

Checkpoint modification of BTLA-HVEM-LIGHT signaling by HSV-1 glycoprotein D (gD) improves vaccine-induced CD8+ T cell responses in pre-clinical cancer models

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BACKGROUND

- Checkpoint inhibition by mAbs against PD-1/PD-L1, CTLA-4 and other immuno-inhibitors has revolutionized cancer treatment
- Current checkpoint inhibitors target activated T cells that are differentiating towards exhaustion¹
 - they fail to rescue fully exhausted T cells
- Immunotherapies that can alter CD8+ T cell activation have the potential to enhance and broaden T cell responses to various cancers^{1–3}
- There remains a need to produce novel cancer treatments, alone, or in combination that:
 - have better safety and tolerability
 - provide more potent and prolonged T cell responses
- Here we present data from several preclinical cancer models investigating a novel immunotherapy platform that uses gD, a genetically encoded checkpoint modifier of early T cell activation^{2–9}

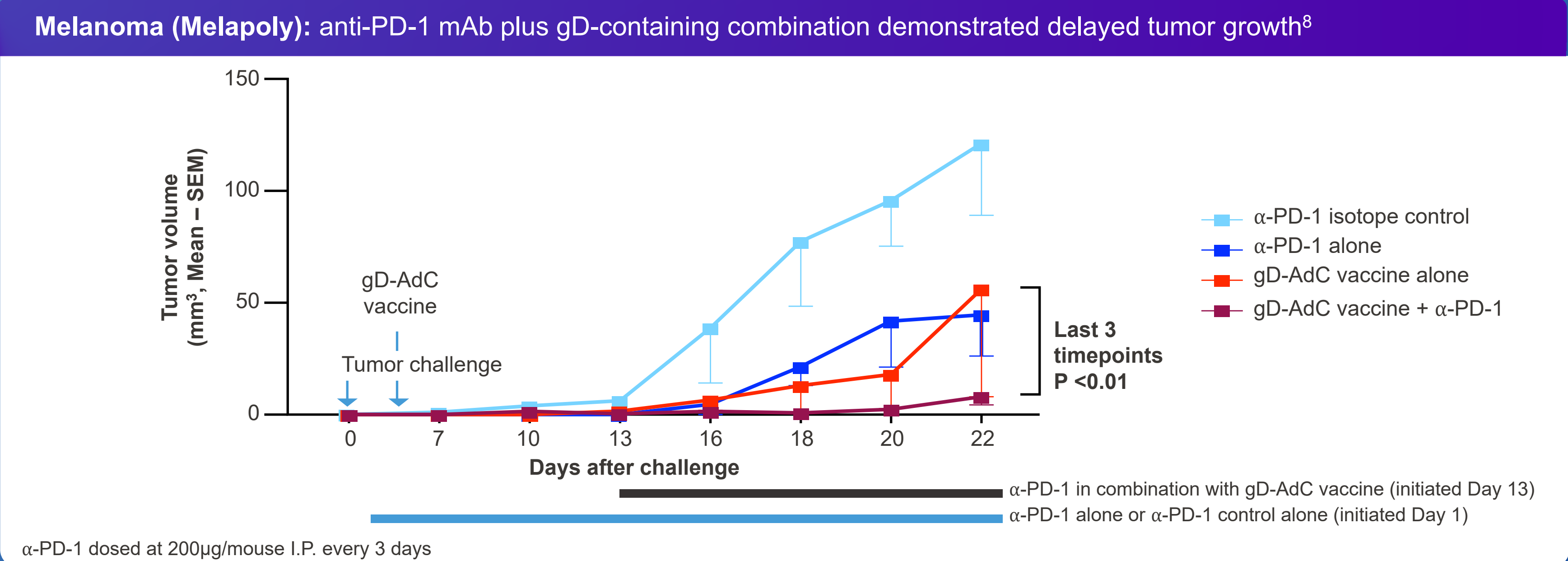
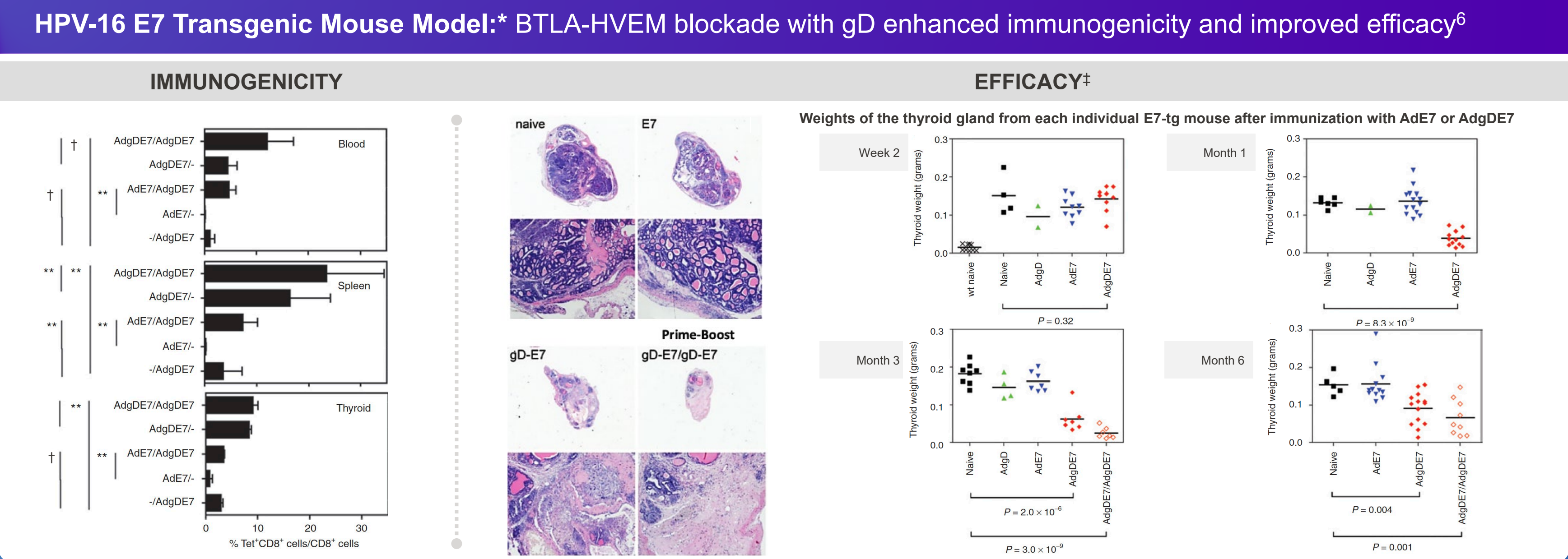
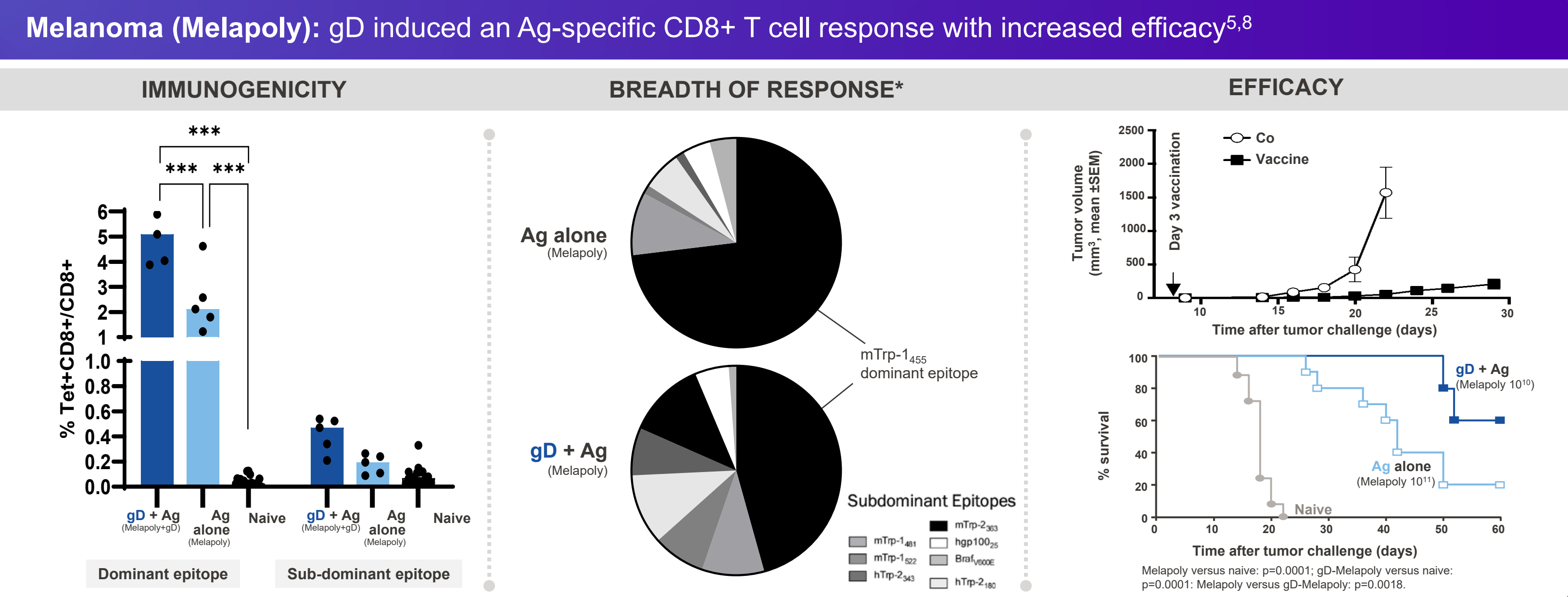
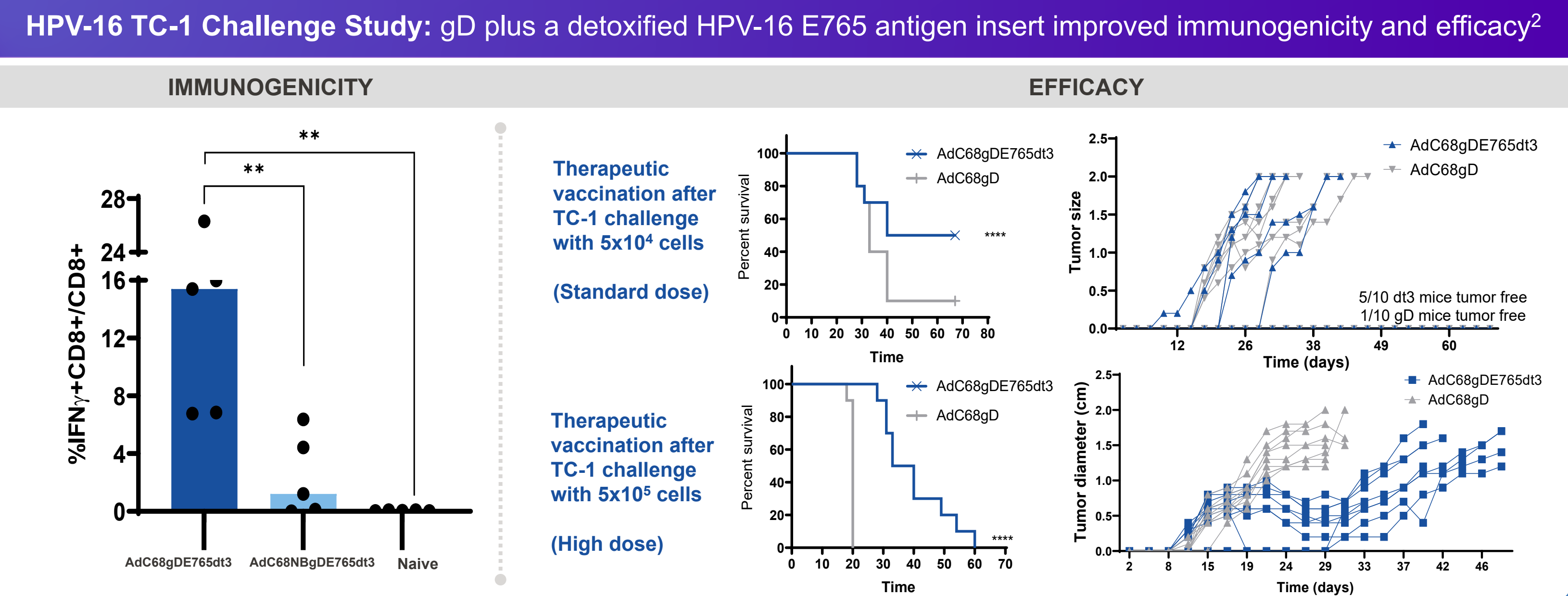
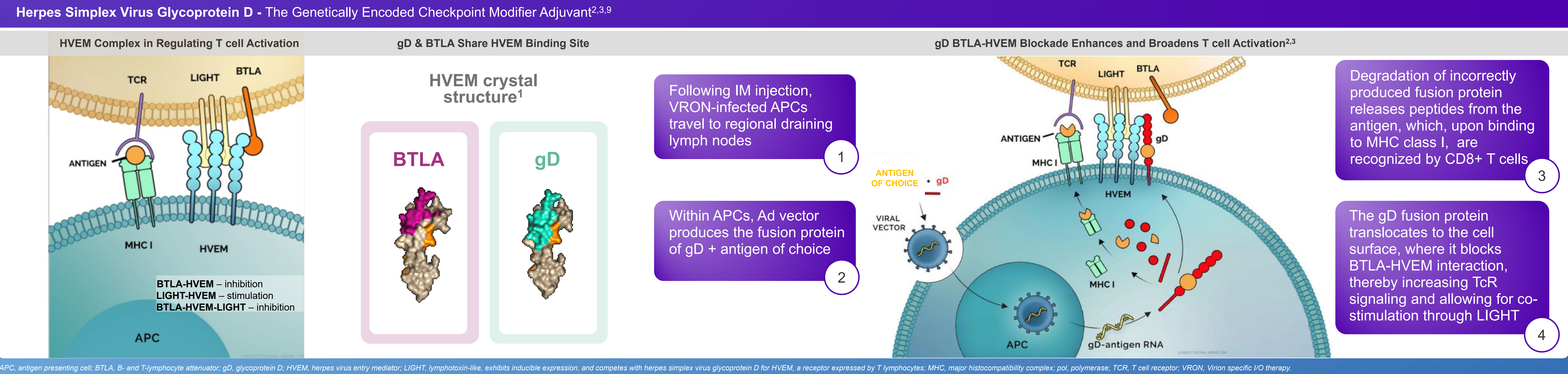
METHODS

The effects of gD on immunogenicity and efficacy of antigens were assessed in a series of preclinical studies in mice:*

- HPV-16 associated cancers using early oncoprotein vaccines against transplantable TC-1 tumors in a transgenic adenocarcinoma mouse model^{2,4}
- Melanoma model using an epitope vaccine called Melapoly against transplantable B16F10 tumors⁵
- Antigens were fused into gD and expressed by adenoviral vectors
 - Prime only^{2,4,5} and Prime/Boost^{6,7} vaccinations using heterologous vectors were explored in various studies
 - Control vaccinations used either gD alone,⁷ a mutated gD that does not bind to HVEM with the antigen² or the antigen without gD^{2,4–7}
 - Vaccination with gD-Melapoly vaccine was investigated in combination with anti-PD1 mAbs⁸
- The frequencies of antigen-specific CD8+ T cells were determined by ICS at various time points after vaccination^{2–9}
- Frequencies and phenotypes of antigen-specific CD8+ T cells were tested for by staining with an MHC I tetramer and antibodies to various markers^{2–9}
- Anti-tumor activity was evaluated by tumor progression and survival, which were monitored over time^{2,4,7} and through histology⁶

*The full methods have been previously described^{2–9}

RESULTS



CONCLUSIONS

Expressing a tumor-associated antigen as a gD fusion protein in preclinical cancer studies shows:

- Consistently enhanced CD8+ T cell frequencies to the disease-specific antigen(s)^{2,4–7}
- Improved clinical outcomes, including survival and delayed tumor growth^{2,5–7}
- Broadened CD8+ T cell responses to subdominant epitopes, which are typically not induced by the tumors⁷
- Addition of anti-PD-1 mAb treatment further improved the efficacy of gD-containing immunotherapies⁸
- Checkpoint modification by gD of the BTLA-HVEM-LIGHT pathway lowers the CD8+ T cell activation threshold and enhances, broadens and prolongs T cell responses^{2,3}
- Clinical studies to evaluate therapeutic vaccination with gD are planned

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ABBREVIATIONS

AdC, chimpanzee adenovirus serotype 68; Ag, antigen; BTLA, B- and T-lymphocyte attenuator; CTLA-4, cytotoxic T-lymphocyte-associated protein 4; gD, glycoprotein D; HBV, hepatitis B; HPV, human papillomavirus; HVEM, herpes virus entry mediator; ICS, intracellular cytokine staining; LIGHT, lymphotxin-like, exhibits inducible expression, and competes with herpes simplex virus glycoprotein D for HVEM, a receptor expressed by T lymphocytes; mAb, monoclonal antibody; MHC, major histocompatibility complex; PD-1, programmed cell death protein-1; PD-L1, programmed death-ligand 1; SD, standard deviation; SEM, standard error of mean.

DECLARATION OF INTERESTS

Dr Ertl has the following disclosures: Co-founder of Virion Therapeutics; Advisor roles with: Freeland, Inc, Takeda, Biogen, Regenxbio, Gamaleya Institute, Ring Therapeutics, and the Canine Rabies Treatment Initiative.

FOR MORE INFORMATION

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