

Translation of TCRs to the clinic –

MAGE-A1 TCR gene therapy  
of Multiple Myeloma  
*as an example*

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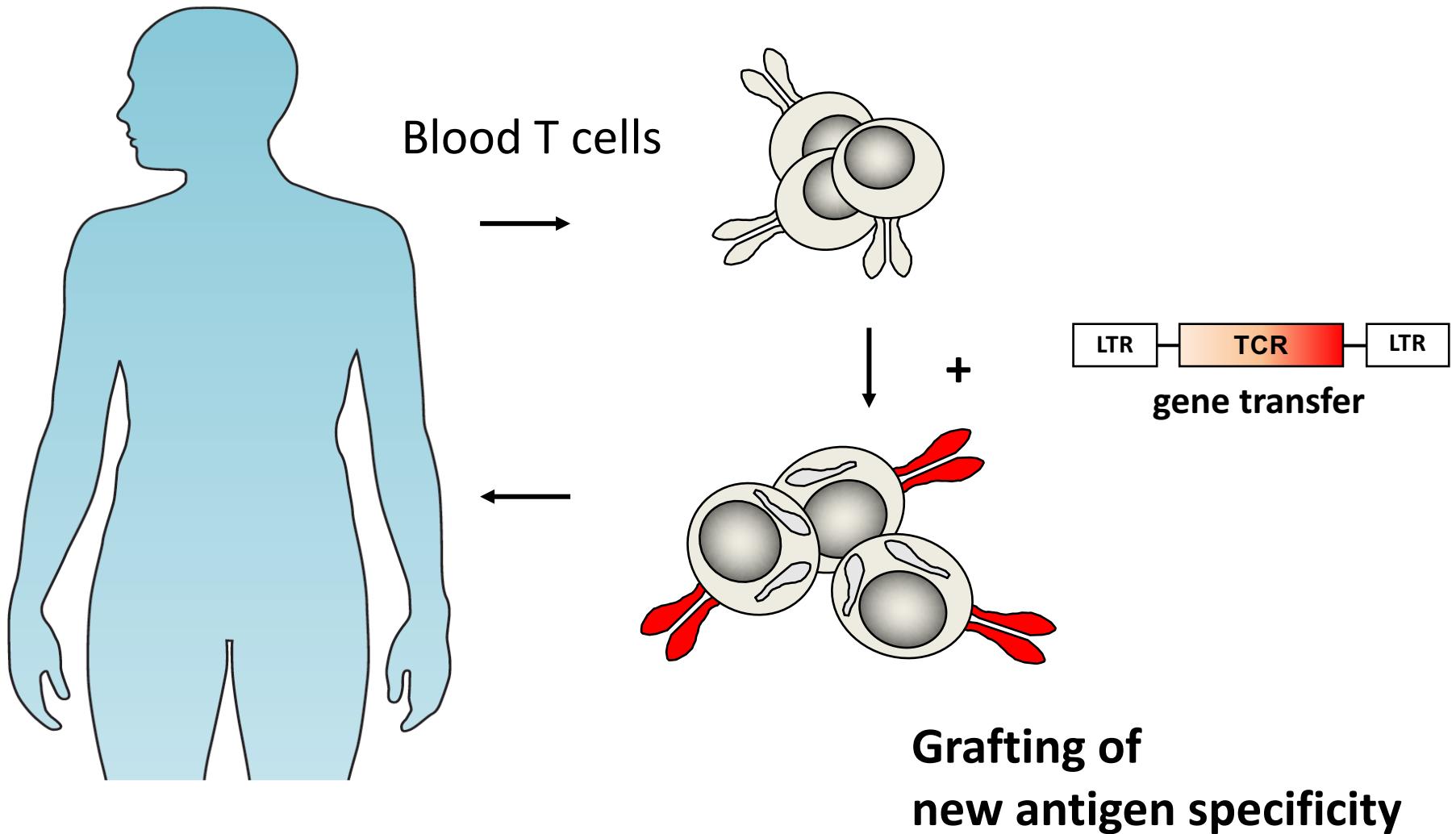
# MAGE-A1 TCR gene therapy of Multiple Myeloma

BMBF program „Personalized Medicine“

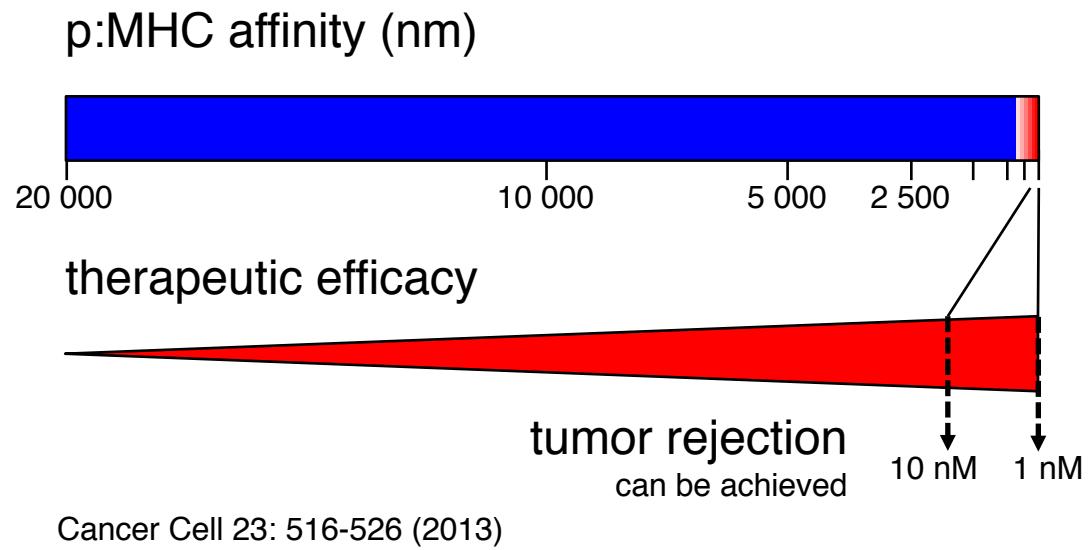
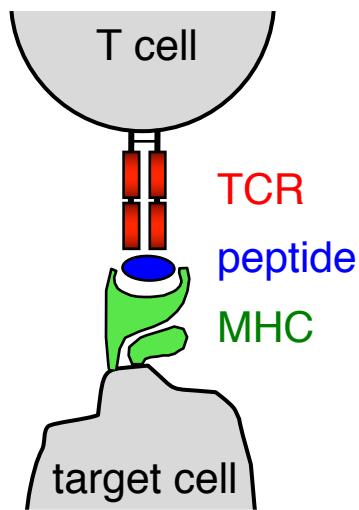


Federal Ministry  
of Education  
and Research

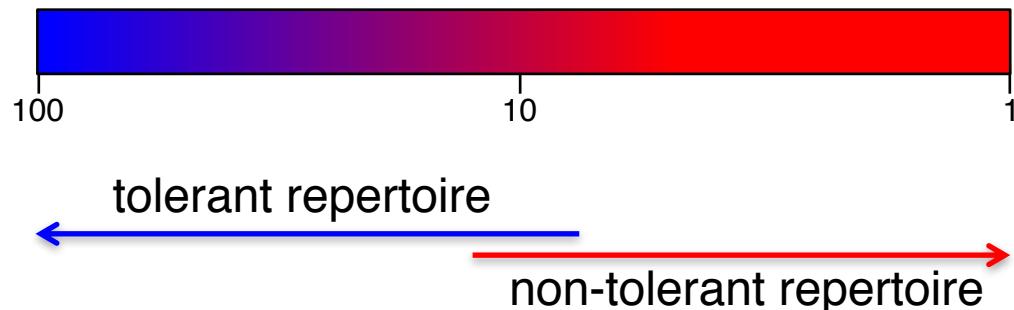
# Redirected T cell therapy



# Interaction between T cells and target cells is a three body problem: TCR - peptide - MHC



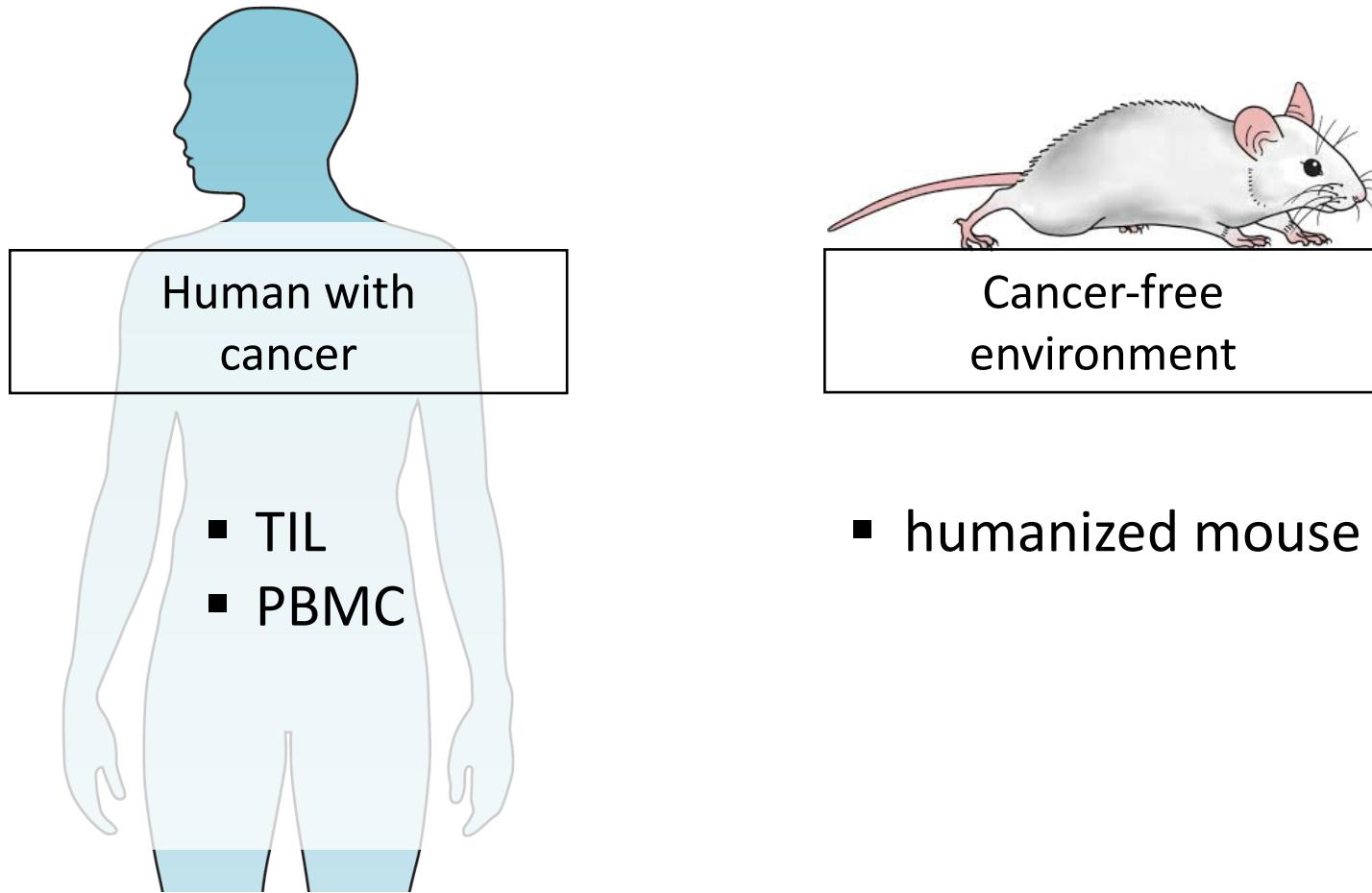
TCR:pMHC affinity ( $\mu\text{m}$ )



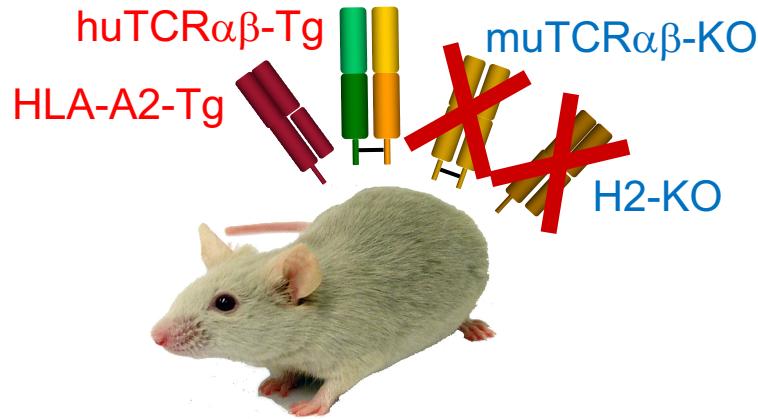
# POINTS TO CONSIDER FOR ADOPTIVE T CELL THERAPY

- best possible risk-benefit ratio for target antigen:
  - TSA (e.g. neoantigens) > CT > differentiation Ag
- most efficient rejection will occur when cancer cells are recognized as foreign:
  - TCRs with optimal-affinity

# How to obtain therapeutic TCRs?



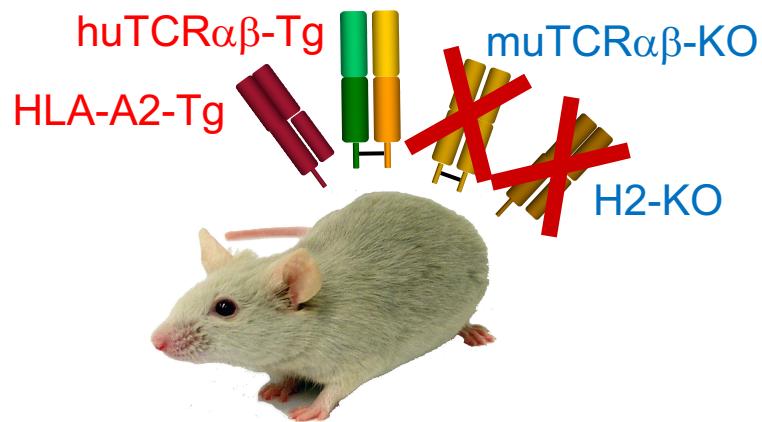
# Transgenic mice with a diverse human T cell antigen receptor repertoire



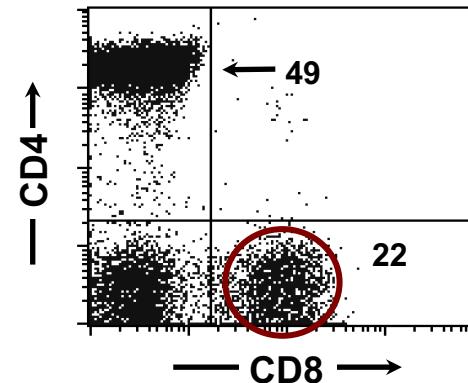
- Mice are not tolerant for most human tumor antigens
- Human TCRs from non-tolerant repertoire in cancer free mice

**huTCR locus-Tg mice**

# Peripheral T cells in huTCR-locus Tg mice



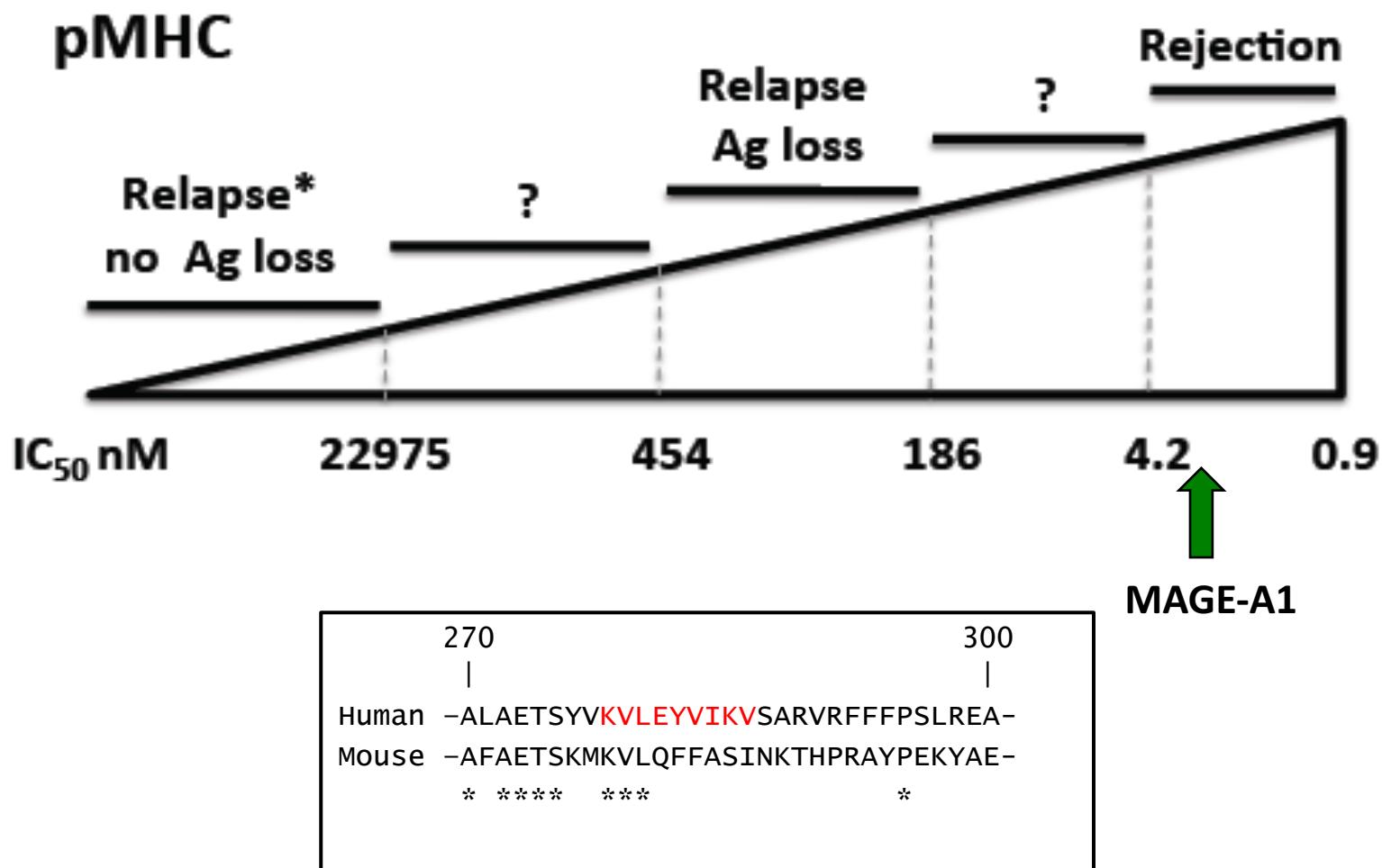
huTCR locus-Tg mice



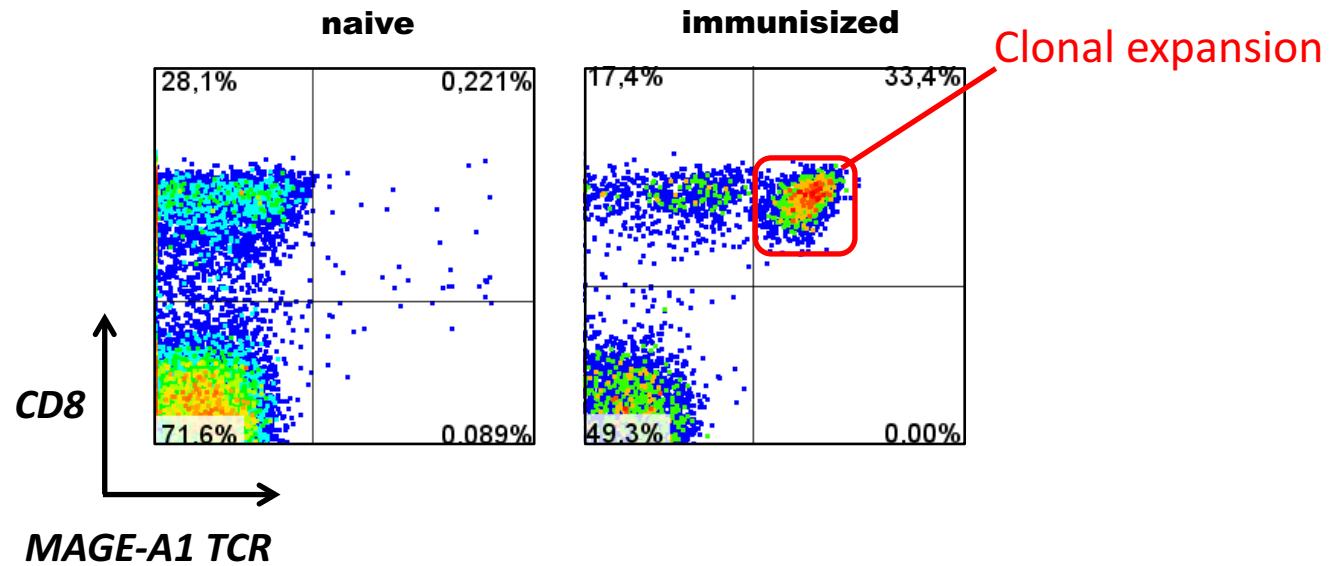
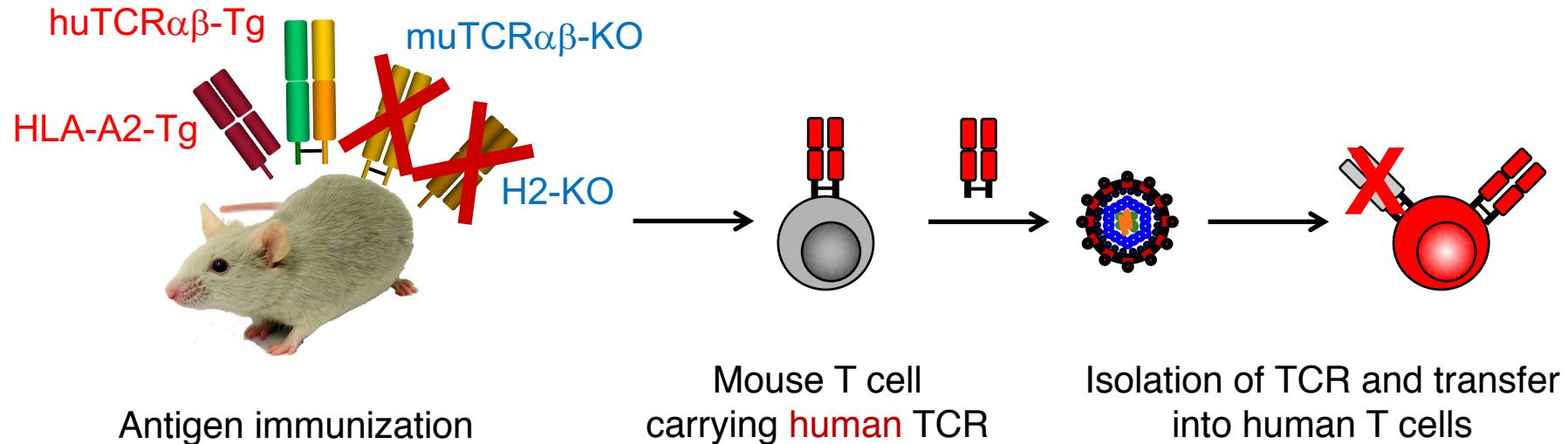
MHC I: human  
TCR: human

- CTL to various human TAA (>10)
- CTL to cancer viruses (>10)
- CTL to various human TSA (>30)

# pMHC affinity is important

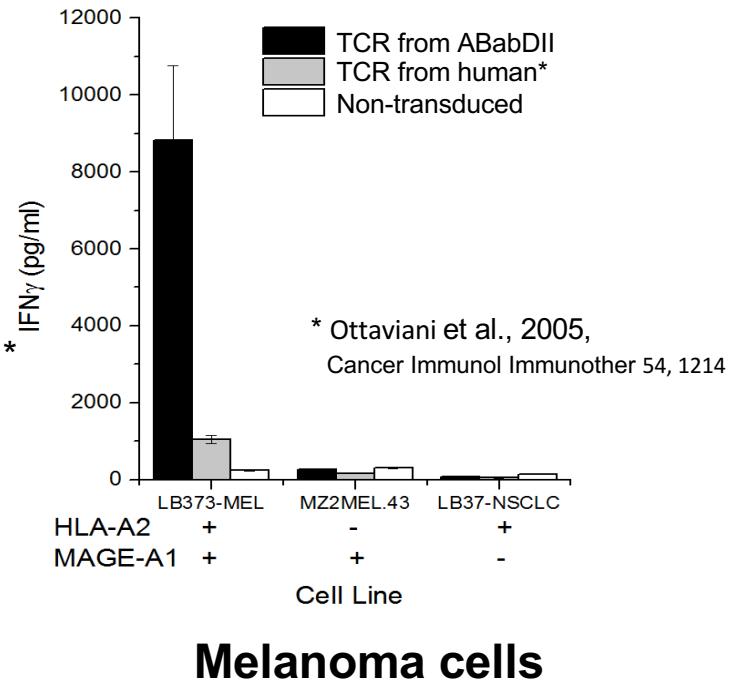
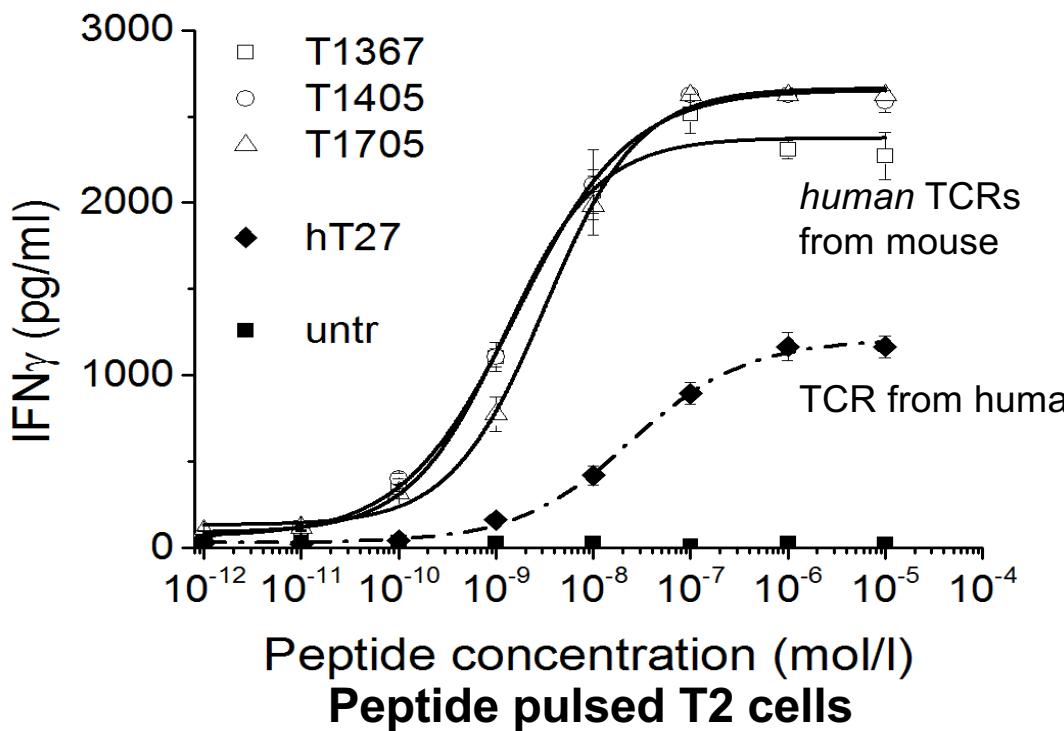


# Humanized mouse model for TCR generation

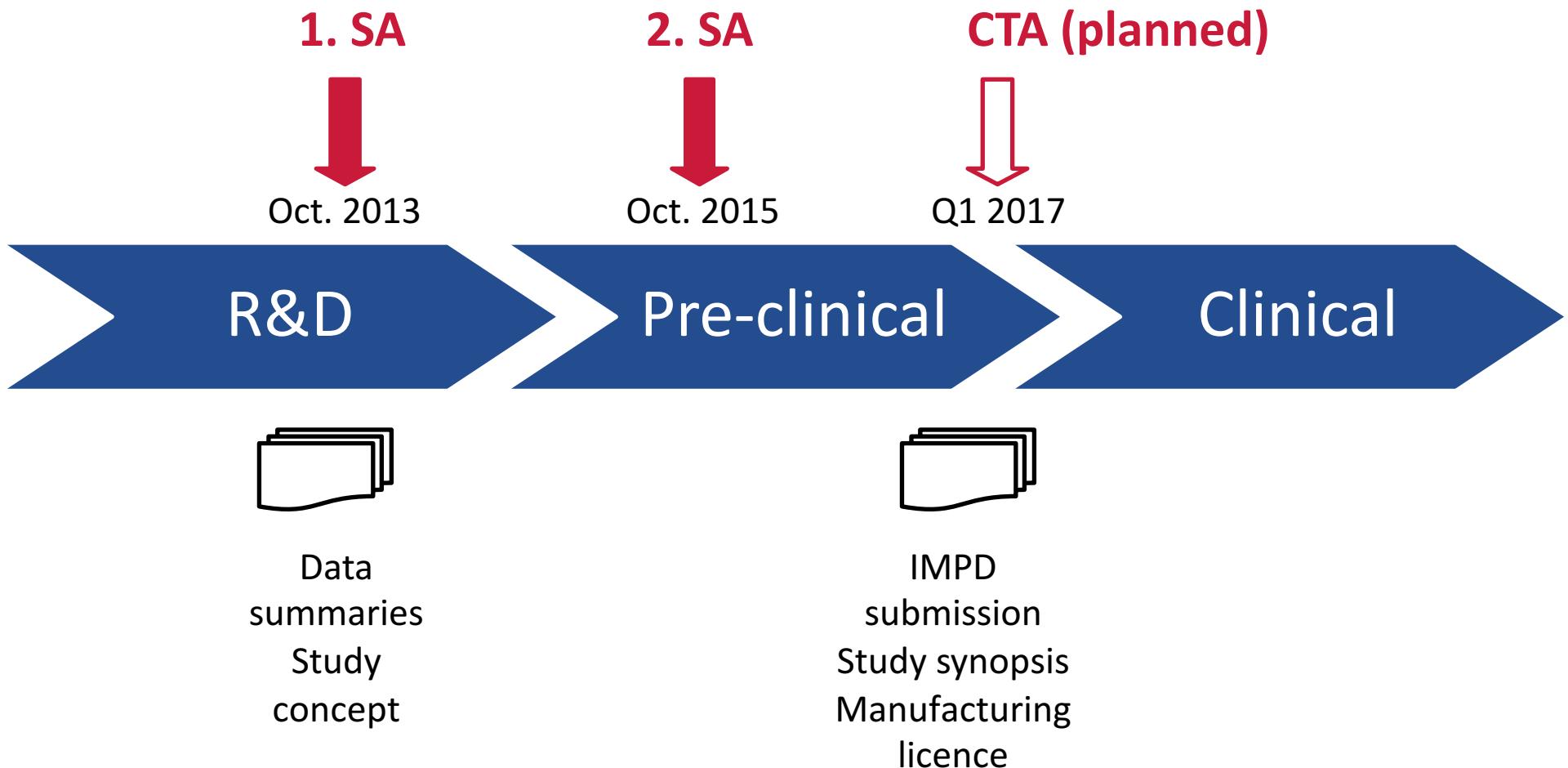


# CANCER-ASSOCIATED ANTIGENS AS TARGET

*Mouse-derived MAGE-A1 TCR  
has higher functional affinity*



# Timeline MAGE A1 TCR gene therapy of Multiple Myeloma



# SAFETY OF T1367 T CELL THERAPY

## *Potential safety concerns*

- MAGE-A1 expression in **healthy tissues**
- Allo-reactivity
  - T1367 was generated in mice expressing a **single HLA class I** molecule (in part applies also for an allogeneic human environment)
- cross-reactivity
  - **Promiscuous** TCR recognition has been reported
  - T1367 was positively and negatively selected based on a **mouse peptide repertoire**

# MAGE-A1

- Limited expression in normal tissues (testis, placenta, embryonic tissue, **mTECs**)

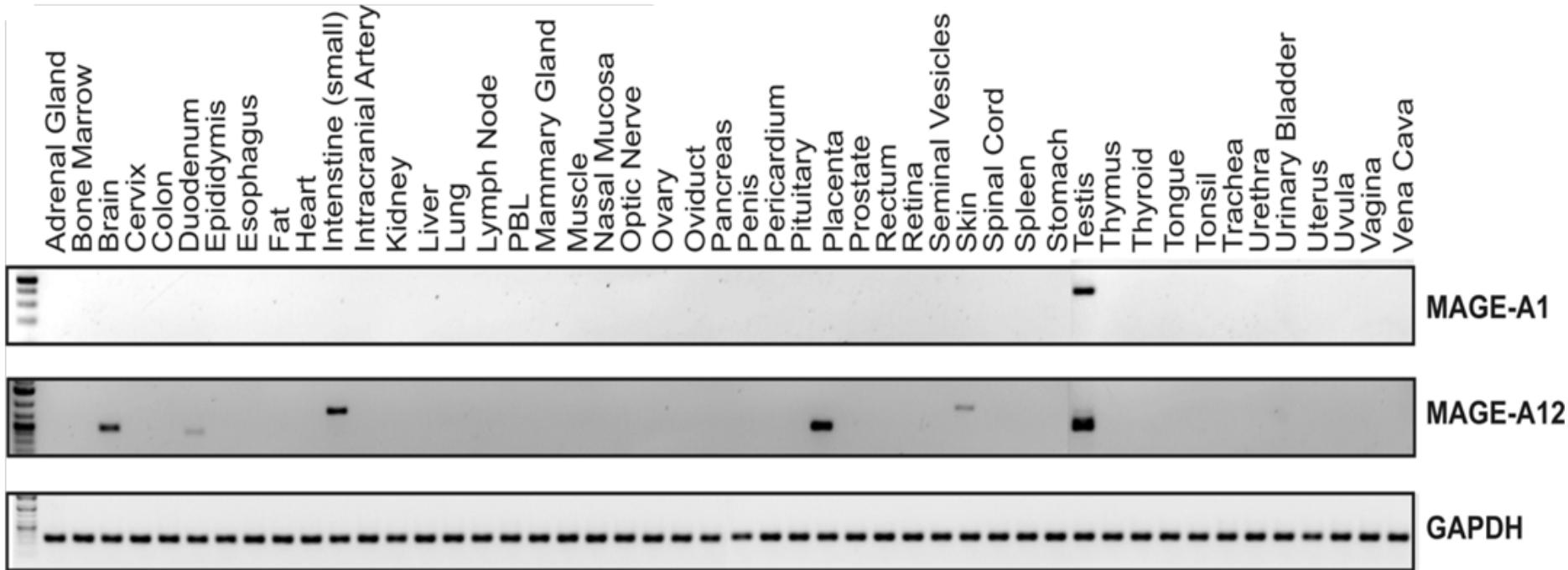


## Expression in tumors:

- Multiple myeloma
- Lung cancer (NSCLC)
- Melanoma
- Breast cancer
- Colon cancer
- Hepatocellular carcinoma
- Cholangiocellular carcinoma

# CANCER-ASSOCIATED ANTIGENS AS TARGET

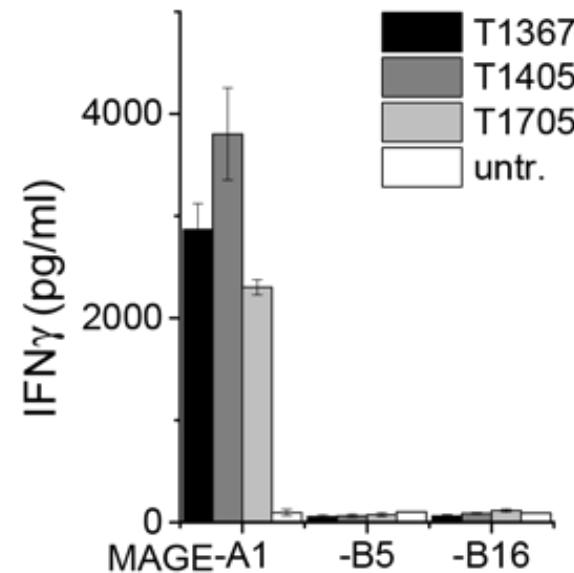
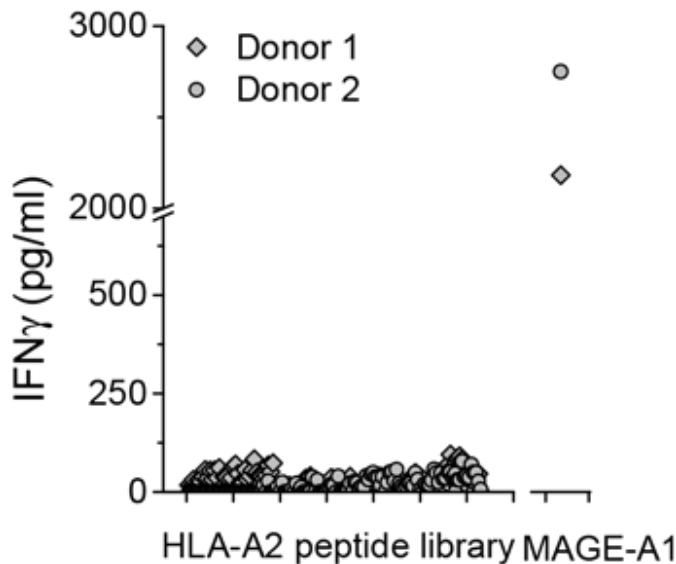
## *Restricted MAGE-A1 expression*



# CANCER-ASSOCIATED ANTIGENS AS TARGET

*No evidence for off-target recognition*

More than 100 HLA-A2 peptide ligands



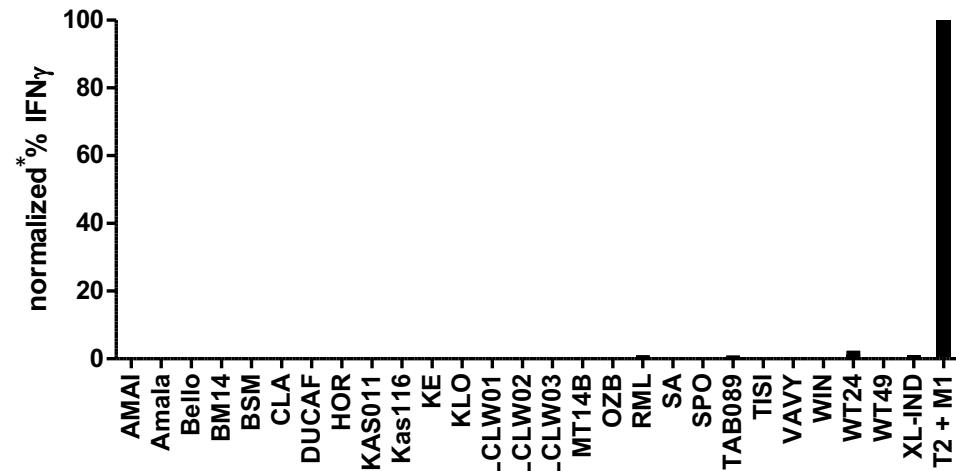
Peptide	Sequence	IC <sub>50</sub> (nM)
MAGE-A1	KVLEYYVIKV	4.69
MAGE-B5	KVLEY <b>L</b> AKV	4.11
MAGE-B16	KVLE <b>F</b> VAKV	4.97

# CANCER-ASSOCIATED ANTIGENS AS TARGET

*No evidence for allo-recognition*

## LCL panel

	HLA-A*		HLA-B*		HLA-C*	
AMAI	68:02		53:01		04:01	
AMALA	02:17:01		15:01:01		03:03:01	
Bello	02:02	11:01	41:01	52:01	12:02	17:01
BM14	03:01		07:02		07:02	
BSM	02:0101		15:010101		03:0401	
CLA	02:06:01	24:02	08:01	35	7	
DUCAF	30:02		18:01		05:01	
HOR	33:0301		44:0301		14:03	
KAS011	01:0101		37:01		06:02	
KAS116	24:020101		51:01		12:03	
KE	02:01	29:02	44:03	44:05	02:02	16:01
KLO	02:08	01:01:01:01	08:01:01	50:01:01	07:01:01:01	06:02:01:02
LCLW01	03:01	24:02	15:01	35:01	03:03	04:01
LCLW02	02:01	26:01	38:01	44:02	05:01	12:03
LCLW03	02:01	23:01	15:01	58:01	03:04	07:01
MT14B	31:01		40:01		03:04	
OZB	02:09	03:01:01	38:01	35:02	04:01:01	12:03:01
RML	02:04		51:0101		15:02	
SA	24:020101		07:0201		07:02	
SPO	02:01		44:02		05:01	
TAB089	02:07		46:01		01:02	
TISI	24:020101		35:08		04:01	
VAVY	01:01		08:01		07:01	
WIN	01:01		57:0101		06:02	
WT24	02:0101		27:0502		02:0202	
WT49	02:05:01		58:01:01		07:18	
XLI-ND	02:10	30:01	13:02	40:06:01:01	06:02	08:01

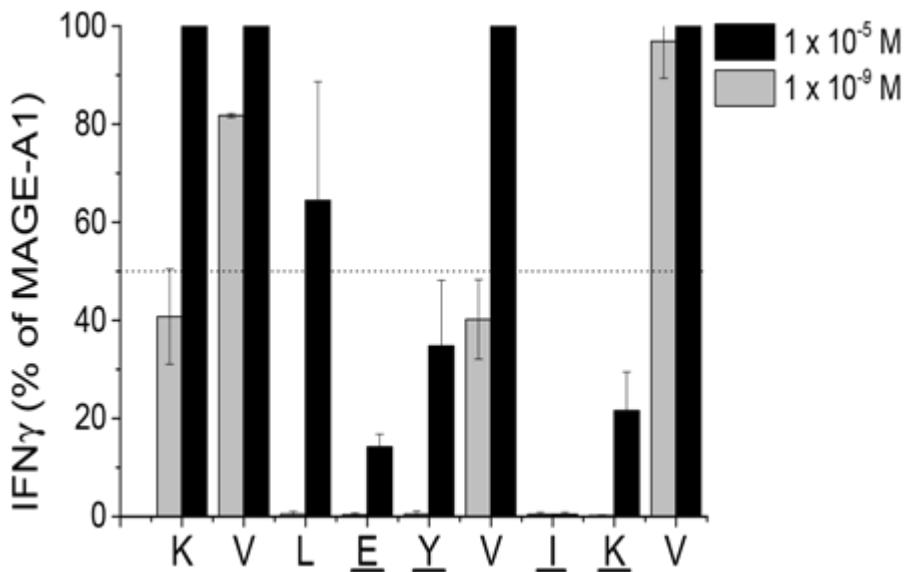


\*Normalized to IFN $\gamma$  production of MAGE-A1 loaded T2 cells

LCLs representing more than **75%** for HLA-A\*,  
**60%** for HLA-B\* and **78%** for HLA-C\*  
of the alleles within the German population

# CANCER-ASSOCIATED ANTIGENS AS TARGET

## *MAGE-A1 recognition motif-related human self-peptides*

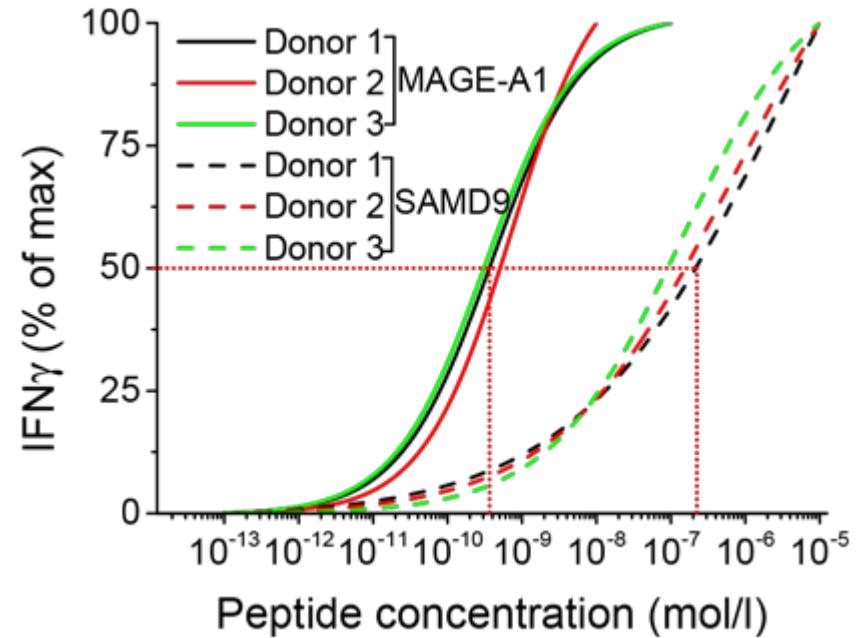
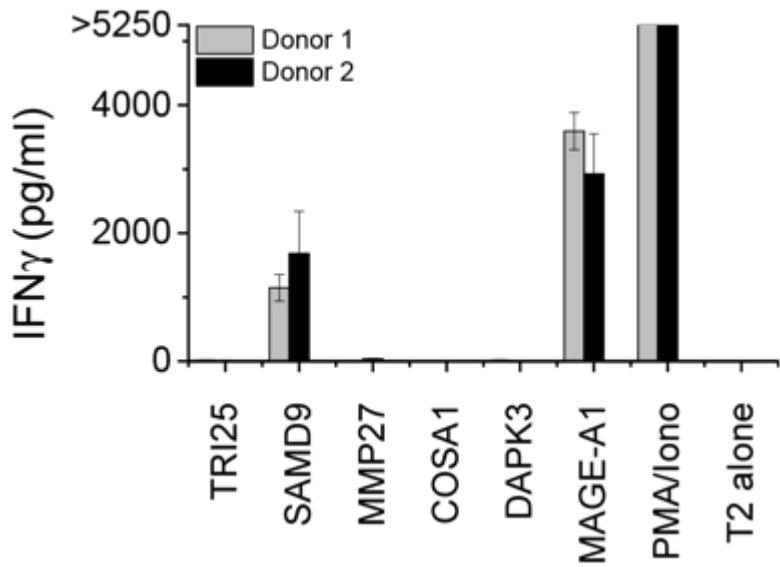


Alanine scan

Sequence	Gene Symbol	IC <sub>50</sub> (nM)
X X X E Y X I K X	T1367 motif	
K V L E Y V I K V	MAGEA1	4.11
E L L E Y Y I K V	TRI25	23.34
G L L E Y L I K S	SAMD9	73.23
K Q F E Y D I K T	MMP27	834.74
R S L E Y D I K L	COSA1	4258.75
R L K E Y T I K S	DAPK3	5212.32

# CANCER-ASSOCIATED ANTIGENS AS TARGET

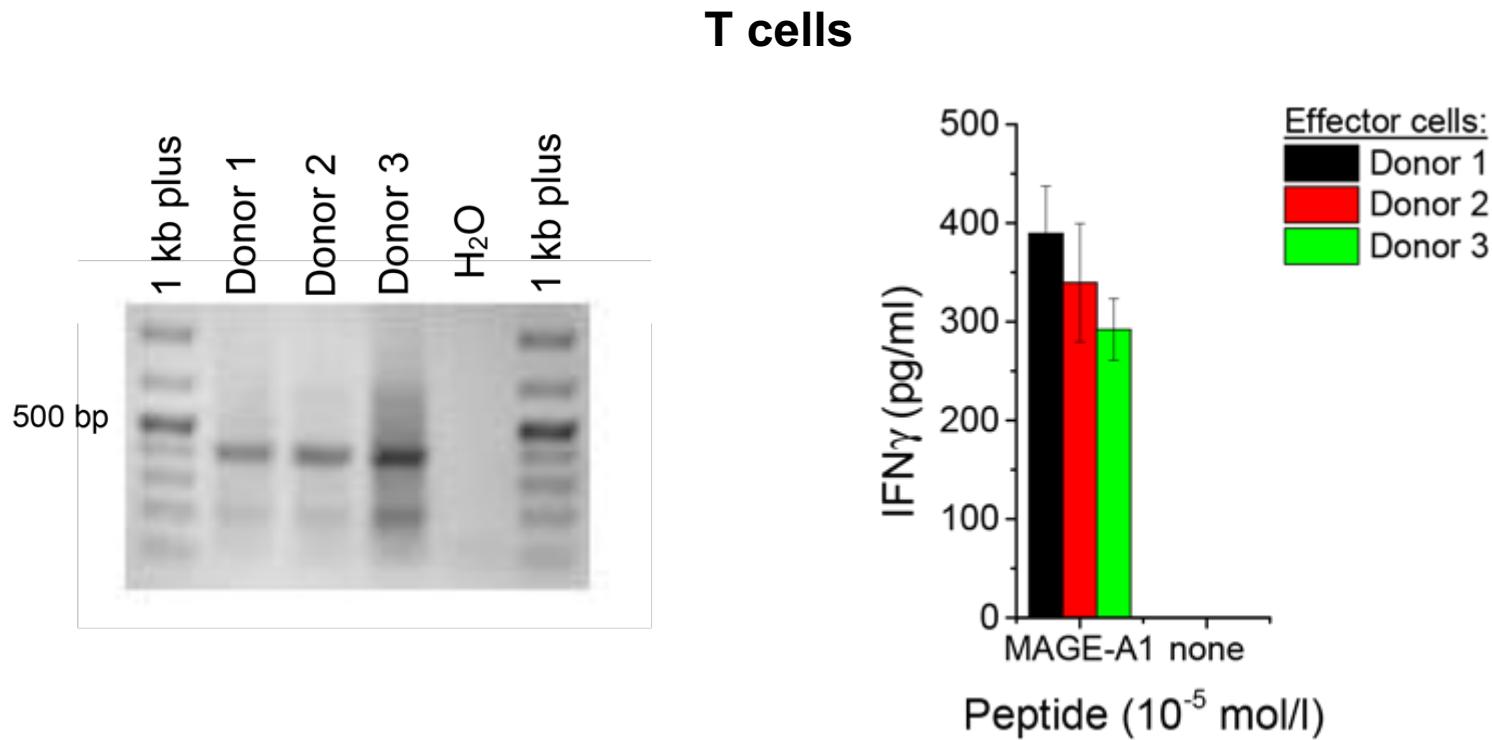
*SAMD9 is recognized at high peptide concentration*



SAMD9: Sterile Alpha Motif Domain Containing Protein 9

# CANCER-ASSOCIATED ANTIGENS AS TARGET

*SAMD9 is not naturally presented*



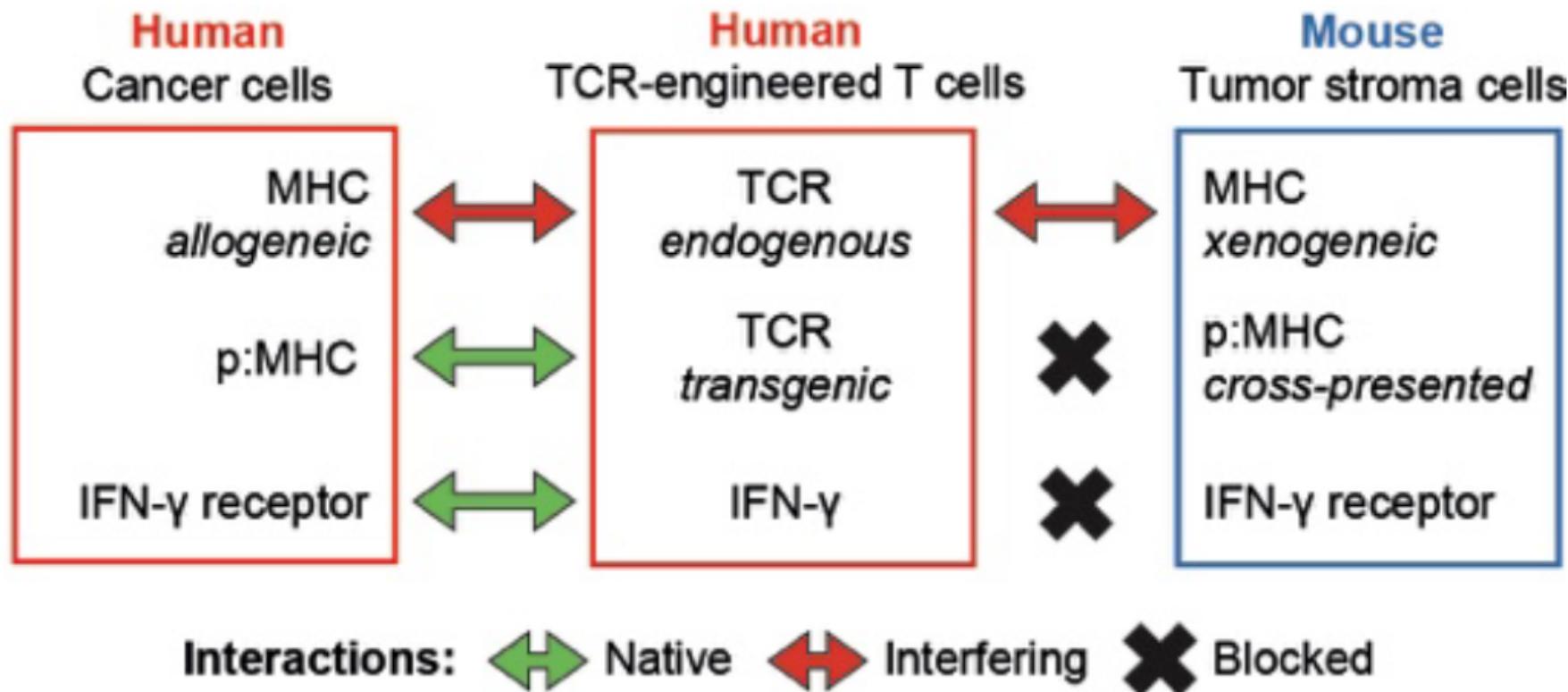
SAMD9: Sterile Alpha Motif Domain Containing Protein 9

# Limitations in xenograft cancer models

Biodistribution and pharmacokinetics of T1367-transduced T cells can be addressed only in the autologous host, the MM patient

- human T cells in mice poorly expand or survive (species-specific factors)
- human T cells in NSG mice acquire functional activity, but may elicit lethal graft-versus-host disease (GvHD).

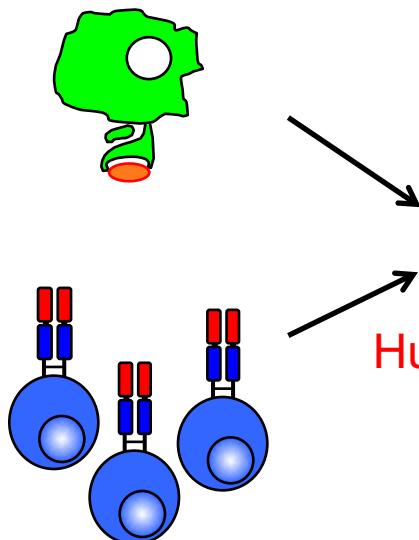
Xenograft model



# A pre-clinical model for analysis of TCR efficacy

1

Syngeneic mouse tumor cells  
expressing human antigen  
and HLA-A2

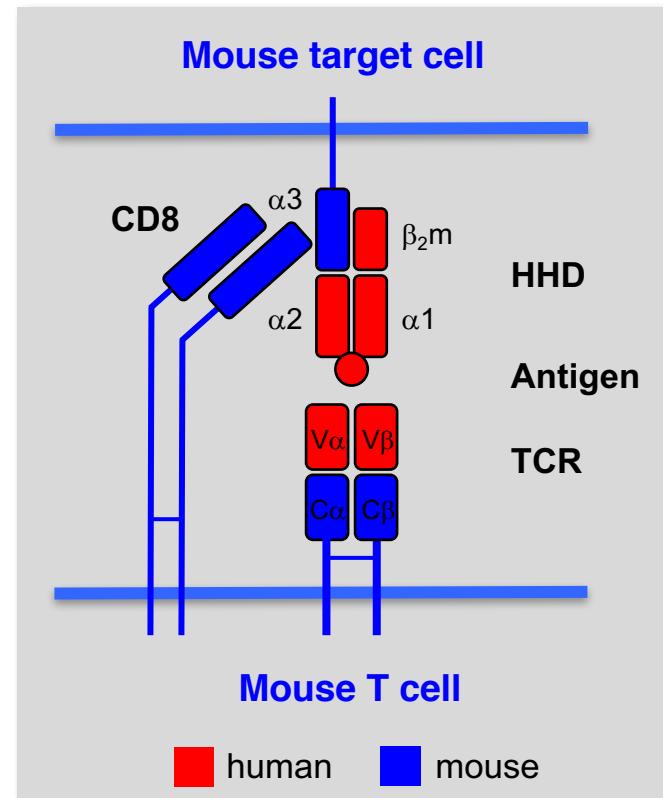


3

Human MHC-transgenic  
mouse (HHD)

2

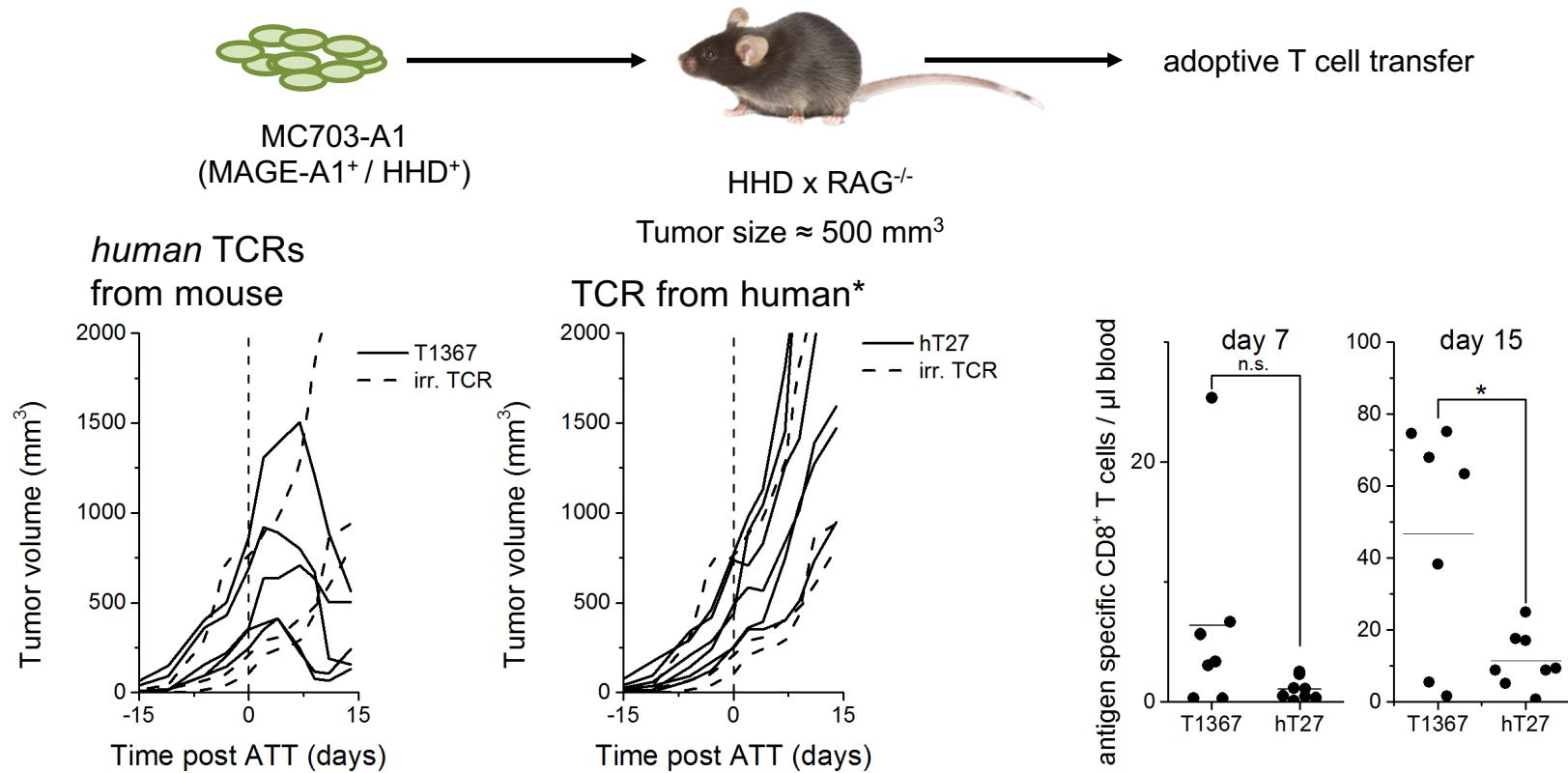
HLA-A2<sup>+</sup> mouse T cells  
expressing human TCR



Does TCR gene therapy lead to rejection or relapse of tumor?

# CANCER-ASSOCIATED ANTIGENS AS TARGET

## *In vivo function of TCR modified T cells*



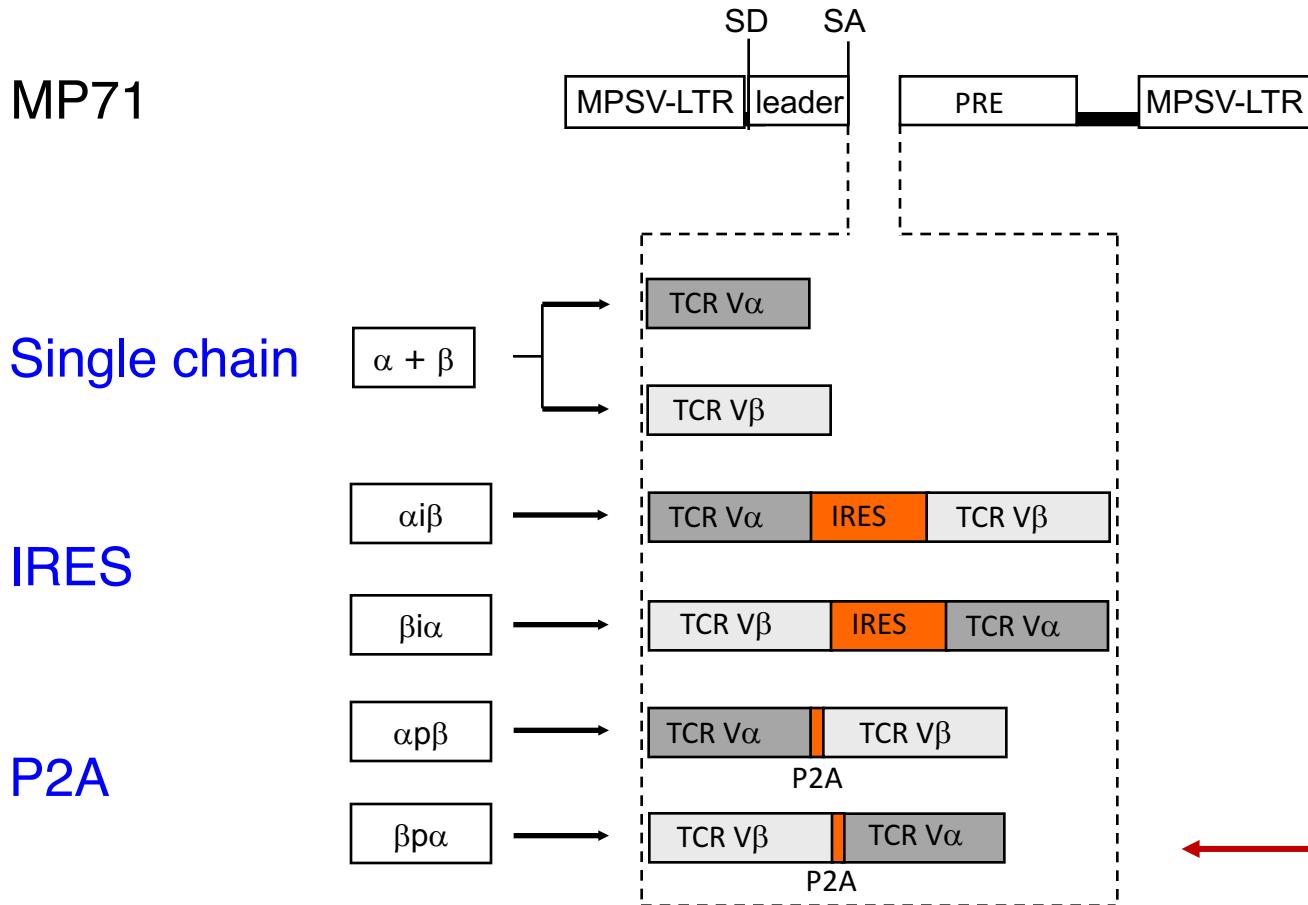
→ The TCR repertoire against MAGE-A1<sub>278</sub> is likely skewed towards low affinity in humans

# MAGE-A1 TCR gene therapy: Study Information

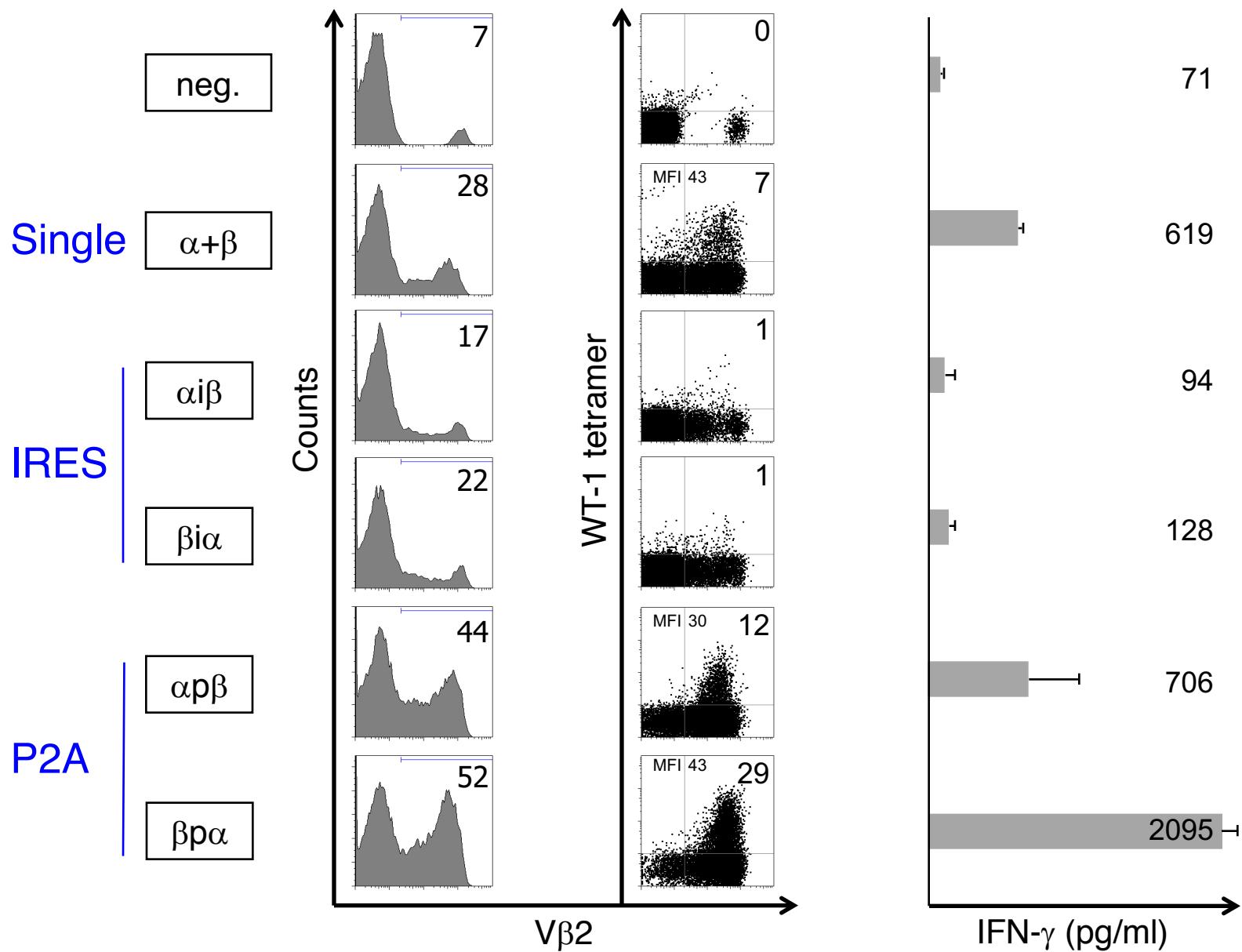
- Chimeric mouse/human TCR
- Target: Cancer-germline antigen
- Vector: Gamma retroviral MP71
- Indication: Relapsed/refractory Multiple Myeloma

# TCR $\alpha$ - and $\beta$ -chain gene expression cassettes

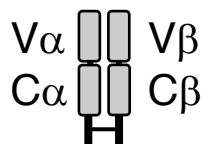
WT-1 TCR



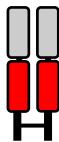
# Transgene cassette determines TCR expression level



# Optimization of TCR genes improves T cell functionality

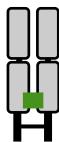


Human TCR (wild type)



## Murinization (mu)

Preferential pairing of tg TCR chains  
(Cohen, 2006)



## Disulfide bond (cys)

Preferential pairing of tg TCR chains  
(Kuball, 2007)



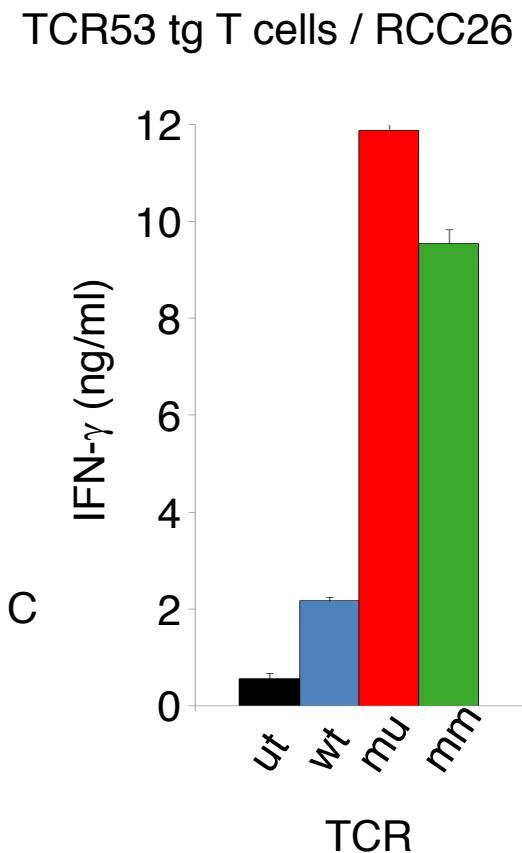
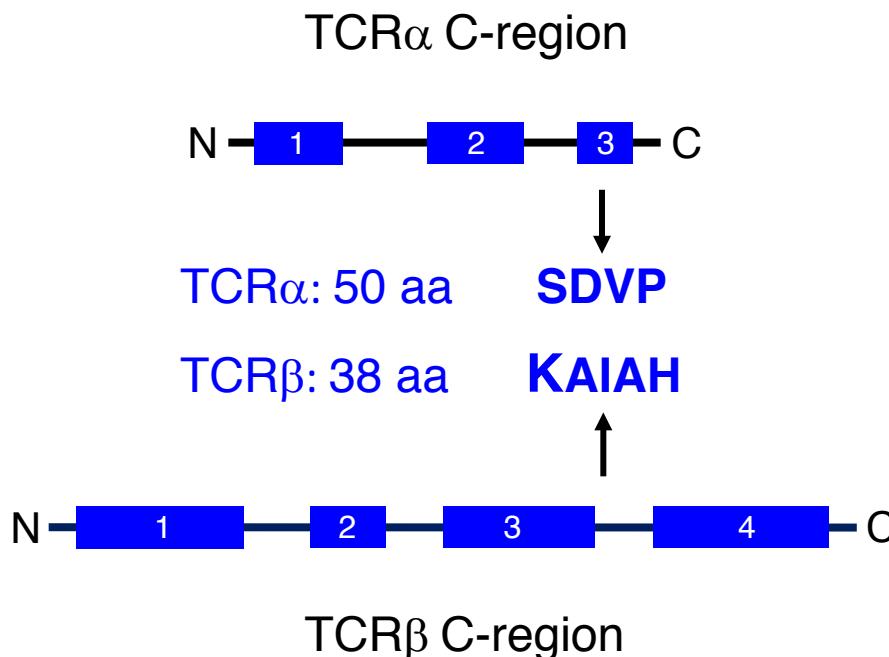
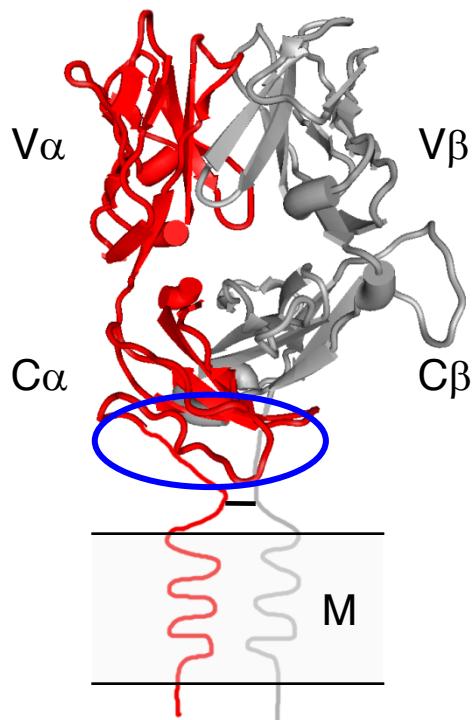
## Codon optimization (co)

Enhanced tg TCR expression level  
(Scholten, 2006)

## Others

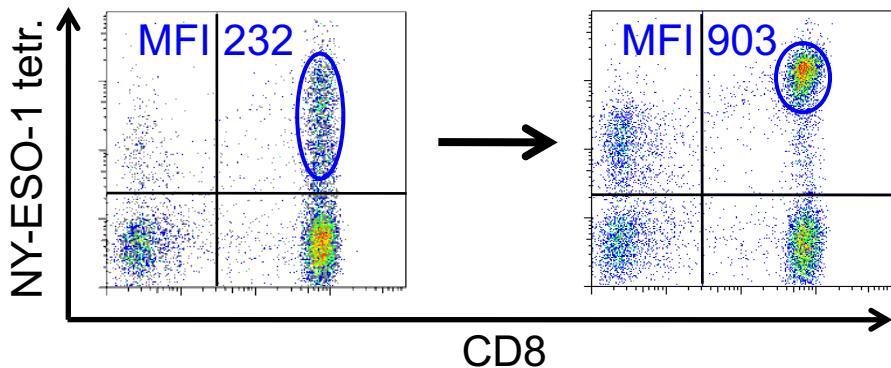
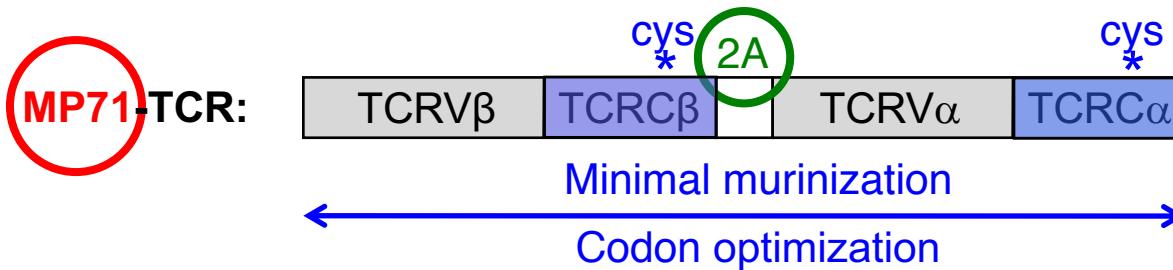
- *increase the avidity of therapeutic TCR*
- *replace wild type TCR*

# 9 amino acids of the mouse TCR C-regions enhance human TCR expression



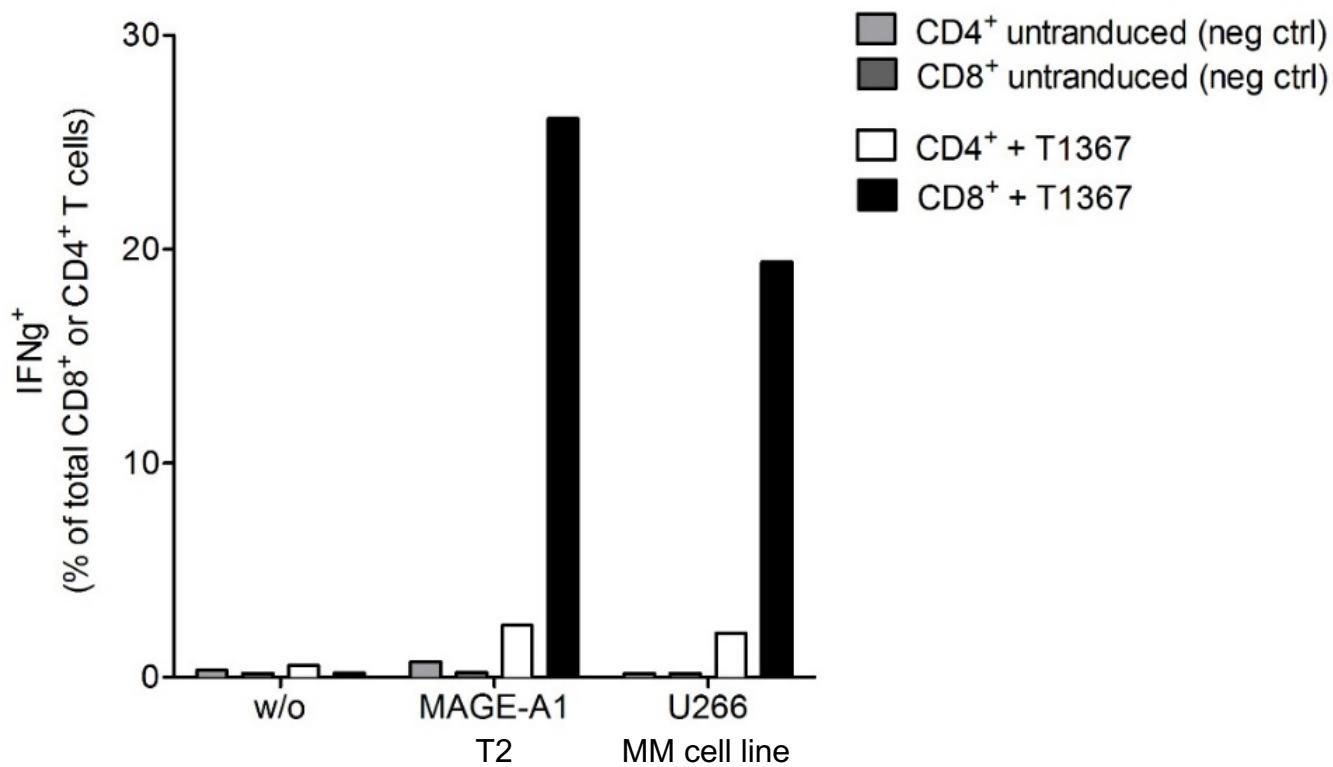
# High-performance $\gamma$ -retrovirus vector for TCR gene therapy

- Modification of retrovirus vector
- Optimization of TCR gene cassette
- Engineering of TCR genes

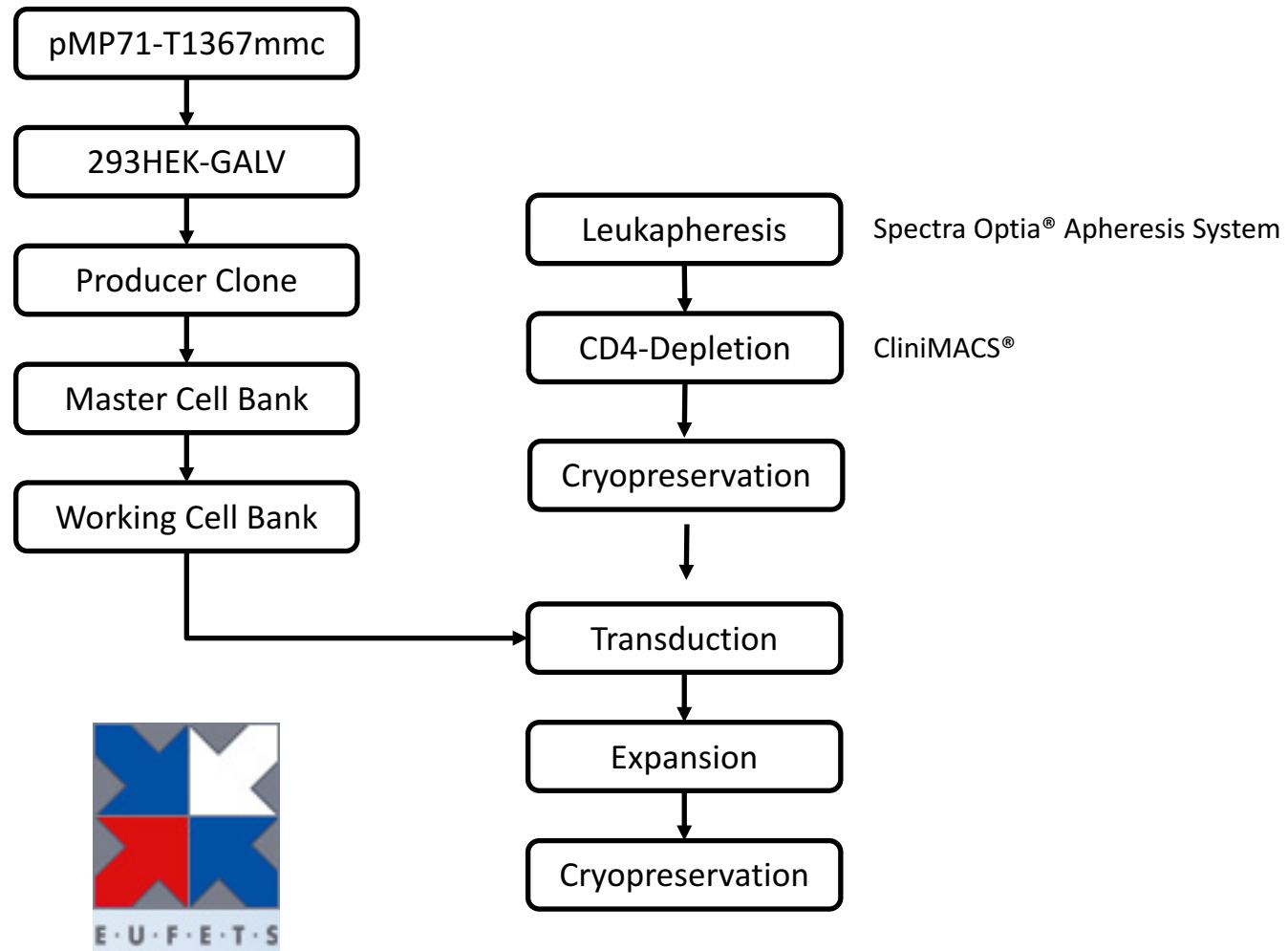


- TCR gene-modified T cells:**
- High expression level of tg TCR
  - Homogeneous population
  - High functional activity

# MAGE-A1 TCR $T_{1367}$ is primarily active in CD8 $^{+}$ T cells



# Manufacturing process

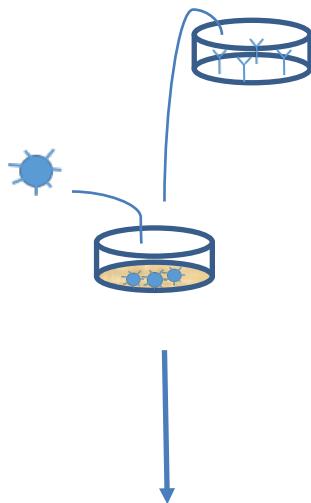


# GMP Transduction Protocol

[Spectra Optia® Apheresis System\)](#)

CD4<sup>+</sup> cell-depletion with CliniMACS®, Miltenyi

PBMCs



**Starting material**

CD4<sup>-</sup> cells

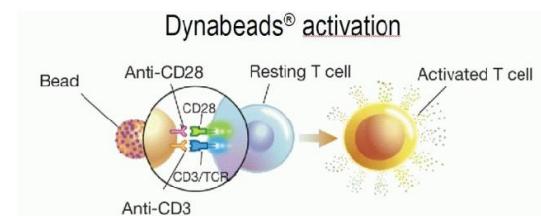
**Adherence**

depletion of monocytes

**Activation**

bead bound antibodies  
+ Selection

CD4 depl. leucapherisate



**Transduction**

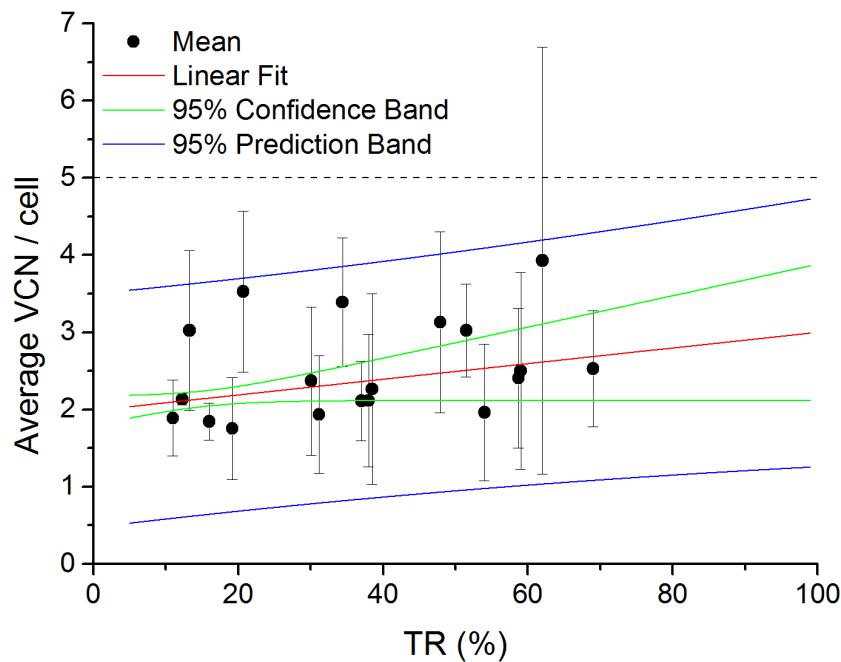
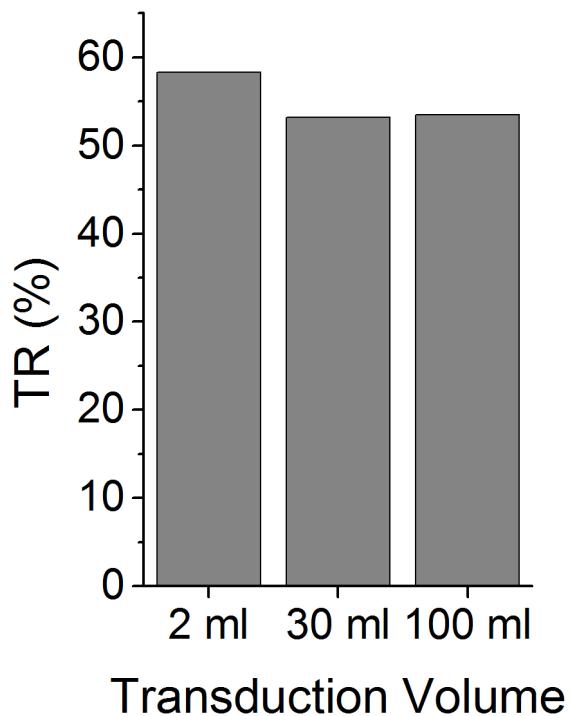
1x 90 min, 800g, 32°C  
100 ml pure Virus



**Cultivation**

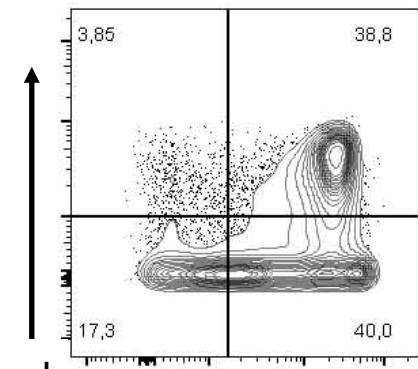
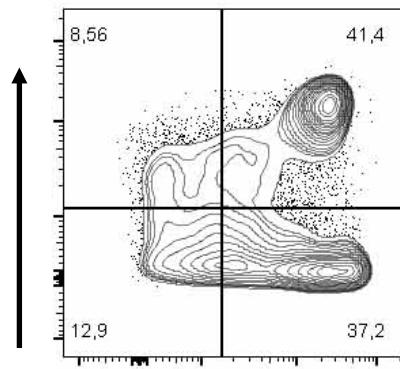
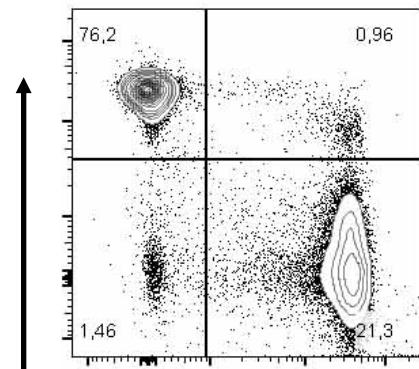
Up to 12 days in Wave Reactor

# Mean pMP71 vector copy number per cell

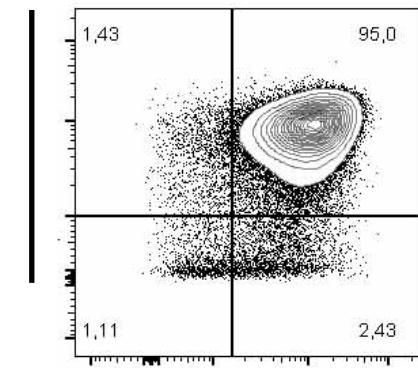
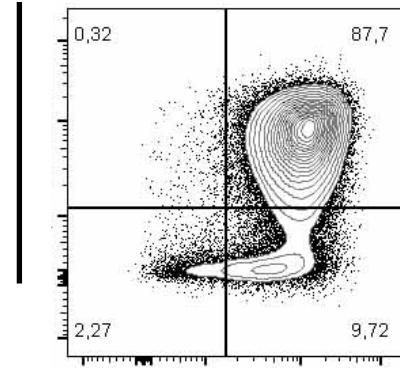
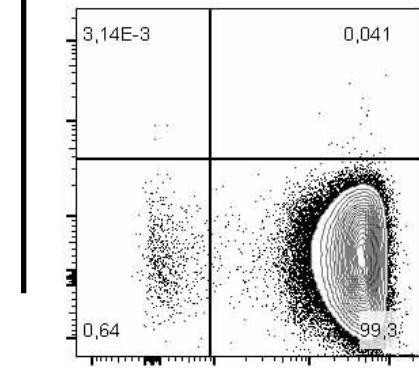


# MAGE-A1 TCR T1367 transduced T cells have stem cell-like memory phenotype

Buffy coat  
(control)



Leukapheresis  
product,  
RV transduced



— CD8 —

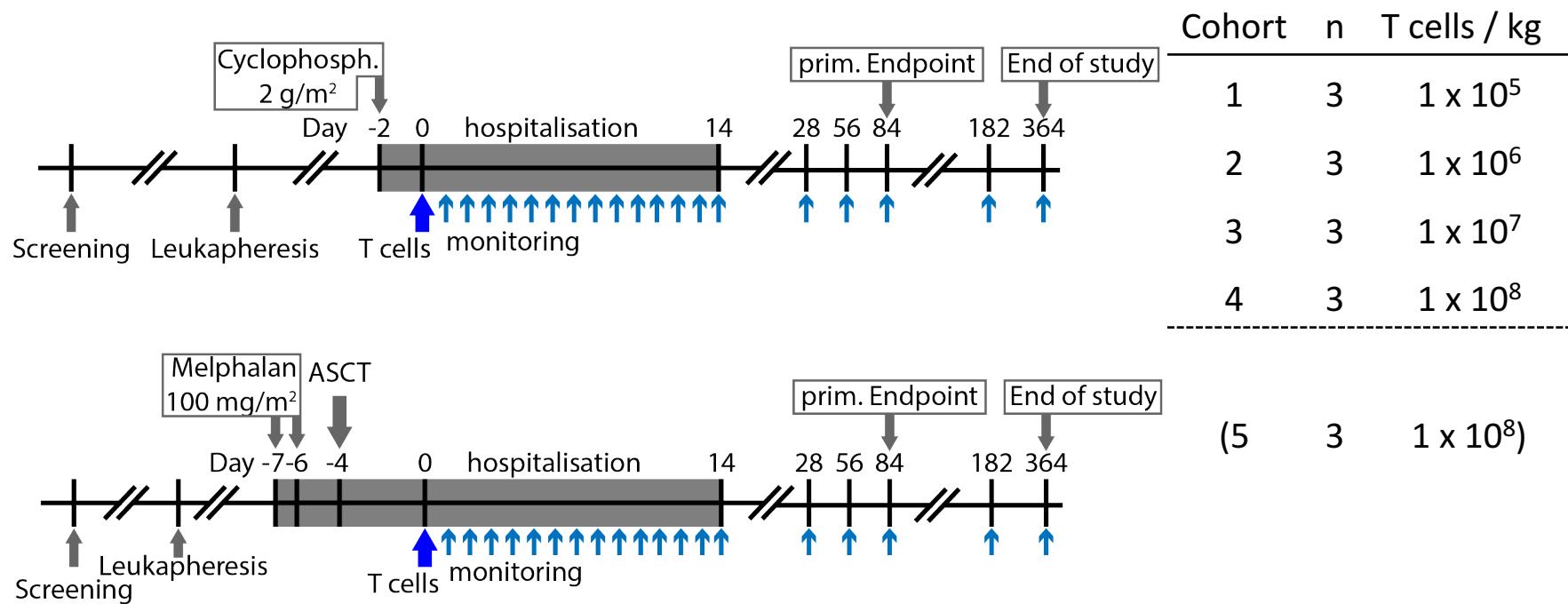
— CD45RA —

— CD45RA —

CD3+ CD8+ CD45RA+ CD45RO- CD62L+ CCR7+

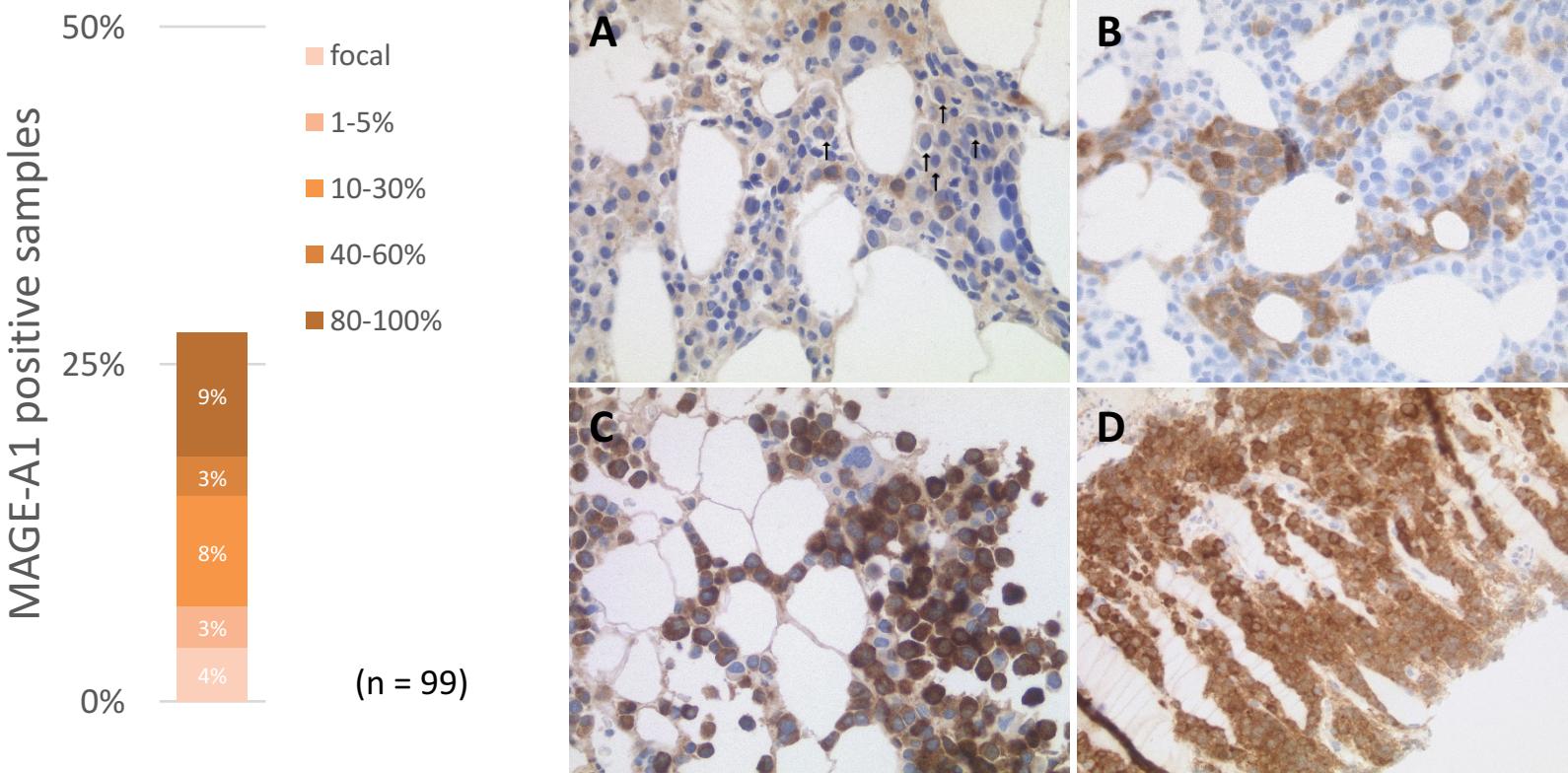
# T CELL THERAPY OF MULTIPLE MYELOMA

## *Phase I trial of MAGE-A1<sup>+</sup> Multiple Myeloma*



# CANCER-ASSOCIATED ANTIGENS AS TARGET

## *Identifying MAGE-A1<sup>+</sup> myeloma*



# Patient selection

- Heterogenous expression pattern of MAGE-A1 within a tumor
- Correlation between extramedullary disease and homogenous MAGE-A1 expression
- Many patients with MAGE-A1 expressing myeloma are primary refractory to either a bortezomib or lenalidomide based regimen

# Standardization of the manufacturing process: “Master Processes”

- technology platforms (GMP facility, medical device status)
- generic vectors documented in a dossier  
(solution for bottlenecks for academia as a small customer)
- establishment of INDs for established products that can be used as a blueprint to develop processes and products that are derived from the existing process

**Kathrin Borgwald  
Sabrina Horn  
Kristin Retzlaff  
Katerina Thiede  
Dana Hoser  
George Papafotiou  
Jaqueline Waldeck**

**Thomas Blankenstein  
Matthias Obenaus  
Elisa Kieback  
Vivian Scheuplein  
Wolfgang Uckert  
Matthias Leisegang**

**Antonio Pezzutto  
Lutz Uharek  
Ioannis Anagnostopoulos**

## **Principles and Applications of Adoptive T Cell Therapy**

**BMBF program „Personalized Medicine“**

**German Cancer Aid Priority Program ‘Translational Oncology’**

*Exploring mutant immunogenic epitopes  
for T cell therapy of cancer*

**German Cancer Consortium (DKTK)**

**Berlin School of Integrative Oncology**



# THANK YOU!