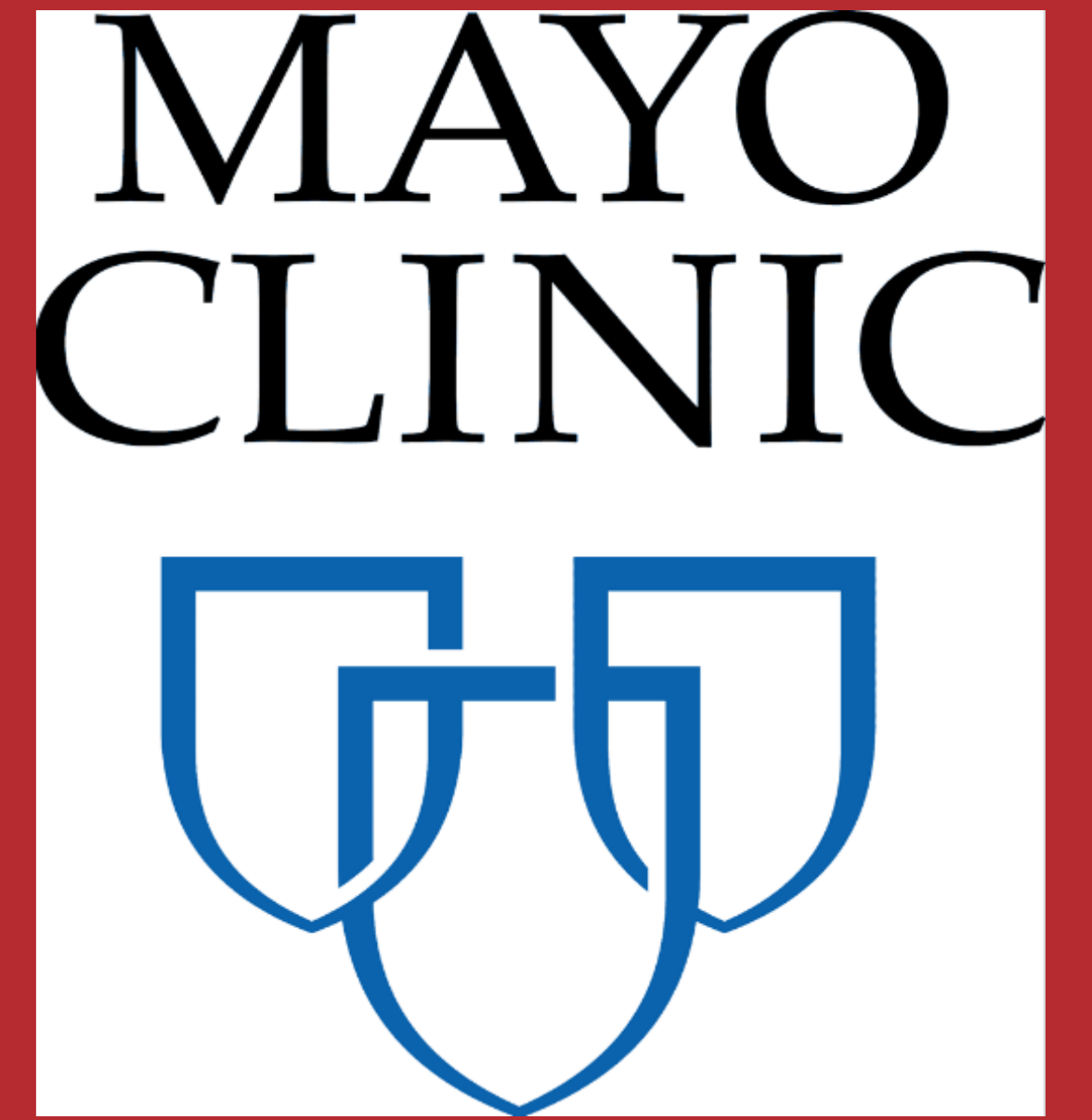




Immunosuppressive monocyte modulation of CART cell functions and impact on response to CART19



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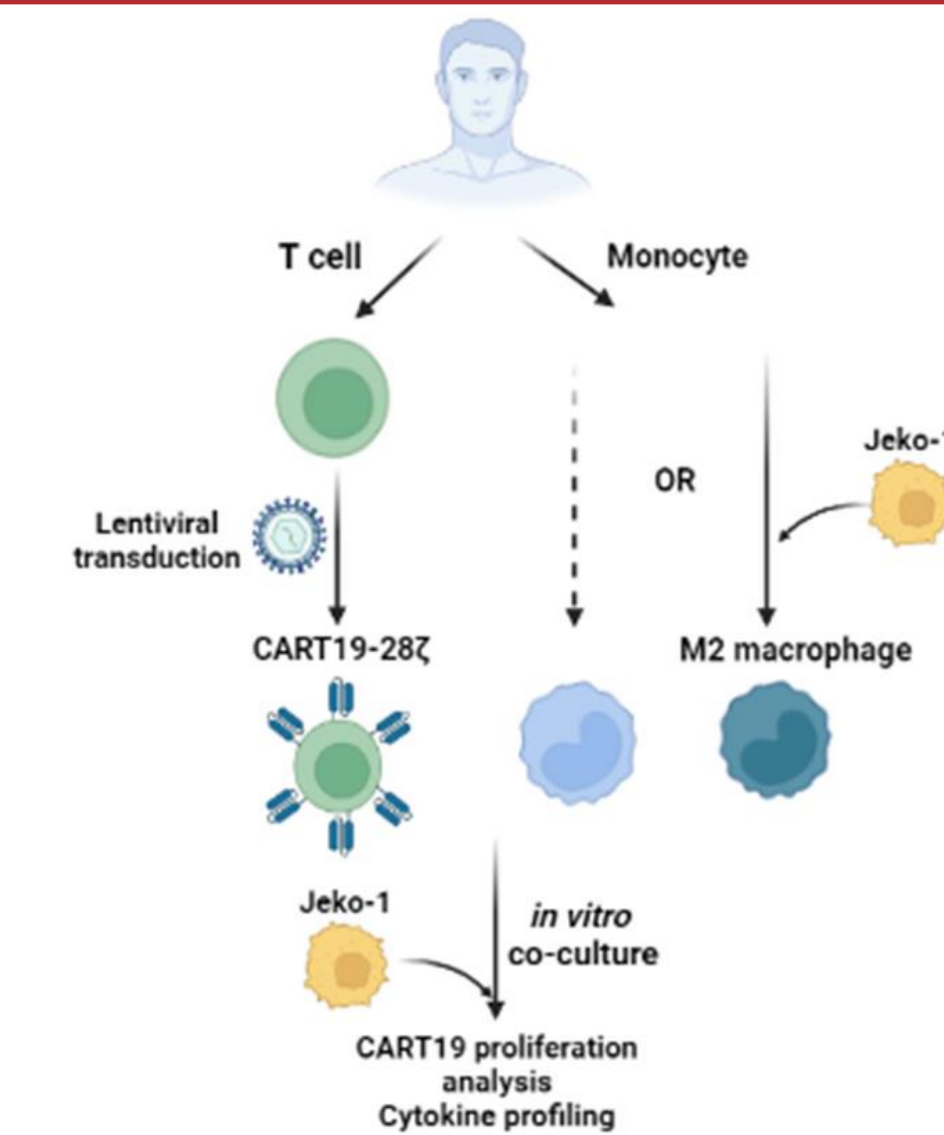
INTRODUCTION

- CD19 directed chimeric antigen receptor T (CART19) cell therapy has resulted in remarkable outcomes in B cell malignancies
- Four U.S. FDA approved CART19 cell therapy in multiple indications
- Durable remissions are **limited to 40%** of treated patients¹
- Immunosuppressive tumor microenvironment, including **inhibitory myeloid cells**, contributes to failure of CART19 cell therapy
- Monocytes have been demonstrated to **suppress T cell expansion** during CART cell production^{2,3}, as well as to contribute to the development of CART cell toxicities and resistance⁴.

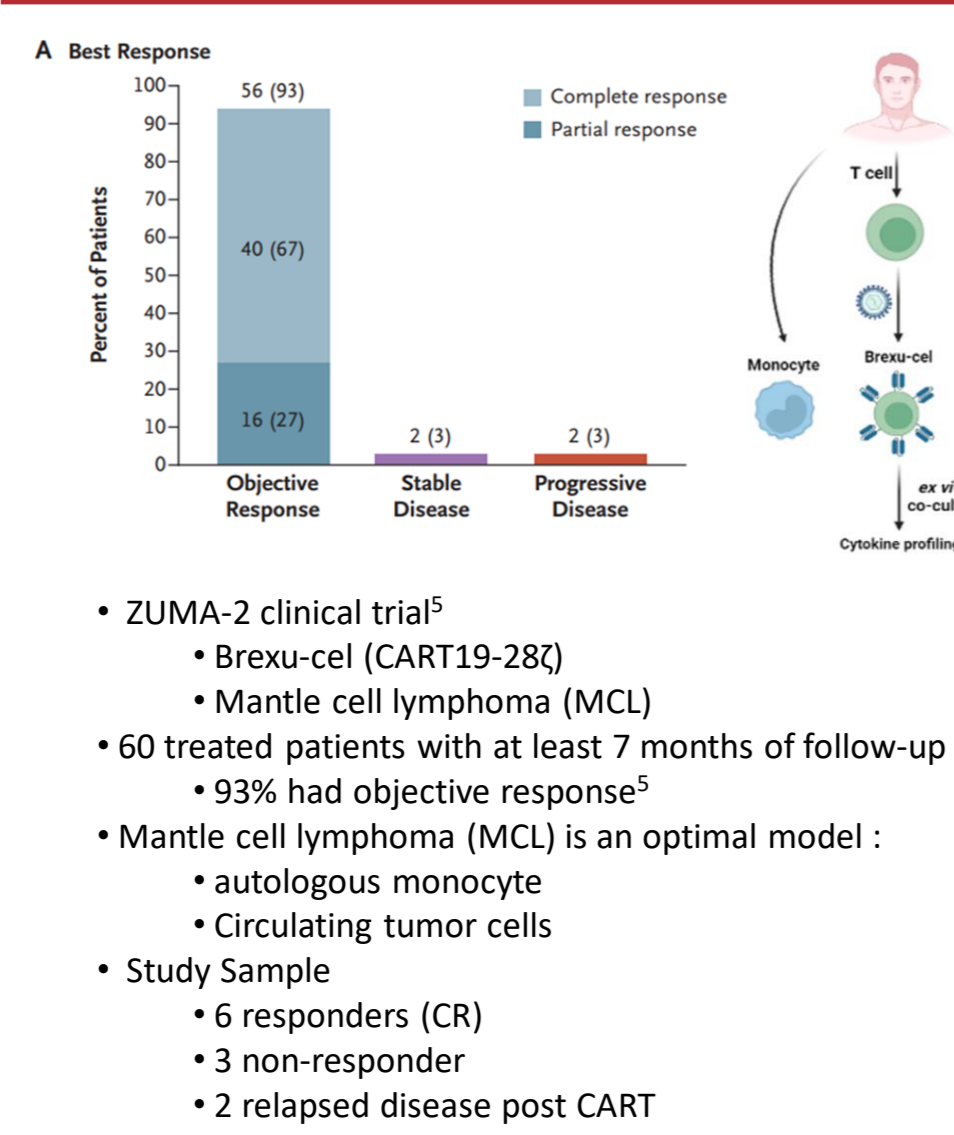
AIM

- Unravel the interactions between monocytes, CART19 cells, and tumor cells
- Determine how monocytes-CART19 cell interactions impact CART19 cell effector functions and outcomes

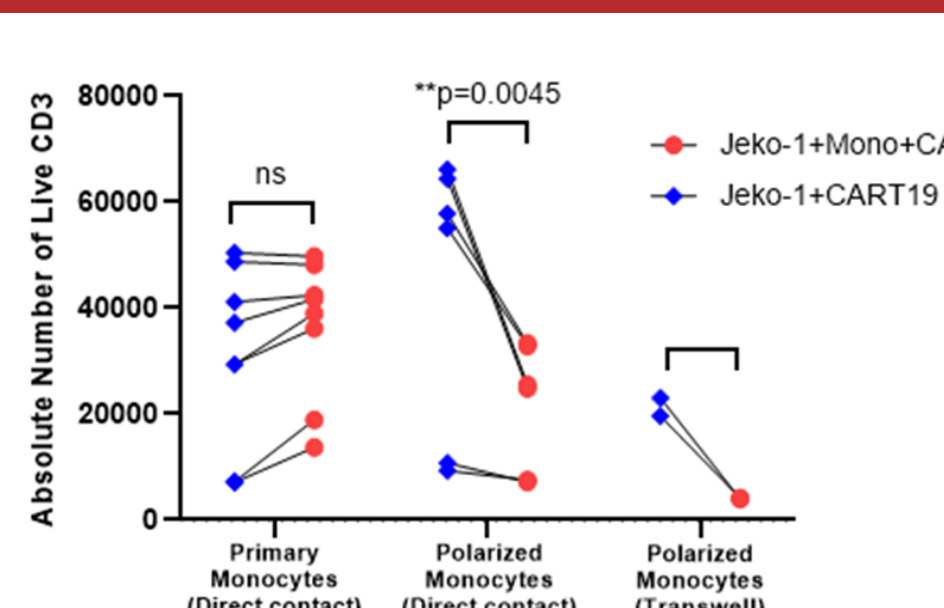
MODEL 1 IN VITRO CULTURES OF HEALTHY DONOR SAMPLES



MODEL 2 EX VIVO CULTURES OF BASELINE ZUMA-2 SAMPLES



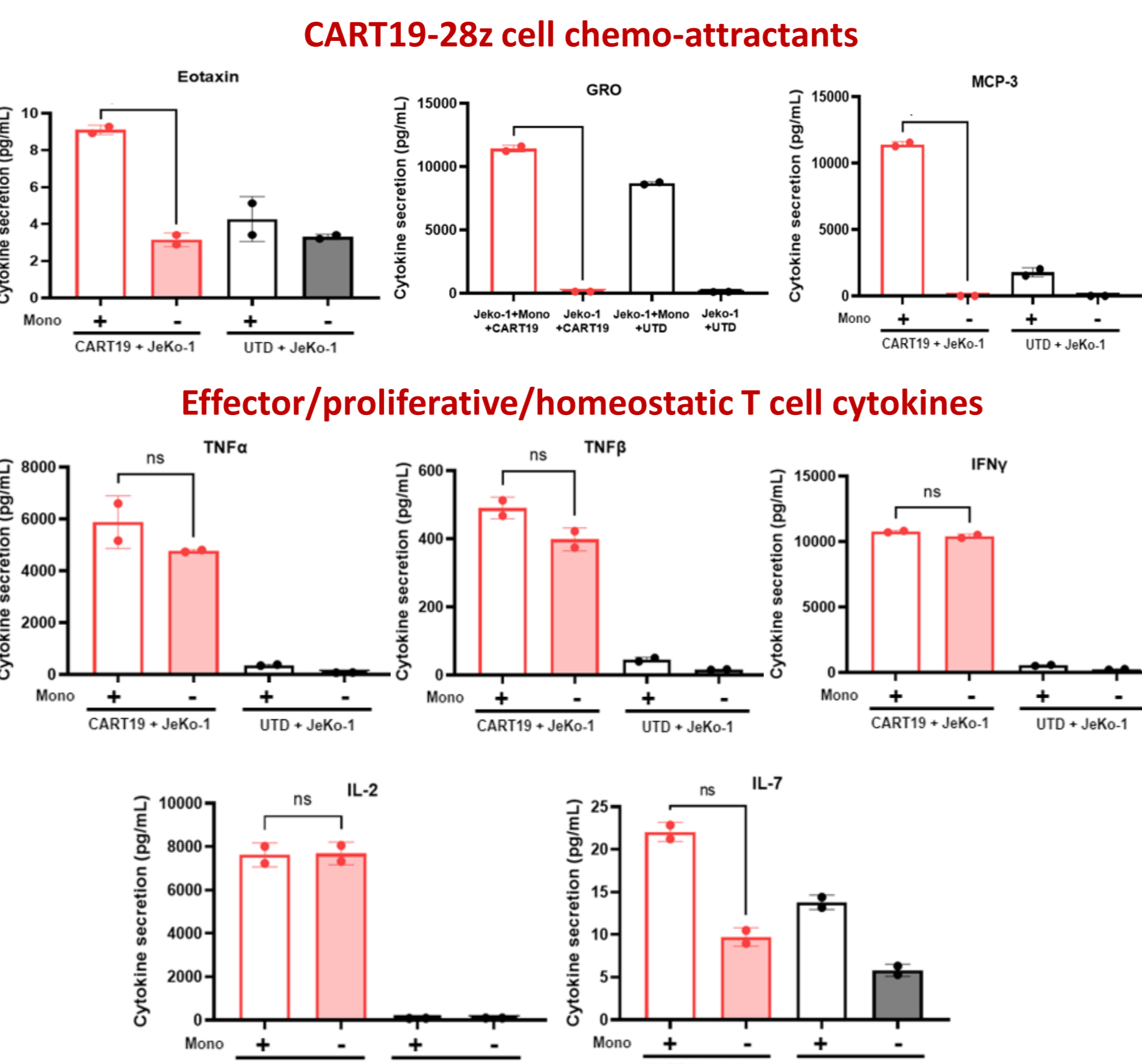
EX VIVO M2 POLARIZED MACROPHAGES INHIBIT ANTIGEN-SPECIFIC PROLIFERATION OF HEALTHY DONOR CART19-28Z CELLS WITH NO DIRECT CONTACT REQUIRED



Primary monocytes (direct contact): 4 biological replicates, 2 technical replicates each
 Polarized monocytes (direct contact): 3 biological replicates, 2 technical replicates each
 Polarized monocytes (transwell): 1 biological replicate, 2 technical replicates
 Paired t test
 ns: not significant (p>0.05), *p<0.05, **p<0.01

- Monocytes : CART19 : Jeko-1 = 1:2:2
- Same well
- Transwell
- 3 days *in vitro*
- Ex vivo* polarized M2 macrophages
- Primary monocytes polarized with recombinant human GM-CSF for 7 days
- Another 24-hour incubation with Jeko-1 cells at ratio of 1:2
- Absolute T cell count was measured by flow cytometry

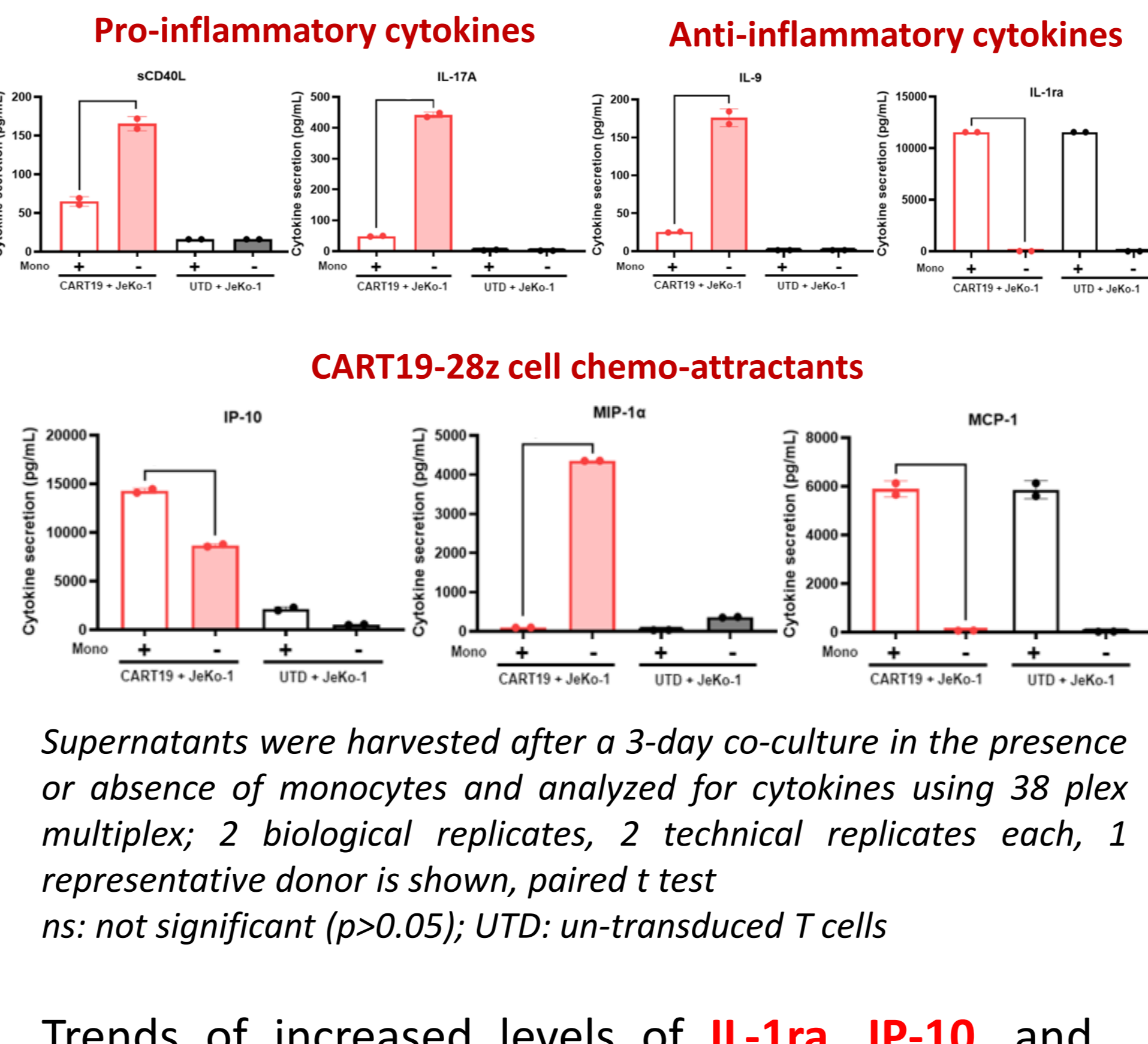
IMPACT OF HEALTHY DONOR ISOLATED MONOCYTES ON CART19-28Z CELL CHEMO-ATTRACTANTS AND CYTOKINES



Supernatants were harvested after a 3-day co-culture in the presence or absence of monocytes and analyzed for cytokines using 38 plex multiplex; 2 biological replicates, 2 technical replicates each, 1 representative donor is shown, paired t test, ns: not significant (p>0.05); UTD: un-transduced T cells

Trends of increased levels of **Eotaxin**, **GRO**, **IL-7**, and **MCP-3** were observed when CART19 cells were stimulated with CD19⁺ targets in the presence of freshly isolated monocytes

IMPACT OF M2 POLARIZED HEALTHY DONOR MACROPHAGES ON CART19-28Z CHEMO-ATTRACTANTS AND CYTOKINES

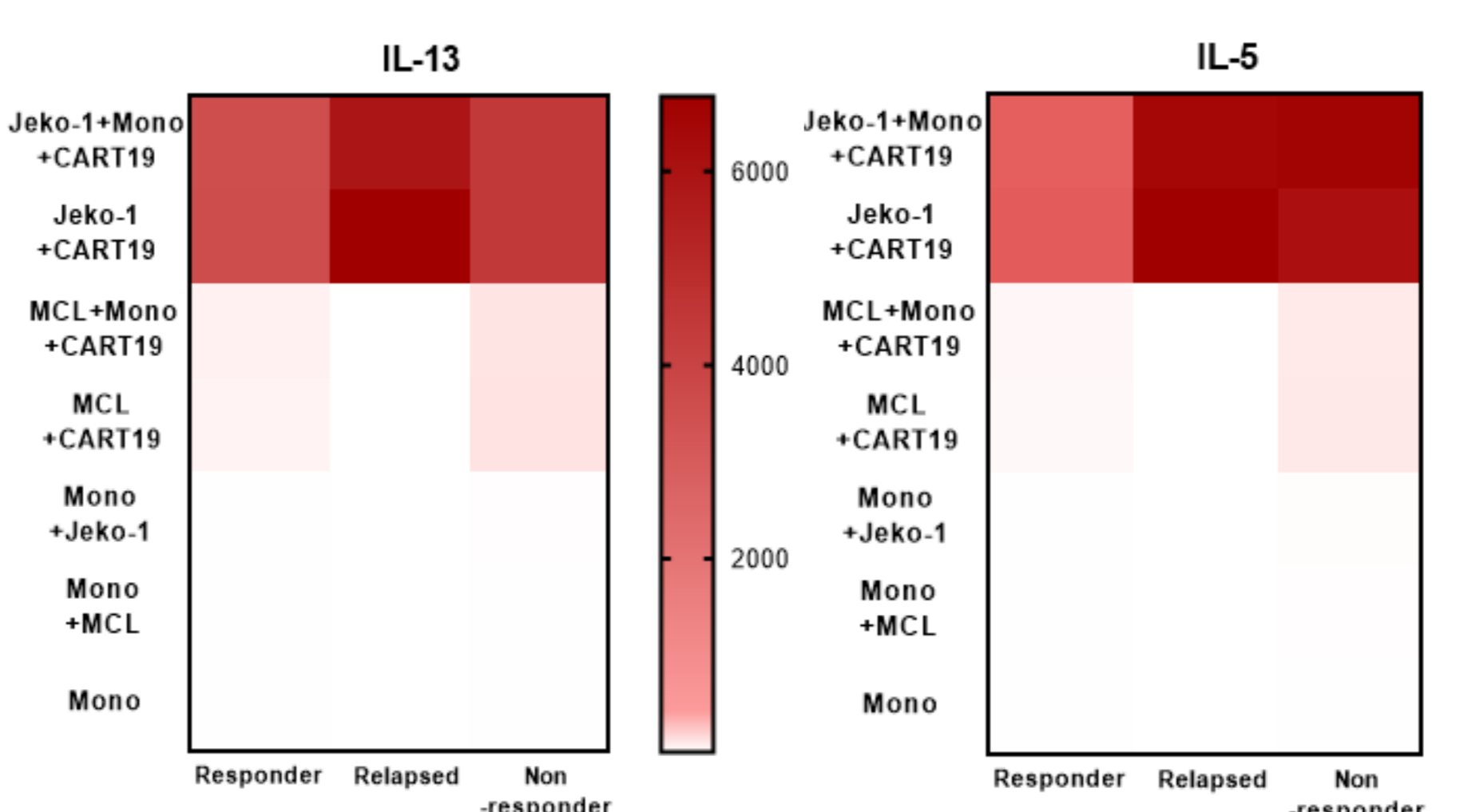


Supernatants were harvested after a 3-day co-culture in the presence or absence of monocytes and analyzed for cytokines using 38 plex multiplex; 2 biological replicates, 2 technical replicates each, 1 representative donor is shown, paired t test
 ns: not significant (p>0.05); UTD: un-transduced T cells

Trends of increased levels of **IL-1ra**, **IP-10**, and **MCP-1** were observed when CART19 cells were stimulated with CD19⁺ targets in the presence of M2 polarized macrophages

Trends of decreased levels of **IL-17A**, **sCD40L**, **IL-9**, and **MIP-1α** were observed when CART19 cells were stimulated with CD19⁺ targets in the presence of M2 polarized macrophages

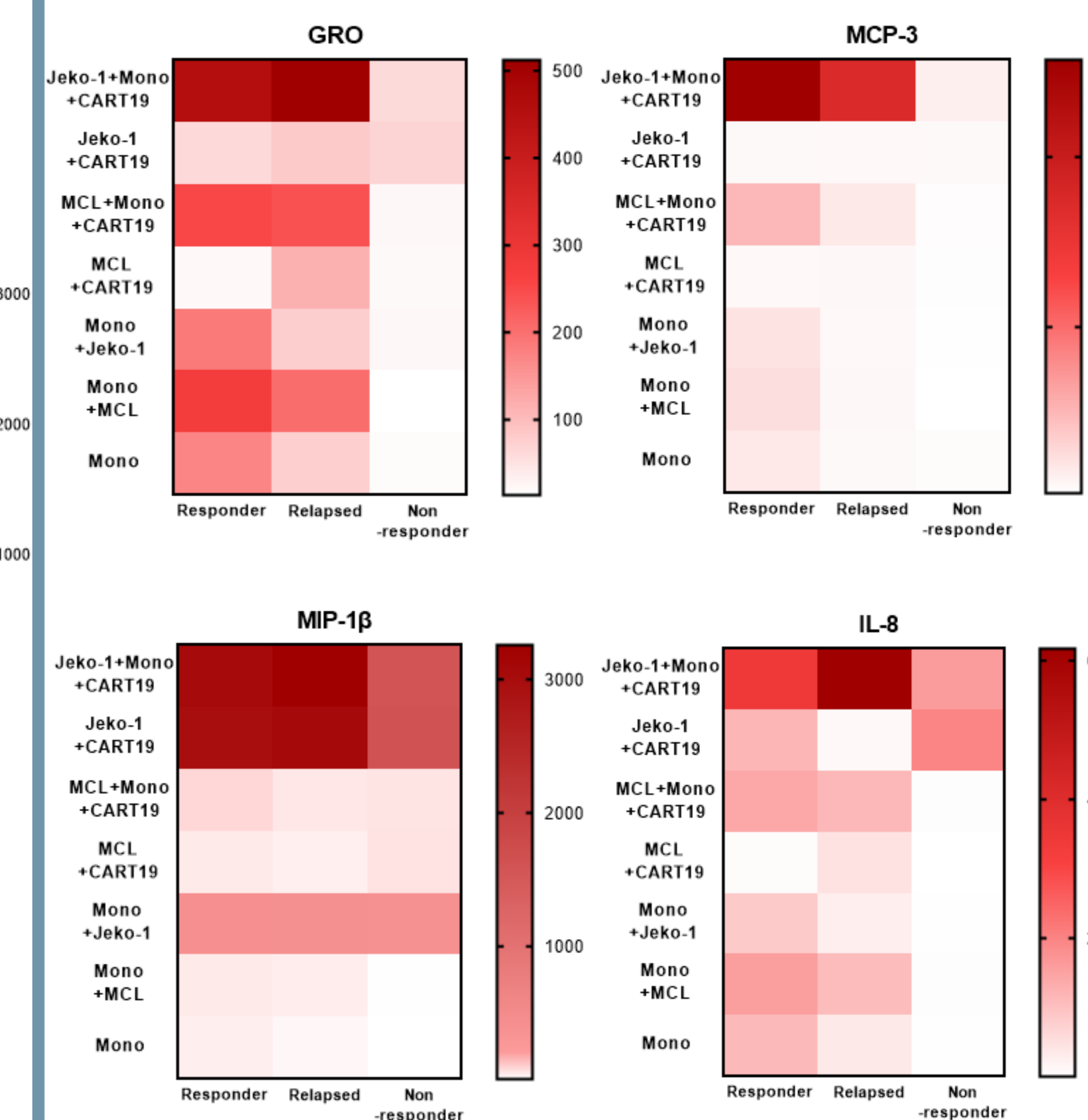
CART19-28Z CYTOKINES FOLLOWING AN EX VIVO CO-CULTURE OF BREXU-CEL, BASELINE AUTOLOGOUS MONOCYTES, AND PATIENT-MATCHED MCL IN RESPONDERS VS NON-RESPONDERS



Supernatants were harvested after a 3-day co-culture of baseline **Brexu-cel** from ZUMA-2 trial (products), baseline **autologous monocytes** (isolated from leukaphoresis collections), and **baseline CD19⁺ MCL** (isolated from leukaphoresis collections), or **CD19⁺ Jeko-1 cells**, and analyzed for cytokines using 38 plex multiplex; N=11 (6 responders, 3 non-responders, 2 relapsed disease)

Trends of increased levels of **IL-13** and **IL-5** in *ex vivo* cultures of baseline brexu-cel in the presence of autologous monocytes in non-responders

CART19-28Z CHEMO-ATTRACTANTS FOLLOWING AN EX VIVO CO-CULTURE OF BREXU-CEL, BASELINE AUTOLOGOUS MONOCYTES, AND PATIENT-MATCHED MCL IN RESPONDERS VS NON-RESPONDERS (RIGHT)



Trends of decreased levels of **GRO**, **MCP-3**, **MIP-1β**, **IL-8** in *ex vivo* co-cultures of baseline brexu-cel in the presence of autologous monocytes in non-responders

CONCLUSIONS

- Ex vivo* polarized **immunosuppressive M2 macrophages** from healthy donor monocytes **inhibit** antigen specific **CART19 proliferation** in a **contact-independent** manner
- Monocytes from healthy donors possibly promote the *in vitro* tumor microenvironment to become more pro-inflammatory by secreting significantly higher level of T cell chemo-attractants and cytokines, including **eotaxin**, **GRO**, **MCP-3** and **IL-7**, in the presence of tumor cells and CART19
- Ex vivo* polarized M2 macrophages promote the production of suppressive cytokines such as **IL-1ra**, while altering secretion level of immuno-modulating chemokine and cytokines, such as **IP-10**, **sCD40L**, **IL-17A**, **IL-9**, **MIP-1α** and **MCP-1**
- In an *ex vivo* co-culture of baseline CART19 products (brexu-cel), autologous monocytes, and tumor cells:
 - ✓ Trends of increased levels of **IL-13** and **IL-5** in the presence of monocytes in non-responders
 - ✓ Trends of decreased levels of **GRO**, **MCP-3**, **MIP1β** and **IL-8** in non-responders

- Baseline monocyte characteristics may play a role in modulation of CART19 function and clinical outcomes

Limitations: small sample size for relapse and non-response in the ZUMA-2 trial

Ongoing work: molecular understanding of baseline autologous monocytes

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