

CRISPR Edited Allogeneic Anti-CD83 CAR-T Cells Show Potent Activity in GvHD and AML Tumor Models

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Abstract CD83 is expressed on acute myeloid leukemia (AML) blasts and allo-activated immune cells, making it an attractive target for preventing relapse and graft versus host disease (GvHD) in AML patients who undergo allogeneic hematopoietic cell transplantation. A recent publication showed that autologous anti-CD83 CAR-T cells are active in both AML tumor and GvHD animal models¹. In this study, CRISPR/Cas9 editing was used to make allogeneic anti-CD83 CAR-T cells and test if knock-outs could improve CAR-T activity *in vitro* and *in vivo*. Knockout of CD83 expression improved activity by preventing CAR mediated fratricide while knockout of $\beta 2M$ expression protected allogeneic cells from immune rejection. Anti-CD83 CAR-T cell activity was further enhanced by knocking out genes that function as ‘brakes’ on T cell activation or combining CAR-T cells with a CTLA4-Fc fusion protein that blocks co-stimulation of T cells. Collectively, these data support the clinical evaluation of gene-edited, potency-enhanced, allogeneic anti-CD83 CAR-T cells in relapsed/refractory AML patients.

Figure 1: Strategies to enhance the potency of anti-CD83 CAR-T Cells

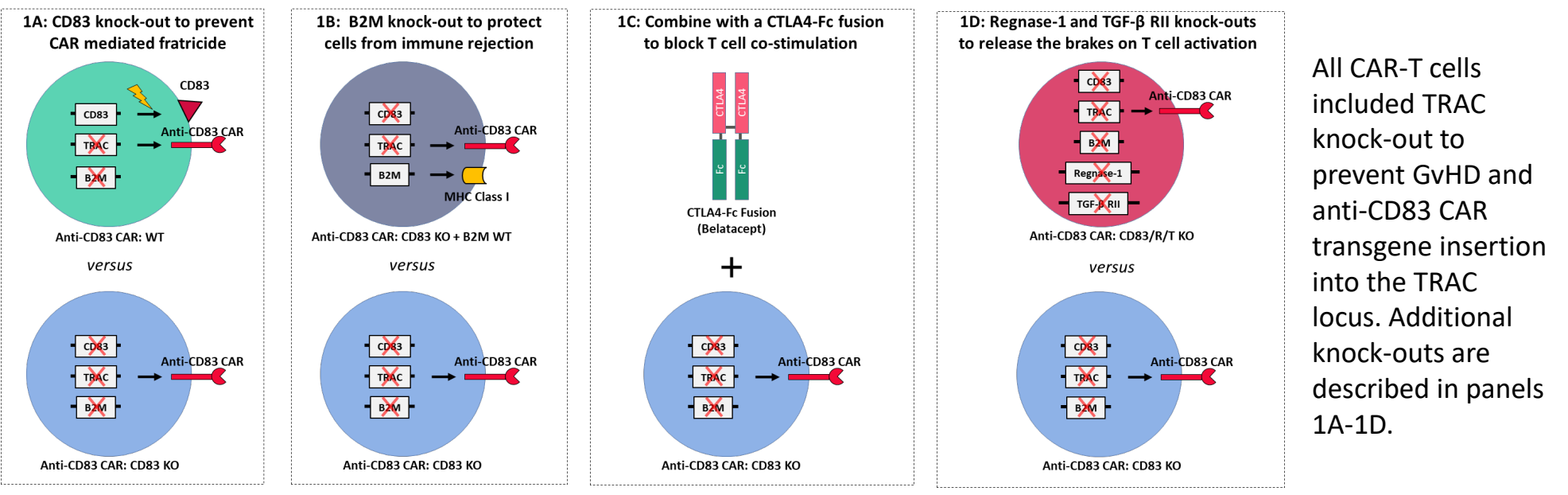
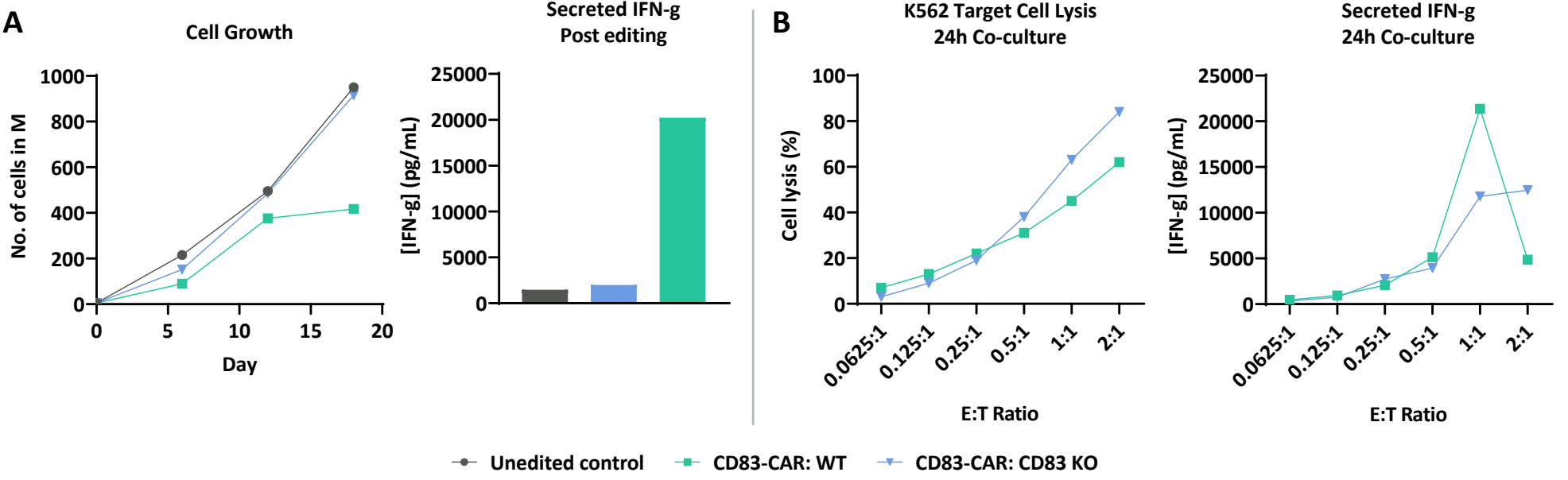
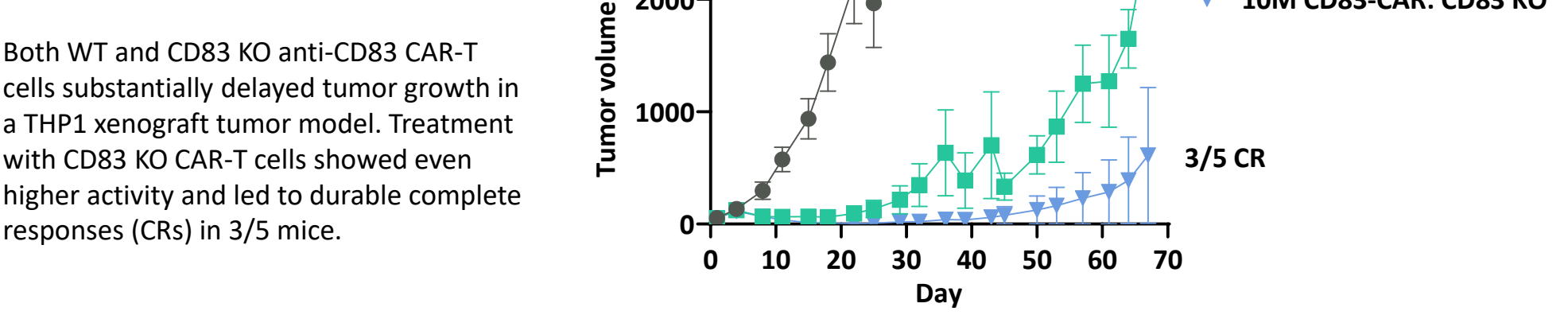


Figure 2: CD83 knock-out improves anti-CD83 CAR-T cell expansion with minimal impact on effector function *in vitro*



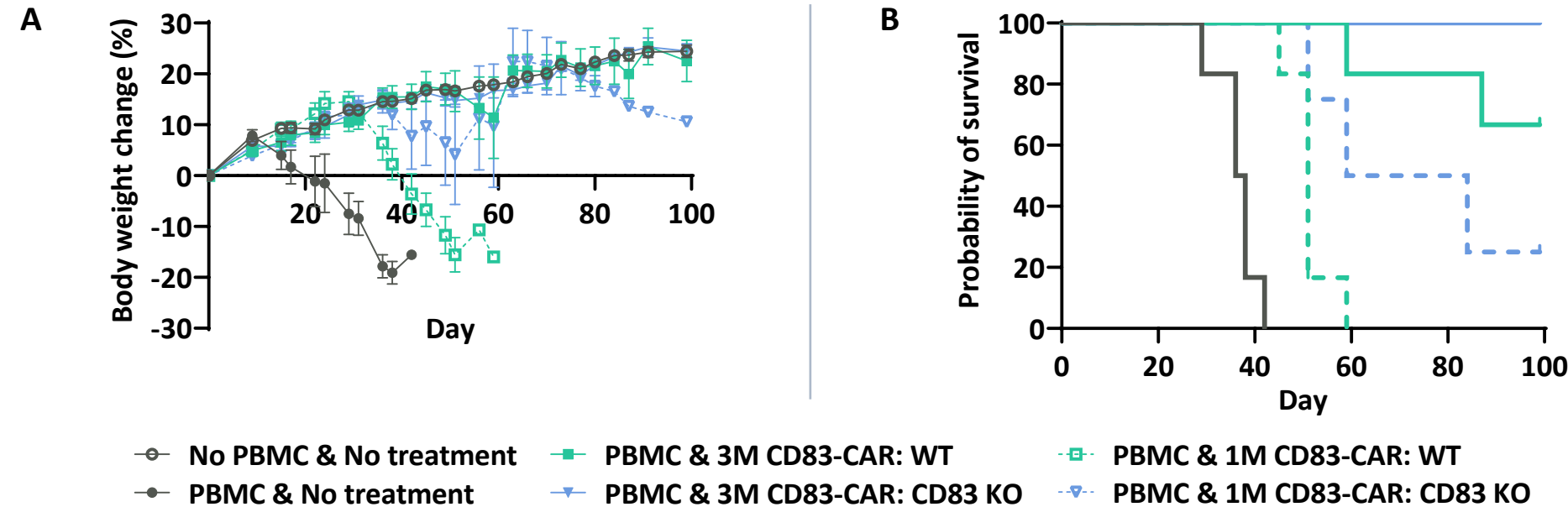
(A) Anti-CD83 CAR-T cells (CD83-CAR) with and without CD83 gene disruption (CD83 KO vs. WT) were edited on Day 0 and cultured in parallel with an unedited control. CD83-expressing WT CAR-T cells appeared to undergo CAR-mediated fratricide and knocking out CD83 reduced IFN- γ secretion and improved cell expansion. (B) Effector function was assessed by co-culturing a fixed number of CAR-T cells with increasing numbers of CD83+ K562 target cells. Both CD83 KO and WT CAR-T cells showed robust target cell killing and cytokine secretion *in vitro*.

Figure 3: CD83 knock-out enhanced the activity of anti-CD83 CAR-T cells in a murine xenograft tumor model



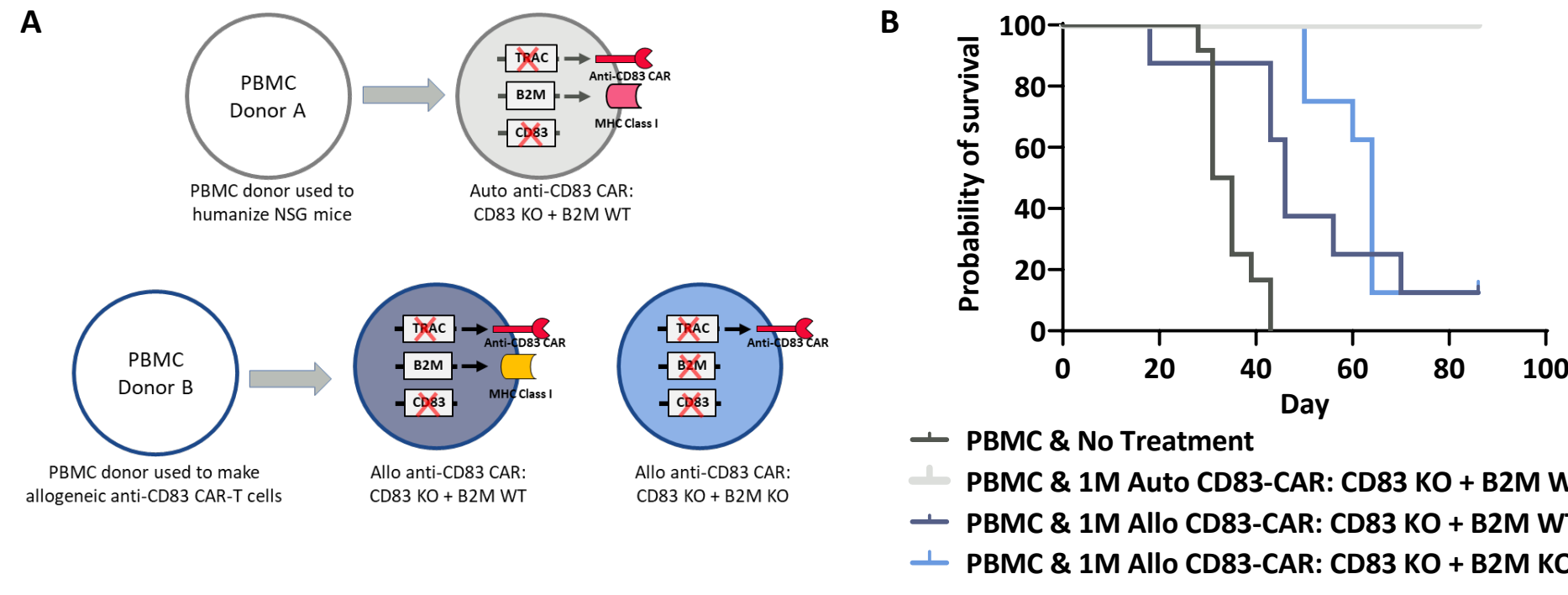
Both WT and CD83 KO anti-CD83 CAR-T cells substantially delayed tumor growth in a THP1 xenograft tumor model. Treatment with CD83 KO CAR-T cells showed even higher activity and led to durable complete responses (CRs) in 3/5 mice.

Figure 4: CD83 knock-out enhanced the activity of anti-CD83 CAR-T cells in a preventative GvHD model



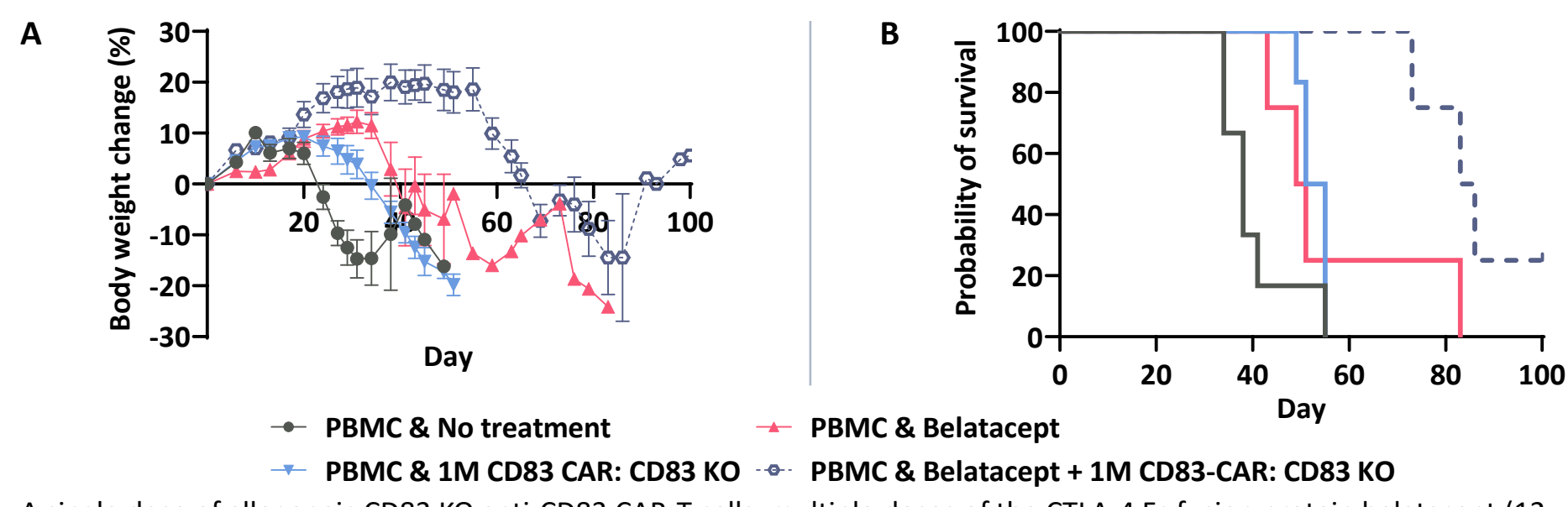
Mice engrafted with human PBMCs experienced severe weight loss (A) and died by Day 42 (B). CD83 KO anti-CD83 CAR-T cells delayed or eliminated weight loss (A) and improved survival (B) better than WT anti-CD83 CAR-T cells, including complete prevention of GvHD at the 3M CAR+ T cell dose. The CAR-T cells used in this study were allogeneic to the PBMC donor.

Figure 5: B2M knock-out improves potency of allogeneic anti-CD83 CAR-T cells in PBMC humanized NSG mice



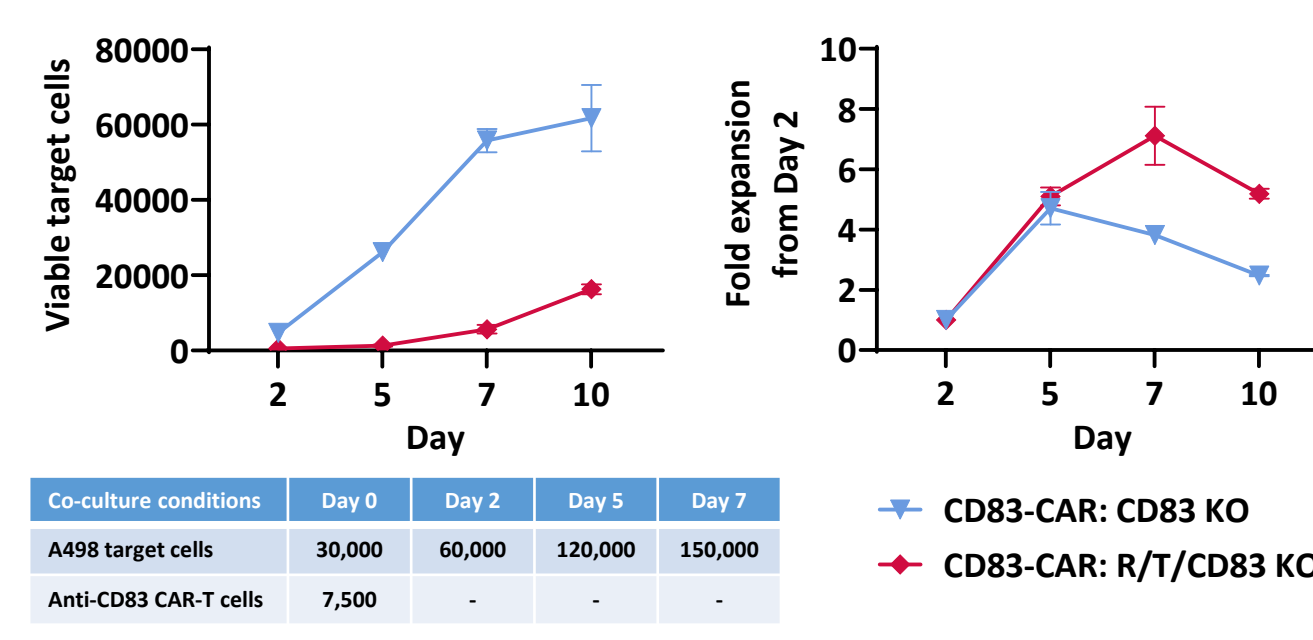
(A) To test if PBMC-derived T cells drive both GvHD and allogeneic CAR-T cell rejection, three types of anti-CD83 CAR-T cells were made: autologous CAR-T cells from the PBMC donor used for humanization, and allogeneic CAR-T cells from an unrelated donor with and without B2M knock-out (to assess the contribution of MHC class I mediated immune rejection). (B) Allogeneic rejection drives reduced potency at lower CAR-T doses, and B2M knock-out helps protect from allogeneic rejection. With additional potency edits, these allogeneic CAR-T cells can match the survival seen with autologous cells (Figure 9).

Figure 6: Combining CD83 KO anti-CD83 CAR-T cells with belatacept delays GvHD more effectively than either treatment alone



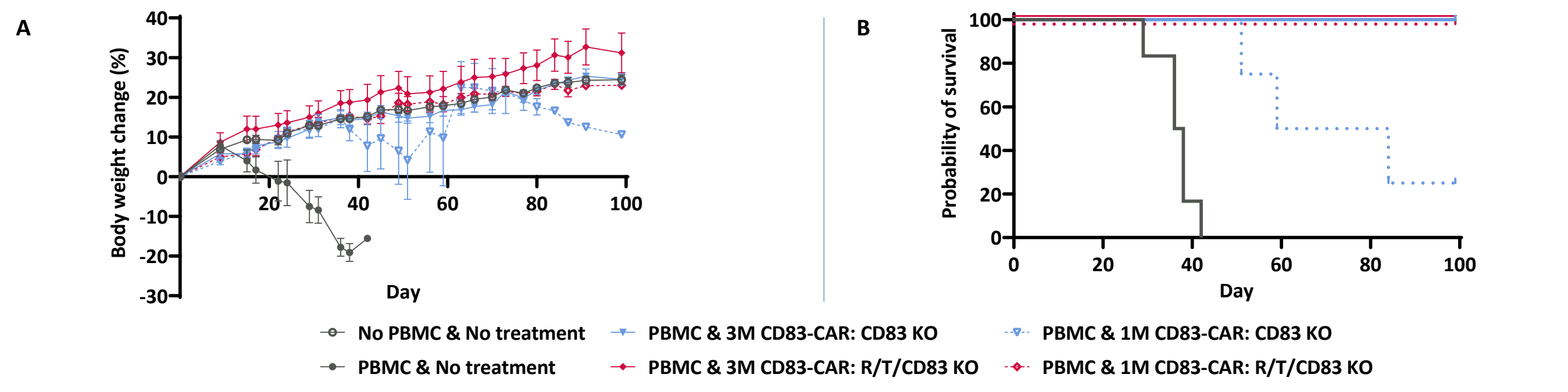
A single dose of allogeneic CD83 KO anti-CD83 CAR-T cells, multiple doses of the CTLA-4 Fc fusion protein belatacept (12 x 100 μ g 3 times per week), or a combination of the two were assessed in a preventative GvHD model. The combination delayed body weight loss and improved survival more effectively than either treatment alone. These data show that belatacept does not impact CAR-T effector function *in vivo* and support this combination strategy for GvHD prophylaxis.

Figure 7: Addition of the Regnase-1 and TGF β -RII knock-outs increases CD83 KO anti-CD83 CAR-T proliferation and target cell killing *in vitro*



A fixed number of CAR-T cells were co-cultured with CD83+ A498 target cells on Day 0 and challenged with increasing numbers of target cells on Days 2, 5, and 7. R/T/CD83 KO CAR-T cells exhibited enhanced target cell killing and proliferation upon re-challenge with target cells, indicating that disrupting the Regnase-1 and TGFBR11 genes can further increase anti-CD83 CAR-T cell potency.

Figure 9: Addition of the Regnase-1 and TGF β -RII knock-outs enhances the activity of CD83 KO anti-CD83 CAR-T cells in a preventative GvHD model



Allogeneic R/T/CD83 KO anti-CD83 CAR-T cells prevented GvHD at both the 1M and 3M CAR+ T cell dose levels. In contrast, allogeneic CD83 KO anti-CD83 CAR-T cells prevented GvHD only at the 3M CAR+ T cells dose level and delayed GvHD at the 1M CAR+ T cells dose level.

Conclusions Potency enhanced allogeneic anti-CD83 CAR-T cells have the potential to prevent relapse and GvHD in AML patients

- CD83 is a promising CAR-T target for the treatment of acute myeloid leukemia and prevention of graft vs. host disease
- While anti-CD83 CAR-T cells show encouraging activity alone, that activity can be improved through a variety of means, including knock out of CD83 to prevent CAR-mediated fratricide, knock out of B2M to reduce allogeneic rejection, and combination with belatacept
- CRISPR/Cas9-mediated disruption of Regnase-1 and TGF- β RII expression further improves potency and survival in both AML and GvHD models *in vivo* (see below)
- We plan to assess the safety and efficacy of both autologous anti-CD83 CAR-T cells and gene-edited, potency-enhanced, allogeneic anti-CD83 CAR-T cells in R/R AML patients

