Engineering of Synthetic Chemokine Receptors into iPSC-derived CAR-T cells to Increase Homing and Enhance Trafficking into Solid Tumors

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Introduction

Despite the success of chimeric antigen receptor (CAR)-T cells in treating hematological malignancies, the efficacious treatment of solid tumors has been hampered by lack of CAR-T cell persistence, tumor-associated antigen heterogeneity, and the immuno-suppressive tumor microenvironment (TME). In addition, trafficking of CAR-T cells to solid tumors, potentially due to a chemokine-chemokine receptor mismatch between the tumor and the CAR-T cells, has proven ineffective. Early and sustained detection of T cells within a solid tumor has been associated with better outcomes across several clinical trials, suggesting that strategies focused on enabling CAR-T cell homing and trafficking can generate significant therapeutic benefit.

Summary of results:

- I. The CXCR2 ligand CXCL8 is expressed by various tumor cell lines and is specifically upregulated following radio- and chemo-therapy preconditioning (**Fig 1**).
- II. Specific engineering of CXCR2 into iPSC derived CAR-T cells enables their ability to specifically migrate to the CXCR2 ligand CXCL8 without impacting their differentiation, phenotype, or anti-tumor efficacy (Fig 2 & 3).
- III. CXCR2 expression by CAR iTs enhances their homing to and retention within multiple tumor models expressing CXCL8, either naturally or chemotherapyinduced, leading to enhanced tumor control *in vivo* (**Fig 4 & 5**).

CXCL8 (IL-8) is upregulated following radio- and chemo-therapy treatment in vitro



Generation of CXCR2 engineered off-the shelf iPSC derived CAR-T cells



Figure 2. Overview of Fate's proprietary IPSC platform for the generation of precisely and uniformly engineered effector NK and T cells to express chemokine receptors such as CXCR2.

Figure 1. In-vitro analysis of CXCL8 levels following (A) radiation and (B) chemotherapy treatment. Ovarian (SKOV3) and Triple negative breast cancer lines (MDA-MB-231) were treated either with radiation (21Gy) or chemotherapy (Cisplatin, IC_{50}) Supernatants were collected 48hrs ost treatment and IL-8 levels were by ELISA. P<0.0001,***P<0.001**P<0.01).

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Figure 3. (A) Phenotypic evaluation of iPSC derived CAR iT cells. All CAR iT cells express uniform levels of CAR (99%) along with high levels of CXCR2 (90%) and are more than 99% positive for CD45 and CD7. (B) Both CAR iT cells with/without CXCR2 exerted robust cytolytic targeting of tumor targets at the indicated [Effector:Target] ratios, compared to tumor alone (TA) controls as evaluated in an xCELLigence assay. (C) Transwell migration assays demonstrated that CXCR2 expressing CAR iTs were chemotactic to the CXCR2 ligand CXCL8.* P<0.05





Figure 5 (A) Experimental design for in vivo evaluation of CXCR2- and CXCR2+ CAR iT cells with and without (data are not shown) chemotherapy (Cyclophosphamide/Fludarabine) preconditioning. (B) CXCL8 levels in serum collected 48hrs post chemo-preconditioning. (C-D) Intratumoral CAR iT infiltration & retention was evaluated by flow cytometry in tumors collected at 3, 6 and 38 days post CAR iT administration. (E-F)Tumor measurements (avg +/- SEM) for CAR iT and CXCR2⁺ CAR iT with chemo preconditioning. **P<0.01, *P<0.05.

Conclusion

Collectively, the preclinical data demonstrate that the engineering of synthetic chemokine receptors to further direct off-the-shelf CAR iT cells to the tumor site is a viable strategy to improve anti-tumor activity, including as part of a multiplexedengineering platform for overcoming challenges in treating solid tumors.

