

Immunotherapy for the treatment of GIST

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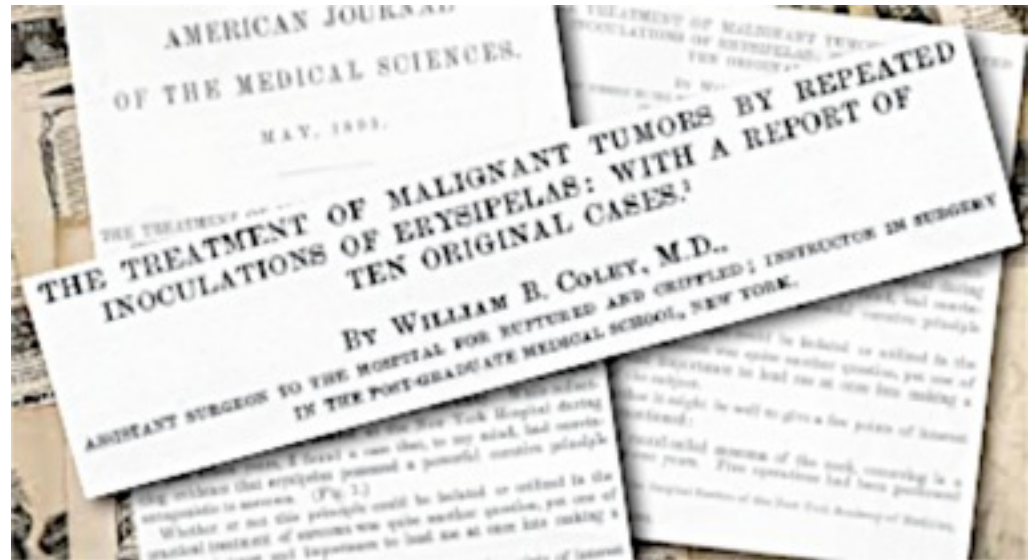
Steven C. Katz, MD



Outline

- **Immunotherapy for solid tumors**
- Unmet clinical need
- Immune response to GIST
- Building an anti-KIT CAR

1890



2003

2015

CANCER CARE

SURGERY

CHEMO

XRT

IMMUNO

2020

CANCER CARE

SURGERY

CHEMO

XRT

IMMUNO

\$25-40 billion market

*50% of medical
oncology market share*



U.S.

Cancer Immunotherapy Treatment Shows More Promise

Treatment Eradicated Tumors in 14 of 16 Patients With Advanced Leukemia in Study

BUSINESS

New Immunotherapy Drug Data Show Promise in Treating Cancer

Drugs From Bristol-Myers and Merck Shown to Prolong Lives of Some Cancer Patients

MARKETS

New Cancer Technology Gives Investors a Shot in the Arm

Immunotherapy's promise is drawing some marquee financiers

The New York Times

BUSINESS DAY

F.D.A. Allows First Use of a Novel Cancer Drug

By ANDREW POLLACK SEPT. 4, 2014

HEALTH

Breaking Through Cancer's Shield

By GINA KOLATA OCT. 14, 2013

HEALTH

New System for Treating Cancer Seen as Hopeful

By ANDREW POLLACK JUNE 2, 2014

Science

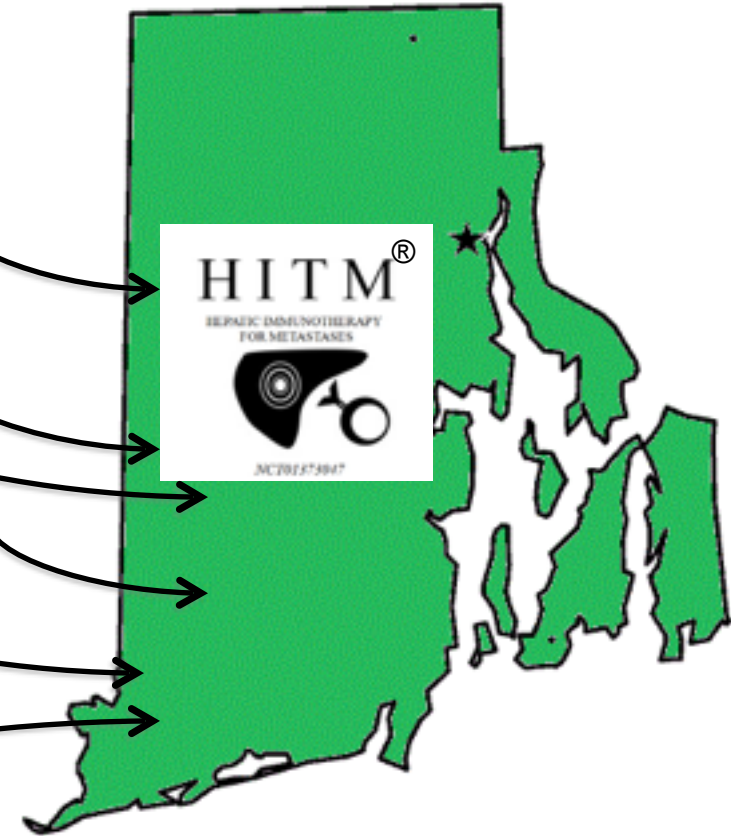
AAAS

Breakthrough of the Year 2013

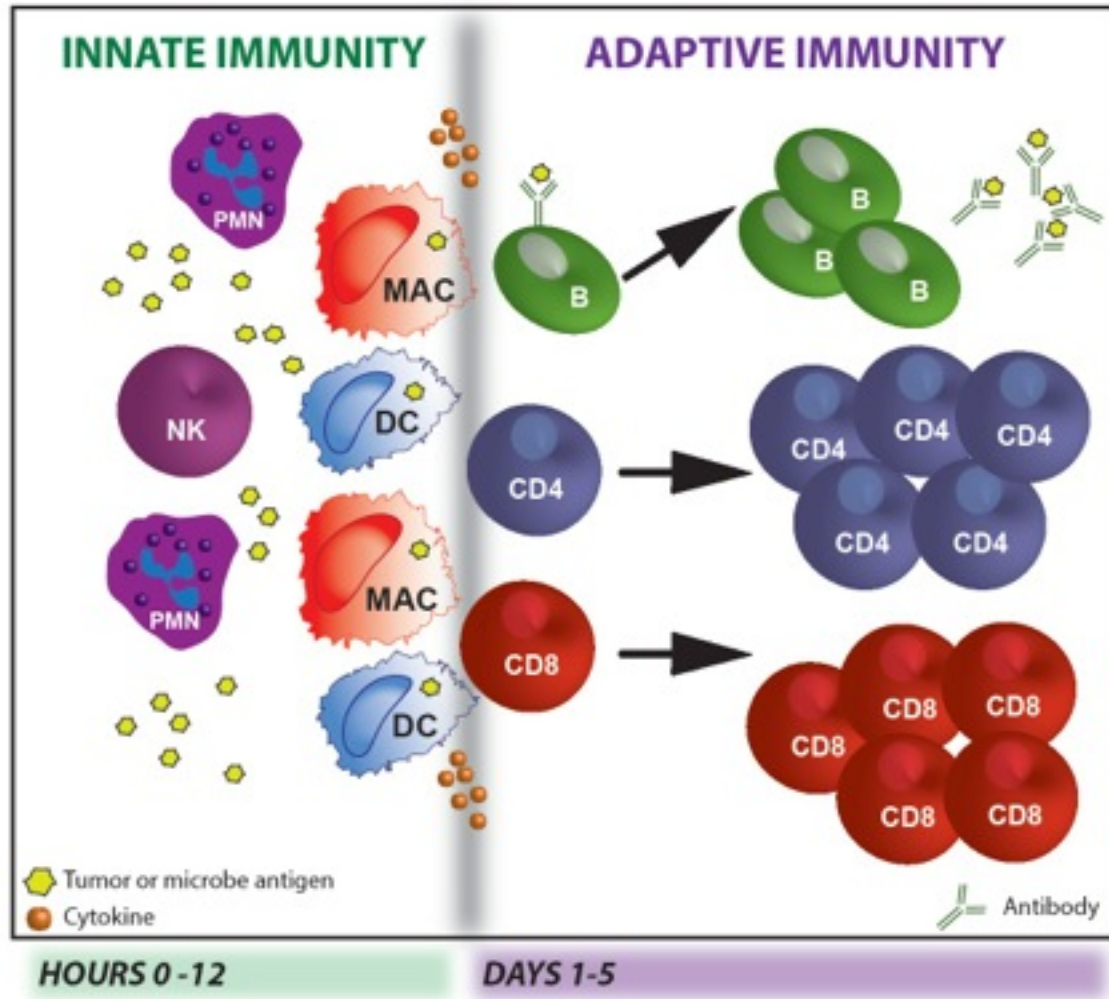


CANCER
IMMUNOTHERAPY

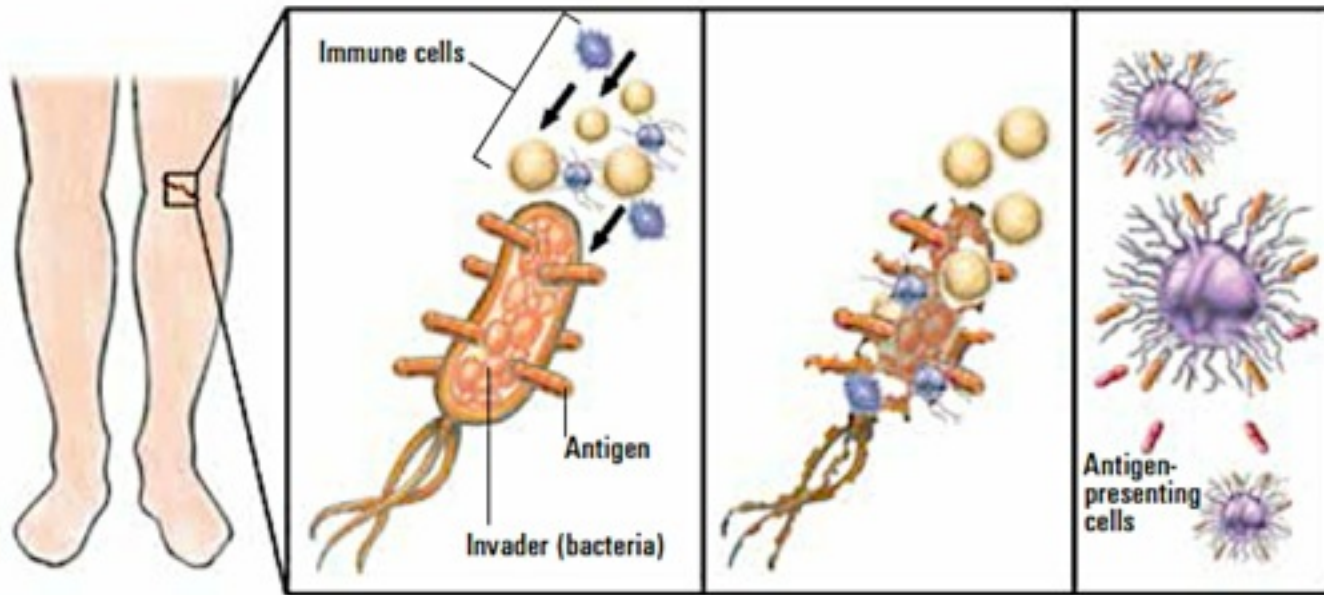
Broad Interest



Normal Immune Response



Normal Immune Response



▲ Skinned knee:
First barrier of
protection is
broken.

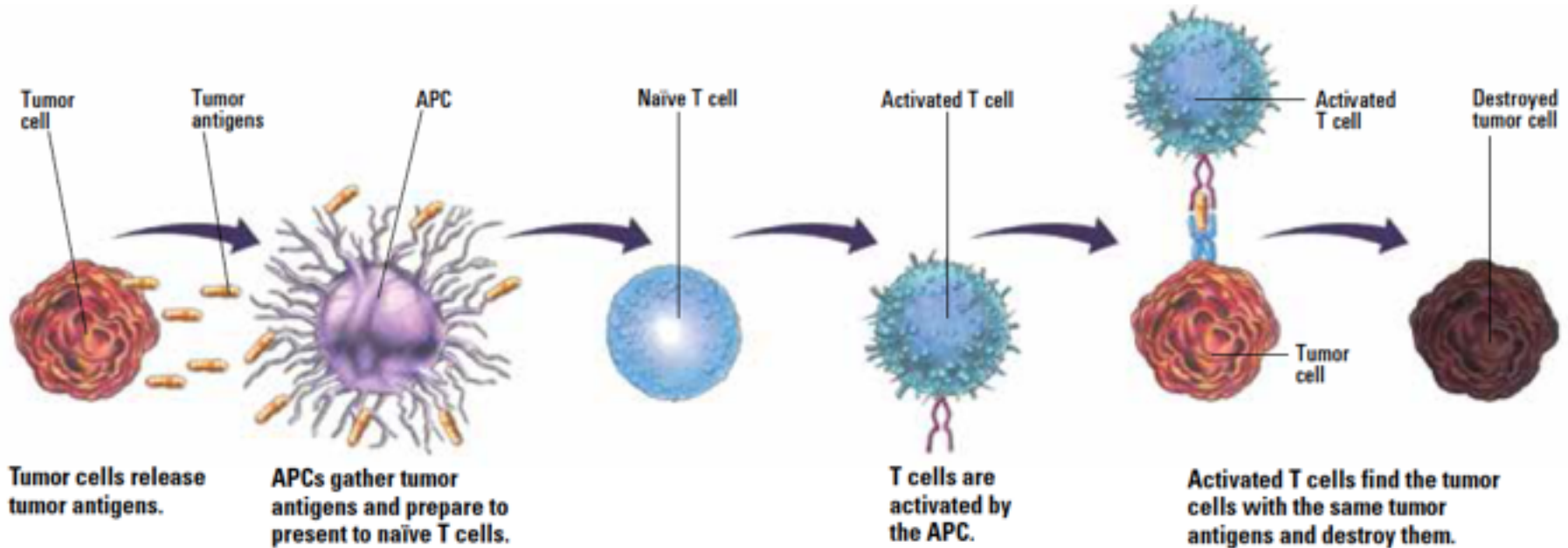
▲ An invader enters the body
through the cut, where
immune cells have begun to
gather to protect the body.

▲ The immune cells begin
to destroy and digest the
invader and its antigens.

▲ Some of the immune
cells transform into
antigen-presenting
cells that tell the
T cells about the
invader.

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Anti-Tumor Immune Response



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Immunotherapy Categories

Non-specific Immunostimulation

- BCG
- IL-2 and IFN α



Vaccines

- Antigen-loaded APCs
- Direct antigen administration



Cellular

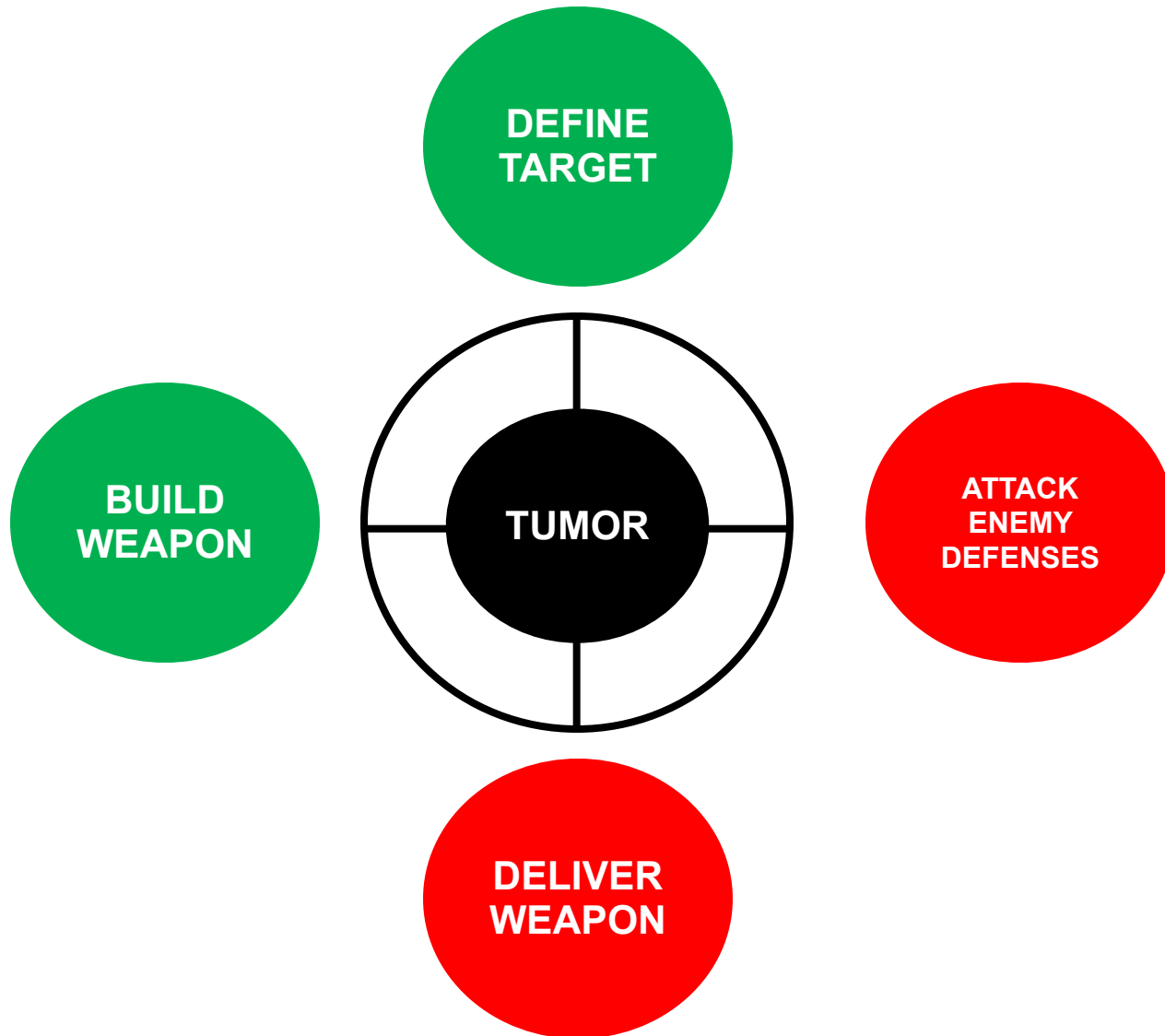
- TILs
- CAR-T Cells



Immunomodulation

- Anti-PD-1
- Anti-CTLA-4

Core Principles of Immunotherapy

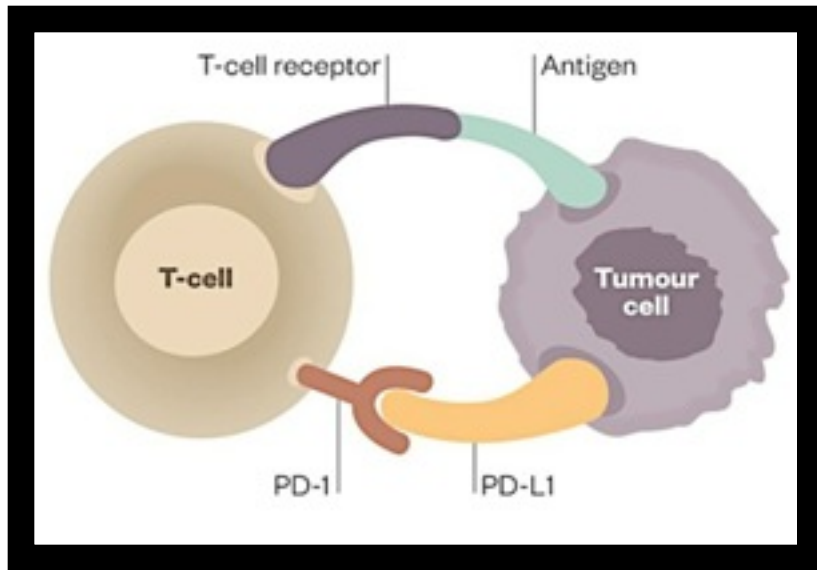


Is the enemy thyself?

- Cancer tissue is a variant of normal
- Immune cells may not be able to distinguish
- *KIT present on tumor and normal cells*
- ***Delicate balance between immune attack and organ damage***

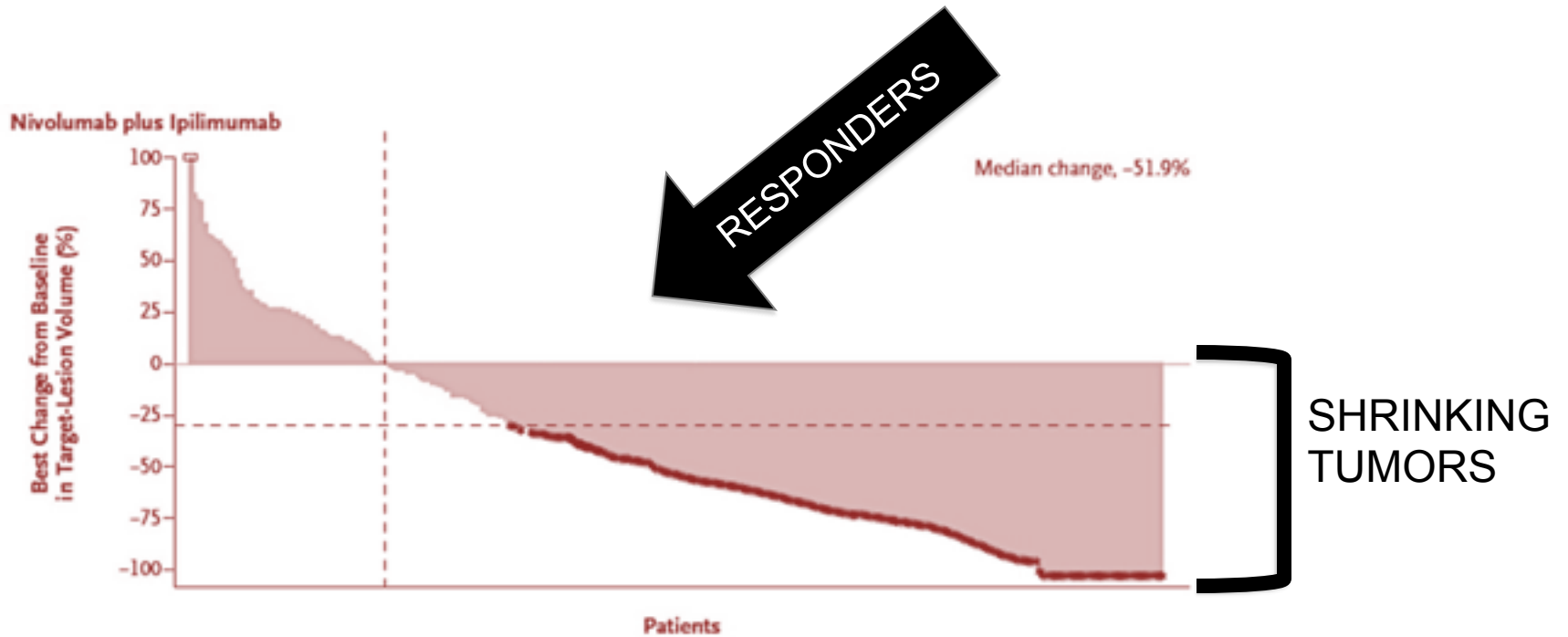


Checkpoint Inhibitors



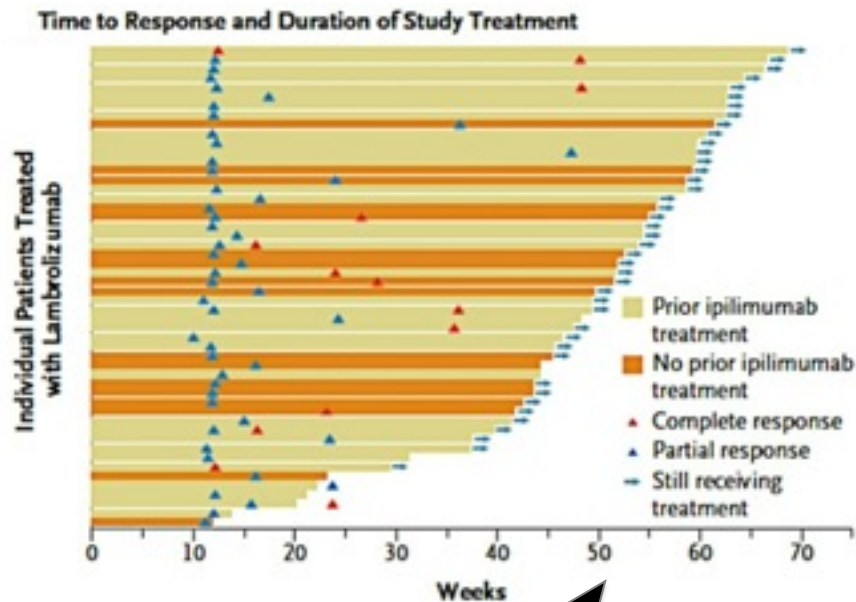
ORIGINAL ARTICLE

Combined Nivolumab and Ipilimumab or Monotherapy in Untreated Melanoma



ORIGINAL ARTICLE

Safety and Tumor Responses with Lambrolizumab (Anti-PD-1) in Melanoma

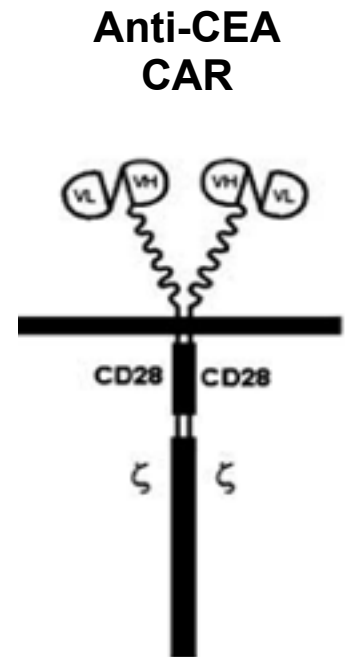


DURABLE



CAR-T Cells

- Genetic re-engineering of patient T cells
- Chimeric antigen receptor (CAR)
 - Fusion protein
 - Antibody confers tumor antigen specificity
 - T cell receptor components
 - Co-stimulatory components
- Focus on CD19 CAR for leukemia and lymphoma
- Solid tumors more challenging



LIQUID \neq SOLID



≠



Pattern of GIST Metastases

Site	n	% of total
All liver	61	65
Liver only	50	53
Any peritoneal	20	21
Any node	6	6
Any bone	6	6
Any lung	2	2

Liver and peritoneal cavity main sites of GIST metastases.

Phase I Hepatic Immunotherapy for Metastases Study of Intra-Arterial Chimeric Antigen Receptor-Modified T-cell Therapy for CEA⁺ Liver Metastases

Steven C. Katz¹, Rachel A. Burga¹, Elise McCormack², Li Juan Wang³,
Wesley Mooring³, Gary R. Point¹, Pranay D. Khare⁴, Mitchell Thorn¹, Qiangzhong Ma²,
Brian F. Stainken⁵, Earle O. Assanah⁵, Robin Davies⁴, N. Joseph Espat¹, and
Richard P. Junghans²

Cancer Gene Therapy (2014) 21, 457–462
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www.nature.com/cgt

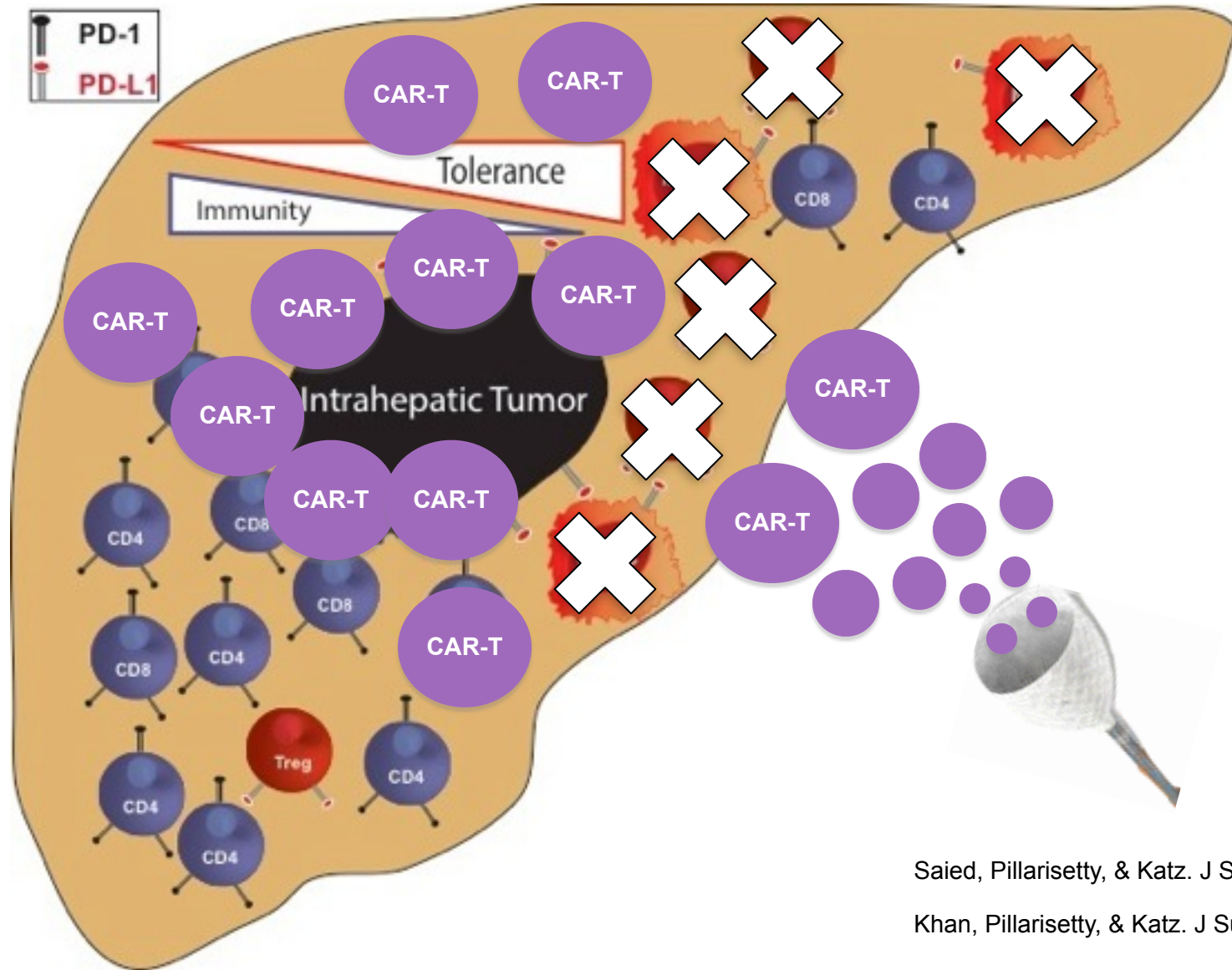


ORIGINAL ARTICLE

Neutrophil:lymphocyte ratios and serum cytokine changes
after hepatic artery chimeric antigen receptor-modified
T-cell infusions for liver metastases

A Saled¹, L Licata¹, RA Burga¹, M Thorn¹, E McCormack², BF Stainken³, EO Assanah⁵, PD Khare⁴, R Davies⁴, NJ Espat¹,
RP Junghans² and SC Katz¹

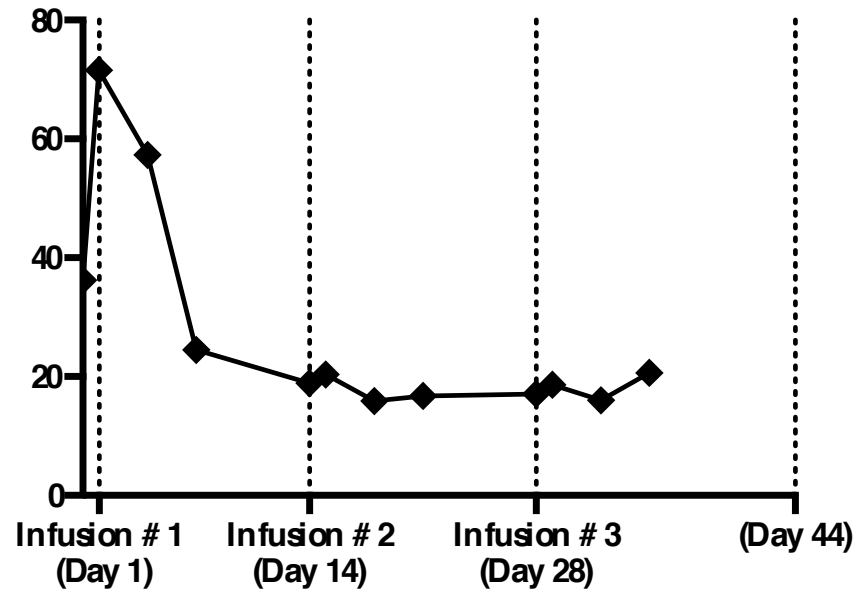
Plan of Attack



Saied, Pillarisetty, & Katz. J Surg Res 2014

Khan, Pillarisetty, & Katz. J Surg Res. 2014

Tumor Marker Response to CAR-T Cells

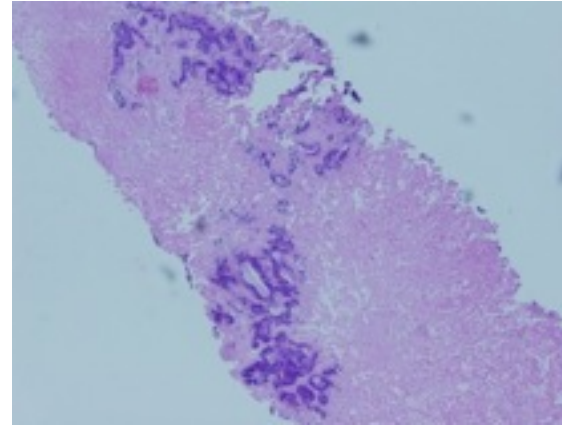
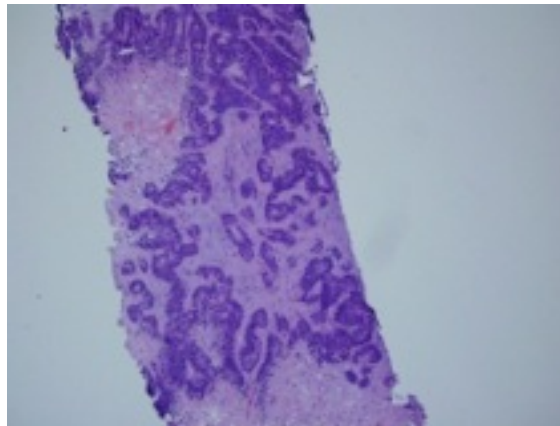


Response to CAR-T Cells

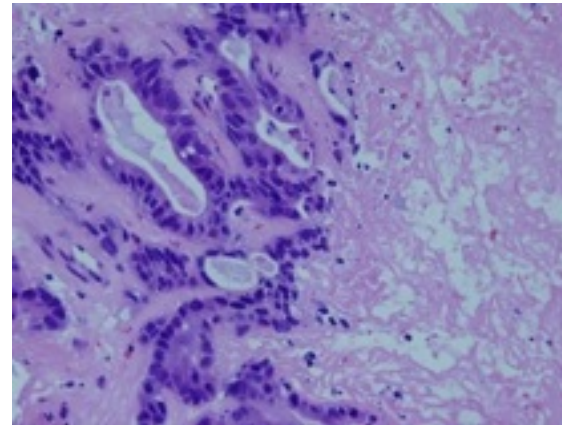
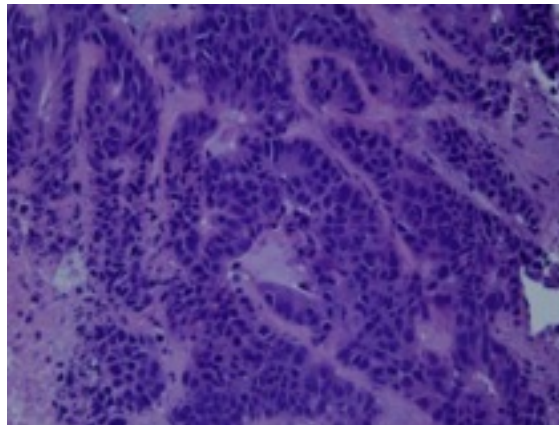


CAR-T Cells Mediated Tumor Cell Death

10X



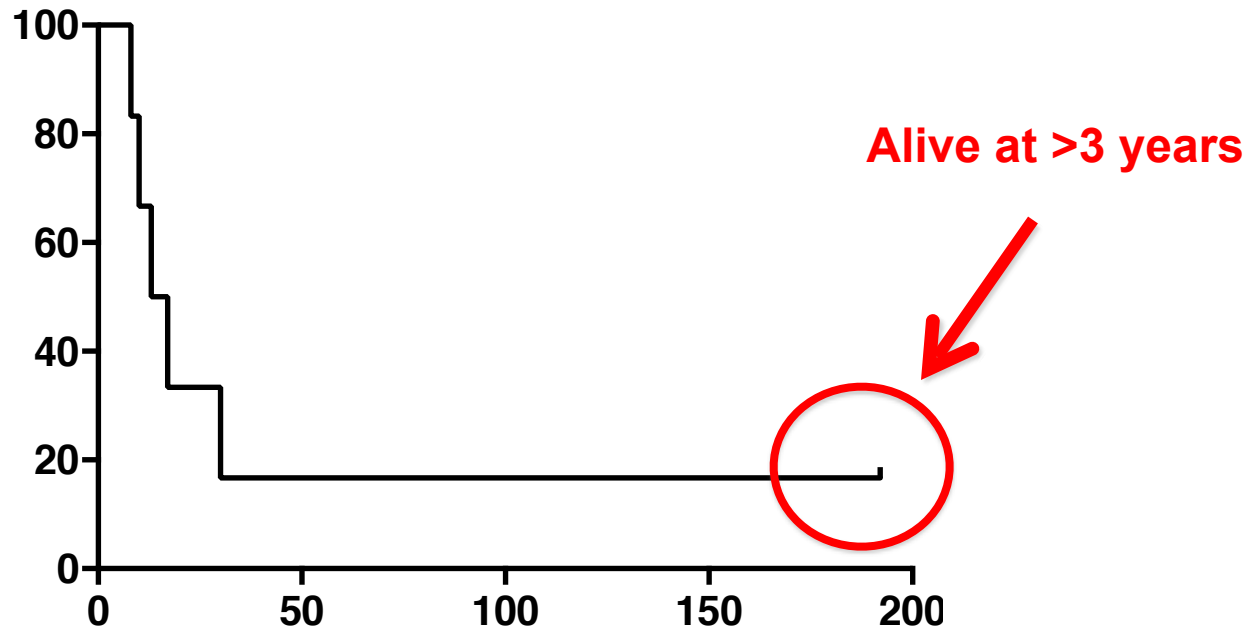
40X



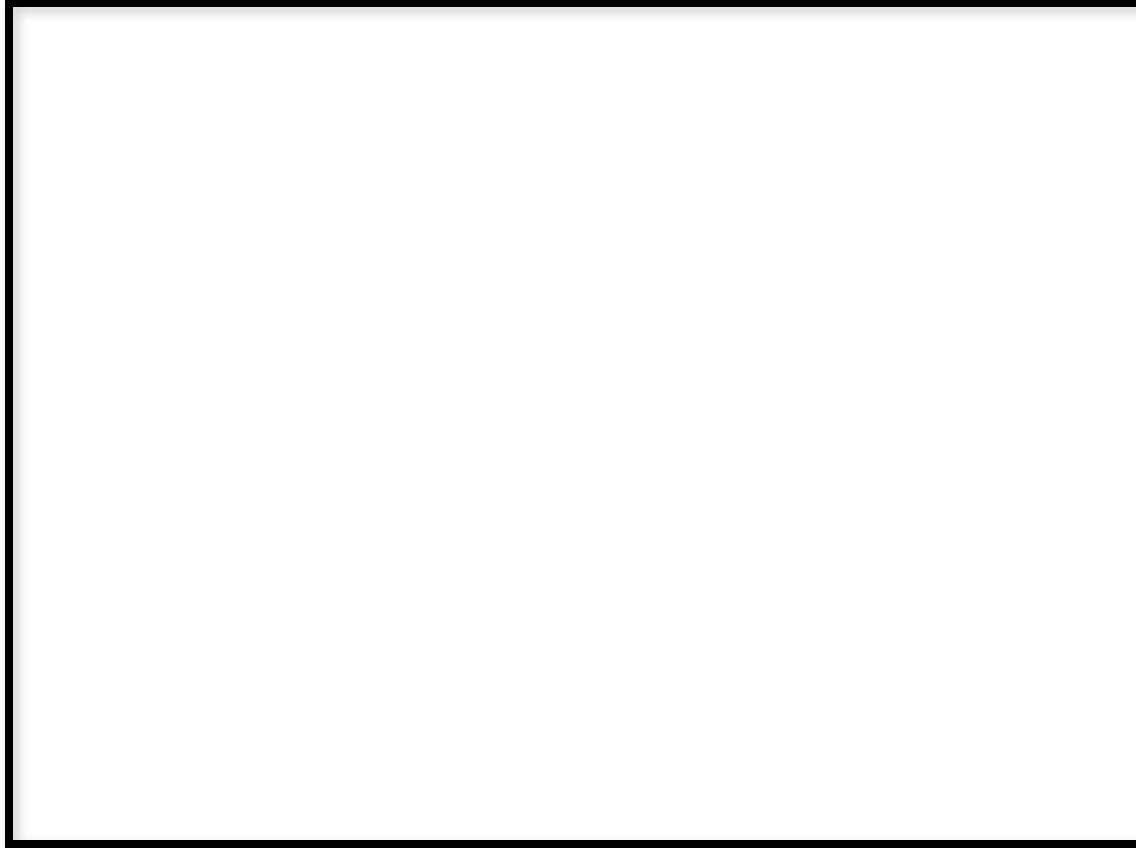
BL

Post-Infusion

This is why we are all here...



Intraperitoneal CAR-T delivery *IPC*



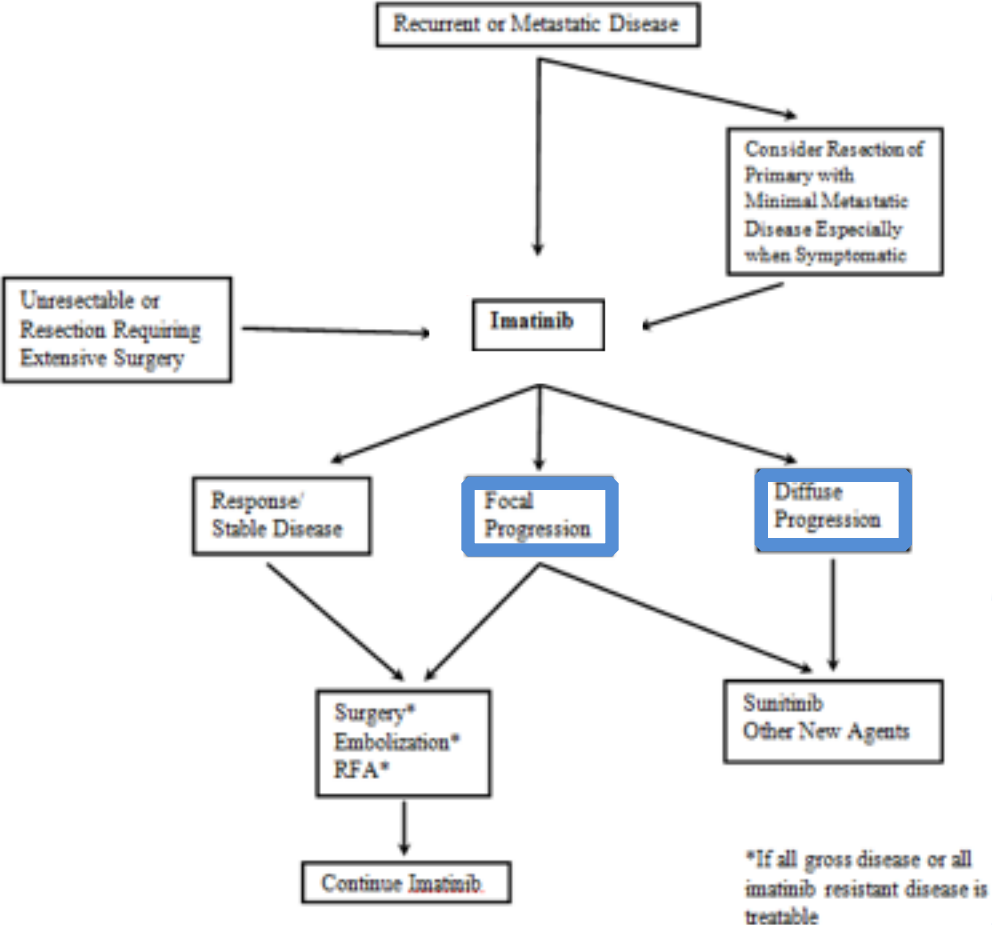
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- Immune response to GIST
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Rationale for GIST Immunotherapy

- 30% recur within 2 years after surgery
- Resistance to TKIs
- No advances in first-line therapy since 2002
- Immune infiltrate in GIST demonstrated
- TKI and immunotherapy may be synergistic

Gastrointestinal Stromal Tumor (GIST)



*LIMITED
OPTIONS
FOR ADVANCED
TKI RESISTANT
DISEASE*

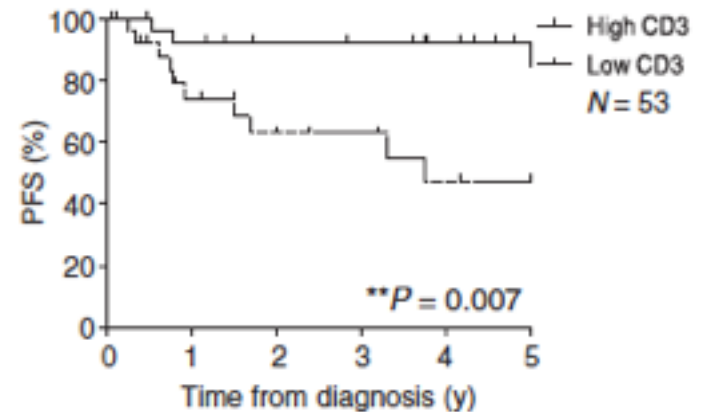
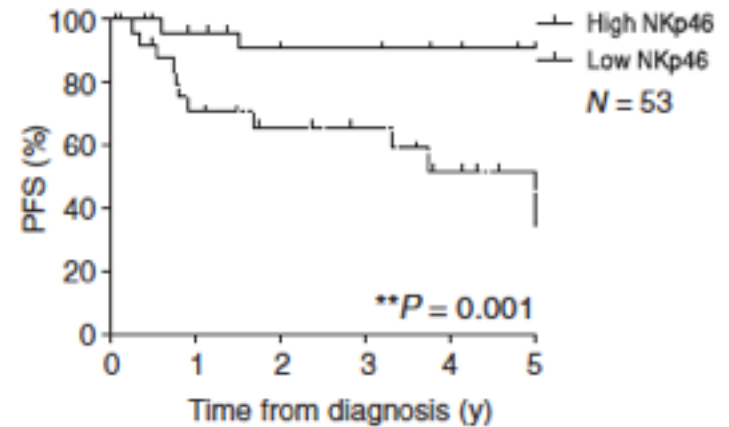
*RFA=radiofrequency ablation

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GIST Immune Cells Predict Outcome

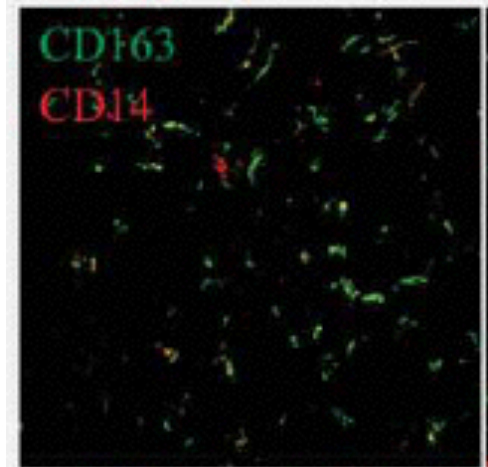
- NK cell density predicts progression
- T cell density predicts progression
- Immuno-surveillance is occurring
- Potential biomarkers



Immune Cells in GIST

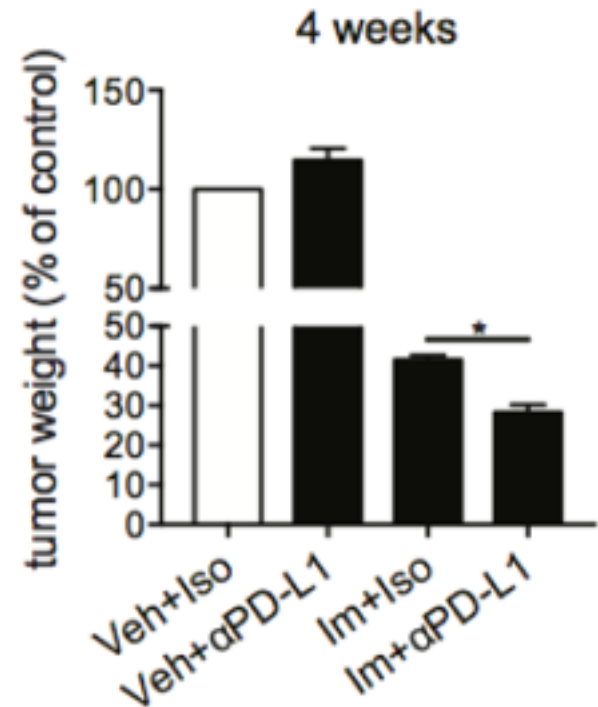
In need of assistance

- High level of macrophages and T cells
- T cell balance skewed toward suppression
- Abundance of M2 anti-inflammatory macrophages
- Level of M2 cells correlated with Treg
- More M2 cells in metastatic GIST



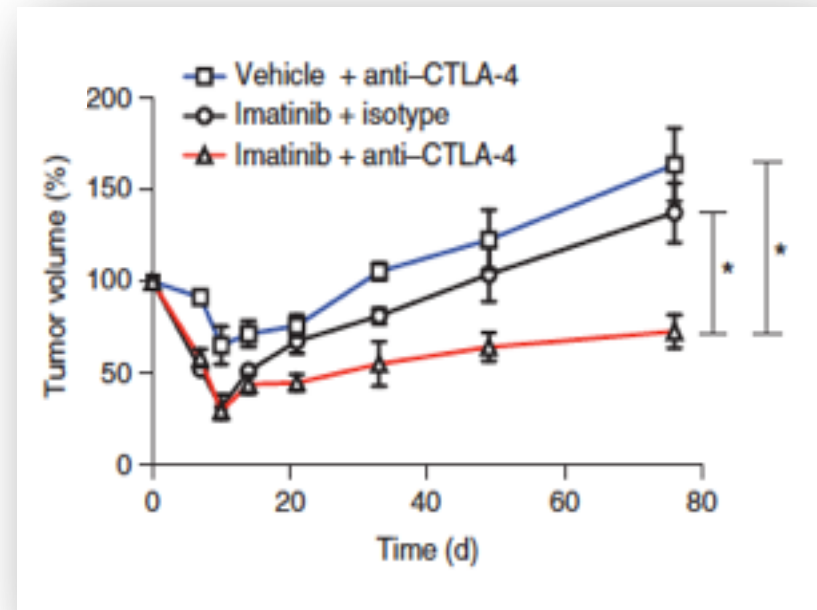
Checkpoints Exploited

- T cells in GIST tumors express checkpoint molecules
 - PD-1, TIM-3, LAG-3
- Imatinib increases GIST TIL PD-1 expression
- Imatinib decreased GIST tumor PD-L1 expression



TKI Effect on Immune Cells

- More than direct effect on tumor cells
- KIT expressed on immune cells
- Targeting tumor and patient
- Enhances immune response to GIST
- Improved T cell tumor killing
- Reverses immunosuppression
- Synergy with checkpoint blockade

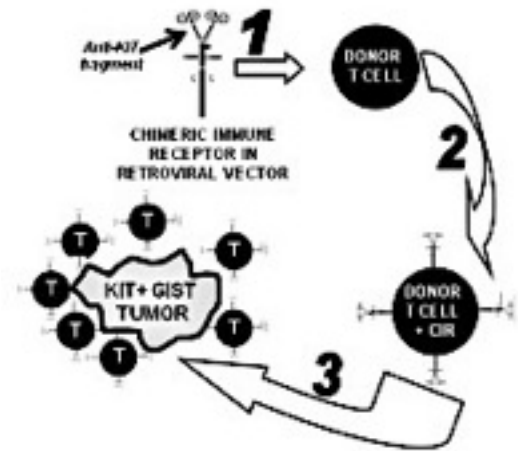


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Adoptive Cell Immunotherapy – Renewed Optimism

- Tumor infiltrating lymphocyte (TIL) therapy
 - Derived from resected specimens or biopsies
 - Response rates up to 51-72% in patients with melanoma^{1,2}
 - Applicable to a limited number of diseases and patients
- CAR-T cells
 - Applicable to wide variety of cancer types
 - Need to define surface target
 - Derived from peripheral blood leukocytes
 - Introduction of genes for chimeric antigen receptors (CAR)
 - Success with CLL (anti-CD19 CAR with CD137)³



1 Dudley. JCO; 23: 2346 (2005)

2 Dudley. JCO; 26: 5233 (2008)

3 Porter. NEJM; 365: 8 (2011)

RESEARCH

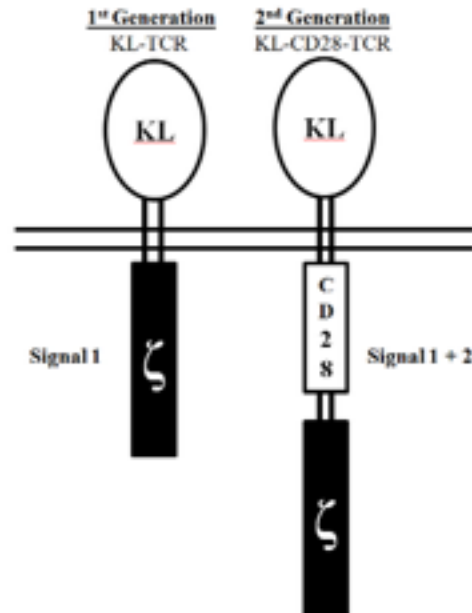
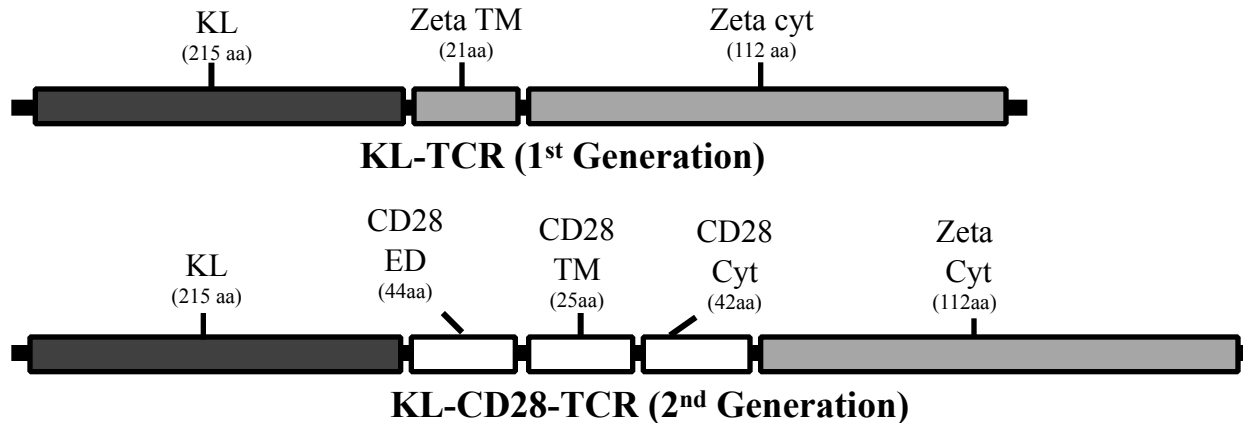
Open Access

Anti-KIT designer T cells for the treatment of gastrointestinal stromal tumor

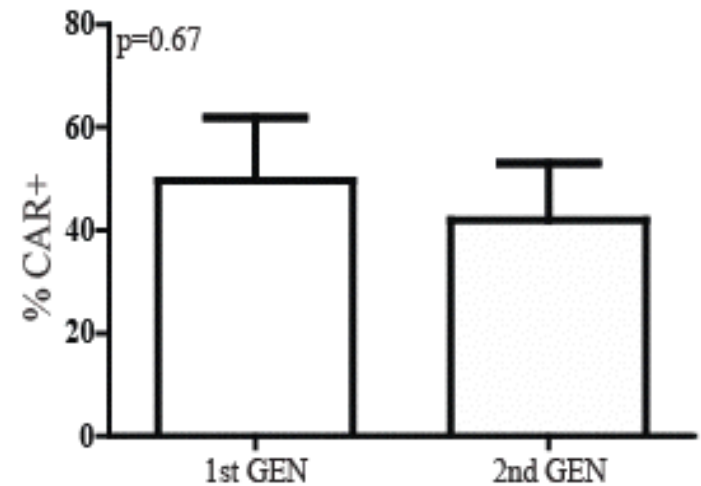
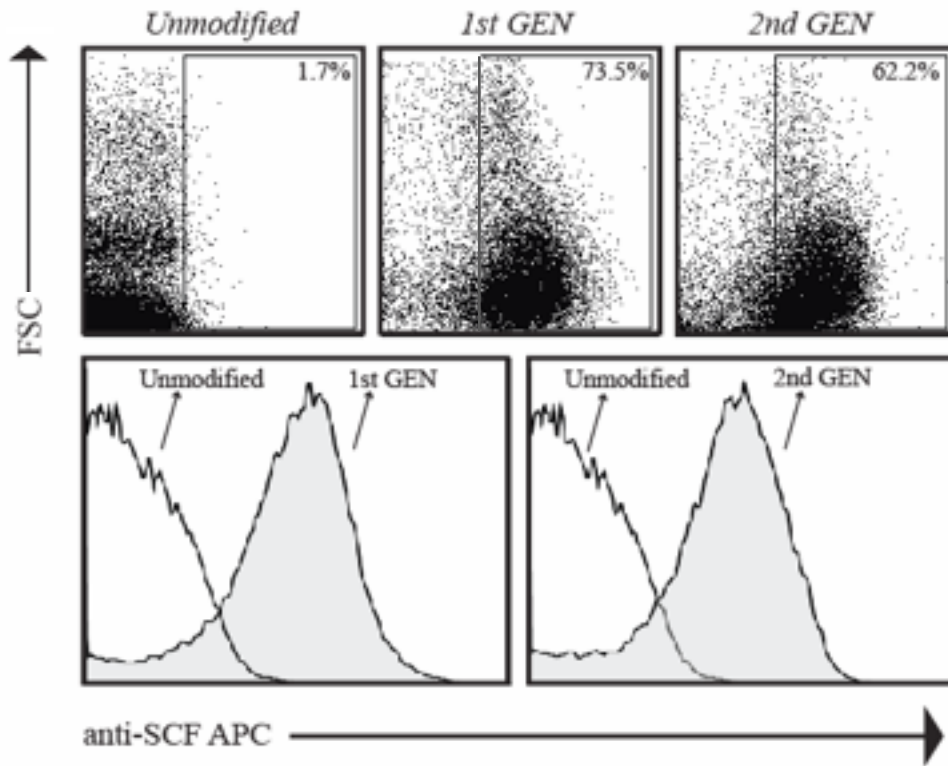
Steven C Katz^{1*}, Rachel A Burga¹, Seema Naheed¹, Lauren A Licata¹, Mitchell Thorn¹, Doreen Osgood¹, Cang T Nguyen¹, N Joseph Espat¹, Jonathan A Fletcher³ and Richard P Junghans²



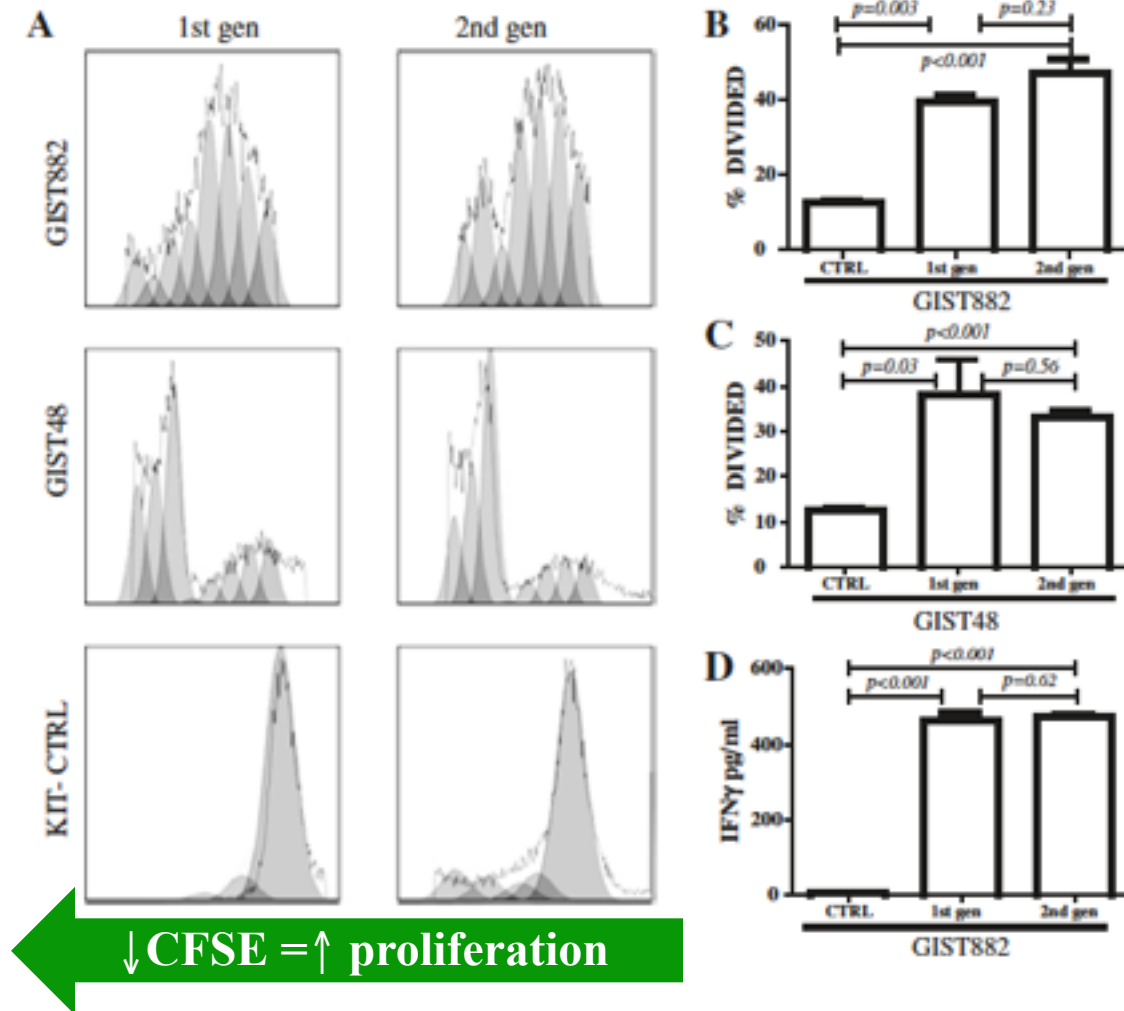
Anti-KIT CAR Constructs



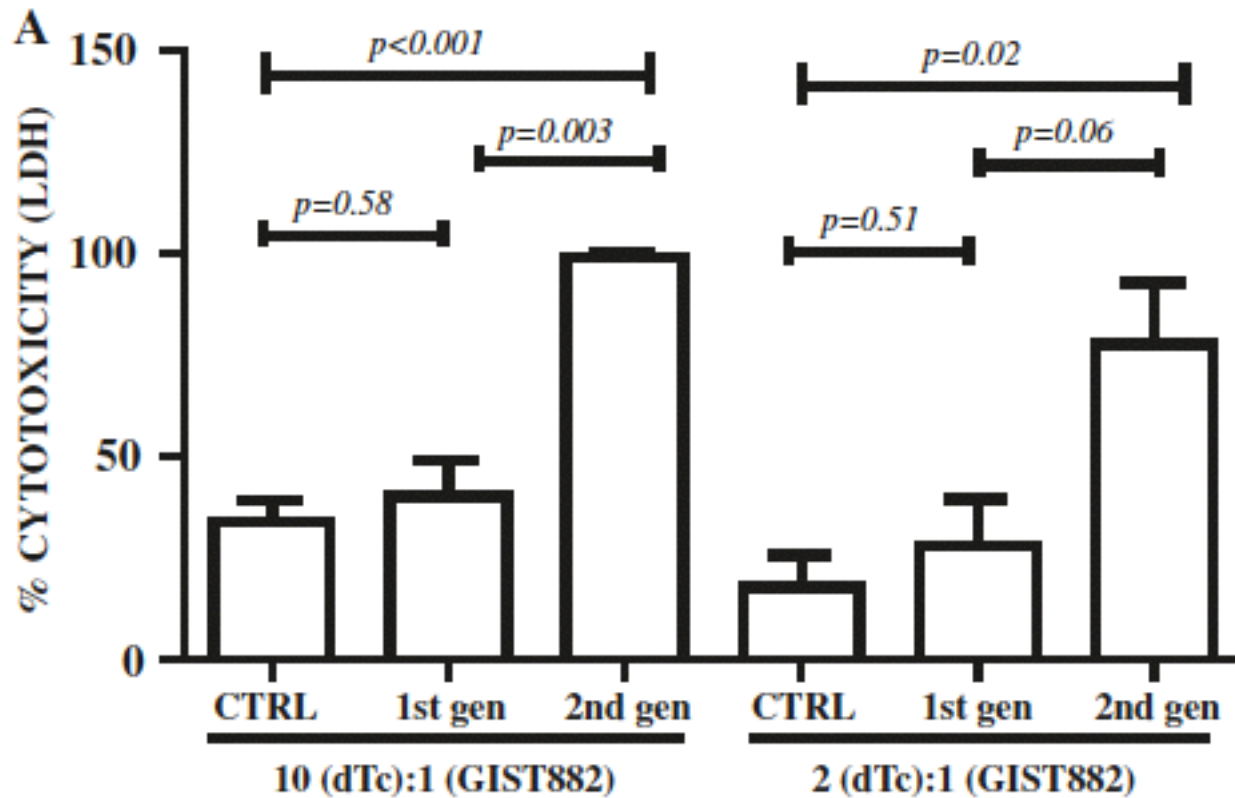
anti-KIT CAR-T Transduction Efficiency



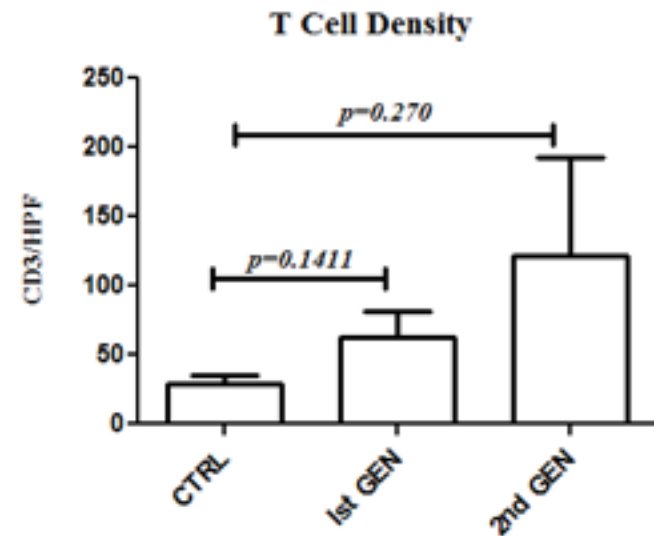
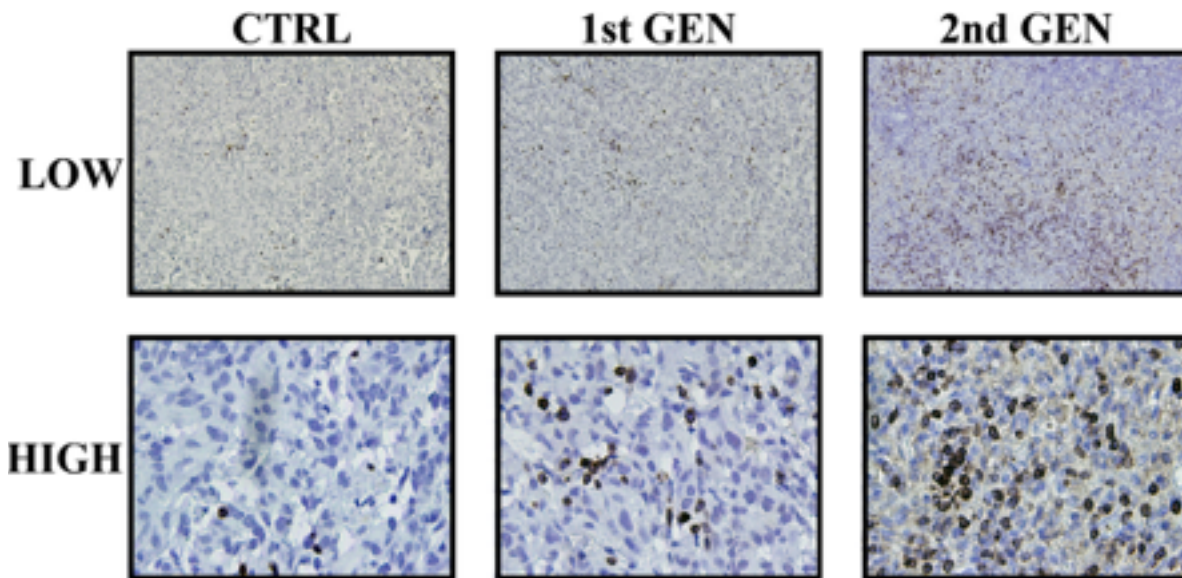
anti-KIT CAR-T 1st & 2nd Generation Proliferate on exposure to KIT+ tumor



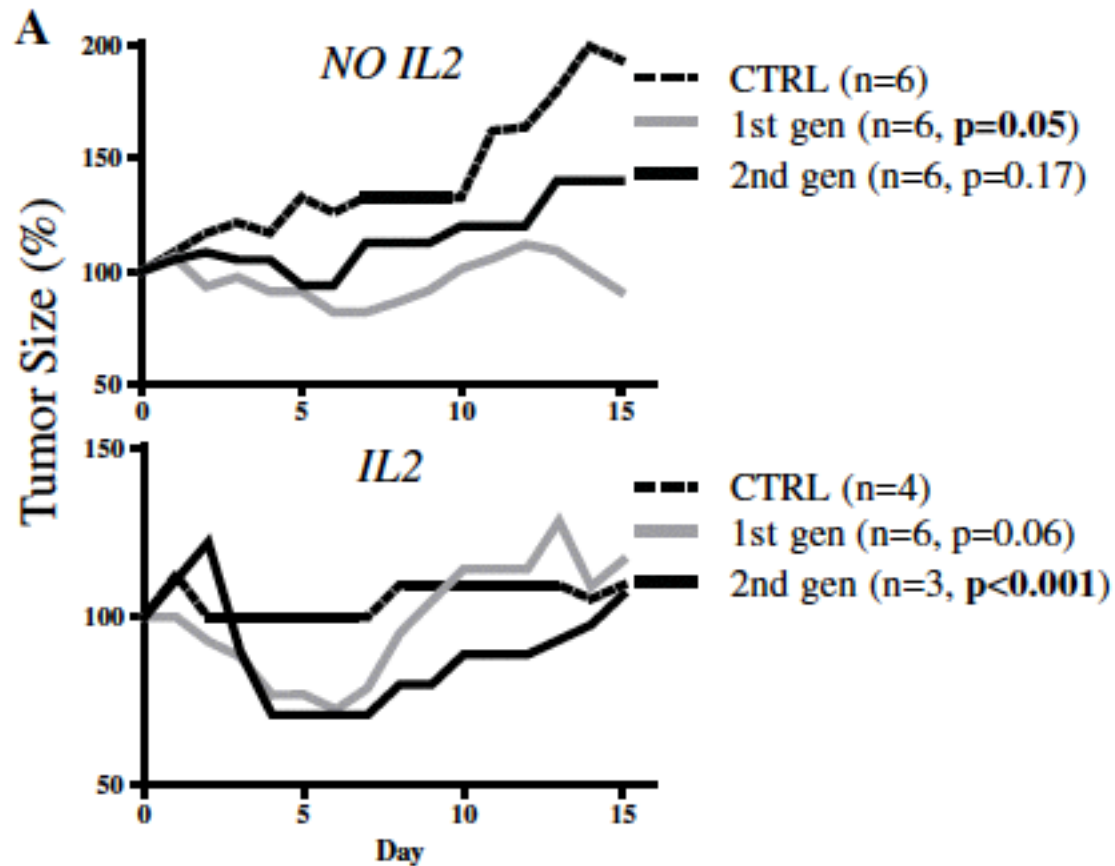
anti-KIT CAR-T Kill KIT+ Tumor Cells



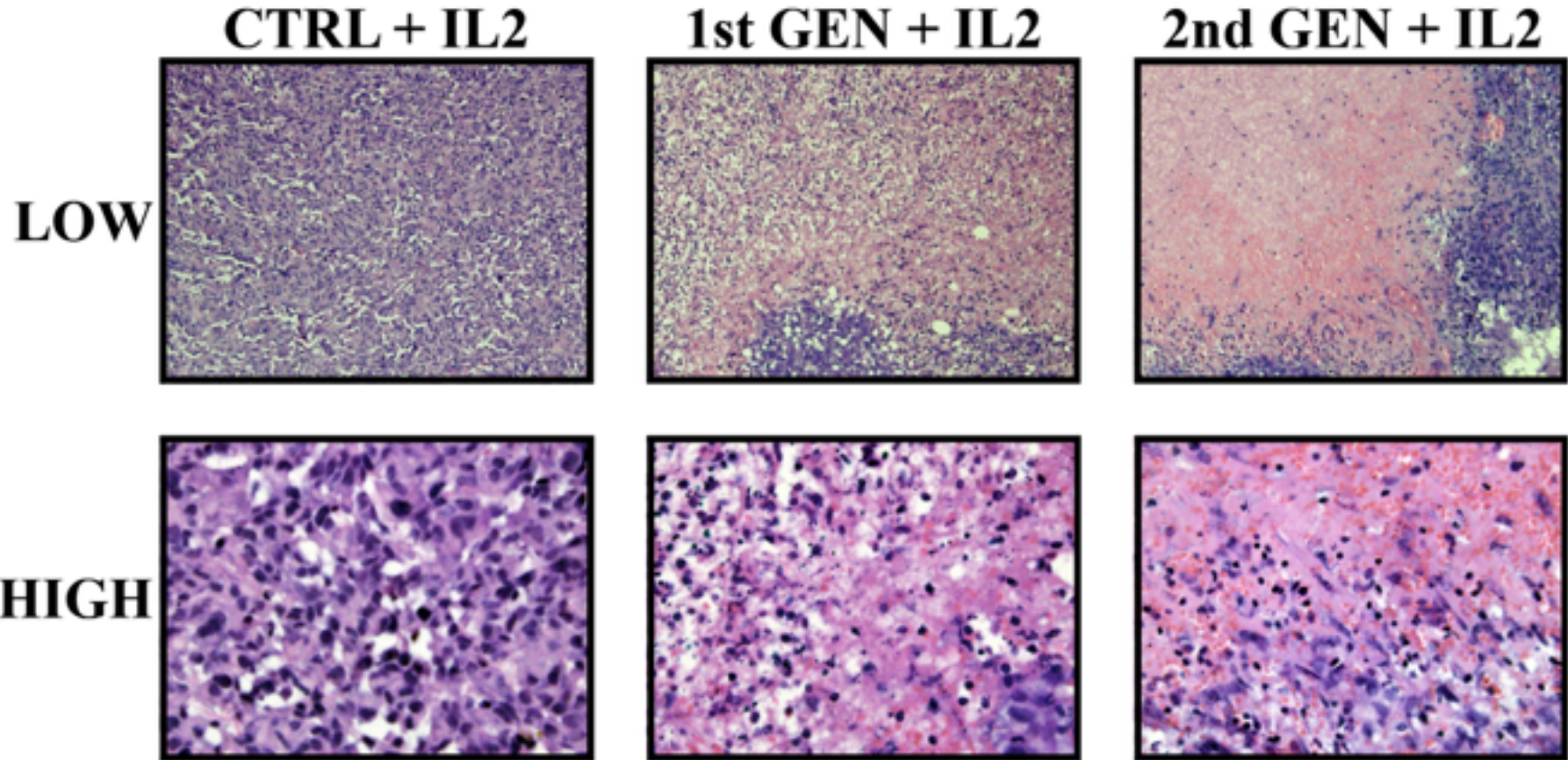
Infiltration of anti-KIT CAR-T Within GIST Xenografts



In Vivo Activity in Xenograft Model



Necrosis of GIST Xenografts Induced By anti-KIT CAR-T With IL-2



Summary

- Immunotherapy for solid tumors promising
- Regional delivery for GIST metastases
- Immune response to GIST biologically meaningful
- Anti-KIT CAR-T for GIST under development
- **Target the tumor and the host**

Thank you



MENTORS

- Ron DeMatteo
- Murray F. Brennan
- Sam Singer
- Richard P. Junghans
- N. Joseph Espat

COLLABORATORS

- Jonathan A. Fletcher



The Kristen Ann Carr Fund

