

Harnessing the Immune System to Fight Cancer

May 21st 2021, 18th Focus on Melanoma Conference
Alexander C. Huang, MD

Cancer Immunotherapy: Science Breakthrough



Cancer Immunotherapy: Science Breakthrough



2009



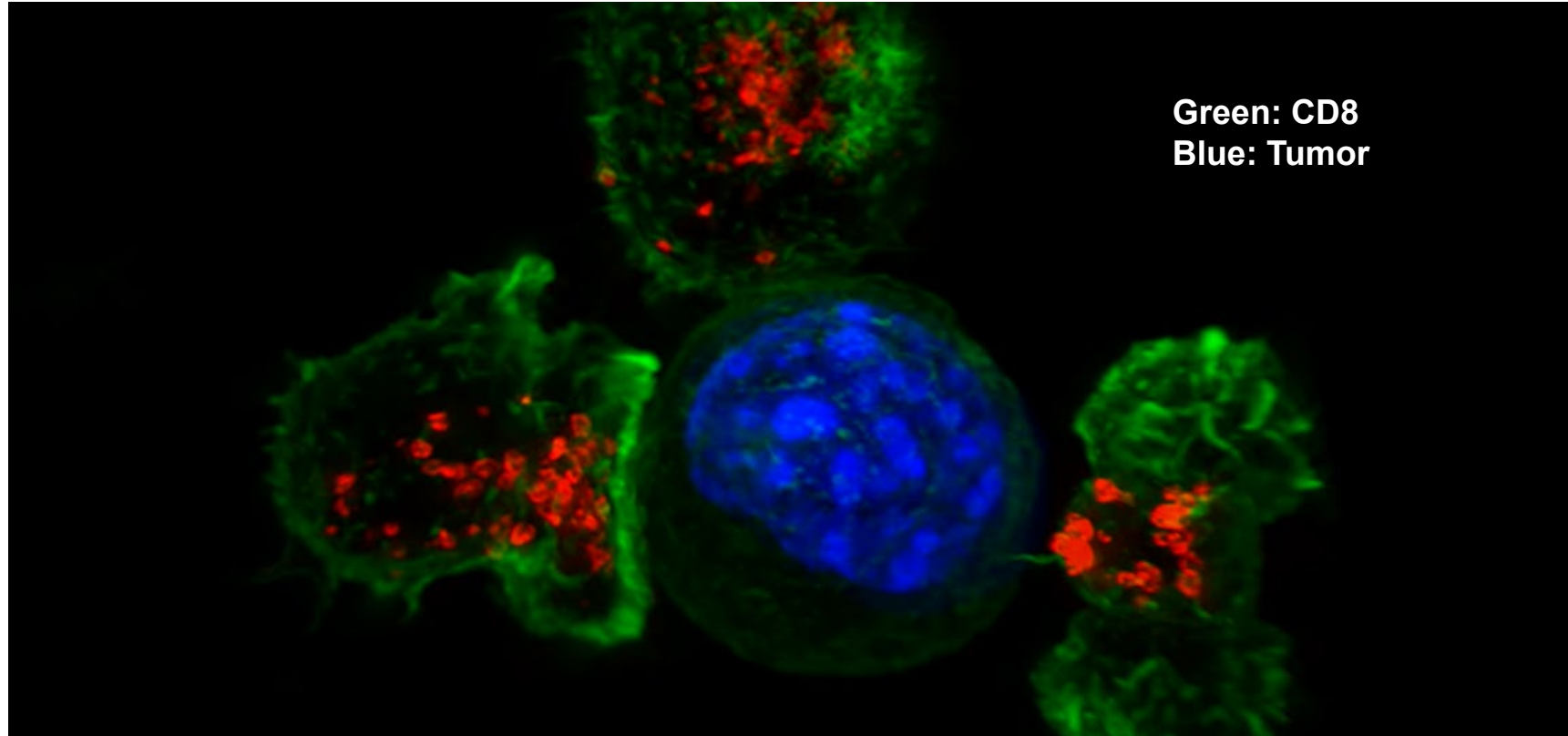
2021



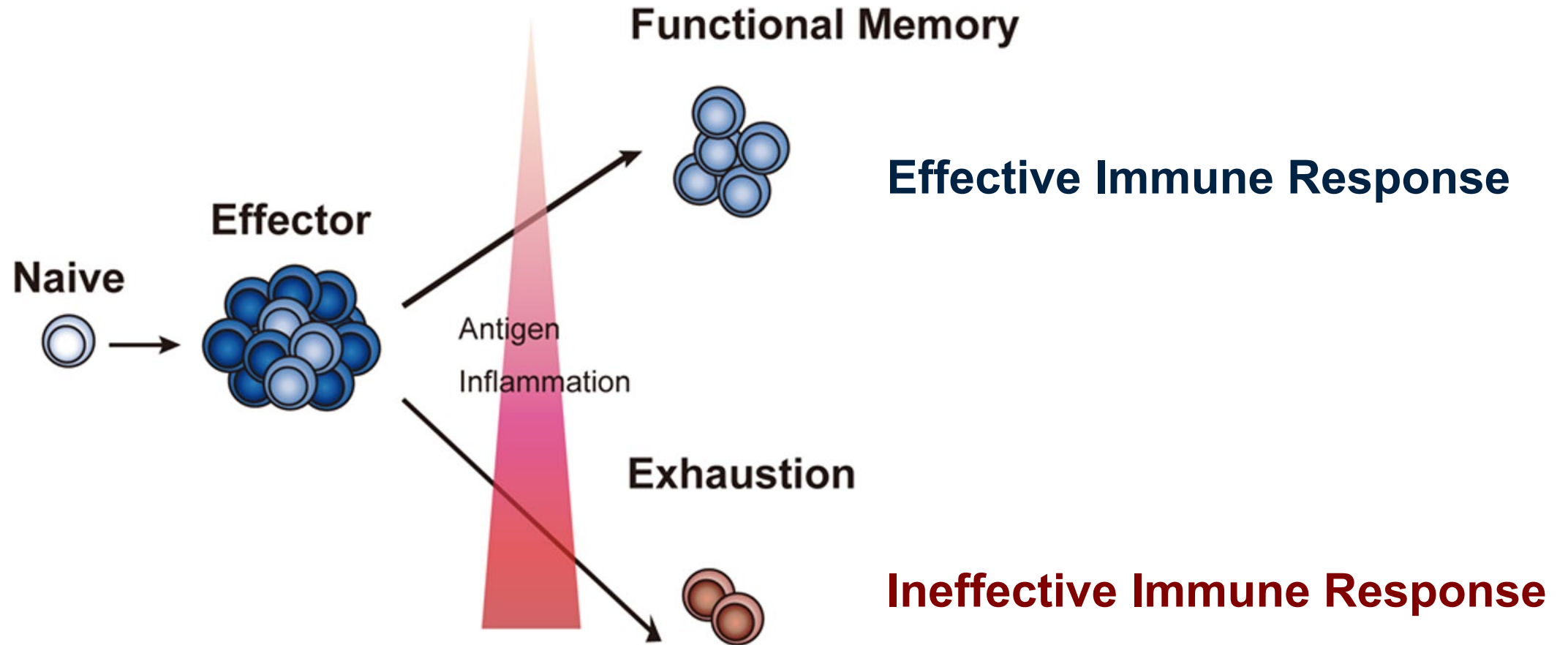
Immunotherapy: “Amphibious assault on cancer”



CD8 T cells: Foot soldiers of the immune army



CD8 T cell exhaustion



CD8 T cell exhaustion



No Exhaustion



Partial Exhaustion



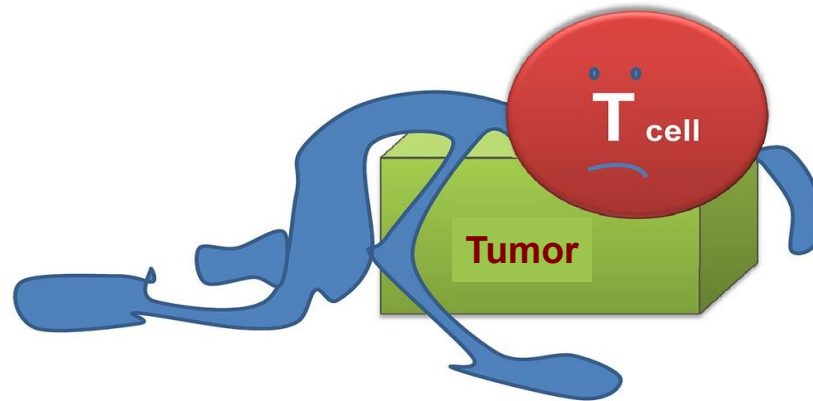
Mild Exhaustion



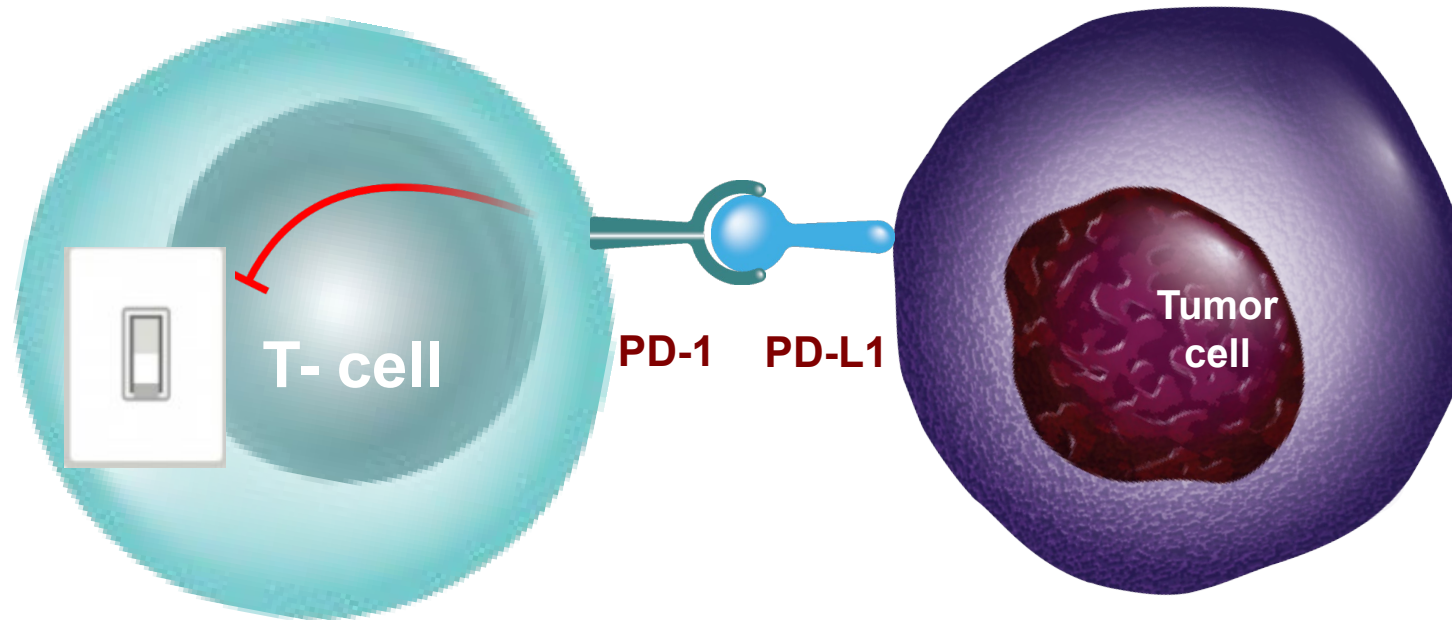
Moderate Exhaustion



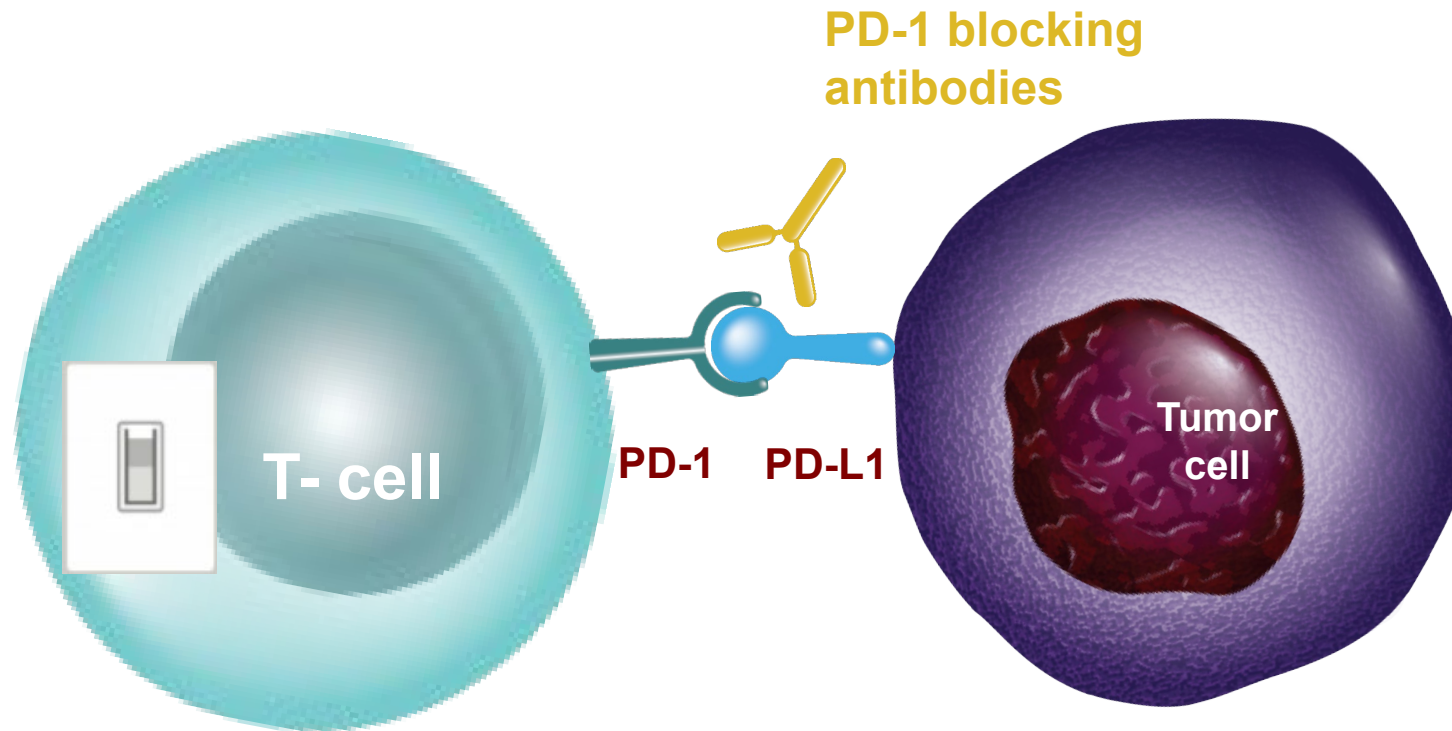
Extreme Exhaustion



CD8 T cell exhaustion

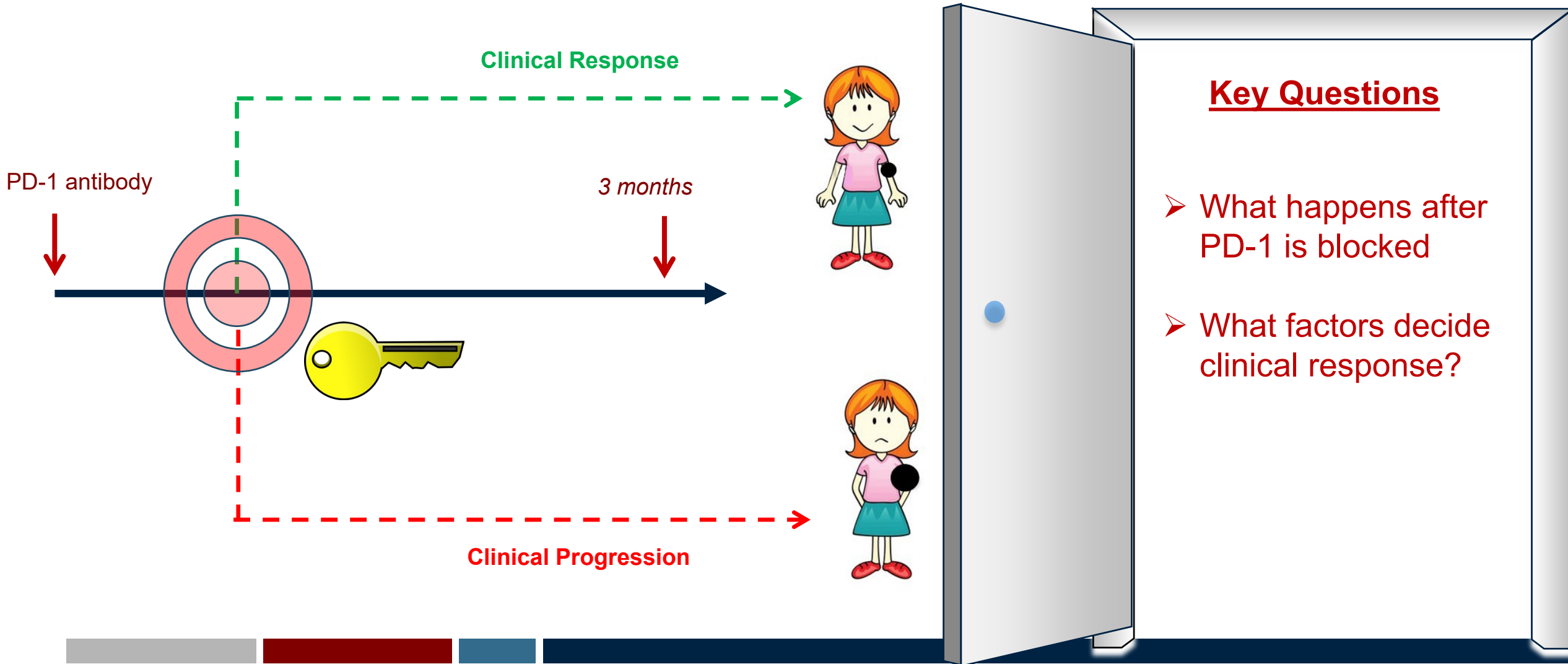


CD8 T cell reinvigoration



Does blocking PD-1 reactivate exhausted T cells?

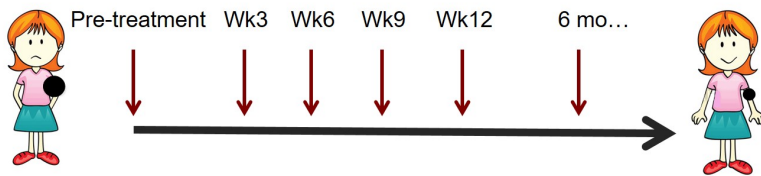
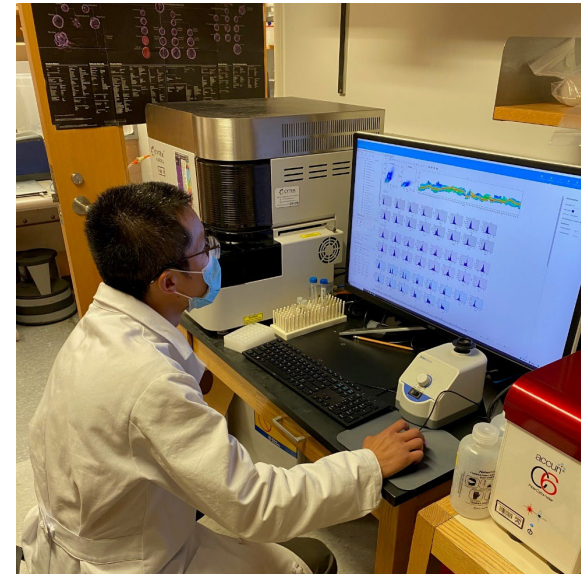
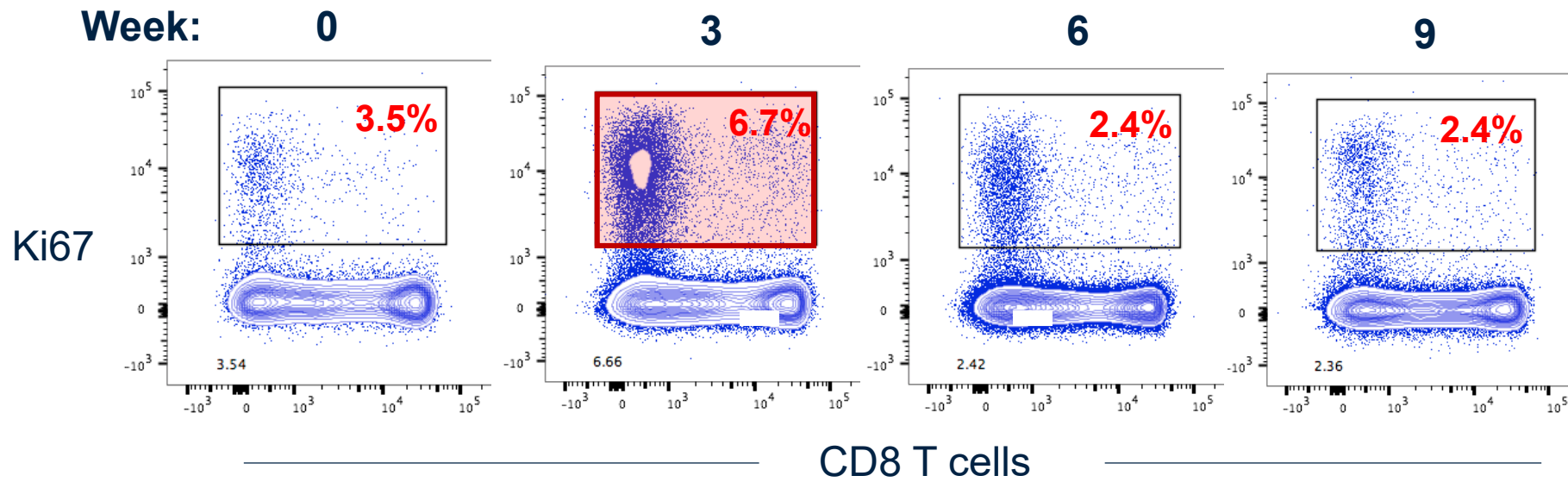
When does the immune response happen after blocking PD-1



Key Questions

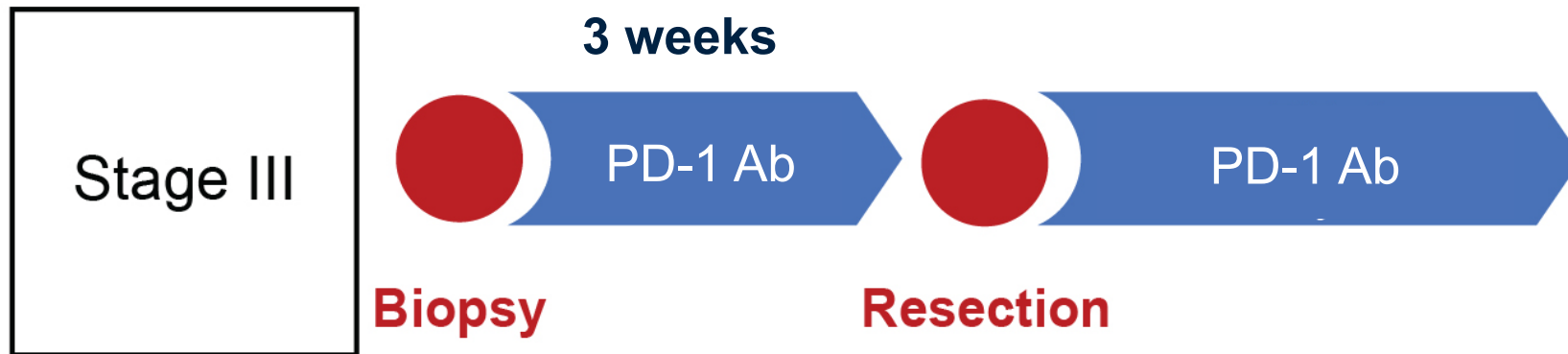
- What happens after PD-1 is blocked
- What factors decide clinical response?

Measuring the immune response to blocking PD-1

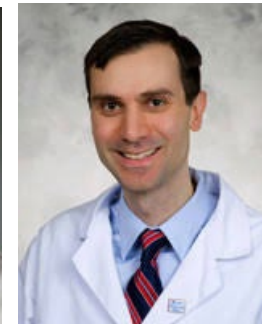


Laboratory science informing clinical trial design

CLINICAL TRIAL OF BLOCKING PD-1 BEFORE SURGERY



T. Mitchell



G. Karakousis



G. Xu

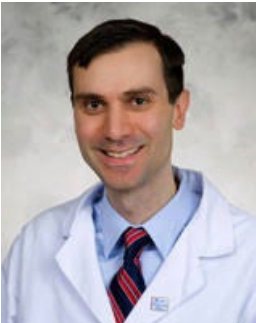
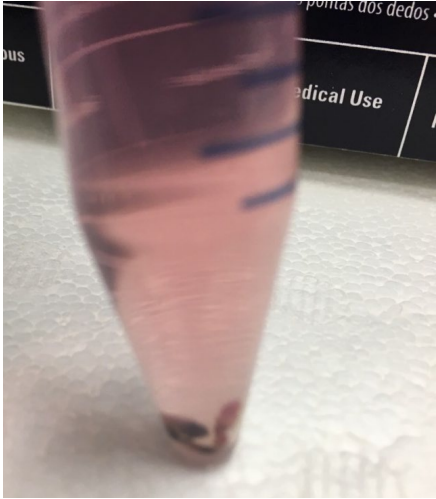


M. Farwell

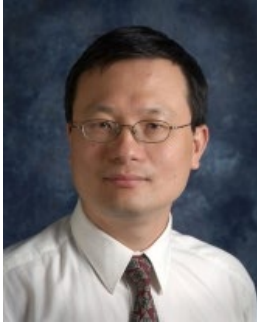


Tissue Processing Pipeline

Biopsy



G. Karakousis

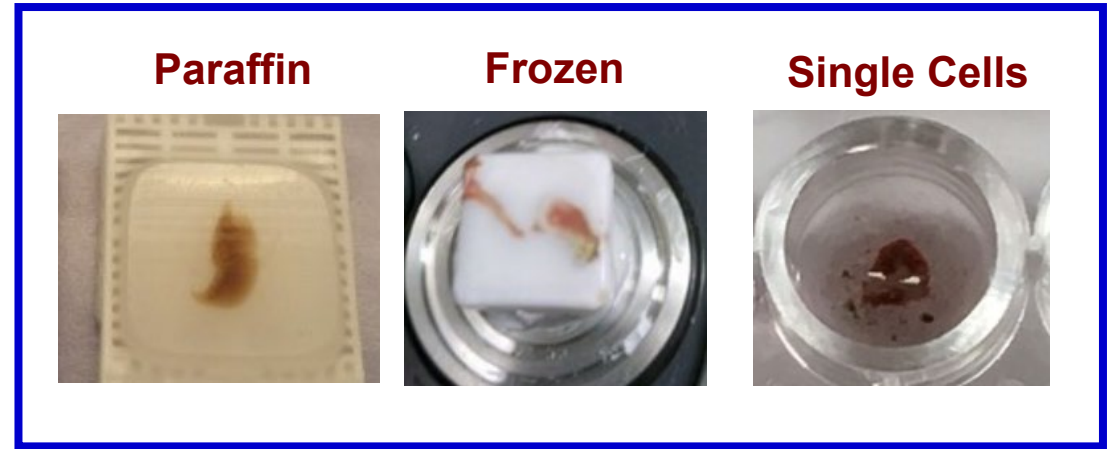
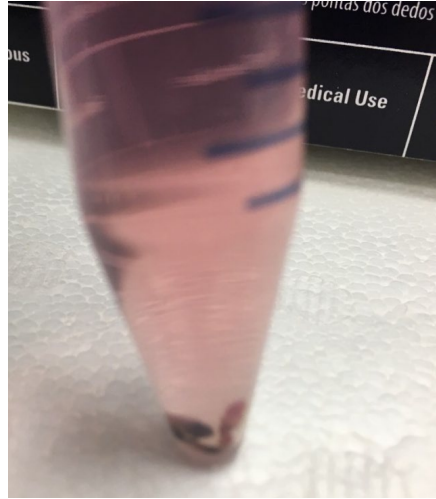
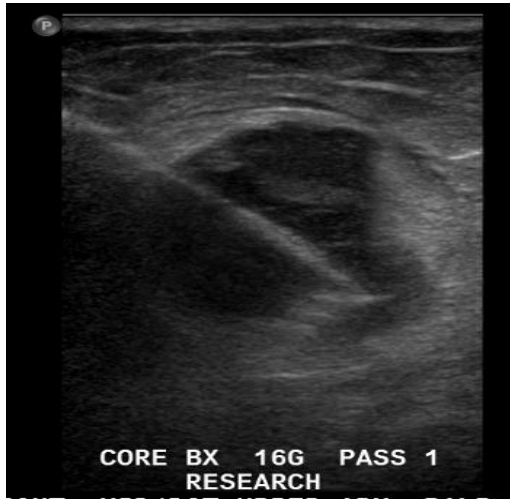


G. Xu

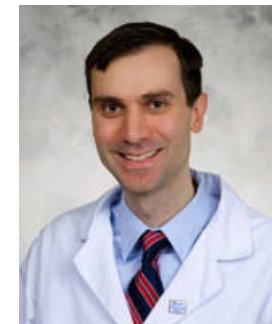
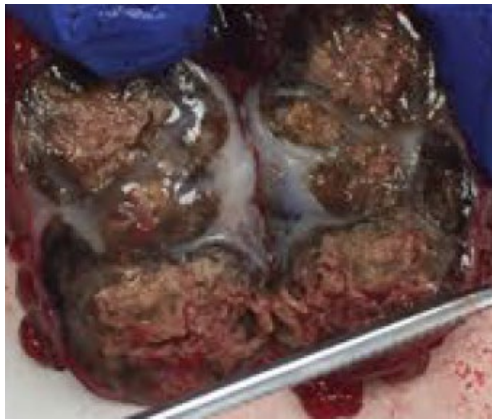


Tissue Processing Pipeline

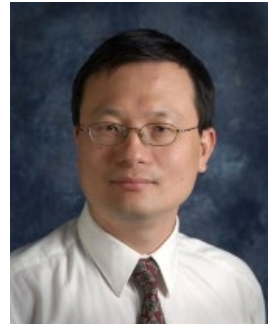
Biopsy



Resection

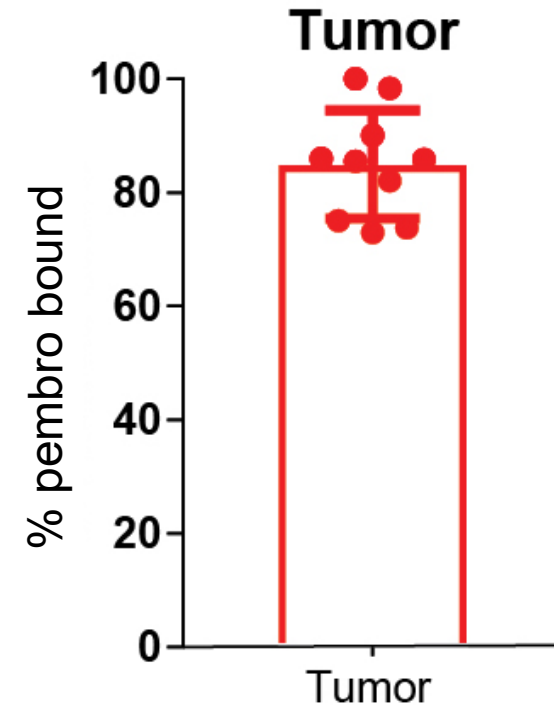
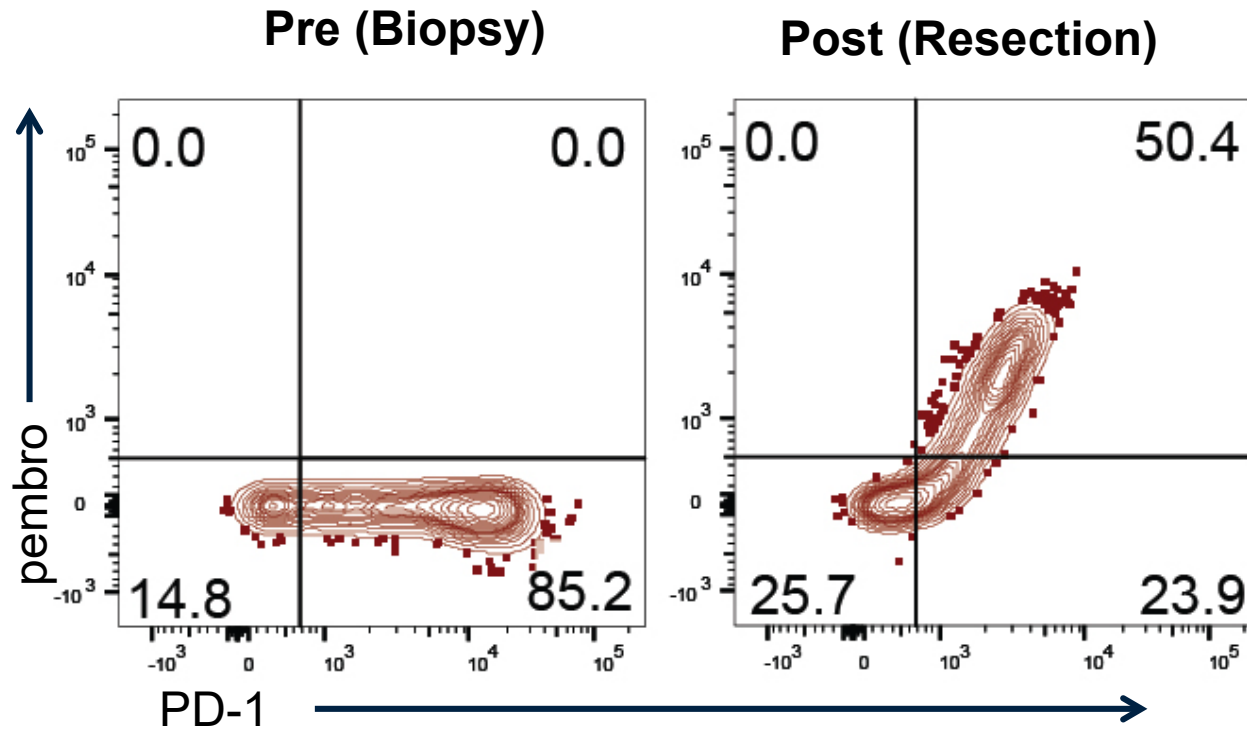


G. Karakousis



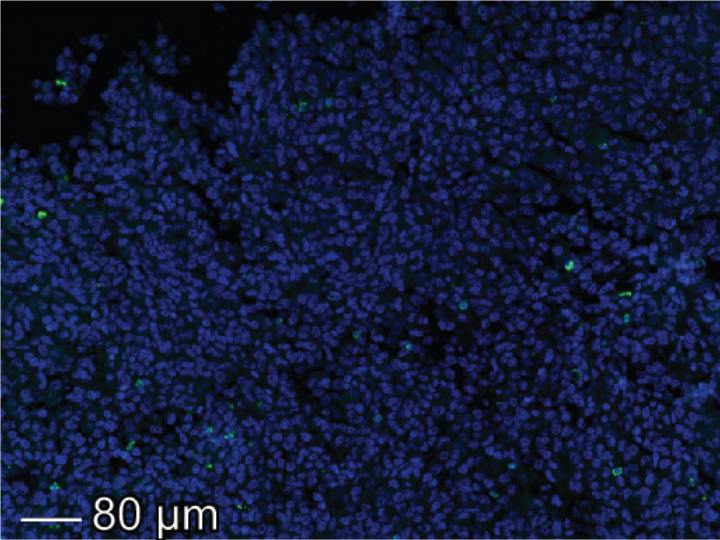
G. Xu

PD-1 antibody reaches the tumor

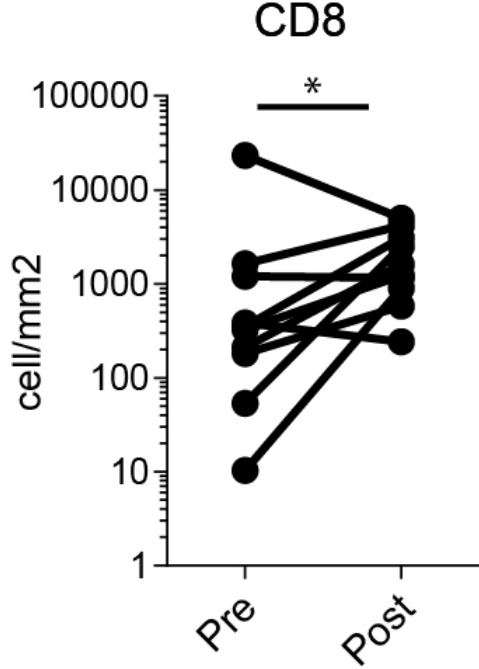
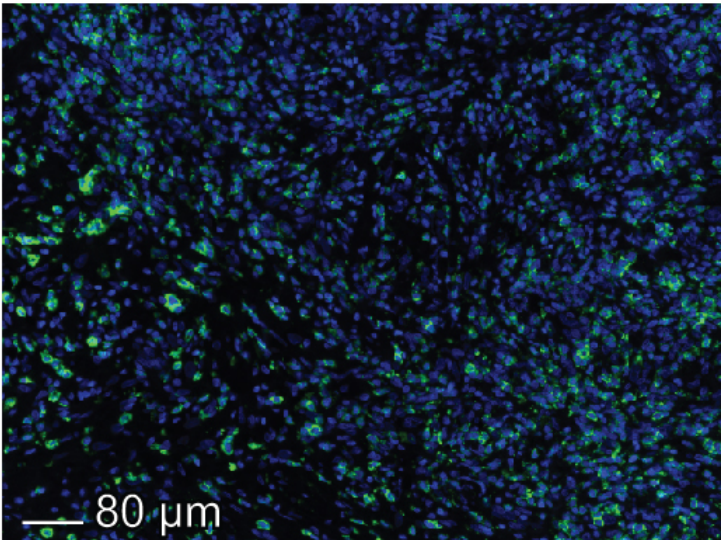


Blocking PD-1 results in increased CD8 T cells in the tumor

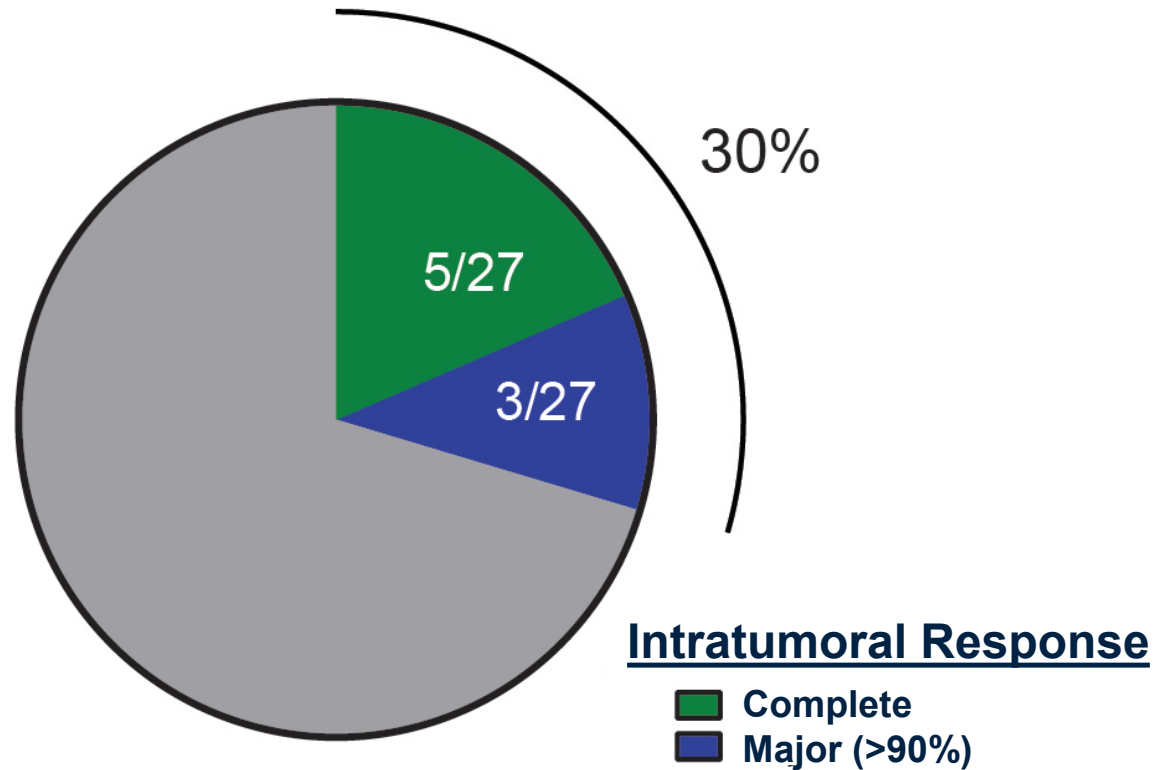
CD8 - Pre



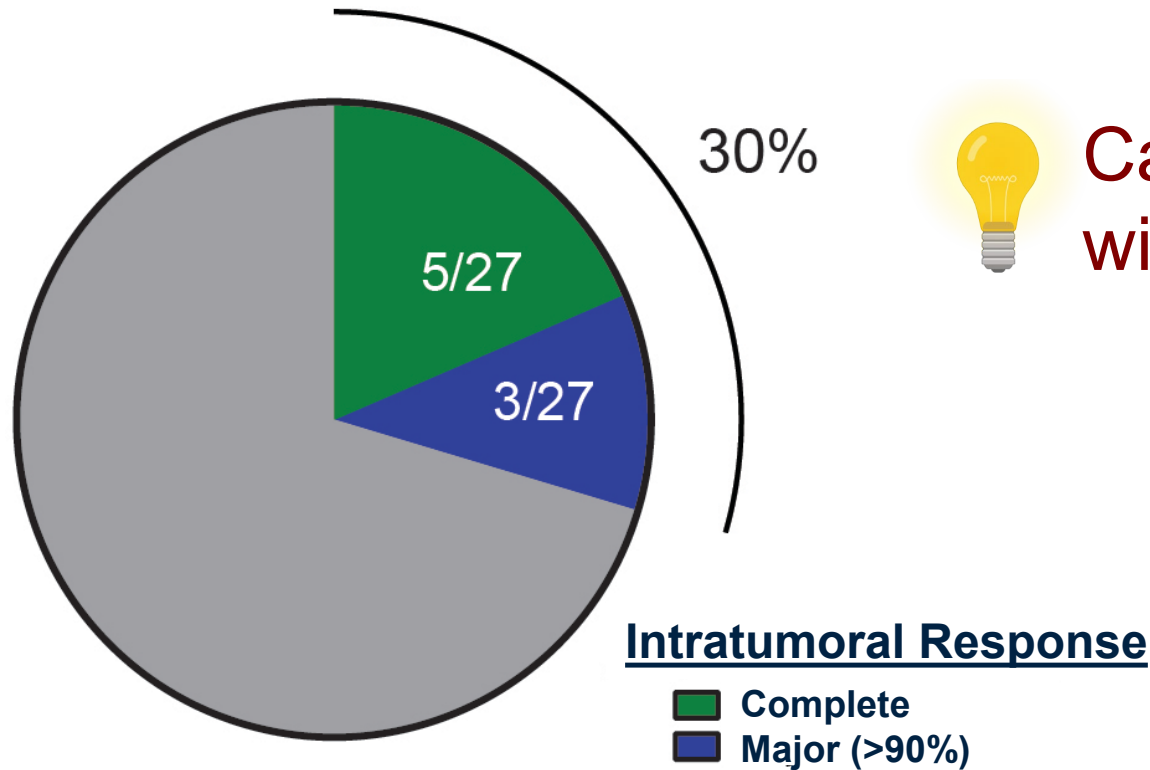
CD8 - Week3



Intratumoral response after a single dose of PD-1 treatment predicts clinical benefit



Intratumoral response after a single dose of PD-1 antibody predicts clinical benefit



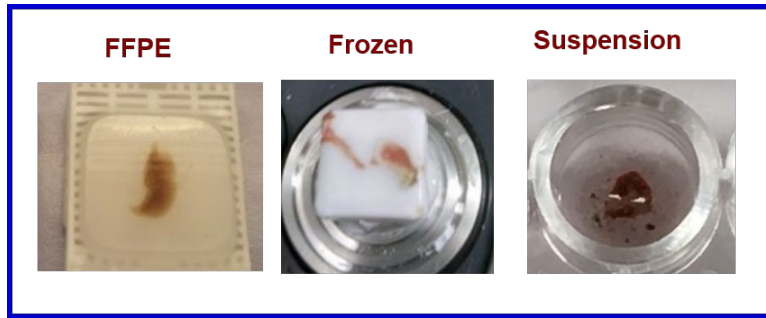
Can we improve outcomes for patients with less than 90% tumor destruction

Question 1: When is the immune response to blocking PD-1

- Immune response occurs after the first dose, within 3 weeks

Question 2: What happens after PD-1 is blocked?

2. What happens after PD-1 is blocked?



DEEP IMMUNE PROFILING

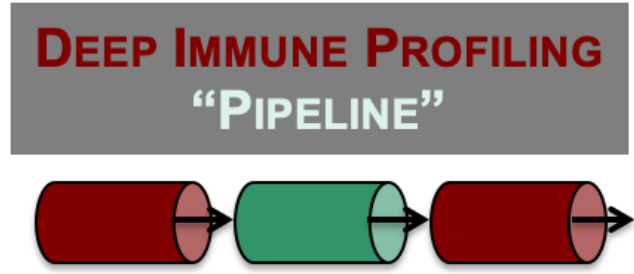
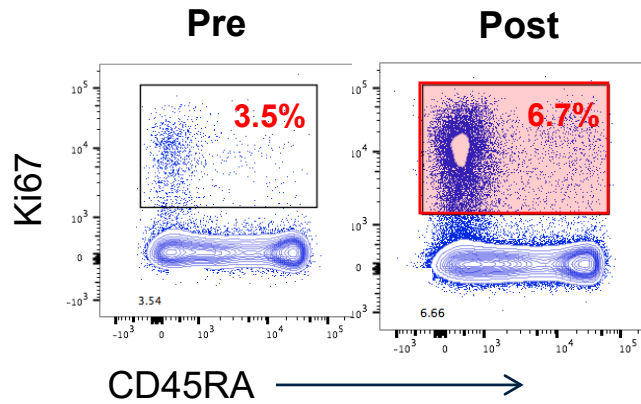


- ⊙ High dimensional cytometry
- ⊙ TCR and RNA sequencing
- ⊙ Tumor Whole Exome Sequencing
- ⊙ Microscopy

COMPUTATIONAL ANALYSIS



PD-1 treatment is reinvigorating exhausted CD8 T cells



Exhausted T cells



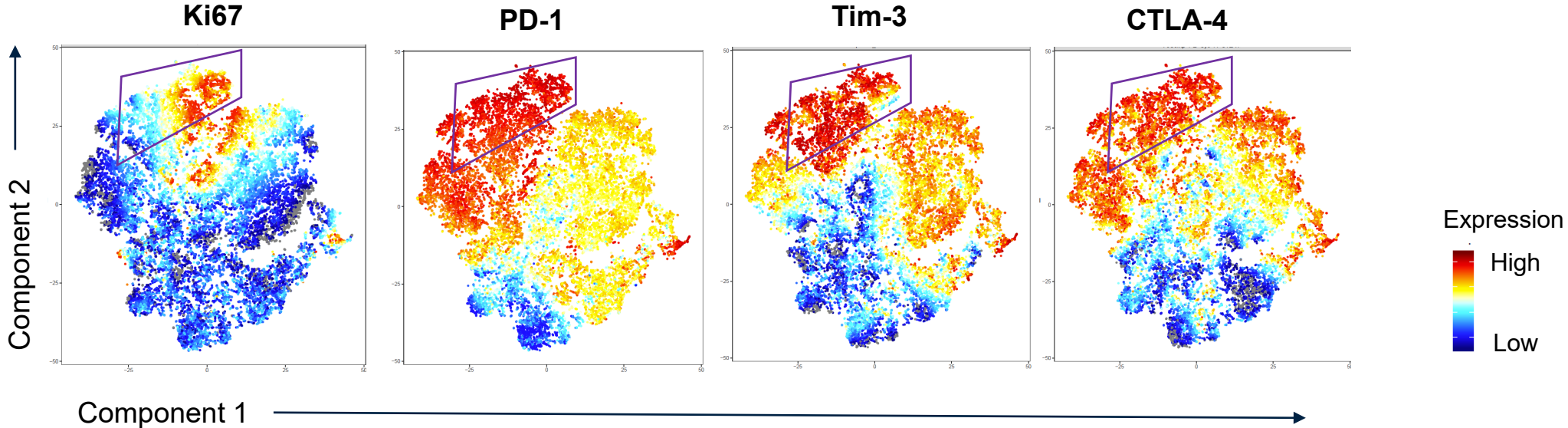
Reinvigorated T cells



- MULTIPLE INHIBITORY RECEPTORS
- RNA SIGNATURE OF EXHAUSTED T CELLS
- SAME T CELL CLONES FOUND IN TUMOR

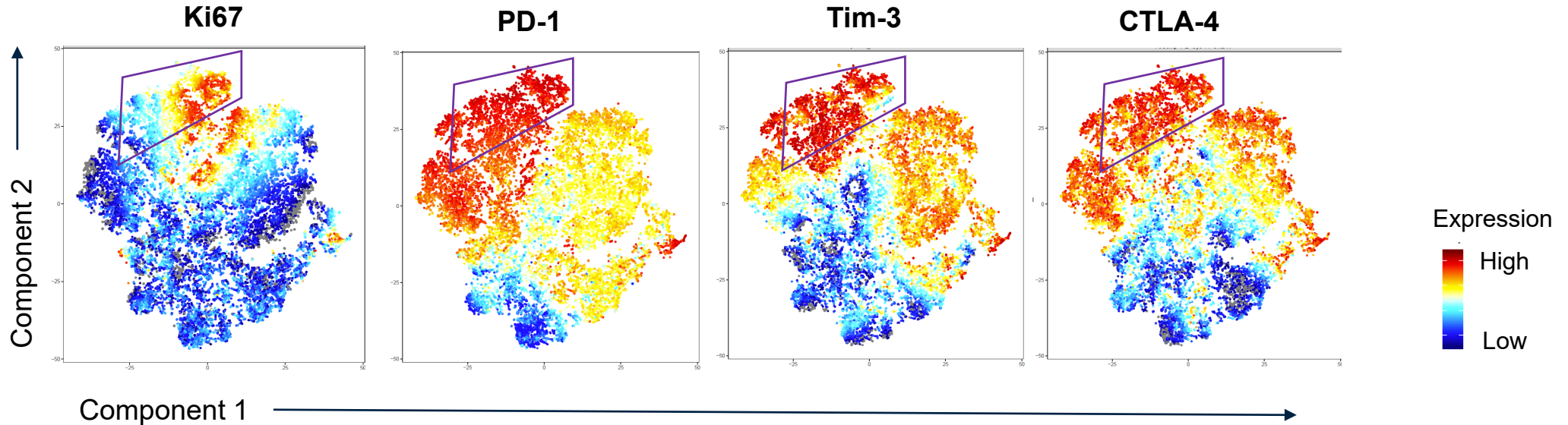
Dimensional reduction technique reveal additional therapeutic targets

Week 3 Tumor



Dimensional reduction technique reveal additional therapeutic targets

Week 3 Tumor



Can we use drugs to block new targets on exhausted CD8 T cells?



Question 1: When is the immune response to blocking PD-1

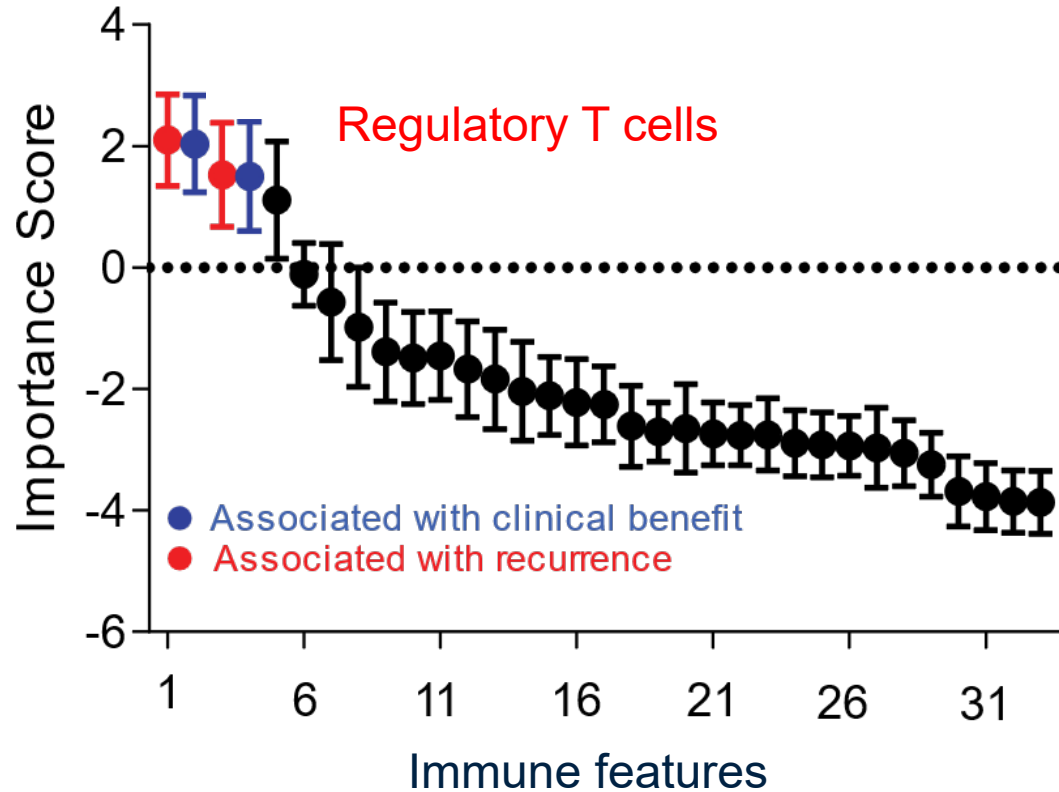
- Immune response to occurs after the first dose, within 3 weeks

Question 2: What happens after PD-1 is blocked?

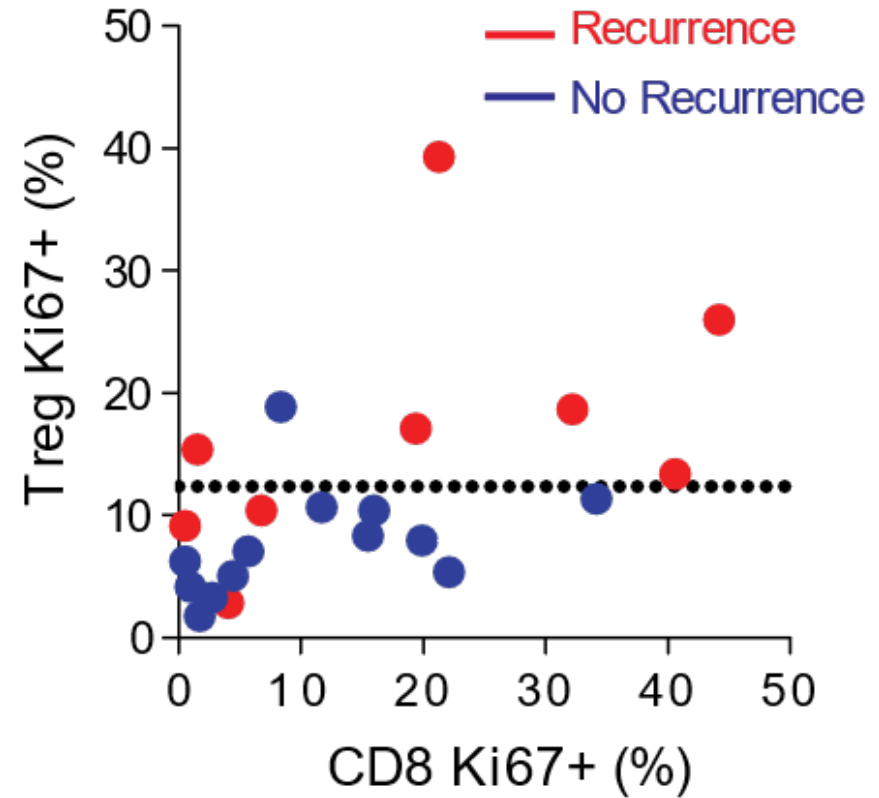
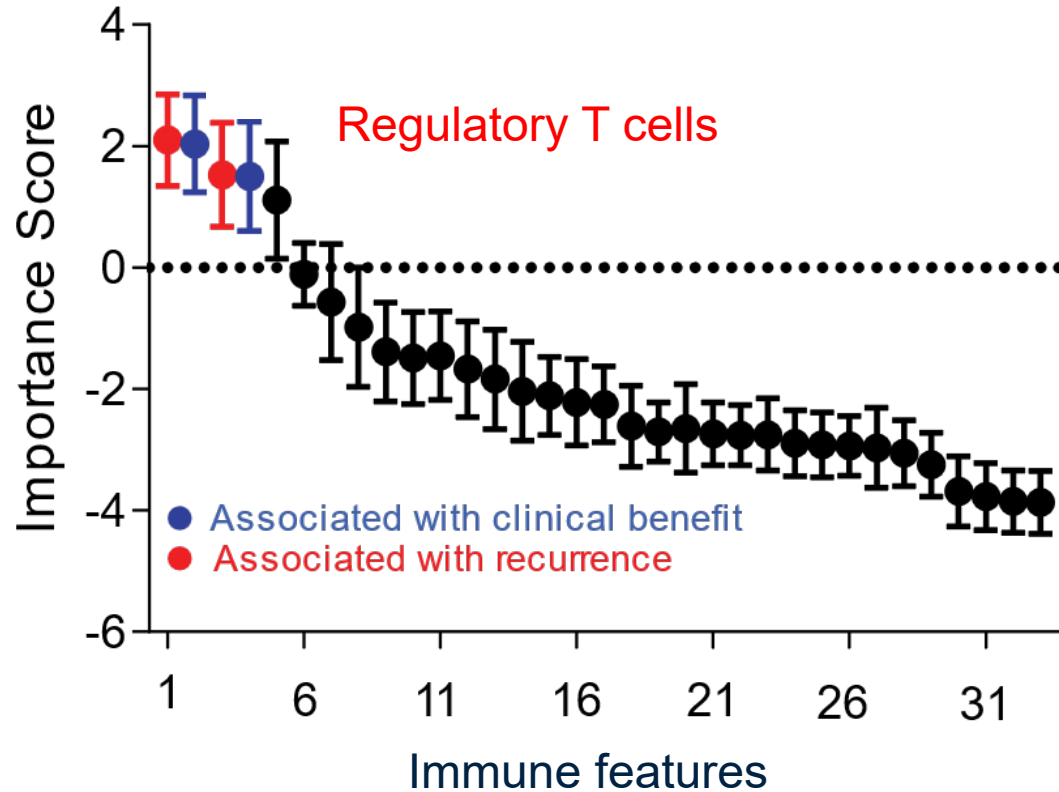
- PD-1 blockade is reinvigorating exhausted CD8 T cells

Question 3: What factors decide clinical response?

Machine learning approach reveals that regulatory T cells limit clinical response to PD-1 treatment



Machine learning approach reveals that regulatory T cells limit clinical response to PD-1 treatment



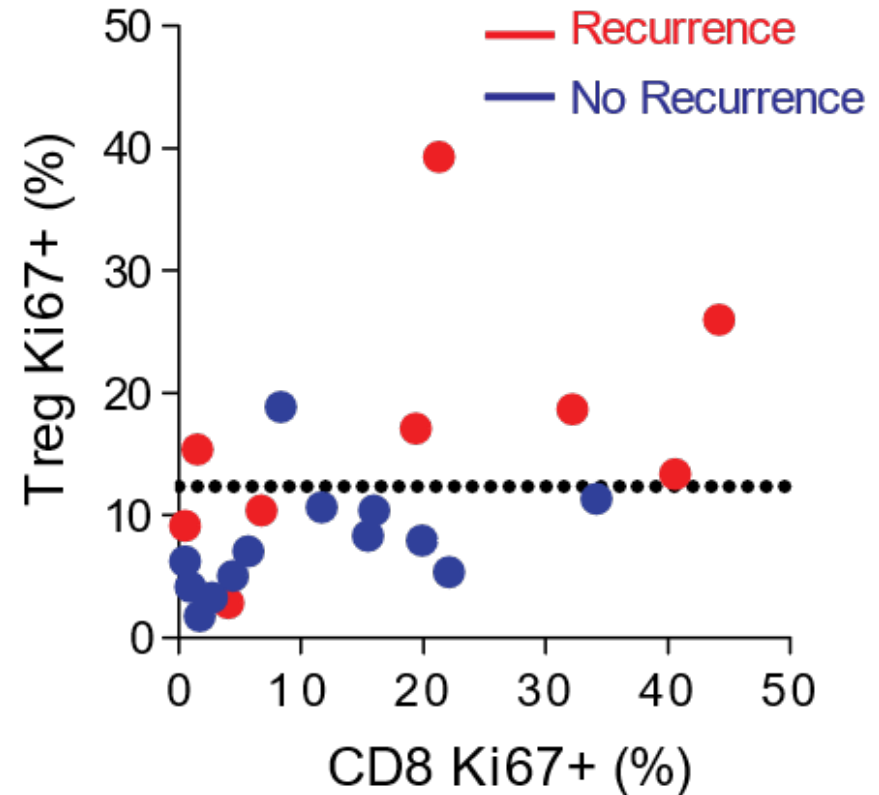
Machine learning approach reveals that regulatory T cells limit clinical response to PD-1 treatment



Can we personalize treatment (precision immuno-oncology)



Can we therapeutically remove regulatory T cells for certain patients?



T-cell invigoration to tumour burden ratio associated with anti-PD-1 response

Alexander C. Huang^{1,2,3,4}, Michael A. Postow^{5,6*}, Robert J. Orlowski^{1,2,3,4*}, Rosemarie Mick^{3,4,7}, Bertram Bengsch^{2,15}, Sasikanth Manne^{2,8}, Wei Xu^{1,3}, Shannon Harmon^{1,3}, Josephine R. Giles^{2,4,8}, Brandon Wenz^{1,3}, Matthew Adam DeBorah Kuk¹⁰, Katherine S. Panageas¹⁰, Cristina Carrera^{5,11}, Phillip Wong^{9,12}, Felix Quagliarello^{2,8}, Bradley V. Kurt D'Andrea^{1,3}, Kristen E. Pauken^{2,8}, Ramin S. Herati^{1,2,3}, Ryan P. Staupel^{2,8}, Jason M. Schenkel¹³, Suzanne L. Shaw¹, Shawn Kothari¹, Sangeeth M. George^{2,4,8}, Robert H. Vonderheide^{1,2,3,4}, Ravi K. Amaravadi^{1,3}, Giorgos C. Karakousis^{4,10,17}, Lynn M. Schuchter^{1,3}, Xiaowei Xu^{3,15}, Katherine L. Nathanson^{1,3,4}, Jedd D. Wolchok^{5,12}, Tara C. Gangadhar^{1,3}, E. John Wherry^{2,3,4,8}§

nature
medicine

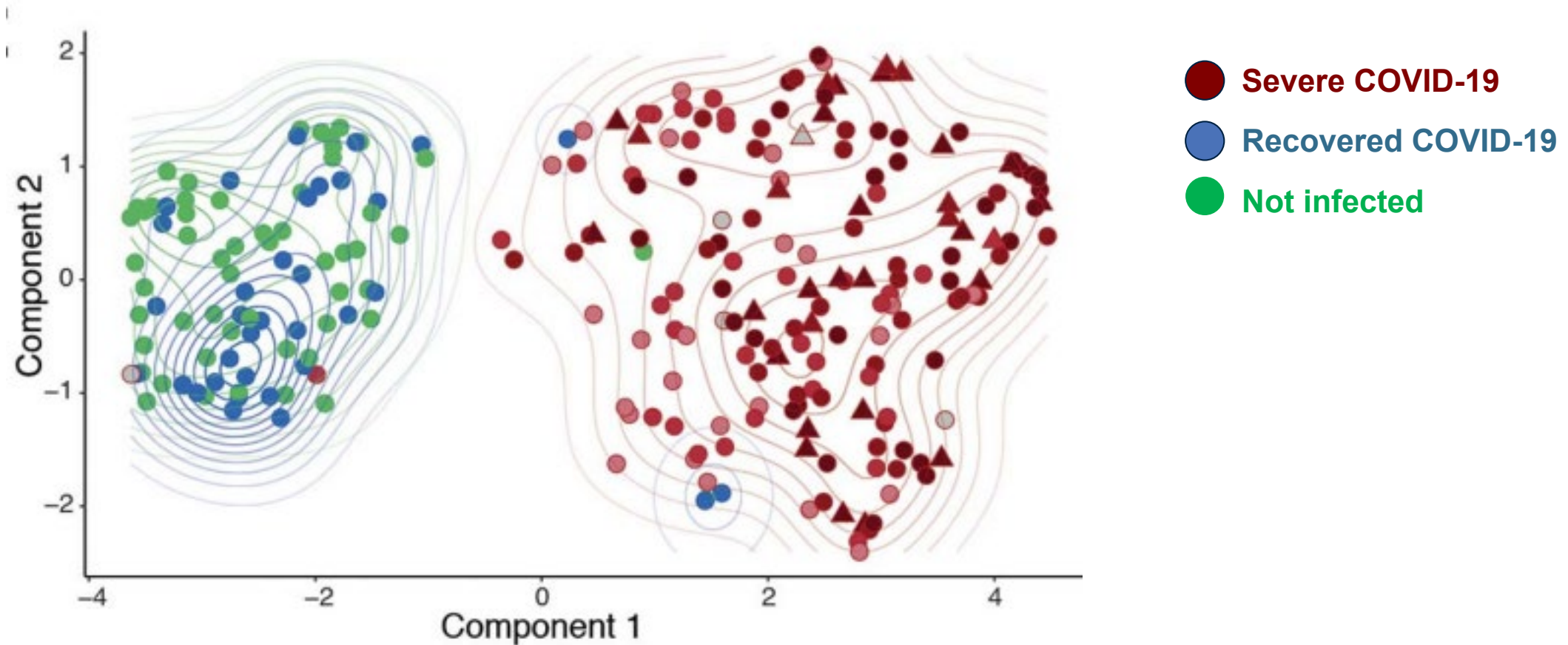
FOCUS | LETTERS

<https://doi.org/10.1038/s41591-019-0357-y>

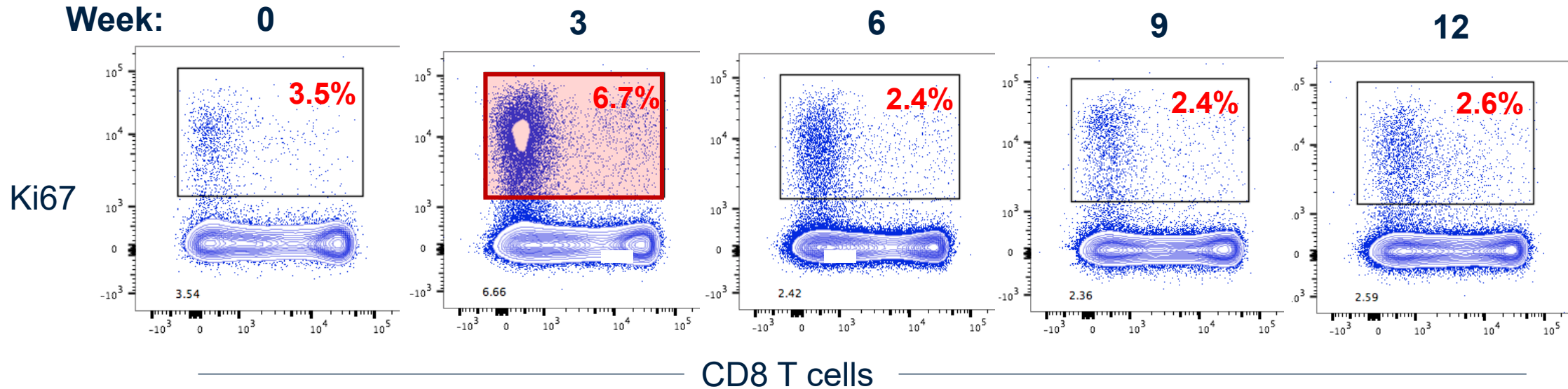
A single dose of neoadjuvant PD-1 blockade predicts clinical outcomes in resectable melanoma

Alexander C. Huang^{1,2,3,4,16*}, Robert J. Orlowski^{1,11,16}, Xiaowei Xu^{4,5}, Rosemarie Mick^{3,4,6}, Sangeeth M. George^{7,12}, Patrick K. Yan^{2,7}, Sasikanth Manne^{2,7}, Adam A. Kraya^{1,4}, Bradley Wubbenhorst^{1,4}, Liza Dorfman^{1,4}, Kurt D'Andrea^{1,4}, Brandon M. Wenz^{1,4}, Shujing Liu^{4,5}, Lakshmi Chilukuri^{2,7}, Andrew Kozlov^{4,8}, Mary Carberry^{1,4}, Lydia Giles^{1,4}, Melanie W. Kier¹, Felix Quagliarello^{2,13}, Suzanne McGettigan^{1,4}, Kristin Kreider^{1,4}, Lakshmanan Annamalai⁹, Qing Zhao⁹, Robin Mogg^{9,14}, Wei Xu^{1,4}, Wendy M. Blumenschein⁹, Jennifer H. Yearley⁹, Gerald P. Linette^{1,2,3,4}, Ravi K. Amaravadi^{1,4}, Lynn M. Schuchter^{1,4}, Ramin S. Herati^{1,2}, Bertram Bengsch^{2,15}, Katherine L. Nathanson^{1,3,4}, Michael D. Farwell^{4,8,17}, Giorgos C. Karakousis^{4,10,17}, E. John Wherry^{2,3,4,7,17*} and Tara C. Mitchell^{1,4,17*}

Immune fingerprint in peripheral blood

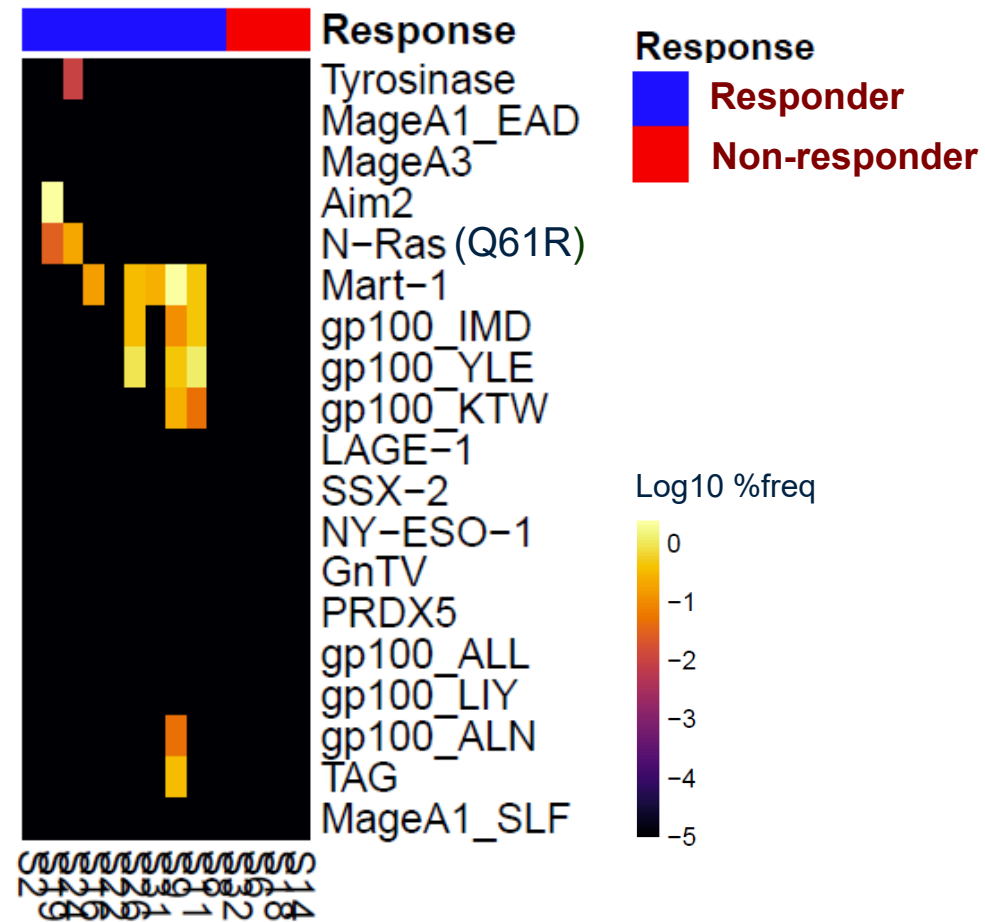
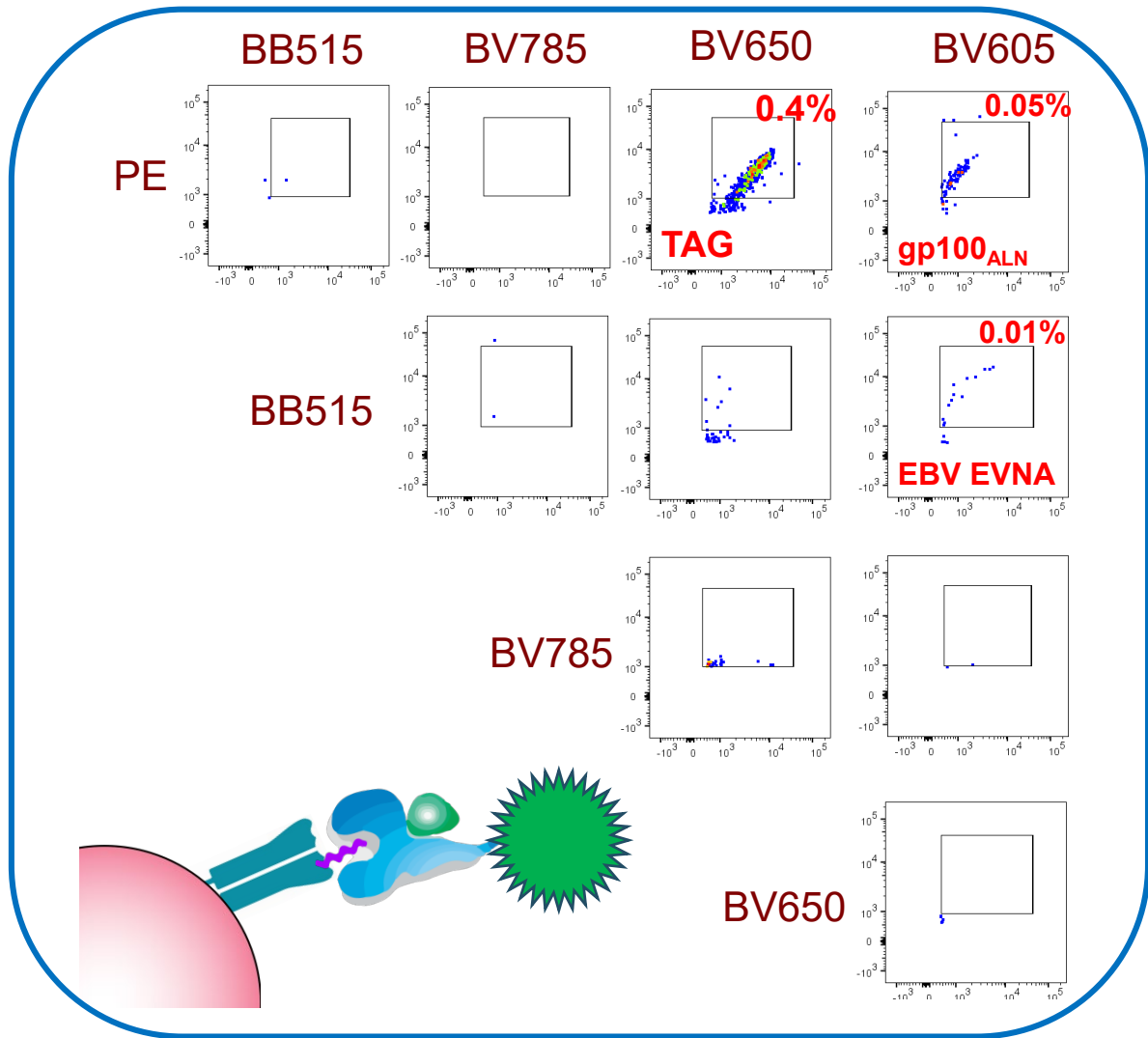


Precision Immuno-Oncology



Can we be more precise in measuring the immune response to checkpoint blockade?

Tumor-Specific T cells



IMMUNE HEALTH REPORT

Immune Health® Report Penn Medicine

Report Version: 1.1.0
 Report Version Validation Date: 2019-07-10
 Report Generation Timestamp: 2019-10-15 09:56:54

Clinical

Patient Name: KASSER, LISA D
 Patient UID: 100004721

Patient Age: 63 Years
 Immune Health Reference Cohort Age Distribution (N = 11902)

99th percentile

Patient Gender: Female
 Immune Health Reference Cohort Gender Distribution (N = 11902)

Female (50.8%) Male (49.2%)

Immune-Intrinsic

Regulatory T cells

CD4 Counts (1000/cuL)

Immune Fingerprint

Component 2

Component 1

Tumor-specific

Tyrosinase
 MgaA1_LEAD
 MgaA3
 Aim2
 N-Ras
 Mart-1
 gp100_IMD
 gp100_VLE
 gp100_KTW
 LAGE-1
 SSX-2
 NY-ESO-1
 GntV
 PRDX5
 gp100_ALL
 gp100_LIV
 gp100_ALN
 TAG
 MgaA1_SLF

5:25 Launcher
<https://s3.amazonaws.com/...>

Penn Medicine
Immune Health®
Report

Report Version: v1.0
 Report Version Validation Date: 2019-02-01
 Report Generation Timestamp: 2019-06-19 13:54:16

Clinical

Patient Name: Jane, Doe
 Patient MRN: 555555555

Patient Age: 60 Years
 Immune Health Reference Cohort Age Distribution (N = 75):

Patient Sex: Female
 Immune Health Reference Cohort Sex

Acknowledgements

Tara Miller Melanoma Center



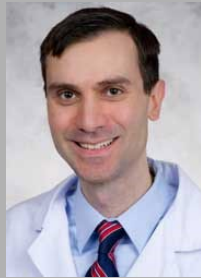
Lynn Schuchter



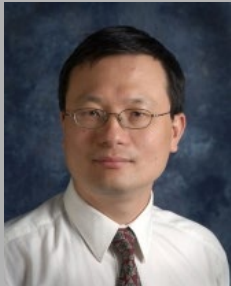
Tara Mitchell



Giorgos Karakousis



John Muira



George Xu



Ravi Amaravadi



Michael Farwell

- Justine Cohen**
- Kistin Kreider**
- Suzanne McGettigan**
- Ahron Flowers**
- Wei Xu**
- Cathy Zheng**
- Lydia Giles**
- Mary Carberry**

Huang Lab



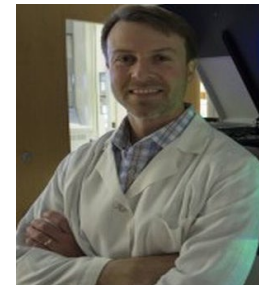
Nick Han



Justin Kim

- Sangeeth George**
- Patrick Yan**
- Stella Park
- Daniel Yoon
- Nick Frazette
- Joanna Lee

Wherry Lab



- Robert Orlowski
- Ramin Herati
- Cecile Alanio
- Zeyu Chen
- Shin Ngiow
- Kristen Pauken
- Sasi Manne
- Josephine Giles

