





Developing CART-cells Therapies in Brazil

Prof. Renato Cunha, M.D. - Ph.D.

Bone Marrow and Cell Therapy Clinical Unit - HC-FMRP-USP Advanced Cellular Therapy Laboratory — Center for Cell-based Therapy Ribeirão Preto Medical School — University of São Paulo (USP)



Cellicon Valley May 7th, 2021

Potential Conflict of Interest

Consultant / Advisory Board	Novartis	BMS	Janssen	Libbs	Pfizer	Amgen
Grant / Research Support	CNPq		ASH		DECIT/MS	
Honoraria / Speaker's Bureau			Janssen			
Patent / Stock / Royalties	-					
Affiliation to any Board of Directors or Council	SUPERA Parque					
Off-label medications use discussing	_					

The views expressed are my own and do not represent the opinion of The Clinical Hospital and The Center for Cell Therapy of FMRP-USP

How to develop a CAR T-cell platform in low-middle income countries?

- Restricted budget
- Restricted human resources to develop new technologies
- Delay to define regulatory aspects of advanced cell therapy
- Establish new GMP facilities
- Generation of vectors in GMP conditions
- Translational research
- Clinical units and clinicians with the expertise need to

The CAR T-cell in Brazil: Initiatives

INCA:

Martin Bonamino: pre-clinical study with sleeping beauty transposon vectors

Boldrini:

Pedro Campos Lima: pre-clinical studies with CD19

Celluris+Eretz Bio (Einstein):

- Pre-clinical studies with CAR anti-CD123 e -CD33
- FMRP-USP Center for cell-based Therapy (Ribeirão Preto)
 - Brazilian CAR T Platform
- Prodigy: Einstein, USP-SP, PUC-UFPR, Sírio Libanês

The CAR T-cell in Brazil: Initiatives

Human Gene Therapy

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DOI: 10.1089/hum.2018.218

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CAR T cells generated using *Sleeping Beauty* transposon vectors and expanded with an EBV-transformed lymphoblastoid cell line (LCL) display antitumor activity *in vitro* and *in vivo*.

Leonardo Chicaybam*1,2, Luiza Abdo*1, Mayra Carneiro*1, Bárbara Peixoto3, Mariana Viegas1, Priscila de Sousa1, Márcia C. Fornazin4, Maria C. Spago4, Angelo Brunelli Albertoni Laranjeira4, Pedro O. de Campos-Lima5, Alexandre Nowill4, Luciana Rodrigues Carvalho Barros1, Martín H. Bonamino1,2#

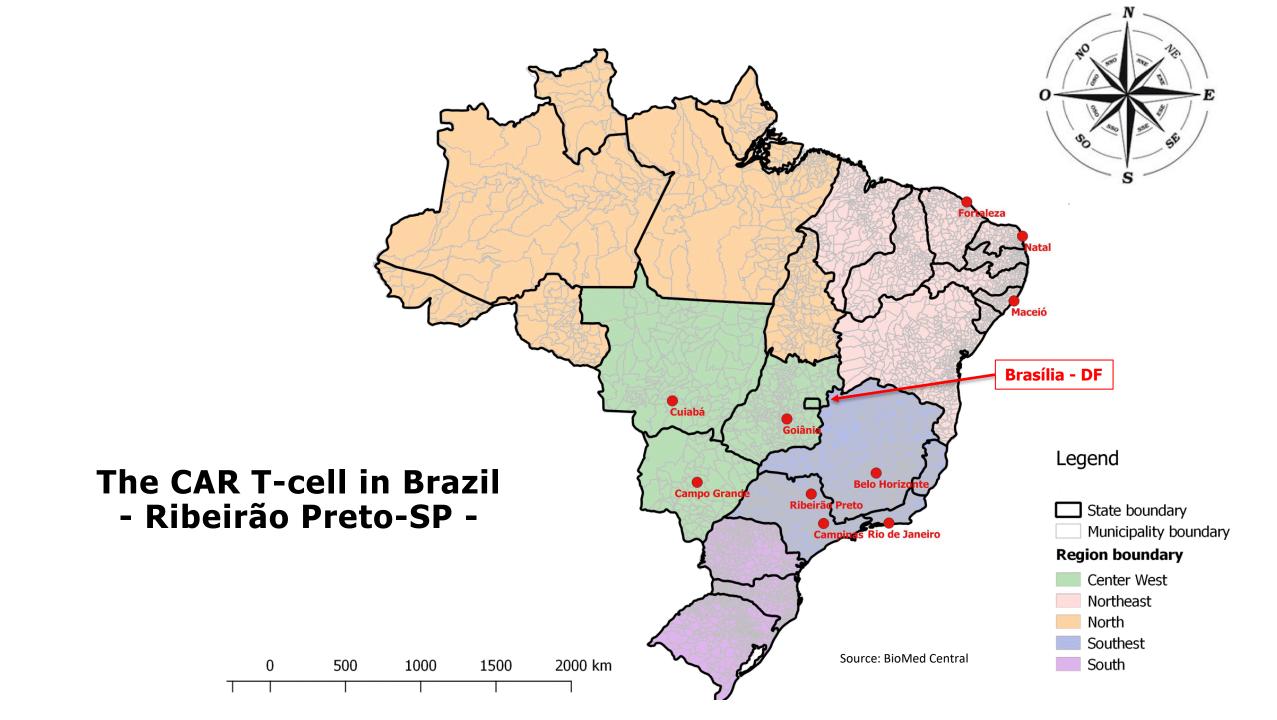
Slide courtesy Martin H Bonamino

The CAR T-cell in Brazil

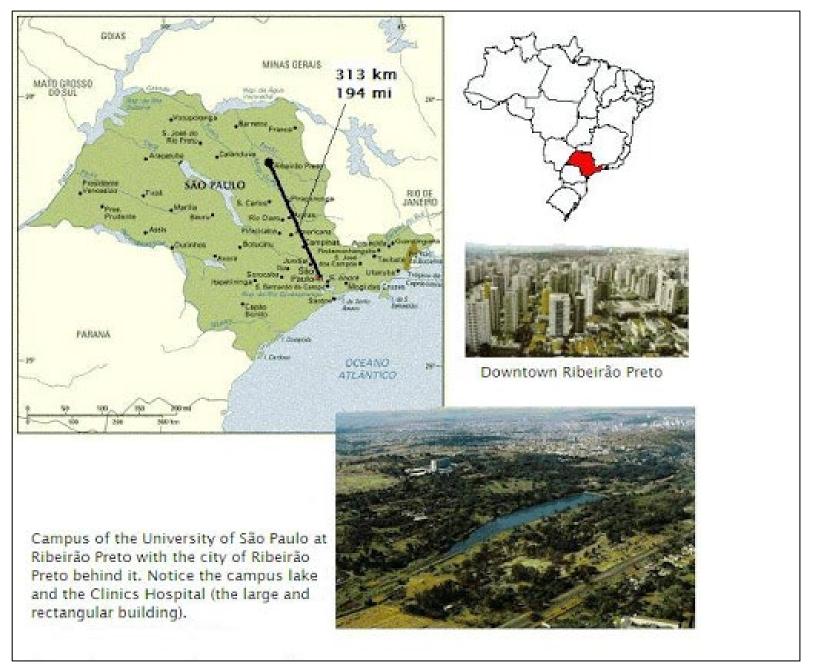
- Brazilian CAR T Platform Ribeirão Preto-SP -

Principle: 100% Brazilian technology

- Design and validate new lentiviral vectors (new clones) for clinical purposes
- Develop the platform for pre-clinical studies
- New translational research lab focused on advanced cell therapy
- Manufacture and scale lentiviral vectors up in GMP conditions
- Manufacture CAR T-cells in an affordable cost to low-middle income countries
- Establish collaborations and launch clinical trials



The CAR T-cell in Brazil - Ribeirão Preto-SP -



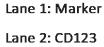
Brazilian CAR T Platform - Ribeirão Preto-SP- New scFv clones -

TG1

PBS

30°C

Figure 1. QC SDS-PAGE [CD123]



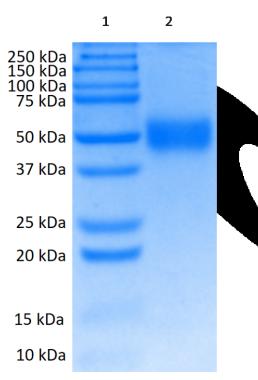


Table 5. QC s	oluble ELIS	iA of the positive of	clones [CD123]	
Clones	Induce Temp.	Coating: CD123	Coating: BSA	No coating
10	30°C	2.0026	0.0541	0.0553
10	37 ° C	2.5711	0.0654	0.0439
	30°C	2.1305	0.0640	0.0631
13	37℃	2.3632	0.0652	0.0599
	37°C	1.0574	0.0600	0.0478
	30°C	2.7119	0.0646	0.0436
<mark>26</mark>	37°C	2.1732	0.0654	0.0453
	37℃	1.7632	0.0659	0.0609

Unpublished data [confidential]

0.0645

0.0570

0.0450

0.0578

0.0643

0.0545

Brazilian CAR T Platform - Ribeirão Preto-SP - Virus production and processing -





Producer cell line

Transfection reagents

Medium composition







Filtration to remove debris

Tangential Flow Filtration

DNAse treatment







Filter sterilization

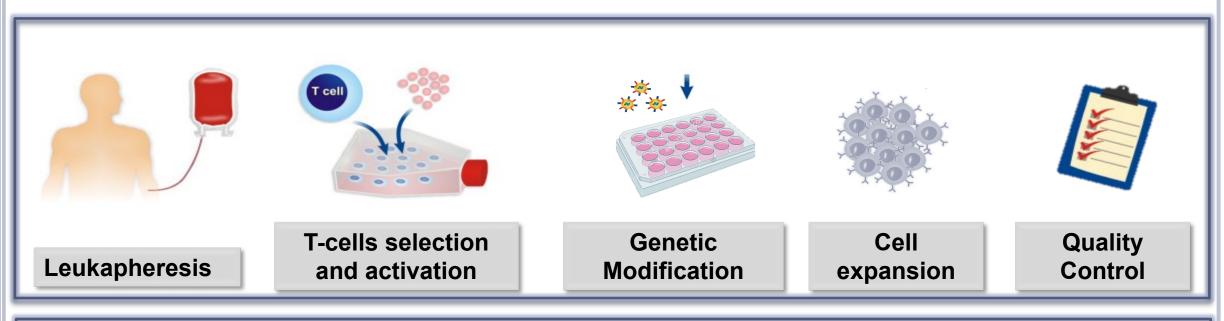
Pore size

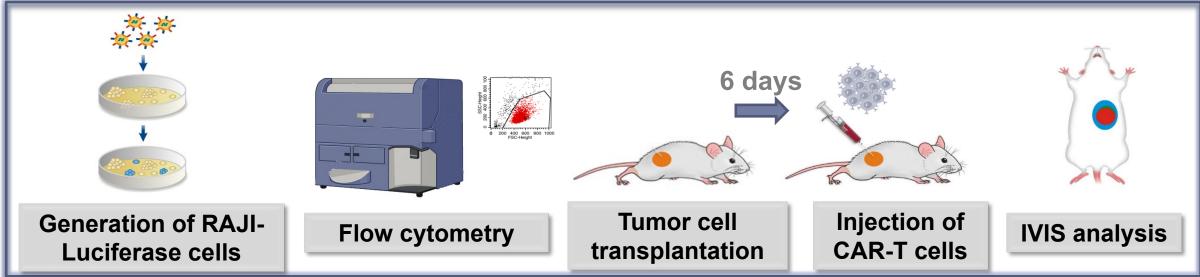
Flow rate

Saturation

Chromatography for purification (?)

Experimental design





Lentivirus production - GMP

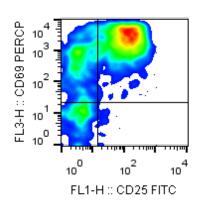


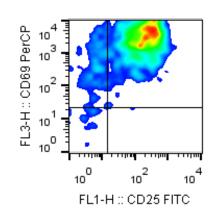
Parameter	Acceptance criteria	Batch#1	Batch#2	Batch#3
Lentiviral Titer (Infecting Units/mL)		6.9x10 ⁷	7.7x10 ⁷	1.0x10 ⁸
Microbiologic	negative	negative	negative	negative
Endotoxin	<5.0 EU/mL	0.728	0.853	0.57
Mycoplasma	<1.0	0.21	0.25	0.61

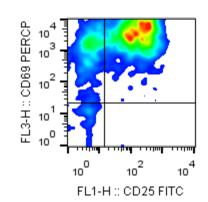
CAR19 T cells generation and expansion - healthy donors

• Cell therapy laboratory – GMP (n=3, three donors)

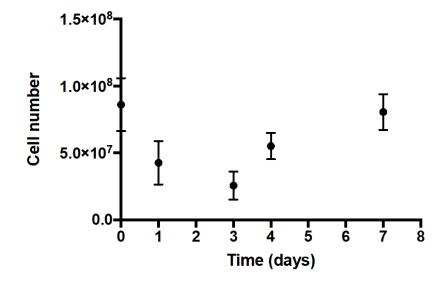
Cell activation



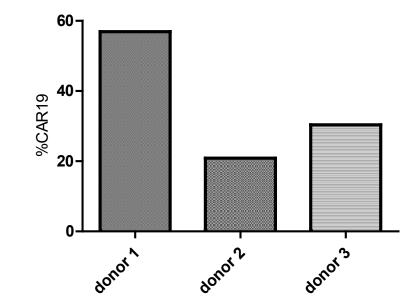




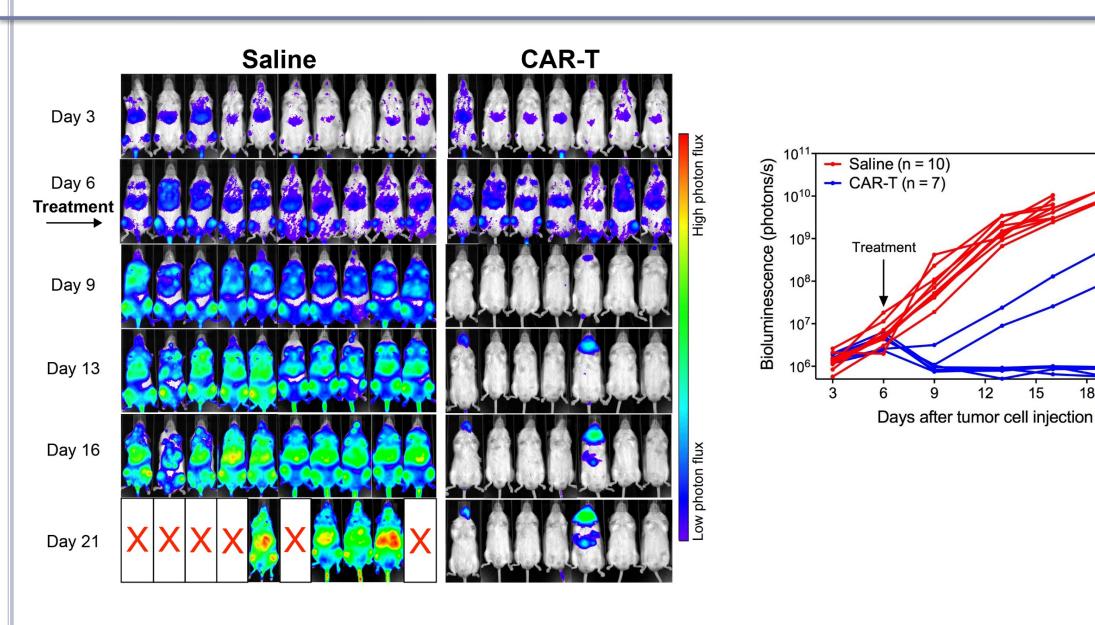
Cell expansion



CAR19 expression

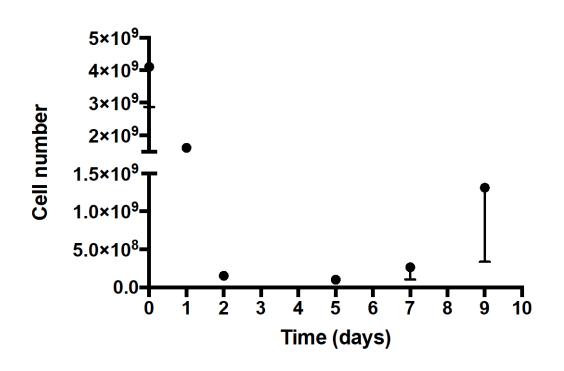


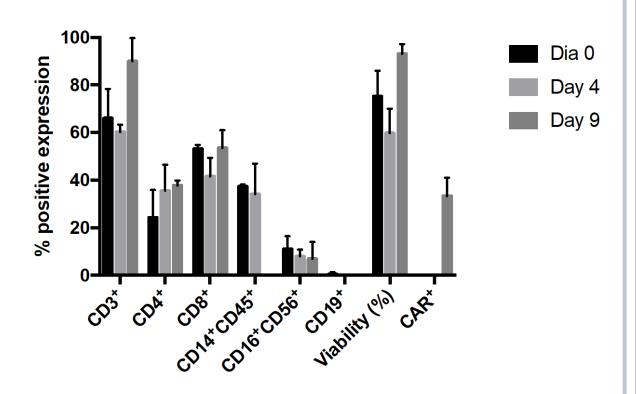
Anti-tumoral efficacy of CAR19 T cells in animal model



CAR19 T cells - Lymphoma patients

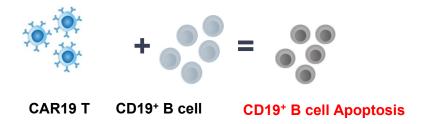
• Cell therapy laboratory – GMP (n=2, two independent donors)

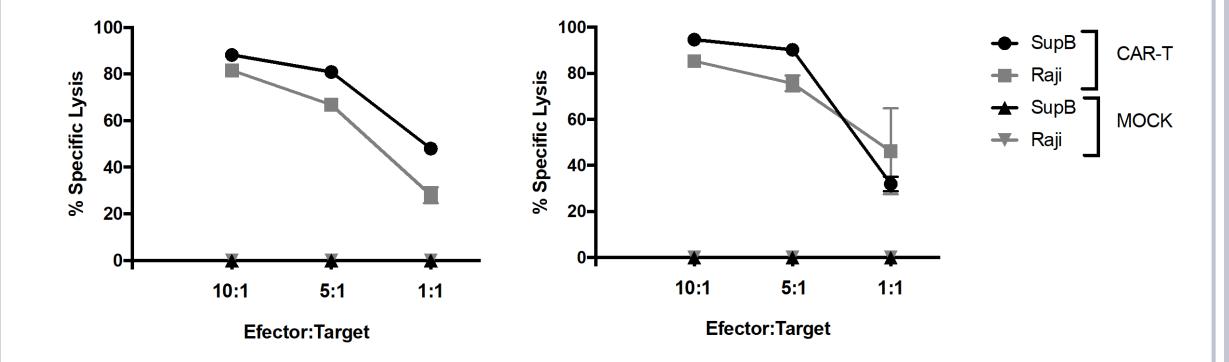




CAR19 T cells - Lymphoma patients

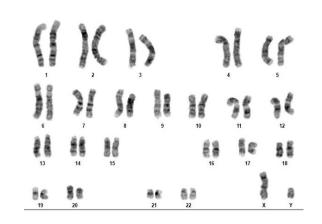
• *In vitro* cytotoxicity

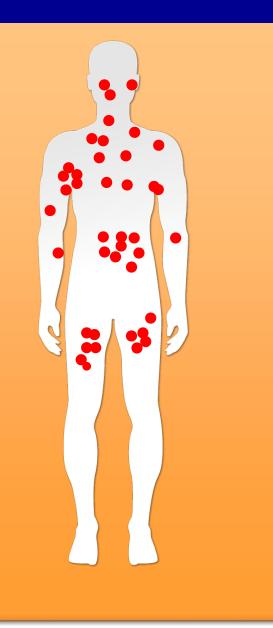




CAR19 T cells – Lymphoma patients

Microbiologic	Negative
Endotoxin (<5.0 EU/mL)	0.77 EU/mL
Mycoplasm	Negative
%CD3+ cells ≥ 80%	95.9%
Cytogenetic	OK
Transduction efficiency	27.9%





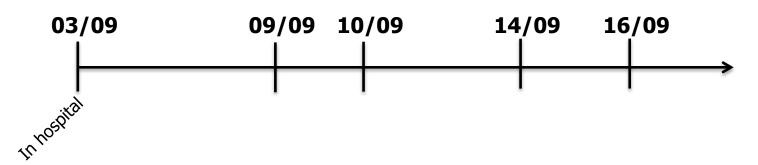
63y, male, diagnosed in 09/14/2017 with Non-Hodgkin Diffuse Large B-cell Lymphoma, non-GCB (Hans Algorithm), Double-Expressor, stage IIB and R-IPI score ?.

- 1st treatment (set./2017) → 8 R-CHOP + Radiotherapy
 No response → bone marrow biopsy confirmed
- 2nd treatment → R-GDP + autologous Progression of disease after 2 cycles
- 3rd treatment → R-ICE

Progression of disease after 4 cycles

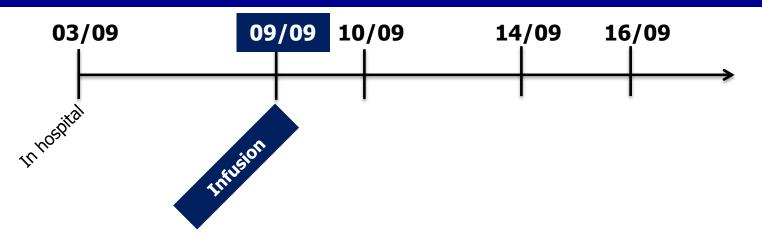
Lymphocytes collection by apheresis → CAR T cell

4th treatment → Polatuzumab + bendamustine + rituximab
 Progression of disease after 3 cycles





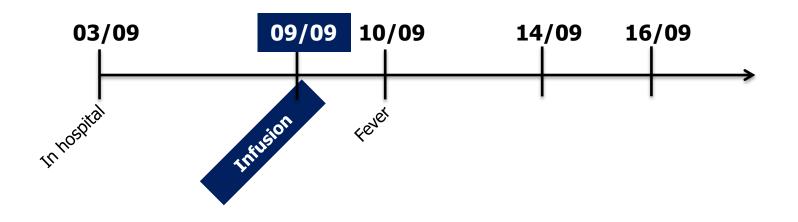


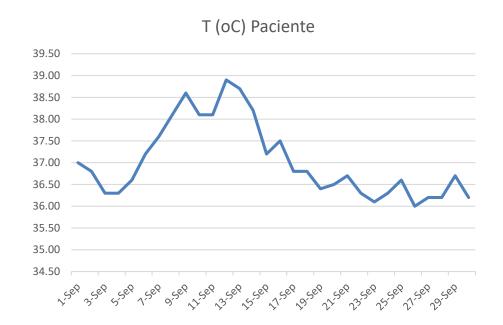


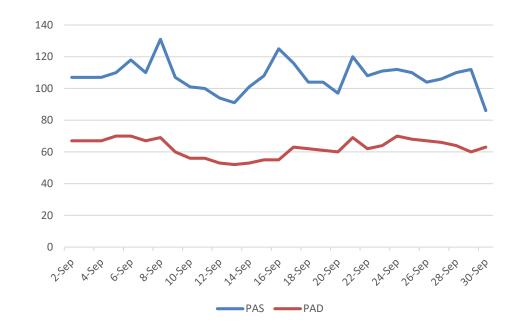


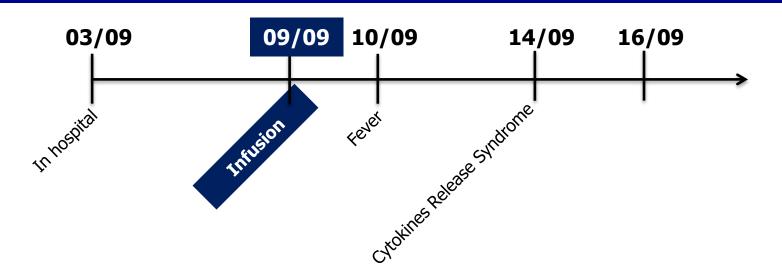


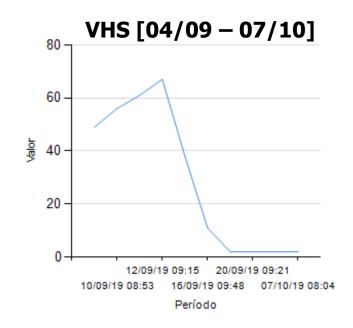


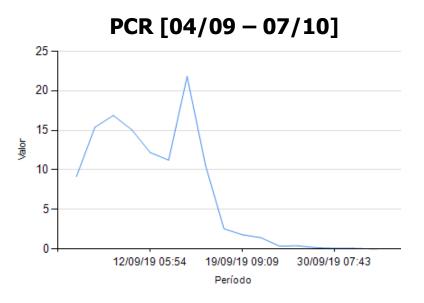


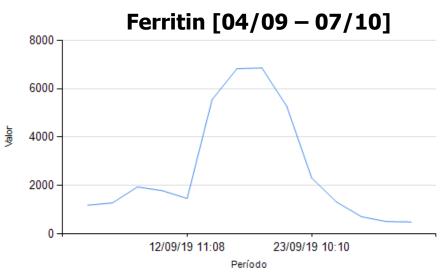


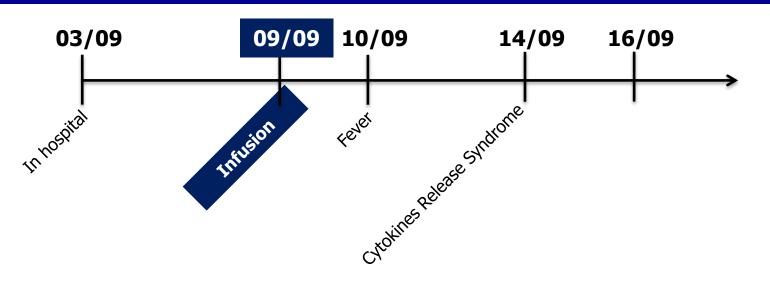


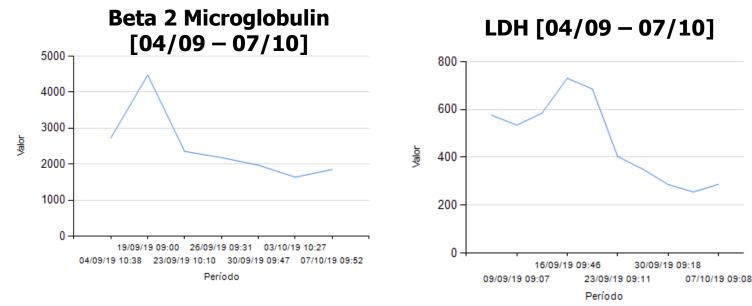


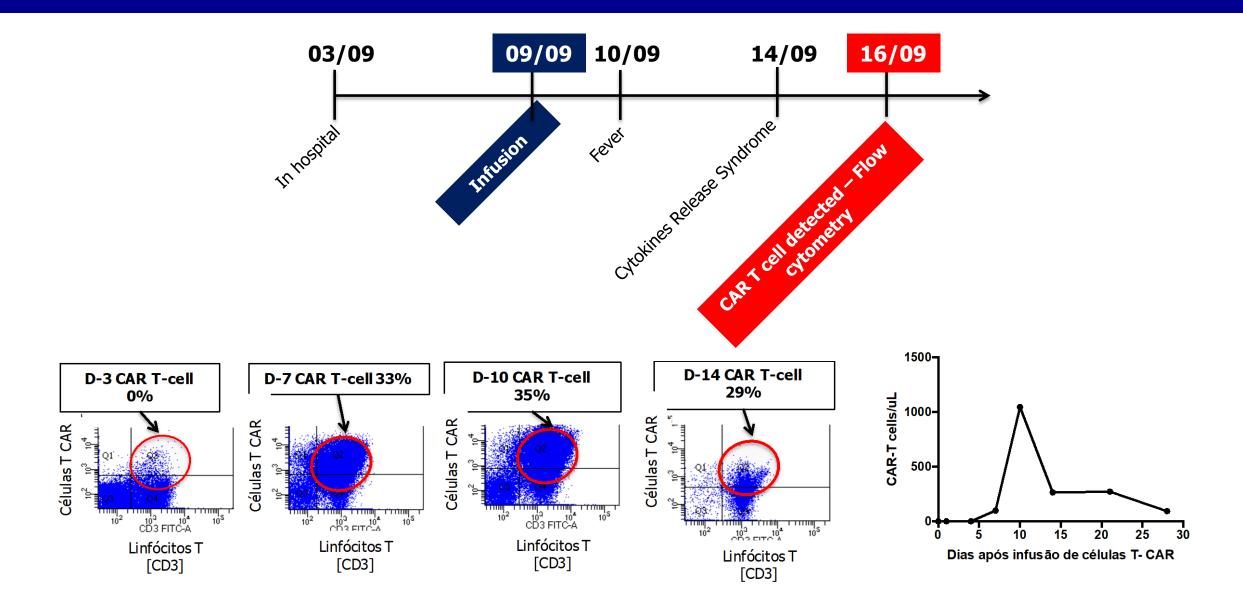


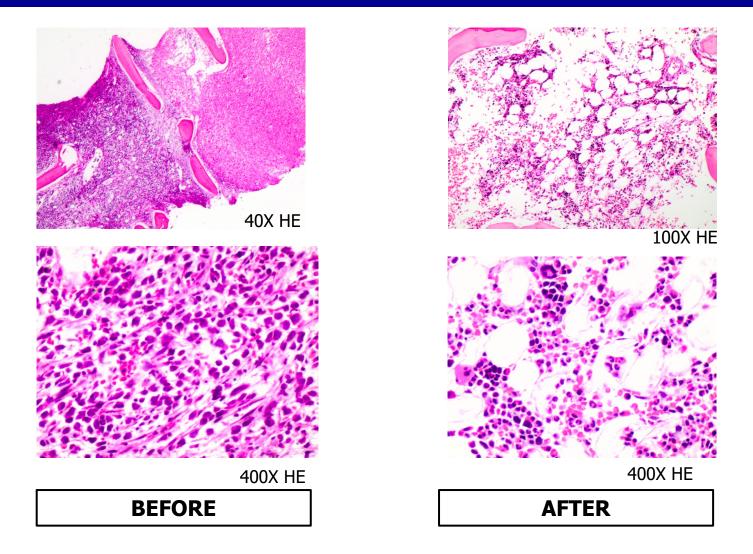






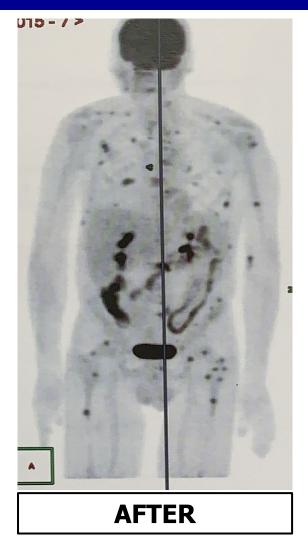






EARLY BONE MARROW BIOPSY (D+30)





EARLY PET-CET (D+30)

- Restricted budget
- Restricted human resources to develop new technologies
- Delay to define regulatory aspects of advanced cell therapy
- Establish new GMP facilities
- Generation of vectors in GMP conditions
- Translational research
- Clinical units and clinicians with the expertise need to

Restricted budget







SAÚDE DE PRECISÃO



SAÚDE DE PRECISÃO 1.0 - DIAGNÓSTICA

FINALIDADE

diagnóstico

CARACTERÍSTICAS

utiliza informações ômicas multidimensionais, sobretudo a genômica, aliados a dados clínicos e de estilo de vida, para obter um diagnóstico mais preciso e precoce

BENEFÍCIOS

- maior acurácia e precisão no diagnóstico
- capacidade de predizer a susceptibilidade de desenvolver doenças, permitindo a tomada de medidas curativas ou preventivas em tempo concretano.
- capacidade de predizer a resposta do indivíduo a uma determinada terapêutica, tornando a intervenção mais segura e eficaz
- evita desperdícios com condutas clínicas não eficazes

FRONTIERA DO CONHECIMENTO E TECNOLÓGICO

- tecnologias biocomputacionais capazes de processarem grande volume de dados
- utilização de biossensores e we a rables para geração de dados de saúde e de estilo de vida em complementariedade as informações do perfil genômico

SAÚDE DE PRECISÃO 2.0 - DISRUPTIVA

FINALIDADE

terapêutica

CARACTERÍSTICAS

utiliza tecnologias genômicas para customizar o tratamento, empregando ferramentas de edição genômica e produtos de terapias avançadas (terapia gênica, terapia celular e engenharia tecidual)

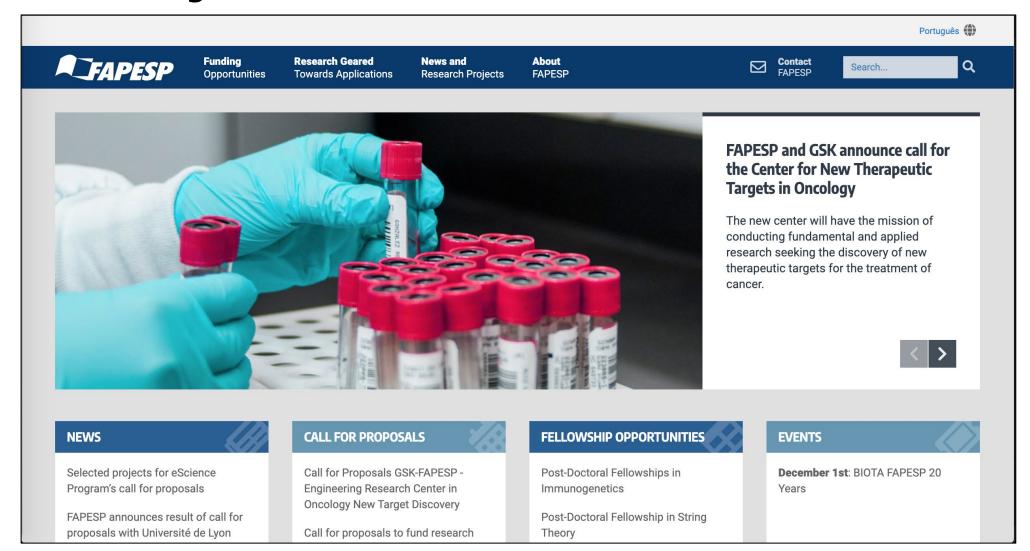
BENEFÍCIOS

- Personalização do tratamento com base na variabilidade individual genômica
- aumento da eficácia terapêutica
- perspectiva de cura

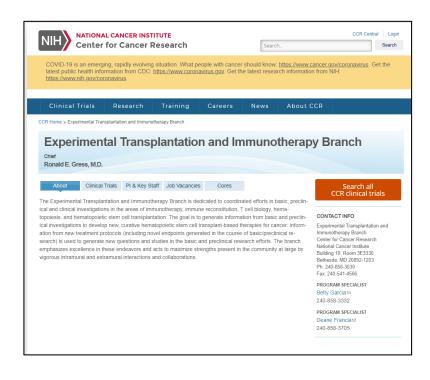
FRONTIERA DO CONHECIMENTO E TECNOLÓGICO

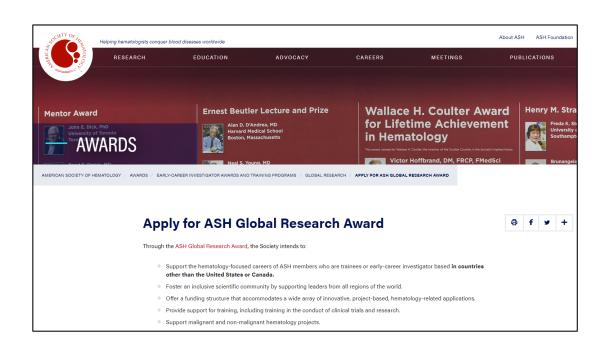
- aprimoramento tecnológico e a automação dos processos de fabricação em escala industrial
- aprimoramento na tecnologia de testagem da qualidade do produto terapêutico final
- desenho de estudos clínicos

Restricted budget



- Restricted budget
- Restricted human resources to develop new technologies
 - International collaboration research and manufacturing





ASH Global Research Award CTC - Ribeirão Preto & ETIB - NCI/NIH

Principal Investigator:

Renato Guerino-Cunha, M.D. - Ph.D.

Local Mentor:

Prof. Dr. **Eduardo Magalhães Rego**, M.D. - Ph.D. Professor Titular FMRP-USP

Global Mentor:

Dr. **Ronald Gress**, M.D. Experimental Transplantation and Immunotheray Branch - NCI/NIH Clinical Center Research (CCR) - NCI/NIH

Prêmio: US\$ 150.000,00 → 100% destinado à pesquisa

Instituição Sede: CTC - Ribeirão Preto



- Restricted budget
- Restricted human resources to develop new technologies
- Delay to define regulatory aspects of advanced cell therapy



Ministério da Saúde Agência Nacional de Vigilância Sanitária

RESOLUÇÃO DA DIRETORIA COLEGIADA – RDC Nº 214, DE 7 DE FEVEREIRO DE 2018

Dispõe sobre as Boas Práticas em Células Humanas para Uso Terapêutico e pesquisa clínica, e dá outras providências.



DIÁRIO OFICIAL DA UNIÃO

Publicado em: 28/12/2018 | Edição: 249 | Seção: 1 | Página: 417 Órgão: Ministério da Saúde/Agência Nacional de Vigilância Sanitária/Diretoria Colegiada

RESOLUÇÃO DA DIRETORIA COLEGIADA - RDC Nº 260, DE 21 DE DEZEMBRO DE 2018

Dispõe sobre as regras para a realização de ensaios clínicos com produto de terapia avançada investigacional no Brasil, e dá outras providências.



DIÁRIO OFICIAL DA UNIÃO

Publicado em: 26/02/2020 | Edição: 38 | Seção: 1 | Página: 69 Órgão: Ministério da Saúde/Agência Nacional de Vigilância Sanitária/Diretoria Colegiada

RESOLUÇÃO DA DIRETORIA COLEGIADA - RDC Nº 338, DE 20 DE FEVEREIRO DE 2020

Dispõe sobre o registro de produto de terapia avançada e dá outras providências.

Delay to define regulatory aspects of advanced cell therapy







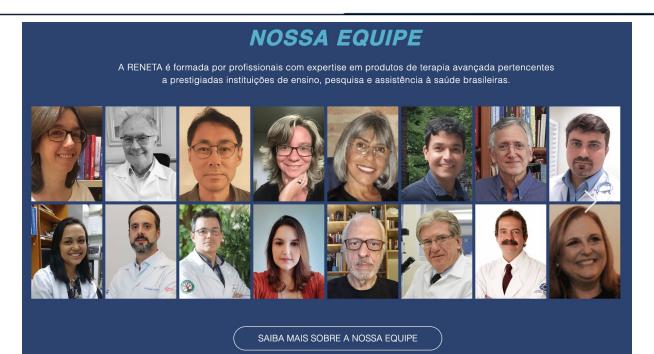


Quem Somos

Informações sobre PTA

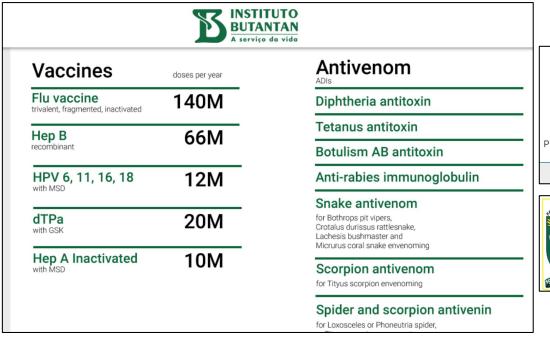
Documentos da Rede

Contato



- Restricted budget
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 - Butantan Institute Initiative

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- Translational research
 - Butantan Institute
 - Center for cell-based Therapy Ribeirão Preto Medical School





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Acknowledgements





















