



IMMUNOTERAPIA: razionale e basi biologiche

Licia Rivoltini, MD
Unit of Immunotherapy of Human Tumors



Fondazione IRCCS
Istituto Nazionale dei Tumori

via Venezian, 1 20133 Milano

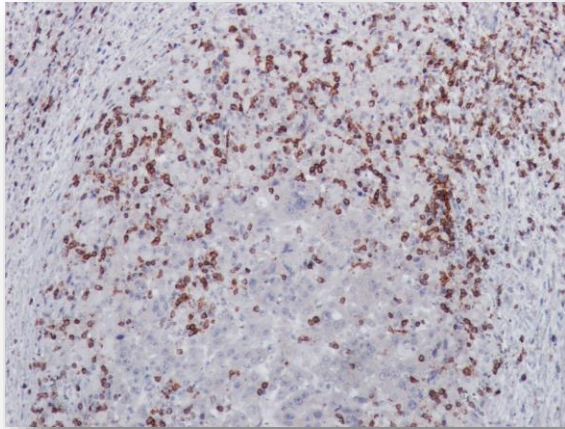
Sistema Socio Sanitario



Regione
Lombardia

Cancer Immunotherapy:

the unique strategy of targeting tumor immunity



The immune system protects us from tumor through the same pathways utilized to fight pathogens

SPECIFICITY

Immune responses can finely recognize “aberrant” cells from normal cells

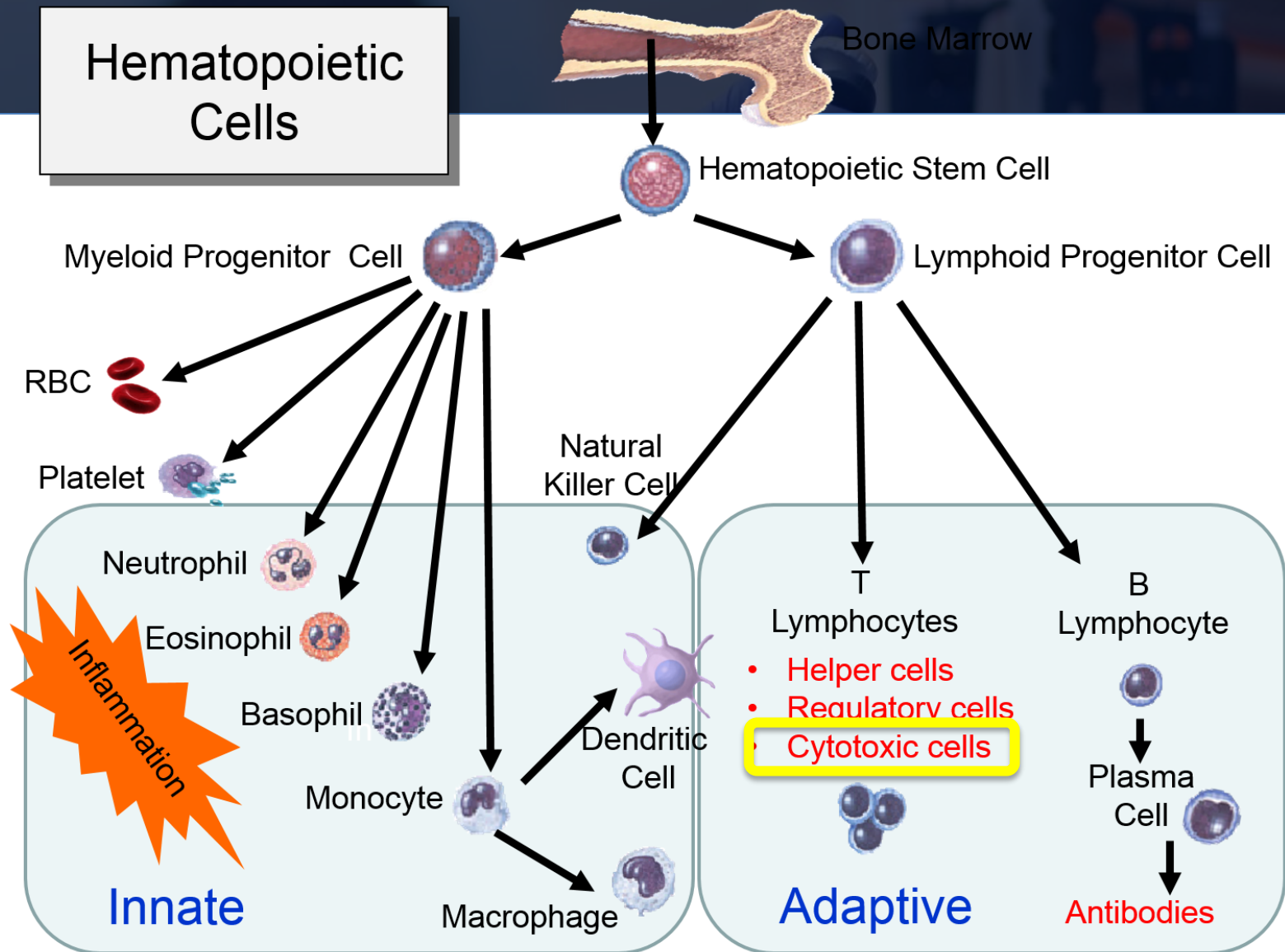
MEMORY

Once established, immunity can provide long-term protection

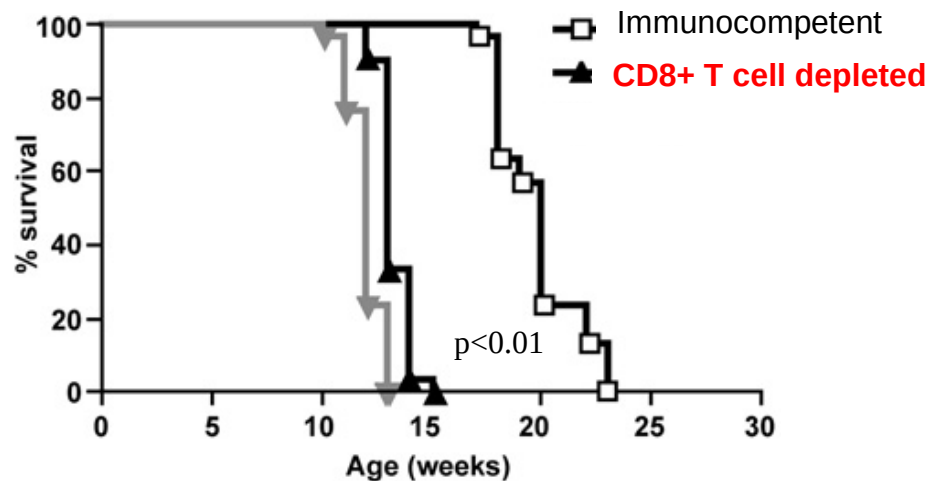
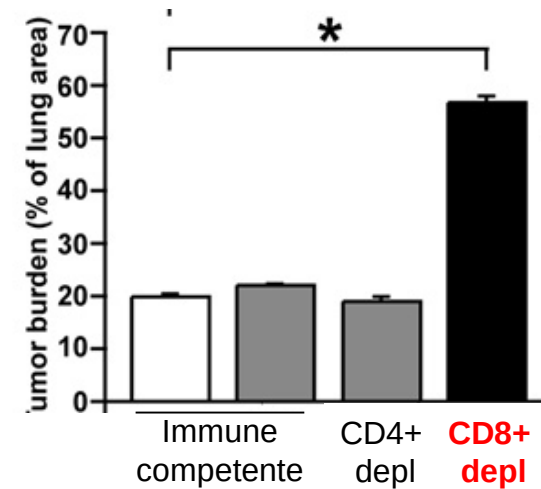
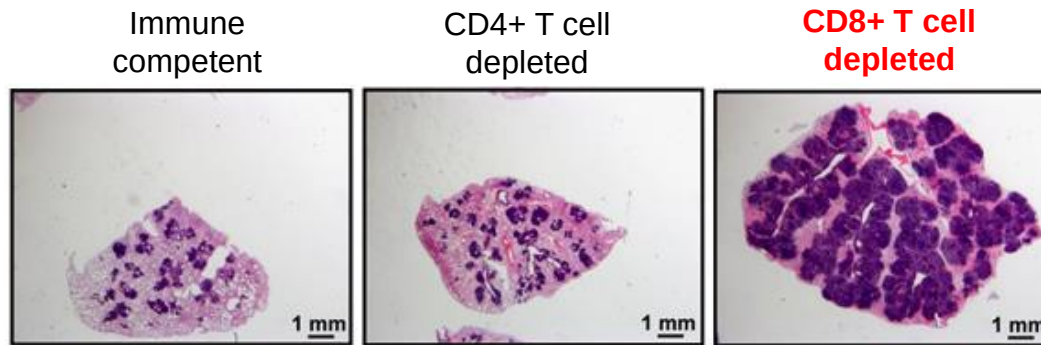
INTRINSIC THERAPY

Based on endogenous immunity, cancer immunotherapy may work in all tumor histologies

The complex network of anti-tumor immunity

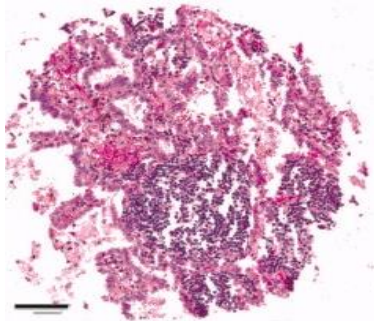


Tumor infiltrating CD8+ T cells control tumor growth in aggressive murine lung carcinoma

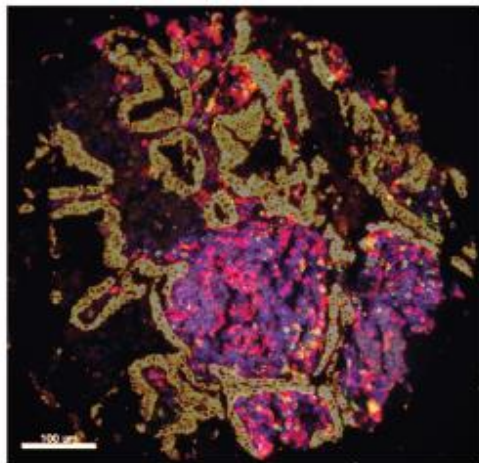


Positive prognostic value of tumor infiltrating CD8 T cells

NSCLC

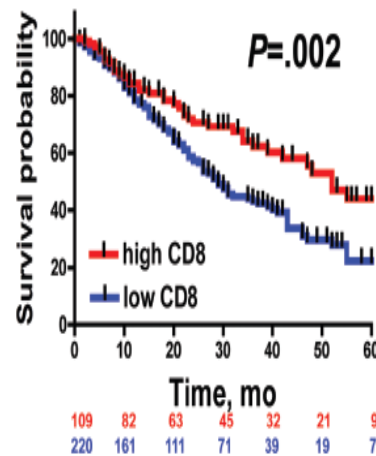


Hematoxylin & Eosin

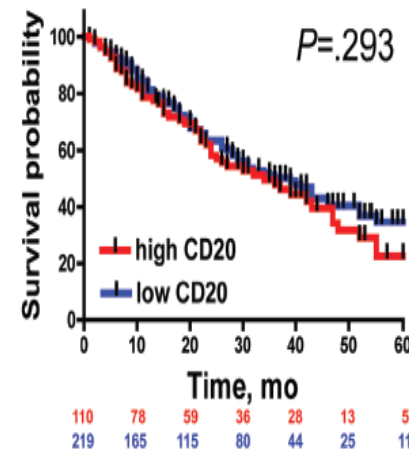


DAPI/CK/CD3/CD8/CD20

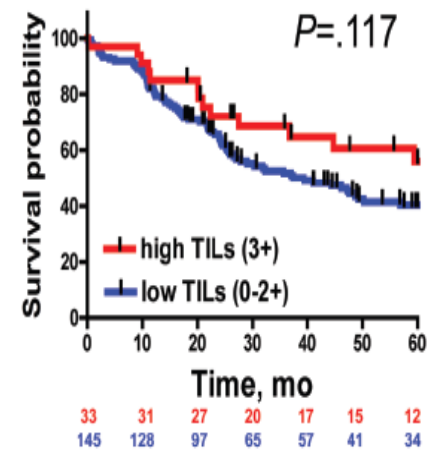
CD8 T cells



B cells



CD4 T cells

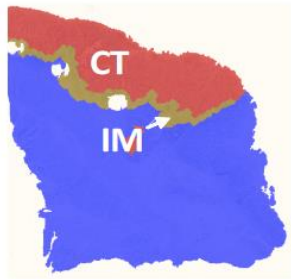


Confirmed by Djenidi et al., J Immunol 2015
and Donnem et al., Clin Cancer Res 2015

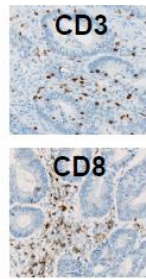
Schalper et al., J Natl Cancer Inst 2015

Immunoscore is an independent prognostic histological parameter in CRC

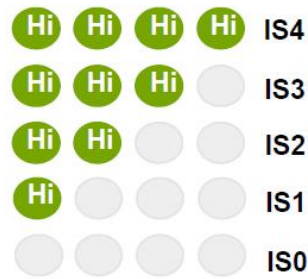
Tumor regions (CT & IM)



Immunostainings

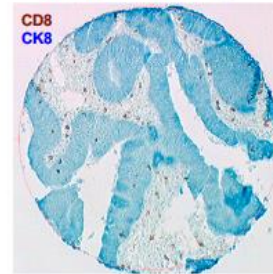


Immunoscore (CT+IM)

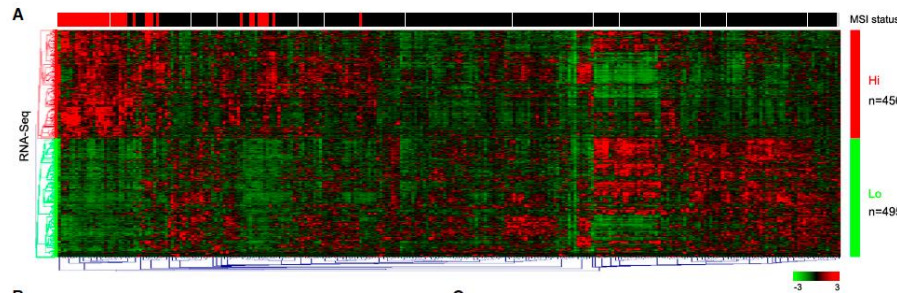
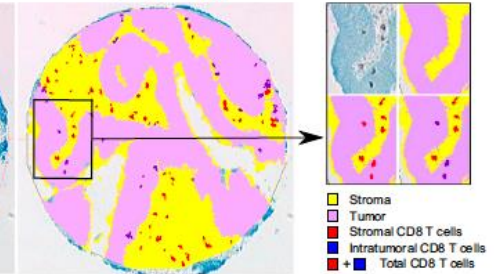


Digital Pathology

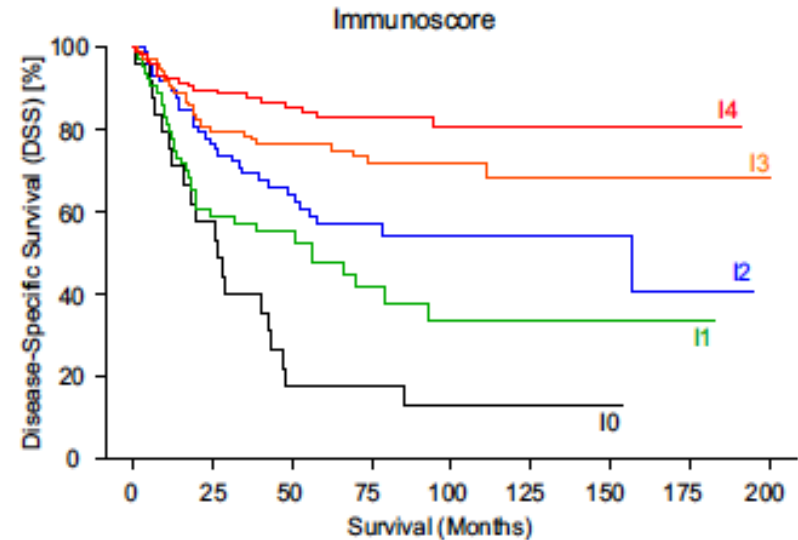
Immunohistochemistry



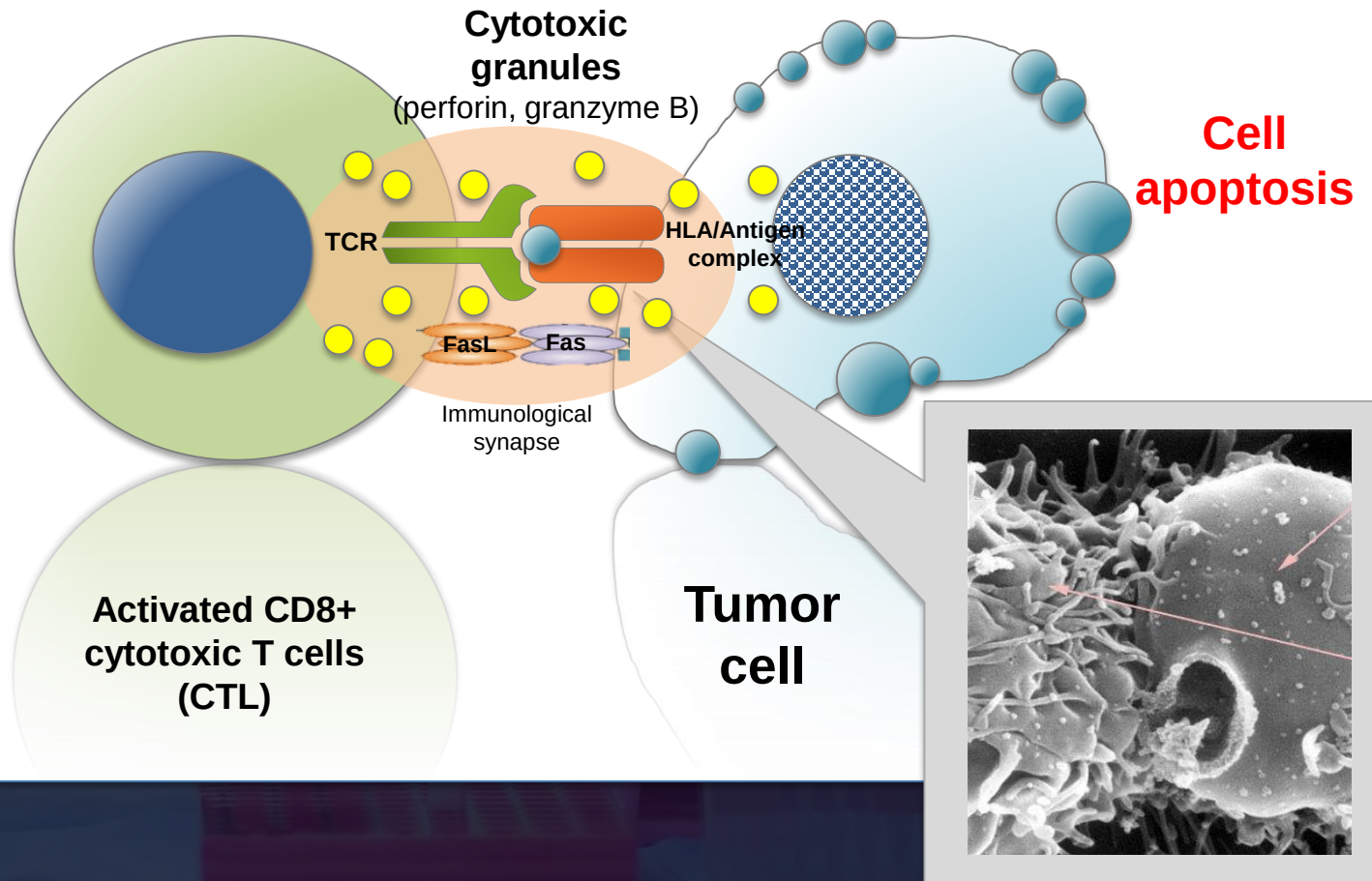
Digital pathology



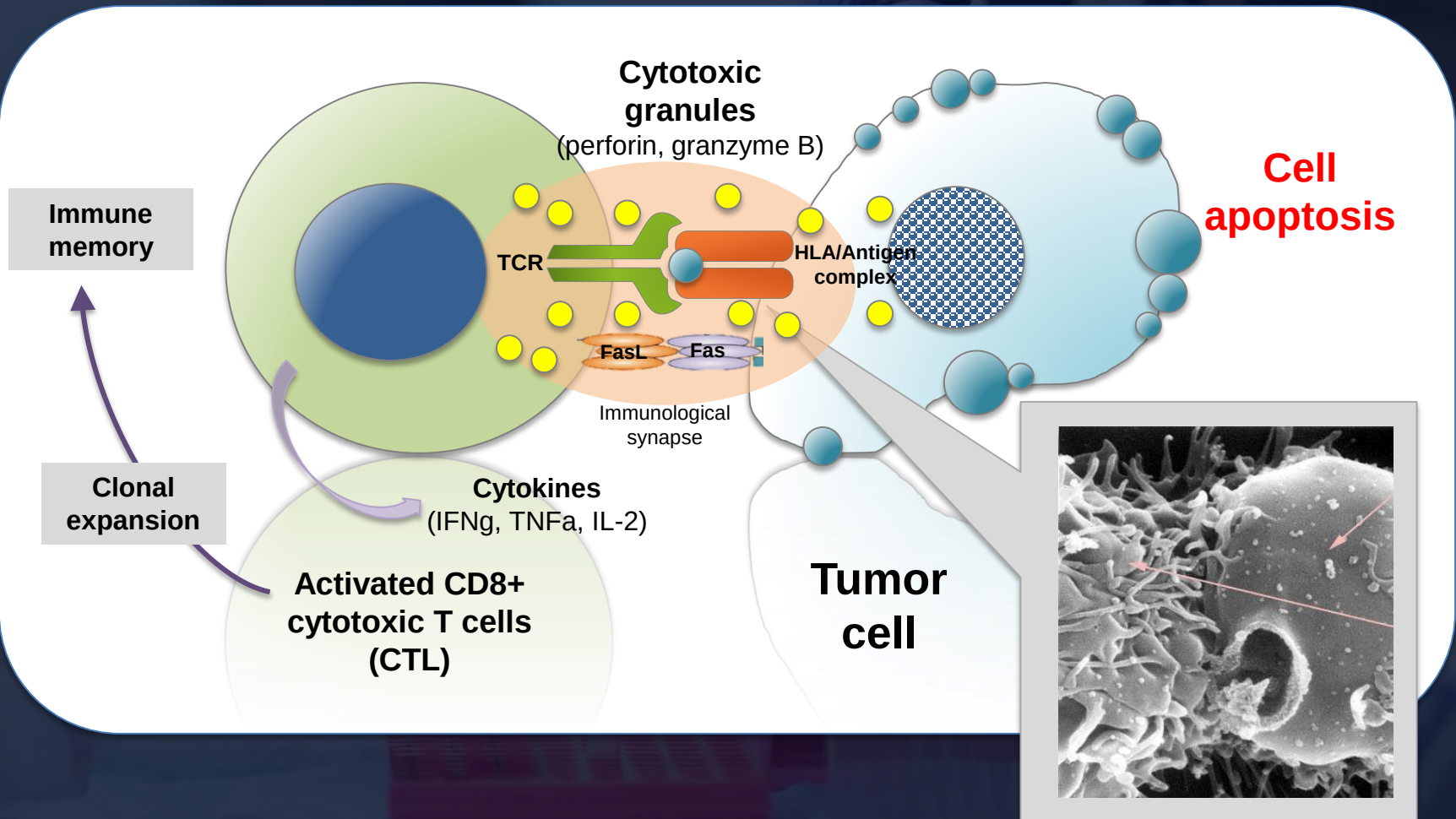
Mlecnik et al.,and J Galon, Immunity 2016



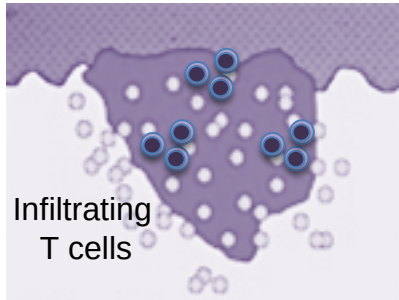
Pathways of tumor cell killing by CD8+ T cells



Pathways of tumor cell killing by CD8+ T cells

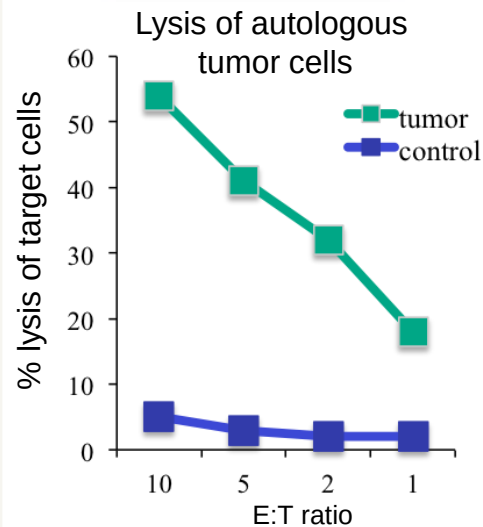
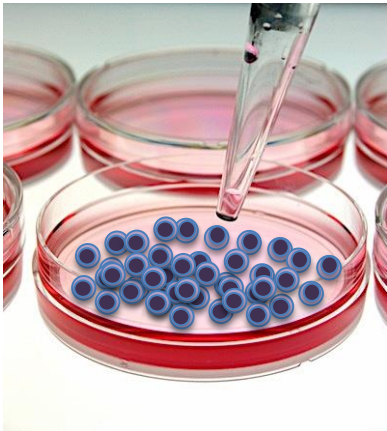


Cancer lesions are infiltrated by tumor-specific CD8+ cytotoxic T cells



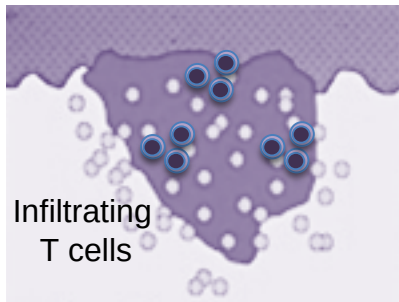
Interleukin 2

CD8+ T cells



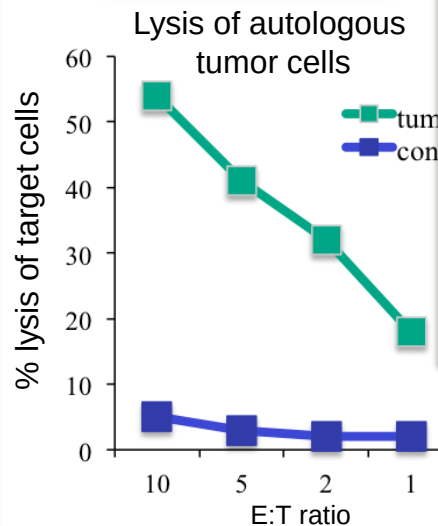
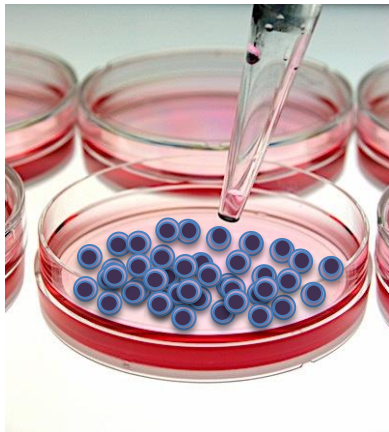
Lysis of: autologous tumor, common tumors
same histotype, common tumor different histotype

Cancer lesions are infiltrated by tumor-specific CD8+ cytotoxic T cells



Interleukin 2

CD8+ T cells



Lysis of: autologous tumor, common tumors
same histotype, common tumor different histotype

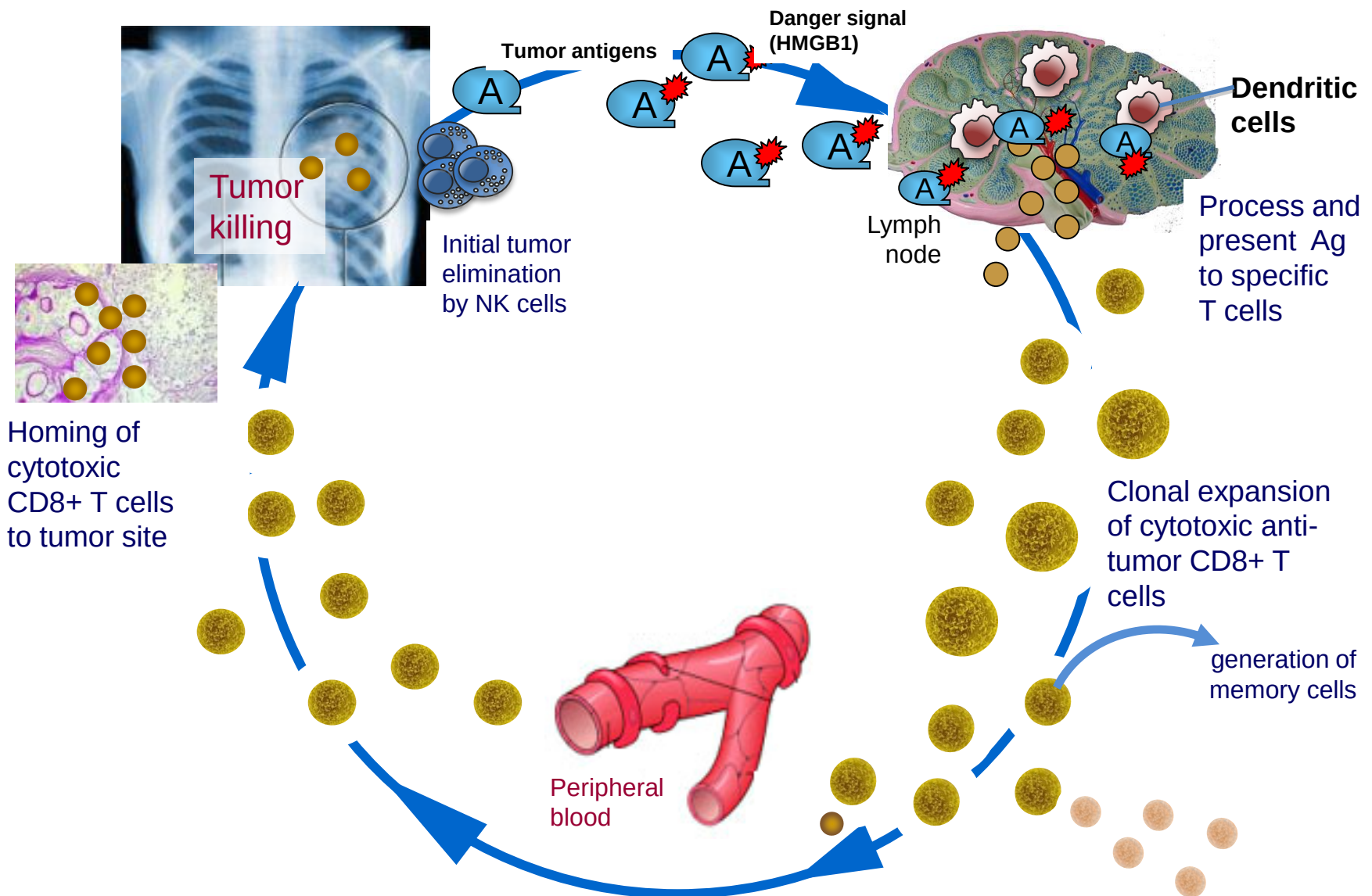
Tumor Antigens

Tissue antigens
Muc1, MART-1,
PSMA..)

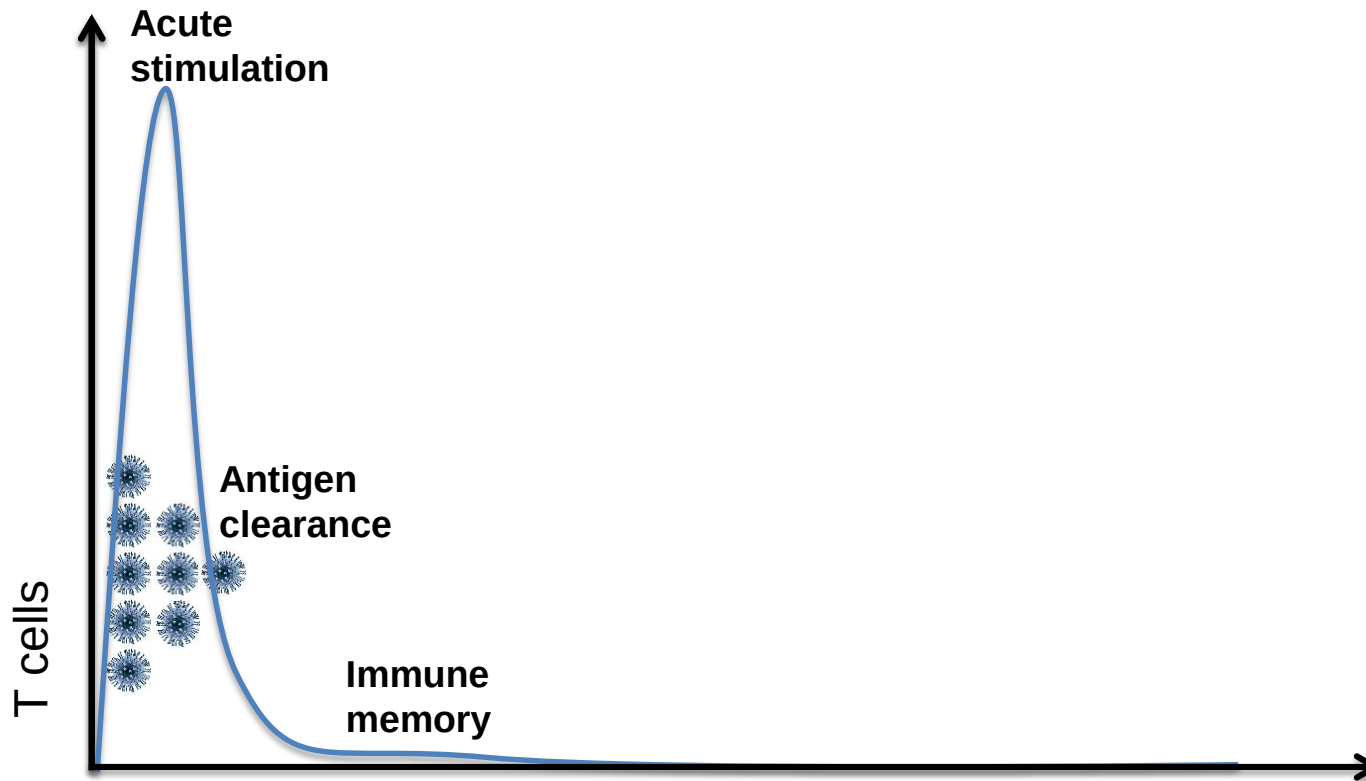
Embryonic antigens
(MAGE3, NY-ESO1, PRAME....)

Unique mutated antigens or
NEO-ANTIGENS
(non-synonymous mutations
due to genetic instability)

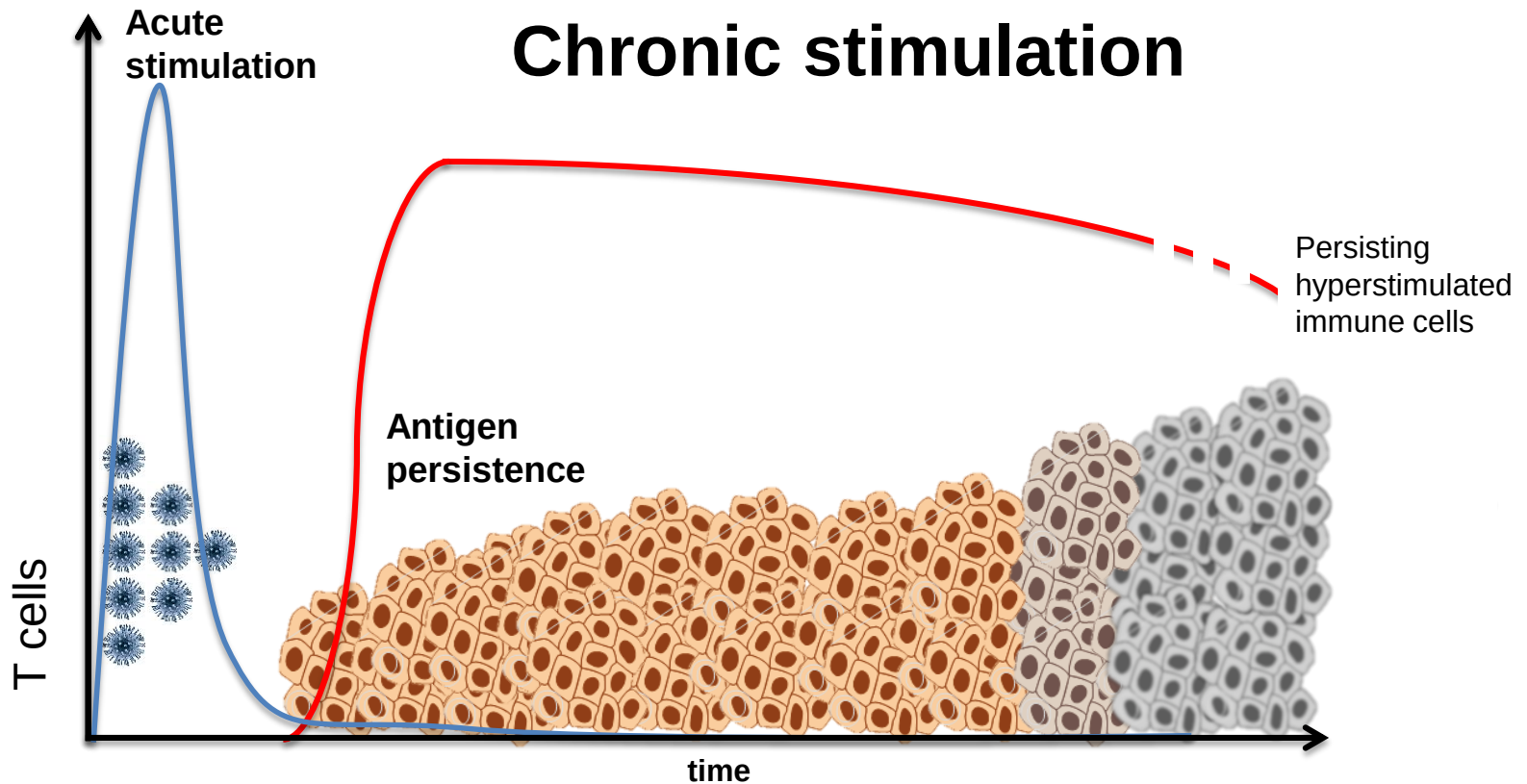
Chronic tumor-mediated immune hyperstimulation: the Tumor Immunity Cycle



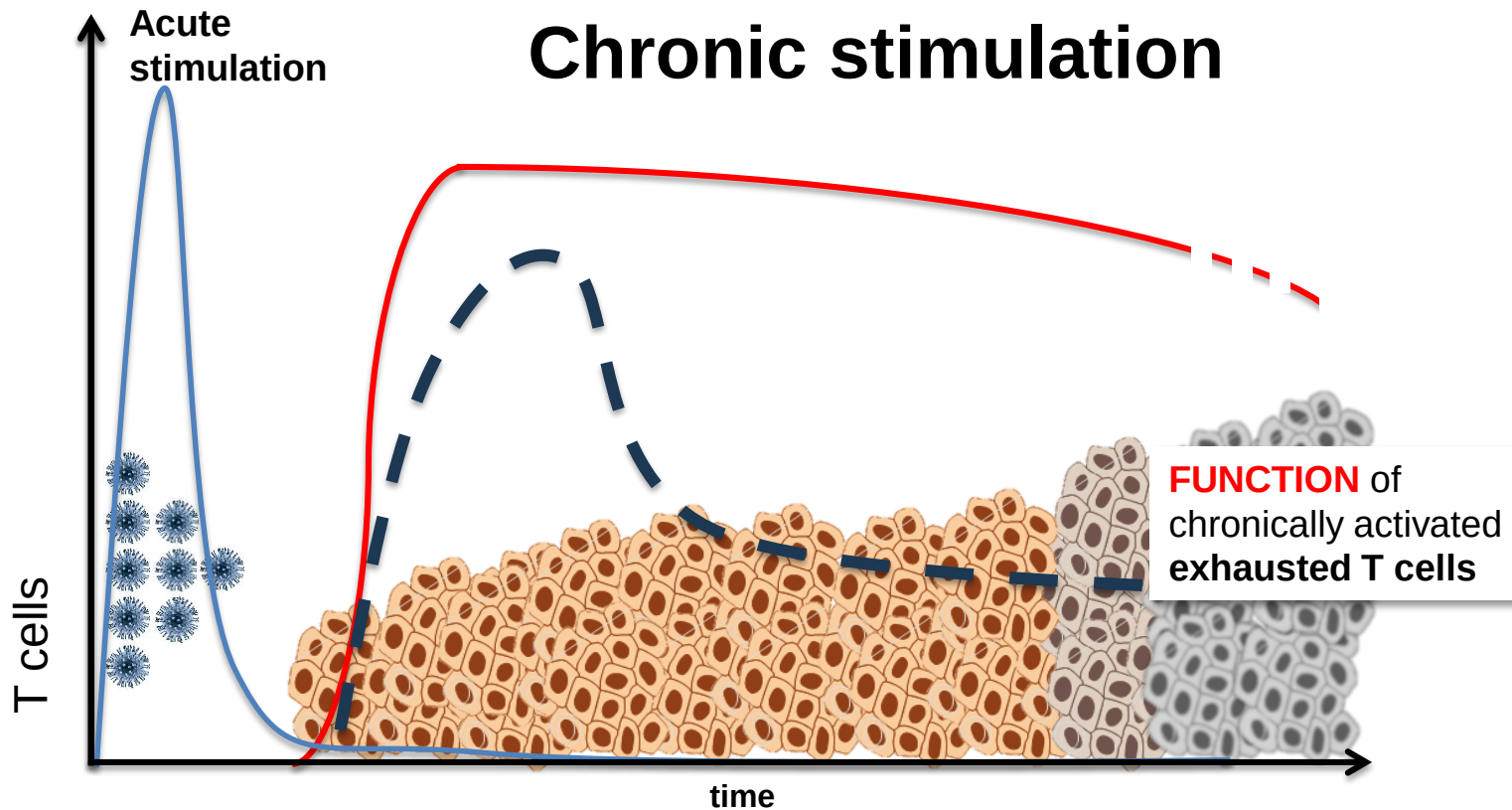
In cancer, like in chronic infections, antigen persistency leads to T cell exhaustion



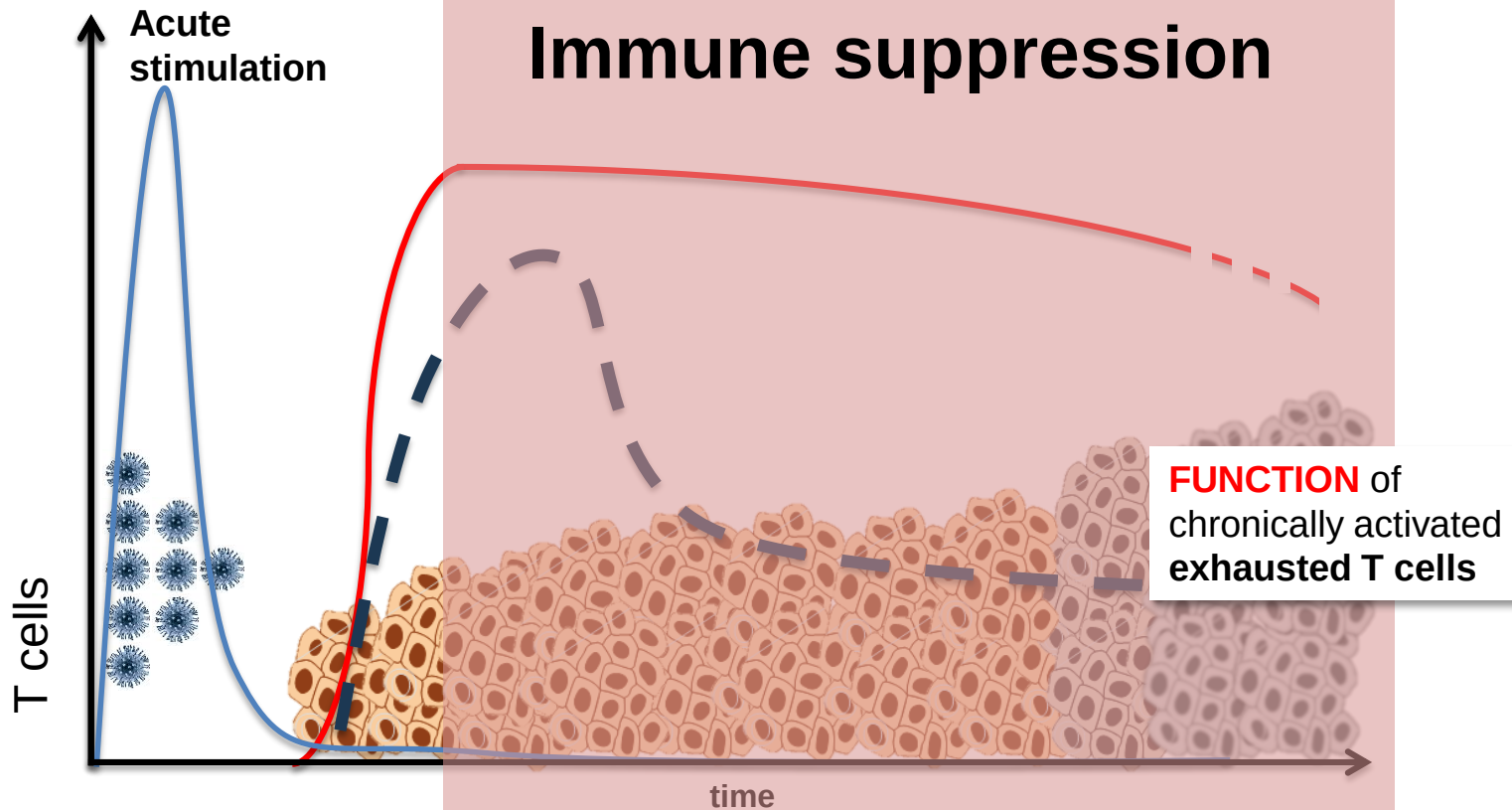
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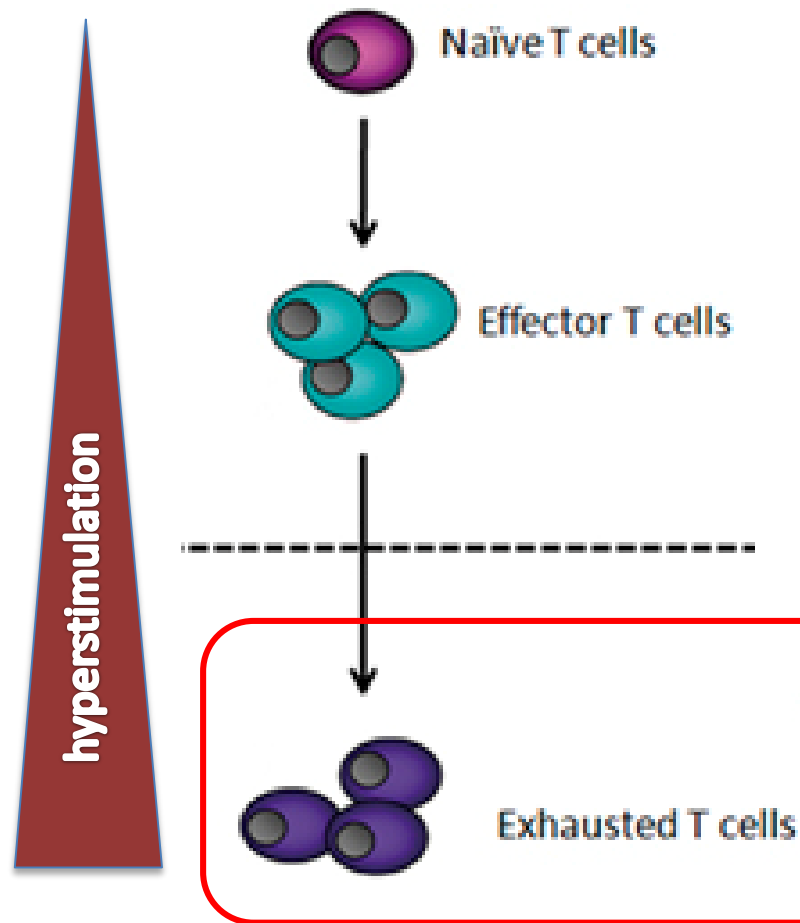
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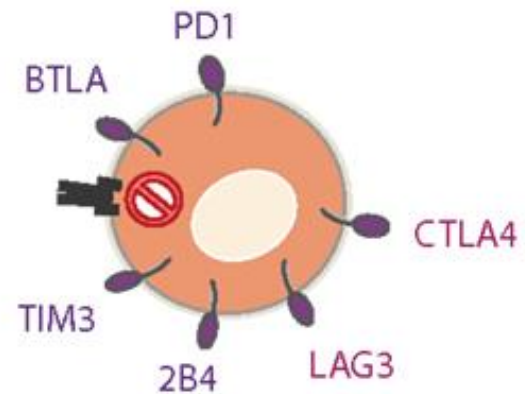
In cancer, like in chronic infections, antigen persistency leads to T cell exhaustion



Chronic antigen stimulation induces T cell exhaustion

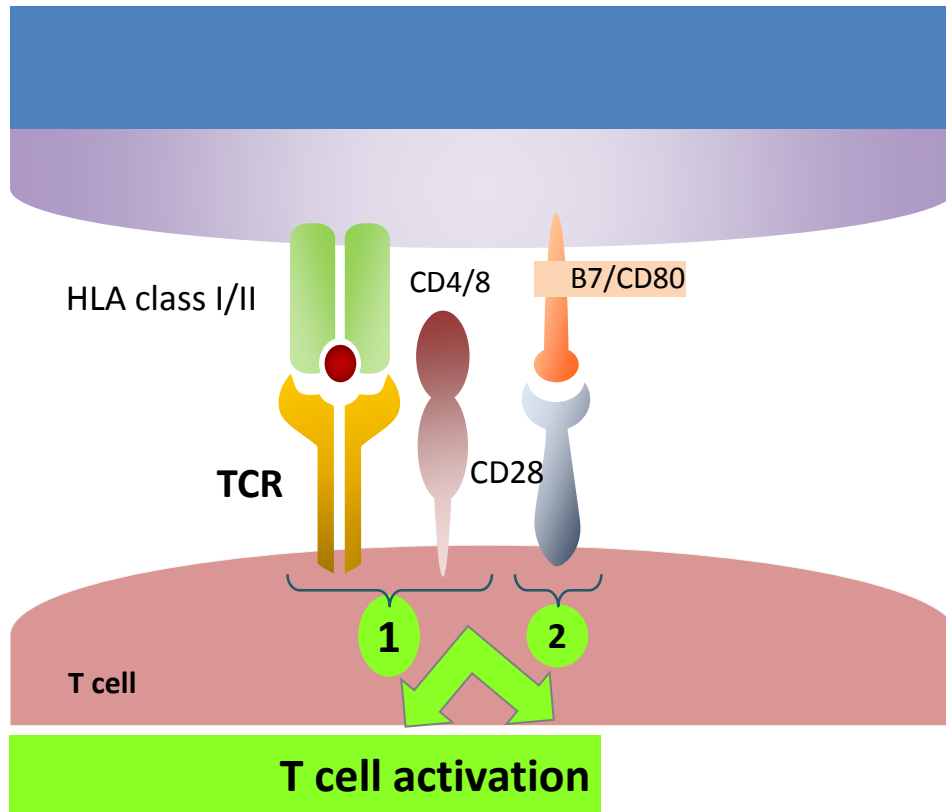


"Exhausted"
(chronic infection & cancer)

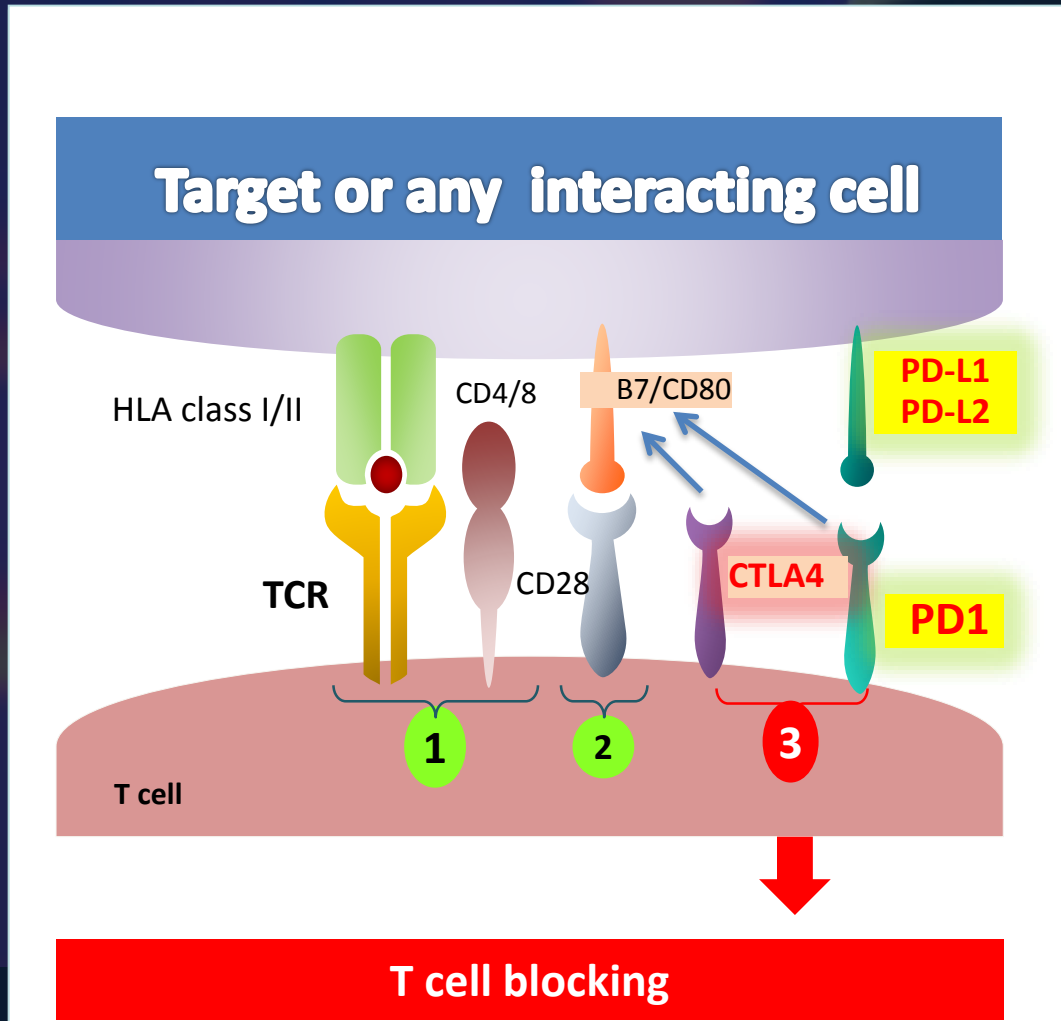


**Progressive up-regulation
of inhibitory receptors
(immune checkpoint)**

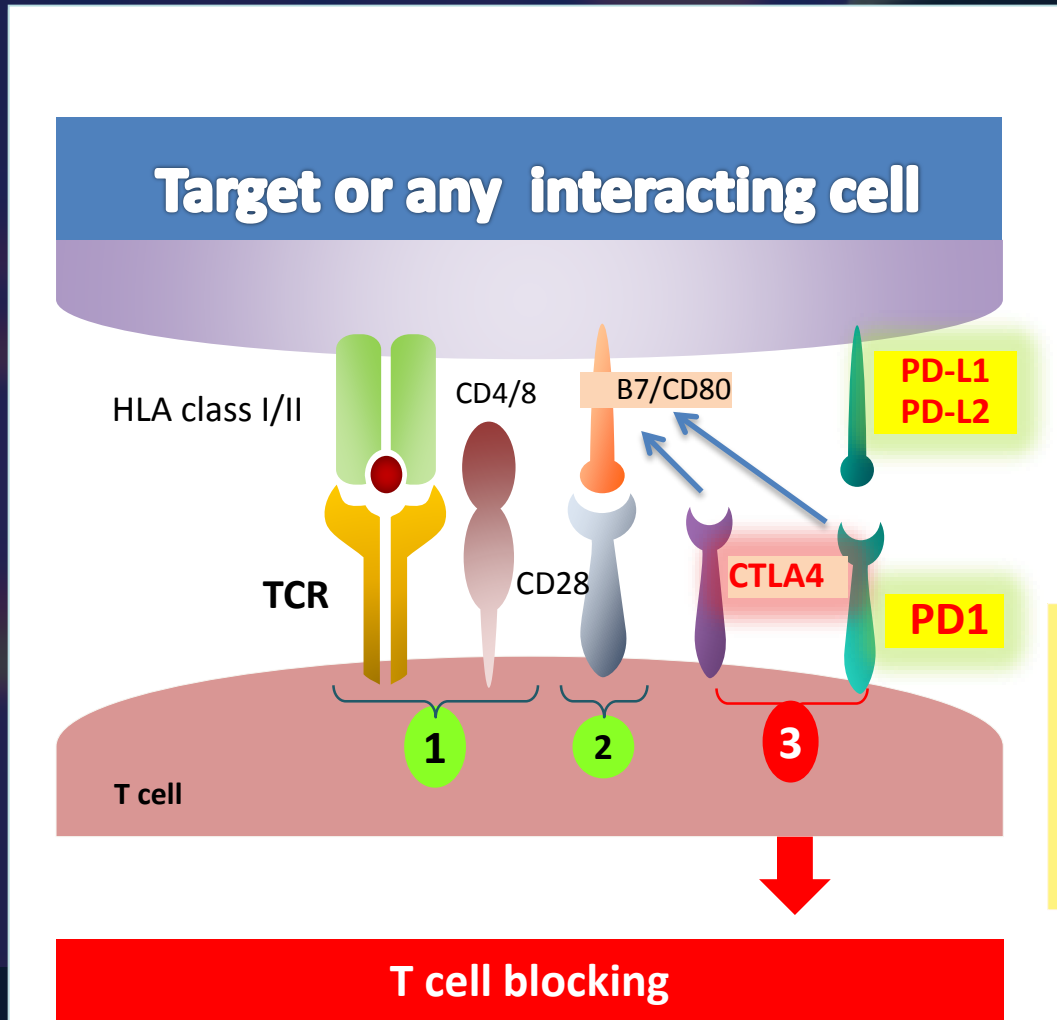
T cell activation induces the expression of immune checkpoints



T cell activation induces the expression of immune checkpoints



T cell activation induces the expression of immune checkpoints



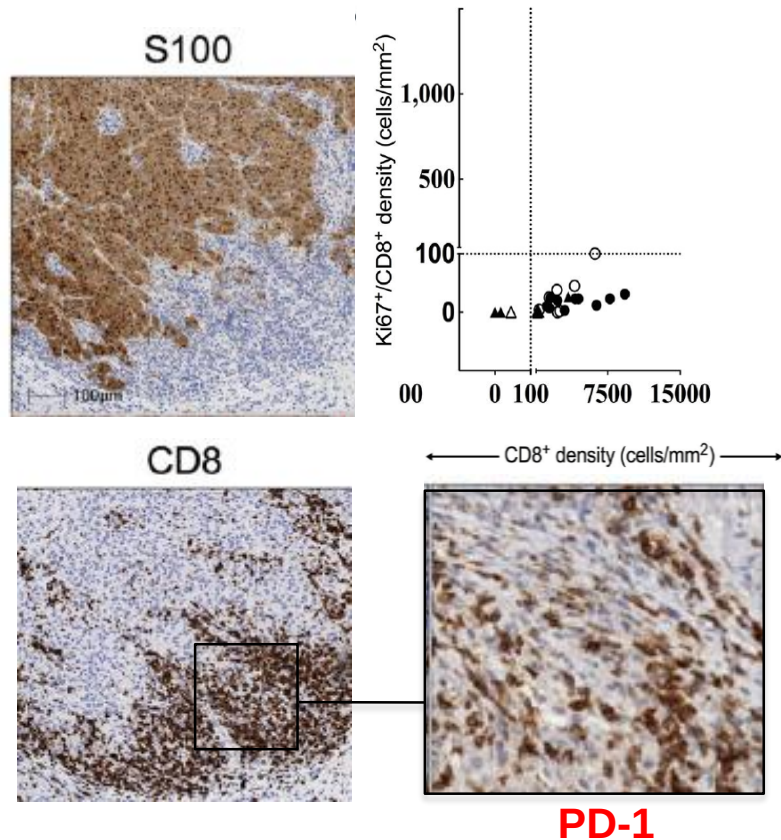
Immune checkpoints

- Stop of proliferation
- Reduced glucose consumption
- Inhibition of cytotoxicity and cytokine release
- Blocking of antibody production

In a reversible fashion

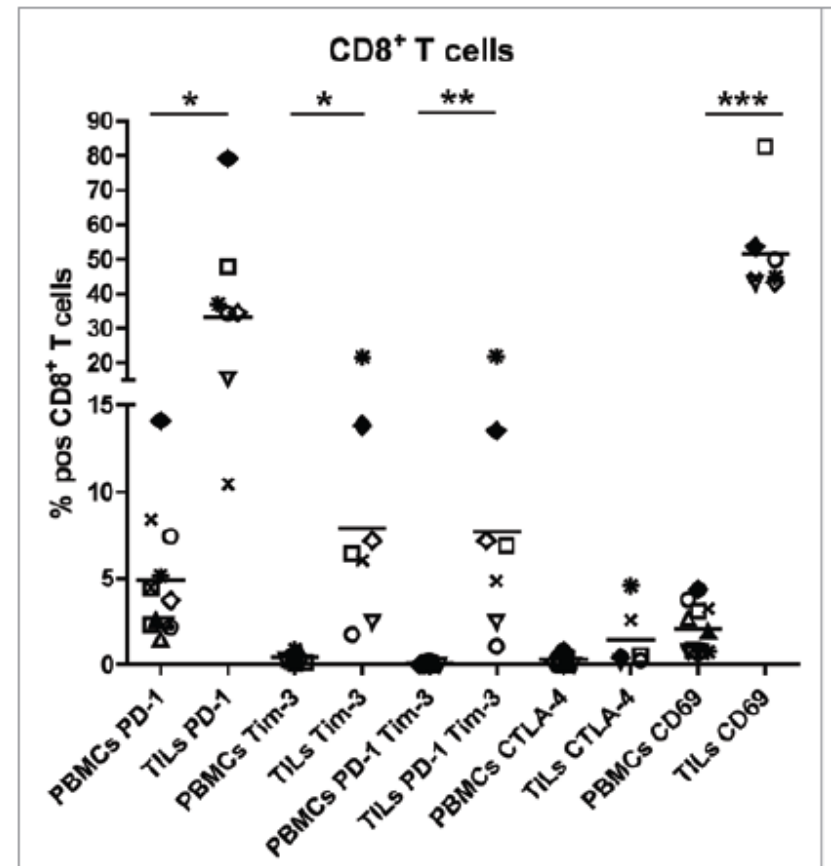
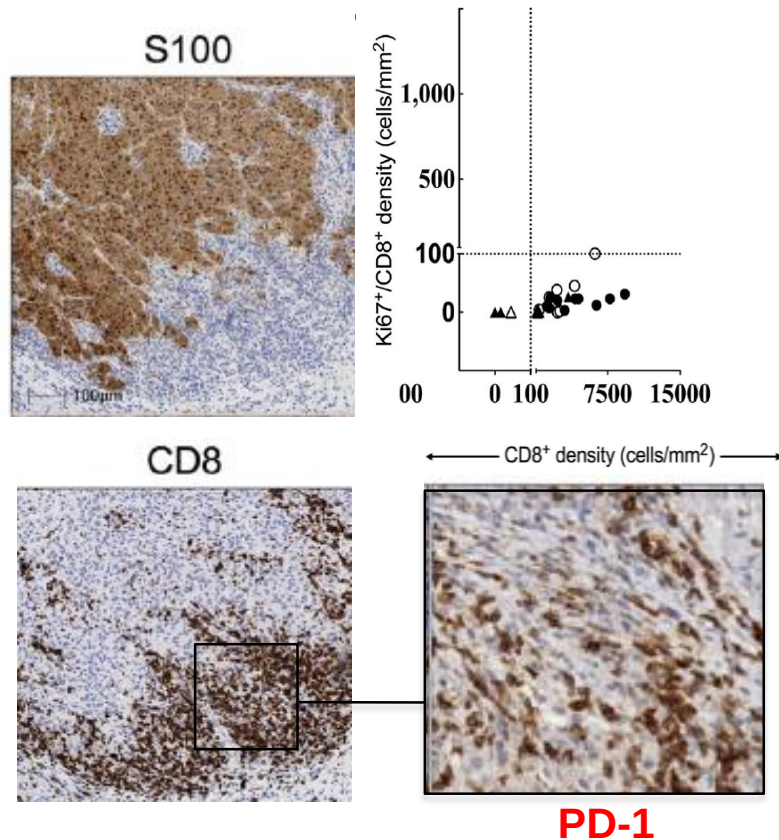
Immune checkpoint are upregulated in all antitumor effector cells (T cell, NK cells, B cells)

Immune checkpoints are upregulated in tumor infiltrating T cells



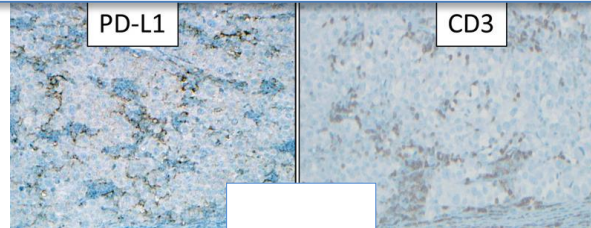
Tumeh et al., Nature 2014

Immune checkpoints are upregulated in tumor infiltrating T cells



Checkpoint ligands are highly upregulated in tumor microenvironment

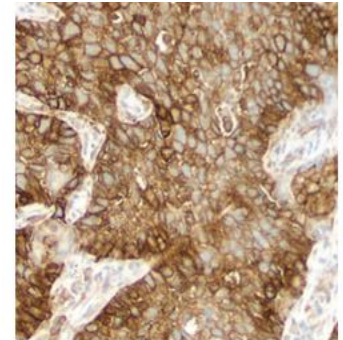
ADAPTIVE IMMUNE
RESPONSE
(activated CD8+ T cells)



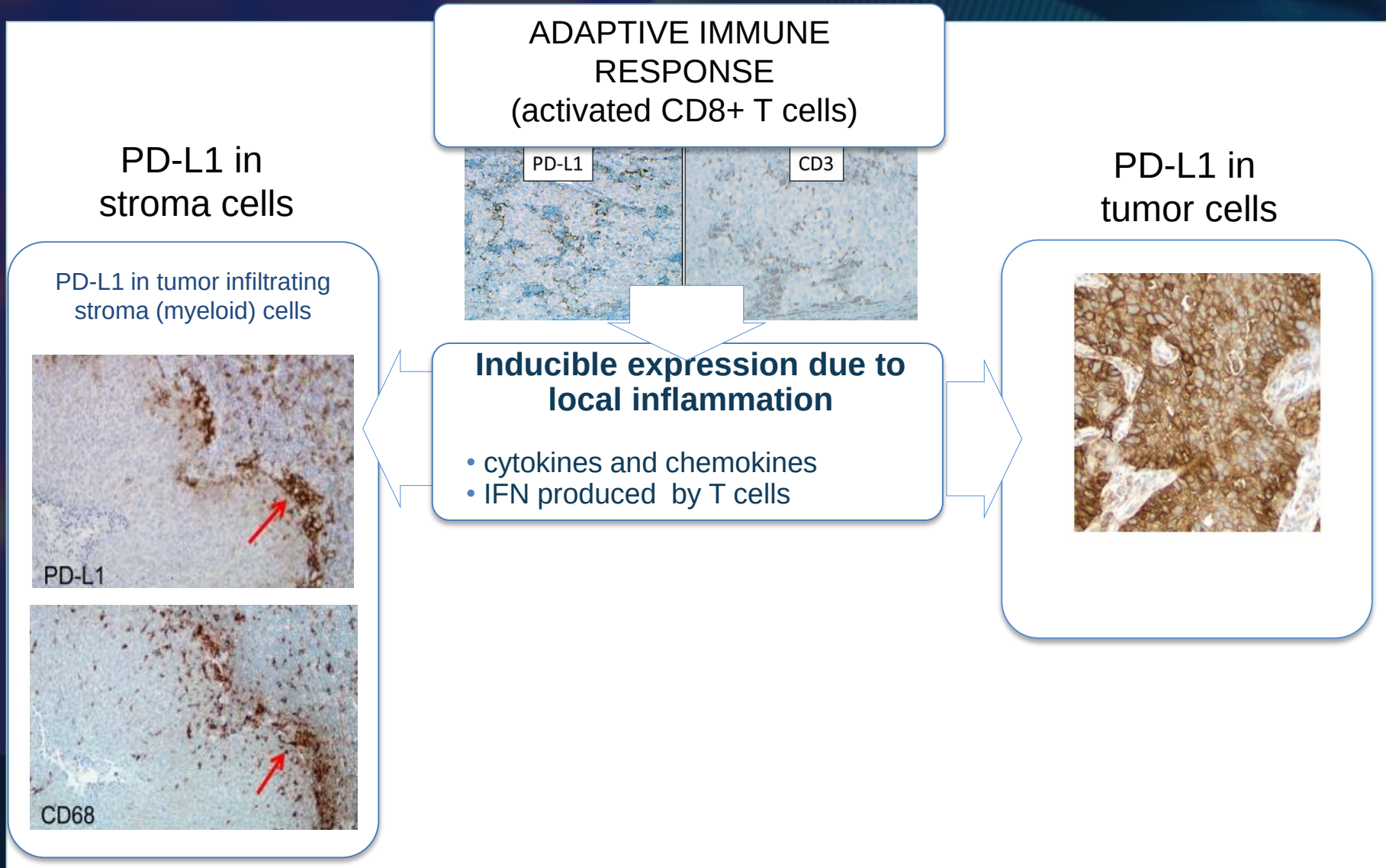
**Inducible expression due to
local inflammation**

- cytokines and chemokines
- IFN produced by T cells

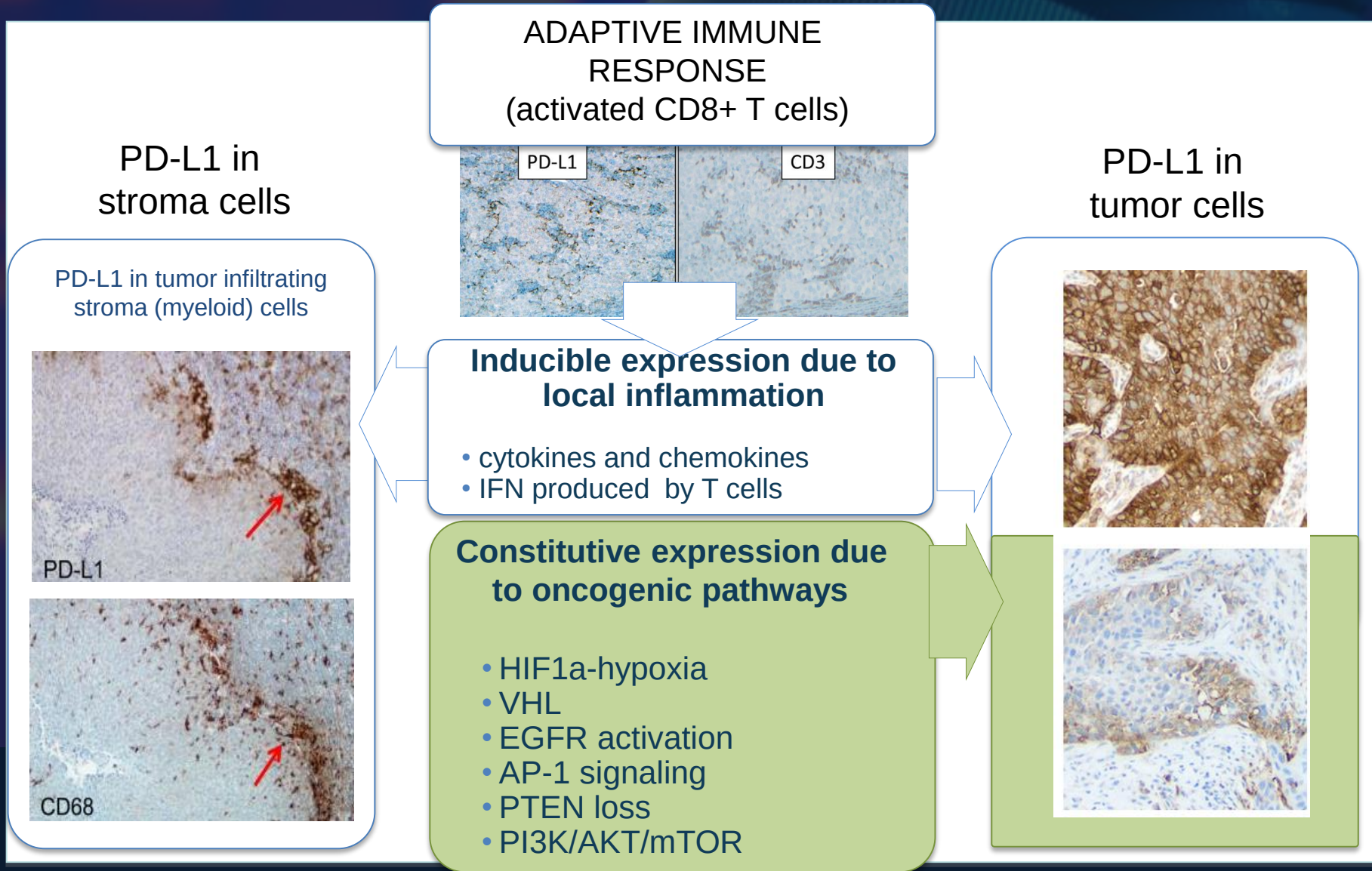
PD-L1 in
tumor cells



Checkpoint ligands are highly upregulated in tumor microenvironment



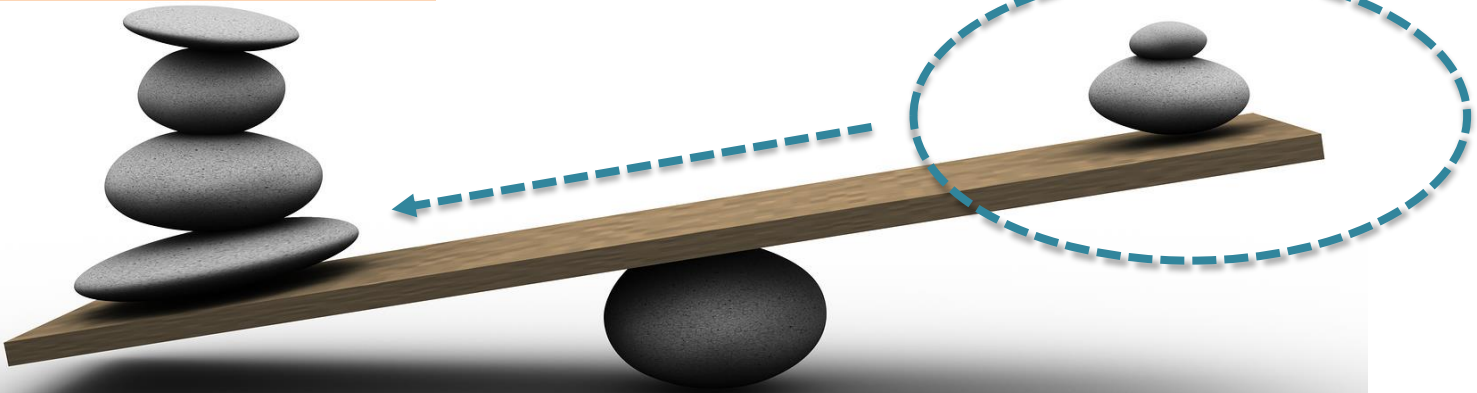
Checkpoint ligands are highly upregulated in tumor microenvironment



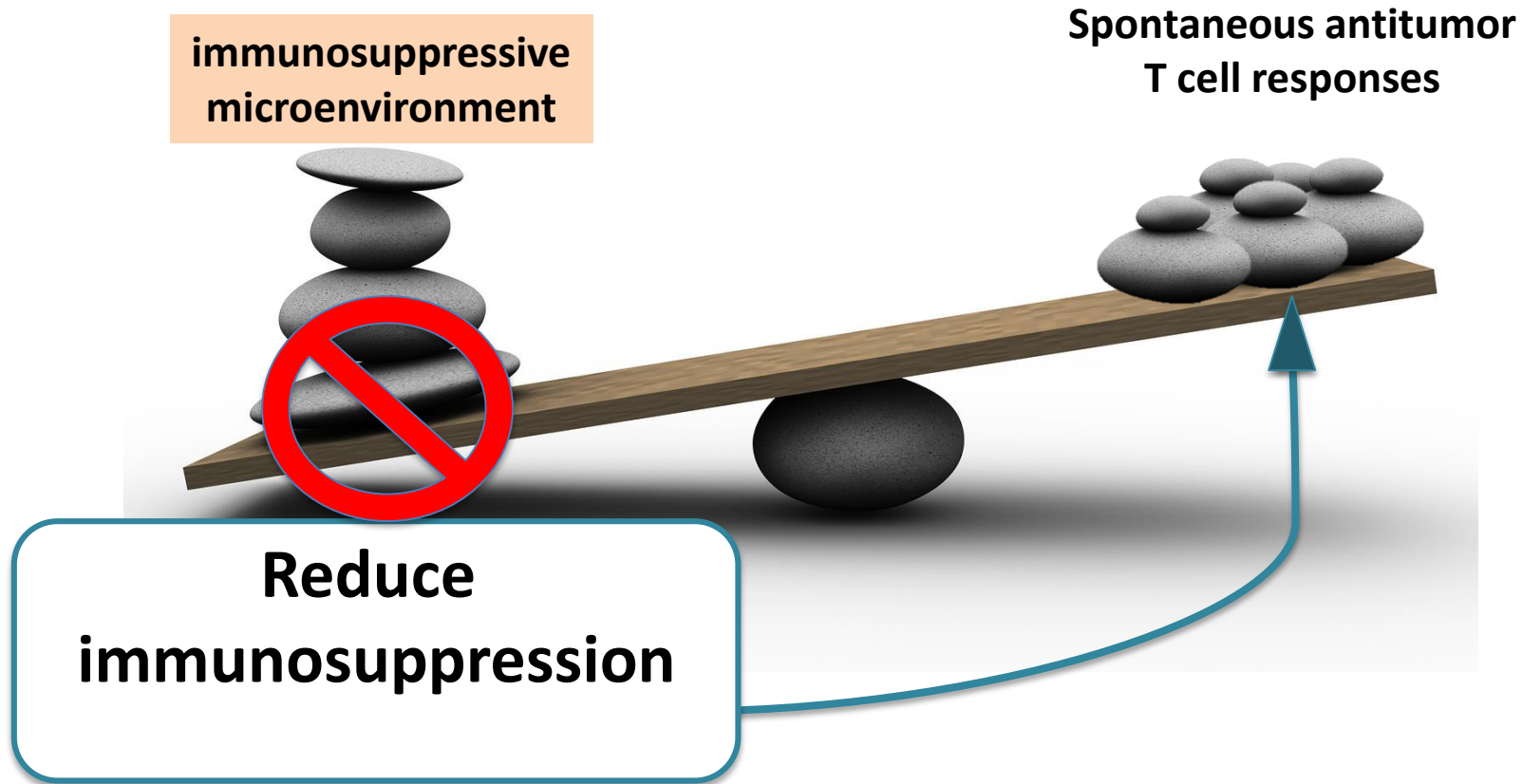
Strategies to boost anti-tumor immunity

immunosuppressive
microenvironment

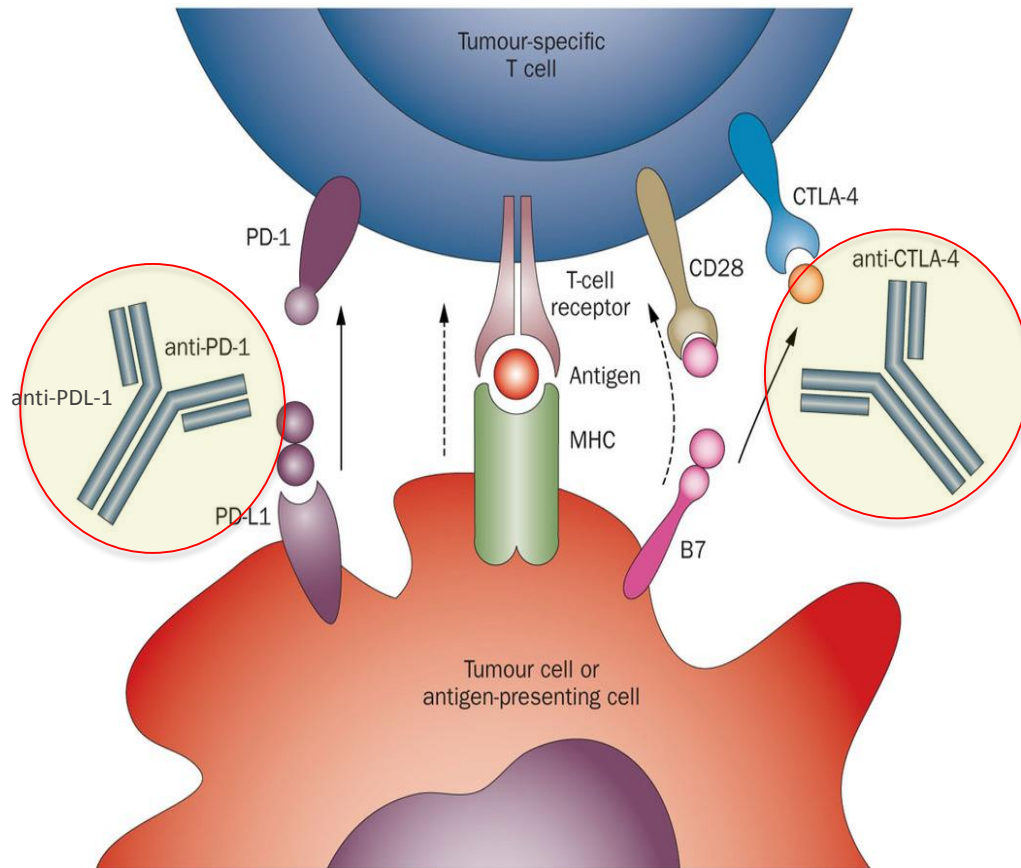
Spontaneous antitumor
T cell responses



Strategies to boost anti-tumor immunity

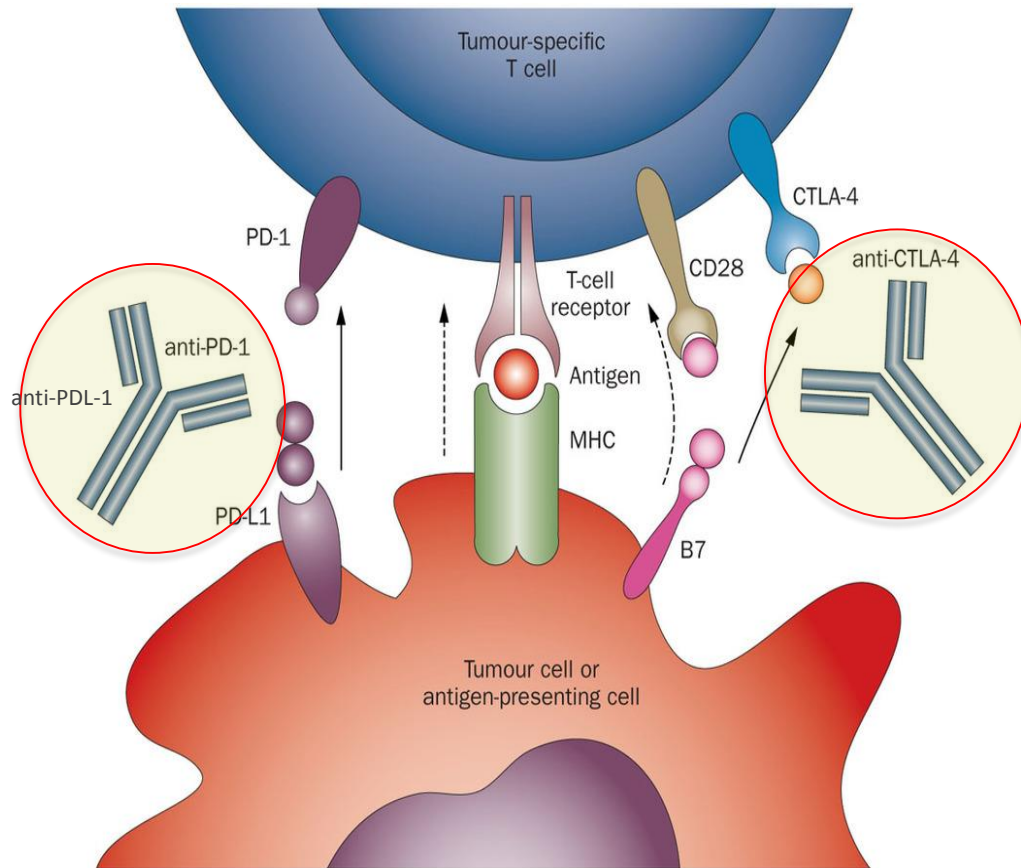


The effect of Immune checkpoints inhibitors

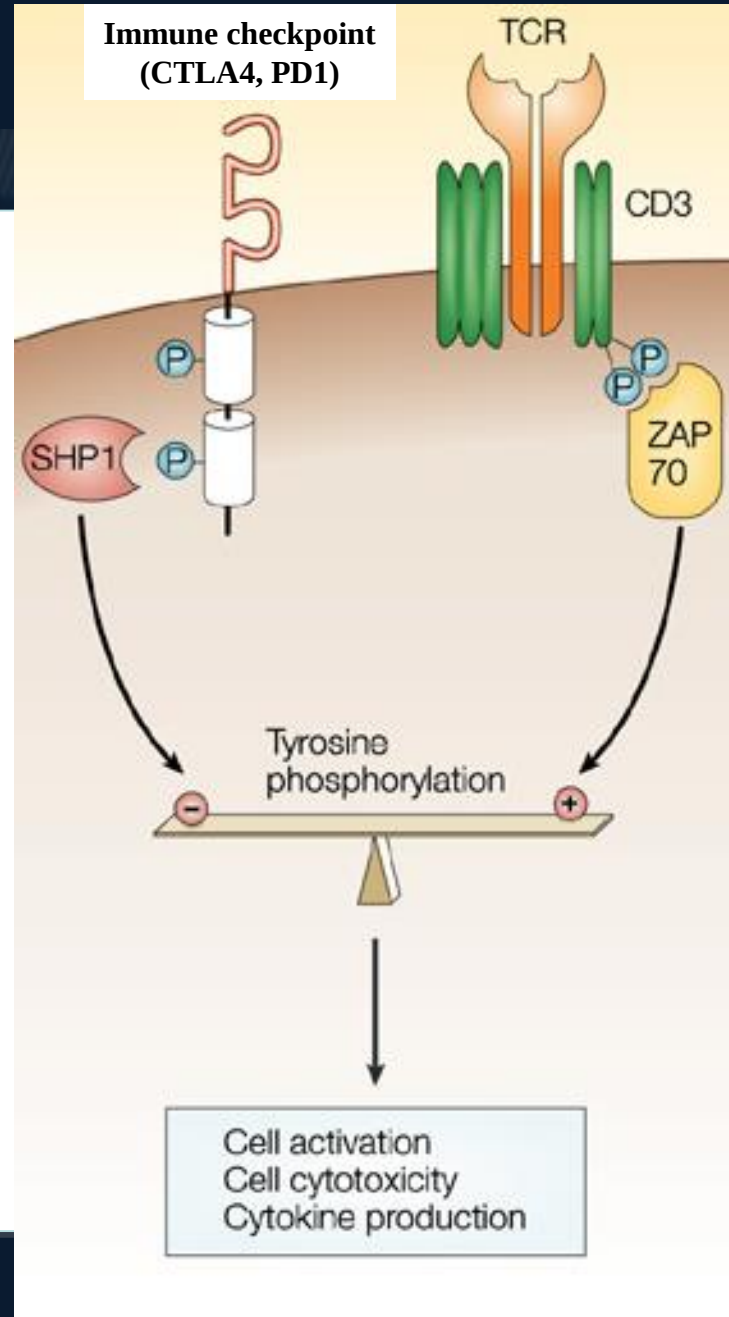


Nguyen et al., Nature Rev Immunol 2015

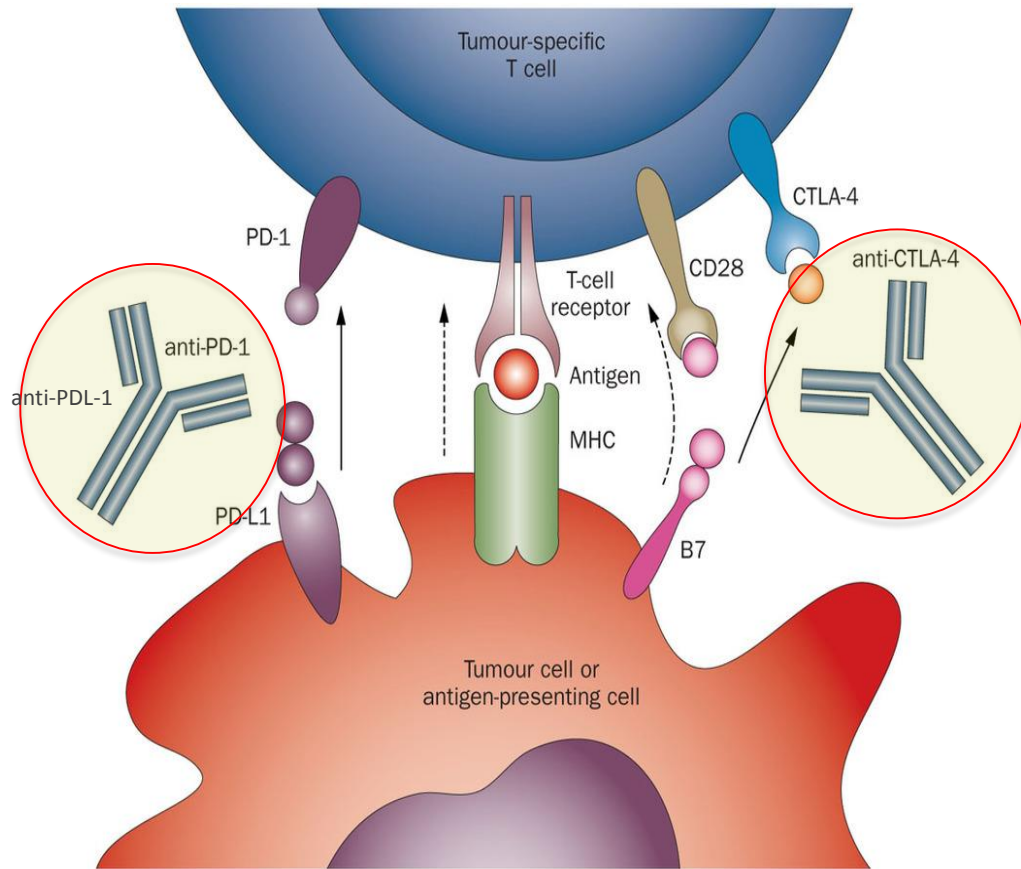
The effect of Immune checkpoints inhibitors



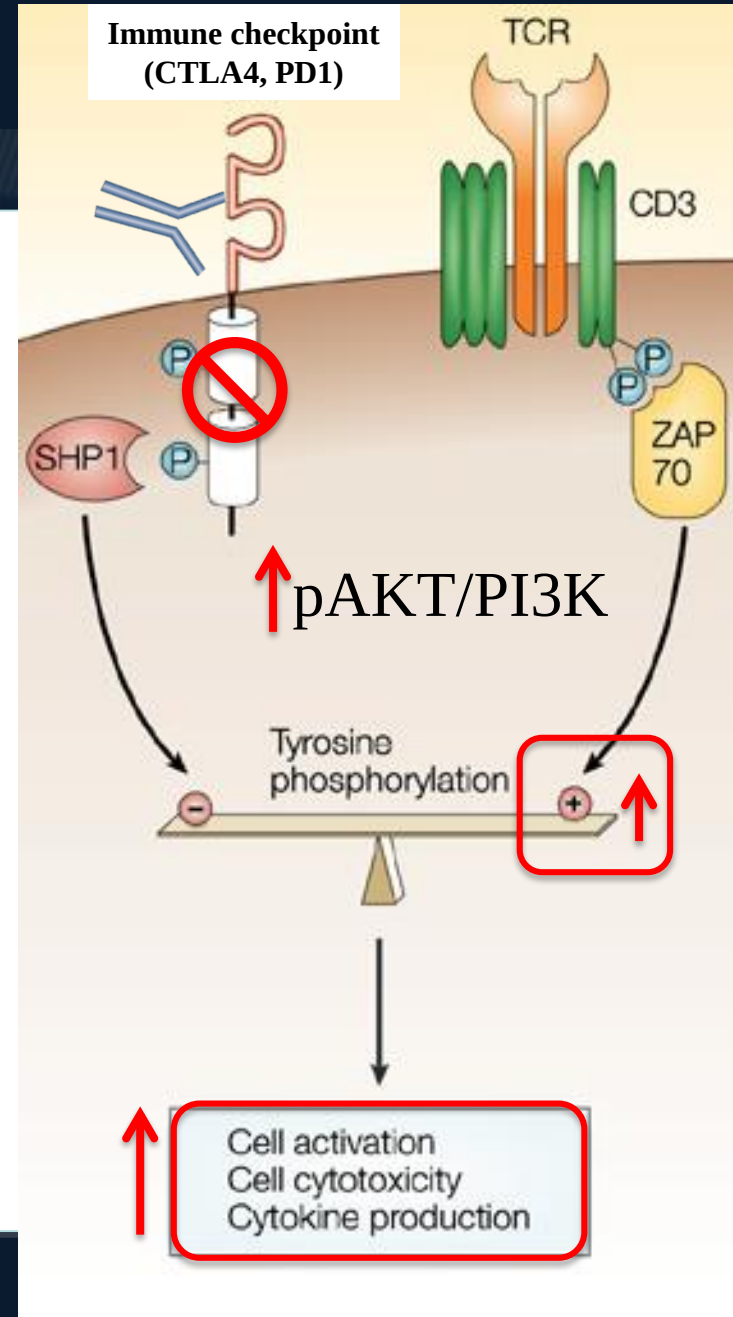
Nguyen et al., Nature Rev Immunol 2015



The effect of Immune checkpoints inhibitors



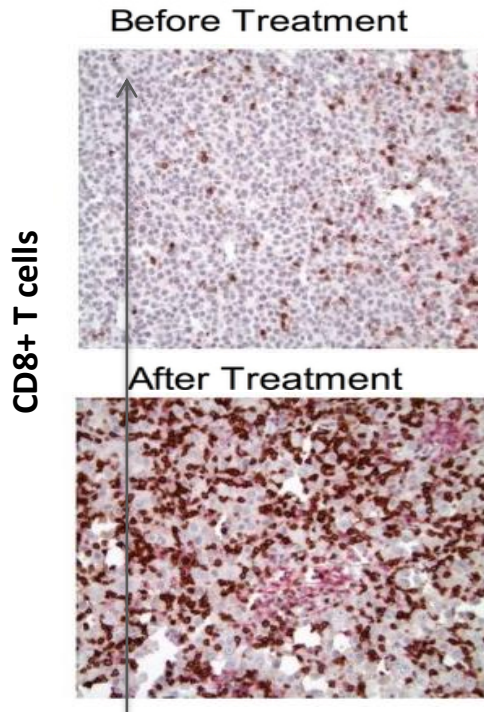
Nguyen et al., Nature Rev Immunol 2015



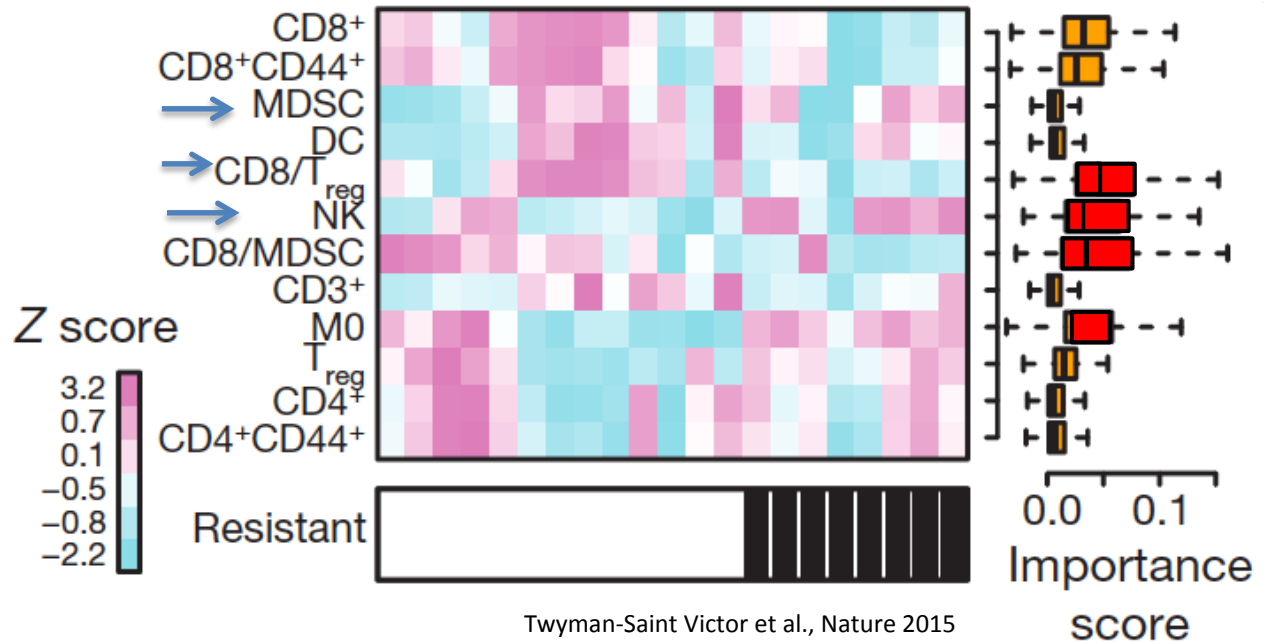
Immune checkpoint inhibitors rescue T cell activation and reduce immunosuppression

PD-1 blockade in melanoma

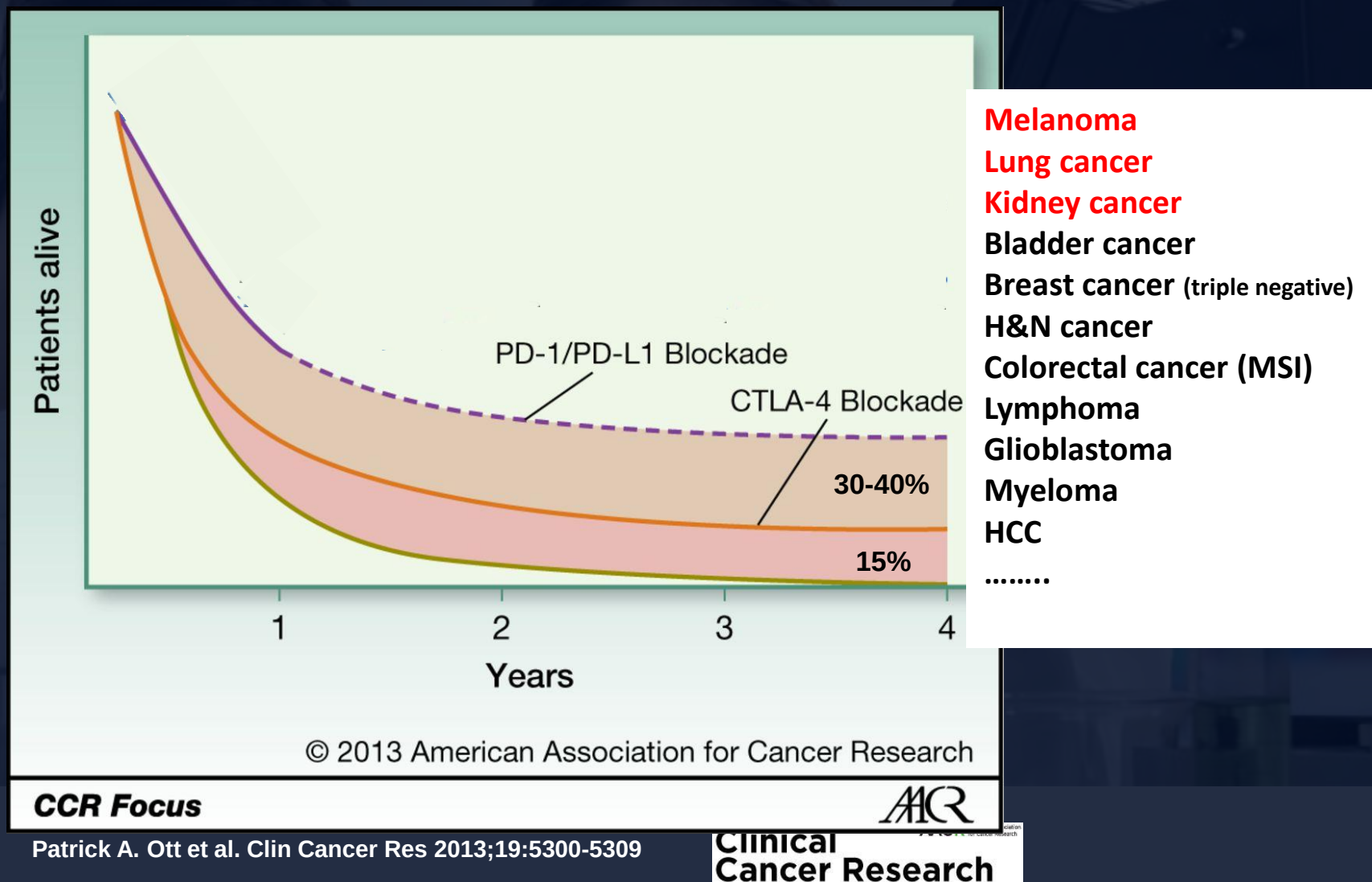
CTLA4 blockade in melanoma



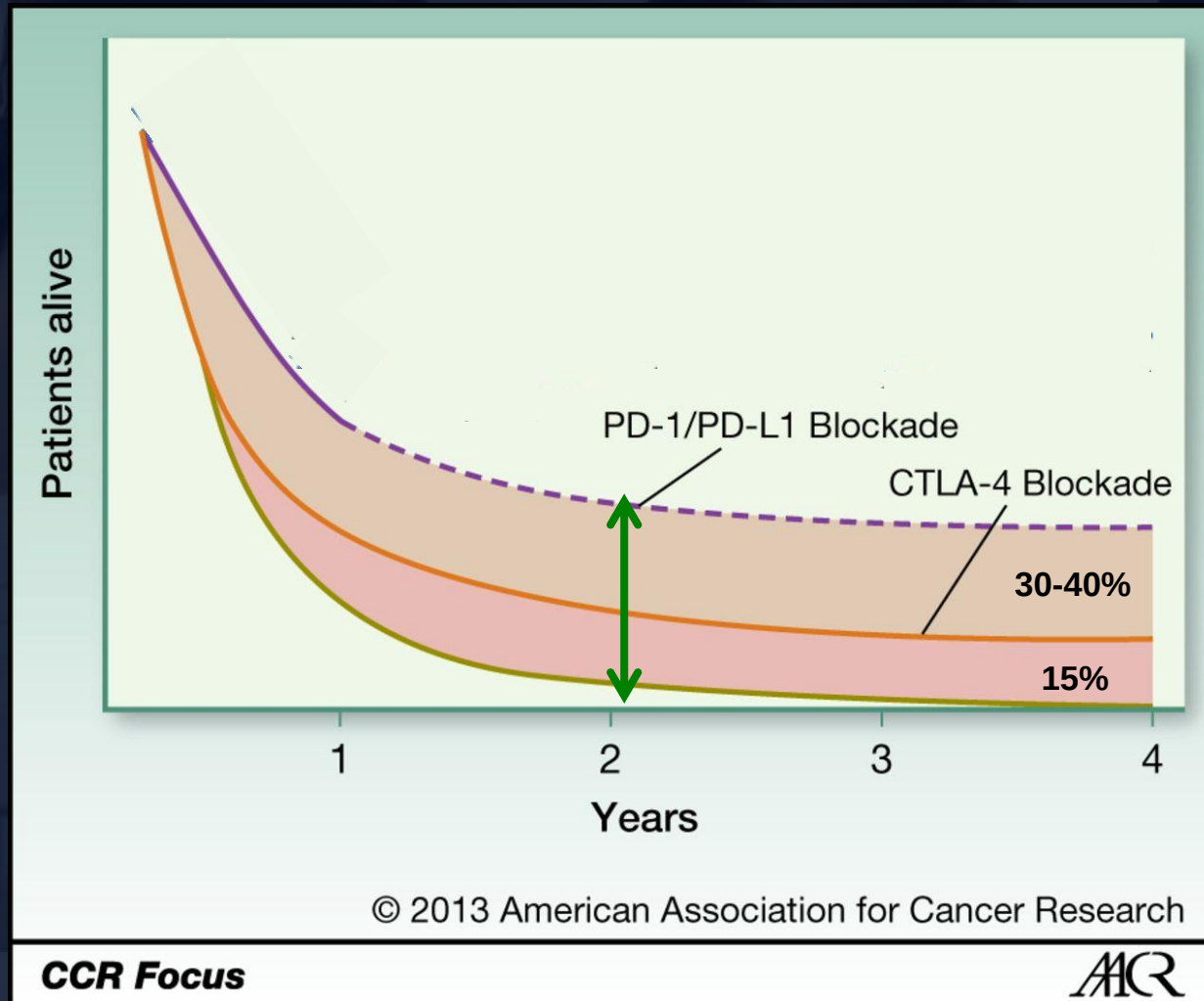
Tumeh et al, Nature 2014



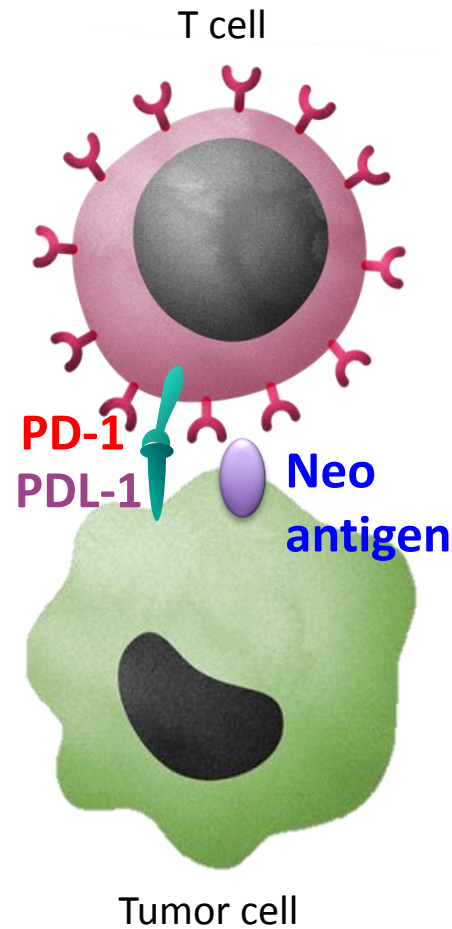
Immune checkpoint inhibitors improve overall survival of cancer patients (immune memory)



Predictive factors of response?



Multifactorial biomarkers of clinical response to PD-1 blockade

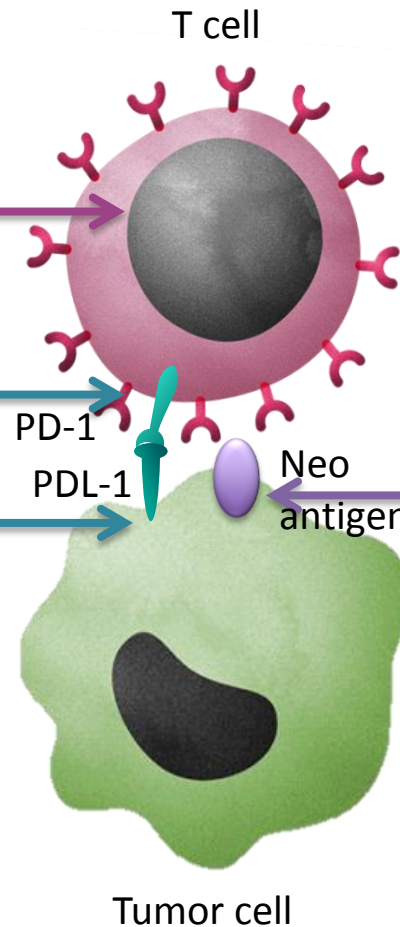


“Immunogenic” tumors are more likely to respond to PD-1 blockade

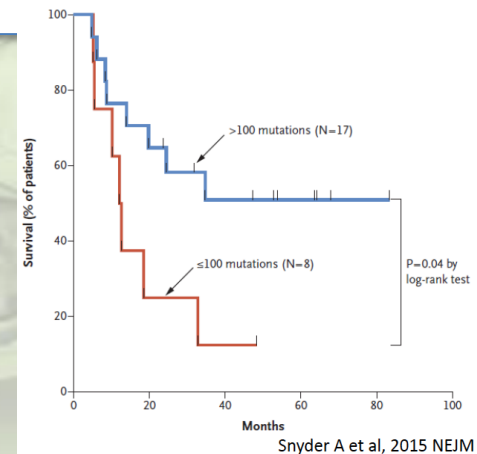
HIGH level of T cell infiltrate

HIGH level of PD-1 expression in T cells

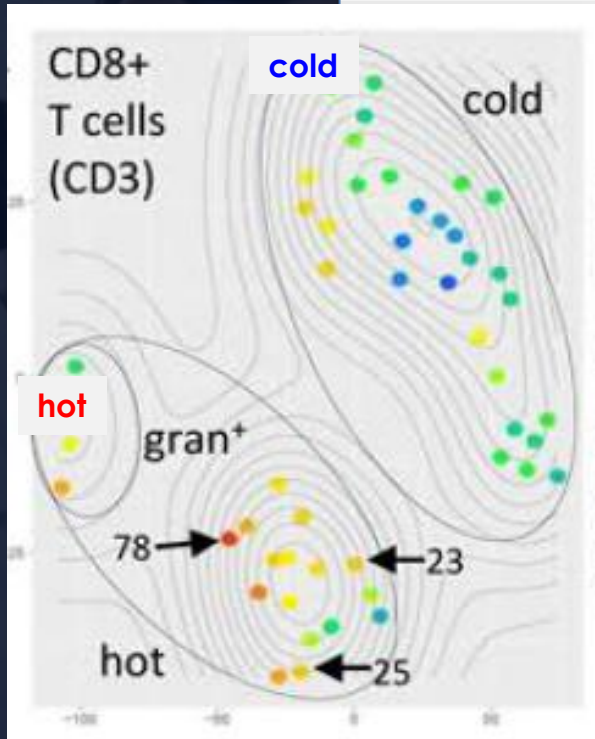
HIGH level of PD-L1 expression in tumor cells (and stroma)



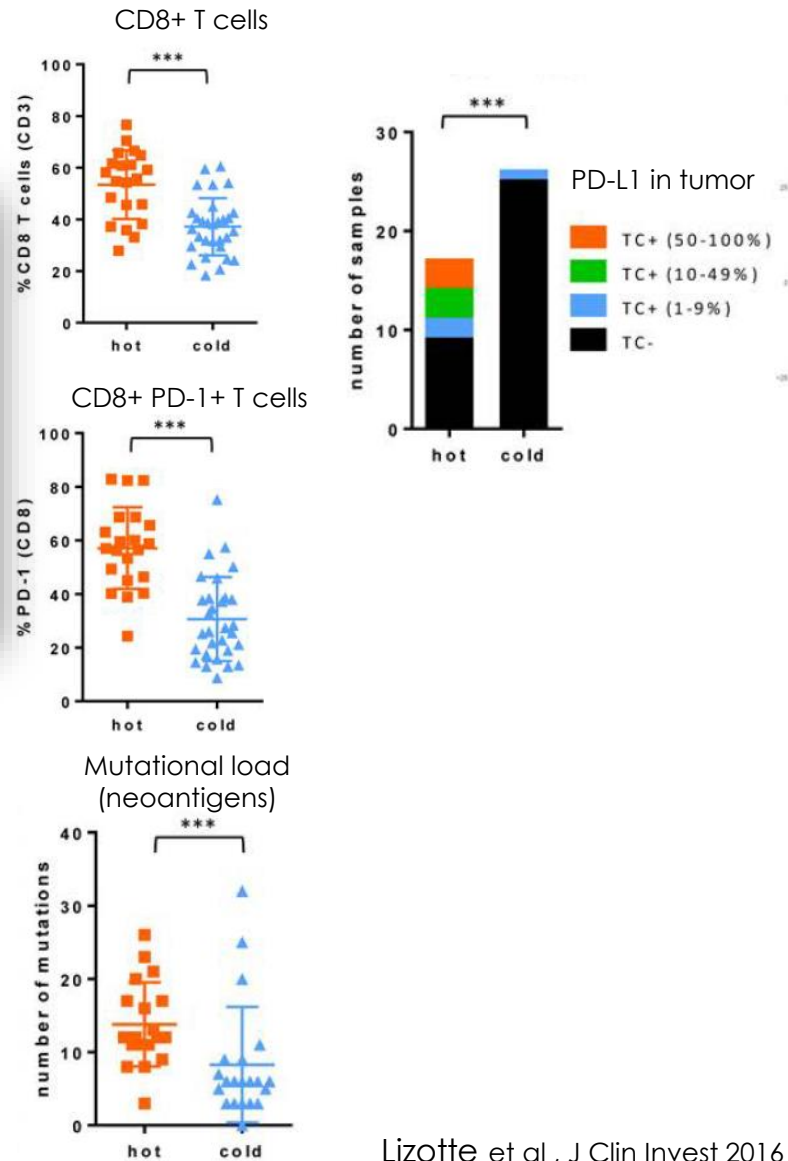
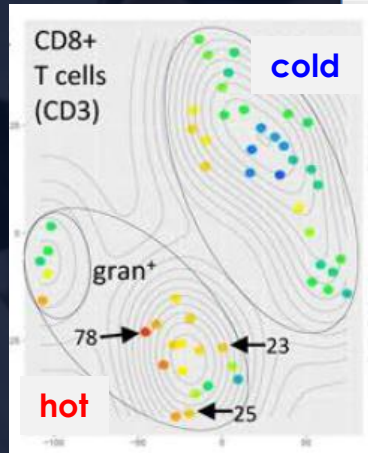
HIGH level of tumor antigens (neo-antigens)



“HOT and cold” tumors respond differently to PD-1 blockade (the example of NSCLC)

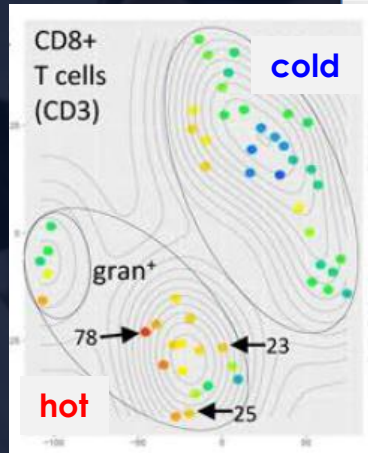


“HOT and cold” tumors respond differently to PD-1 blockade (the example of NSCLC)

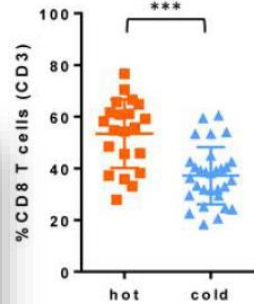


Lizotte et al, J Clin Invest 2016

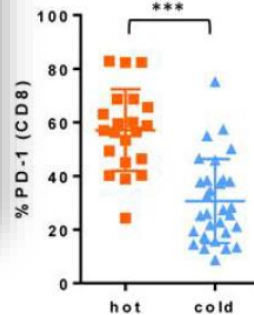
“HOT and cold” tumors respond differently to PD-1 blockade (the example of NSCLC)



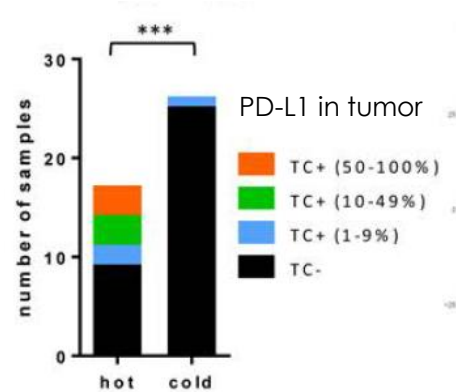
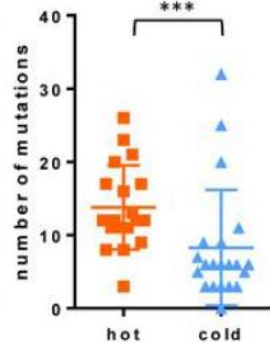
CD8+ T cells



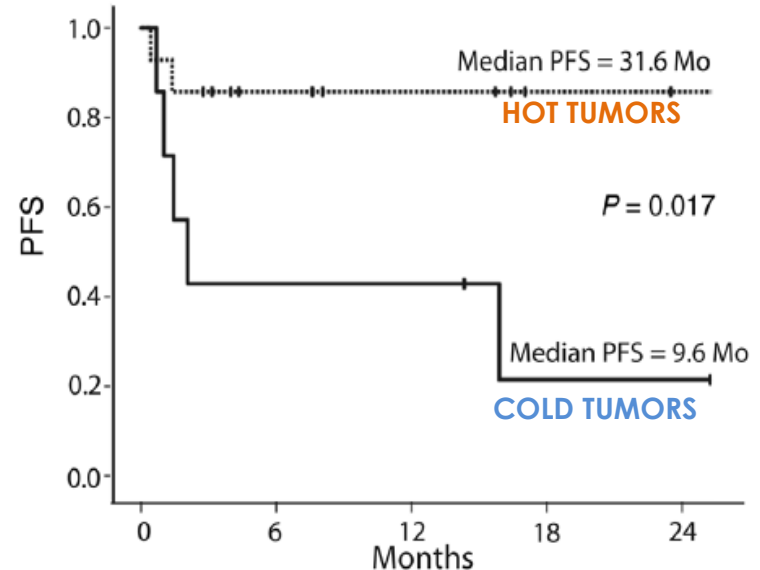
CD8+ PD-1+ T cells



Mutational load (neoantigens)



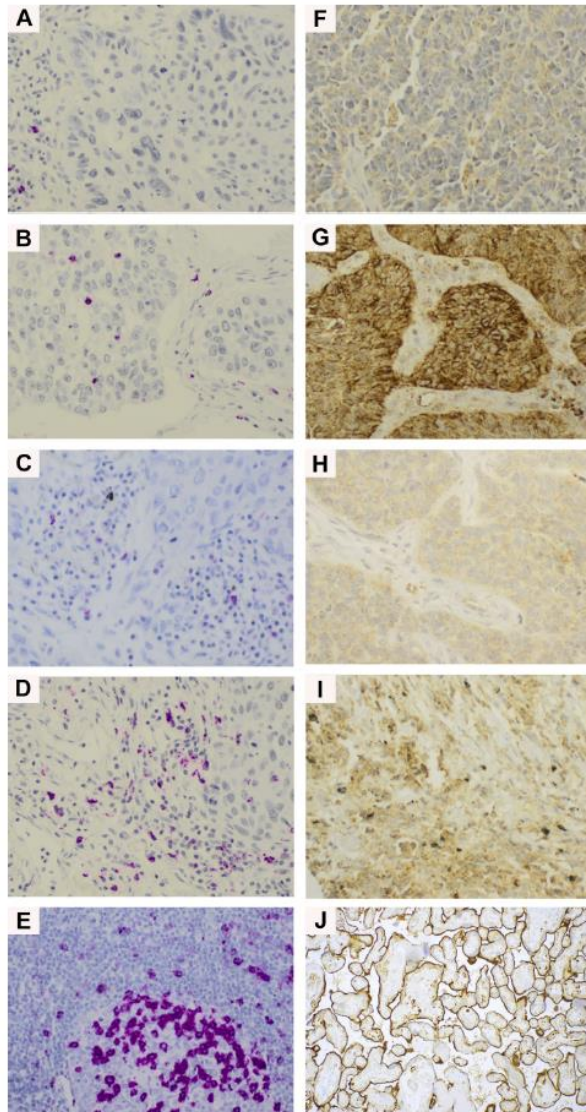
PD-1 blockade



A novel TNM- IMMUNOSCORE in NSCLC integrating PD-1 and PD-L1 expression

PD-1

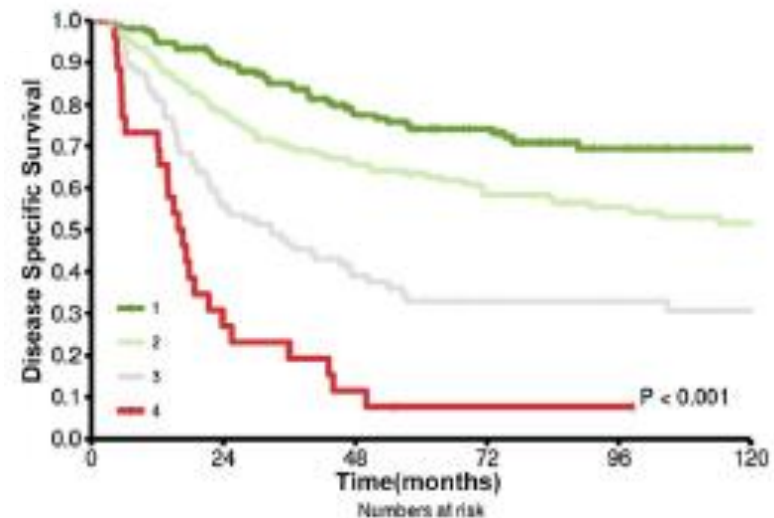
PD-L1



TNM-Immunoscore

	PD-Immunoscore	
	Low + Low	Other
Pstage I	64% (n=75)	74% (n=161)
Pstage II	34% (n=53)	63% (n=128)
Pstage IIIA	8% (n=29)	31% (n=50)

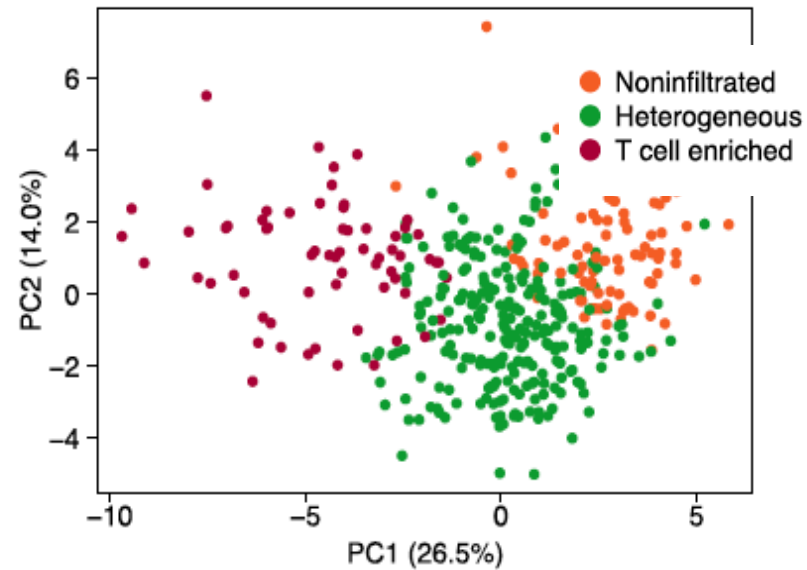
5 year survival:
1: <10%
2: 10-40%
3: 40-70%
4: >70%



N=536 NSCLC patients patients
Paulsen et al , Clin Lung Cancer 2016

T cell enriched RCC responds to Immunotherapy

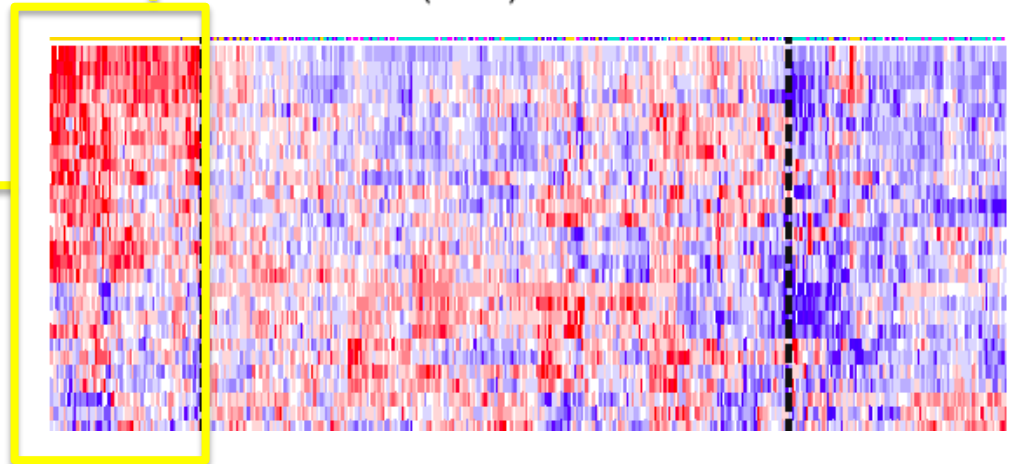
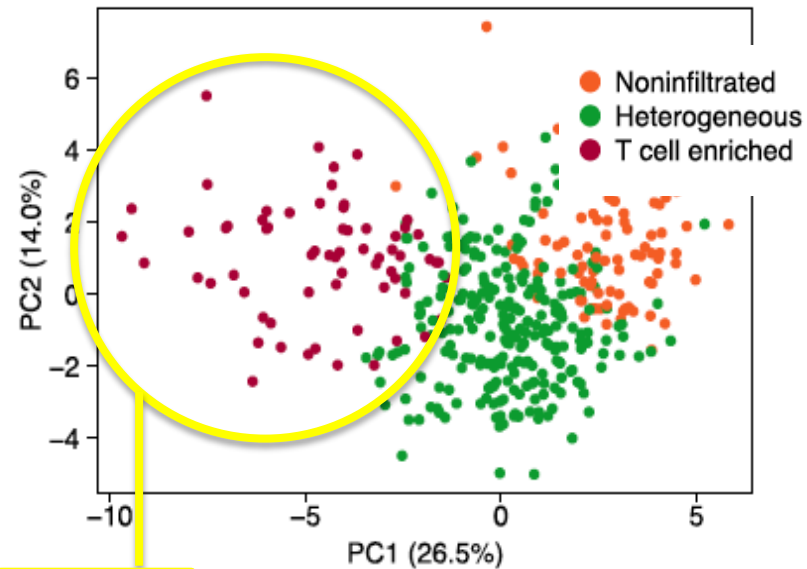
T cell enriched tumors are infiltrated by highly immunosuppressed cells independently of the tumor stage and grade



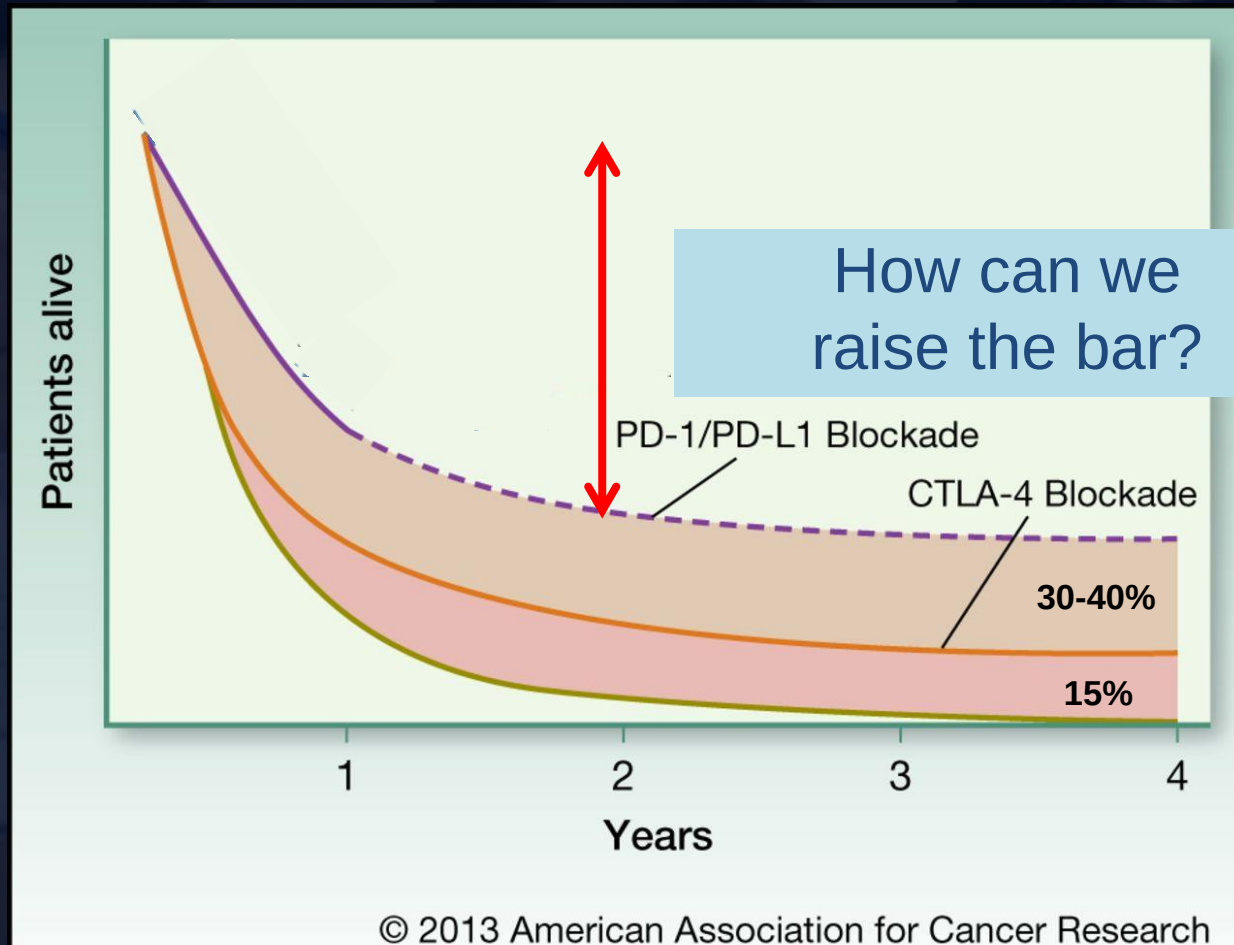
T cell enriched RCC responds to Immunotherapy

T cell enriched tumors are infiltrated by highly immunosuppressed cells independently of the tumor stage and grade

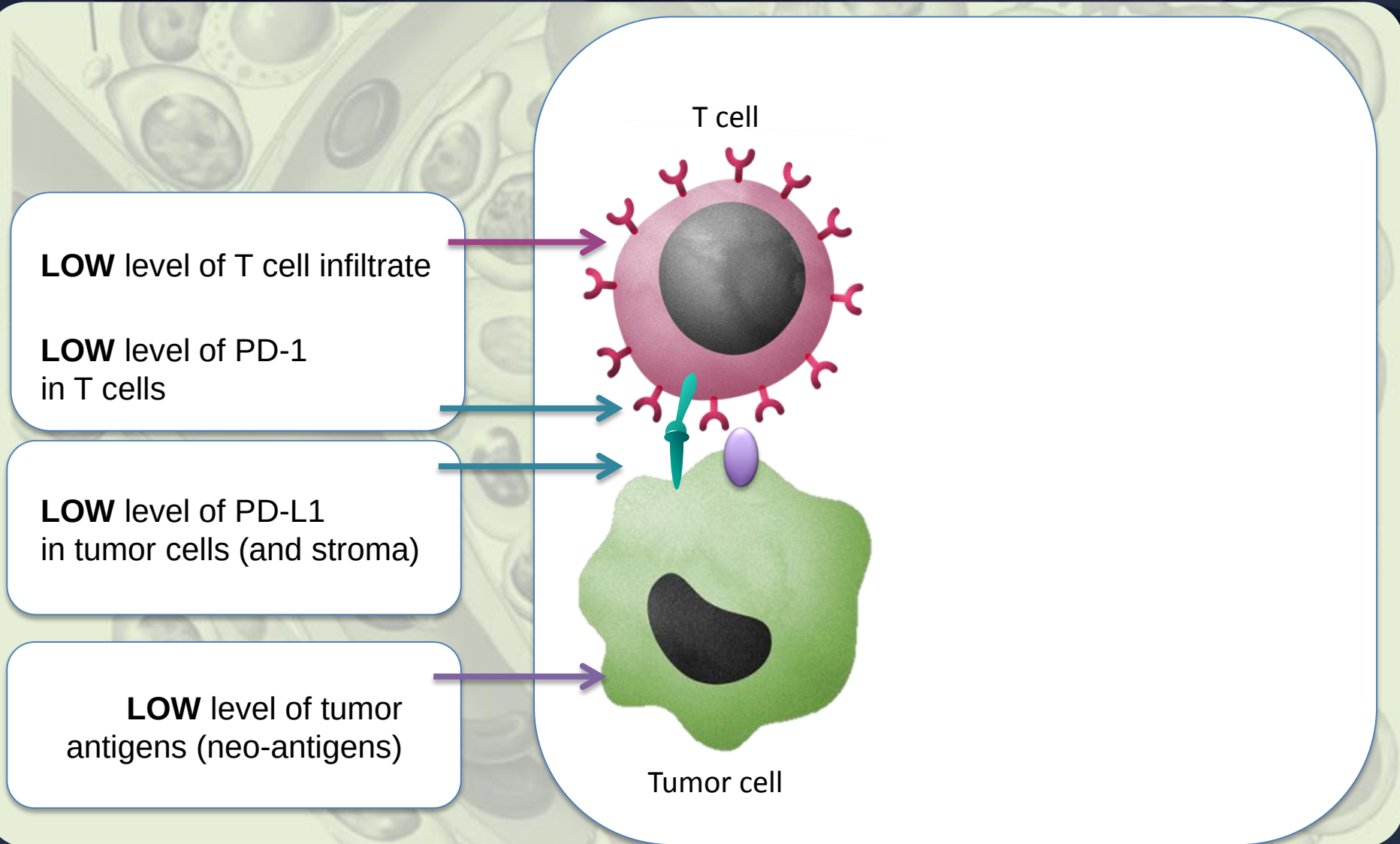
PD1
T cells
Cytotoxic cells
CD8 T cells
Th1 cells
aDC
CTLA4
Treg cells
B cells
NK CD56bright cells
Th2 cells
NK CD56dim cells
Tgd cells
PDL1
Tfh cells
T helper cells
Tcm cells
Angiogenesis
pDC
NK cells
Tem cells
iDC
Macrophages
Mast cells
DC
Th17 cells
Neutrophils
Eosinophils



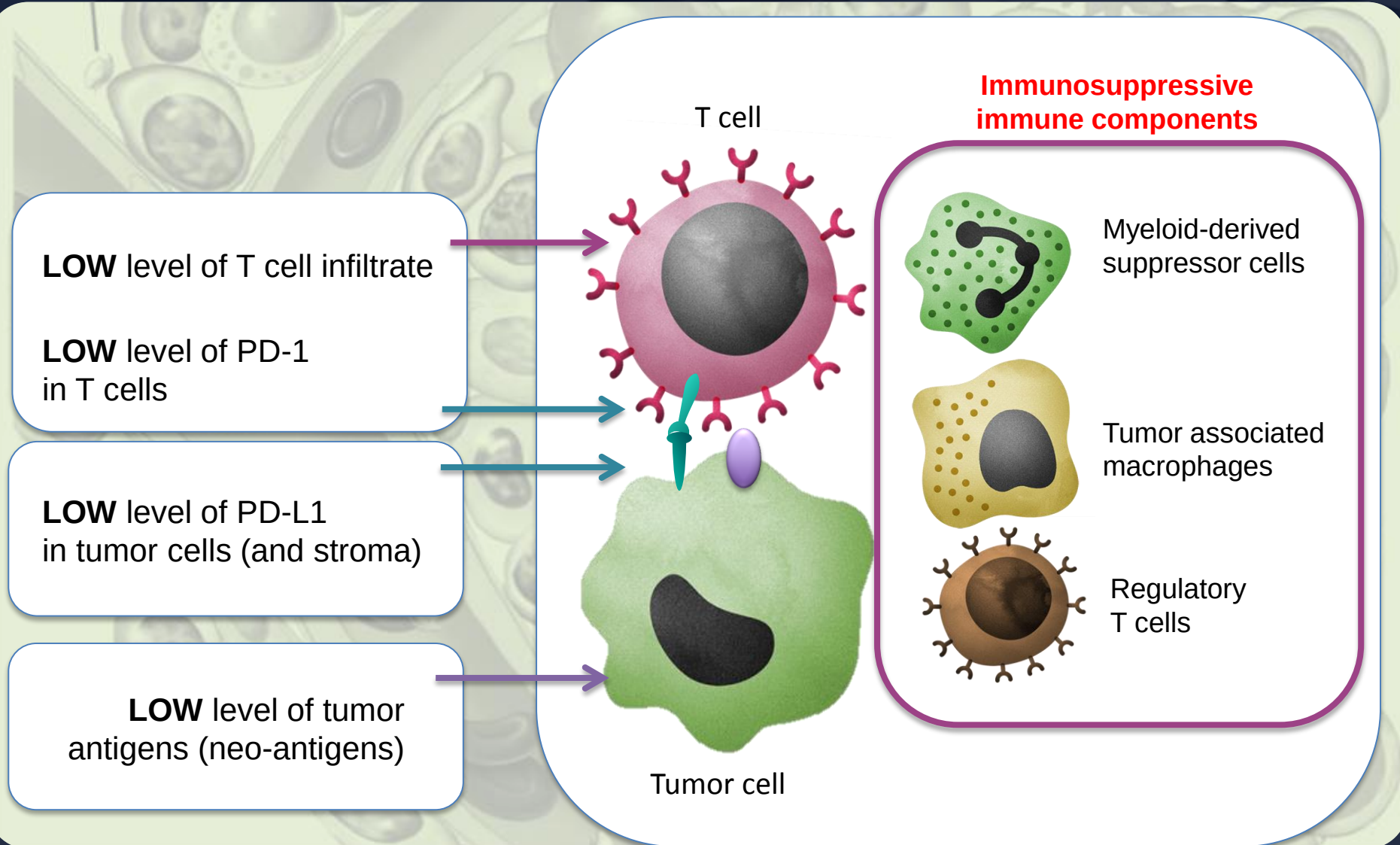
Mechanisms of resistance to immune checkpoint inhibitors



“COLD” tumors are infiltrated by immunosuppressive cells

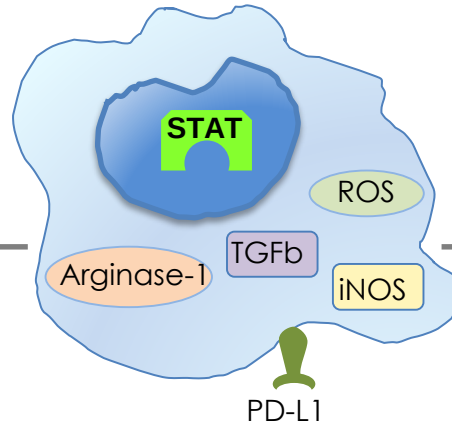


“COLD” tumors are infiltrated by immunosuppressive cells



Myeloid-derived suppressor cells: the best tumor allies

Myeloid derived suppressor cells



Local effect

Systemic effect

Immune suppression

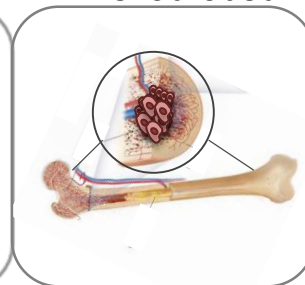
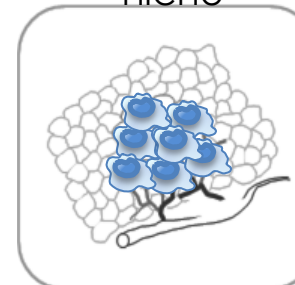
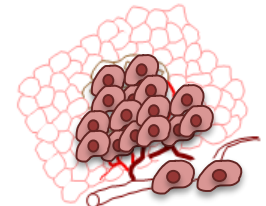
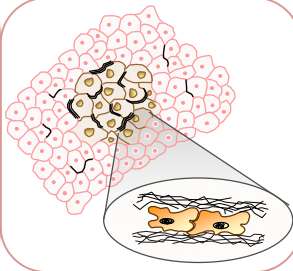
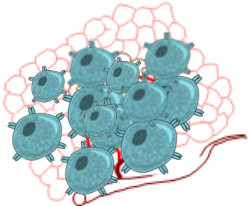
Stroma remodelling

Neo-angiogenesis

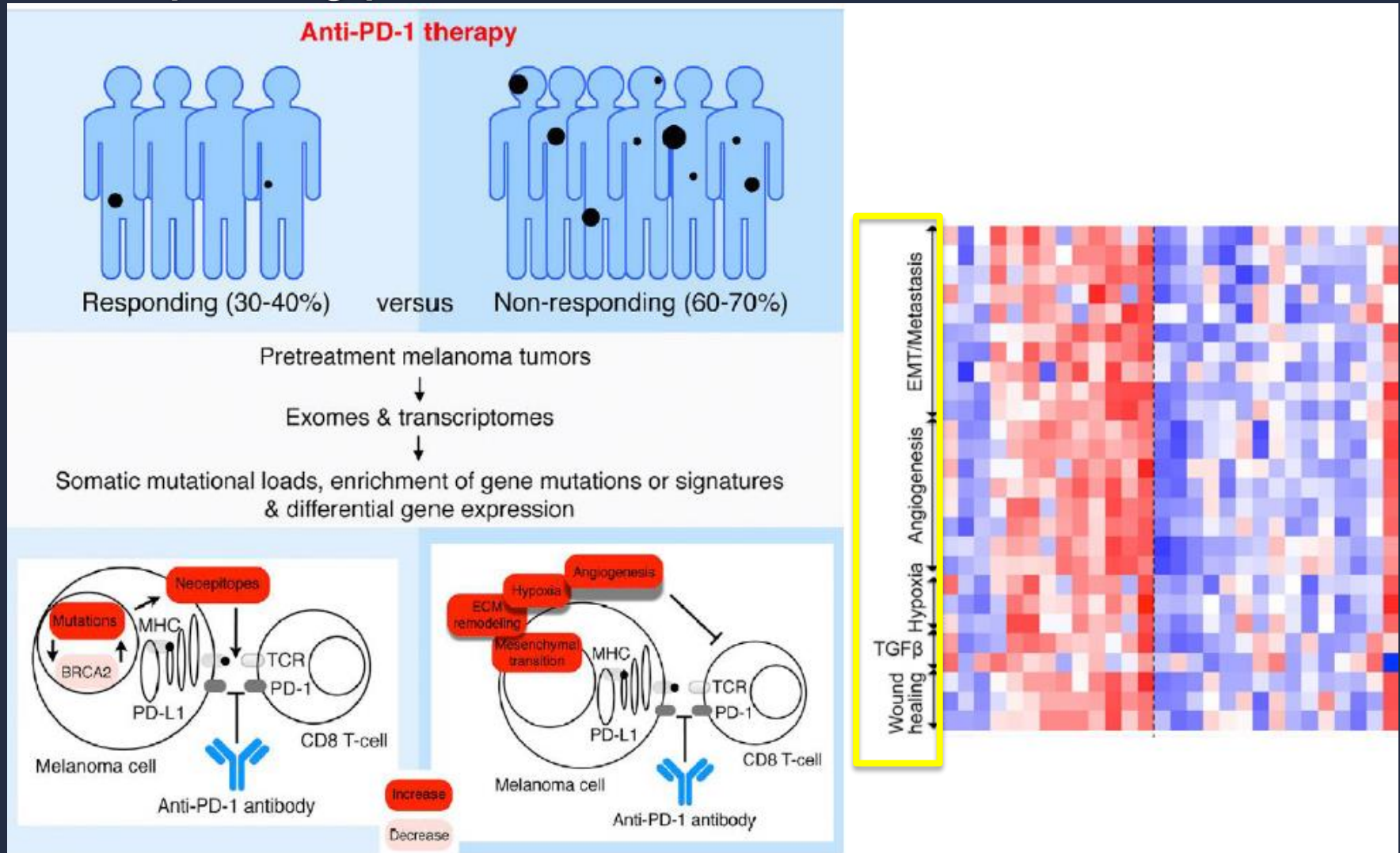
Mesenchymal transition

Pre-metastatic niche

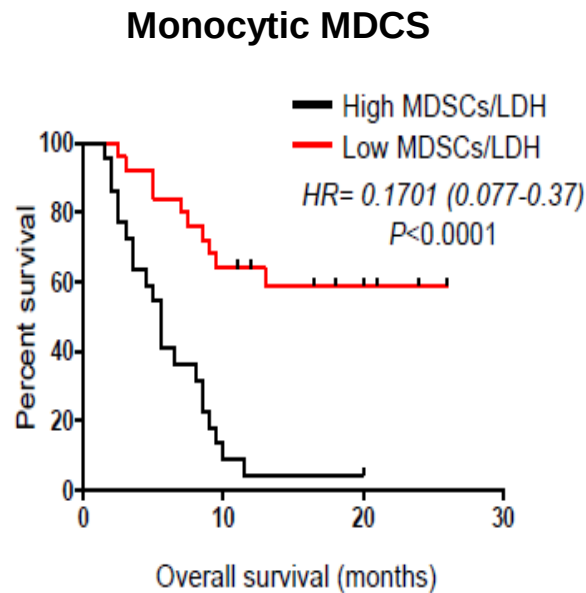
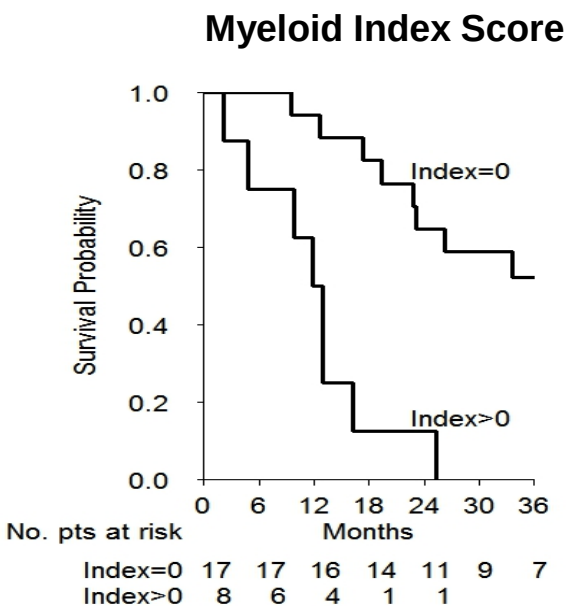
Bone metastases



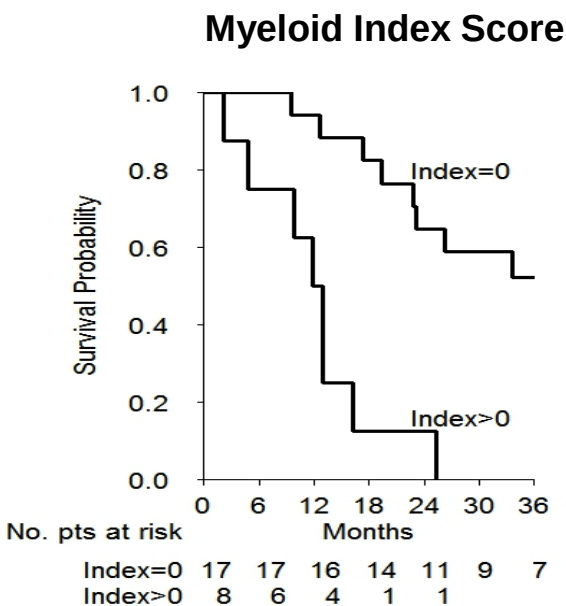
A myeloid-associated wound healing signature characterizes non responding patients



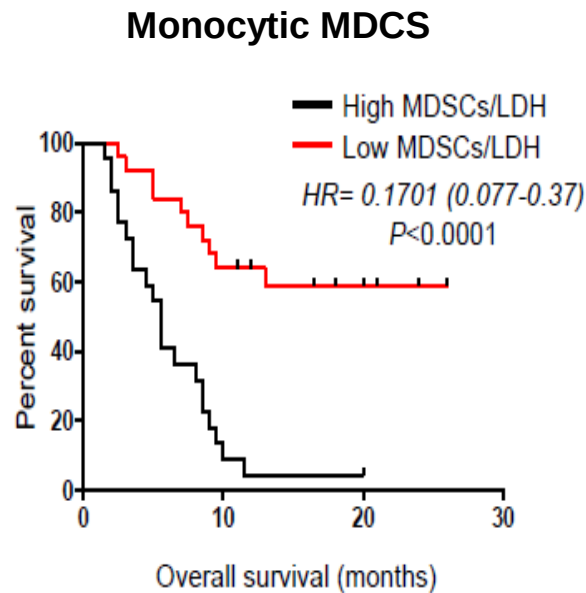
Myeloid cells: a circulating predictive marker of resistance to IT?



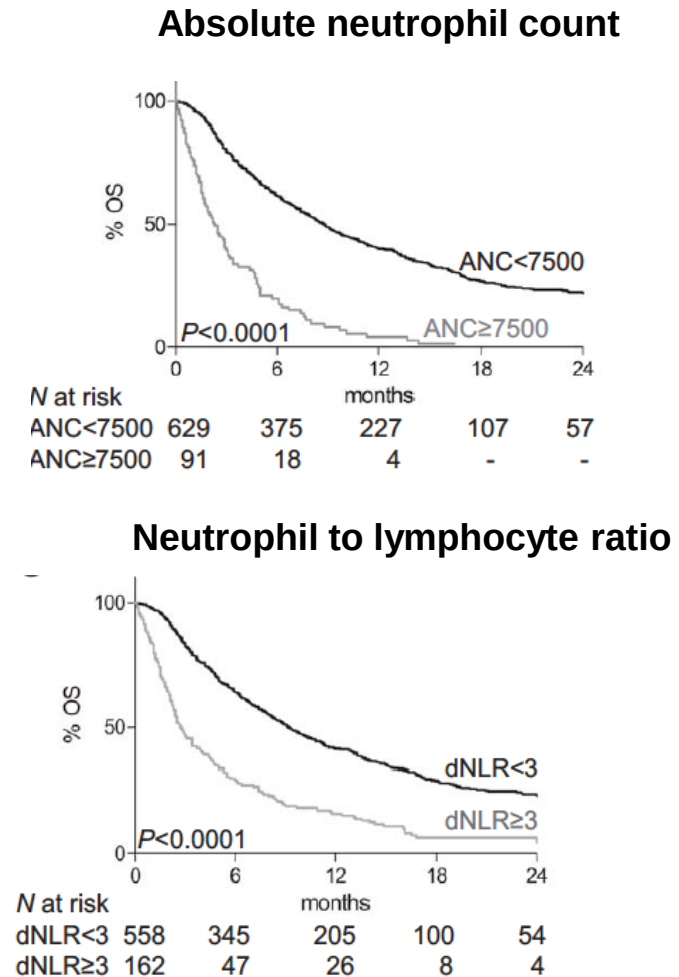
Myeloid cells: a circulating predictive marker of resistance to IT?



Rivoltini et al., manuscript in prep

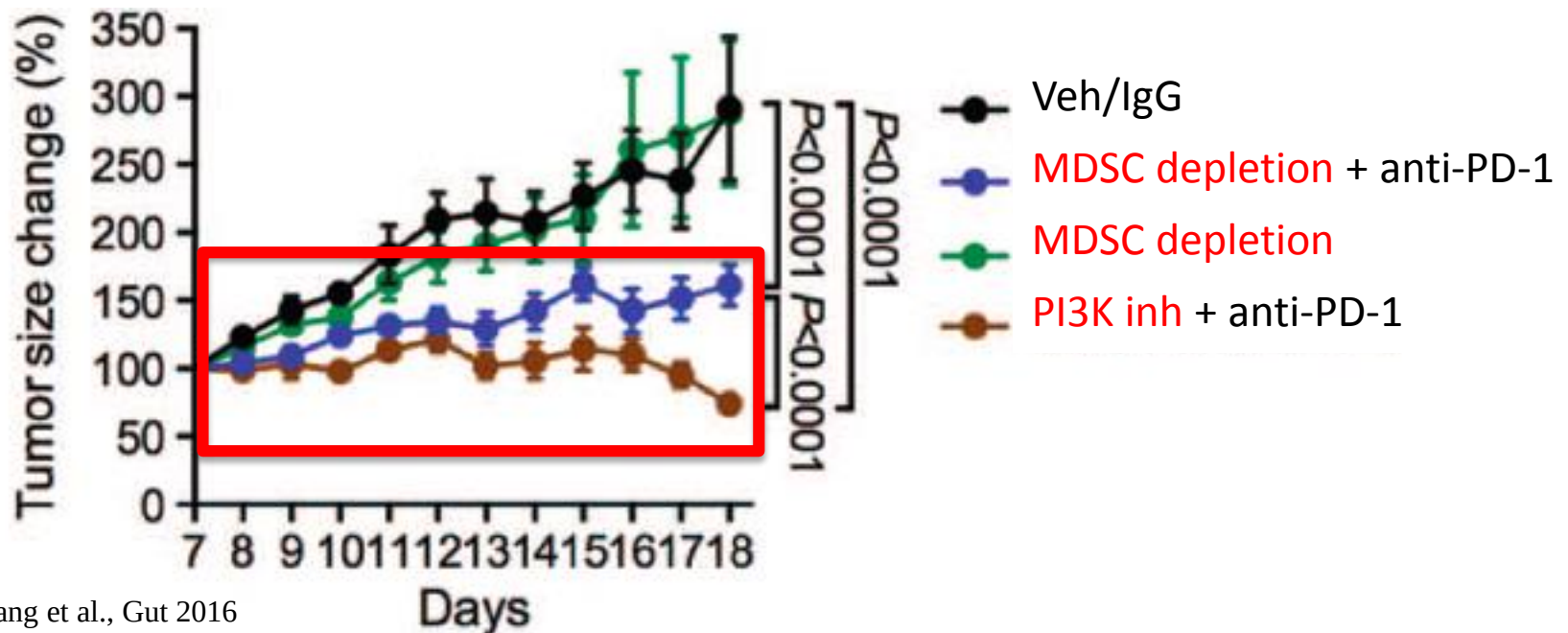


Sade-Feldman et al., Clin Cancer Res 2016



Valpione et al., Eur J Cancer 2015
Ferrucci et al., Ann Oncol 2015

MDSC depletion is required to unleash the therapeutic efficacy of PD-1 blockade



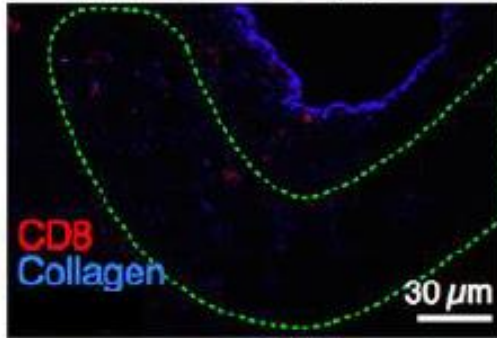
Zhang et al., Gut 2016

Multiple examples in literature on the evidence that MDSC are associated with resistance to different types of immunotherapy and their removal by different means improves immune-mediated tumor control in both murine and clinical setting

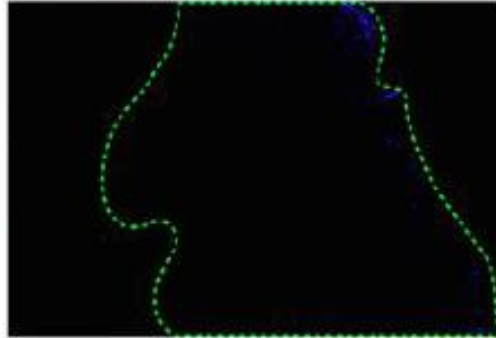
Chemotherapy depletes MDSC and synergizes with immune checkpoint inhibitors

Tumor Nodules — d234 (T₃)

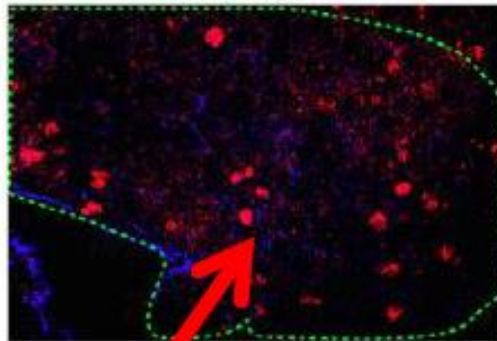
Untreated (∅)



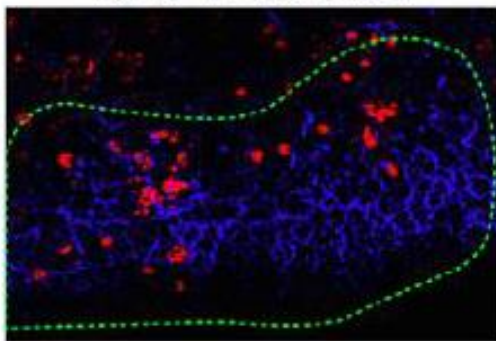
αPD-1 + αCTLA-4



Oxa-Cyc



Oxa-Cyc +
αPD-1 + αCTLA-4

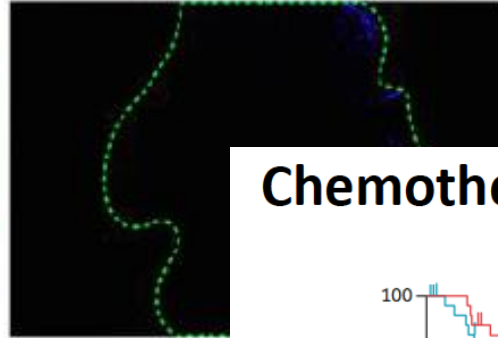
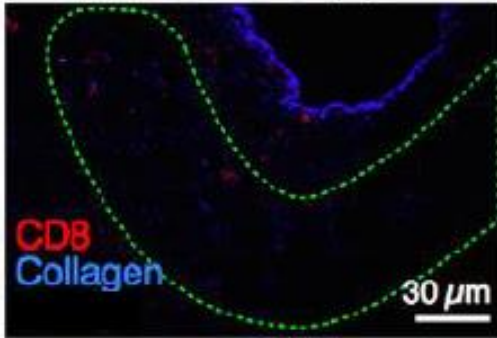


Chemotherapy depletes MDSC and synergizes with immune checkpoint inhibitors

Tumor Nodules — d234 (T₃)

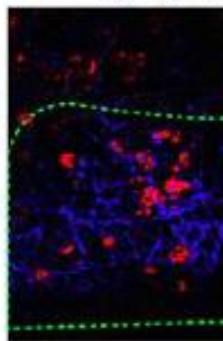
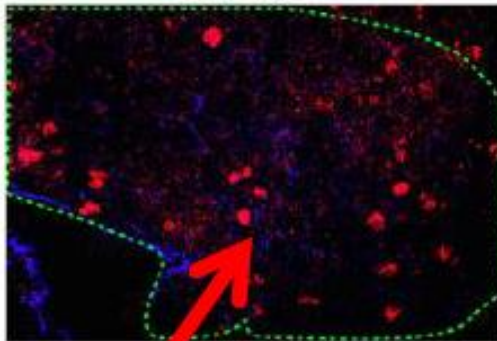
Untreated (ø)

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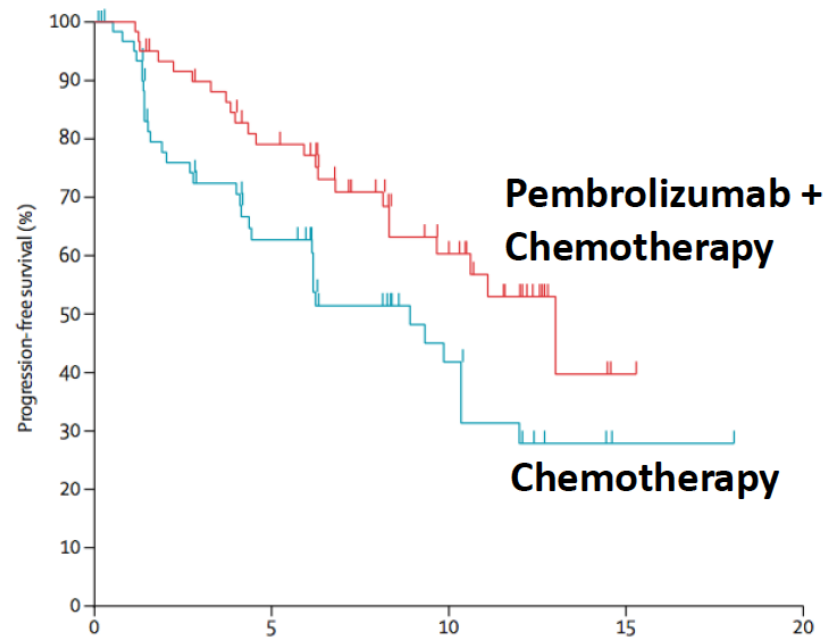


Oxa-Cyc

Oxa
αPD-1



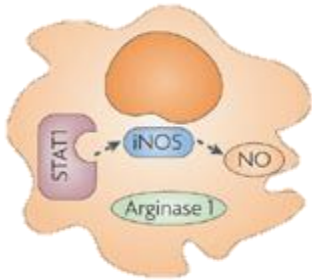
Chemotherapy + anti-PD-1 1st L NSCLC



Langer CJ, et al. Lancet Oncol. 2016

Immunomodulating properties of “non-immunological” cancer therapies

Myeloid derived suppressor cells



Anthracyclines
Gemcitabine
Fotemustine

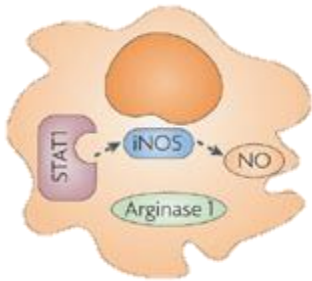
Dasatinib
Ibrutinib
Bevacizumab
Sunitinib
Pazopanib
Axitinib
PI3Ki

Radiotherapy

IDOi
Anti-TGFb
Anti-CSF1R

Immunomodulating properties of “non-immunological” cancer therapies

Myeloid derived suppressor cells

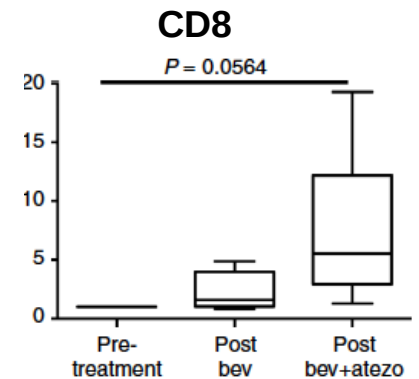
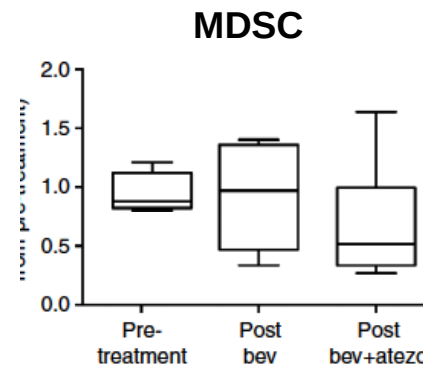
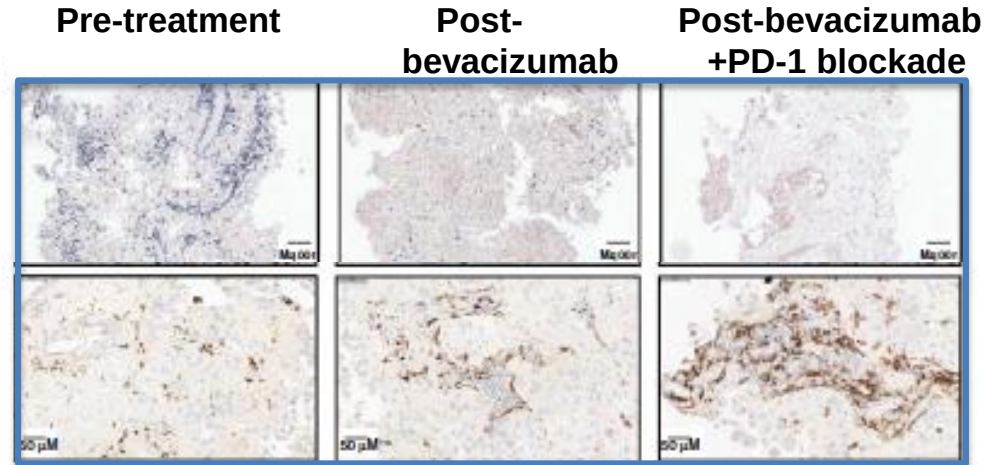


Anthracyclines
Gemcitabine
Fotemustine

Dasatinib
Ibrutinib
Bevacizumab
Sunitinib
Pazopanib
Axitinib
PI3Ki

Radiotherapy

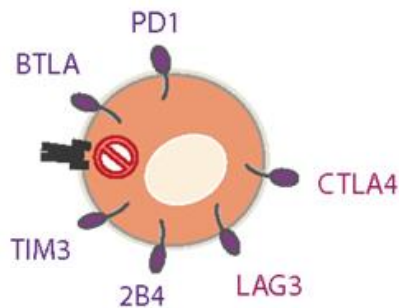
IDOi
Anti-TGFb
Anti-CSF1R



Blocking additional immune checkpoints to further boost antitumor immunity

Thommer et al., Cancer Immunol Res 2015

"Exhausted"
(chronic infection & cancer)



Pat-ID

Live cells

CD11b⁺

CD45⁺CD3⁺

CD8⁺

CD8⁺PD-1⁺

CD8⁺Tim-3⁺

CD8⁺CTLA-4⁺

CD8⁺LAG-3⁺

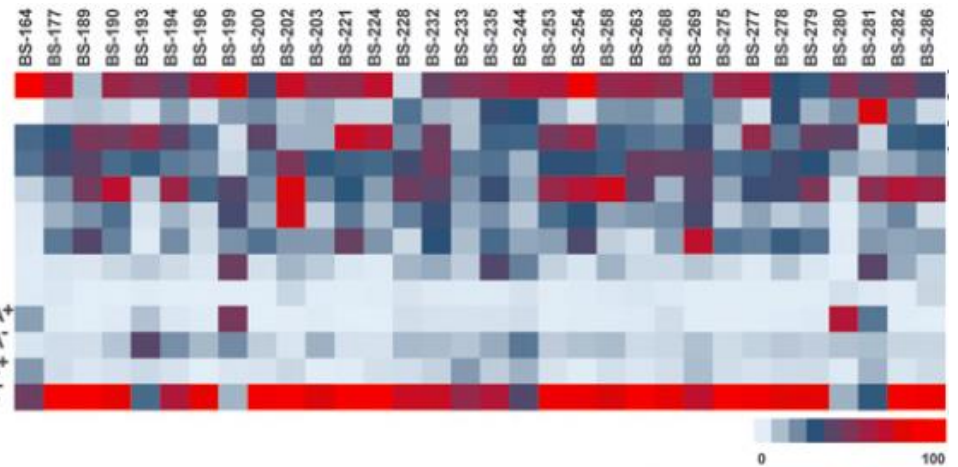
CD8⁺BTLA⁺

CD8⁺CCR7⁺CD45RA⁺

CD8⁺CCR7⁺CD45RA⁻

CD8⁺CCR7⁻CD45RA⁺

CD8⁺CCR7⁻CD45RA⁻

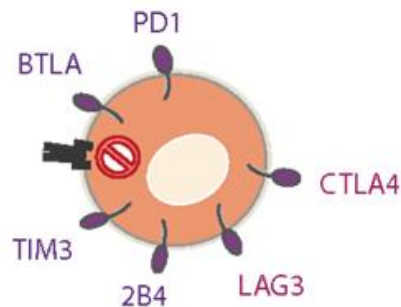


Koyawa et al., Nature Communications 2016

Blocking additional immune checkpoints to further boost antitumor immunity

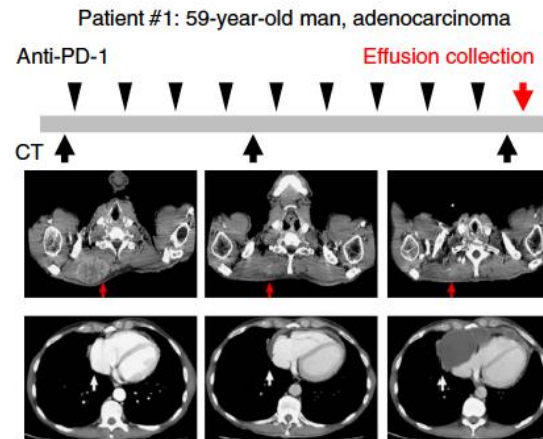
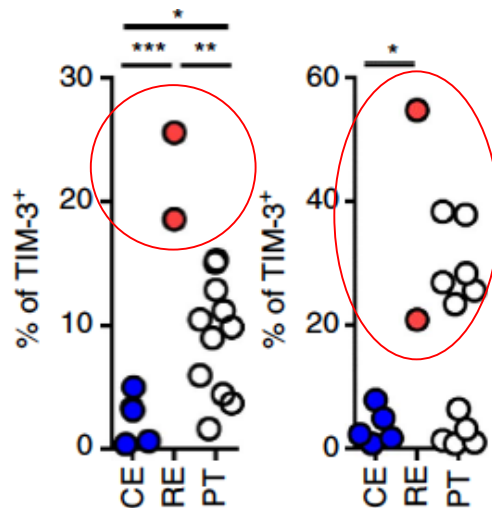
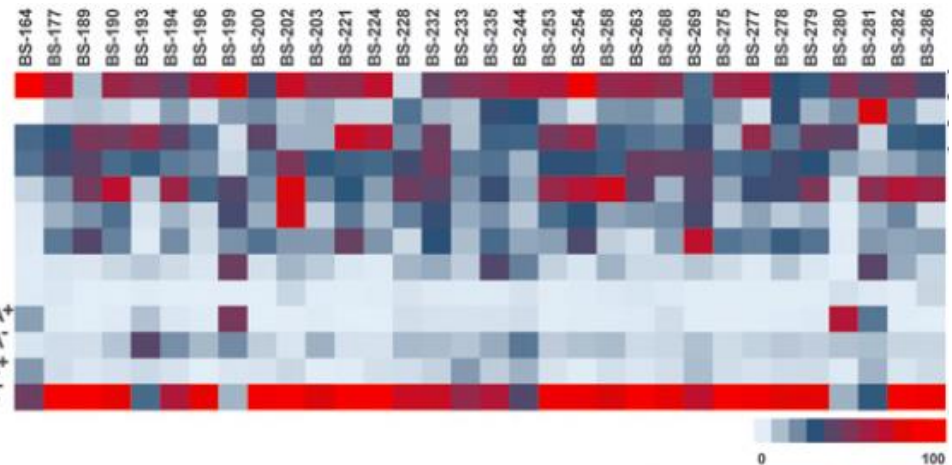
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Koyawa et al., Nature Communications 2016

To summarize

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- Tumor cells induce spontaneous immune responses mediated by CD8+ T cells and influencing disease course
- Inhibitory immune checkpoints restrain antitumor immunity, that can be unleashed by antagonist antibodies
- Predictive biomarkers of sensitivity to checkpoint blockade (“hot tumors”) involve pre-existing level of T cell immunity, ligand expression by tumor cells, and lack of immunosuppressive pathways in tumor microenvironment
- To rescue “cold” resistant tumors, improved immunogenicity (increase CD8+ T cell infiltration and activation) and reduced immunosuppression (decrease MDSC) should be reached by combination therapies

Thank you

