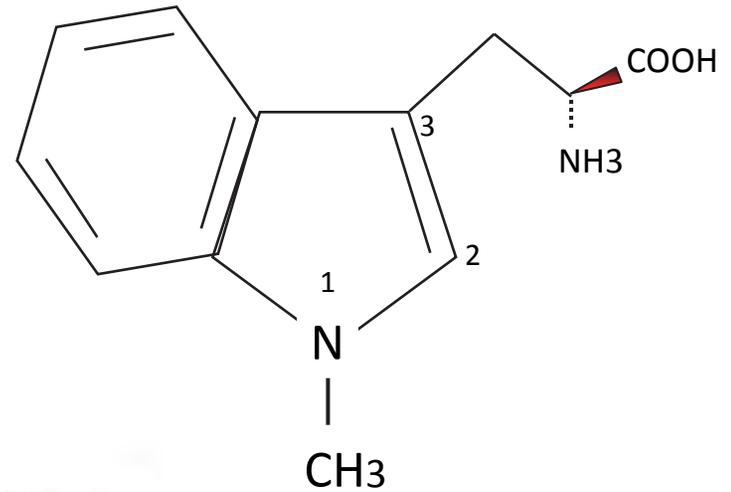


David Munn

Indoleamine 2,3-dioxygenase (IDO)

- IDO depletes tryptophan from the microenvironment
- IDO can create acquired peripheral tolerance *de novo*
- IDO is counter-regulatory (induced by inflammation but suppresses immune responses)
- IDO regulates both innate and adaptive responses
 - Control of local inflammation, IL-6, etc
 - **Activates Tregs**

IDO-inhibitor drug (NSC-721782):
1-methyl-[D]-tryptophan





Phase I Trial of 1-methyl-D-tryptophan

PI: Scott Antonia MD PhD
Co PI: Hatem Soliman MD
Dan Sullivan MD

Moffitt Cancer Center/Southeast
Phase II Consortium

Chuck Link MD
Nick Vanahanian MD
William Ramsey MD PhD

NewLink Genetics Inc

- Hypophysitis seen in 3 patients
this was a recall toxicity associated with
prior ipilimumab therapy (anti-CTLA4
mAb)
- otherwise 1MT was well tolerated

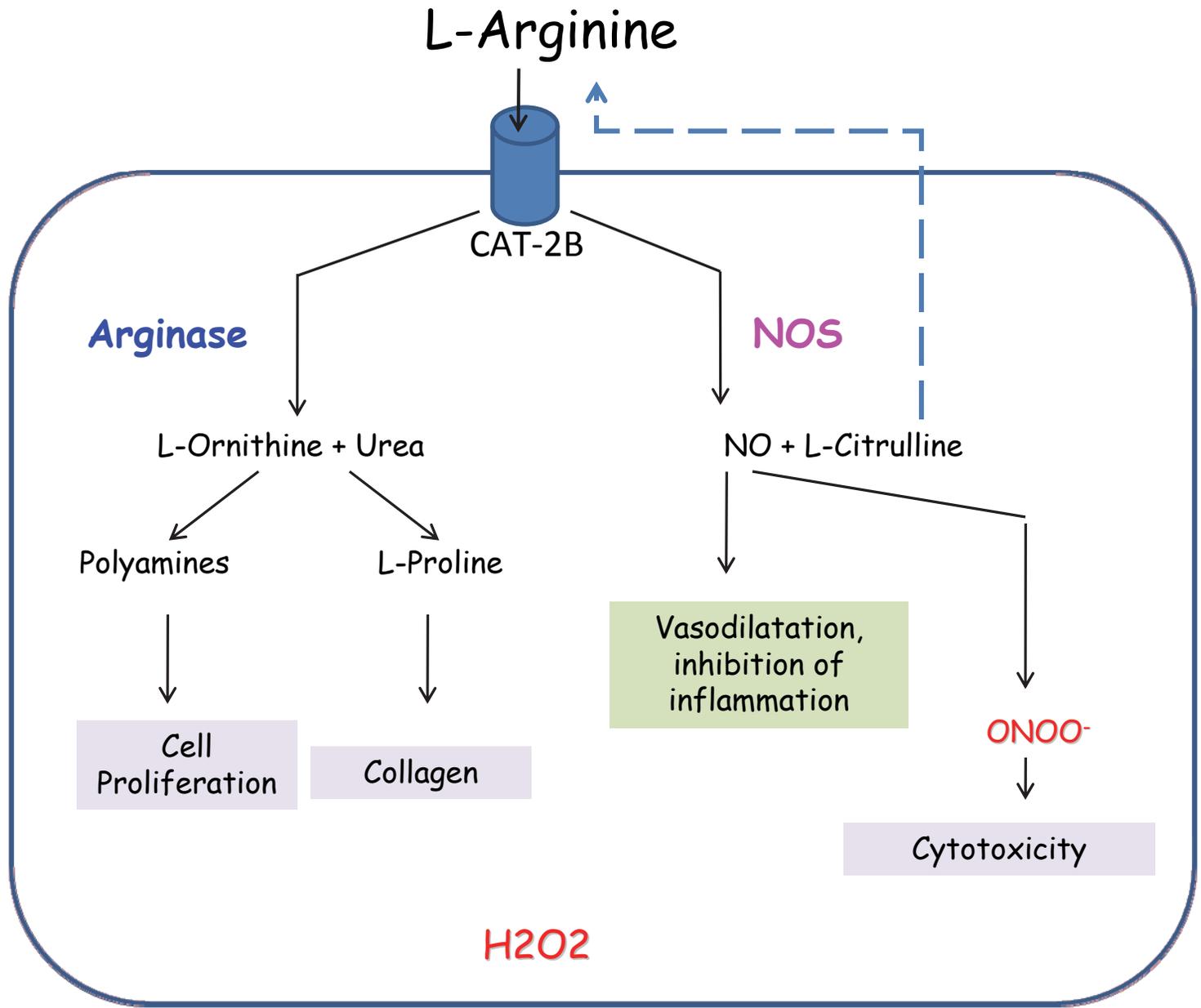
Myeloid-derived Suppressor Cells (MDSC) Tumor Associated Macrophages (TAM)

- CD11b+,GR1+ myeloid cells H&N pts (R. Young) and tumor-bearing mice (D. Gabrilovich)
- Immature DC to mature granulocytes:
CD11b+,CD33+,CD68+,IL4r α
- Increased in Renal Cell Carcinoma (A. Zea), Pancreatic CA (O. Finn), Head and Neck (S Chen), Breast CA (S. Ostrand-Rosenberg), Colon CA (R. Kiessling)
- Produce Arginase 1, Nitric Oxide or H₂O₂ (Bronte E., Ochoa A, Ostrand-Rosenberg S)

Effect of MDSC on OT-1/OT-2 T cells

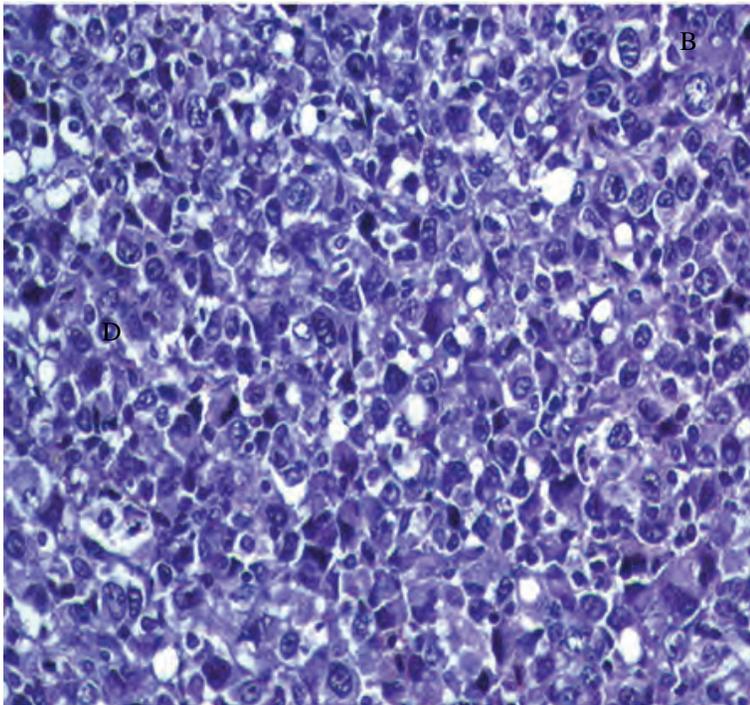
	No MDSC	Plus MDSC	Plus non-MDSC
No Stimuli	33	48.5	88.5
OVA 257-264	20,713 →	217	23842
OVA 323-339	17,073 →	164	15159

Inhibit IFN γ production and CD3 ζ chain expression
Decrease the therapeutic efficacy of radiation and chemotherapy

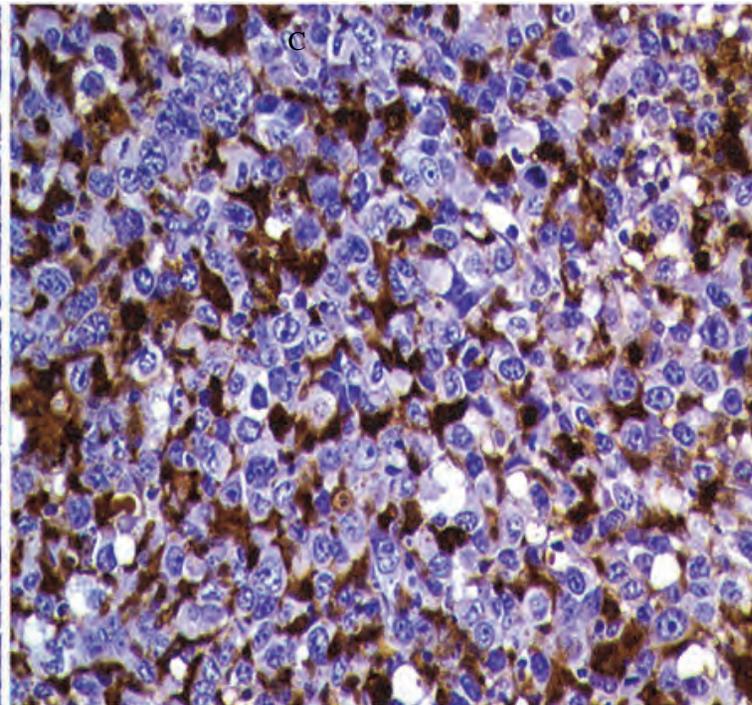


Arginase I Expression in 3LL Tumor

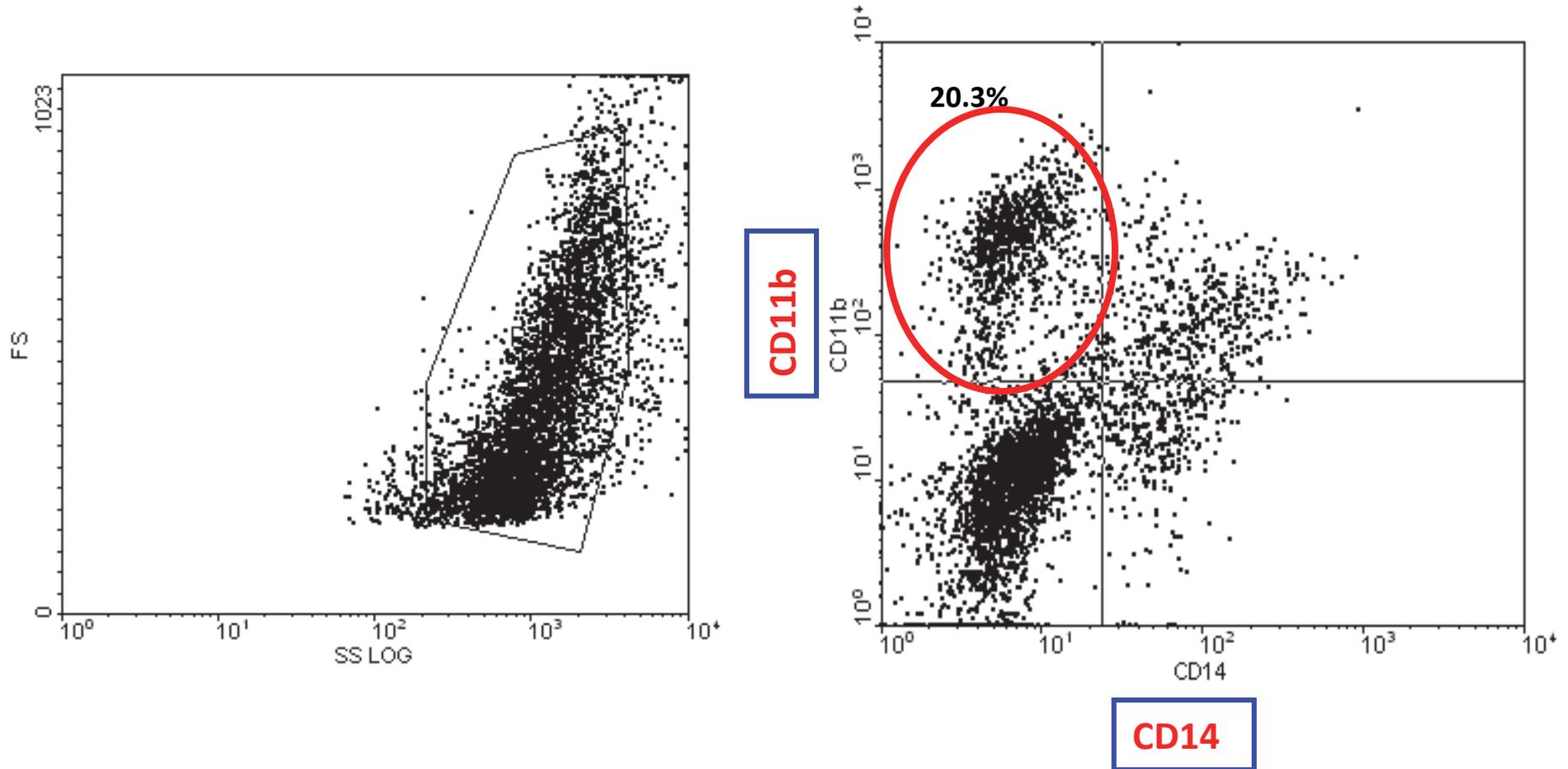
Isotype



Arginase I



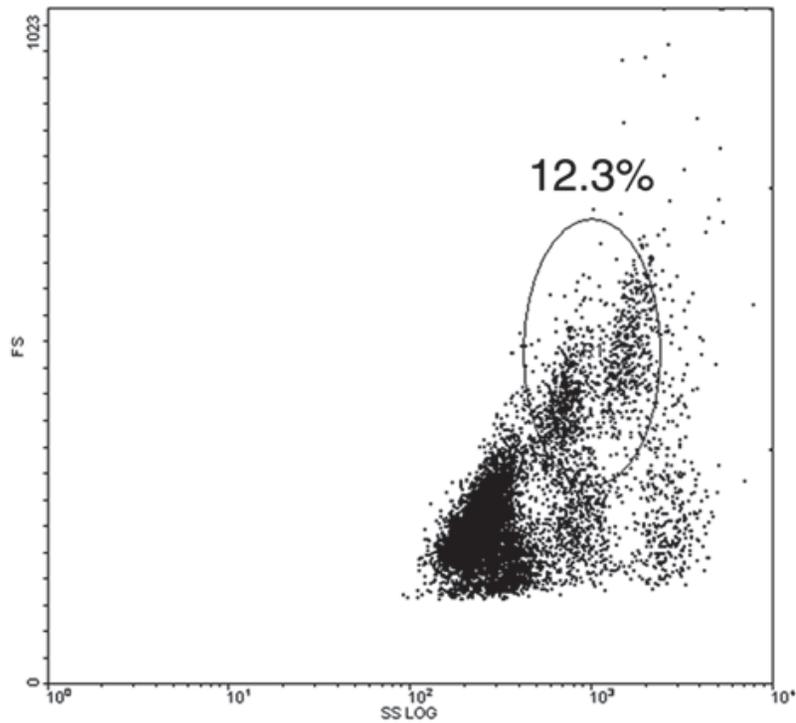
MDSC Infiltrating RCC



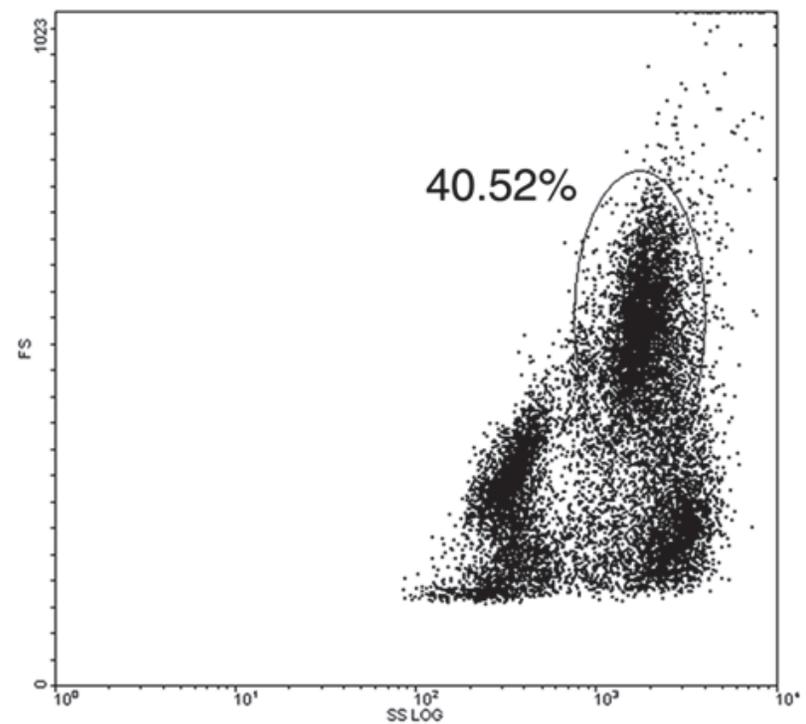
MDSC in RCC Patient

B

Normal Control

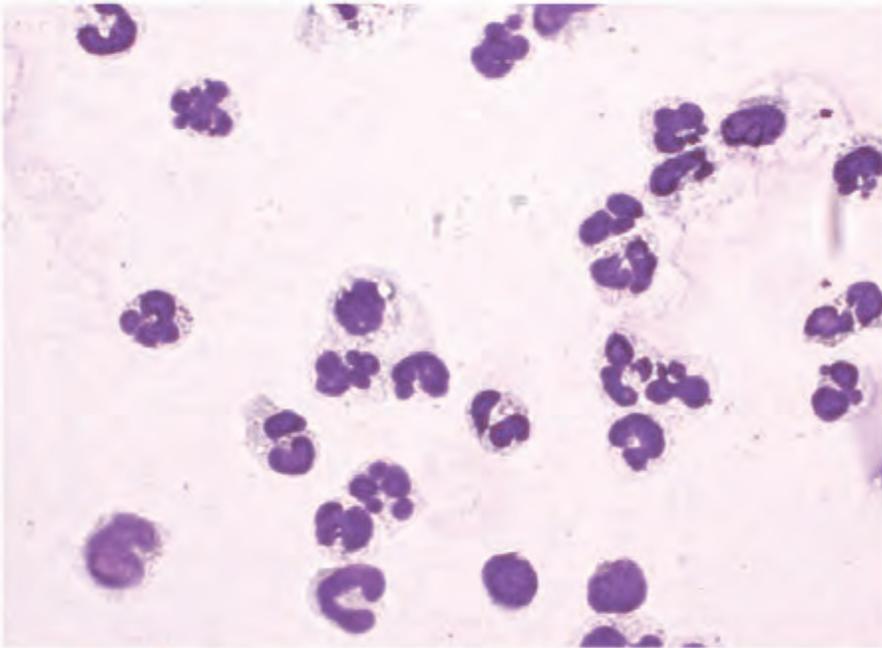


Patient



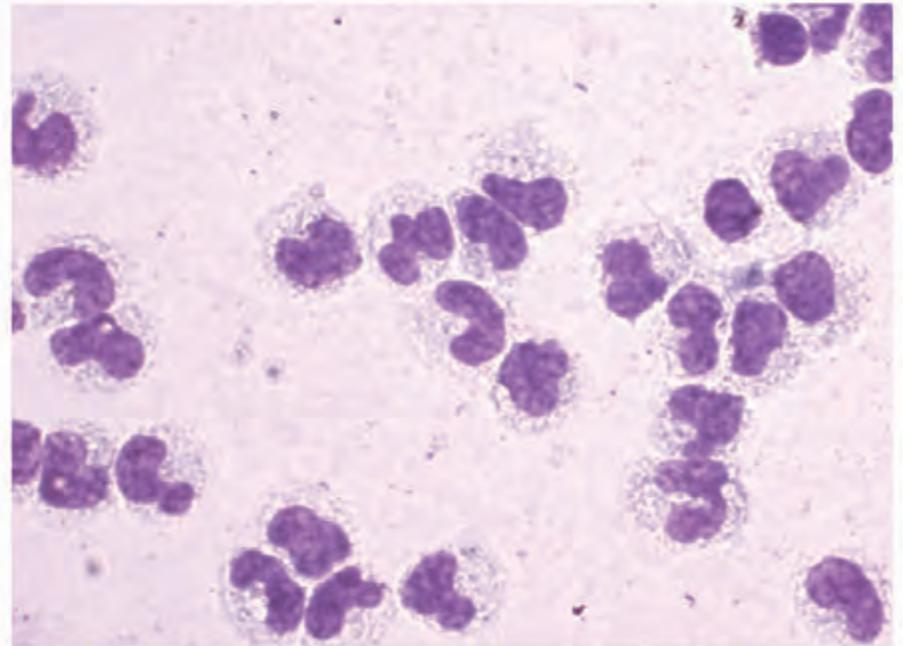
MDSC

CD11b⁺/CD14⁻



Macrophages

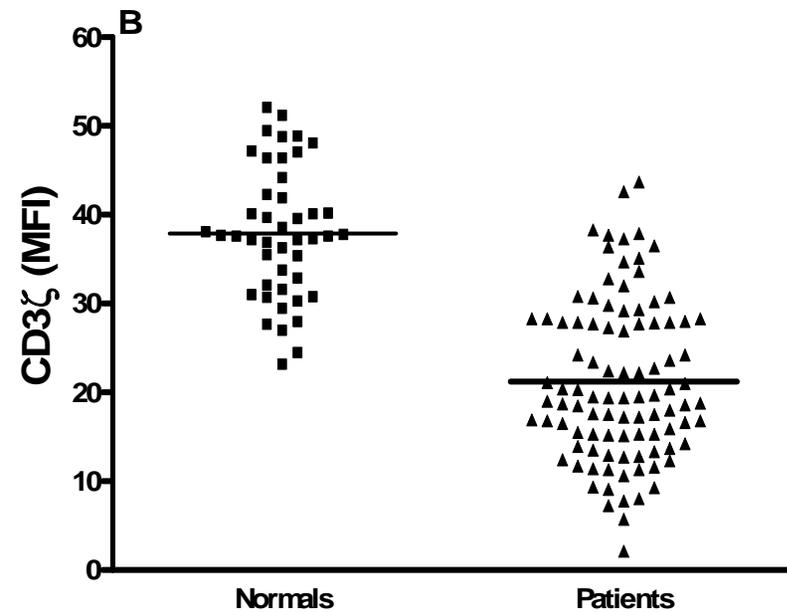
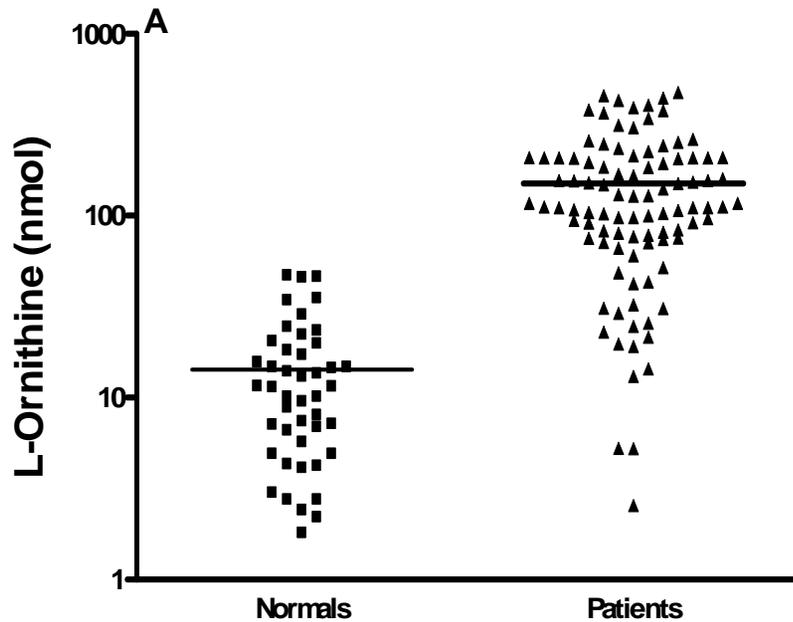
CD11b⁺/CD14⁺



Arginase Activity in RCC Patients

Arginase Activity

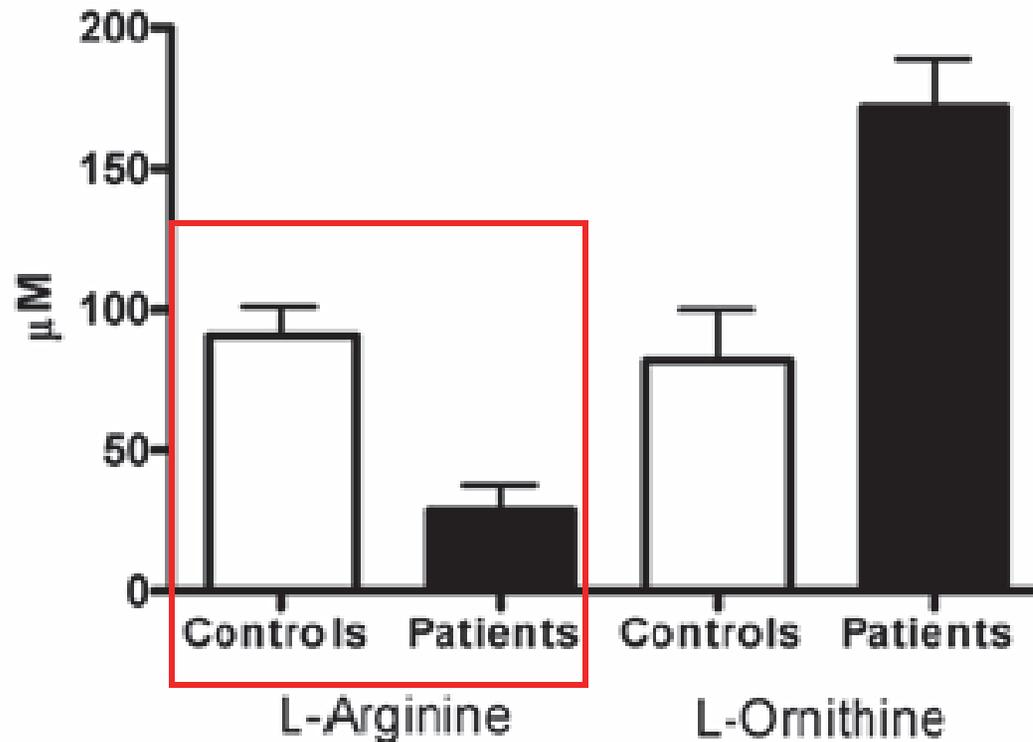
CD3 ζ Chain Expression



Zea et al.

Arginine and Ornithine in Plasma of RCC Patients

D

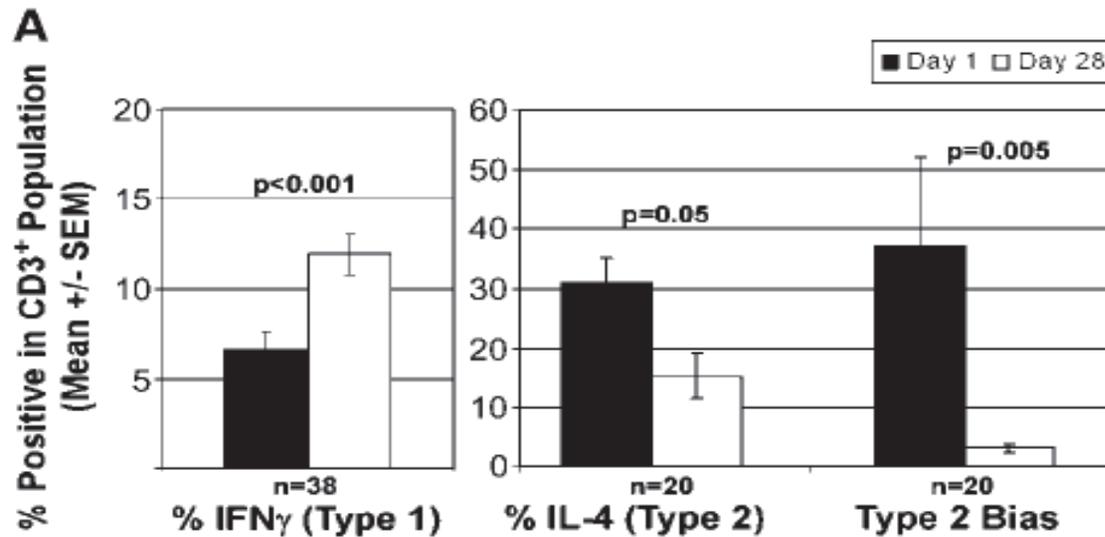
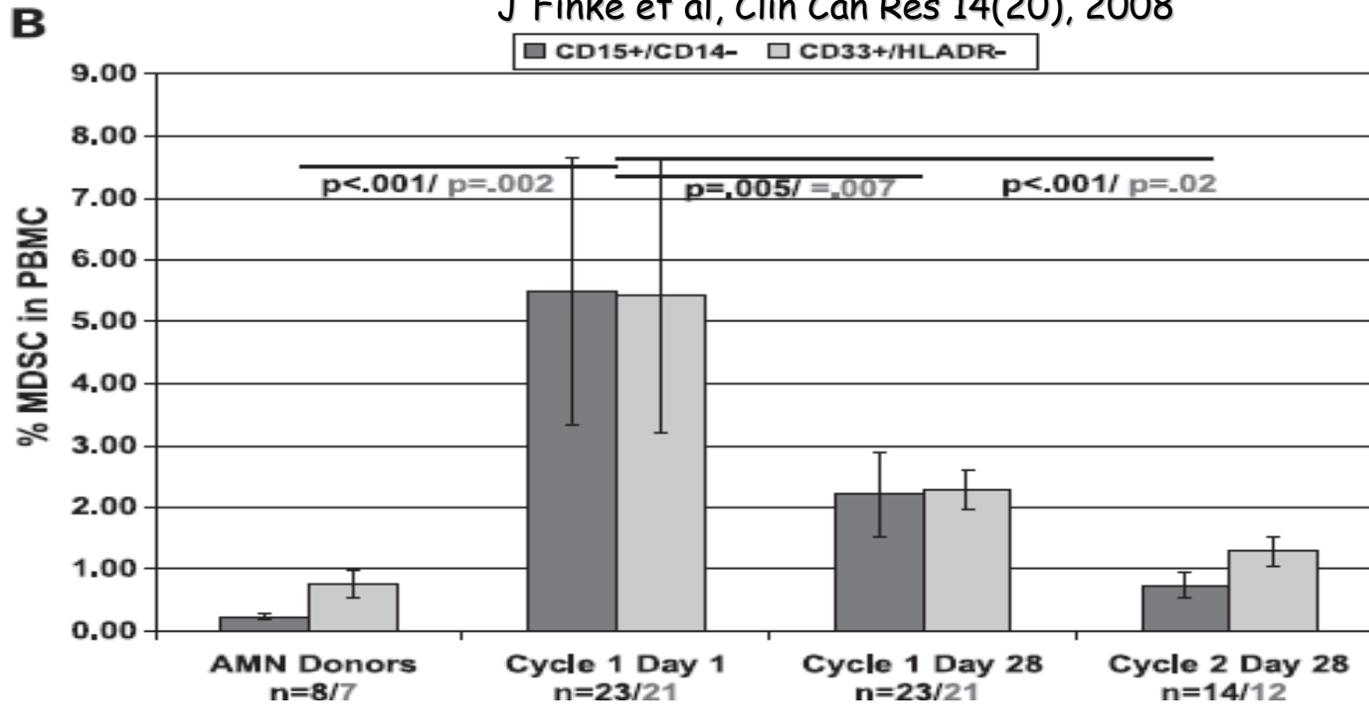


Blocking MDSC

- Arginase inhibitors: Nor-NOHA, BEC and ABH - D. Christiansen
- Tyrosine kinase inhibitors - Sunitinib - J. Finke
- PDE5 inhibitors (Viagra and Cialis): I. Borrello
- NOS2/Arginase inhibitors (nitroaspirin) - E. Bronte
- All-Trans-retinoic acid (ATRA) D. Gabrilovich
- Anti-CD11b - D. Denardo

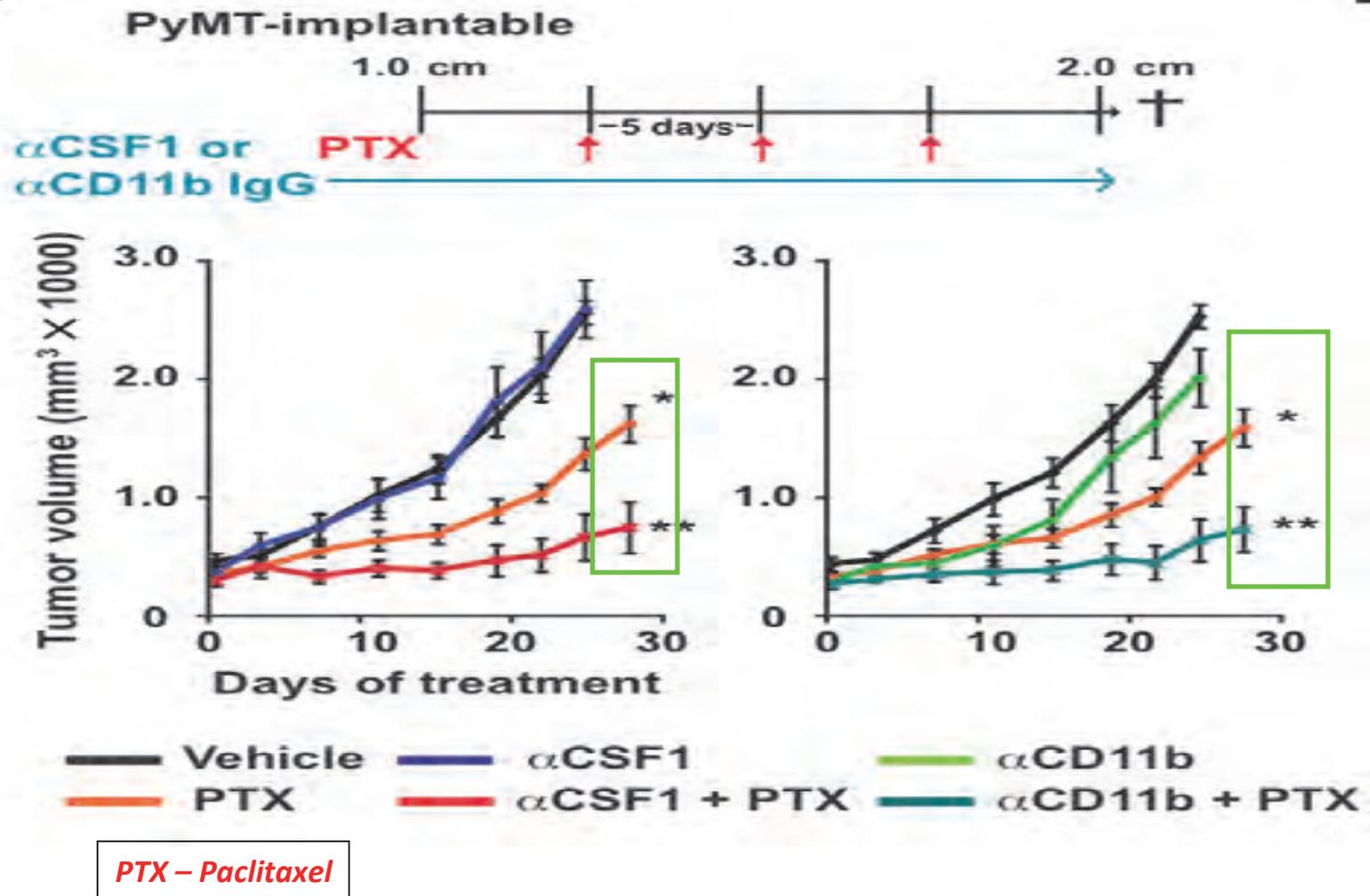
Sunitinib and MDSC in RCC

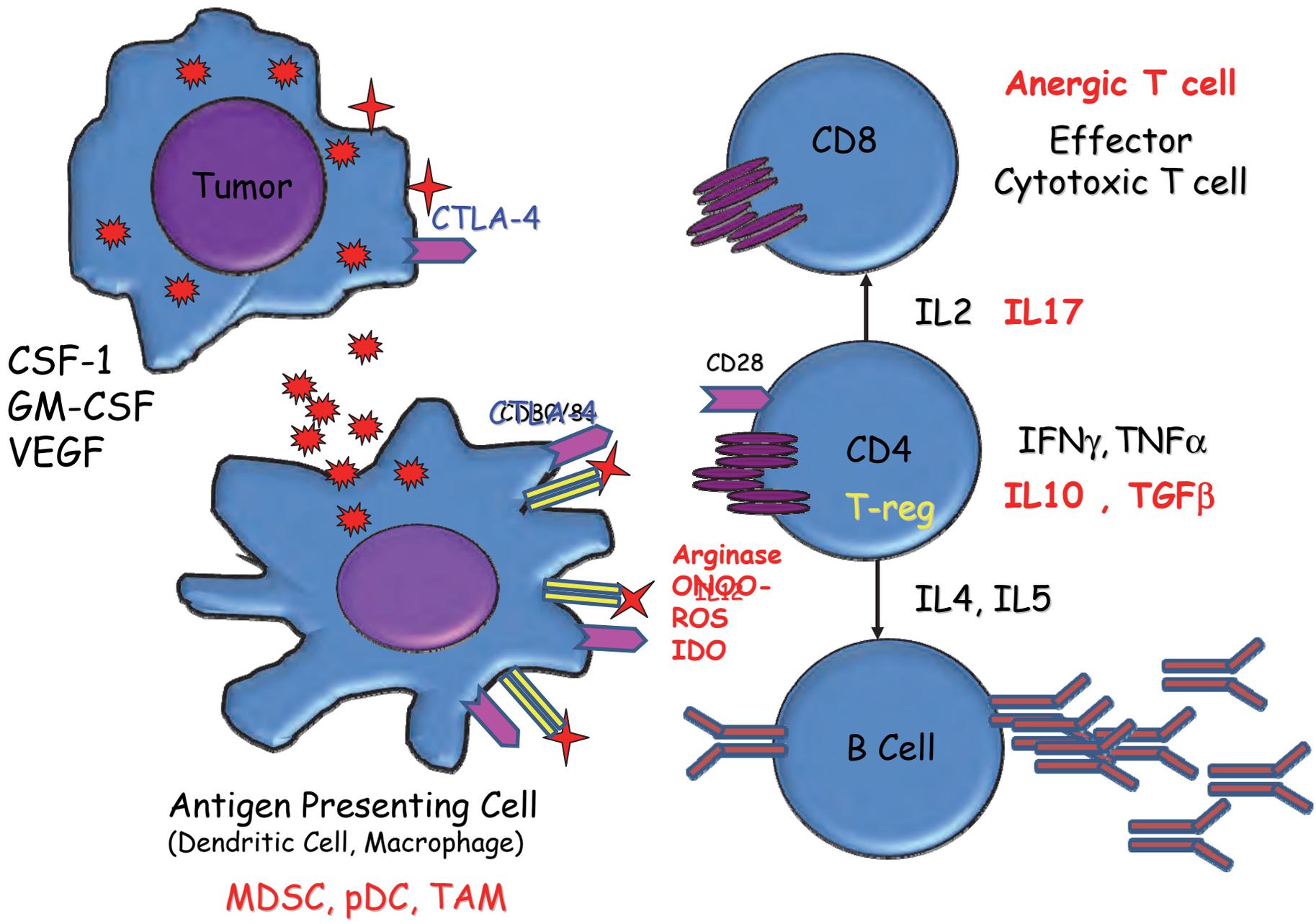
J Finke et al, Clin Can Res 14(20), 2008



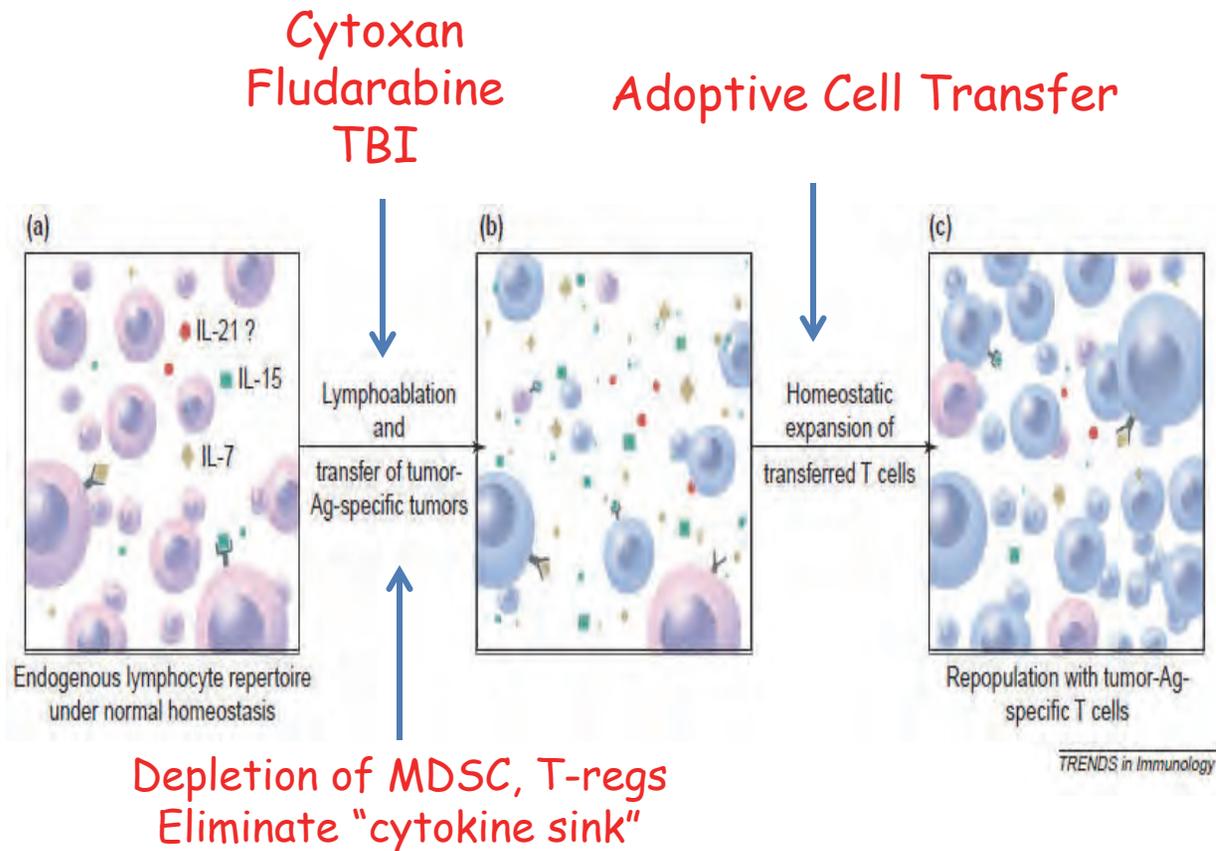
Myeloid Cell Inhibition and Chemotherapy

DeNardo et al. Cancer Discovery 2011





Lymphodepletion in Adoptive Cellular Therapy



Adapted from Klebanoff et al, Trends in Immunol 26,2005

Research Question

- What is the hierarchy and/or sequence of these suppressor mechanisms?
- What type of tumors and tumor-derived signals determine the type of suppressor cell?
- What is the combination of chemo-immuno therapy that will block the immunosuppressive cells and induce a therapeutic anti-tumor response?

Chronic Inflammation : Turning Friend into Foe

