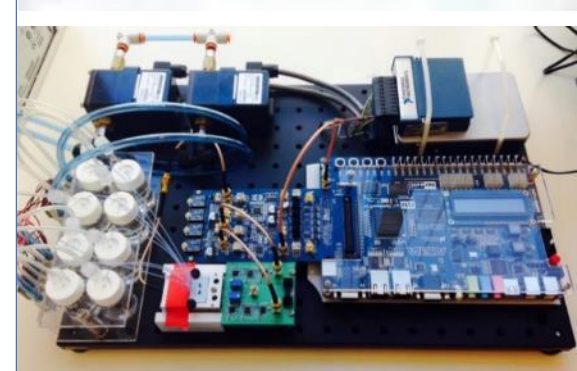




Defining Vulnerabilities of T-cell Lymphomas: *we are close to the finalization...of the beginning*

David Weinstock
dweinstock@partners.org
<http://weinstock.dfci.harvard.edu>

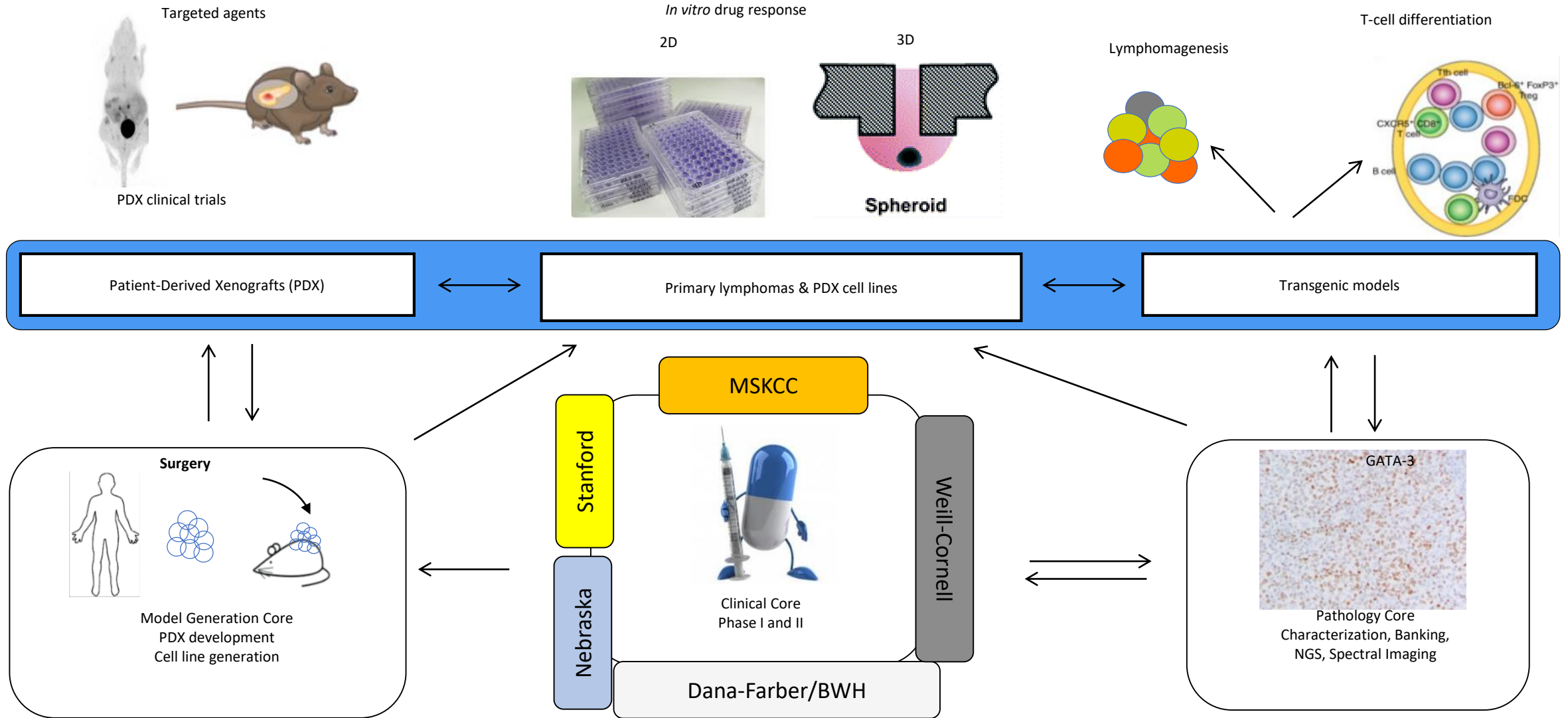


Disclosures

Company name	Research support	Employee	Consultant	Stockholder	Speakers bureau	Advisory board	Other
Travera			X	X			Founder
Novartis	X		X				
Dragonfly			X				
Aileron	X						
Abbvie	X						
Astra Zeneca	X						
Surface Oncology	X						
Monsanto							Expert Witness
Genentech							Expert Witness
Verastem	X						
Daiichi	X						
DxTerity						X	



Translational Discovery in Peripheral T-Cell Lymphomas



3 years of progress

Wu et al. Cancer Cell 2015

Crescenzo et al. Cancer Cell 2015

Townsend et al. Cancer Cell 2016

Yoda et al. Nature Medicine 2016

Dunford et al. Nature Genetics 2017

Horwitz et al. Blood 2018

Murakami and Weinstock. Nature 2018

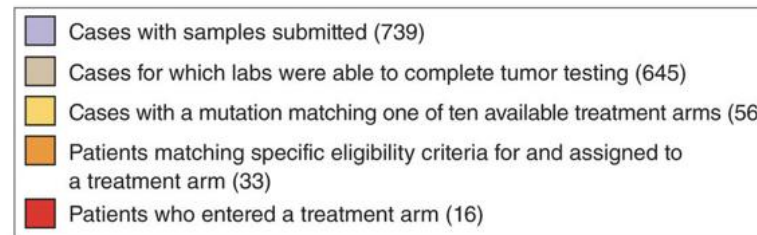
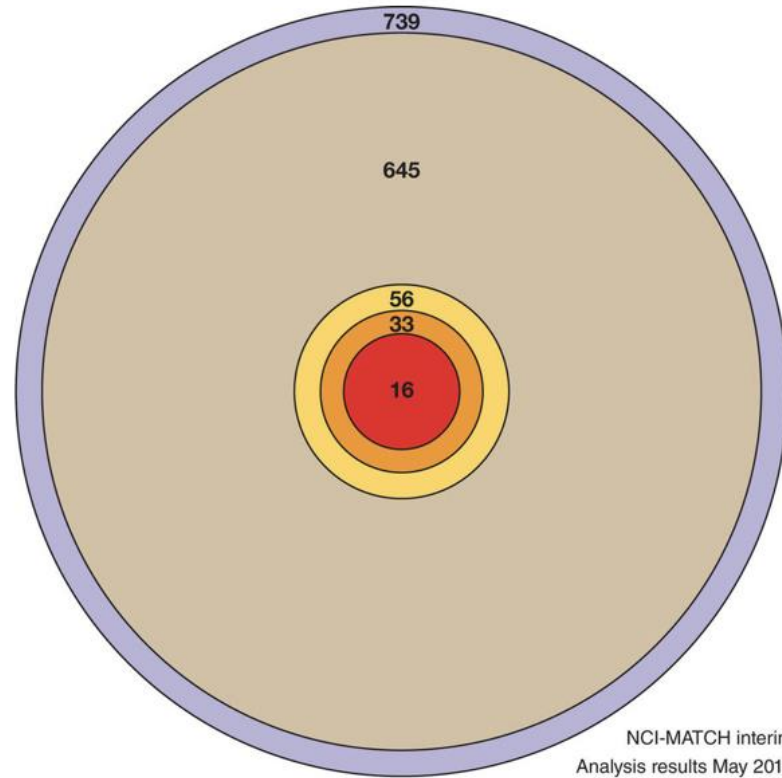
Buchner et al. Cell 2018

Ng et al. Nature Communications 2018 (in press)

Ng et al. Blood 2018 (in press)

Intlekofer et al. Nature 2018 (in press)

Cutting edge in genomics-based drug selection



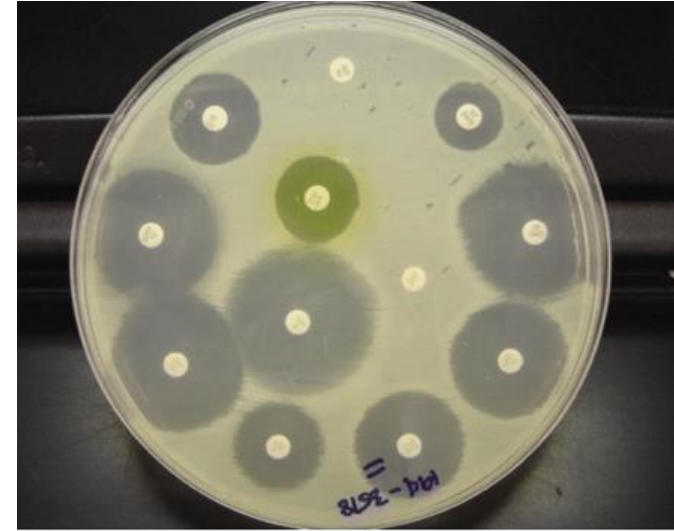
Personalized Medicine for Cancer: *Genetic Testing*



Highly successful for some cancers
but unavailable for most

*Letai et al. Nat. Med. (2017);
Vivek Prasad, Nature. (2016);
Friedman et al. Nat. Rev. Cancer (2015)*

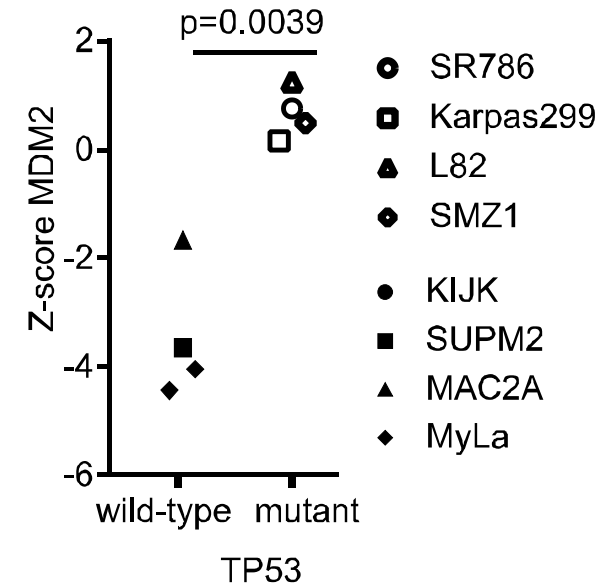
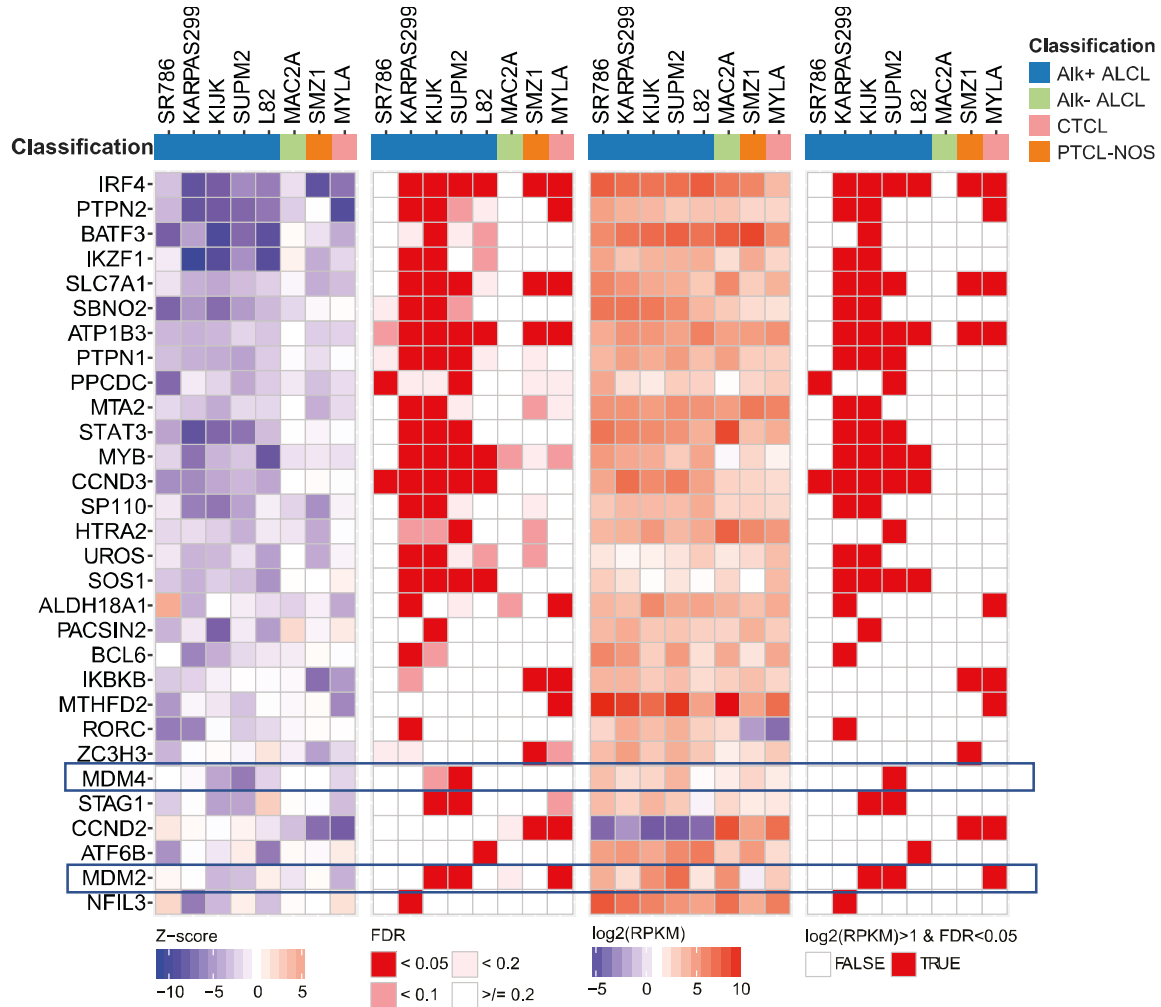
Personalized Medicine for Infectious Disease: *Antibiotic Susceptibility Testing*



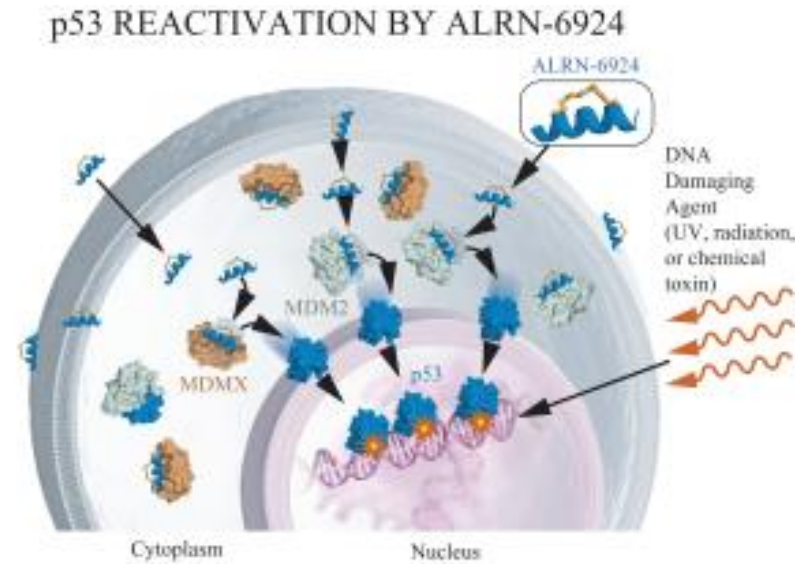
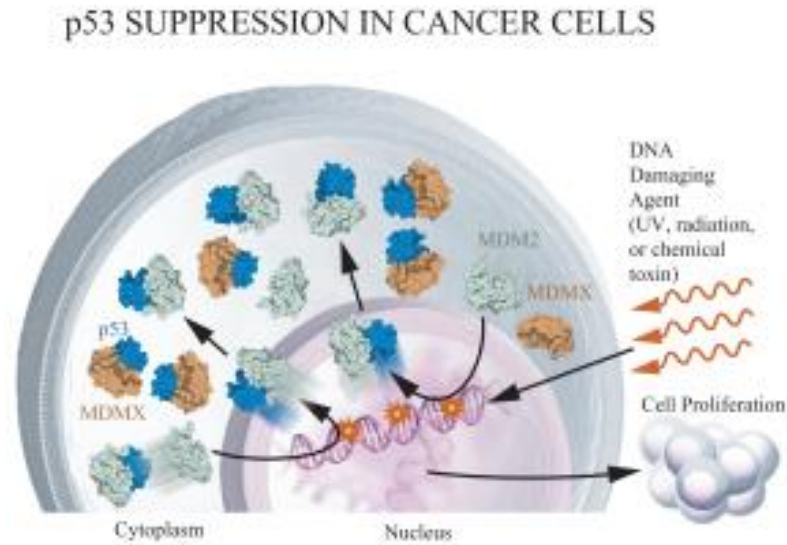
Highly successful across a wide
range of organisms and drugs

*Proliferation is a
functional biomarker*

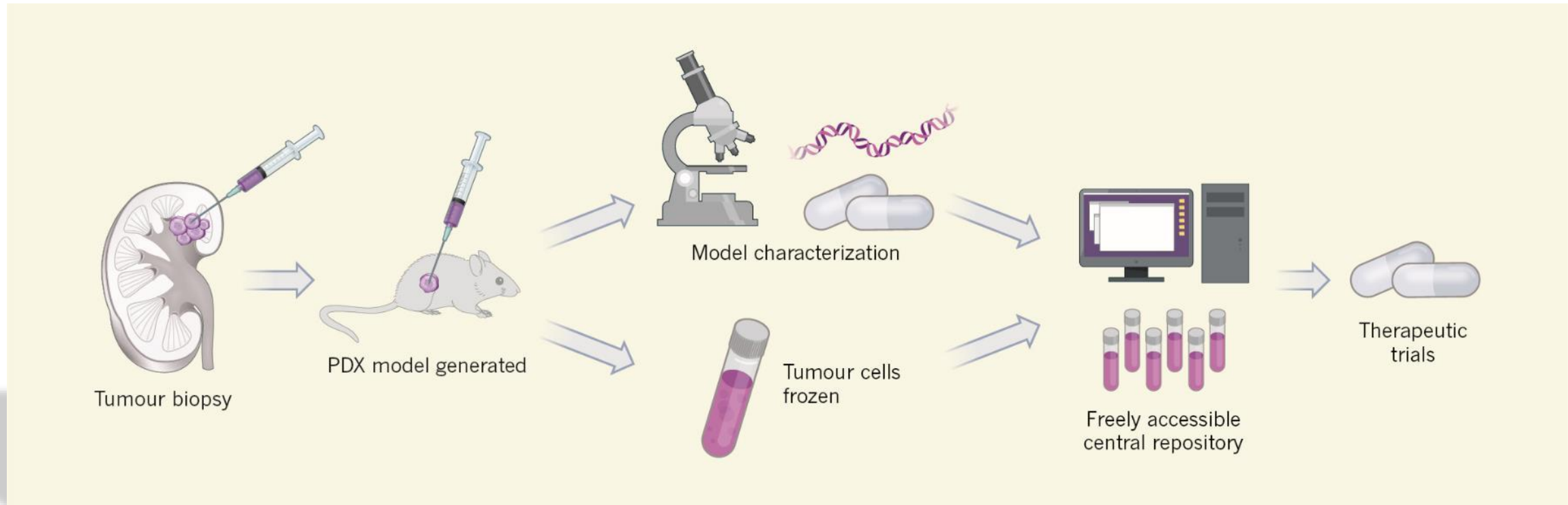
Vulnerability screening to define targets



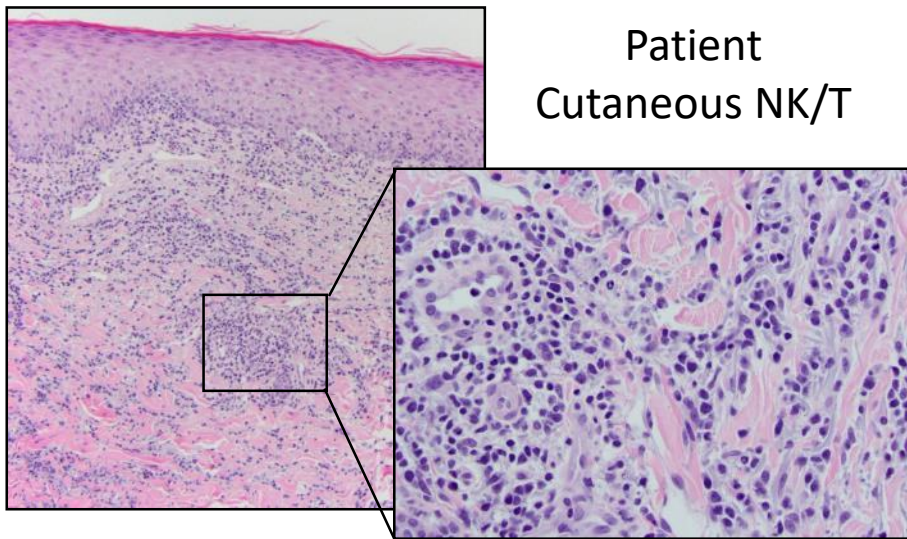
Targeting both MDM2 and MDMX



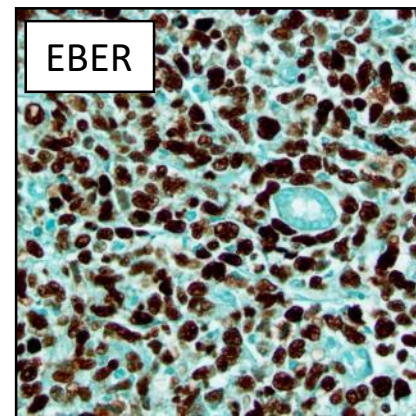
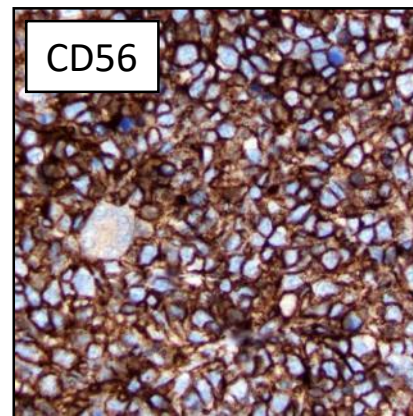
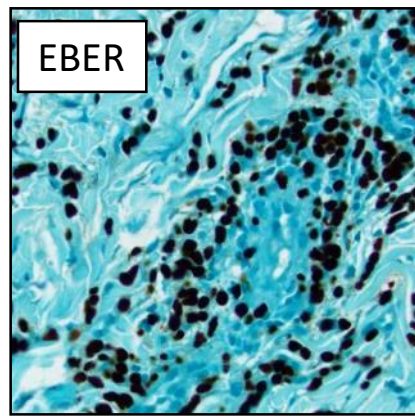
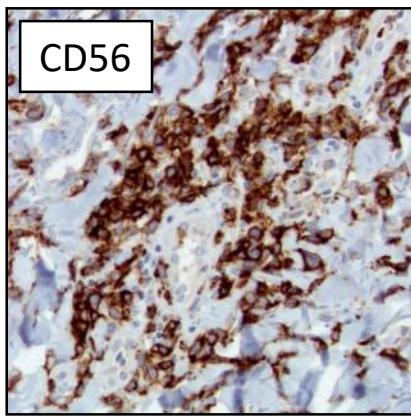
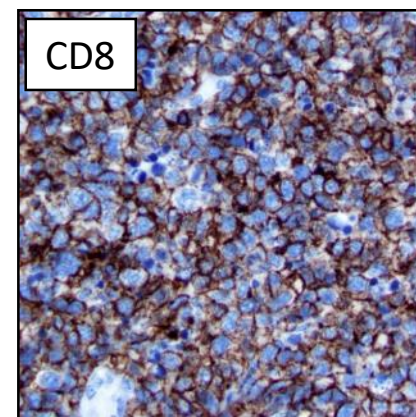
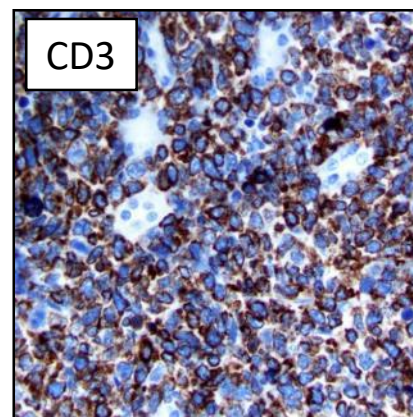
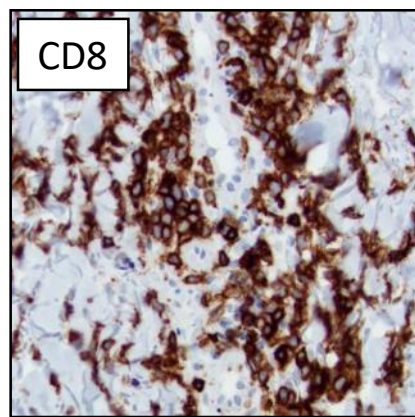
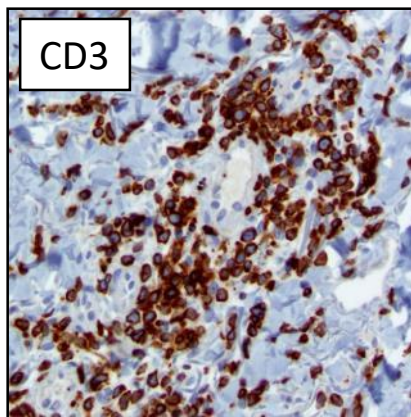
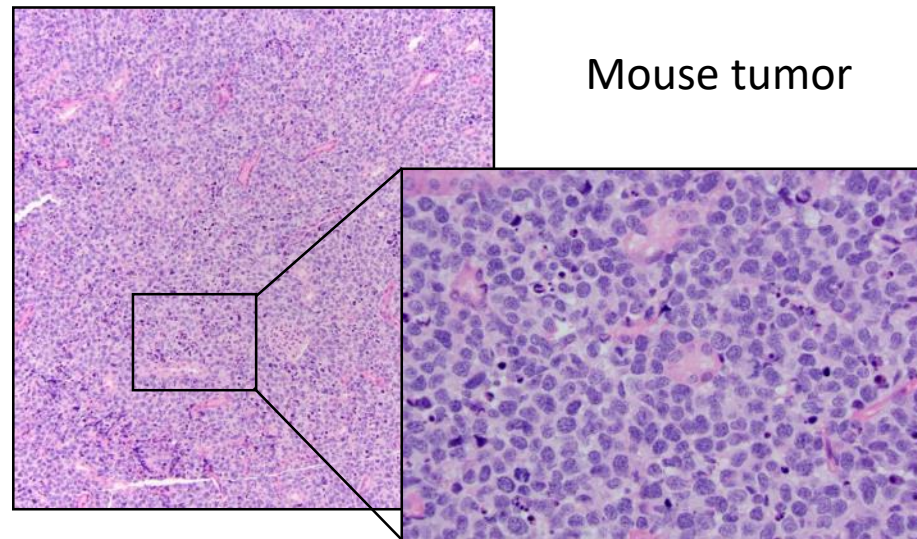
Patient-derived xenografts to model human cancer



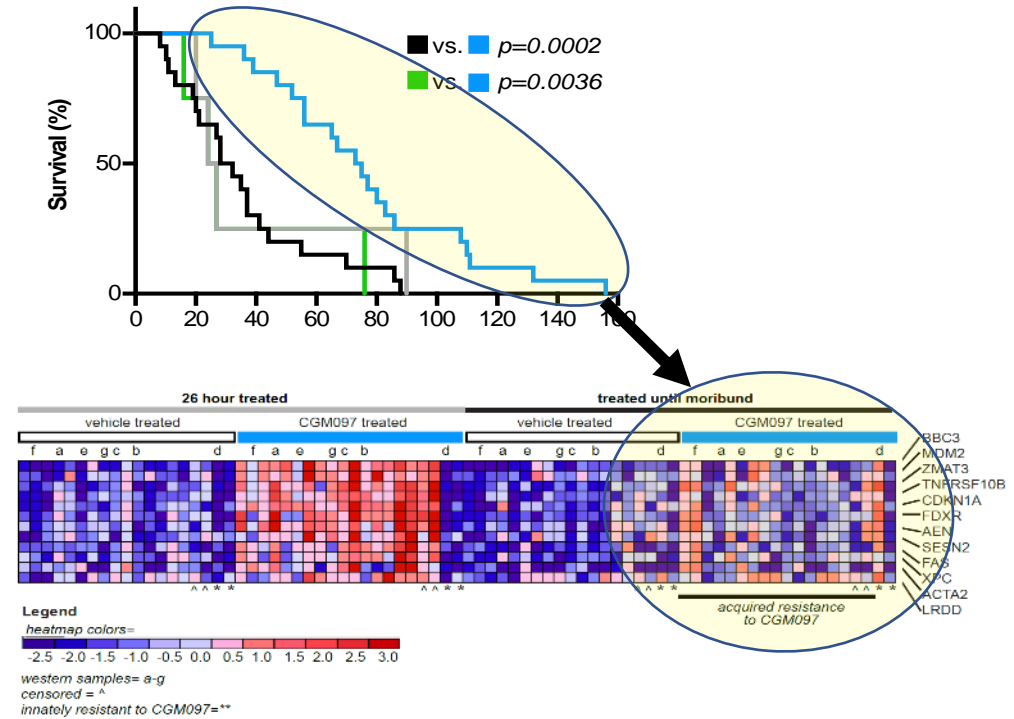
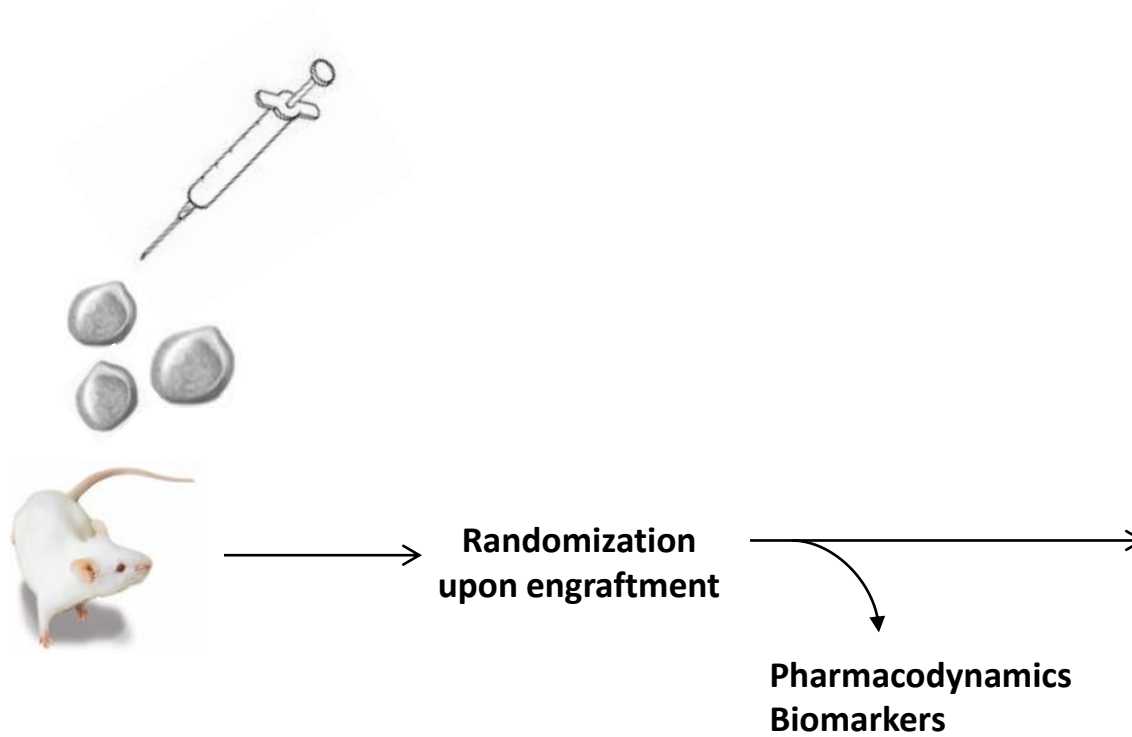
Patient
Cutaneous NK/T



Mouse tumor



Defining biomarkers, toxicity and resistance



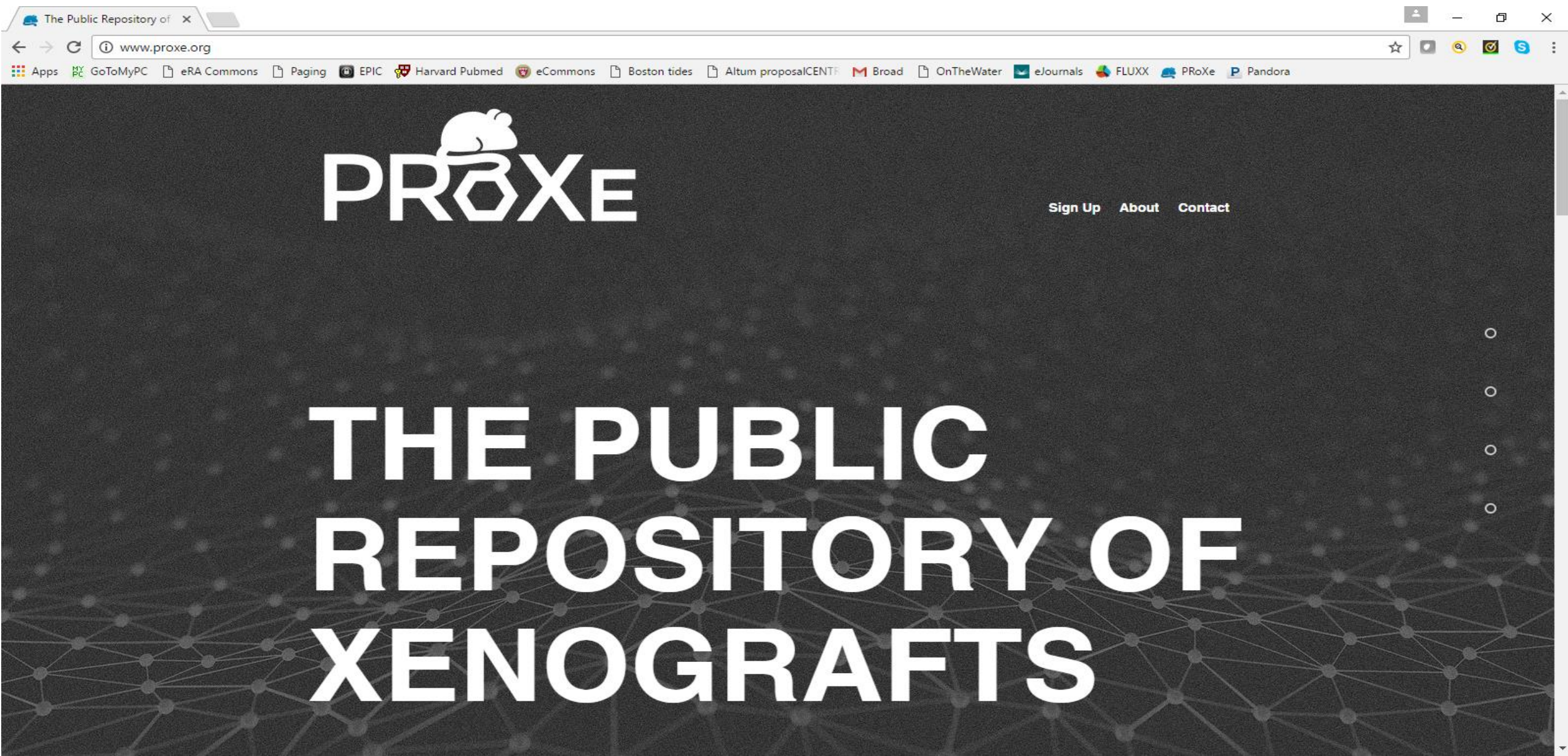
Enabling Research on Human Cancer

T-ALL
AML
B-ALL
AUL
BPDCN
Mantle cell lymphoma
Double-hit lymphoma
Marginal zone lymphoma
Follicular lymphoma
Transformed follicular lymphoma
Diffuse large B-cell lymphoma
High-grade with *MYC* rearr

HSTL
Primary cutaneous CD30+ TCL
T-PLL
AITL
ALK+ ALCL
ALK- ALCL
Mycosis Fungoides
Sezary Syndrome
Cutaneous NK/TCL
Extranodal NK/TCL
PTCL, NOS
ATLL

Alveolar Soft Part Sarcoma
Inflammatory myofibroblastic tumor
Neurofibroma
Osteosarcoma
Rhabdoid tumor
Solid pseudopapillary tumor
Wilms Tumor
Merkel cell carcinoma
400 Solid Tumors from Novartis

Public Repository of Xenografts (www.PRoXe.org)



The screenshot shows a web browser window with the URL www.proxe.org. The browser's address bar and tabs are visible at the top. The website's main content is on a dark background with a network diagram pattern. The logo "PROXE" is prominently displayed in white, with a stylized mouse head above the letter 'O'. To the right of the logo are the links "Sign Up", "About", and "Contact". Below the logo, the text "THE PUBLIC REPOSITORY OF XENOGRAFTS" is written in large, bold, white capital letters. On the right side of the page, there is a vertical navigation menu consisting of four small white circles.

The Public Repository of Xenografts (www.PRoXe.org)

PROXE

[Sign Up](#) [About](#) [Contact](#)

**THE PUBLIC
REPOSITORY OF
XENOGRAFTS**

Public Repository of Xenografts (www.PRoXe.org)



[Email us with feedback or to inquire about lines.](#)
 Show entries

PDX Name	WHO Category	Treatment Phase at Time of Sample	WHO Classification
SCAB-42072-V4-mCLP	ALL		B-ALL NOS
DFAB-13653-V1	ALL	Untreated	B-ALL NOS
CBAB-28262-V0	ALL	Untreated	B-ALL with t(v;11q23) MLL rearranged
CBAB-12567-V0	ALL		
CBAB-65628-V1	ALL		

Showing 1 to 5 of 199 entries

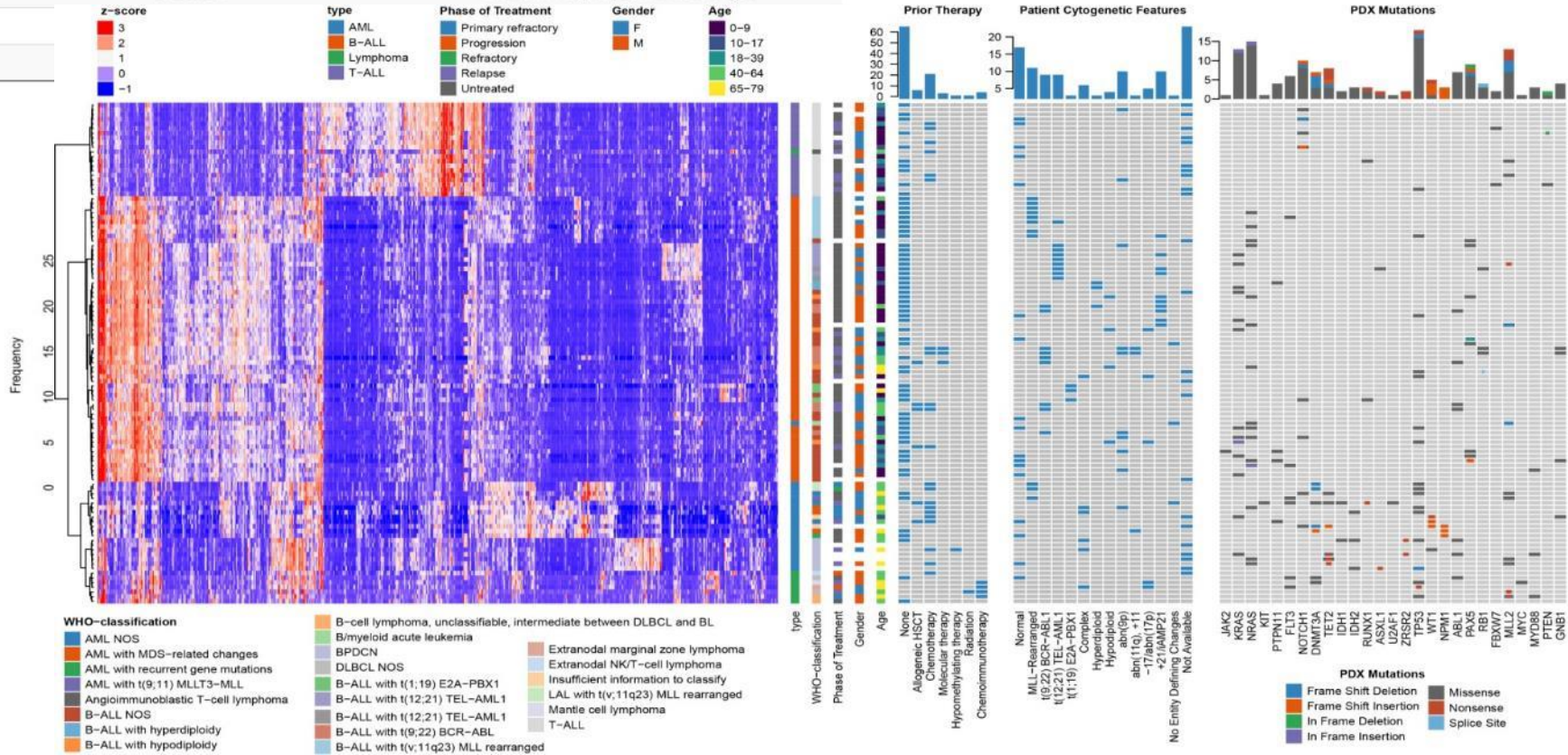
Plot Type
Histogram

Variable to plot
Age

Scaling
linear

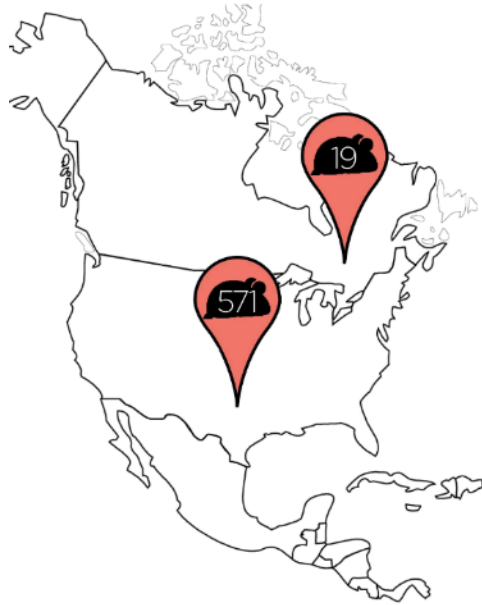
Breaks
[Custom]

Break Count
1 25 100



PROXE

Where Are We?



Report Card	
Total Users: 824	
Institutions: 334	
Countries: 32	

North America
USA: 571
Canada: 19

South America
Argentina: 1
Brazil: 1
Chile: 1

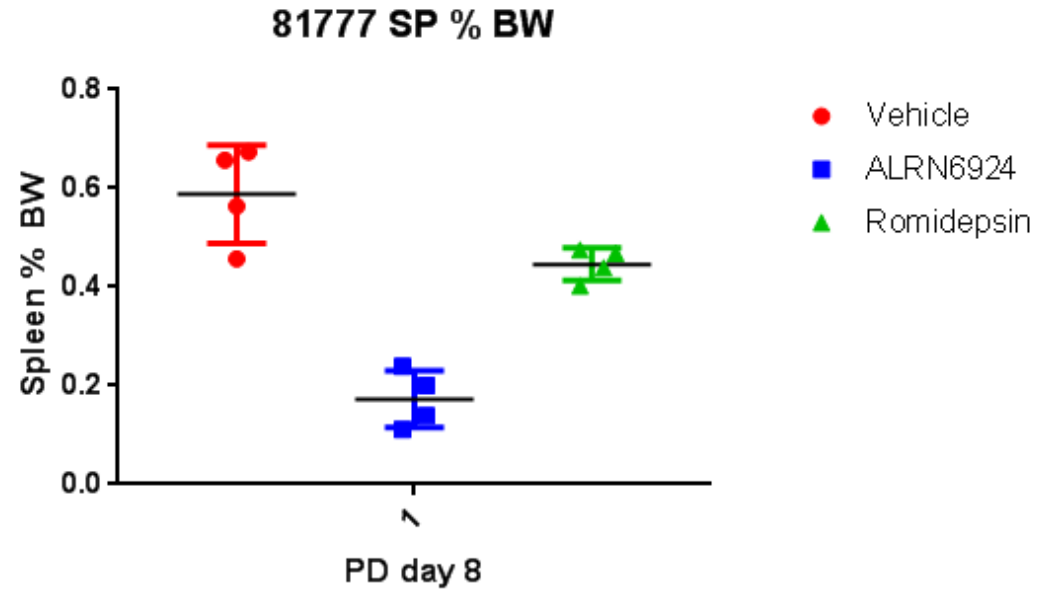
Asia	
Japan: 15	India: 9
China: 4	Thailand: 1
S. Korea: 7	Taiwan: 1
Singapore: 12	

Europe	
UK: 53	Israel: 4
Germany: 28	Norway: 3
France: 18	Finland: 3
Switzerland: 16	Portugal: 2
Spain: 10	Greece: 1
Italy: 9	Denmark: 1
Poland: 6	Czech Rep.: 1
Netherlands: 5	Austria: 1
Belgium: 4	

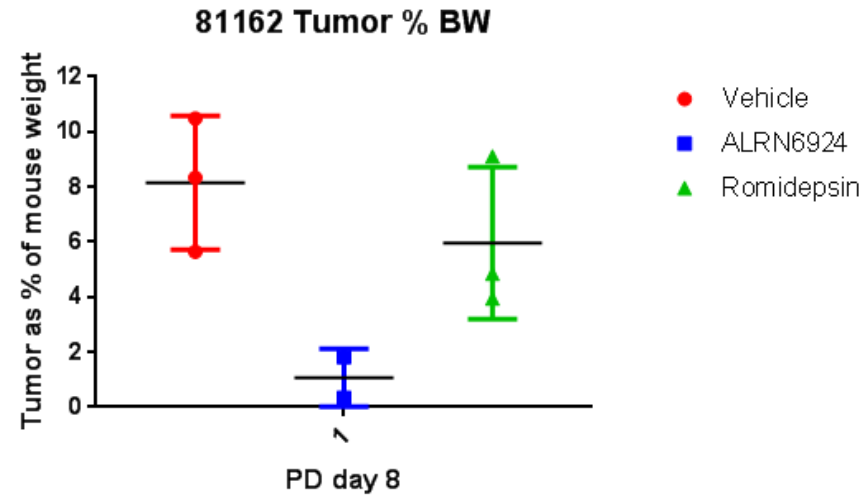
Australia: 1



CBTL-81777; Disseminated hepatosplenic T-cell lymphoma



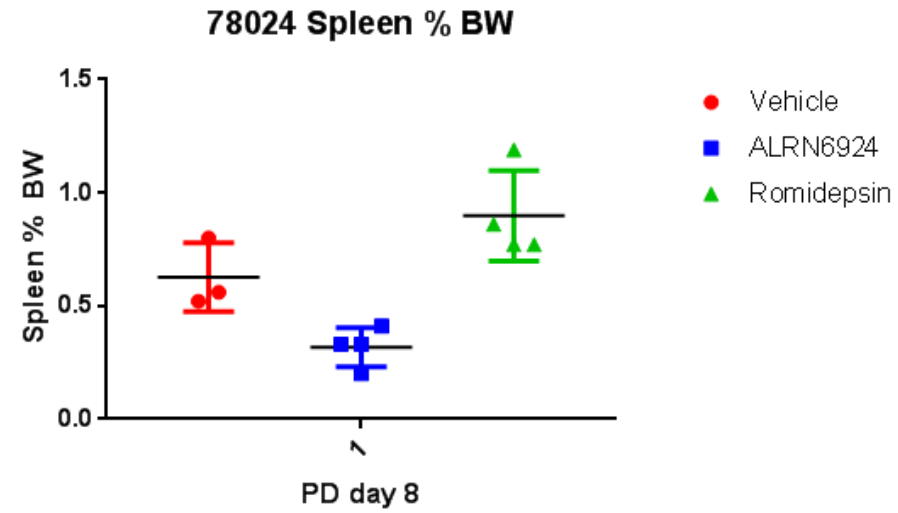
WCTL-81162; Subcutaneous Alk+ anaplastic large cell lymphoma



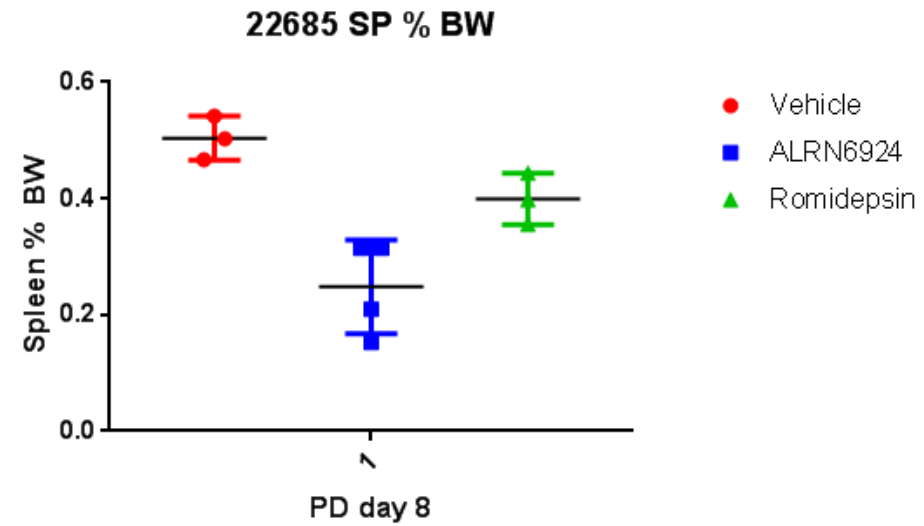
Note: 1 ALRN-treated mouse was found dead on day 3, no obvious toxicity, cause of death unknown



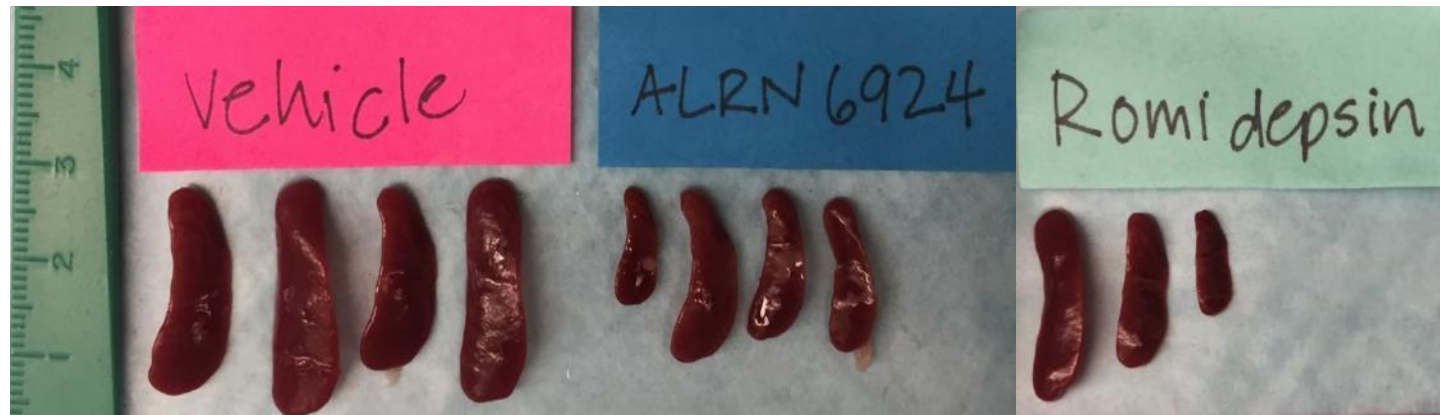
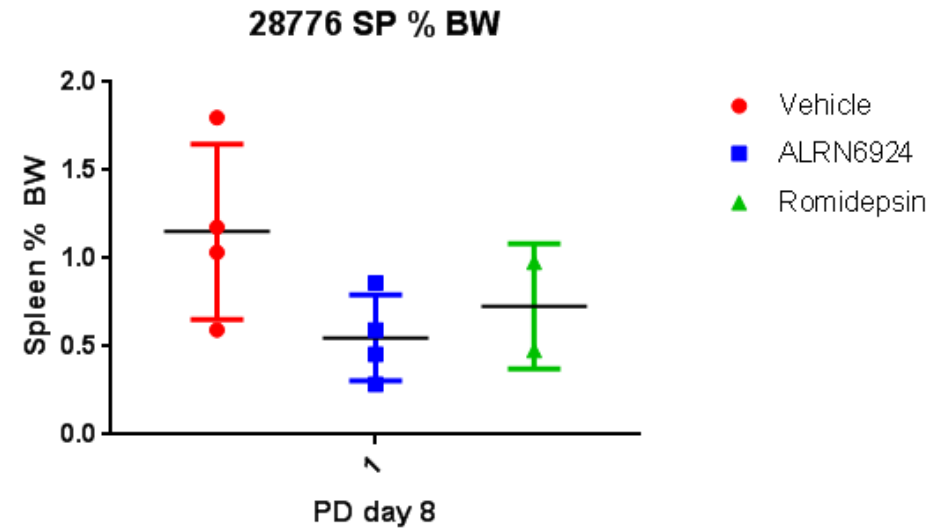
DFTL-78024; Disseminated angioimmunoblastic T-cell lymphoma



DFTL-22685; Cutaneous T-cell lymphoma/Sezary



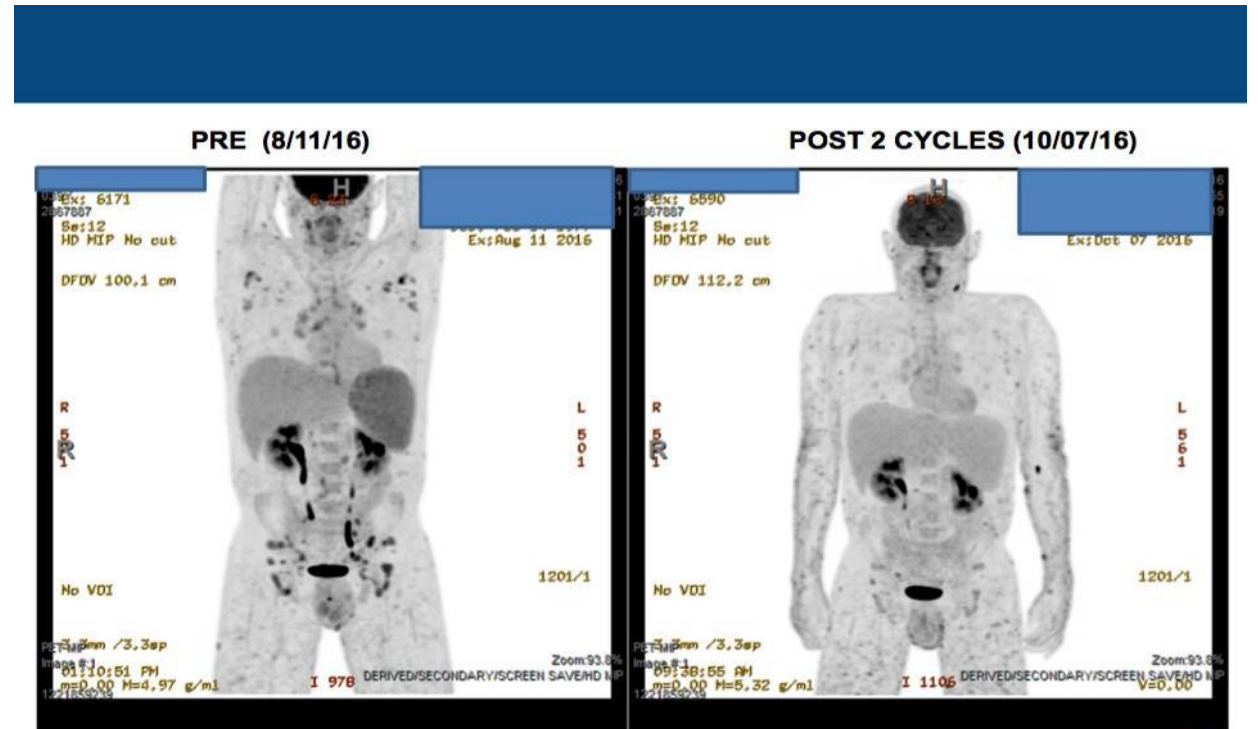
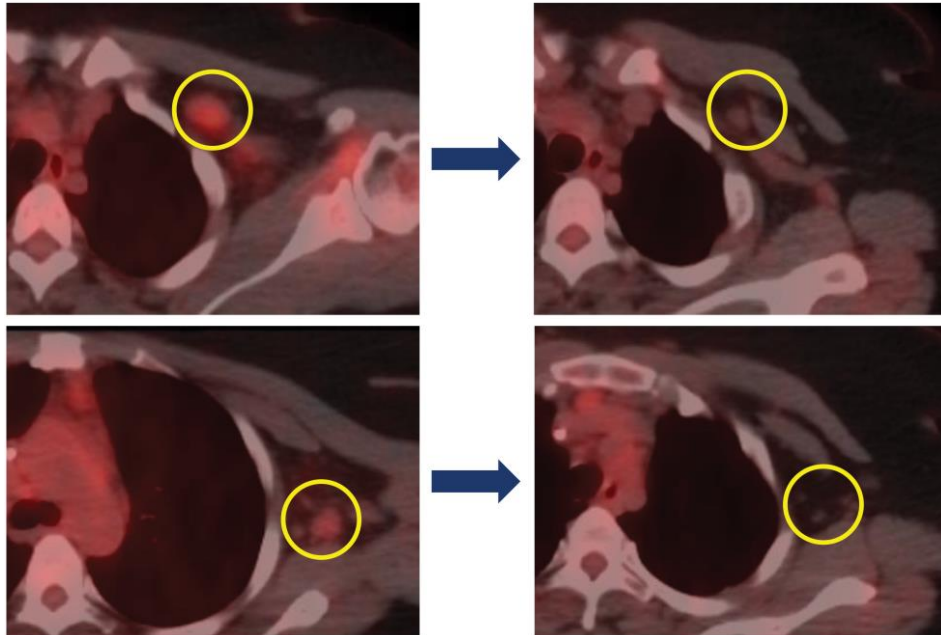
DFTL-28776; Disseminated T-cell prolymphocytic leukemia



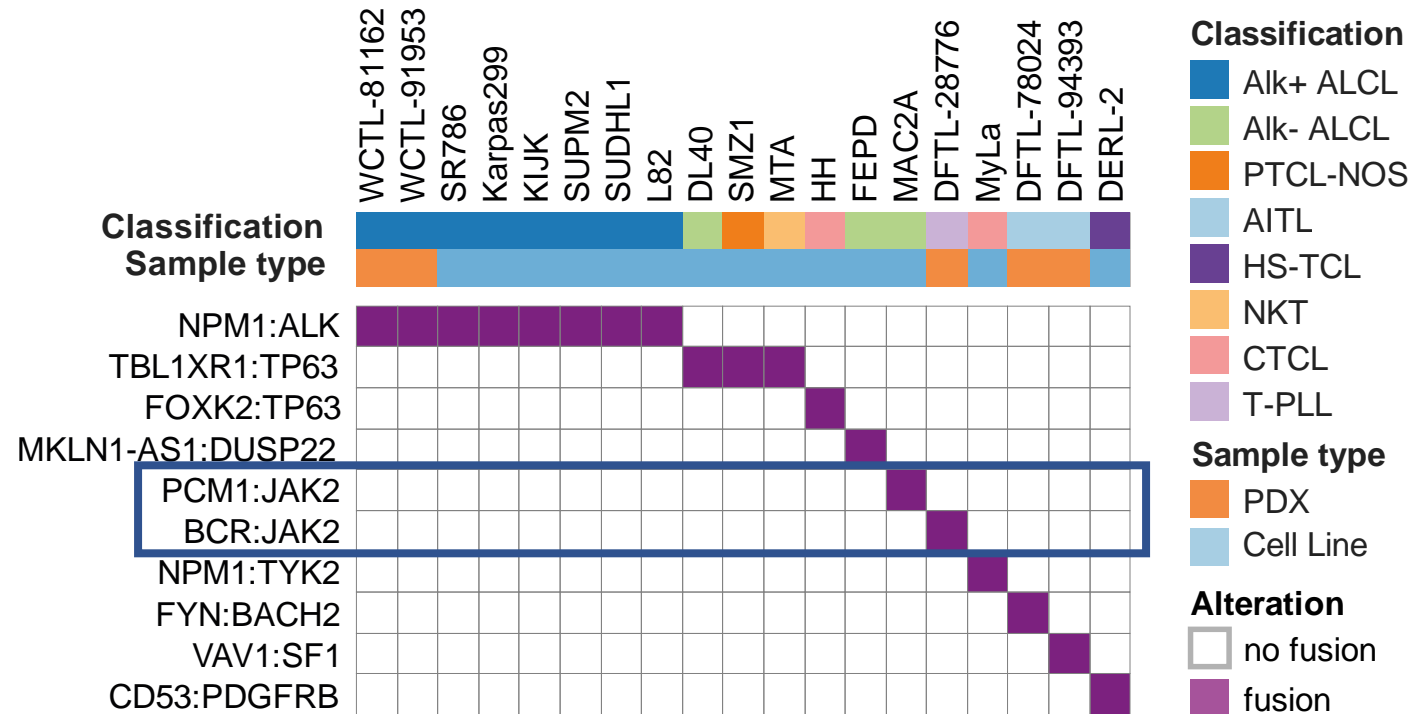
Stapled peptide against MDM2/MDM4 – patients #1 and #2

Oct 22, 2015: Pre-Dose, 2.1 mg/kg

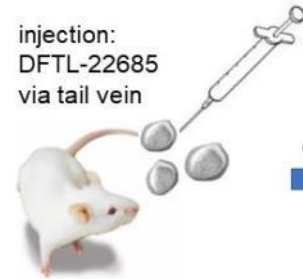
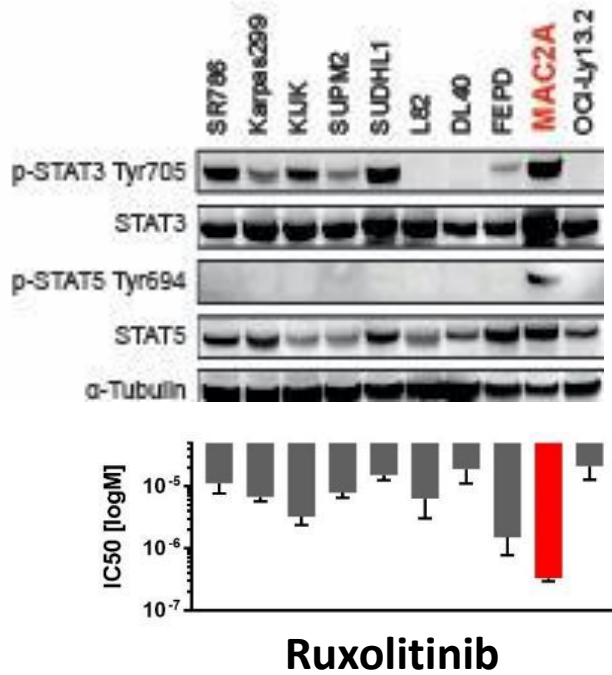
May 2, 2016: Cycle 6



Start with low-hanging fruit: highly targetable



Start with low-hanging fruit: JAK2 fusions

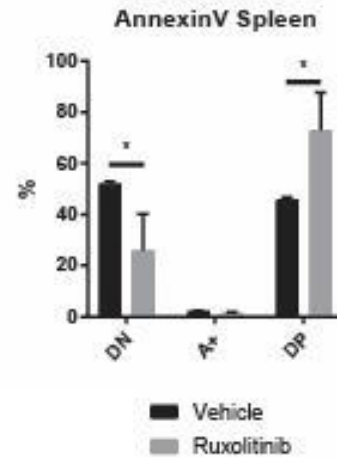
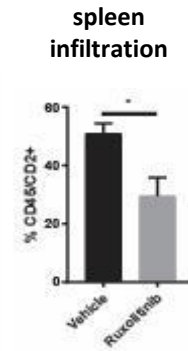
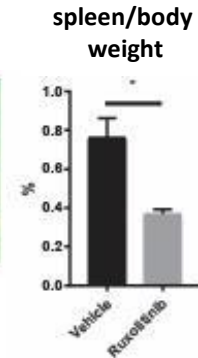


engraftment

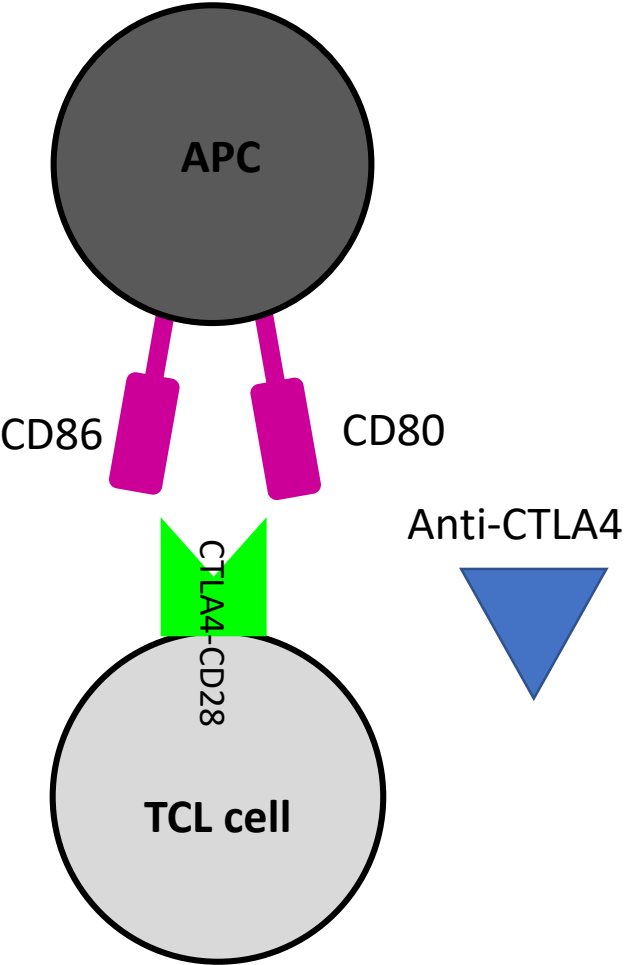
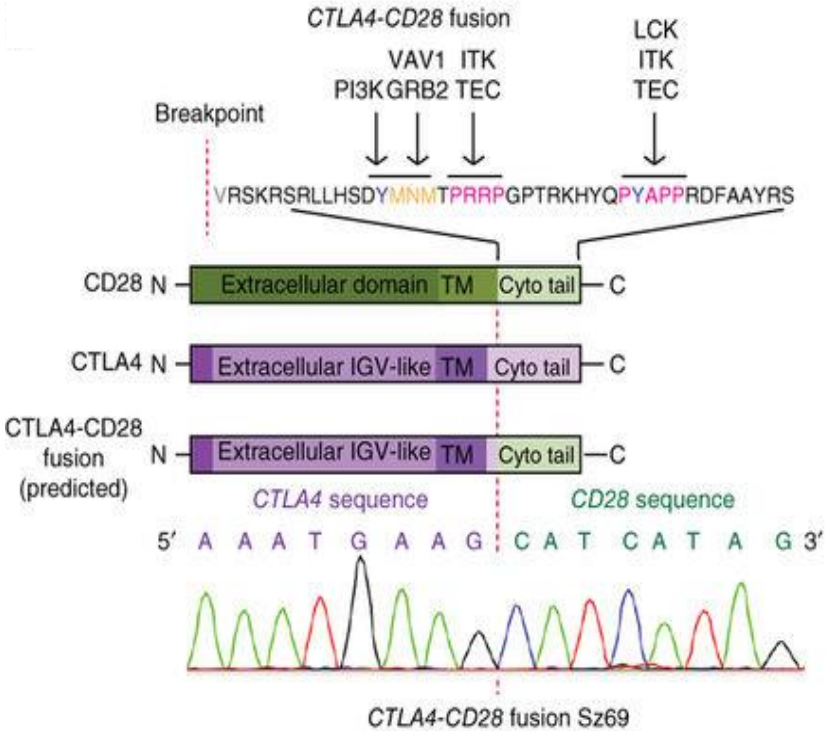
>0.5% disease in PB:
randomization

treatment d1-d7:
ruxolitinib 90mg/kg b.i.d.

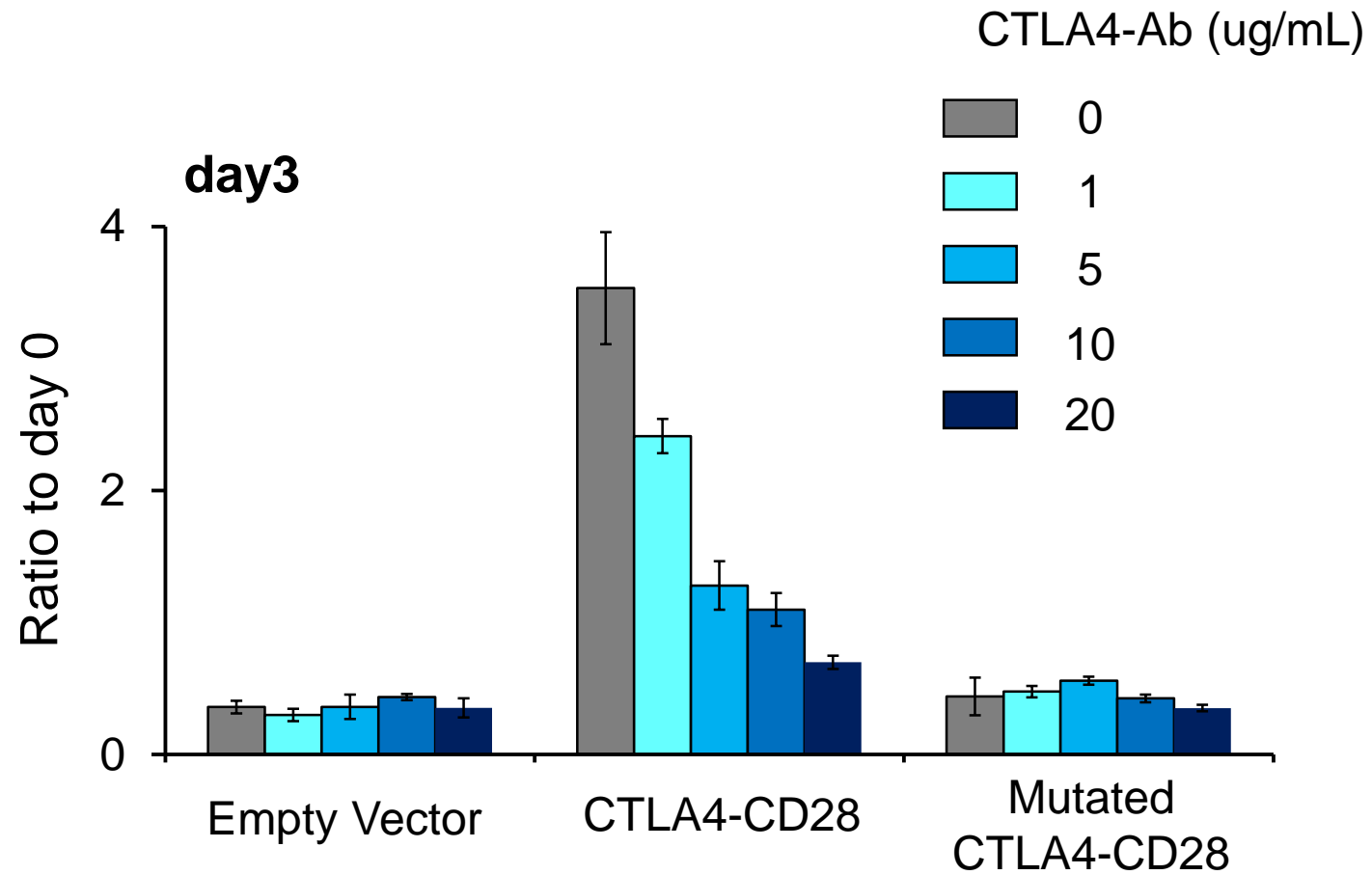
day 8:
assess tumor burden



CTLA4-CD28 and ICOS-CD28 fusions co-opt checkpoint signaling

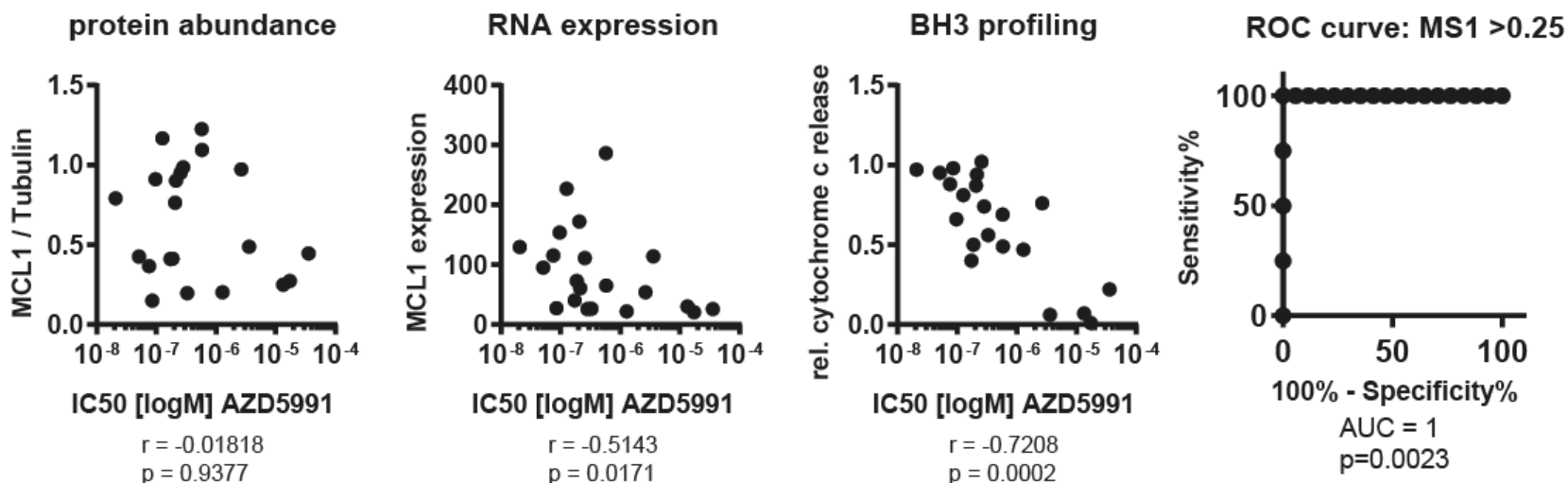


Ipilimumab blocks CTLA4-CD28-mediated transformation



Functional precision cancer medicine—moving beyond pure genomics

Anthony Letai



PERSPECTIVE

VOLUME 23 | NUMBER 9 | SEPTEMBER 2017

nature
medicine

Functional precision cancer medicine—moving beyond pure genomics

Anthony Letai

NATURE REVIEWS | CANCER

OPINION

Targeting minimal residual disease: a path to cure?

Marlise R. Luskin, Mark A. Murakami, Scott R. Manalis and David M. Weinstock

Defining therapeutic vulnerabilities using functional approaches

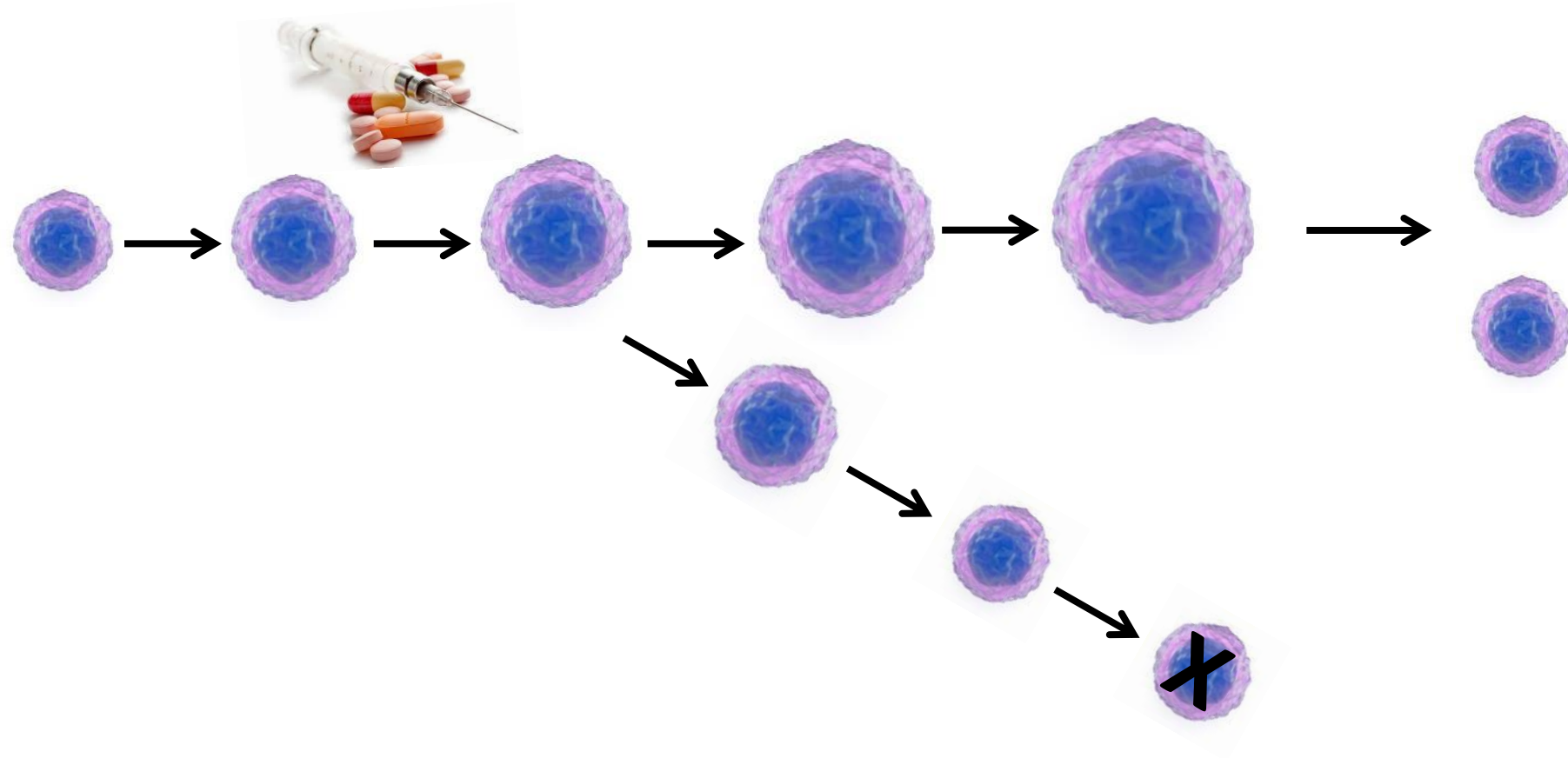
Requirements

1. Rapid and precise
2. Small sample size from blood or fine needle aspirate
3. Single cell resolution

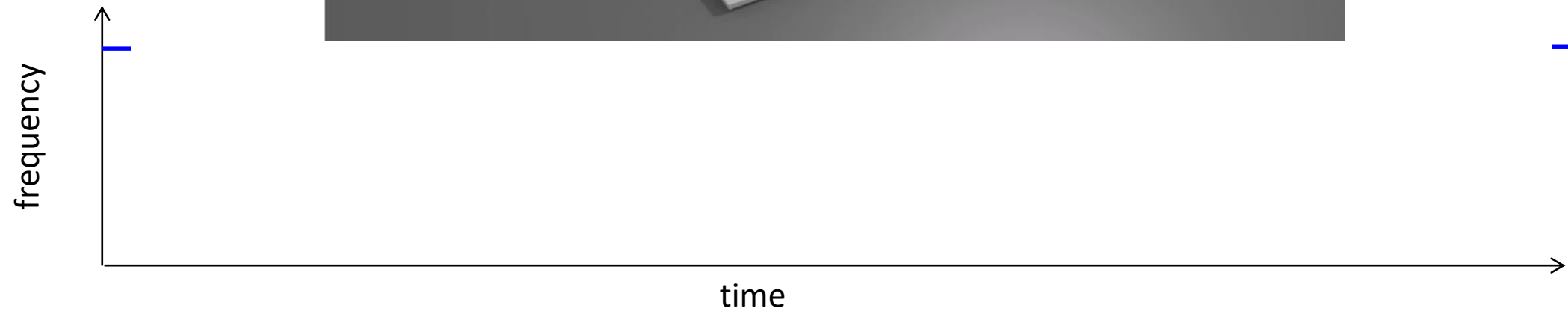
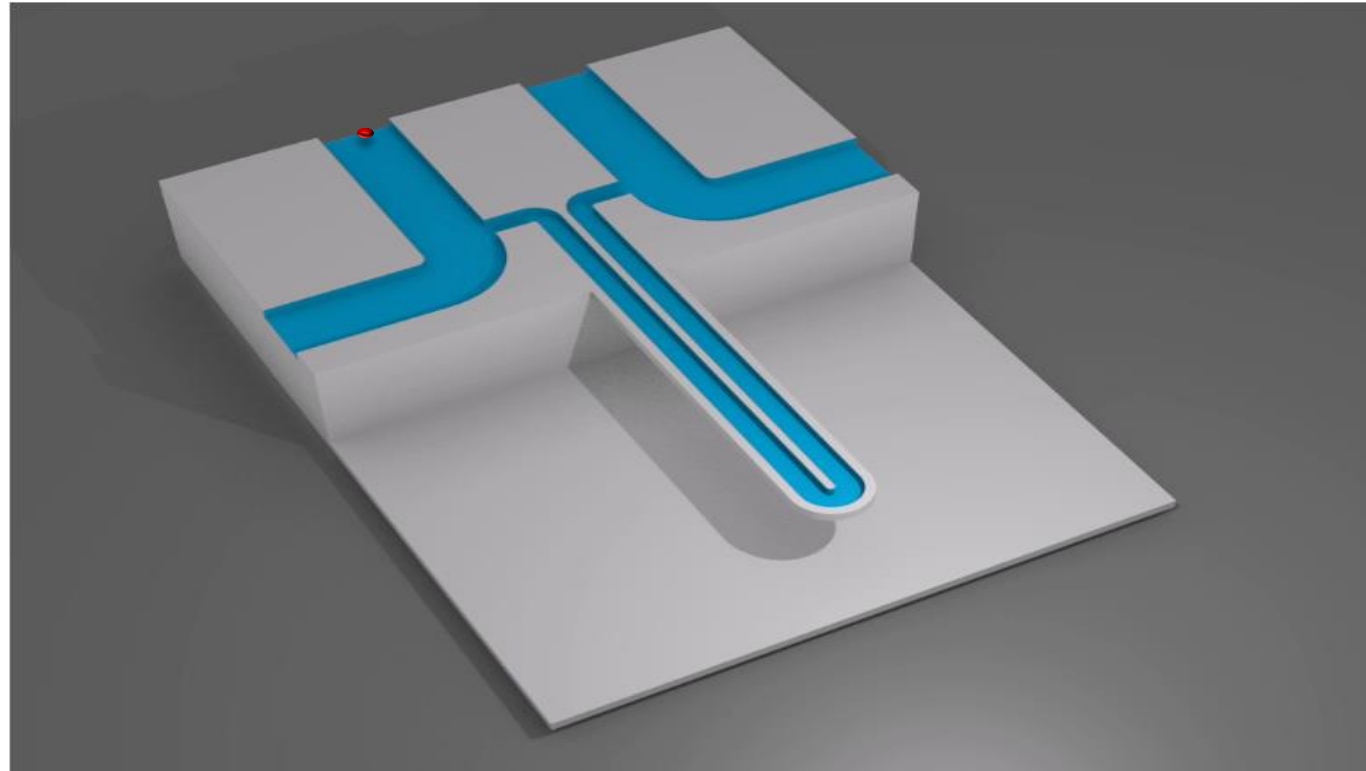


Scott Manalis, PhD
Koch Institute/MIT

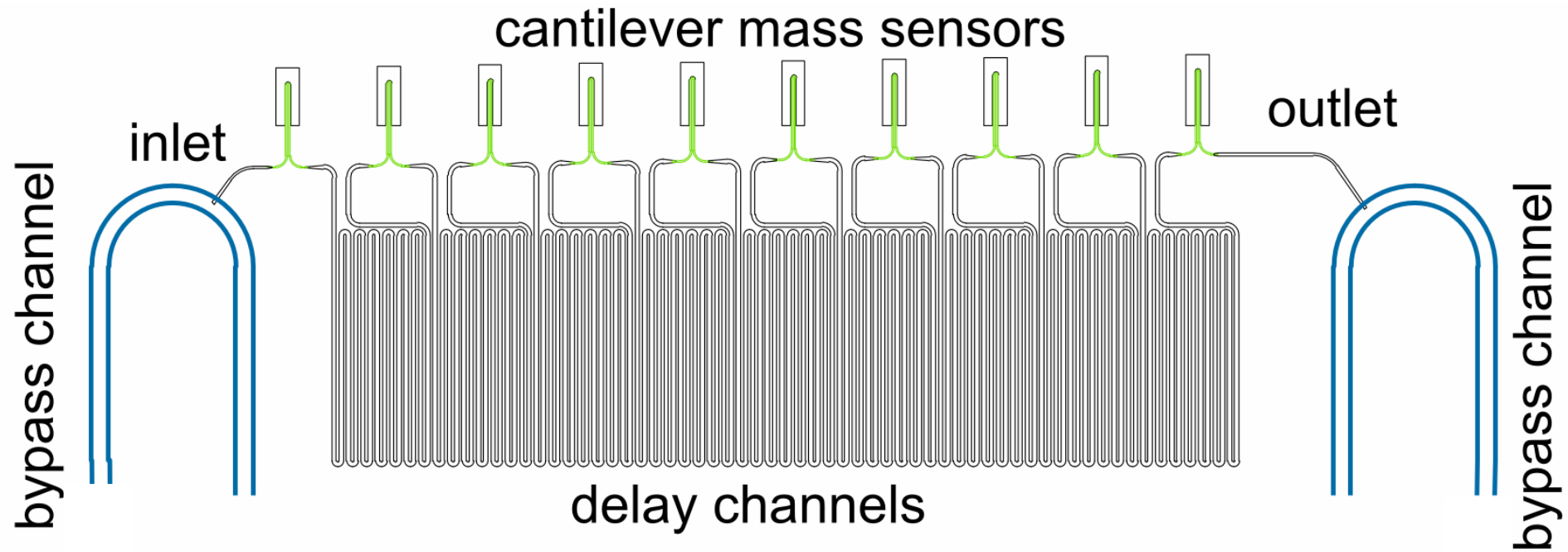
Change in mass indicates drug effect



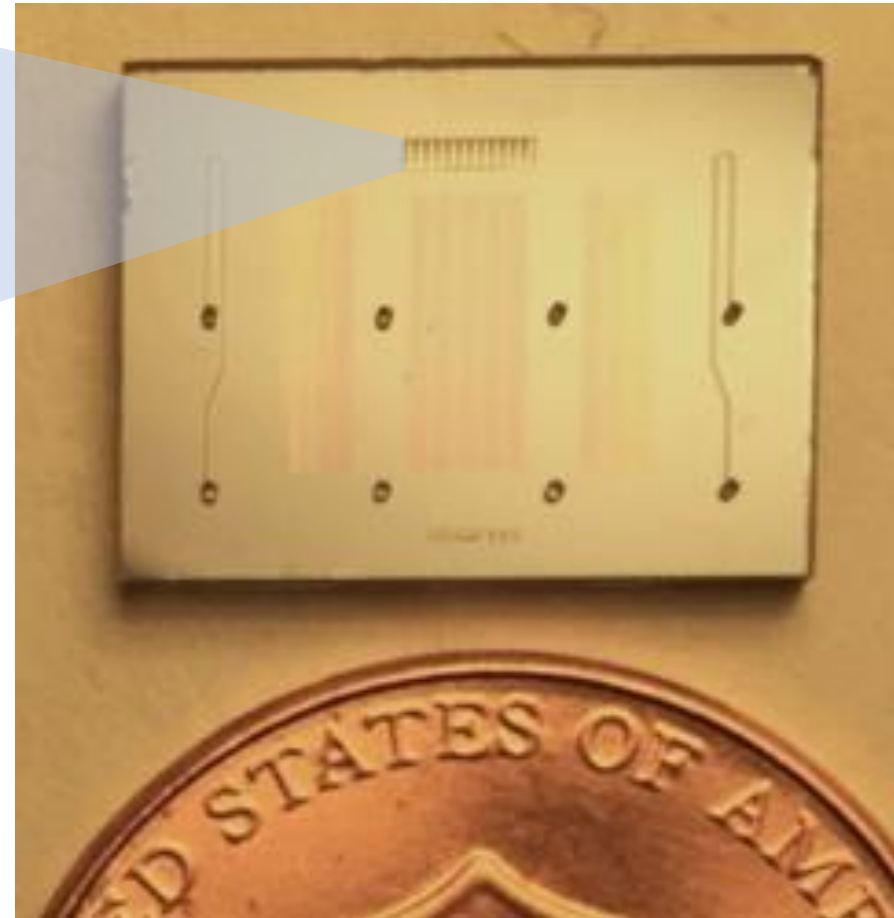
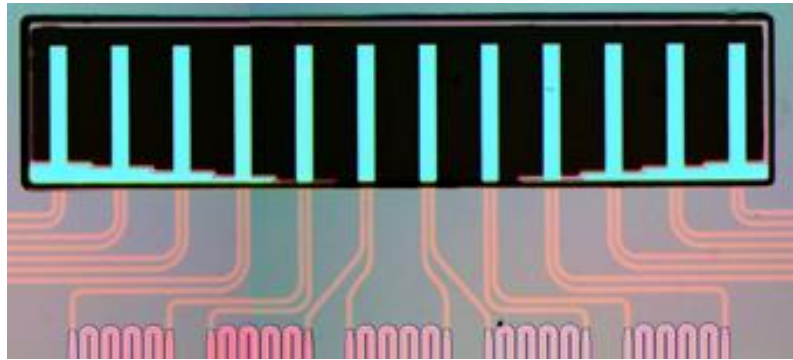
Suspended microchannel resonator (SMR)



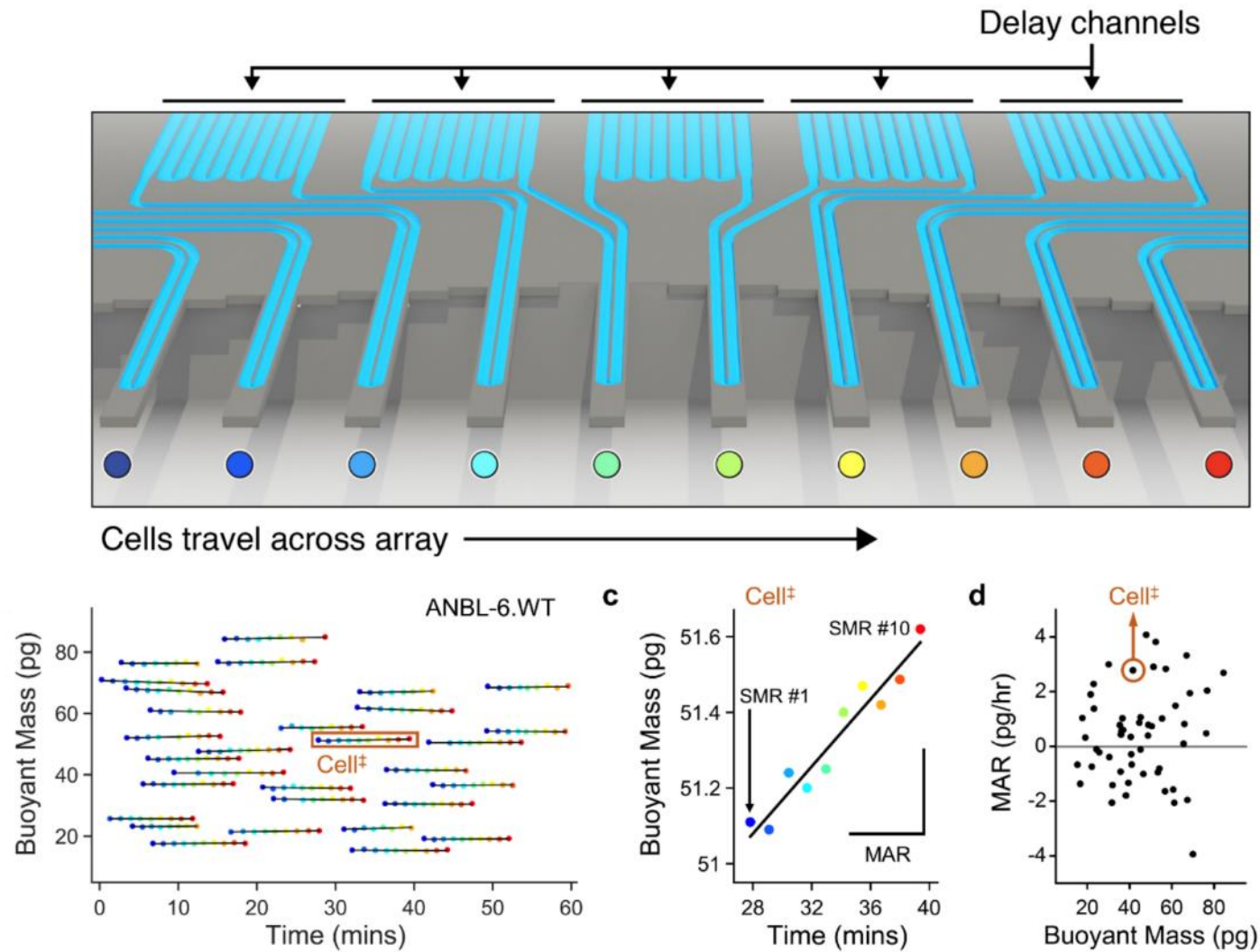
Suspended microchannel resonator (SMR) in array



Serial SMR



Testing multiple drugs in leukemia samples



Mark Murakami, MD

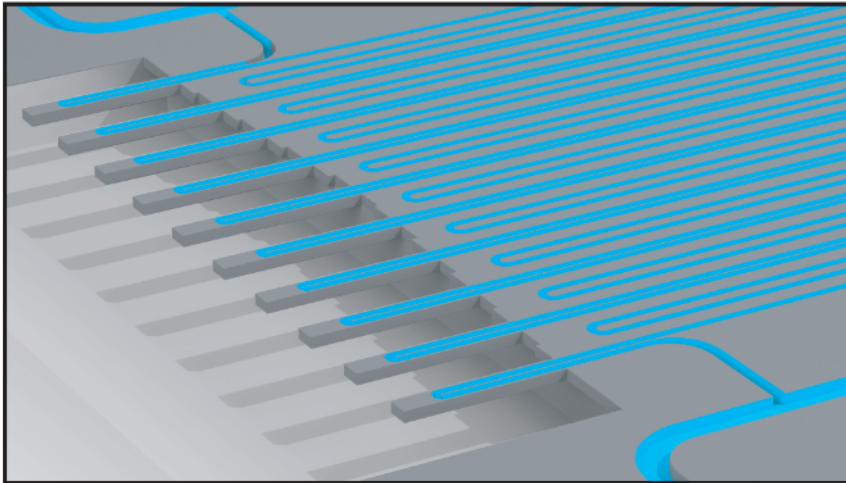


Mark Stevens, PhD

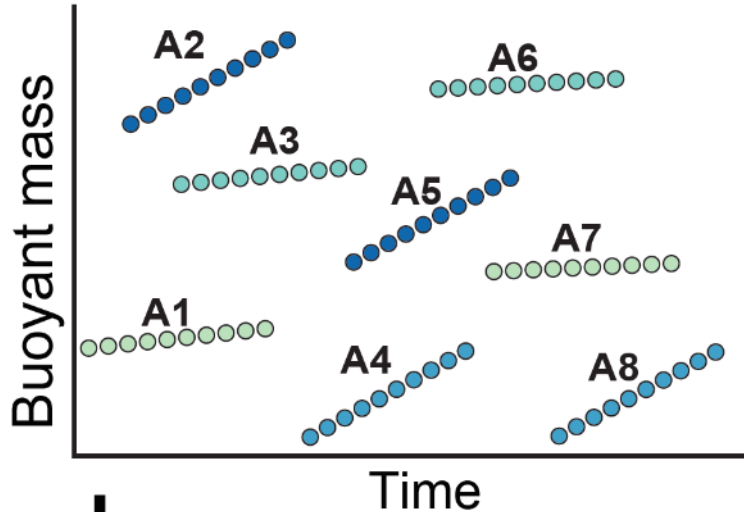
Linking Mass and MAR to scRNA-Seq for each cell

Serial SMR

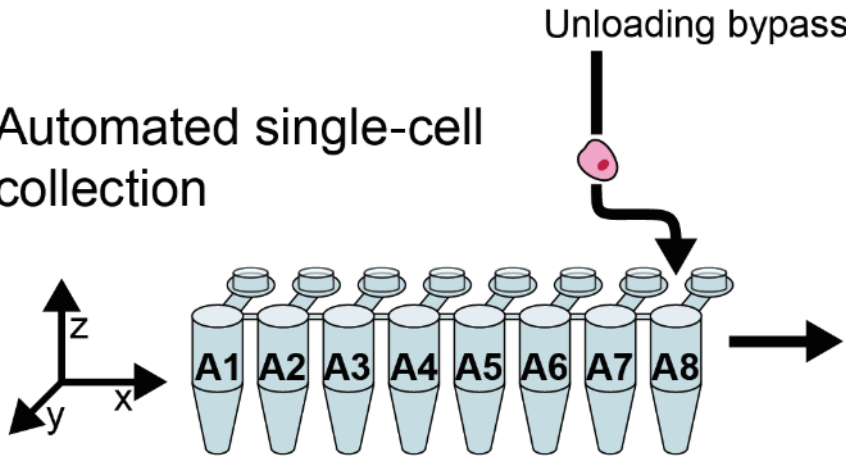
Loading bypass



Biophysical data

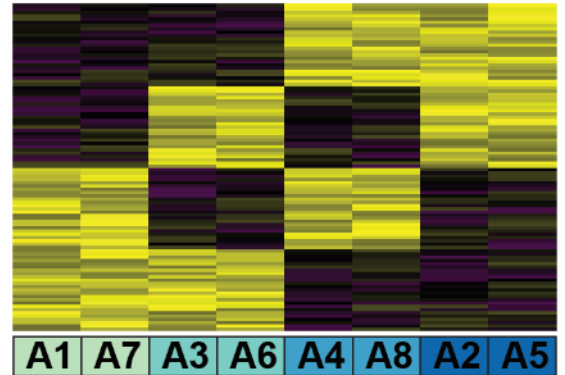


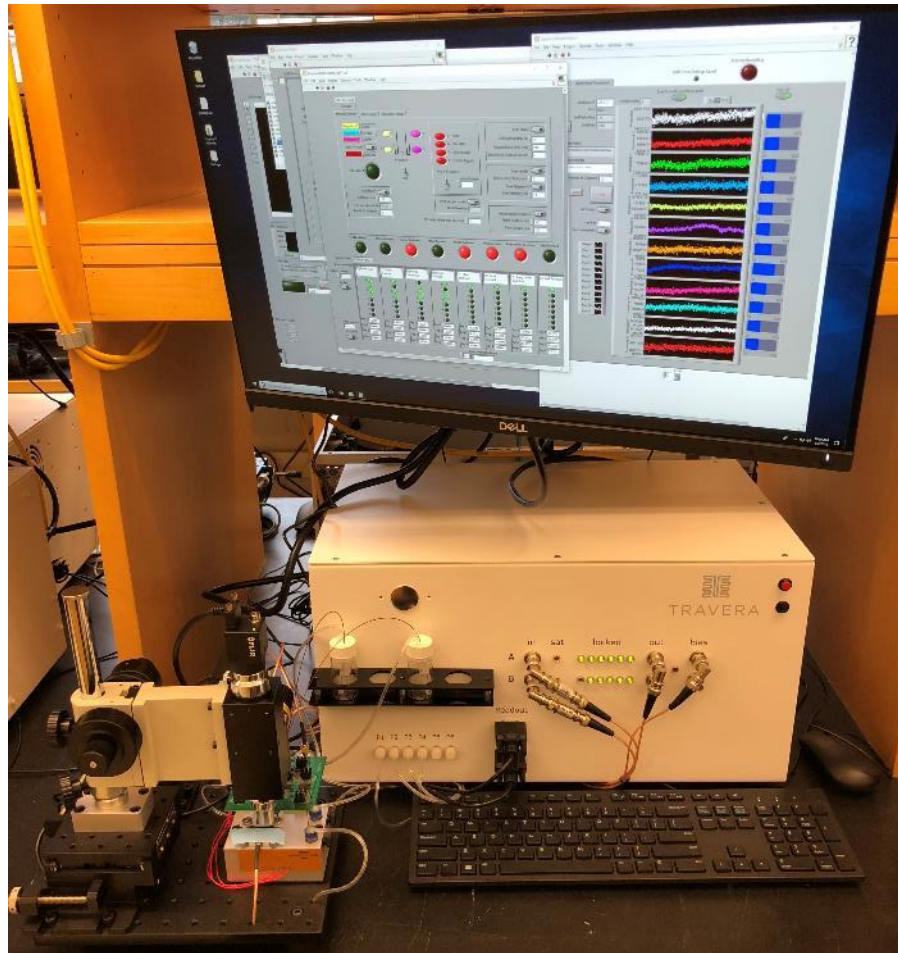
Automated single-cell collection



scRNA-seq

Biophysically-linked transcriptomic analysis



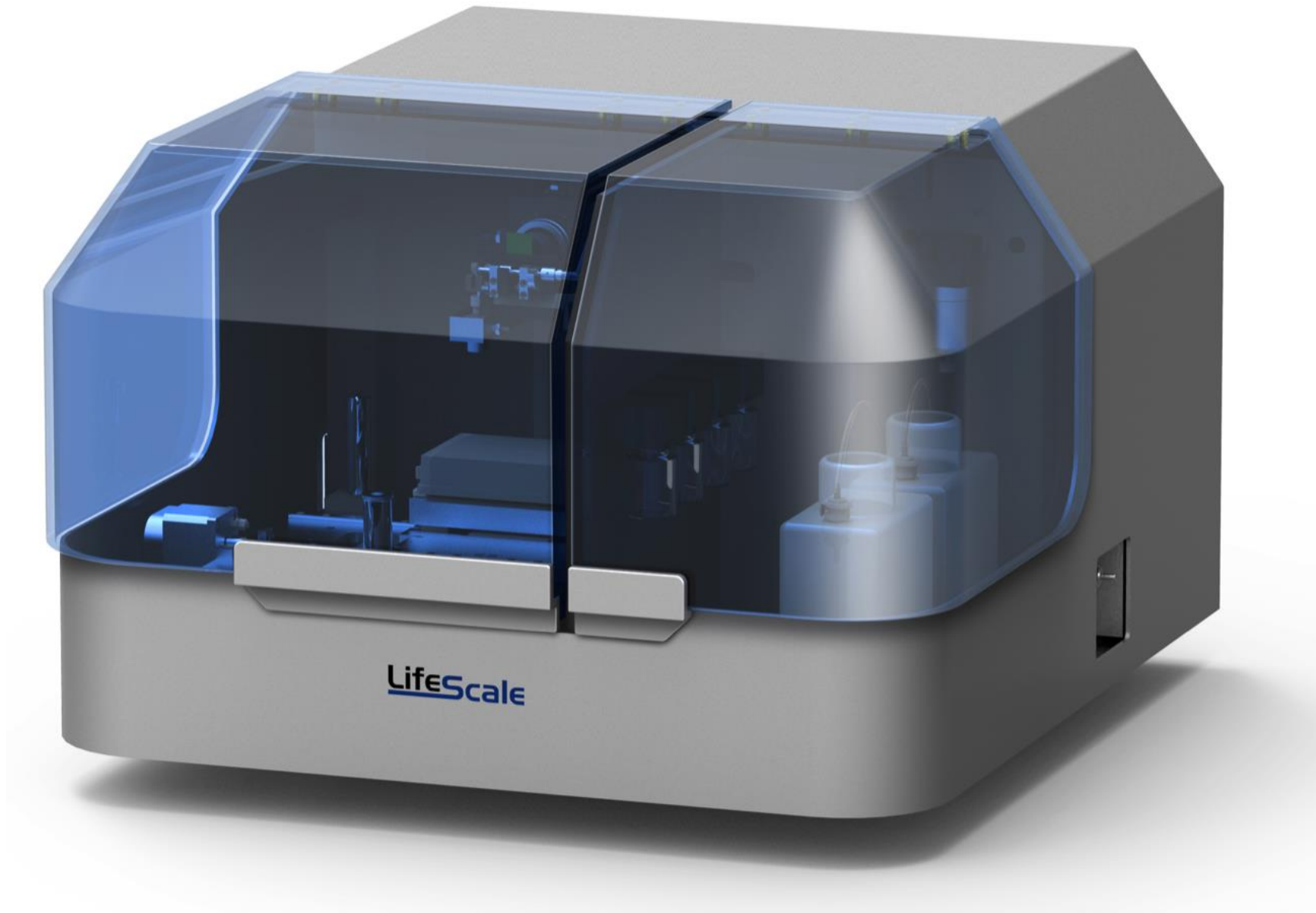


Single-box design

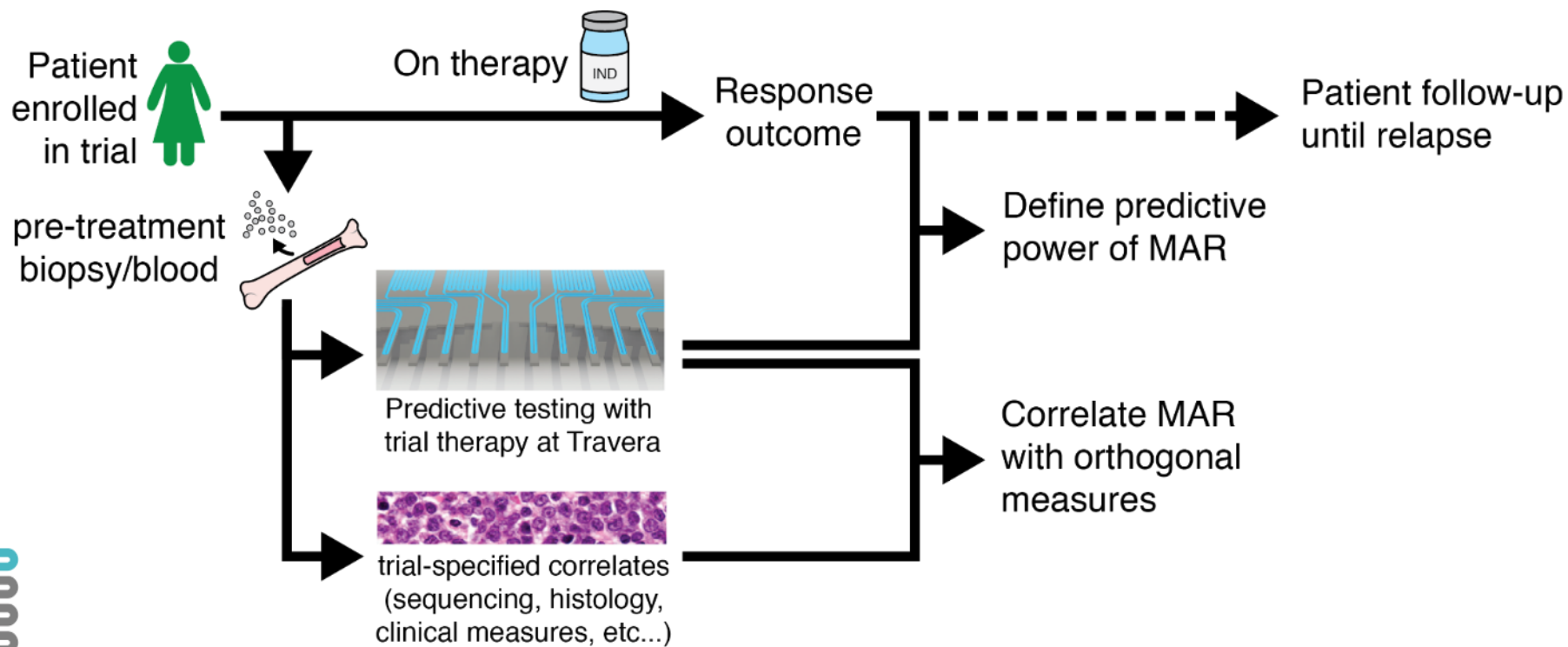


Ten systems are up and running

Stage II: LifeScaleAST for Rapid Antibiotic Susceptibility Testing

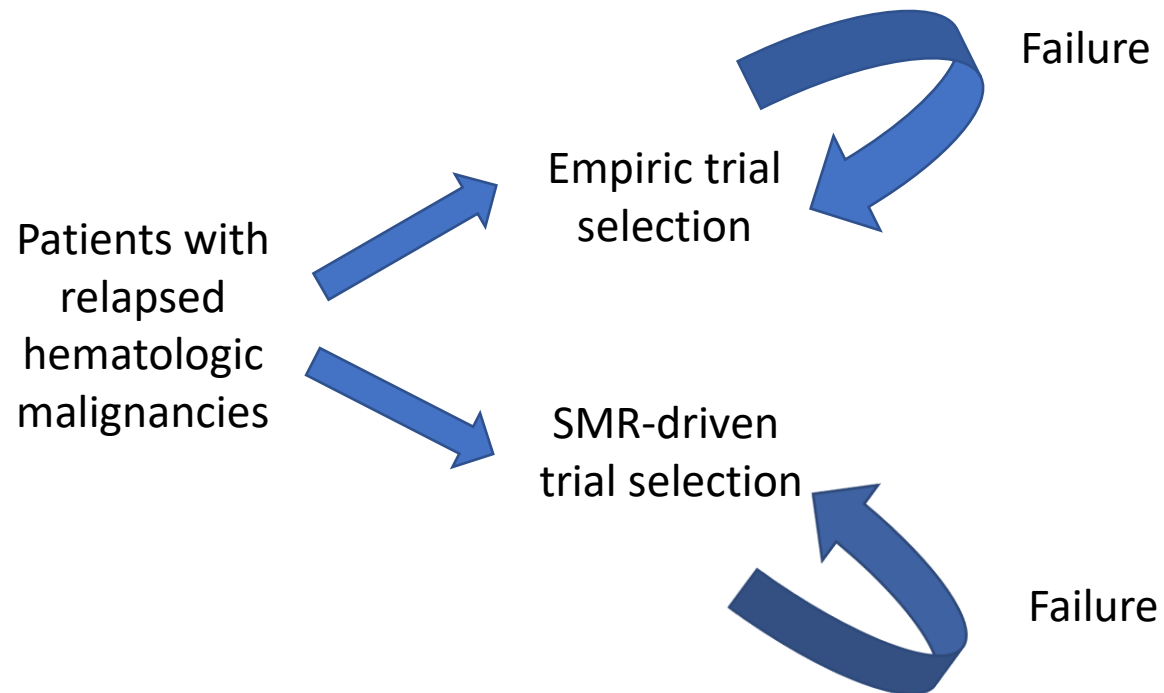


fNIH funded testing in humans – 2018



TRAVERA

Testing in humans – projected 2019



Examples of available agents

IDH2 inhibitors

BCL2 inhibitors

PI3K inhibitors

MCL1 inhibitors

CDK9 inhibitors

XPO1 inhibitors

Bromodomain inhibitors

SYK inhibitors

JAK inhibitors

MDM2 inhibitors

HSP90 inhibitors

Spliceosome inhibitors

Demethylating agents

Anti-metabolites

Antibody-drug conjugates

Novel chemotherapies

Weinstock laboratory

- Nicolas Cordero
- Tovah Day, Ph.D.
- Hailey Fuchs
- **Saliva Jain, M.D.**
- **Kristen Jones**
- Jacob Layer, M.S.
- Catharine Leahy
- Loretta Li, M.D.
- **Huiyun Liu**
- Chen Lossos, M.S.
- Abner Louissaint, M.D., Ph.D.
- Sara Morrow
- **Mark Murakami, M.D.**
- **Sam Ng, M.D., Ph.D.**
- Foster Powers
- **Kay Shigemori**
- Tony Tran
- **Alex van Scoyk**
- **Amanda Christie (former)**
- **Mark Stevens, Ph.D. (former)**
- **Noriaki Yoshida, M.D. (former)**

DFCI Hematologic Oncology

- Andrew Lane, M.D., Ph.D.
- Dan DeAngelo, M.D., Ph.D.
- Arnie Freedman, M.D.
- Ilene Galinsky, N.P.
- **Jim Griffin, M.D.**
- **Margaret Shipp, M.D.**

- Philippe Armand, M.D., Ph.D.
- Richard Stone, M.D.
- Martha Wadleigh, M.D.
- **David Fisher, M.D.**
- **Eric Jacobsen, M.D.**
- Caron Jacobson, M.D.
- Ann LaCasce, M.D.
- Marlise Luskin, M.D.
- Ore Odejide, M.D.

DF/HCC

- **Jon Aster, M.D., Ph.D.**
- David Dorfman, M.D., Ph.D.
- Alejandra Gutierrez, M.D., Ph.D.
- Tim Graubert, M.D.
- Marian Harris, M.D.
- Tom Kupper, M.D., Ph.D.
- Tom Look, M.D.
- Marcela Maus, M.D., Ph.D.
- **Elizabeth Morgan, M.D.**
- Stu Orkin, M.D.
- Hidde Plough, Ph.D.
- Jerry Ritz, M.D.
- Scott Rodig, M.D., Ph.D.
- Scott Armstrong, M.D., Ph.D.
- David Williams, M.D., Ph.D.
- Henry Long, Ph.D.
- Myles Brown, M.D., Ph.D.

MSKCC

- **Andy Intlekoffer, M.D., Ph.D.**
- **Steve Horwitz, M.D.**
- **Allison Moskowitz, M.D.**
- **Natasha Galasso**
- Craig Thompson, M.D.
- **Ahmet Dogan, M.D., Ph.D.**
- Ross Levine, M.D.

Koch Institute-MIT

- **Scott Manalis, Ph.D.**
- **Alex Shalek, Ph.D.**

Cornell

- **Giorgio Inghirami, M.D., Ph.D**
- **Danilo Fiore, Ph.D.**
- **Jia Ruan, M.D.**

Stanford University

- Youn Kim, M.D.
- Michael Khodadoust, M.D.

University of Gottingen

- **Raphael Koch, M.D.**

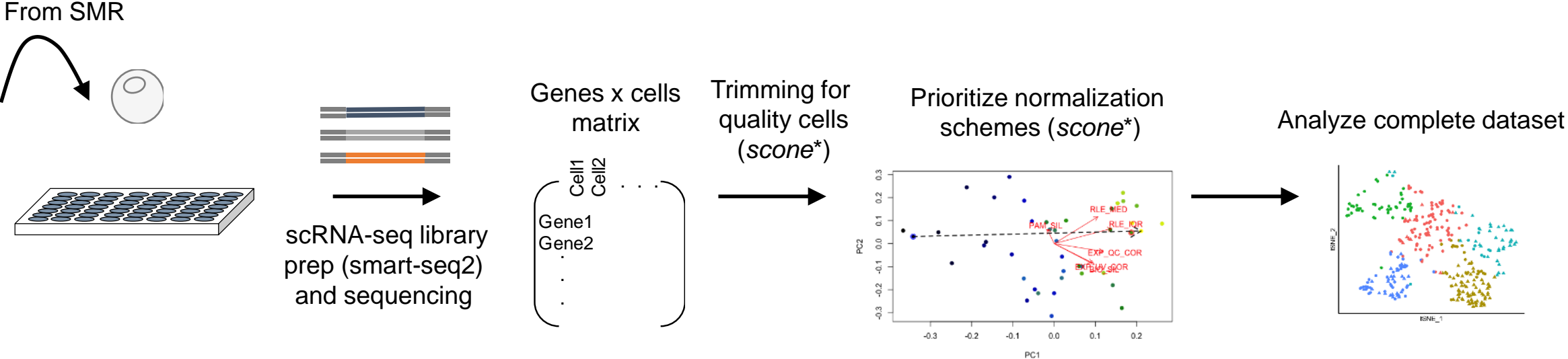
Aileron Therapeutics

- **Manuel Aivado, M.D.**

Travera, inc.

- **Mark Stevens, Ph.D.**
- Rob Kimmerling, Ph.D.

Linked scRNA-seq: Workflow

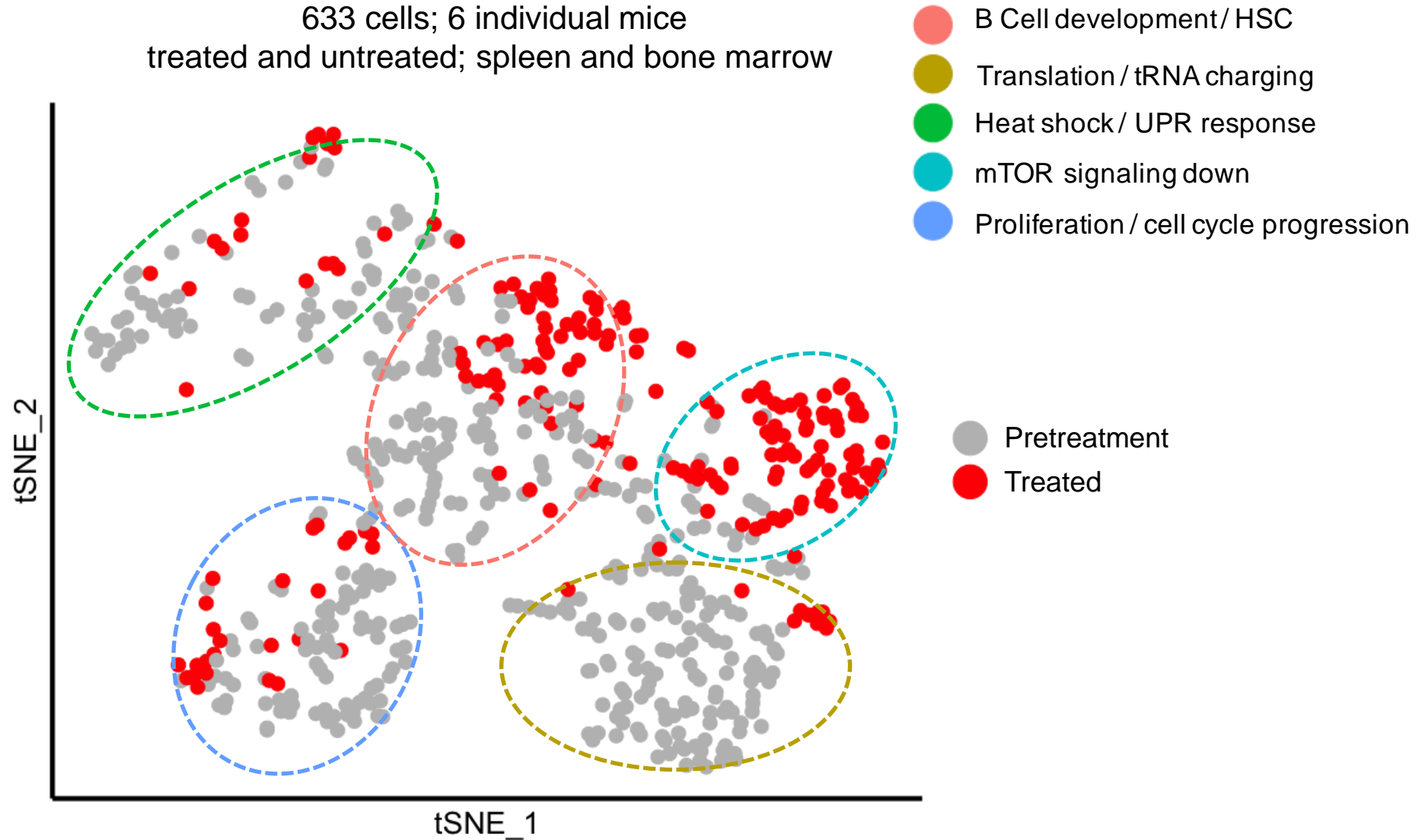


*SMR step is a “viability filter” so we enrich for at least somewhat healthy cells

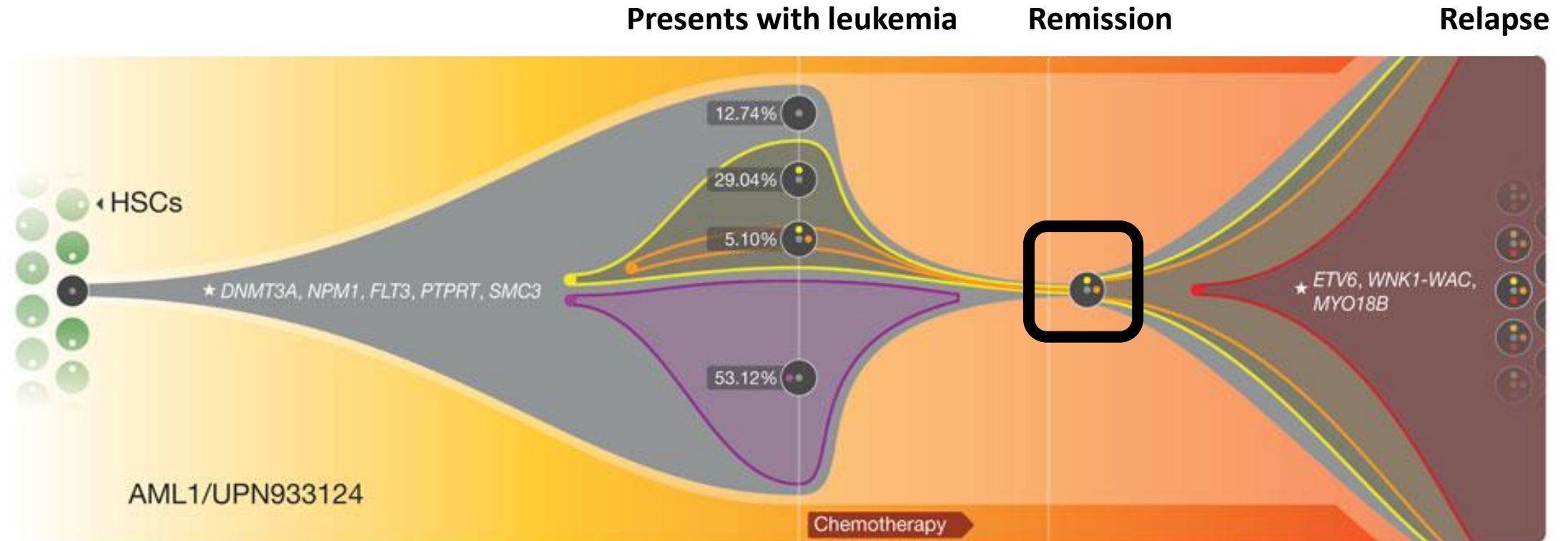
*Cole, M. *et al.* Performance Assessment and Selection of Normalization Procedures for Single-Cell RNA-Seq (bioRxiv, 2017)

scRNA-seq: Treatment

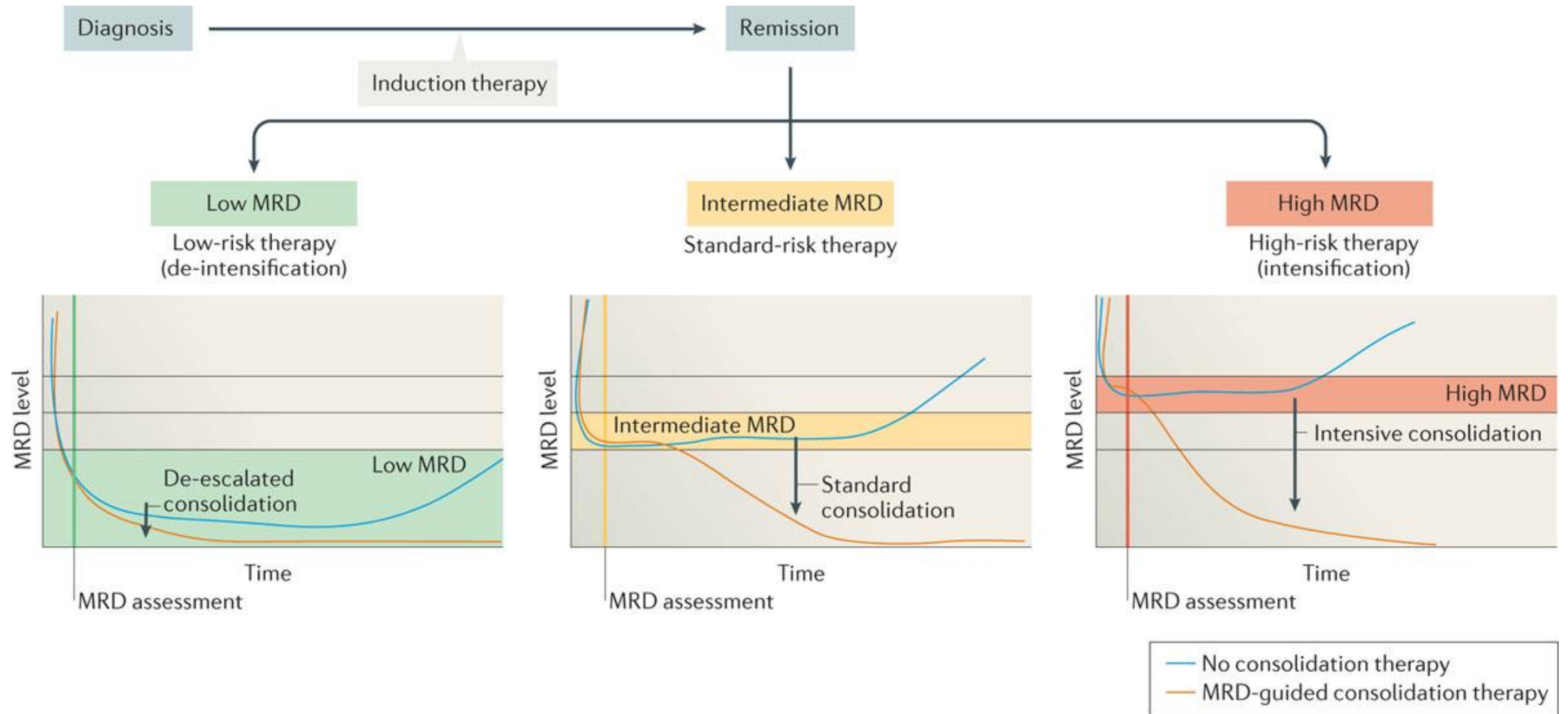
633 cells; 6 individual mice
treated and untreated; spleen and bone marrow



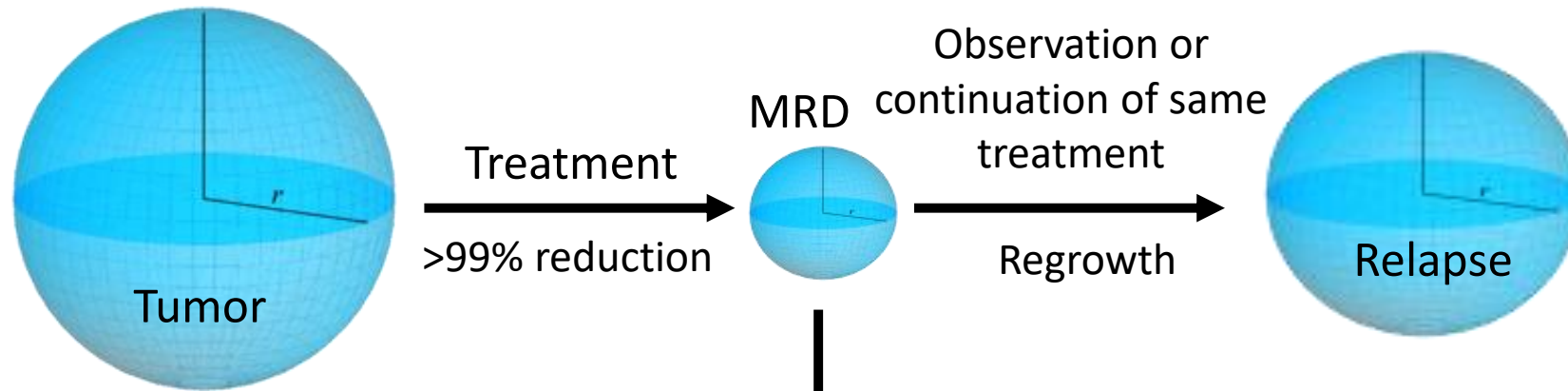
Minimal residual disease is the roadblock to cure



Current approach to minimal residual disease (MRD)



Paradigm of precision targeting for MRD



Potential advantages of targeting MRD

- 1) Less clonal complexity
- 2) Loss of chemoprotective microenvironment
- 3) Improved patient performance status
- 4) Enrichment of “cancer stem cells” tested for functional responses
- 5) Fewer cells to cure

Iteratively test MRD to identify effective treatment

Iteratively change treatment based on testing

Minimum detectable threshold

MRD relapse

Cure?

Potential disadvantages of targeting MRD

- 1) Excess toxicity and cost from treatments (i.e., overtreatment)
- 2) Therapeutic selection confounded by unrepresentative MRD sampling (i.e., wrong treatment)
- 3) Morbidity/mortality of repeated MRD sampling