

ABSTRACT

CAR T cell therapy has demonstrated remarkable clinical efficacy against relapsed and refractory hematological malignancies, such as B cell non-Hodgkin lymphoma (NHL) and acute lymphoblastic leukemia (ALL)1-3. Despite these advances, prominent barriers including poor T cell effector function, lack of proliferation, and limited CAR T cell persistence prevent CAR T cell therapies from reaching their full curative potential⁴.

Interleukin-2 (IL-2) is a potent stimulator of CD4 and CD8 T cell proliferation, survival, and cytotoxic function, thereby making it an attractive molecule to support CAR T cell therapy. However, therapeutic use of IL-2 is limited by systemic toxicity due its promiscuous activation of undesired immune cell populations, including non-tumor reactive T cells and NK cells⁵.

To facilitate selective *ex vivo* and *in vivo* expansion of engineered T cells we have developed a human orthogonal (ortho) ligand/receptor system consisting of a pegylated, IL-2 mutein (STK-009) and a mutated IL-2 Receptor Beta (*ortho*IL-2R β) that selectively bind each another, but does not significantly activate their wild type receptor and cytokine counterparts. This system allows for *in vivo* IL-2 signaling in engineered adoptive cell therapies that express the *ortho*IL-2R β while avoiding signaling in nontumor reactive T cells and NK cells.

Here, we demonstrate the ability of the STK-009/orthoIL-2RB ligand/receptor pair to selectively potentiate human *ortho*IL-2R β (hoRb) expressing CD19 CAR T cells *in vitro* and *in vivo*. We incorporated hoR β into a CD19 directed CAR lentiviral construct utilizing a T2A peptide linker, allowing the use of a single lentiviral plasmid to generate CD19 orthoCAR T cells. STK-009 subcutaneous administration increased the efficacy of suboptimal doses of CD19 orthoCAR T cells against a disseminated Raji mouse model of aggressive lymphoma. STK-009 treatment dramatically increased levels of CD19 orthoCAR T cells with a clinically favorable T_{SCM} and T_{EMRA} immunophenotype. STK-009 treatment of large tumors which had relapsed on CD19 orthoCAR T cell administration alone, significantly decreased tumor burden. STK-009 treatment was able to rescue CD19 *ortho*CAR T cell efficacy more than 30 days after initial CD19 orthoCAR T cell treatment.

When dosage was stopped after complete tumor responses, CD19 orthoCAR T cells contracted, as expected. We found that STK-009 redosing could reverse this CD19 orthoCAR T cell contraction and significantly increased CD19 orthoCAR T cell levels. This illustrates the on-demand control of the STK-009/orthoCAR T cell platform.

These findings validate a platform that selectively drives potent T cell effector functions of IL-2 without IL-2 mediated toxicities mediated by NK cells or non-tumor specific T cells and improves the efficacy and durability CAR T cell therapy.





	WT IL-2	olL-2
WT-IL2Rβ	+	-
Ortho-IL2Rβ (hoRb)	-	+

Figure 1. Orthogonal IL-2/IL-2R β schema. Wild type (WT) and orthoIL-2R β receptors exhibit significant preference for their cognate ligand, WT and orthoIL-2, respectively. Therefore, engineered T cells expressing the *ortho* receptor will respond selectively to *ortho*IL-2, thereby allowing specific expansion and enhancement of engineered T cell activity.



for proliferation. To generate NKL-hoRB cells, NKL cells were transduced with MSCV-hORB-IRES-YFP virus and YFP⁺ cells were sorted. Proliferation was assessed by Celltiter Glo.



Figure 3. CD19 orthoCAR construct and expression check. A) Lentiviral construct containing the anti-CD19 FMC63 scFv, CD28 transmembrane and costimulatory domain, followed by CD3zeta. The cleavage peptide T2A and human orthoIL-2R β (hoRb) immediately follow the CAR construct and are expressed as a single mRNA. Expression is regulated via an EF1 α promoter. B) Flow cytometry analysis of CAR and hoRb expression. HEK293T cells (IL2R\beta negative) were transfected with the CD19 orthoCAR construct. FMC63 expression was performed via recombinant human biotinylated Fc-CD19/streptavidin-PE. hoRb expression was assessed with antibodies that detect wild type IL2R β .



Figure 4. orthoIL-2 enrichment of orthoCAR T cells in vitro. A) Schema of CAR T cell manufacturing for oIL-2 enrichment of orthoCAR T cells. B) Flow cytometry analysis detecting CD19 CAR expression.

OrthoCARs: Engineered IL-2/IL-2Rß orthogonal pairs that selectively enhance CAR T cell function in vivo

Paul-Joseph P. Aspuria, Michele Bauer, Sandro Vivona, Steve E. Kauder, Scott McCauley, Romina Riener, Deepti Rokkam, Jan Emmerich, Rene de Waal Malefyt, Patrick J. Lupardus, Rob A. Kastelein, and Martin Oft Synthekine, Menlo Park, USA

 αCAR

group means with standard deviations are displayed.



Time (days)



Figure 6. Flow analysis of peripheral blood. A) Human CD3⁺ cells and B) memory phenotype based upon CD45RA and CCR7 expression (T_{SCM}: CD45RA⁺CCR7⁺, T_{CM}: CD45RA⁻ CCR7⁺, T_{EM}: CD45RA⁻ CCR7⁻, T_{EMRA}: CD45RA⁺ CCR7⁻. Data represented as total cell numbers/ml of blood.



Figure 8. A) Study design. Mice exhibiting no tumor burden from the STK-009 + CD19 orthoCAR T cell treated cohorts were put on drug holiday for at least 40 days. Mice were split into two groups receiving either PBS or STK-009. Flow analysis was performed on peripheral blood and analyzed for **B**) human CD3 positive cells and **C**) memory phenotype based upon CD45RA and CCR7 expression.

STK-009 administration enhances relapse free anti-tumor efficacy of a suboptimal dose of CD19 orthoCAR T cells in a disseminated Raji mouse model of lymphoma



Time (days)

Figure 5. STK-009 + CD19 orthoCAR T cells in a stress test mouse model of lymphoma. A) Study design. NOD scid gamma (NSG) were injected with 5E5 Raji-luc cells on Day 0. Mice were imaged with an IVIS imaging system, randomized, and received their respective treatment on Day 5. Mice were dosed with either PBS or STK-009 every other day until Day 17. B&C) Mice were imaged twice per week. (B) Spider plots for individual mice and (C) treatment



Figure 7. Delayed treatment of STK-009 29 days after CD19 orthoCAR T cell administration decreases tumor burden in relapsed mice and expansion of orthoCAR T cells. A) Three mice that were treated with CD19 orthoCAR T cells alone demonstrated significant relapsed tumor growth. These mice were then treated with STK-009 alone starting on Day 34 of the study. B) Tumor burden spider plot of individual mice. X denotes taken off study. C) Bioluminescent imaging. D) Flow analysis of peripheral blood 3 days prior (Day 32) and 13 days after (Day 48) first dose of STK-009 (Day 35).

The incorporation of the STK-009/*ortho*IL2R β system enables the following advantages over current clinically validated CAR T cell therapies: Allows enrichment of CAR-transduced cells during *ex vivo* manufacturing Increases anti-tumor efficacy Drives a significant increase in CAR T cell counts *in vivo* On-demand and controlled by dosing strategy • Expands a favorable anti-tumor and persistent CAR T cell immunophenotype - T_{SCM} for persistence and T_{EMRA} for anti-tumor effector function • Re-expansion of resting/exhausted CAR T cells - Restoration of CAR T cell levels and activity Therefore, the STK-009/orthoCAR platform has the potential to overcome clinically relevant hurdles in cell therapy.

REFERENCES

- Neelapu et al. Axicabtagene Ciloleucel CAR T-Cell Therapy in Refractory Large B-Cell Lymphoma. NEJM 377;2531-44, 2017. Schuster et al. Tisagenlecleucel in Adult Relapsed or Refractory Diffuse Large B-Cell Lymphoma. NEJM 280:45-56, 2018.
- 8:355.2016
- Rosenberg et al. IL-2: The First Effective Immunotherapy for Human Cancer. Journal of Immunology 192(12):5451-5458, 2014.



CONCLUSIONS

Turtle et al. Immunotherapy of non-Hodgkin's lymphoma with a defined ratio of CD8⁺ and CD4⁺ CD19-specific chimeric antigen receptor–modified T cells. Sci Trans Med

Srivastava and Riddell. CAR T Cell Therapy: Challenges to Bench-to-Bedside Efficacy. Journal of Immunology 200(2):459-468, 2019.