# Preclinical evaluation of novel immune cell therapies, checkpoint inhibitors, and immune cell engangers in humanized mouse models

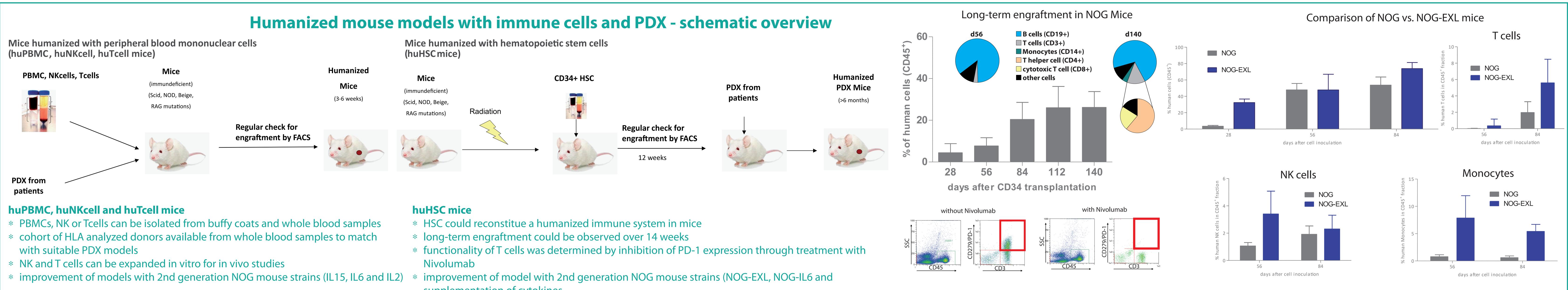


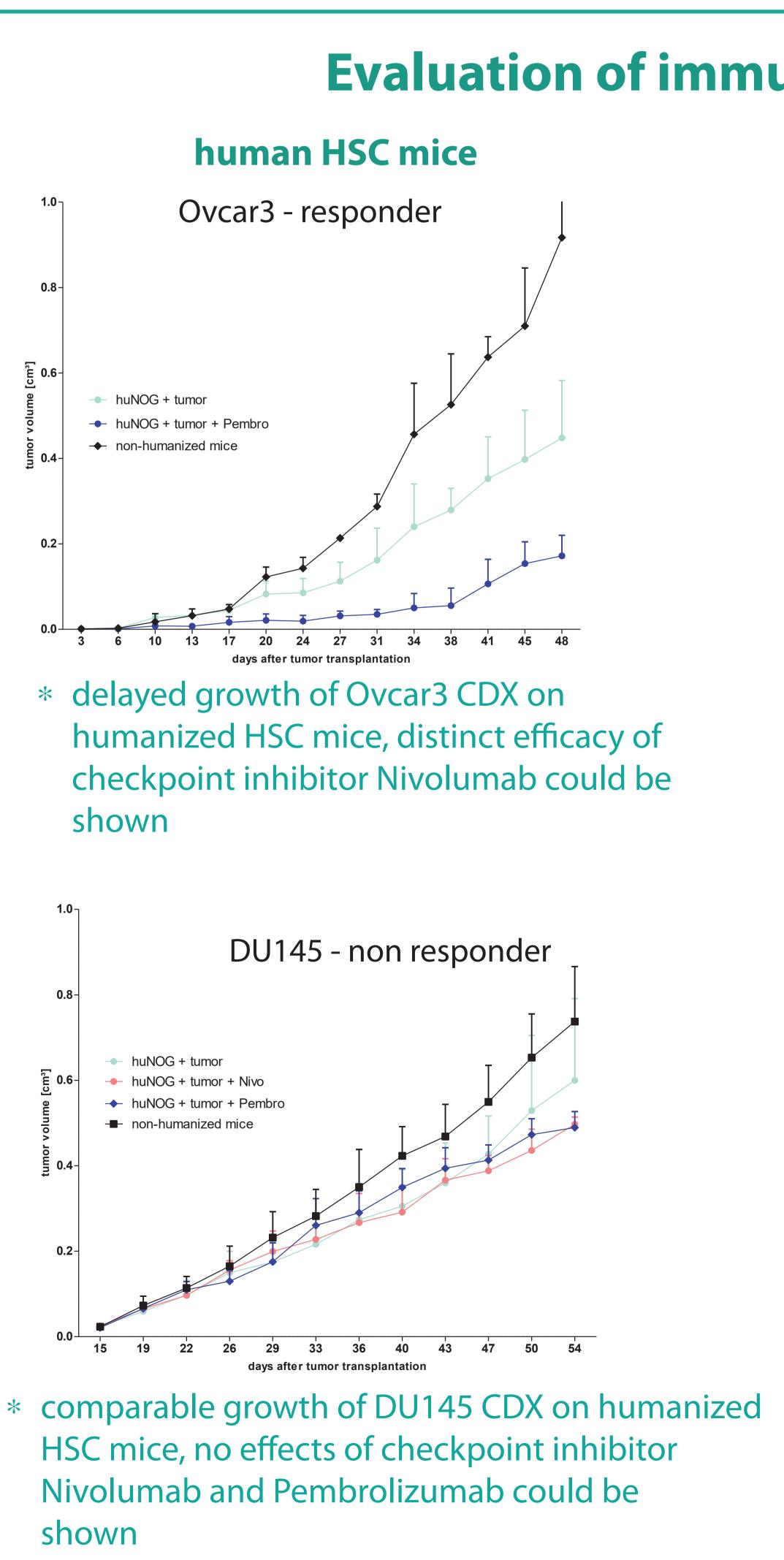
## **Background and Aim**

- \* preclinical evaluation of novel immune checkpoint modulators require models with functional immune cells
- \* in previous experiments, we have demonstrated, that we can use hematopetic stem cells (HSC), peripheral blood mononuclear cells (PBMCs) or subtypes of PBMCs like T or NK cells to establish a humanized immune system on highly immunodeficient mice with functional T, B or NK cells
- \* by co-transplantation of CDX and PDX, we successfully generated a fully human tumor-immune-cell model in mice
- \* for orthotopic models of lymphoma or leukemia models, we generated luciferase labeled cell lines to use bioluminescence to follow up on tumor growth during the study
- \* model have been experimentally validated in preclinical studies with checkpoint inhibitors
- humanized models will be continuously improved by using new mouse strains or optimized cell numbers

## Summary and Outlook

- we successfully established a fully humanized mouse models for immuno-oncology studies by co-transplantation of CDX or PDX and human HSC or immune cells from whole blood (PBMCs, T, or NK cells)
- we observed engraftment of CDX and PDX on most humanized mice, however in some cases it was delayed and seems to be dependent on HLA matching and PD-L1 expression
- we see different therapeutic effects of checkpoint inhibitors like Nivolumab, Pembrolizumabm or Ipilimumab with strong, to minor responders, or non responders
- several CDX and PDX have been investigated in humanized HSC mice, huPBMC, huNK cells and huT cell mice
- comparing tumor growth and checkpoint inhibitor activity in the pancreatic cancer PDX Panc12975 on four different humanized mouse models, humanization with HSC provided best results in comparison to single immune cells
- we successfully established an orthotopic model of lymphoma model Karpas299 to be used for immuno-oncology research, tumor growth can be measured with bioluminescene during the experiment
- we demonstrated in our preclinical studies eligibility of the humanized models for peclinical research in tumor immunology, evaluation of new therapies and combinations, as well as the identification and validation of biomarkers for immune therapy
- combination therapies with radiation and using mouse strains improving engraftment of HSC (NOG-EXL mice) and immune cells (NOG-IL-15 mice) are under investigation
- <sup>c</sup> furthermore, these novel models have been successful used for the preclinical evaluation of new bispecific immune cell engagers (BITE) and cell therapies (CART cells)

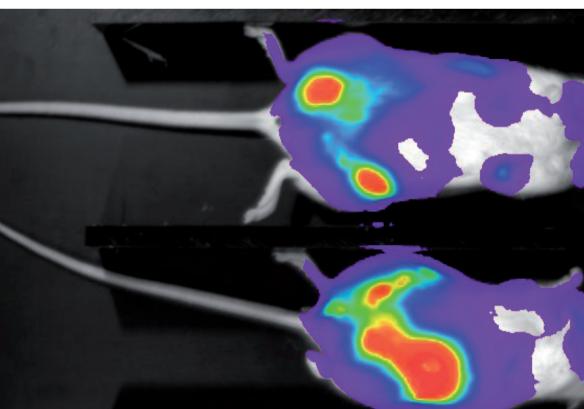




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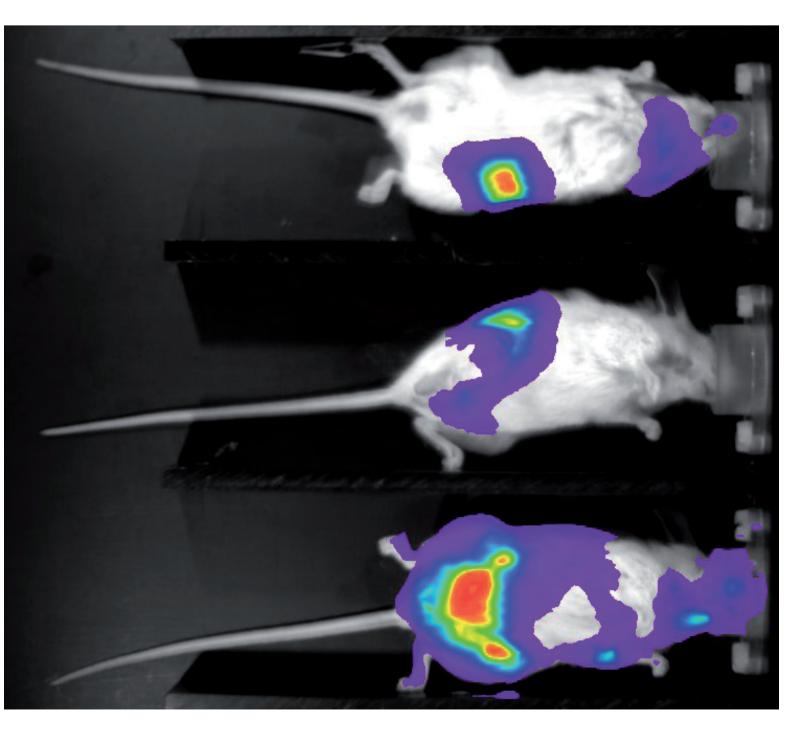
- supplementation of cytokines

## Evaluation of immun therapies with CDX models on humanized mouse models



without PBMCs

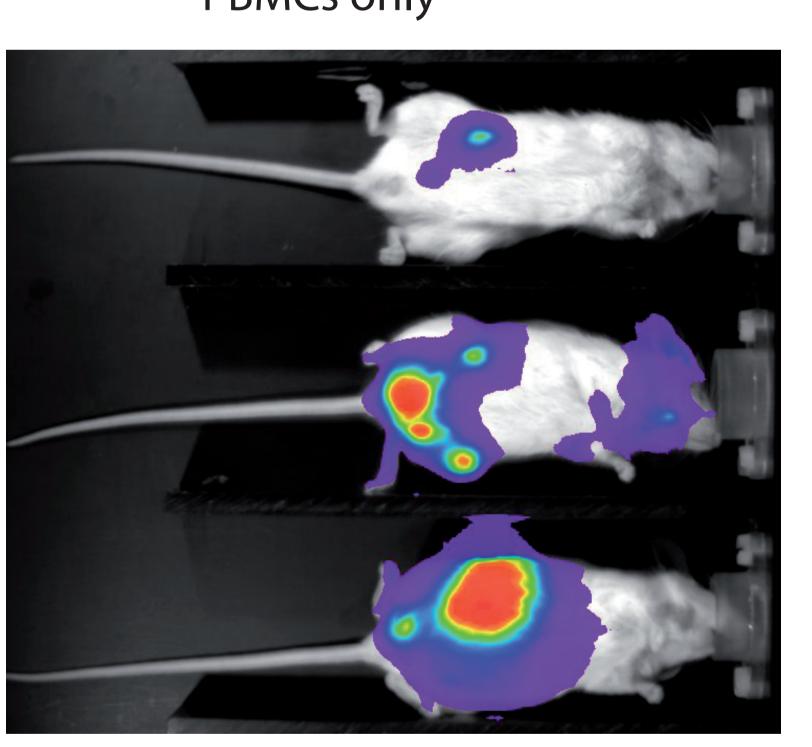
PBMCs + Pembrolizumab



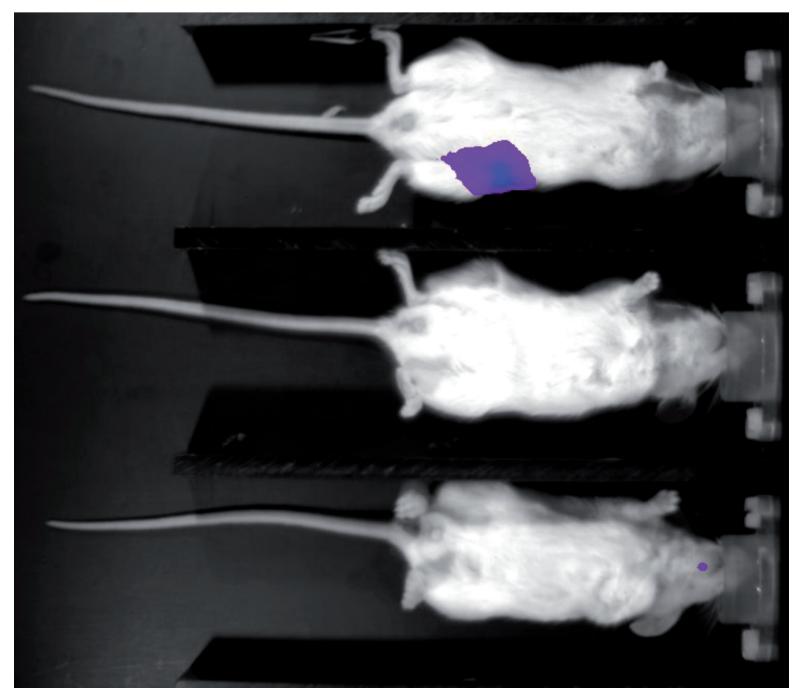
## Karpas299/Luc - responder

human PBMC mice

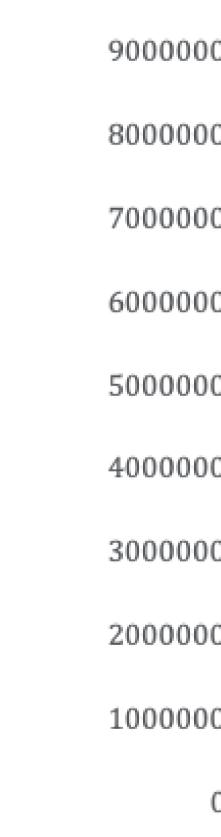
PBMCs only



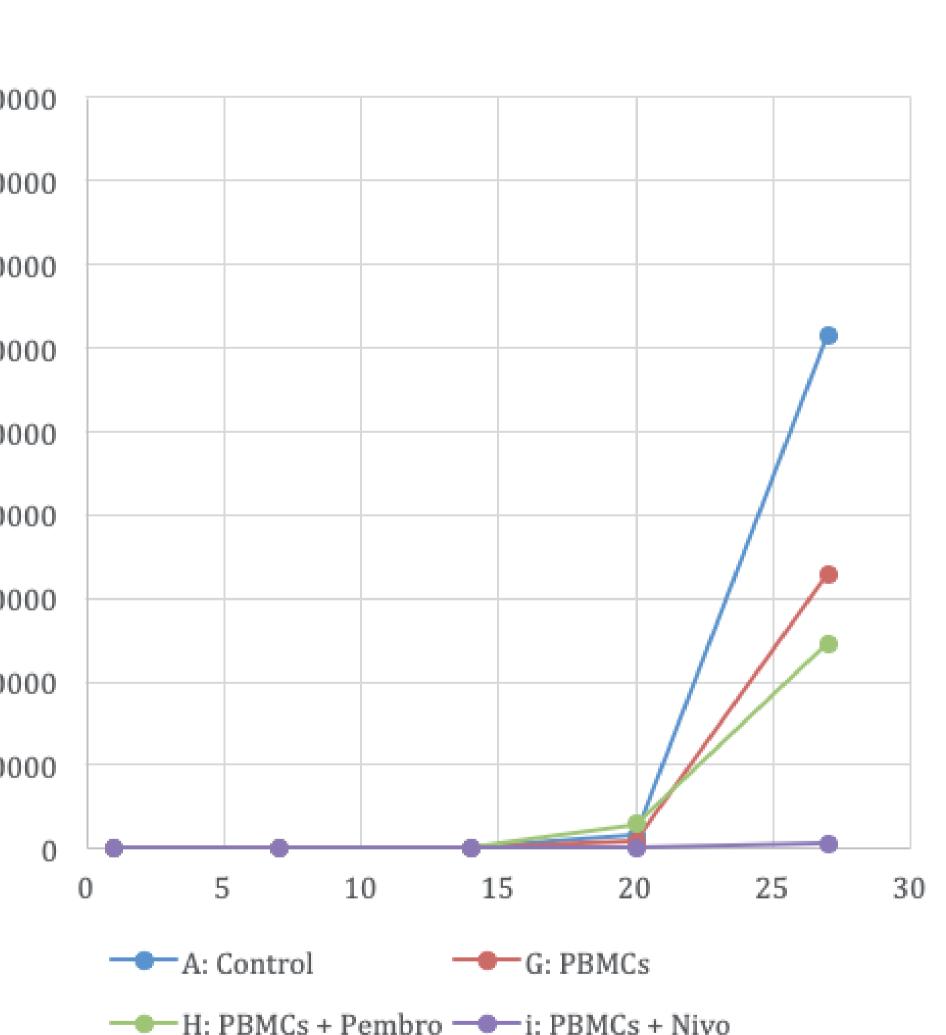
PBMCs + Nivolumab

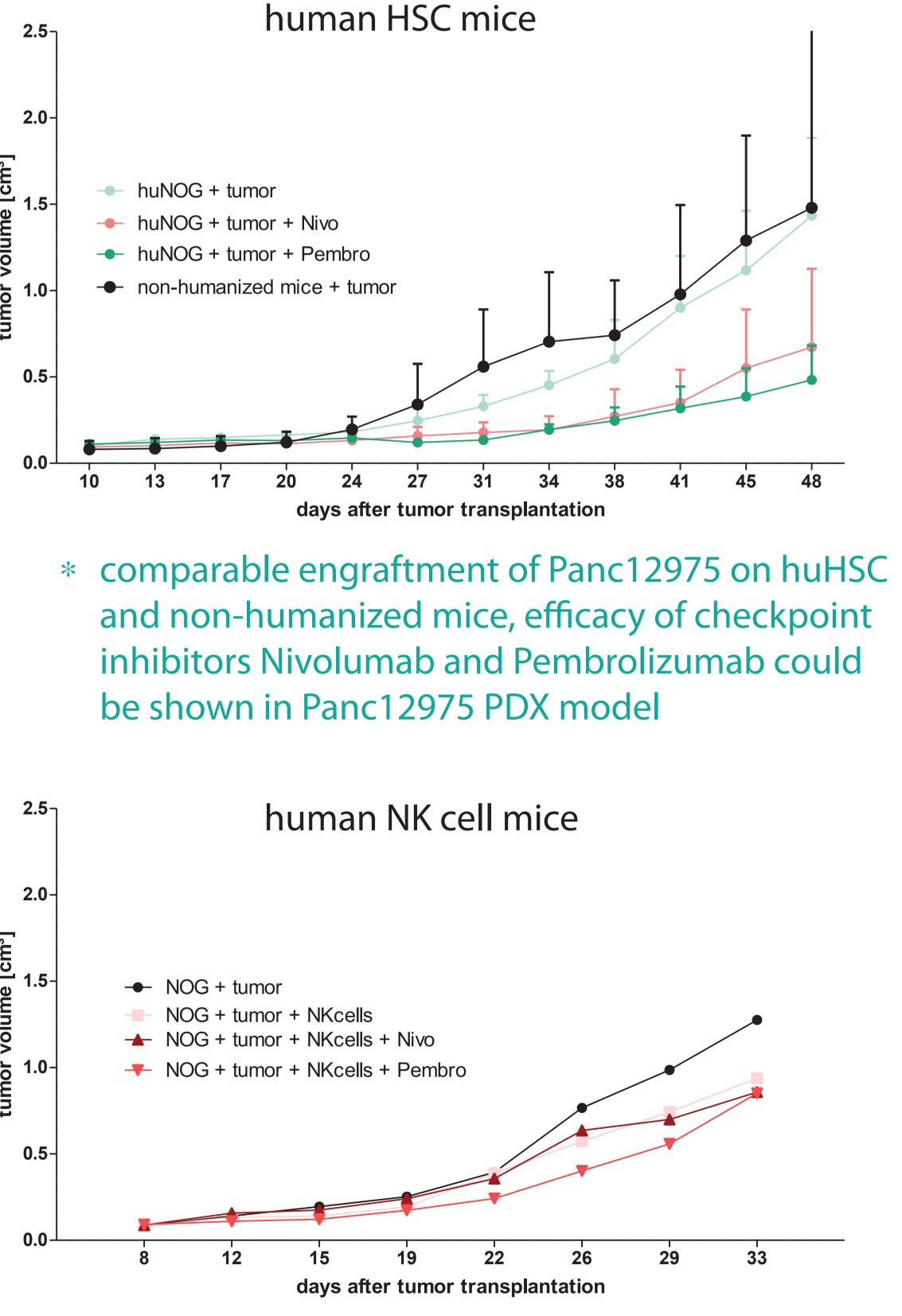












 Nivolumab induced significant tumor growth reduction in comparison to Pembrolizumab

comparable tumor growth of with and without PBMCs

tumor growth delay can be induced by treatment with

checkpoint inhibitors

checkpoint inhibitors

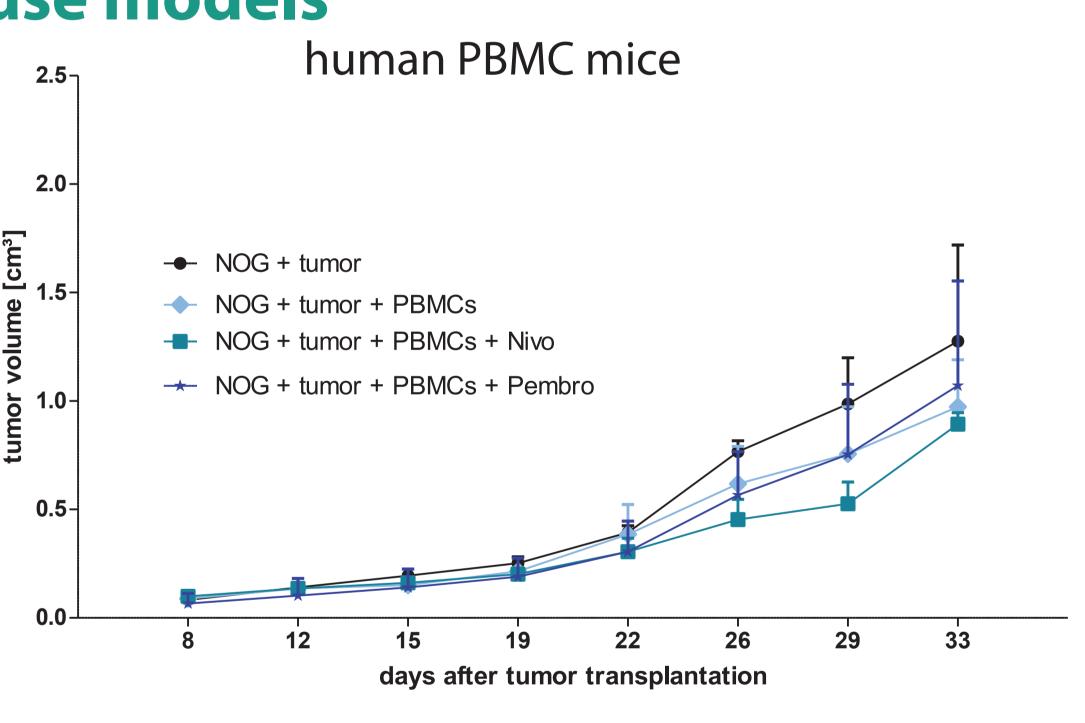


uropäischer Fonds regionale Entwicklung

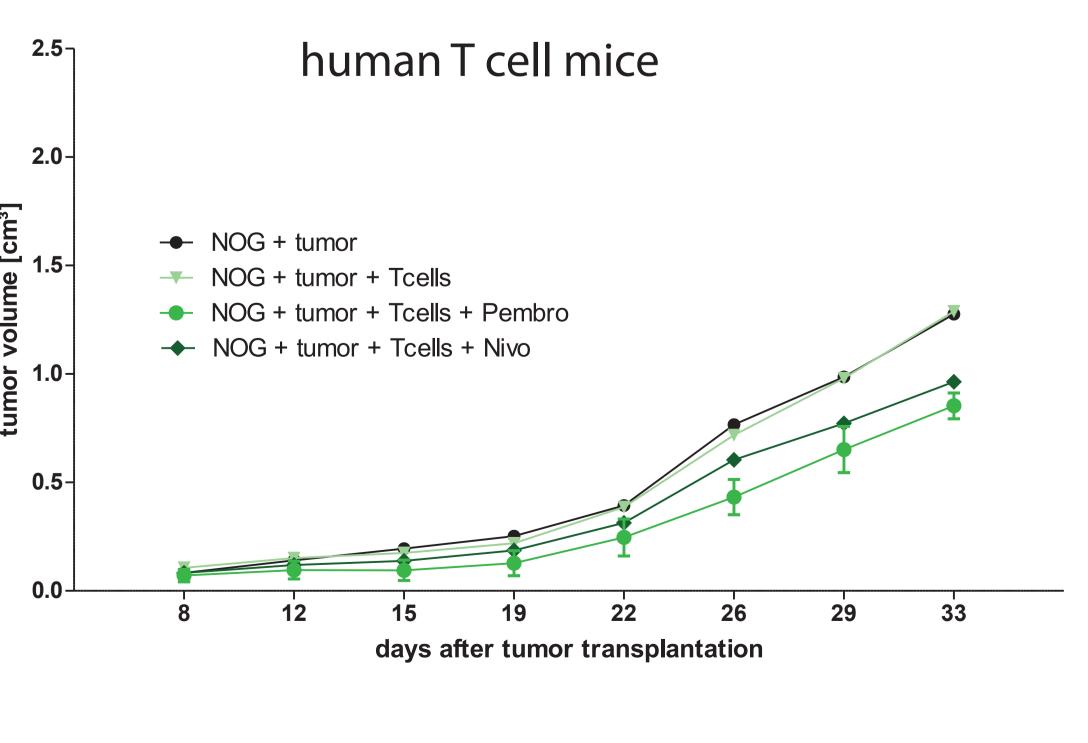
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### Evaluation of immuno therapies with PDX model Panc12975 on four different humanized mouse models

\* comparable growth of Panc12975 on mice with and without NK cell humanization, no effects of



\* comparable growth of Panc12975 on mice with and without PBMC humanization, no effects of checkpoint inhibitors



\* comparable growth of Panc12975 on mice with and without T cell humanization, no effects of checkpoint inhibitors