## Poster 437

# Personalized Tumor-Trained Lymphocytes – A neoantigen targeted T cell therapy product for treatment of colorectal cancer

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## Introduction

pTTL (personalized tumor-Trained Lymphocytes) is an adoptive T cell therapy product targeting tumor neoantigens. It is applicable to **any cancer type** for which neoantigens can be identified.

pTTL therapy is **personalized**, tailored for the patient's own tumor and taking advantage of the patient's immune cells.

pTTL consists of autologuous **neoantigen selected T-cells** originating from regional lymph nodes (RLN).

A First-in Human trial of pTTL is conducted in in stage IV colorectal cancer patients.

## pTTL production

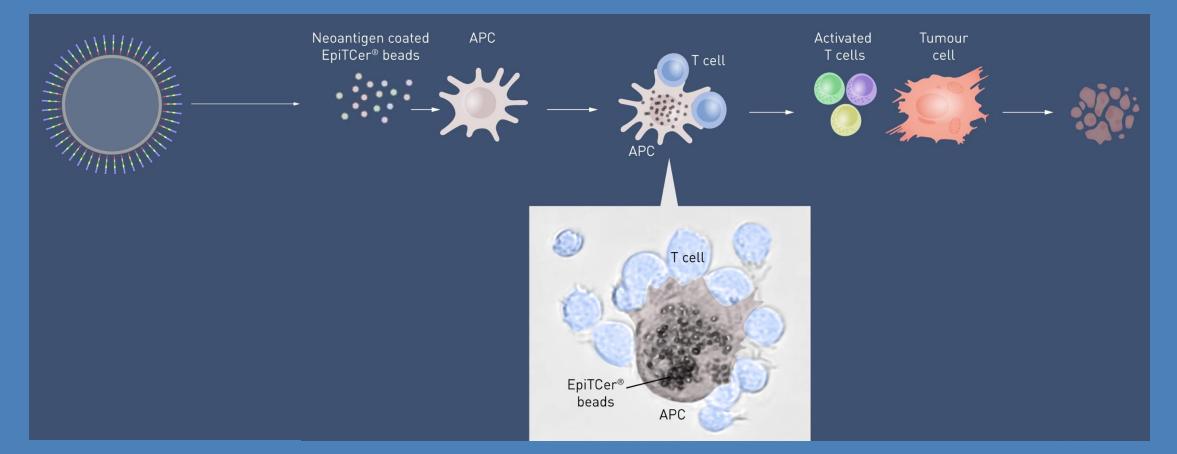
- The bioinformatic software **PIOR®** Manufacturing is used for the identification, ranking and design of neoantigens for the manufacturing of pTTL.

- The **EpiTCer<sup>®</sup> technology** offers a novel approach for efficient antigen delivery and specific T cell activation.

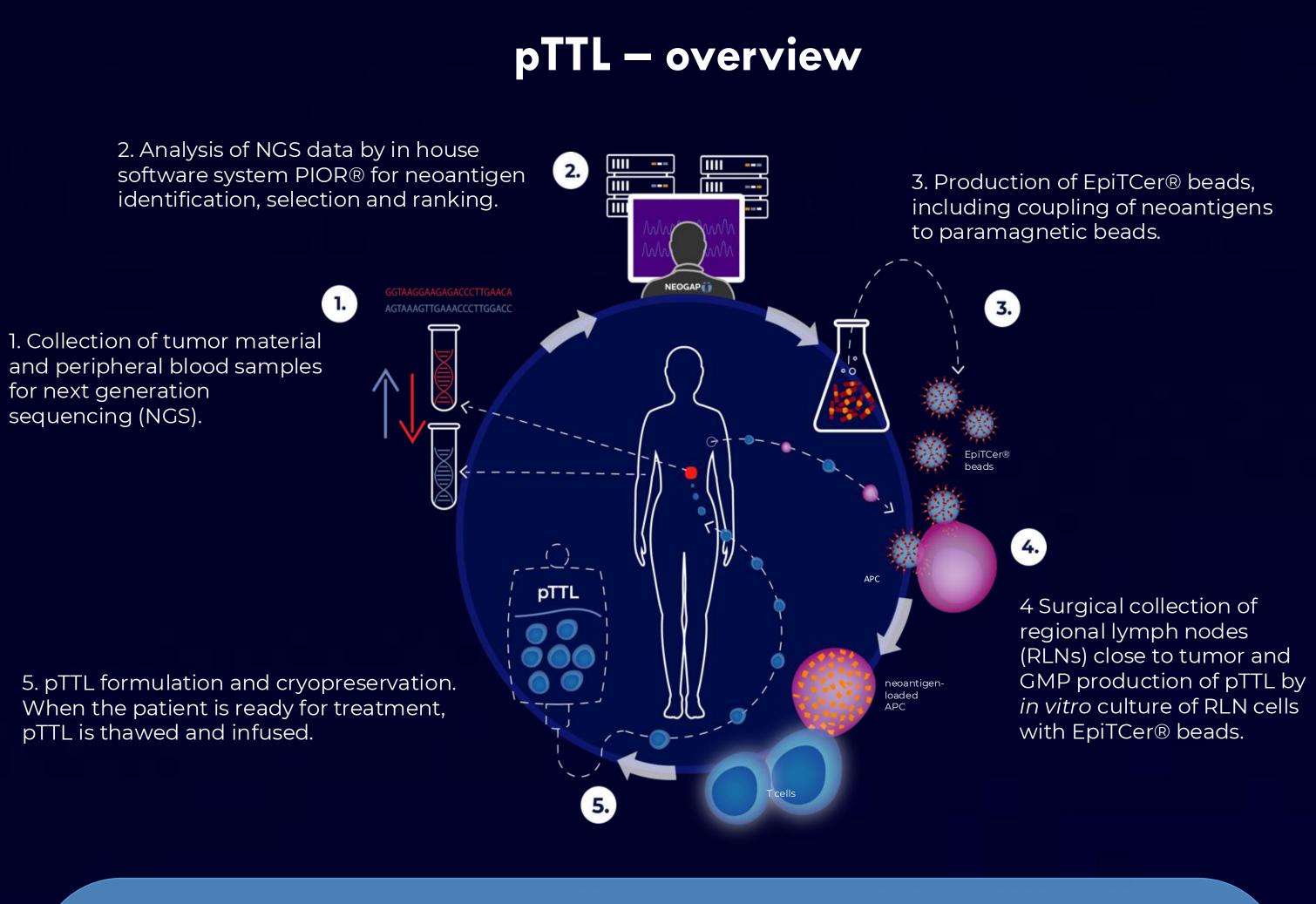
- Starting material for pTTL manufacturing is RLNs, which harbour an enriched population of tumor-experienced T cells<sup>1-6</sup>.

- pTTLs are produced in a **controlled and reproducible GMP** manufacturing process.

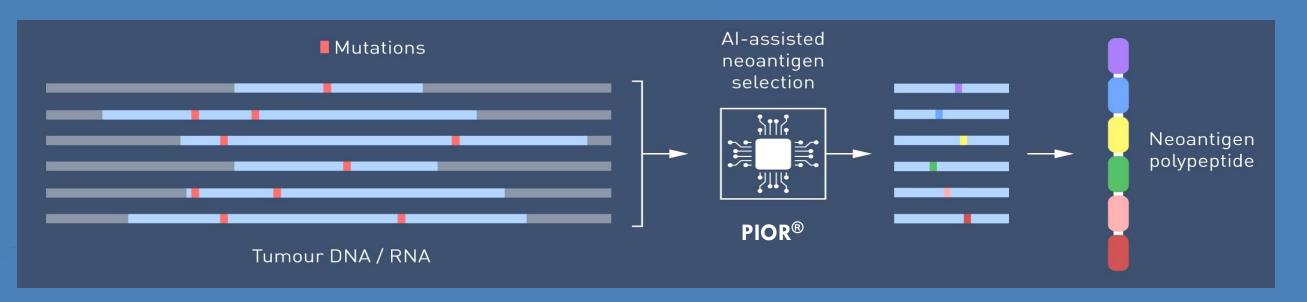
### Neoantigen selective T cell expansion using EpiTCer® technology



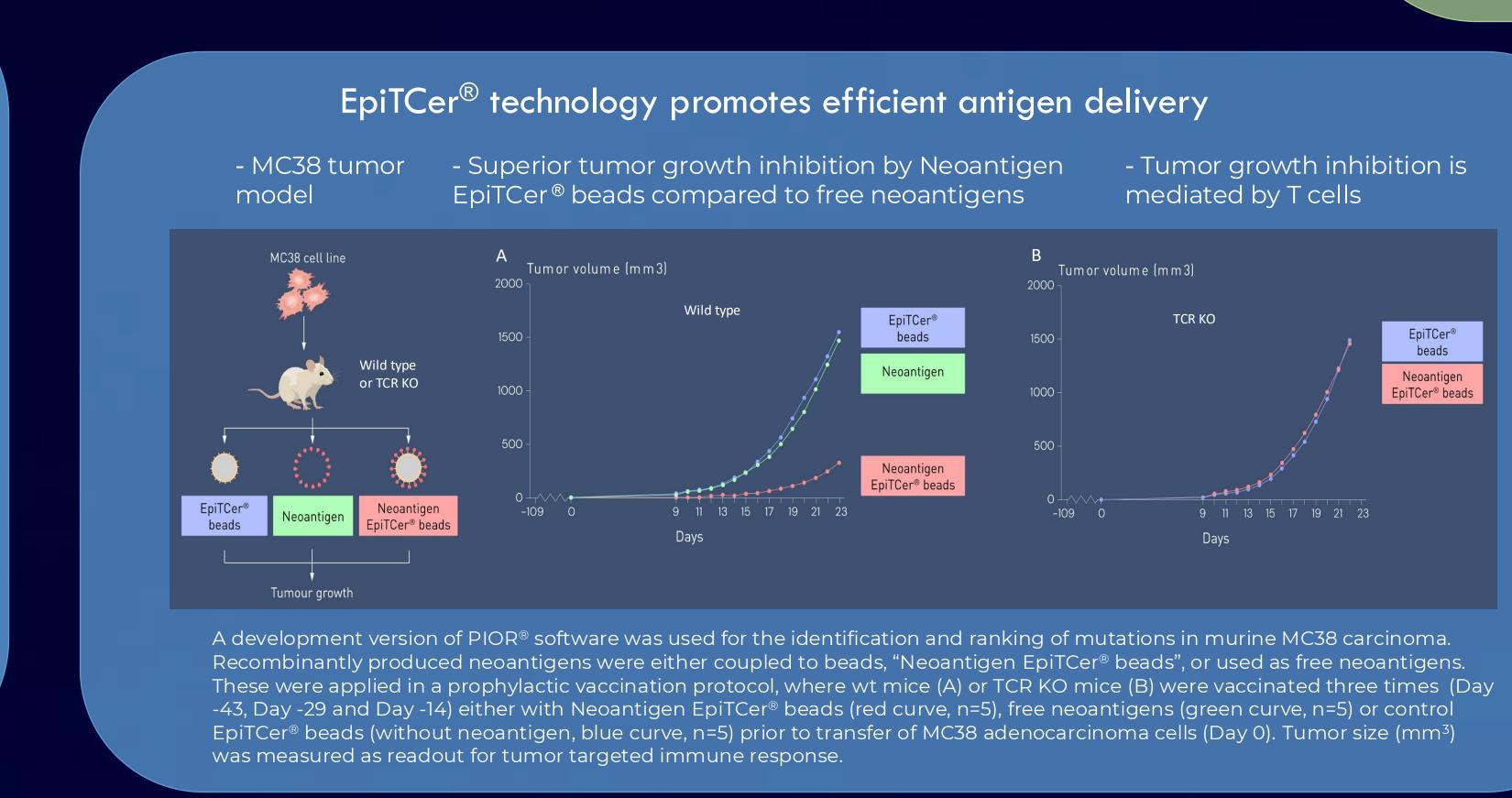
EpiTCer<sup>®</sup> beads, 1 µm size, promote efficient phagocytosis, neoantigen processing and presentation by antigen presenting cells (APCs). The process employs natural antigen processing, is **HLA agnostic** and **promotes cross-presentation**, activating both CD4<sup>+</sup> and CD8<sup>+</sup> T cells. The beads are paramagnetic, allowing sterilization and processing compatible with GMP production, and enabling removal of the beads from the cell product.



### Neoantigen identification, ranking and design by PIOR<sup>®</sup>



PIOR<sup>®</sup> is a software for neoantigen identification, selection and ranking developed by NEOGAP Therapeutics. Neoantigen constructs for EpiTCer<sup>®</sup> beads are designed by PIOR<sup>®</sup>. Six neoantigen epitopes is included per construct and EpiTCer<sup>®</sup> beads with 3-6 neoantigen constructs are used for pTTL manufacturing.



# pTTL characterization

pTTL phenotype

- Individual variation in proportion of CD4<sup>+</sup> / CD8<sup>+</sup> T cells.

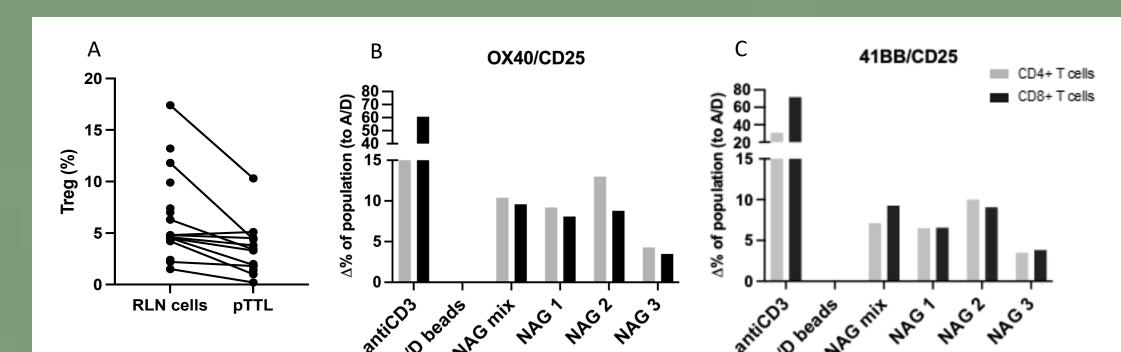
- Mainly composed of Tcm or Tem cells.

henotypic analysis by flow :ytometry (n=16 pTTL batches)

Proportion of CD4<sup>+</sup>. CD8<sup>+</sup> and ouble negative (CD3+CD4-CD8-: DN) T cells among CD3⁺ T-cells. Differentiation state by proportion f central/effector memory T cells m+Tem CD45RA-CCR7+/-, and fully ferentiated T cells. Temra CD45RA+CCR7-, among CD3+CD4+ (light grey), and CD3<sup>+</sup>CD8<sup>+</sup> (dark grey)

## **pTTL** functionality

- Neoantigen specific activation in pTTL in response to restimulation with the personalized EpiTCer<sup>®</sup> beads used for pTTL production. - pTTL manufacturing process does not favour regulatory T cell expansion.



A: Proportion of regulatory T cells (Treg) in starting material (RLN cells) and cell product (pTTL) by analysis of FOXP3 promoter demethylation (PureQuant™ Treg assay). N=13 paired RLN/pTTL data. B and C: Expression of activation induced marker OX40 (B) and 4-1BB (C) on CD25+CD4+ (light grey) and CD25+CD8+ (dark grey) T cells in response to recall stimulation with a pool of 3-6 personalized EpiTCer® beads (same as used for pTTL production, NAG mix) or separate EpiTCer® beads (NAG 1-3, included in NAG mix). Positive control: anti-CD3; negative control: activated/deactivated (A/D) beads. Example from one patient shown (the FluoroSpot data shown in a separate figure were generated from the same patient). Flow cytometry data expresse as " $\Delta$ % of population (to A/D)", i.e. % expression of activation induced markers in relation to marker expression on A/D beads.

## Phase I/IIa First-in-Human Trial ongoing

### Trial design

Dose escalation with four groups receiving an increasing cell dose.

**Part 1:** Screening & pTTL manufacturing

Part 2: Preconditioning (3x cyclophosphamide, 300 mg/m<sup>2</sup> BSA + fludarabin, 30 mg/m<sup>2</sup> BSA), pTTL treatment, 6 months follow-up

**Part 3:** Long term follow-up

### Patients

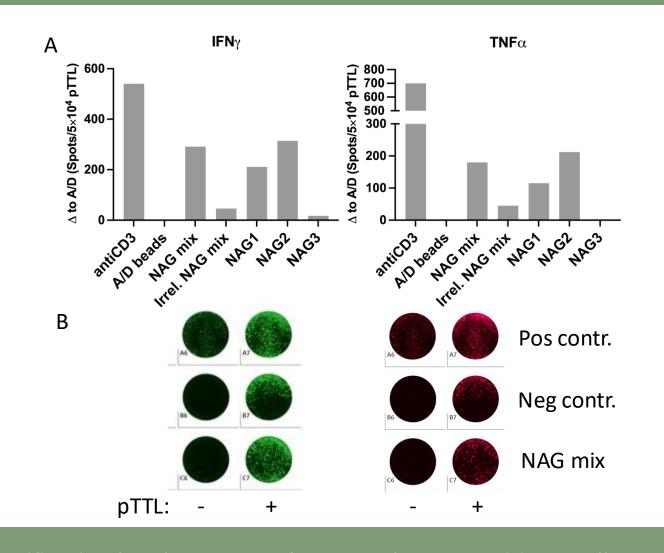
Up to 16 adult patients with Stage IV colorectal cancer

- References
- 1. Marits et al 2006 Br J Cancer 94 1478-1484 5. Zhen et al. 2015 Cancer Immunology, 2. Kim et al 1995 Cancer Biother 10:115–23 3. Triozzi et al 1995 J Natl Cancer 87: 1180 –1 6. Sherif et al, 2010 Eur Urology 58:105–111 4. Kim et al 1999 Cancer 86: 22-30
  - Imunotherapy 64:1083–1093



#### pTTL functionality

#### Neoantigen specific cytokine production towards the personalized EpiTCer<sup>®</sup> beads used for pTTL production.



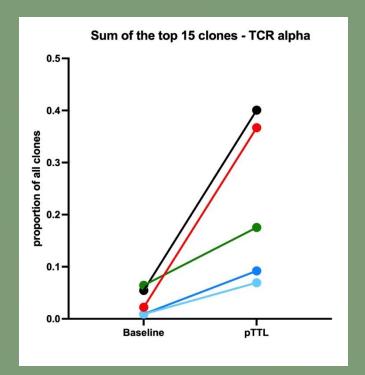
A. Quantification by FluoroSpot of IFN $\gamma$ , and TNF $\alpha$  positive T cells upon *in vitro* restimulation with a pool of personalized EpiTCer® beads (the same as used for pTTL production, NAG mix), pool of irrelevant EpiTCer beads (irrel. NAG mix, personalized for another patient) or separate EpiTCer® beads (NAG 1-3, included in NAG mix). Positive control: anti CD3, negative control activated /deactivated (A/D) beads.

B. Corresponding FluoroSpot assay images.

IFN $\gamma$ , TNF $\alpha$  values are normalized to the A/D beads condition. Example from one patient shown.



#### - Oligoclonal T cell product.



Trial endpoints

NCT05908643, EU 2024-512296-13-00

Secondary endpoints: standard clinical measurements:

Clonal expansion of T cells during oTTL production analysed by TCRα and TCRB sequences (data show) or TCRα) at baseline and in pTTL oducts. Sum proportion of the largest clones in RLN starting terial (baseline) and prresponding pTTL product, sed on sequences of the CDR CDR2 and CDR3 sections of the CR chains. The dark and light ue symbols represent batches priginating from the same tarting material.

#### Presenters



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- Biomarker analyses (e.g. TCRseq, ctDNA)

Primary endpoint: safety and tolerability

- Objective response (IRESIST)

- pTTL *in vivo* characterization

- time to progression

Exploratory endpoints:

- time to and duration of response

- OS, PFS, disease-specific survival



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