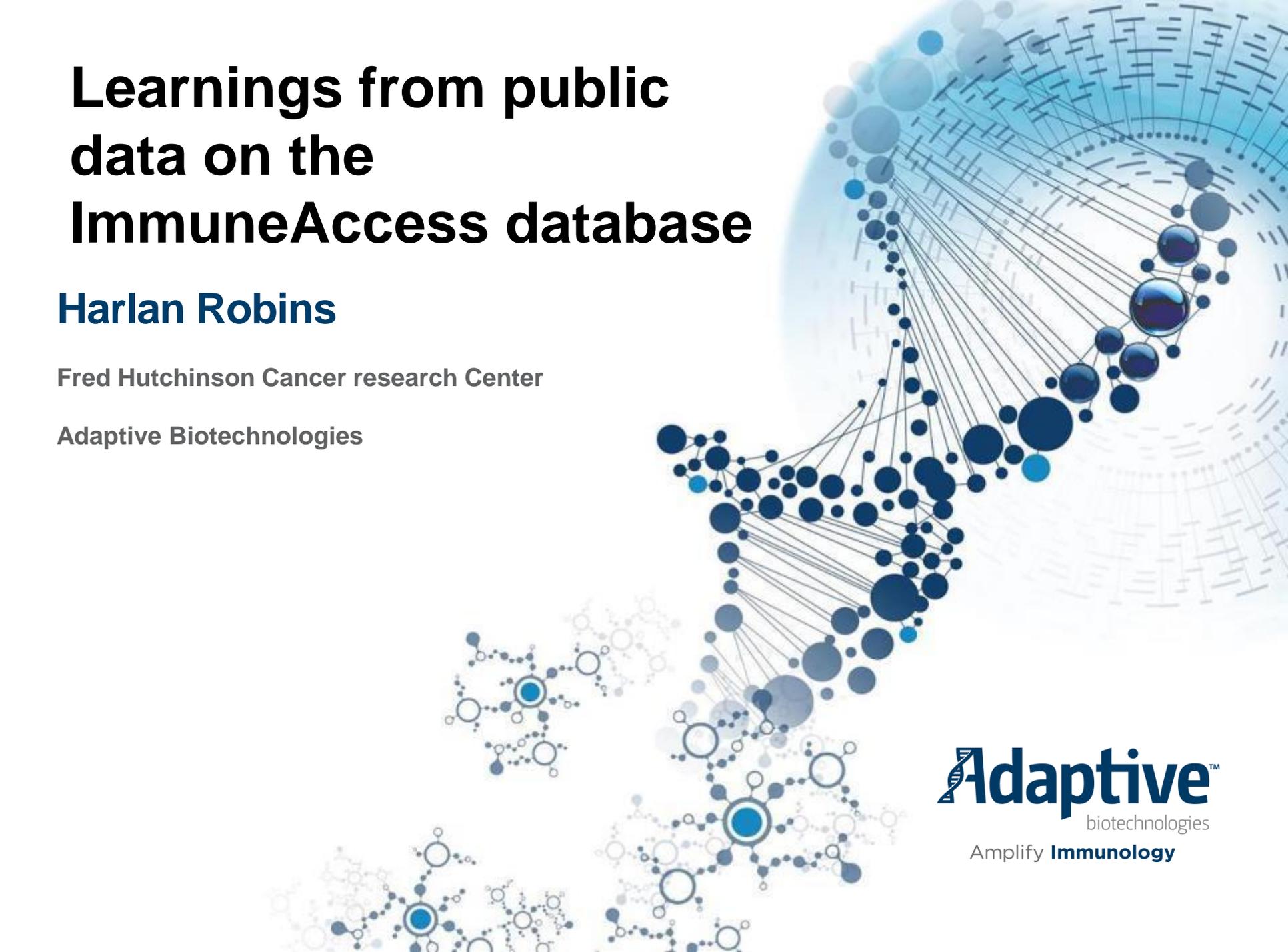


Learnings from public data on the ImmuneAccess database

Harlan Robins

Fred Hutchinson Cancer research Center

Adaptive Biotechnologies



Adaptive[™]
biotechnologies
Amplify **Immunology**

Available Data at Adaptive on ImmuneAccess (www.immuneaccess.com)



DATA AT A GLANCE



5,545

human samples

See all >



464

mouse samples

See all >



545,429,843

nucleotide sequences



48

journal articles



14

research areas

Uses of TCR Sequences

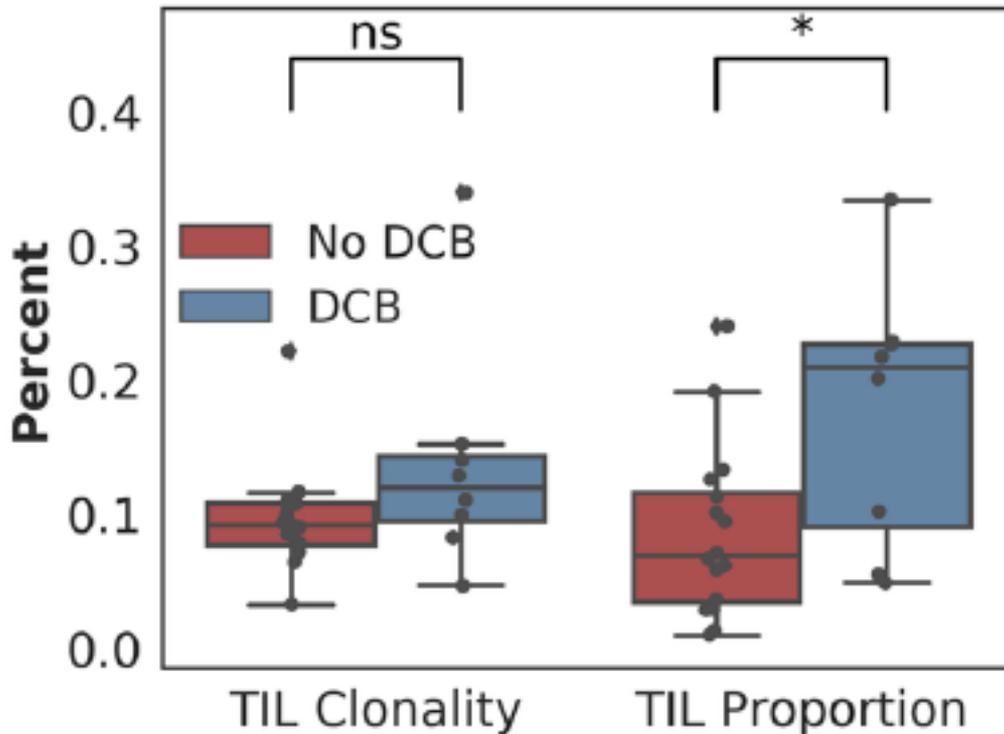
- Properties of the repertoire
- Tracking clones
- Mapping to antigen



- Contribution of systemic and somatic factors to clinical response and resistance to PD-L1 blockade in urothelial cancer: An exploratory multi-omic analysis
 - Snyder et al. Plos Medicine. 2017.

TCRB repertoire in the pre-treatment tumor microenvironment correlates with clinical benefit to IOs

Urothelial cancer patients treated with Atezolizumab



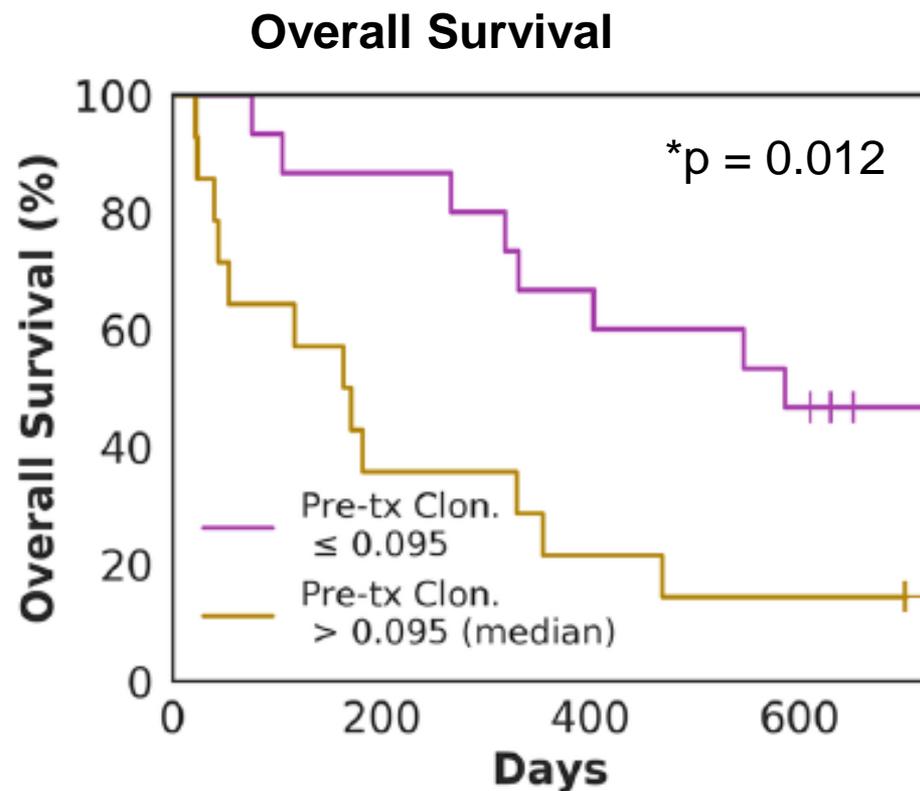
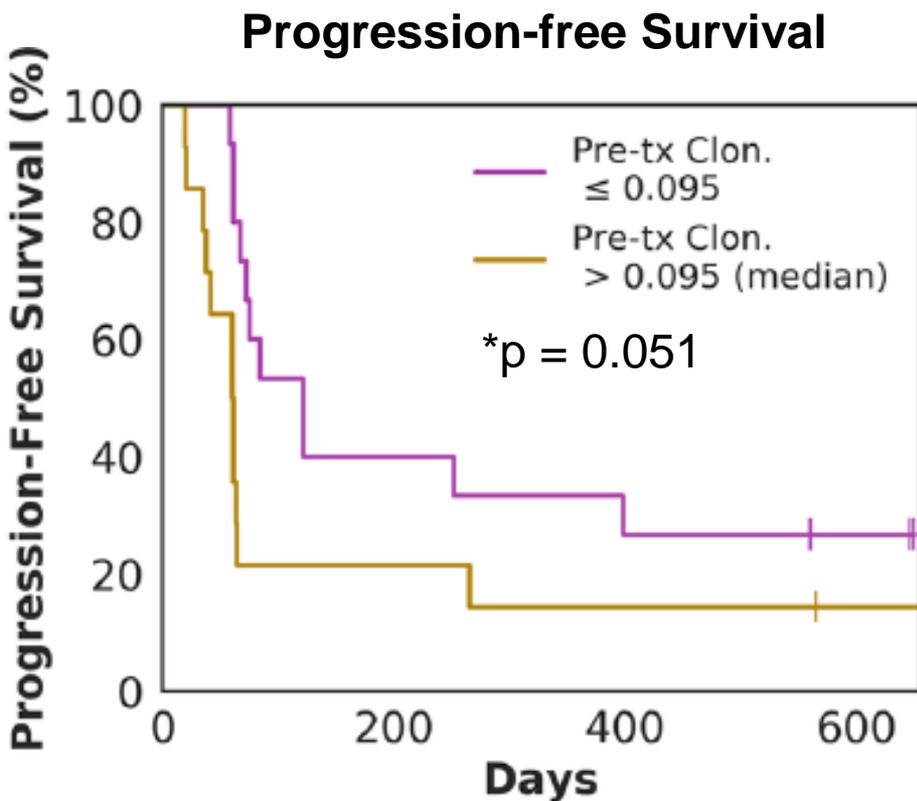
Key Takeaways

- Hallmarks of immune activation in pre-treatment tumor tissue correlate with response to checkpoint inhibitors.
- 81% of patients without DCB had below median TIL clonality or TIL infiltration (proportion) in the tissue (p = 0.02)

*DCB = Durable Clinical Benefit = PFS > 6 mo

Pre-treatment Clonality in Peripheral Blood Correlates with Survival

Baseline peripheral clonality in patients with urothelial cancer treated with Atezolizumab was Prognostic

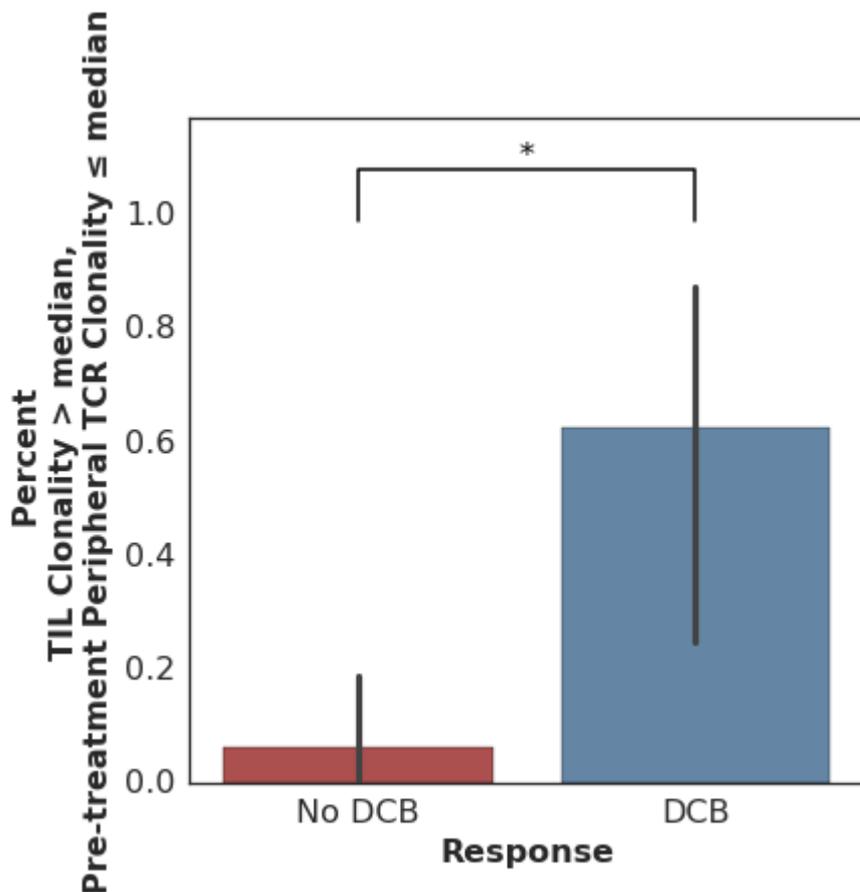


*Analysis was from a COX PH model

| For Research Use Only. Not for use in diagnostic procedures.

The combination of pre-treatment TIL assessment and peripheral clonality may be predictive of clinical benefit

Proportion of Patients with High TIL Clonality and Low Peripheral Clonality



Key Takeaways

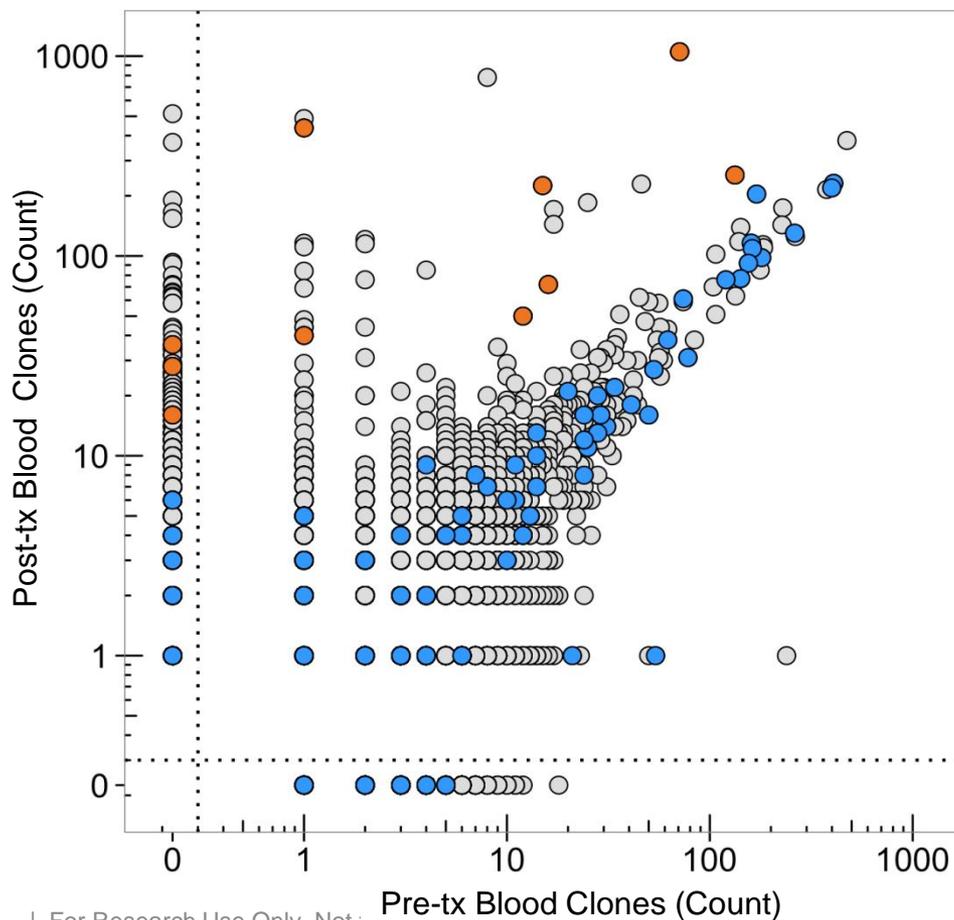
- The combination of a healthy peripheral immune repertoire (low peripheral clonality) and an activated immune repertoire in the TME strongly correlates with clinical benefit.
- A comprehensive immune assessment or pre-treatment peripheral blood and tumor repertoires may facilitate patient stratification.

On-treatment monitoring identifies patients receiving clinical benefit.

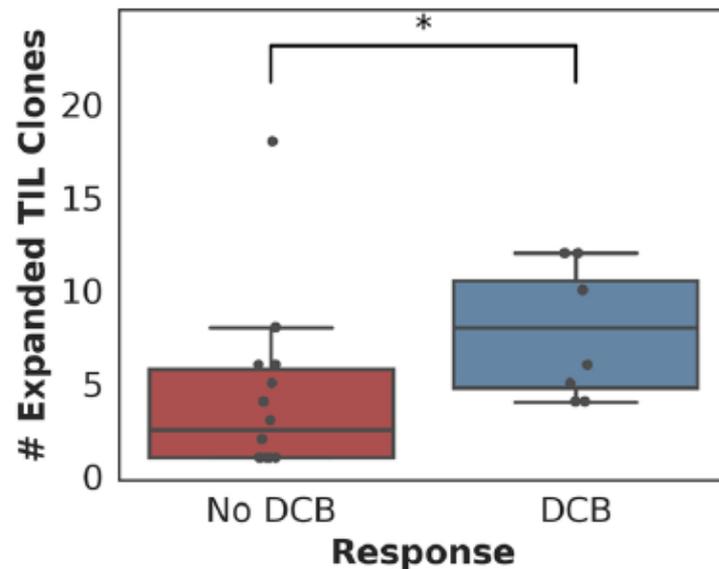


Expansion of tumor-associated (TA) clones was detected in blood and correlated with response after the 1st dose of Atezo (anti-PD-L1) in patients with metastatic urothelial cancer

- TA clones expanding in the blood
- TA clones detected the blood
- Clones only in blood



TIL Clones Expanding in the Blood



Clinical Cancer Research

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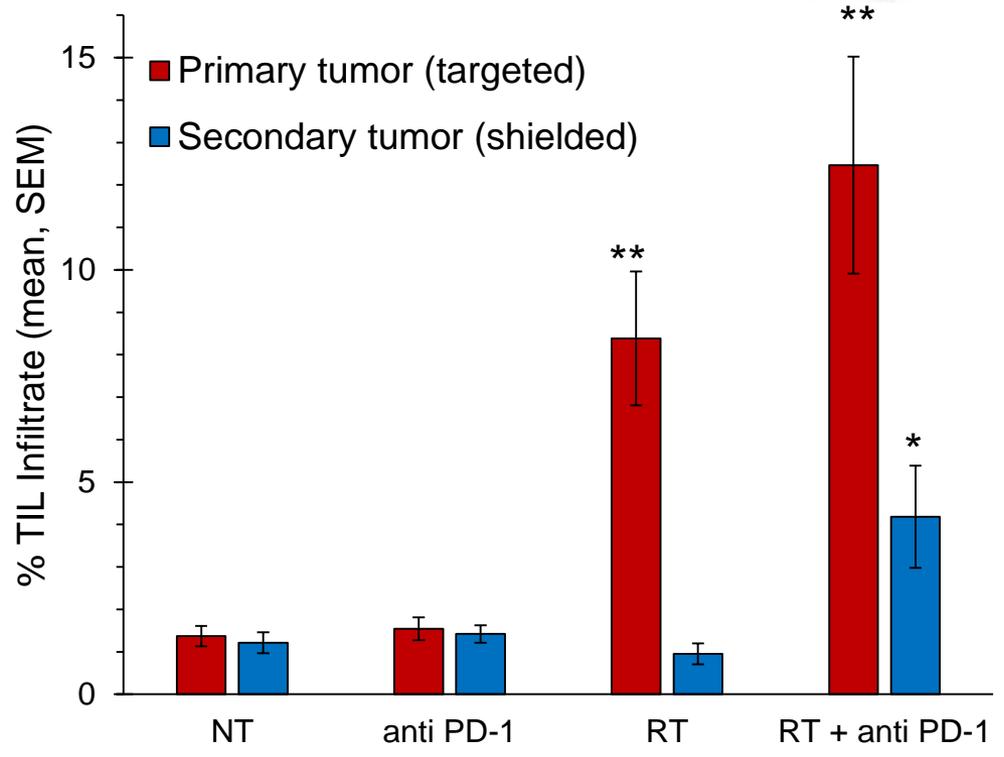
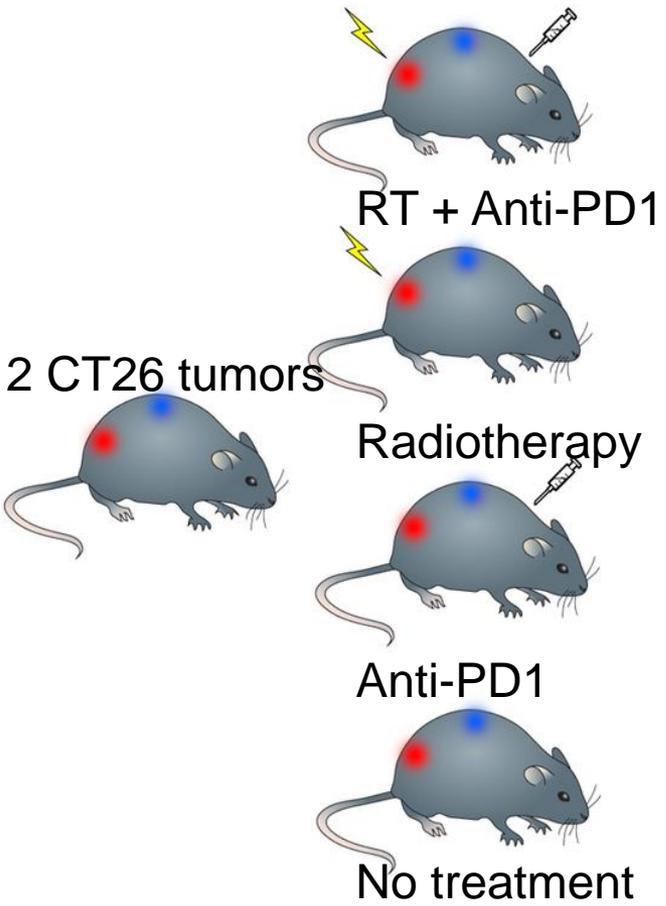
Cancer Therapy: Preclinical

Fractionated radiation therapy stimulates anti-tumor immunity mediated by both resident and infiltrating polyclonal T-cell populations when combined with PD1 blockade

Simon J Dovedi, Eleanor J Cheadle, Amy Pople, Edmund Poon, Michelle Morrow, Ross Stewart, Erik Yusko, Catherine Sanders, Marissa Vignali, Ryan Emerson, Harlan Robins, Robert W Wilkinson, Jamie Honeychurch, and Timothy Illidge

DOI: 10.1158/1078-0432.CCR-16-1673  Check for updates

TIL Infiltrate doubles in the shielded tumor after combination treatments

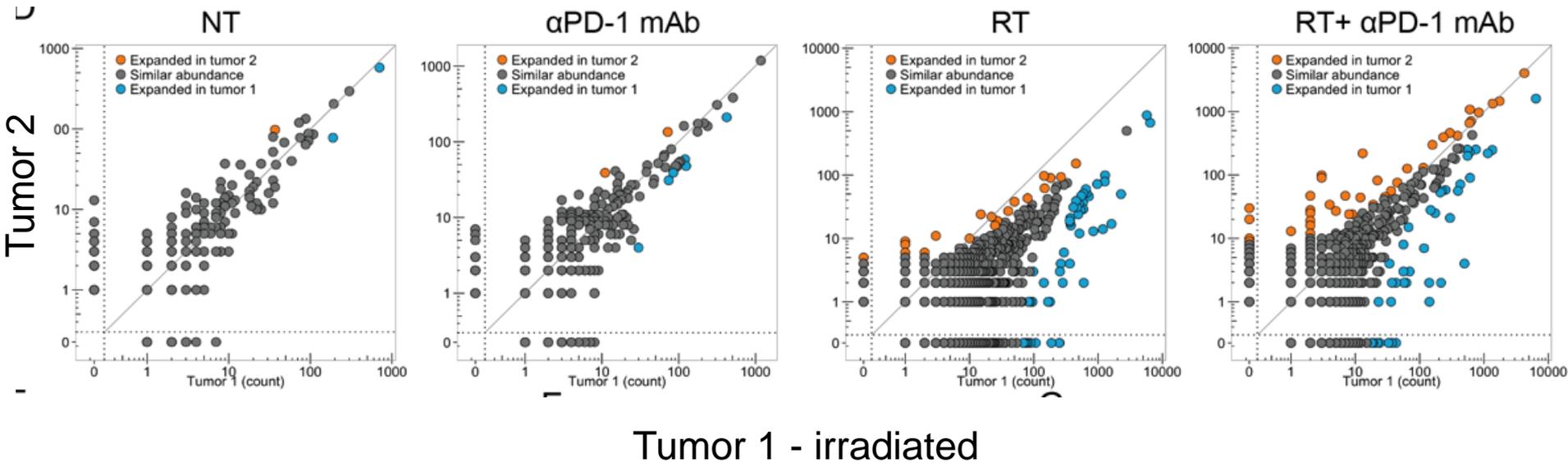


PD-1 may replicate the immune effects of radiotherapy at a distant tumor that received no radiation

RT in combination with checkpoint blockades



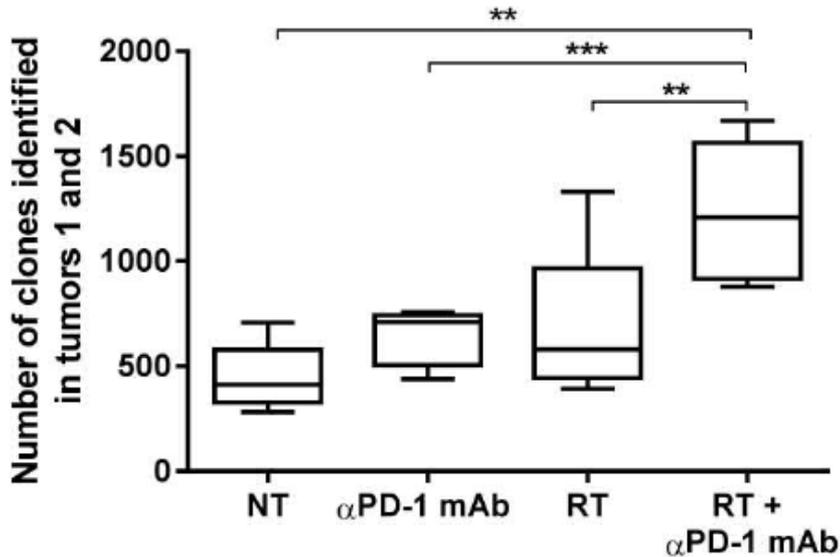
- Strong concordance in tumors (NT and anti-PD1) indicates similar TCR repertoires, derived from common clones is established prior to therapy.
- The abscopal tumor TIL repertoires does not mirror the irradiated tumor unless anti-PD-1 mAb is administered.
- The combination of anti-PD-1 and RT may generate an abscopal effect.



RT in combination with anti-PD1

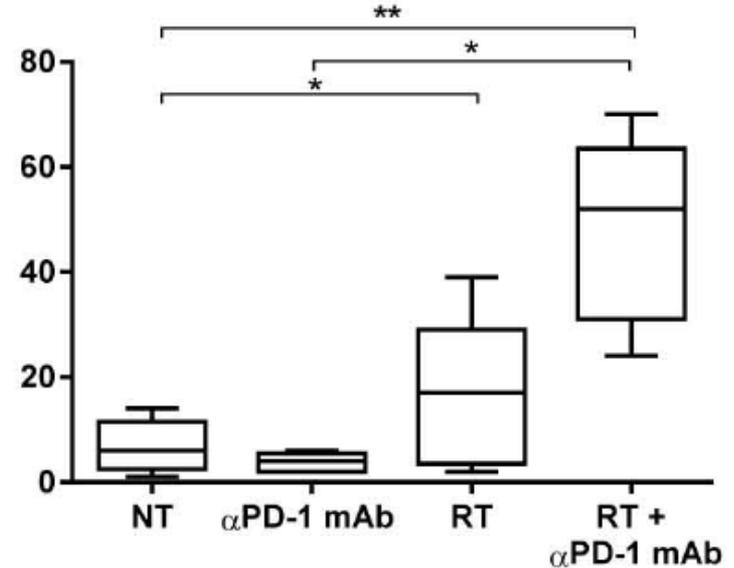


Shared Clones



Expanded Clones in Tumor 2 vs. Tumor 1

Number of clones with significantly higher abundance in tumor 2 than tumor 1



- Quantitation of clone sharing between the irradiated and abscopal tumors indicates that many of the clones in the systemic tumor derived from the same progenitor.
- The clone response is not equal however, in that many clones despite being detected in both tumors have a statistically different frequency in tumor 2 vs. tumor 1.



Clonal expansion of CD8 T cells in the systemic circulation precedes development of ipilimumab-induced toxicities

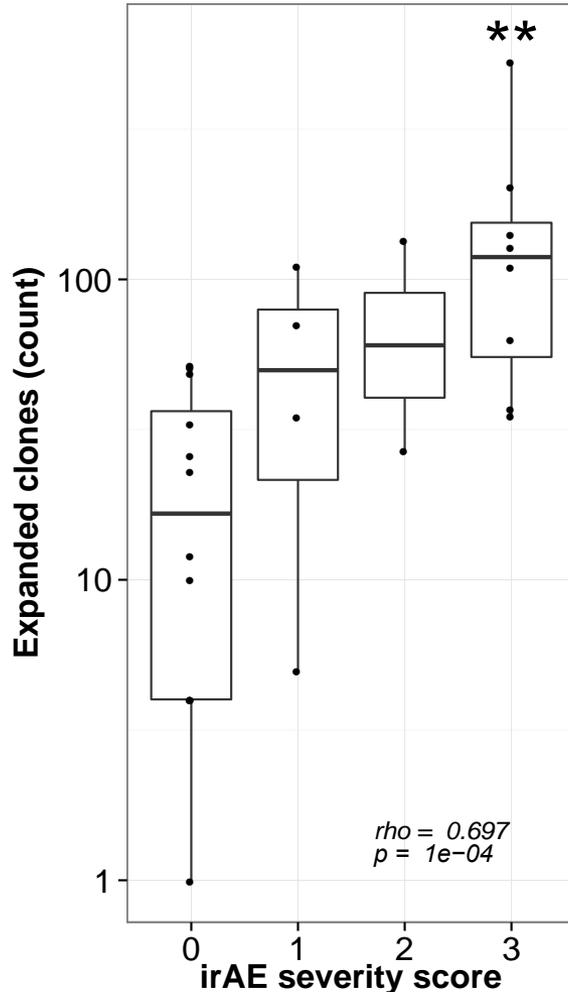
Sumit K. Subudhi^{a,1}, Ana Aparicio^{a,1}, Jianjun Gao^a, Amado J. Zurita^a, John C. Araujo^a, Christopher J. Logothetis^a, Salahaldin A. Tahir^a, Brinda R. Korivi^b, Rebecca S. Slack^c, Luis Vence^d, Ryan O. Emerson^e, Erik Yusko^e, Marissa Vignali^e, Harlan S. Robins^{e,f}, Jingjing Sun^g, James P. Allison^{d,g,2}, and Padmanee Sharma^{a,d,g,2}

^aDepartment of Genitourinary Medical Oncology, The University of Texas MD Anderson Cancer Center, Houston, TX 77030; ^bDepartment of Radiology, The University of Texas MD Anderson Cancer Center, Houston, TX 77030; ^cDepartment of Biostatistics, The University of Texas MD Anderson Cancer Center, Houston, TX 77030; ^dImmunotherapy Platform, The University of Texas MD Anderson Cancer Center, Houston, TX 77030; ^eAdaptive Biotechnologies, Seattle, WA 98102; ^fFred Hutchinson Cancer Research Center, Seattle, WA 98102; and ^gDepartment of Immunology, The University of Texas MD Anderson Cancer Center, Houston, TX 77030

Contributed by James P. Allison, August 17, 2016 (sent for review May 31, 2016; reviewed by Nina Bhardwaj, Charles G. Drake, and Owen N. Witte)

Clonal expansion correlates with AE severity in CRPC

Pre- and post-Ipilimumab comparison
of clonal expansion and repertoire turnover

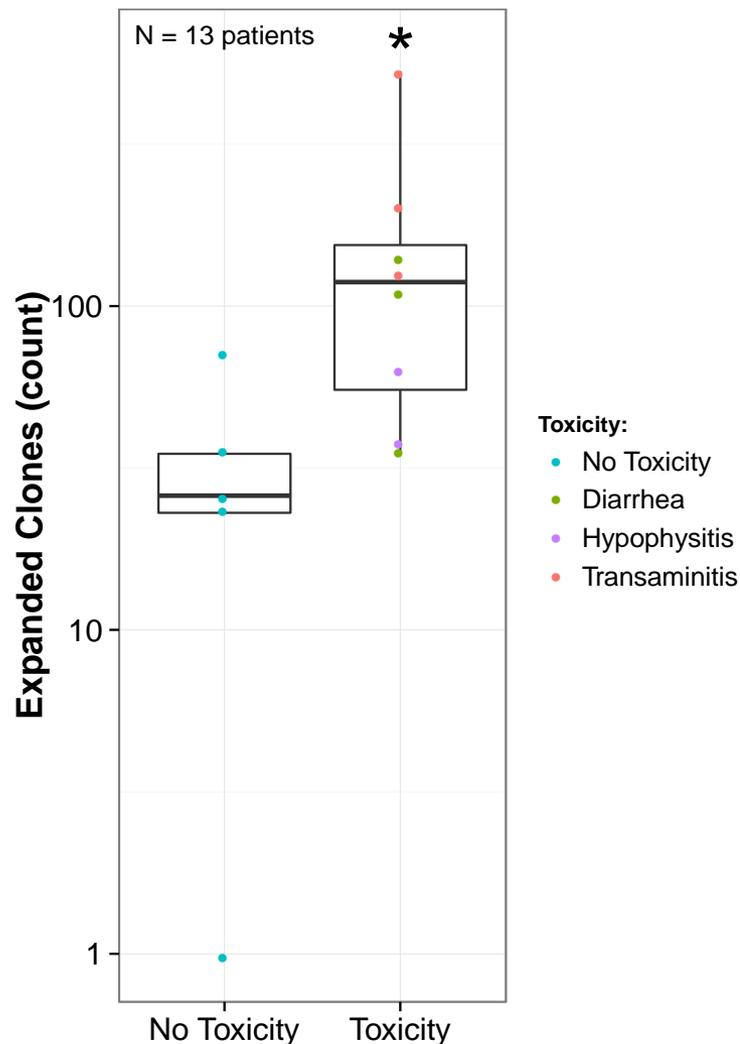


Source: Pam Sharma, MDACC – AACR 2015

Key Takeaways

- Castration-resistant prostate cancer (CRPC) patients were treated with **androgen deprivation therapy** followed by **multiple doses of ipilimumab** (10mg/kg)
- **Higher** than average **toxicities** caused the trial to stop prematurely
- **Patients experiencing AEs** compared to patients with little or no toxicities showed **increased clonal expansion and repertoire turnover**

Clonal expansions detected in blood draws prior to the onset of AEs



Source: Pam Sharma, MDACC – AACR 2015

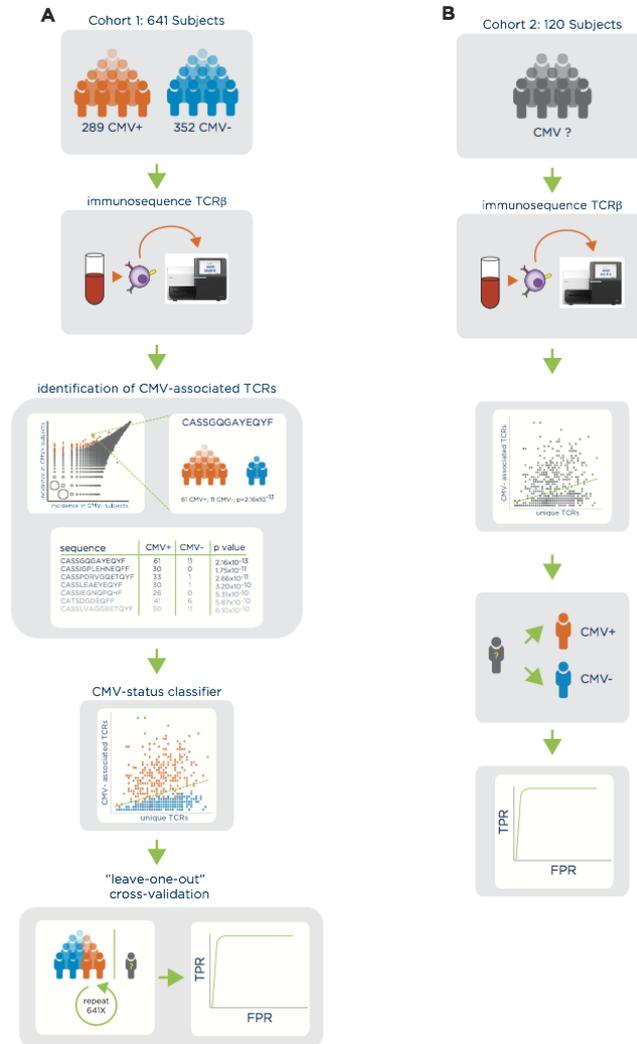
Key Takeaways

- Patients with Grade 3 AEs showed greater clonal expansion in blood draws (PBMCs) just prior to onset of toxicities
- Most common toxicities include:
 - Diarrhea
 - Hypophysitis
 - Transaminitis

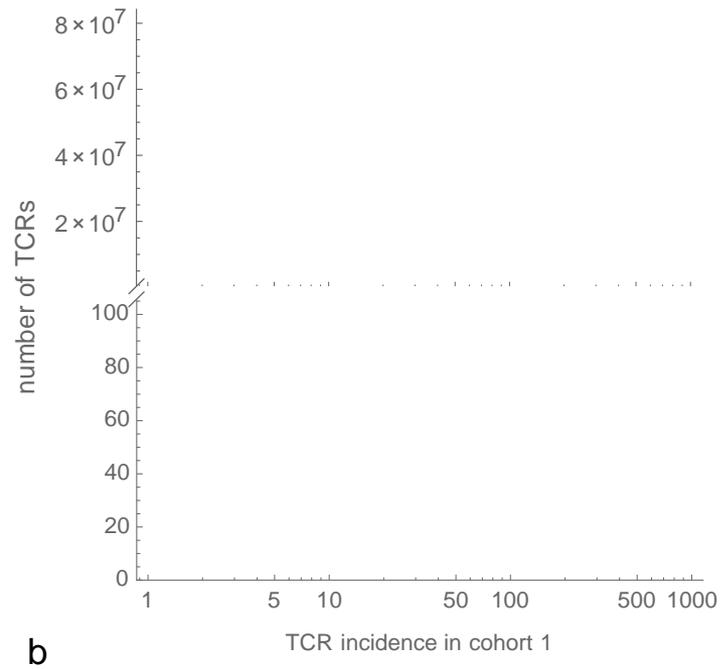
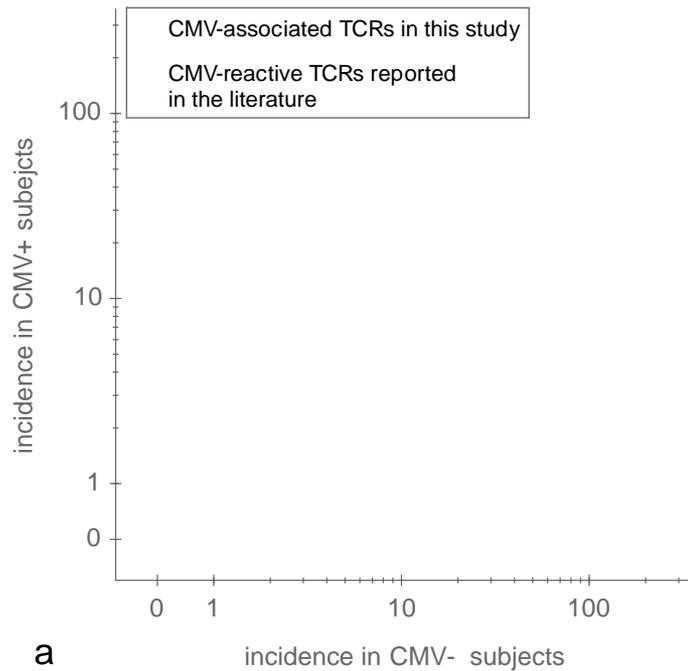
CMV Public TCRs – Dataset

- 640 healthy bone marrow donors
- HLA typing
- CMV serostatus: 45% CMV+, 55% CMV-
- ~100 million different TCRs detected
- Are some TCRs statistically associated with CMV status?

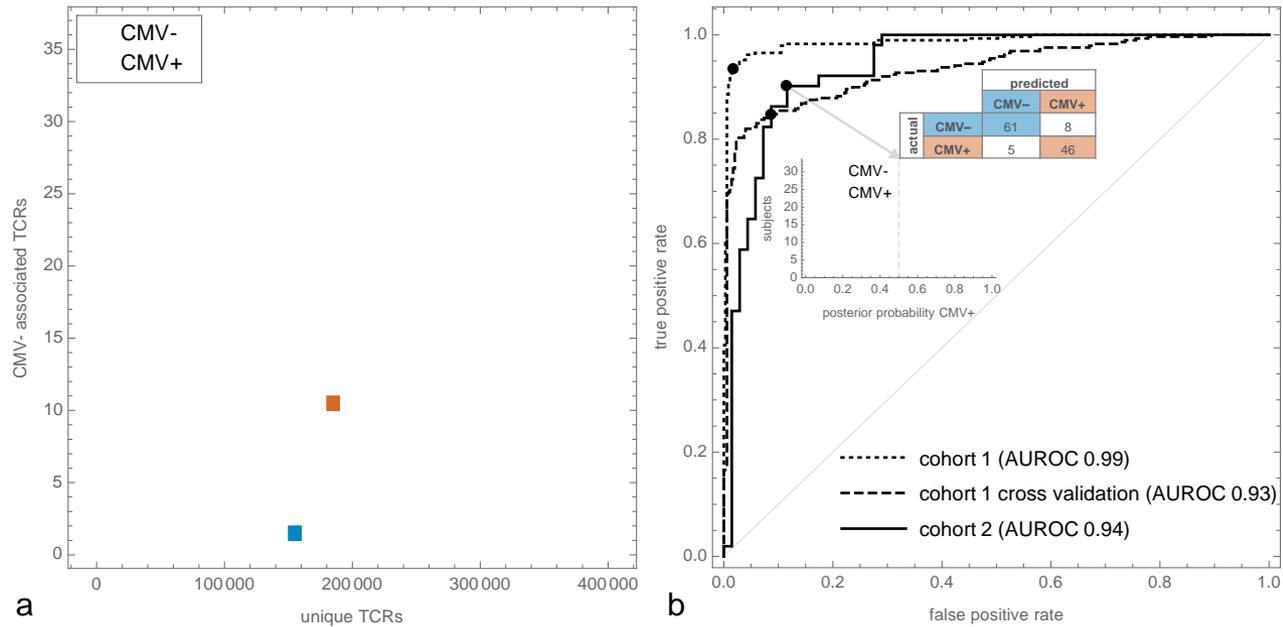
Search for public TCRs to diagnose CMV



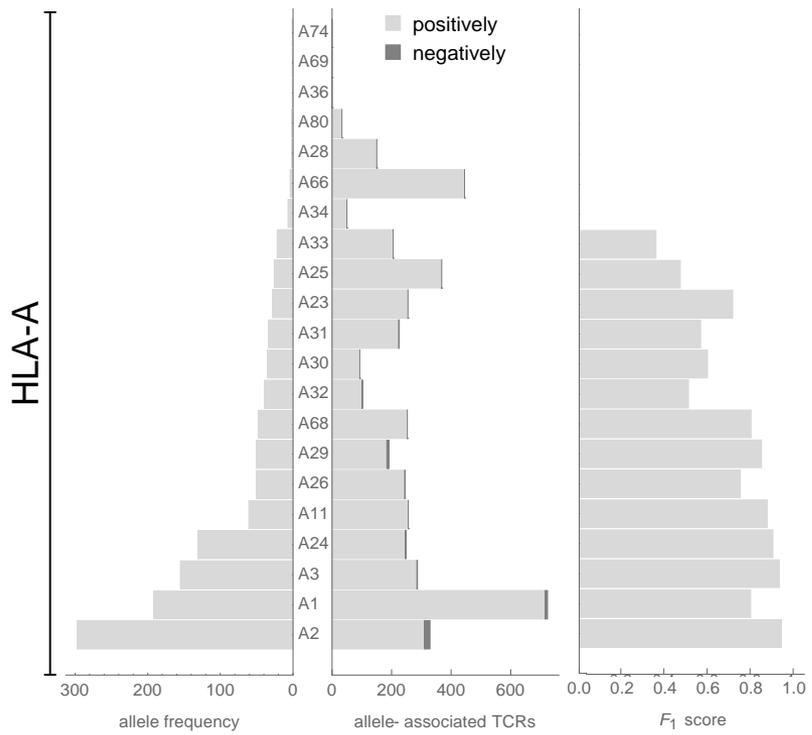
We find many CMV specific clones



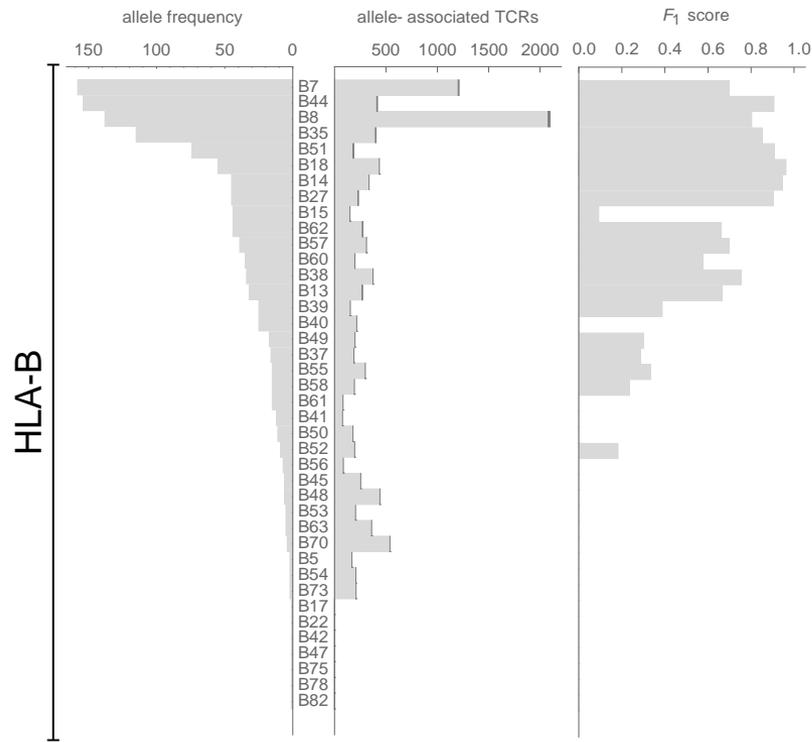
These clones are sufficient to diagnose CMV



We can consider HLA a feature and use public TCRs to HLA type



For HLA class II as well





The players

Will deWitt
Ryan Emerson
Marissa Vignali
Annie Sherwood
Bryan Howie
Edward Osborne
Alex Snyder

John Hansen
Hootie Warren
Karen Makar
Pam Sharma
Jim Allison
Simon Dovedi

Paul Lindau