



NCI Awardee Skills Development Consortium

# Adoptive T cell Therapies

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Immunology Program, Sloan Kettering Institute  
Department of Medicine, Memorial Hospital



Memorial Sloan Kettering  
Cancer Center

## **Financial disclosures:**

- » The Sadelain lab has collaborative research agreements with Takeda Pharmaceuticals, Fate Tx, and Atara Bio.
- » The Sadelain lab has licensed CAR technologies to Juno Tx (Celgene/BMS), Takeda Pharmaceuticals, Fate Tx, Atara Bio and Mnemo Tx.

# Reference materials

## **The journey from discoveries in fundamental immunology to cancer immunotherapy**

Jacques Miller and Michel Sadelain  
Cancer Cell 27(4):439-449 (2015)

## **From Adoptive Immunity to CAR Therapy: An Evolutionary Perspective**

Michel Sadelain  
Encyclopedia of Immunobiology, Vol. 4, Elsevier Ltd (2016)

## **Gene therapy comes of age**

Cynthia E. Dunbar, Katherine A. High, J. Keith Joung, Donald B. Kohn, Keiya Ozawa, Michel Sadelain  
Science 359, eaan4672 (2018)

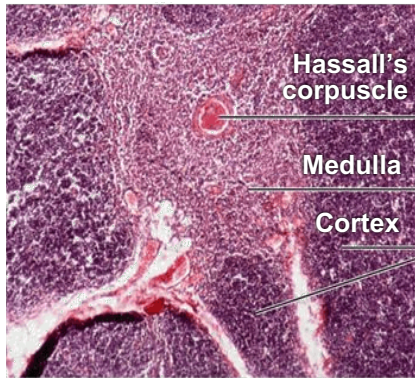
## **CAR T cells: continuation in a revolution of immunotherapy**

Anurag K Singh and Joseph McGuirk  
Lancet Oncol. 21(3):e168-e178 (2020)

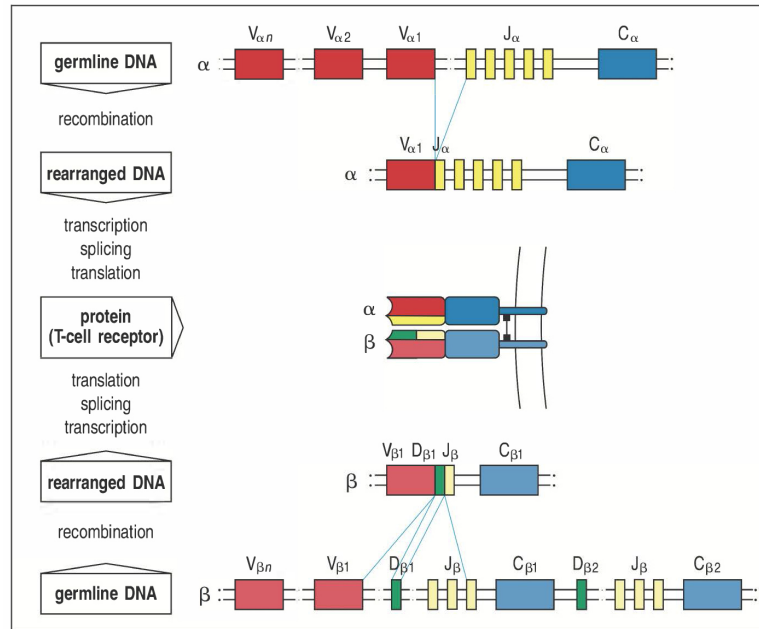
## **The therapeutic landscape for cells engineered with chimeric antigen receptors**

Matthew MacKay, Ebrahim Afshinnekoo, Jonathan Rub, Ciaran Hassan, Mihir Khunte, Nithyashri Baskaran, Bryan Owens, Lauren Liu, Gail Roboz, Monica Guzman, Ari Melnick, Shixiu Wu and Christopher Mason  
Nature Biotechnol. 39(2):233-244 (2020)

# T lymphocytes: thymic origin, VDJ recombination and clonal selection



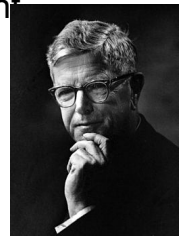
Jacques Miller



## The clonal selection theory

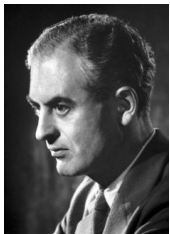
- » Each lymphocyte bears a single receptor with a unique specificity.
- » Interaction between a foreign molecule and a lymphocyte receptor capable of binding that molecule with a high affinity leads to lymphocyte activation and clonal expansion.
- » Lymphocytes bearing receptors specific for ubiquitous self molecules are deleted at an early stage in lymphoid cell development and are therefore absent from the repertoire of mature lymphocytes.

F. Macfarlane Burnet



## From *Adoptive Transfer*...

- » Billingham RE, Brent L, Medawar PB. 1953. 'Actively acquired tolerance' of foreign cells. *Nature* 172, 603–606.
- » Mitchison NA. 1953. Passive transfer of transplantation immunity. *Nature* 171, 267–268.
- » Mitchison, N.A.. 1955. Studies on the immunological response to foreign tumor transplants in the mouse. I. The role of lymph node cells in conferring immunity by adoptive transfer. *J. Exp. Med.* 102, 157–177.
- » Klein, G., Sjogren, H.O., Klein, E., Hellstrom, K.E., 1960. Demonstration of resistance against methylcholanthrene-induced sarcomas in the primary autochthonous host. *Cancer Res.* 20, 1561–1572.



**Peter  
Medawar**



**Avrion  
Mitchison**

## ...to *Adoptive T Cell Therapy*

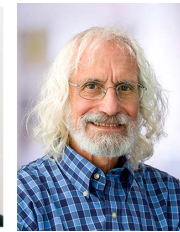
- » Graft-versus-Leukemia (GVL) effect of bone marrow transplantation
- » Donor leukocyte infusion (DLI)
- » Lymphokine-activated killer (LAK) cell therapy
- » Tumor-infiltrating lymphocytes (TILs)
- » Virus-specific T cells (VSTs)



**Steve  
Rosenberg**



**Hans  
Kolb**



**Phil  
Greenberg**

and  
many  
more!

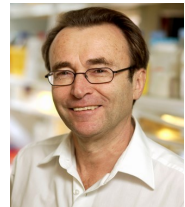
# T cells fighting cancer: a complex history



Stutman O.  
Science 1976

## Tumor Development after 3-Methylcholanthrene in Immunologically Deficient Athymic-Nude Mice

Abstract. *Athymic-nude* (nu/nu) mice and normal (nu/+) mice showed no differences in either latent period or incidence of local sarcomas or lung adenomas within 120 days after administration of 3-methylcholanthrene at birth. However, nu/nu mice were incapable of rejecting allogeneic skin grafts for the duration of the experiment. These results argue against an active role of thymus-dependent immunity as a surveillance mechanism preventing tumor development.



Rolf  
Kiessling

R. Kiessling<sup>+</sup>, Eva Klein<sup>+</sup>, H. Pross<sup>+</sup> and H. Wigzell<sup>+</sup>  
Department of Tumor Biology, Karolinska Institute, Stockholm<sup>+</sup> and Department of Immunology, Uppsala University, Uppsala<sup>o</sup>

Kiessling et al., Eur J Immunol 1975

### “Natural” killer cells in the mouse

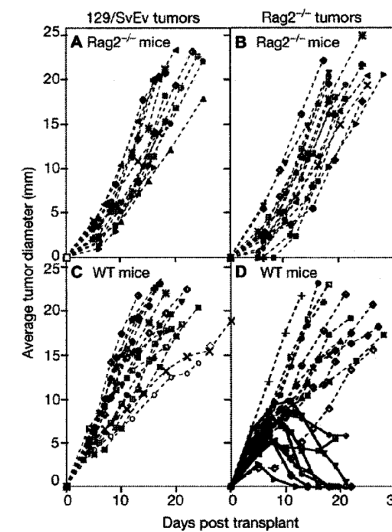
#### II. Cytotoxic cells with specificity for mouse Moloney leukemia cells. Characteristics of the killer cell\*

Normal mice contain cytolytic cells with specificity for *in vitro* grown mouse Moloney leukemia cells. Such killer cells are most frequent in the spleens; lymph node and bone marrow contain less and thymus virtually no killer activity. Peak activity is found around one to three months of age. Spleen cells from genetically athymic mice are as active killer cells as those from normal mice of the same strain.

## THE THREE ES OF CANCER IMMUNOEDITING

Annu Rev Immunol, 2004. 22:239

Gavin P. Dunn,<sup>1</sup> Lloyd J. Old,<sup>2</sup> and Robert D. Schreiber<sup>1</sup>



Bob Schreiber



Lloyd Old

# Tumor Immunology – From Adoptive Immunity to CAR Therapy: An Evolutionary Perspective

Sadelain, M. From Adoptive Immunity to CAR Therapy: An Evolutionary Perspective. Encyclopedia of Immunobiology, Vol. 4. 2016 (Elsevier)

Singh AK, McGuirk JP. Lancet Oncol. 2020 Mar;21(3):e168-e178.

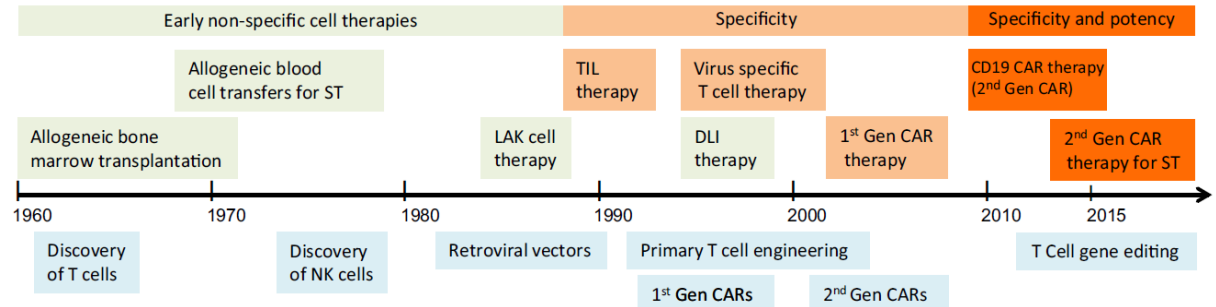
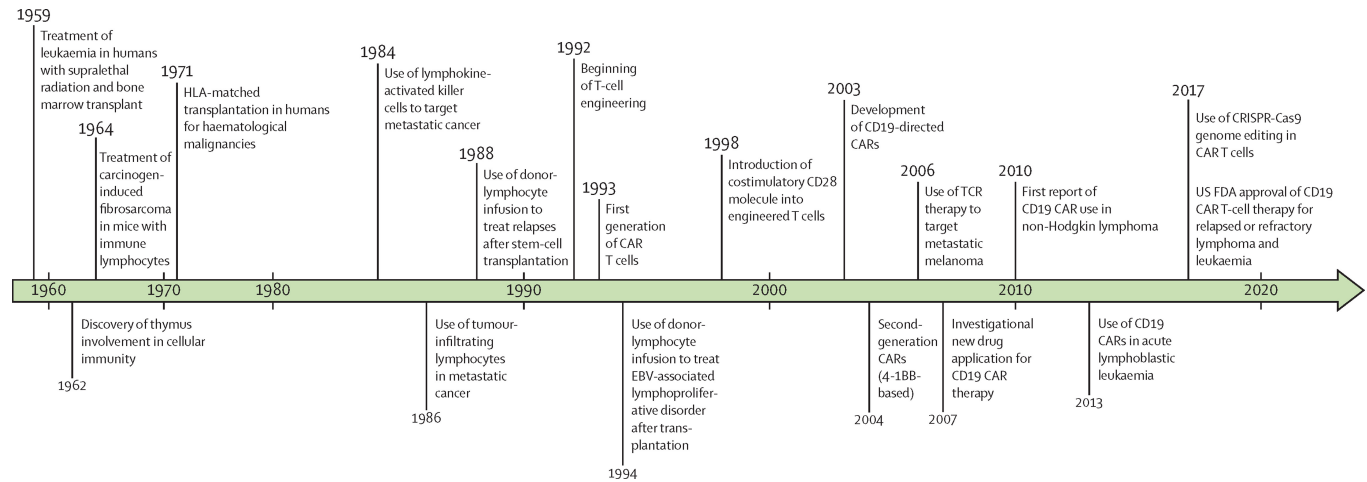
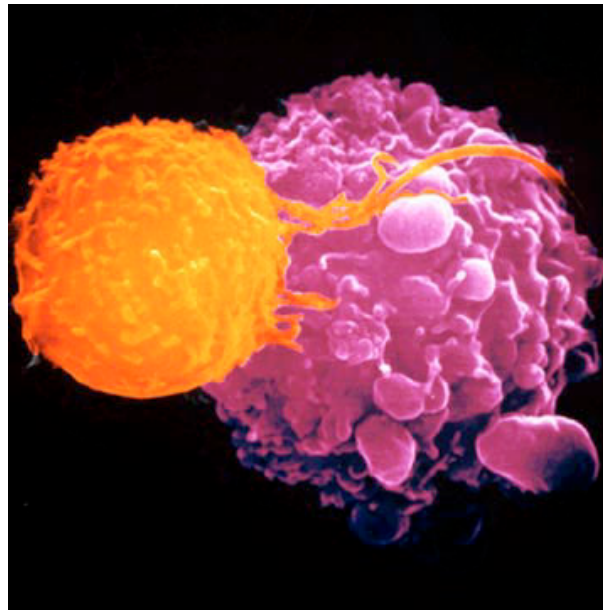


Figure 2 From the adoptive transfer of cellular immunity to CAR therapy. Scientific (below) and clinical (above) milestones.



## The rise of engineered T cells as cancer drugs

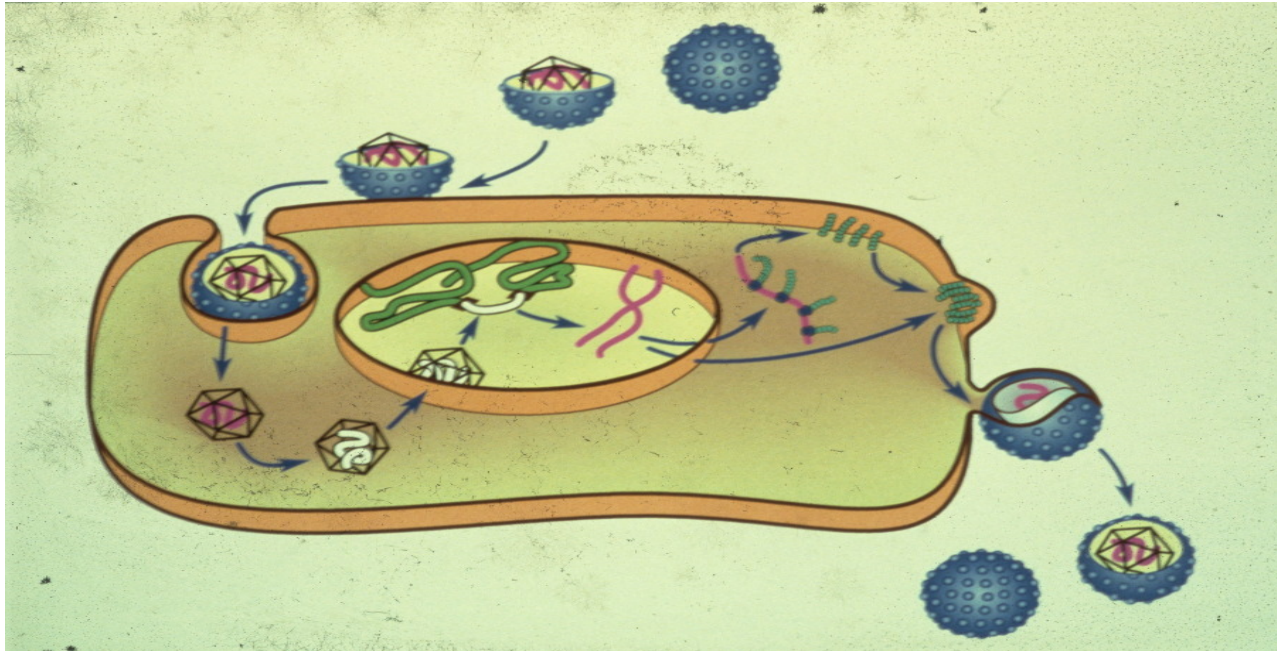
- » A major limitation of many current cancer therapeutics is their lack of curative potential
- » Immunotherapy must harness T cell specificity, persistence and potency to achieve



- » **Safety**
- » **Efficacy**
- » **Specificity**
- » **Long-acting**
- » **Potency**



# Retroviral Vectors (MLV, HIV, FV)



Reverse transcription (1975)



**David  
Baltimore**



**Howard  
Temin**

Packaging Cell Lines (Late 80's)



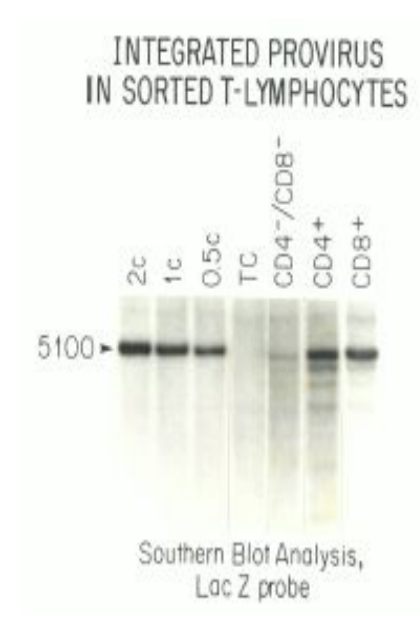
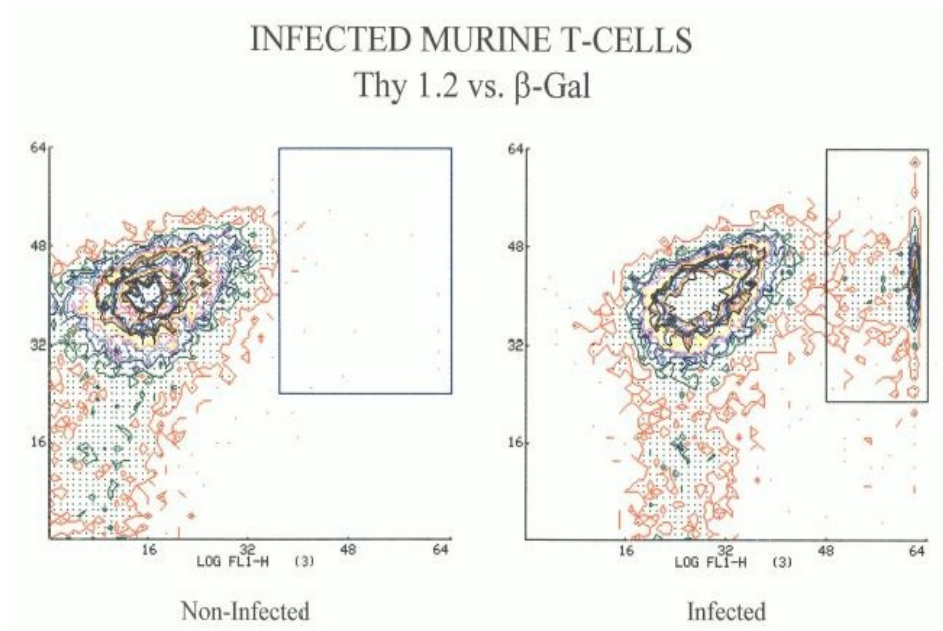
**Dusty Miller**



**Richard  
Mulligan**

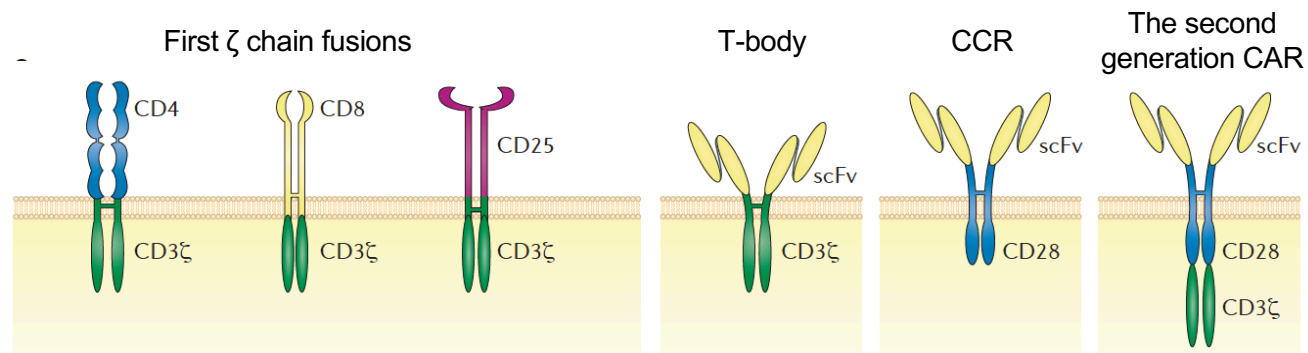
# First steps in primary T cell engineering

- » Retroviral vectors ( $\gamma$ RV, LV)
- » Transposons (Sleeping Beauty)



# The beginning of CAR design

Van der Stegen, Nat Rev Drug Dev, 2015



# The beginning of CAR design

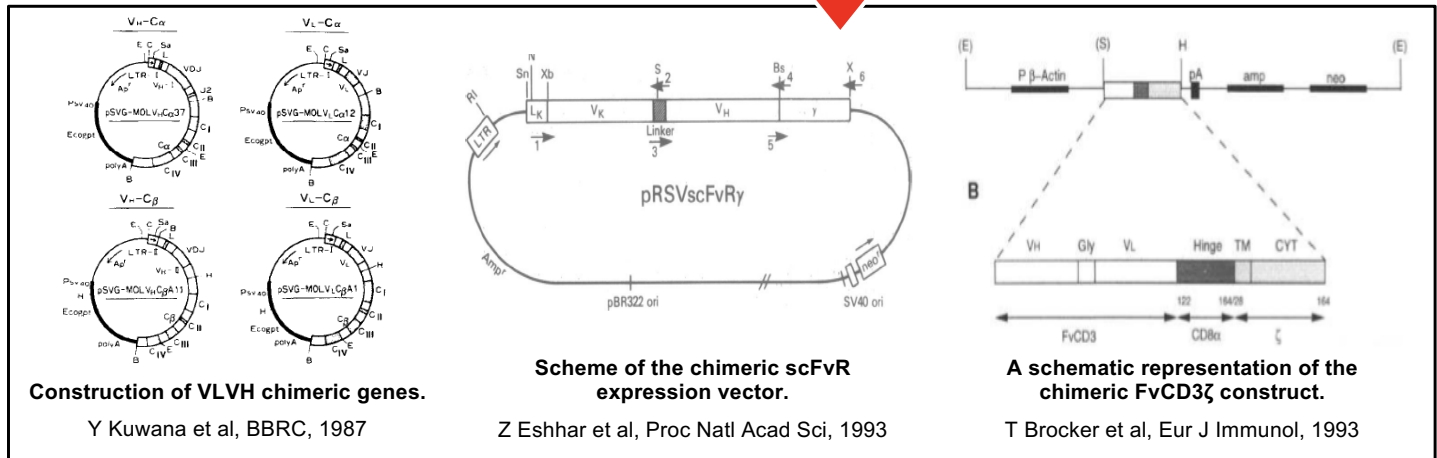
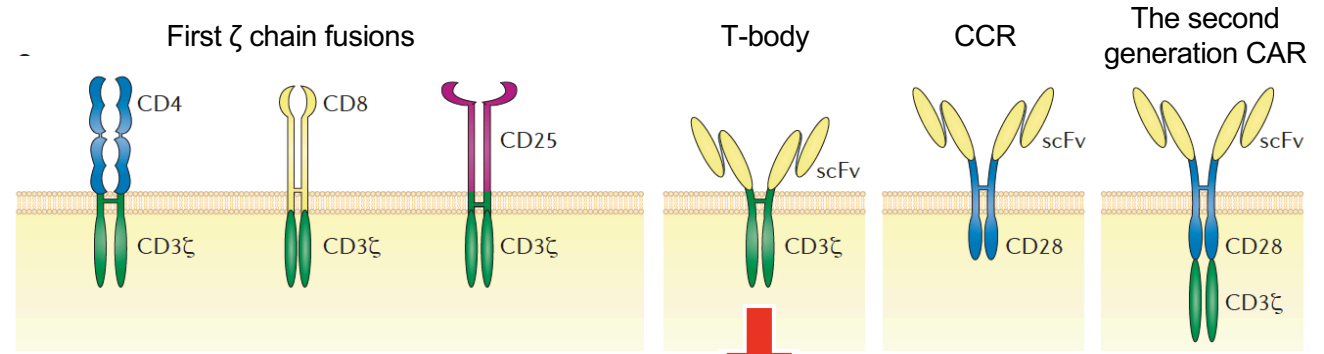
Van der Stegen, Nat Rev Drug Dev, 2015



**Zelig Eshhar**

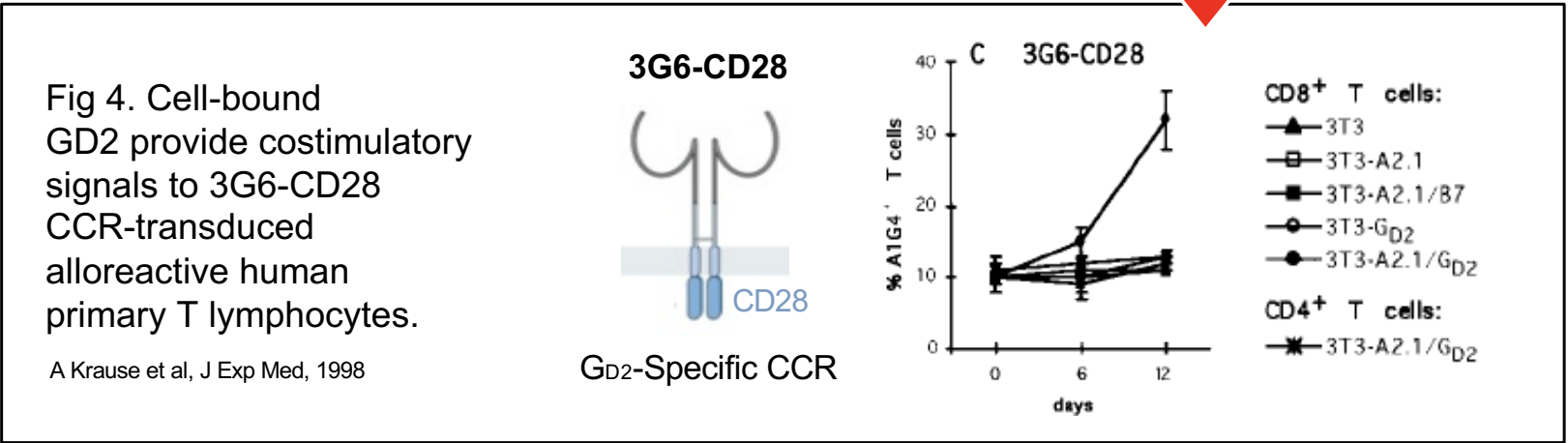
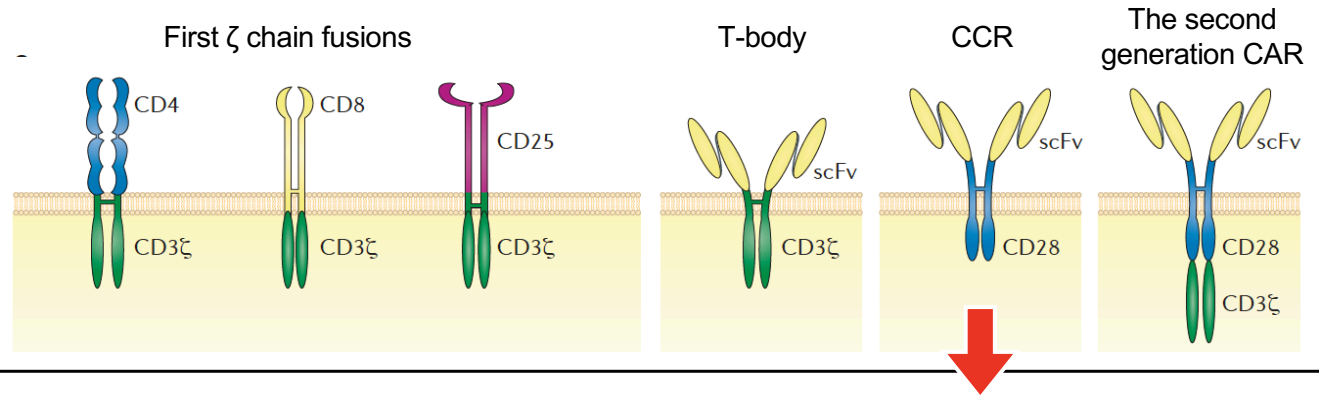


**Thomas Brocker**



# The beginning of CAR design

Van der Stegen, Nat Rev Drug Dev, 2015



# The beginning of CAR design

Van der Stegen, Nat Rev Drug Dev, 2015

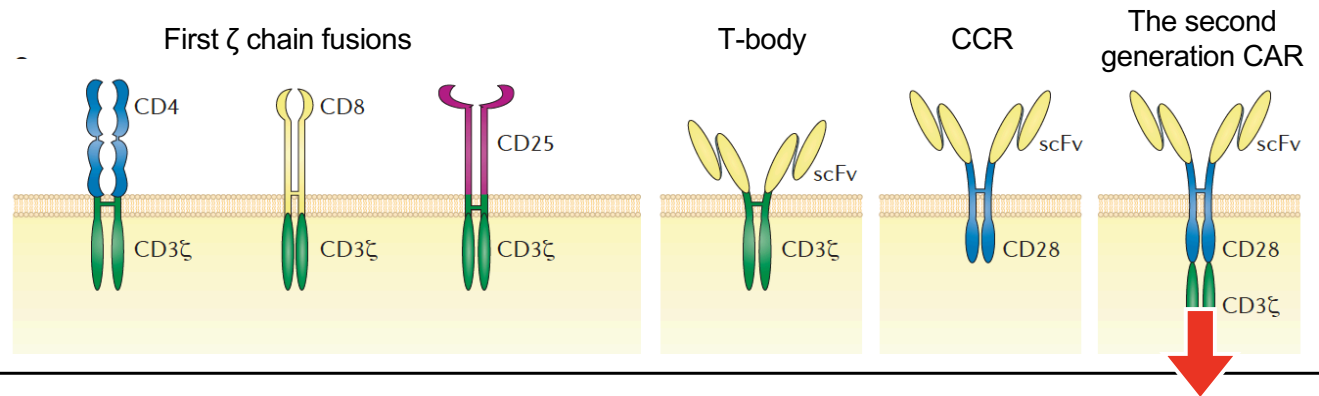
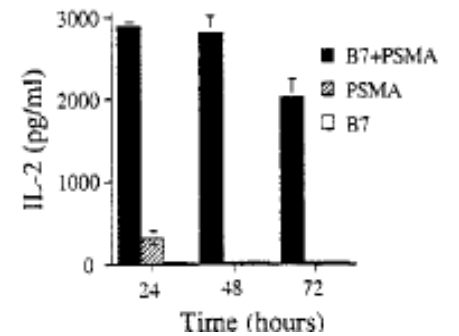
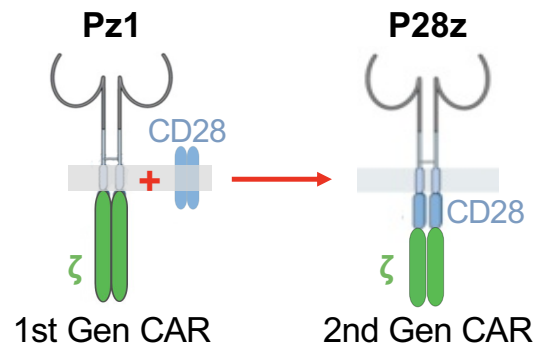
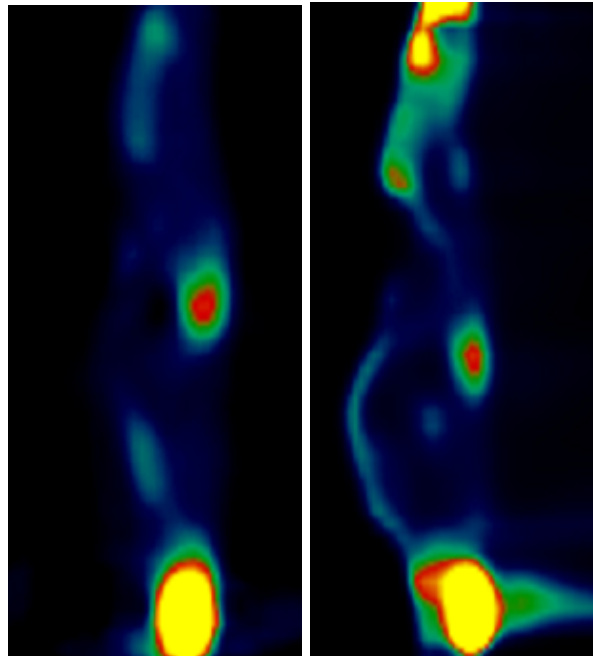


Fig 4. NIH3T3 fibroblasts coexpressing human PSMA and B7.1 (CD80) direct cytokine release by Pz-1-transduced T cells. (Pz-1; a PSMA-specific CAR).  
M Gong et al, Neoplasia, 1999



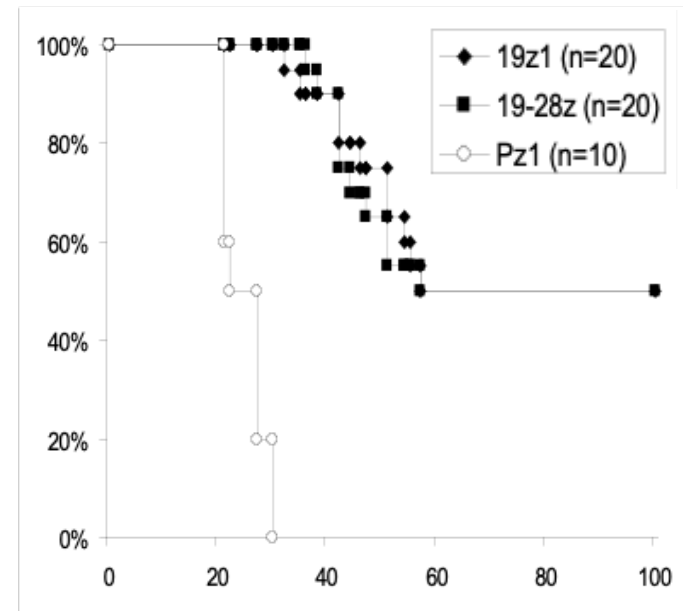
# Identification of CD19 as an effective CAR target

CD19 CAR T cells eradicate systemic B cell malignancies in mice

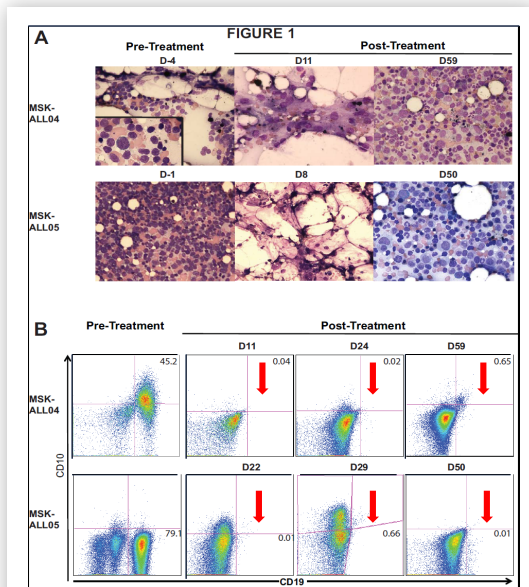


**Tumor Free**

**Untreated 4 weeks**



# Rapid and complete eradication of refractory leukemia by 19-28z CAR T cells



Brentjens, Davila, Rivière et al, Science Transl Med, March 2013



Breakthrough of the year Science, December 2013

**Table 1. Responses to CAR T-Cell Therapy.\***

Disease	Response Rate percent	Comments	Reference
<b>Leukemia</b>			
B-cell acute lymphoblastic leukemia (in adults)	83-93	High initial remission rates; unresolved issue is whether CAR T-cell therapy is definitive therapy or should be followed by allogeneic hematopoietic stem-cell therapy	Park et al. <sup>12</sup> Davila et al. <sup>13</sup> Turtle et al. <sup>17</sup>
B-cell acute lymphoblastic leukemia (in children)	68-90	Approximately 25% of patients reported to have a relapse with CD19-negative or CD19-low leukemia; CD22 CAR T cells may improve survival among some patients with CD19 relapses	Maude et al. <sup>18</sup> Maude et al. <sup>19</sup> Fry et al. <sup>14</sup> Lee et al. <sup>15</sup>
Chronic lymphocytic leukemia	57-71	Relapse is rare in patients who have a complete response; ibrutinib appears to increase response rates	Porter et al. <sup>16</sup> Turtle et al. <sup>10</sup>
<b>Lymphoma</b>			
Diffuse large B-cell lymphoma	64-86	Approximately 40-50% of patients reported to have a durable complete response	Turtle et al. <sup>11</sup> Kochenderfer et al. <sup>4</sup> Schuster et al. <sup>6</sup> Neelapu et al. <sup>5</sup>
Follicular lymphoma	71	At a median follow-up of 28.6 mo, the response was maintained in 89% of patients who had a response	Schuster et al. <sup>6</sup>
Transformed follicular lymphoma	70-83	A total of 3 of 3 patients with transformed follicular lymphoma had a complete response	Turtle et al. <sup>11</sup> Schuster et al. <sup>6</sup> Neelapu et al. <sup>5</sup>
Refractory multiple myeloma	25-100	B-cell maturation antigen CAR T cells; stringent complete response in approximately 25% of patients	Ali et al. <sup>20</sup> Fan et al. <sup>8</sup> Berdeja et al. <sup>19</sup>
<b>Solid tumors</b>			
Glioblastoma	ND	(4/4) In case report from phase 2 study, complete response on magnetic resonance imaging after intravenous and cerebrospinal fluid administration of CAR T cells; complete response lasted 7.5 mo	Brown et al. <sup>10</sup>
Pancreatic ductal adenocarcinoma	17	In one patient with liver metastasis, CAR T-cell treatment produced a complete metabolic response in the liver but was ineffective against the primary pancreatic tumor	Beatty et al. <sup>11</sup>

June and Sadelain, N Engl J Med, 2018



# Rapid and complete eradication of refractory leukemia by 19-28z CAR T cells

**FIGURE 1**

**A** Pre-Treat D-4  
MSK-ALL04  
D-1  
MSK-ALL05

**B** Pre-Treatment  
MSK-ALL04  
CD10  
MSK-ALL05

## The New York Times

© 2012 The New York Times NEW YORK, MONDAY, DECEMBER 10, 2012

### In Girl's Last Hope, Altered Cells Beat Leukemia

By DENISE GRADY

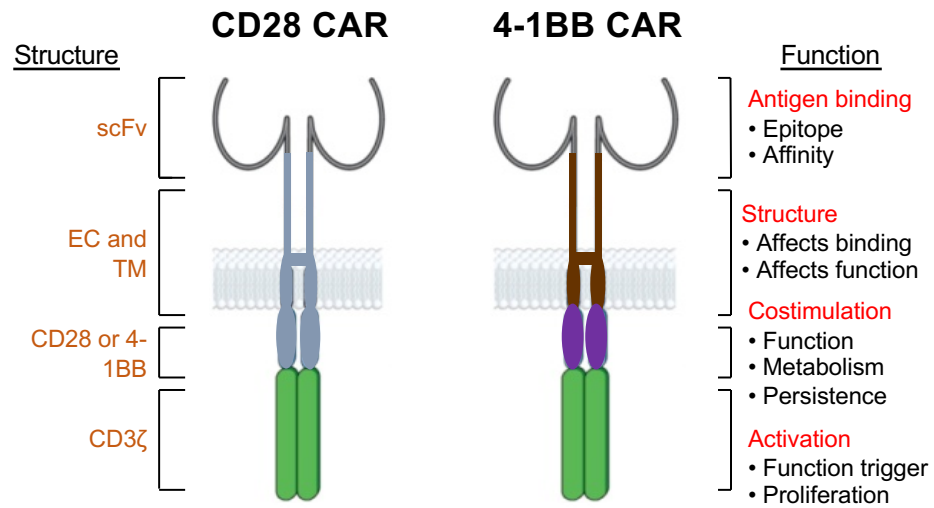
...Dr. Michel Sadelain, who conducts similar studies at the Sloan-Kettering Institute, said: "These T-cells are living drugs."

Authors	Reference
rates; unresolved 19-T-cell therapy is r should be fol- hematopoietic	Park et al., <sup>20</sup> Davila et al., <sup>21</sup> Turtle et al. <sup>17</sup>
patients reported with CD19-negative 19z CAR T survival among CD19 relapses	Maude et al., <sup>18</sup> Maude et al., <sup>19</sup> Fry et al., <sup>22</sup> Lee et al. <sup>23</sup>
nts who have a s; ibrutinib appears se rates	Porter et al., <sup>11</sup> Turtle et al. <sup>10</sup>
s of patients re- rable complete re-	Turtle et al., <sup>10</sup> Kochenderfer et al., <sup>14</sup> Schuster et al., <sup>16</sup> Neelapu et al. <sup>15</sup>
of 28.6 mo, the re- ined in 89% of pa- sponse	Schuster et al. <sup>16</sup>
s with transformed d a complete re-	Turtle et al., <sup>10</sup> Schuster et al., <sup>16</sup> Neelapu et al. <sup>15</sup>
en CAR T cells; sponse in ap- patients	Alli et al., <sup>24</sup> Fan et al., <sup>25</sup> Berdeja et al. <sup>26</sup>
n phase 2 study, on magnetic reso- r intravenous and administration of e response last-	Brown et al. <sup>27</sup>
r metastasis, CAR- sduced a complete s in the liver but inst the primary	Beatty et al. <sup>28</sup>

Brentjens, Davila, Riviere et al., Science Transl Med, March 2013

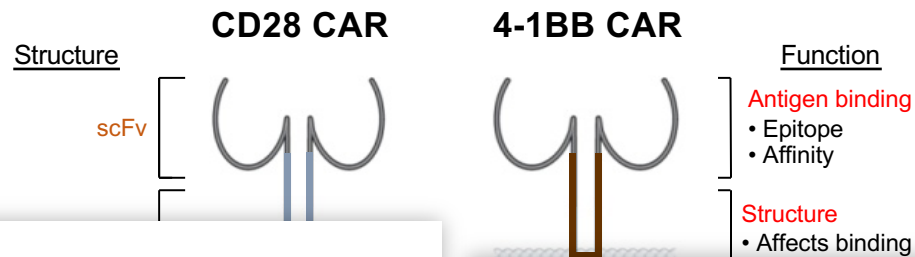
Breakthrough of the year Science, December 2013

Sung and Sadelain, N Engl J Med, 2018



FDA approved in 2017	
Axicabtagene Ciloleucel (Yescarta)	Tisagenlecleucel (Kymriah)

## Prototypic CD19 CARs



## Human T-lymphocyte cytotoxicity and proliferation directed by a single chimeric TCR $\zeta$ /CD28 receptor

John Maher, Renier J. Brentjens, Gertrude Gunset, Isabelle Rivière, and Michel Sadelain\*

Maher et al, Nat Biotechnol. 2002



Leukemia (2004) 18, 676-684  
 © 2004 Nature Publishing Group All rights reserved 0887-6924/04 \$25.00  
[www.nature.com/leu](http://www.nature.com/leu)

## Chimeric receptors with 4-1BB signaling capacity provoke potent cytotoxicity against acute lymphoblastic leukemia

C Imai<sup>1</sup>, K Mihara<sup>1</sup>, M Andreansky<sup>1</sup>, IC Nicholson<sup>2</sup>, C-H Pui<sup>1,3,4</sup>, TL Geiger<sup>1</sup> and D Campana<sup>1,3,4</sup>

Imai et al, Leukemia, 2004

CD19 CAR approved in 2017

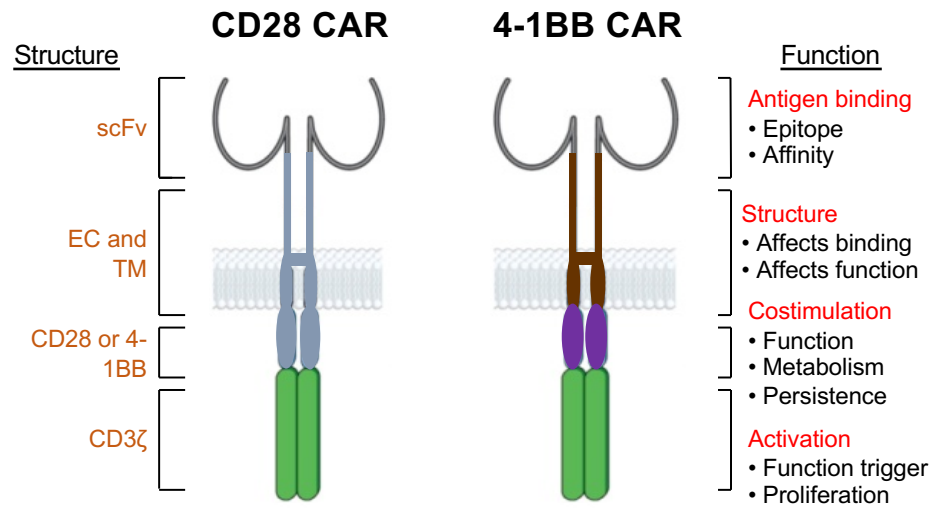
Axicabtagene Ciloleucel  
(Yescarta)

Tisagenlecleucel  
(Kymriah)

## Prototypic CD19 CARs



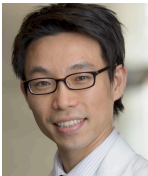
**Dario Campana**



FDA approved in 2017	
Axicabtagene Ciloleucel (Yescarta)	Tisagenlecleucel (Kymriah)

## Prototypic CD19 CARs

# CD19 CAR therapy in R/R ALL and NHL – overall survival



**Jae Park**

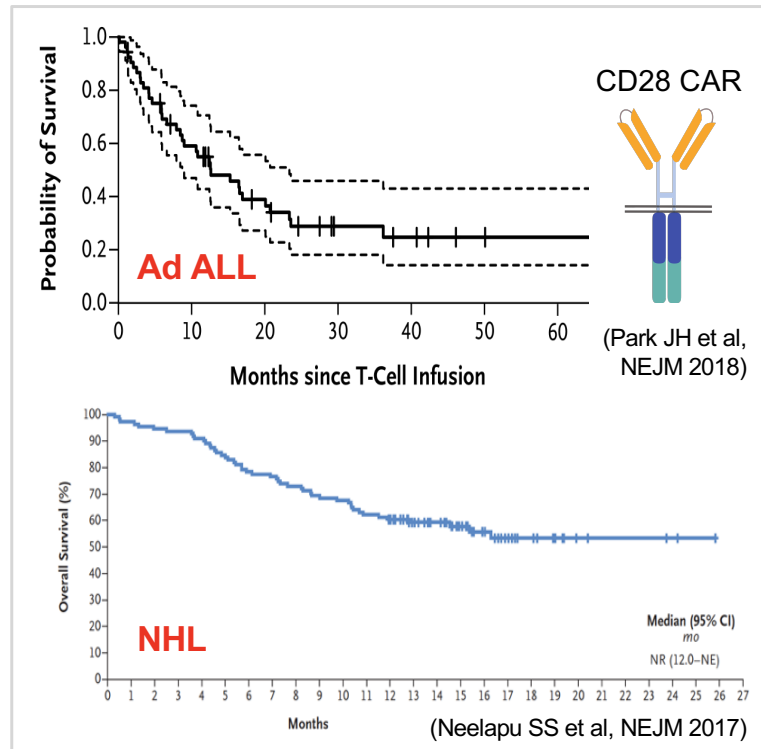


**Marco Davila**

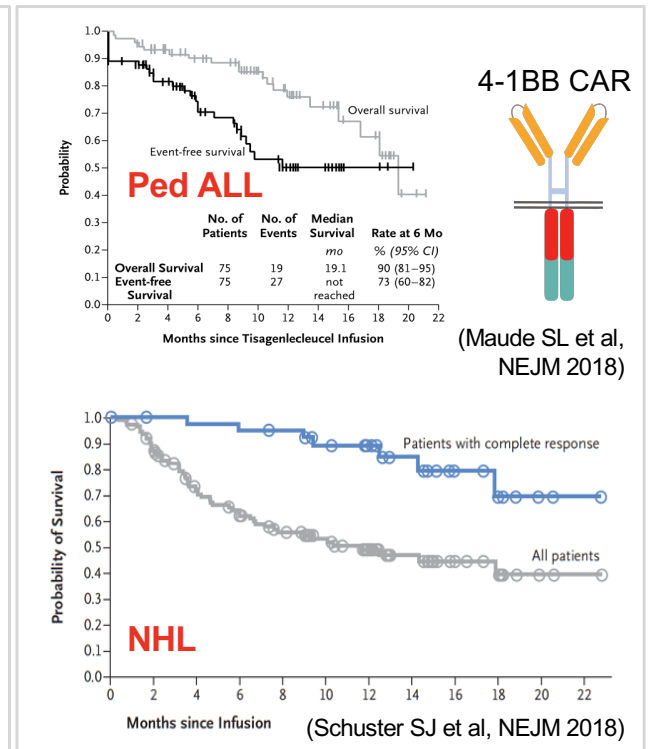


**Renier Brentjens**

## Overall survival



## Event-free and Overall Survival



# Tribute to the “Manufacturers”

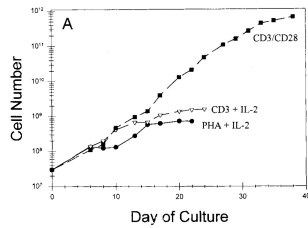
## Effects of CD28 Costimulation on Long-Term Proliferation of CD4<sup>+</sup> T Cells in the Absence of Exogenous Feeder Cells<sup>1</sup>

Bruce L. Levine,<sup>2\*</sup> Wendy B. Bernstein,<sup>†</sup> Mark Connors,<sup>‡</sup> Nancy Craighead,<sup>§</sup> Tullia Lindsten,<sup>¶</sup> Craig B. Thompson,<sup>||</sup> and Carl H. June\*



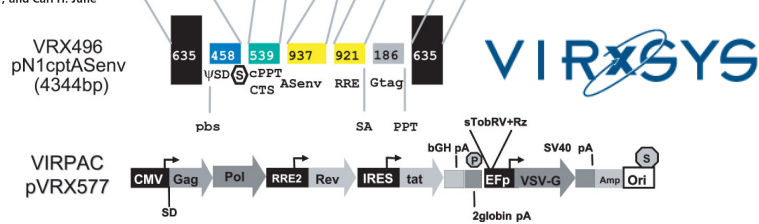
J Immunol 1997;  
159:5921-5930

**Carl June**

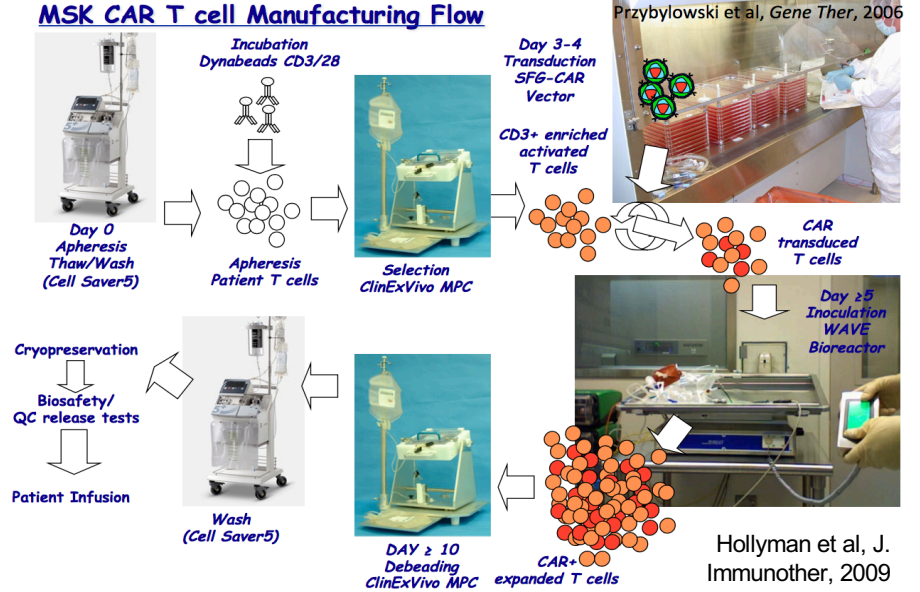


## Gene transfer in humans using a conditionally replicating lentiviral vector

Bruce L. Levine<sup>1\*</sup>, Laurent M. Humeau<sup>2</sup>, Jean Boyer<sup>1</sup>, Rob-Roy MacGregor<sup>3</sup>, Tessio Rebello<sup>4</sup>, Xiaobin Lu<sup>1†</sup>, Gwendolyn K. Binder<sup>5</sup>, Vladimir Slepushkin<sup>7</sup>, Franck Lemiale<sup>6</sup>, John R. Mascola<sup>8\*</sup>, Frederic D. Bushman<sup>1†</sup>, Boro Dropulic<sup>1,12</sup>, and Carl H. June<sup>1,15</sup>



## MSK CAR T cell Manufacturing Flow



**Levine,**  
Penn



**Dudley,**  
NCI



**Rivière,**  
MSK

# Building on the success of CD19 CAR therapy

- » 500 trials worldwide (clinicaltrials.gov)
- » >20,000 infused patients
- » 145 biotech/pharma CAR programs

**The evolution of cell therapy trials for cancer since 1993**

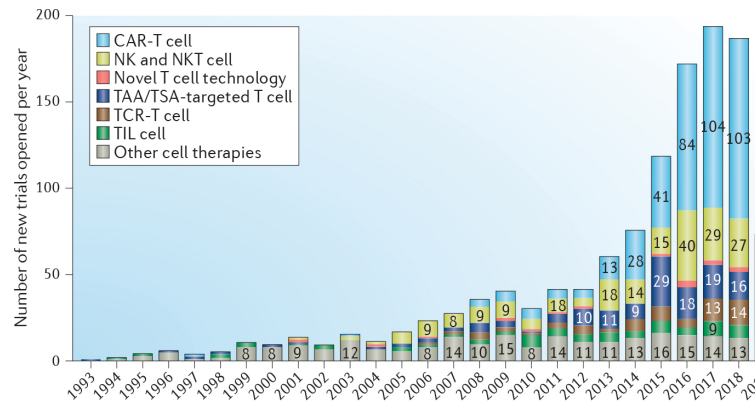


Fig. 2 | The evolution of cell therapy trials for cancer since 1993. Both currently active and inactive trials are included for this analysis, which is based on data extracted from ClinicalTrials.gov in March 2019, and so the data for this year is incomplete, indicated by an asterisk.

Jia Xin Yu et al. Nat Rev Drug Discov. 2019

**Interventional CAR clinical trials by country (< 2019)**

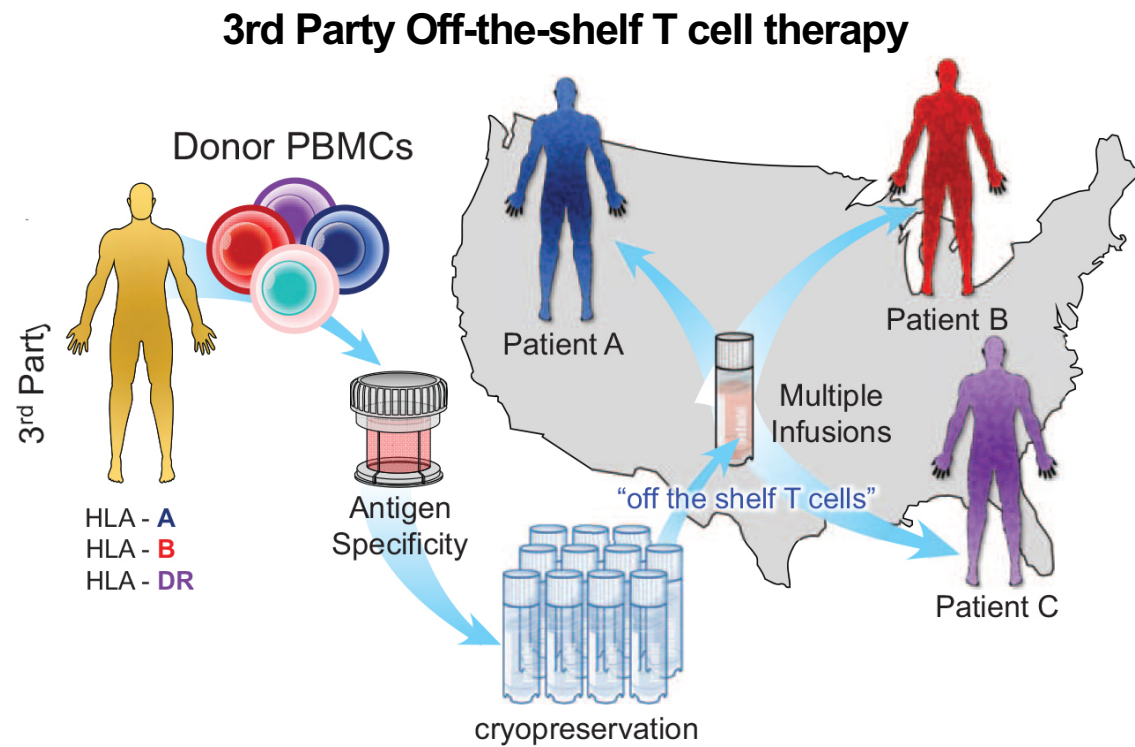


**The therapeutic landscape for cells engineered with chimeric antigen receptors**

Matthew MacKay<sup>1,2,3,4</sup>, Ebrahim Afshinneko<sup>1,2,3</sup>, Jonathan Rub<sup>1,3</sup>, Ciaran Hassan<sup>5</sup>, Mihir Khunte<sup>5</sup>, Nithyashri Baskaran<sup>5</sup>, Bryan Owens<sup>5</sup>, Lauren Liu<sup>5</sup>, Gail J. Roboz<sup>6</sup>, Monica L. Guzman<sup>6</sup>, Ari M. Melnick<sup>6</sup>, Shixiu Wu<sup>7,8\*</sup> and Christopher E. Mason<sup>1,2,3,9\*</sup>

Matthew MacKay et al. Nat Biotechnol. 2020

# Generation and distribution of off-the-shelf VSTs

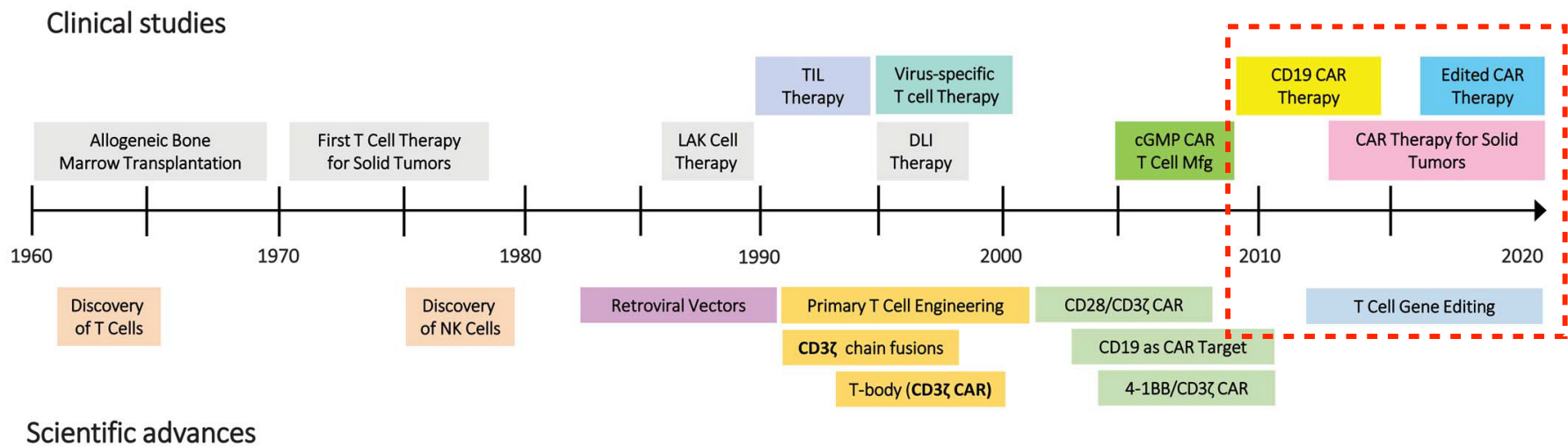




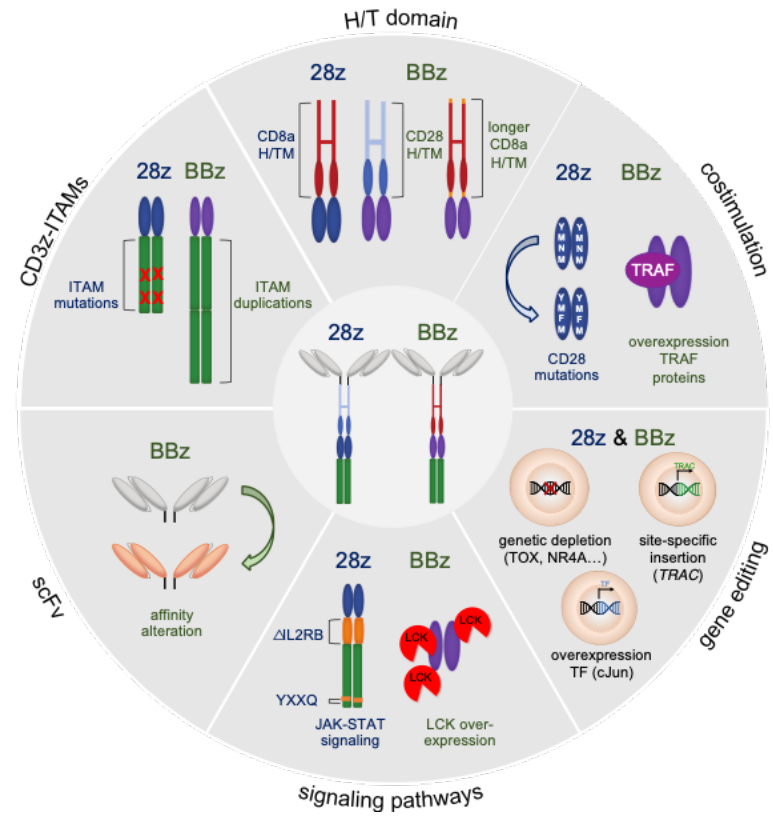
# Future targets for VST therapy

Potential VST targets	Targets/antigen sources	Clinical studies	Reference
HSV	A02-restricted T cells expanded	None	Ma et al <sup>82</sup>
VZV	VZV vaccine	Used in prophylaxis post-BMT	Ma et al <sup>80</sup>
HPV	E6, E7 peptide libraries	Prior use against HPV-associated cancers	McCormack et al <sup>83</sup>
<b>Respiratory viruses</b>			
Influenza A	Nucleocapsid protein, Matrix protein 1 peptide libraries	None	Vasileiou et al <sup>87</sup>
Respiratory syncytial virus	Nucleoprotein and glycoprotein F0 protein peptide libraries	None	Vasileiou et al <sup>87</sup>
Human metapneumovirus	Nucleocapsid, fusion protein peptide libraries	None	Tzannou et al <sup>32</sup>
Human parainfluenza virus	HPIV3 matrix protein	None published/NCT03180216	McLaughlin et al <sup>81</sup>
<b>Enteric viruses</b>			
Norovirus	VP1, NS6 peptide libraries	None	Hanajiri et al
<i>Mycobacteria</i> spp.	Ag85B, PPE68, ESAT6, CFP10 peptide libraries ( <i>Mycobacteria tuberculosis</i> )	None	Patel et al <sup>85</sup>
Mucormycosis	<i>Rhizopus oryzae</i> extract	None	Castillo et al <sup>86</sup>

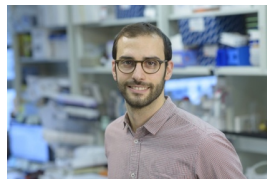
BMT, bone marrow transplantation; HPV, human papillomavirus; VZV, varicella-zoster virus.



**Fig. 3. Historical overview of CAR-T cell therapy.** CAR: chimeric antigen receptor; cGMP: current good manufacturing practices; DLI: donor leukocyte infusion; LAK: lymphokine-activated killer; Mfg: Manufacturing; NK: natural killer; TIL: tumor-infiltrating lymphocytes.



# CRISPR/Cas9-targeted integration into the TRAC locus

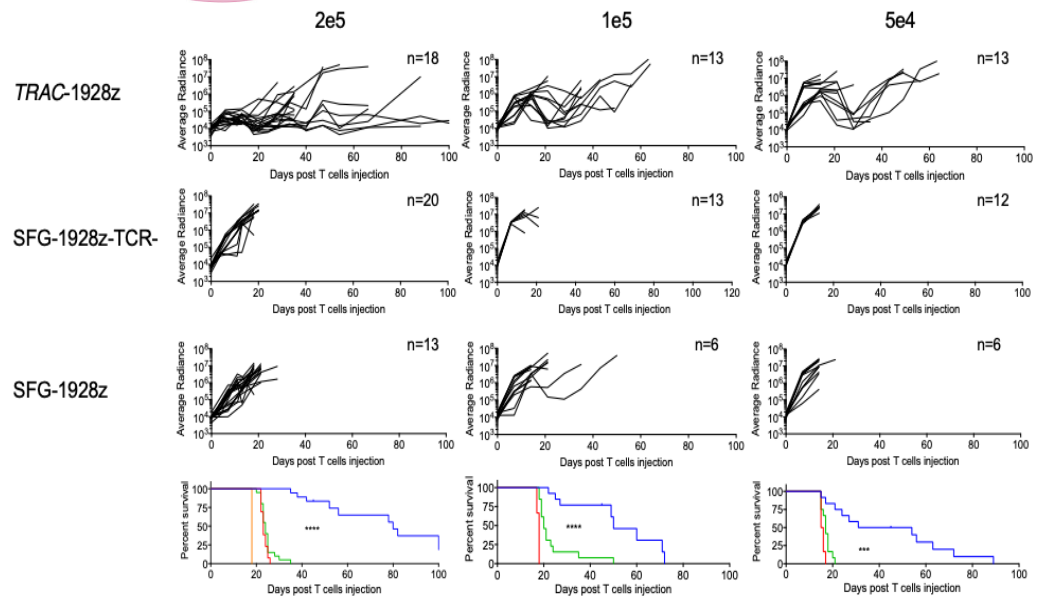
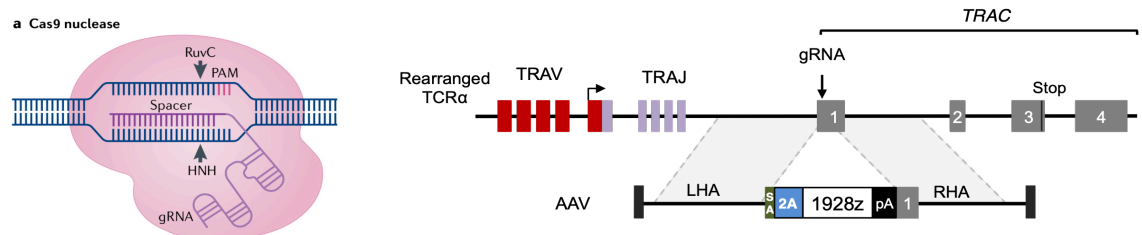


**Justin Eyquem, PhD**



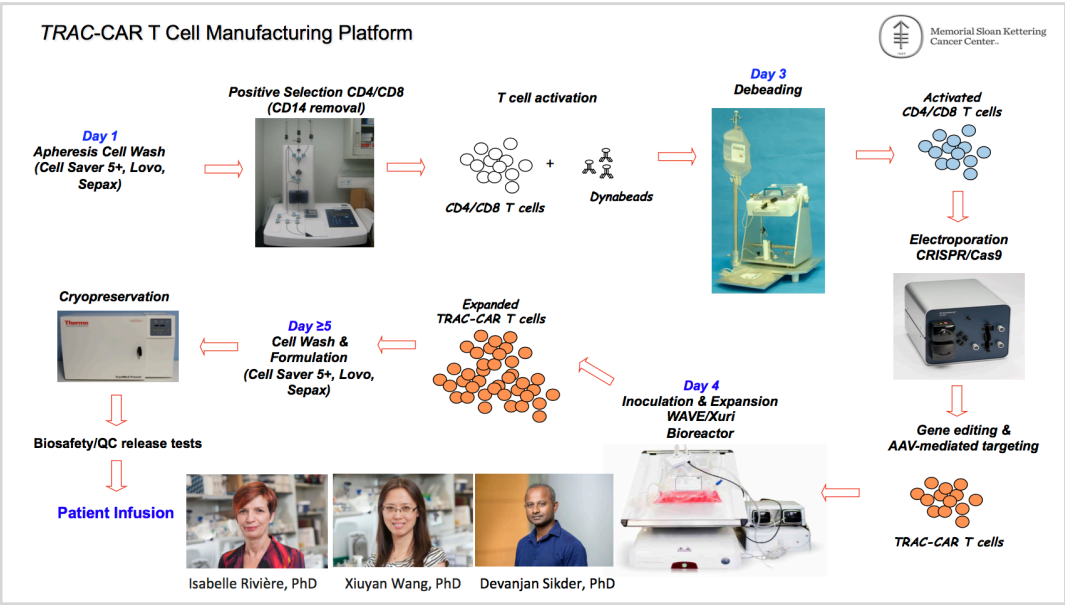
**J. Mansilla-Soto, PhD**

Eyquem, Mansilla-Soto et al, Nature, 2017



# Genome-edited CAR T cells

## TRAC-CAR: CAR Knock-in



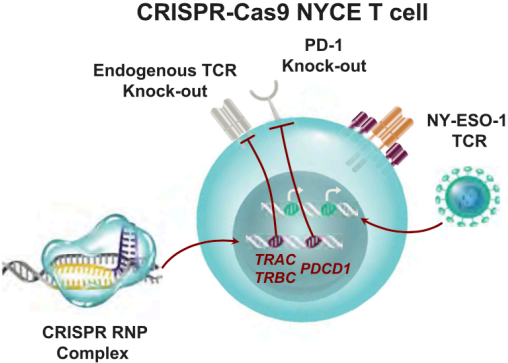
## Triple Knock-out + LV-TCR

Science

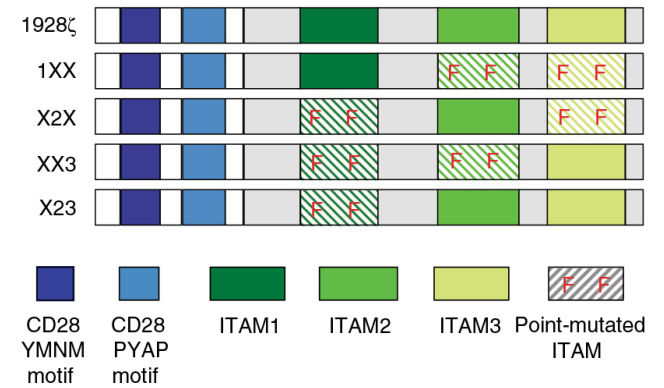
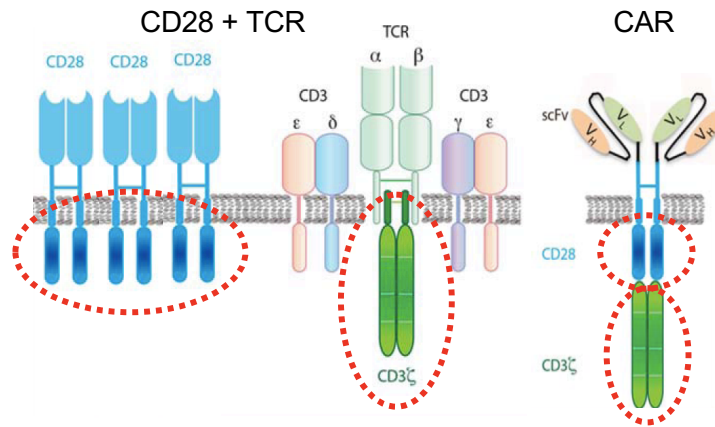
### CRISPR-engineered T cells in patients with refractory cancer

Edward A. Stadtmauer, Joseph A. Fraietta, Megan M. Davis, Adam D. Cohen, Kristy L. Weber, Eric Lancaster, Patricia A. Mangan, Irina Kulikovskaya, Minnal Gupta, Fang Chen, Lifeng Tian, Vanessa E. Gonzalez, Jun Xu, In-young Jung, J. Joseph Melnick, Gabriela Plesa, Joanne Shea, Tina Matlawski, Amanda Cervini, Avery L. Gaymon, Stephanie Desjardins, Anne Lamontagne, January Salas-McKee, Andrew Fesnak, Donald L. Siegel, Bruce L. Levine, Julie K. Jadowsky, Regina M. Young, Anne Chew, Wei-Ting Hwang, Elizabeth O. Hexner, Beatriz M. Carreno, Christopher L. Nobles, Frederic D. Bushman, Kevin R. Parker, Yanyan Qi, Ansuman T. Satpathy, Howard Y. Chang, Yangbing Zhao, Simon F. Lacey and Carl H. June

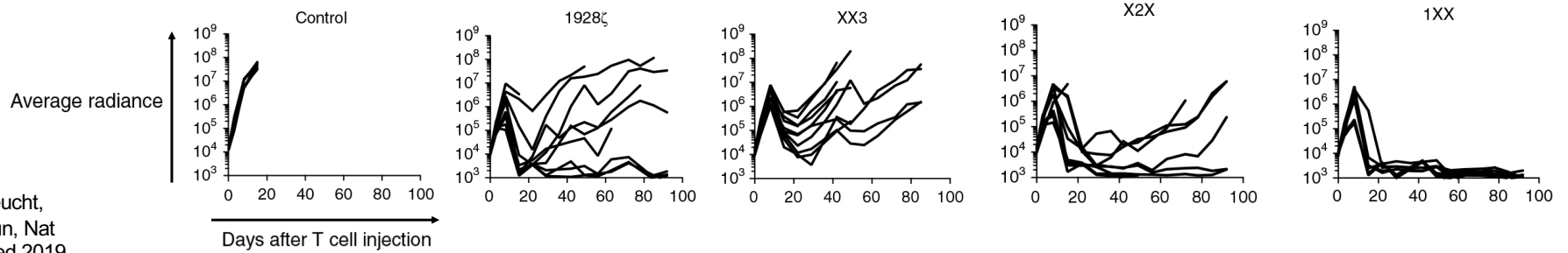
Science 367 (6481), eaba7365. DOI: 10.1126/science.aba7365 originally published online February 6, 2020



# ITAM-based calibration of activation strength in CD28/CD3 $\zeta$ CARs



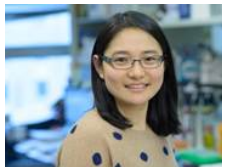
Feucht,  
Sun, Nat  
Med 2019



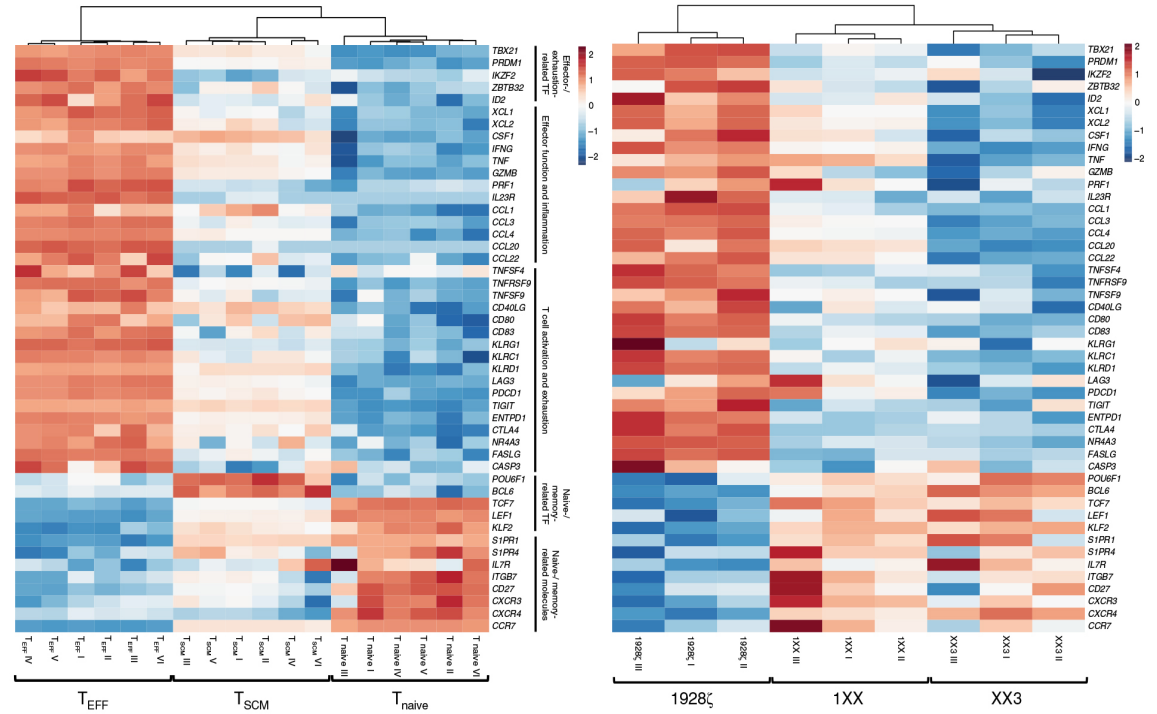
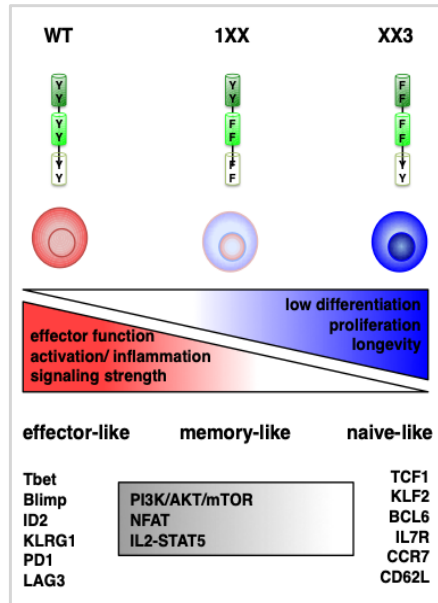
# CAR ITAM-calibration directs T cell fate



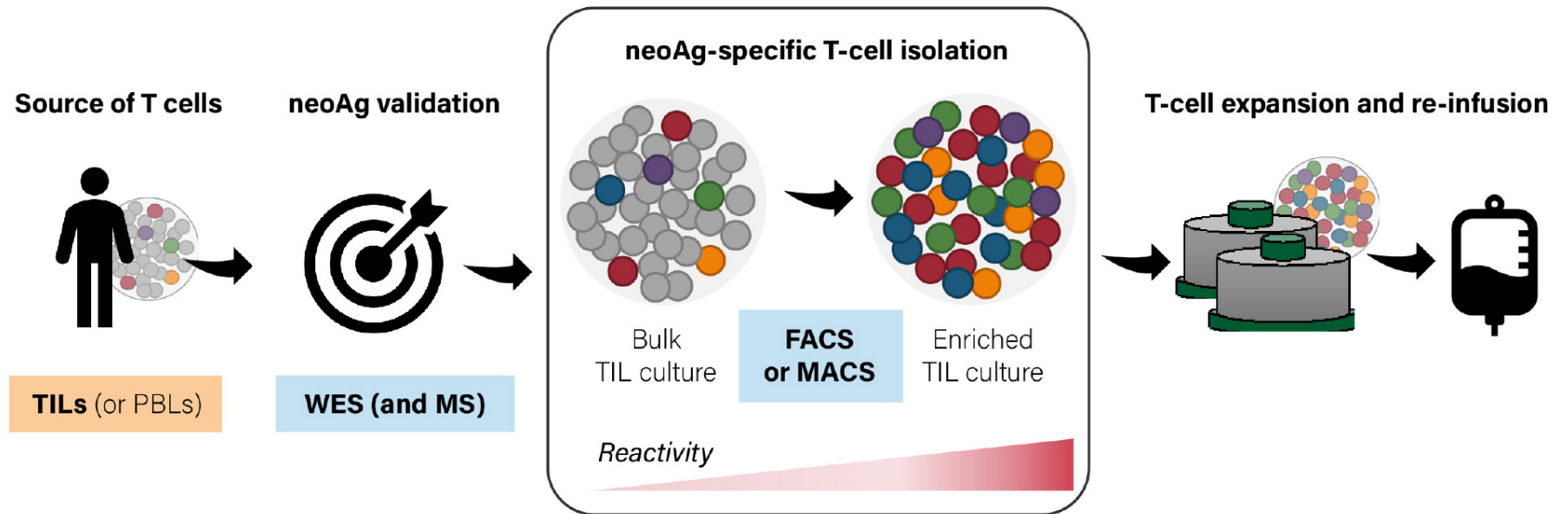
Judith Feucht, MD



Sun Jie, PhD

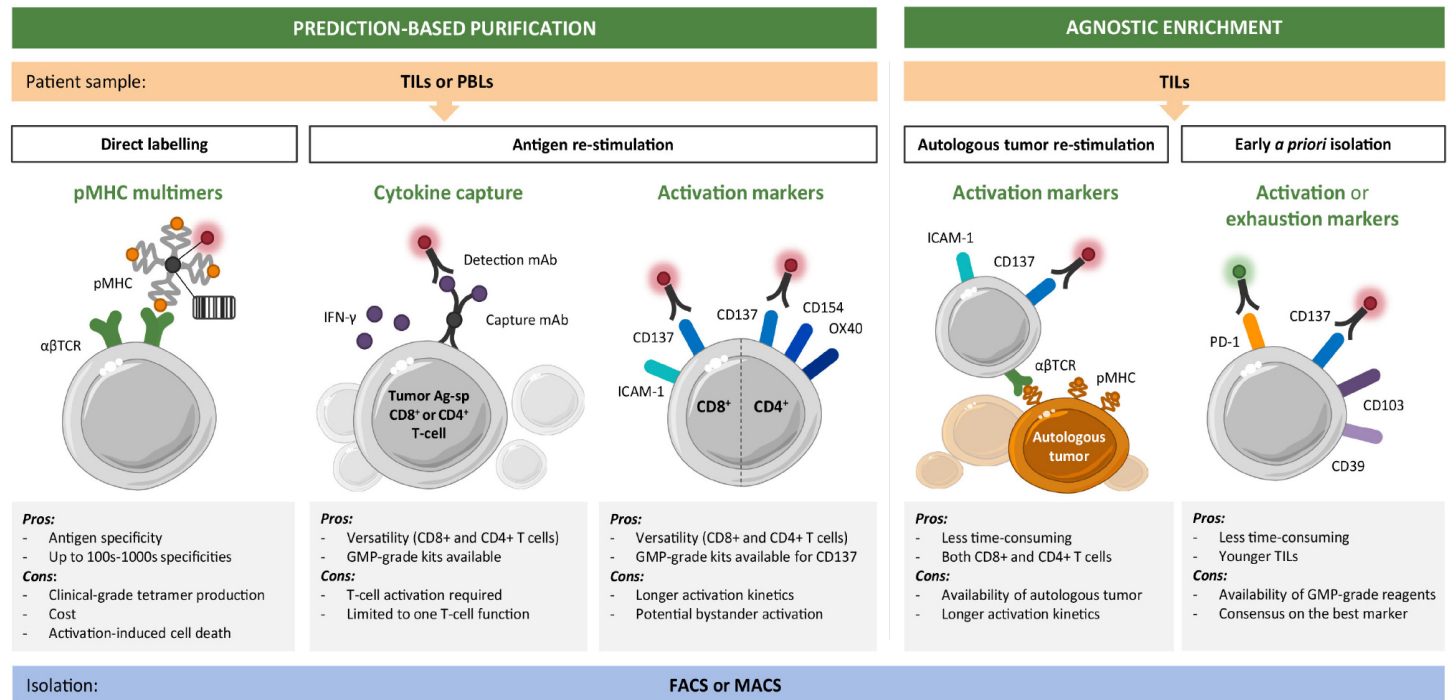


# General workflow for personalized enrichment of antigen-specific T-cells from bulk tumor-infiltrating lymphocyte (TIL) [or peripheral blood lymphocyte (PBL)] cultures

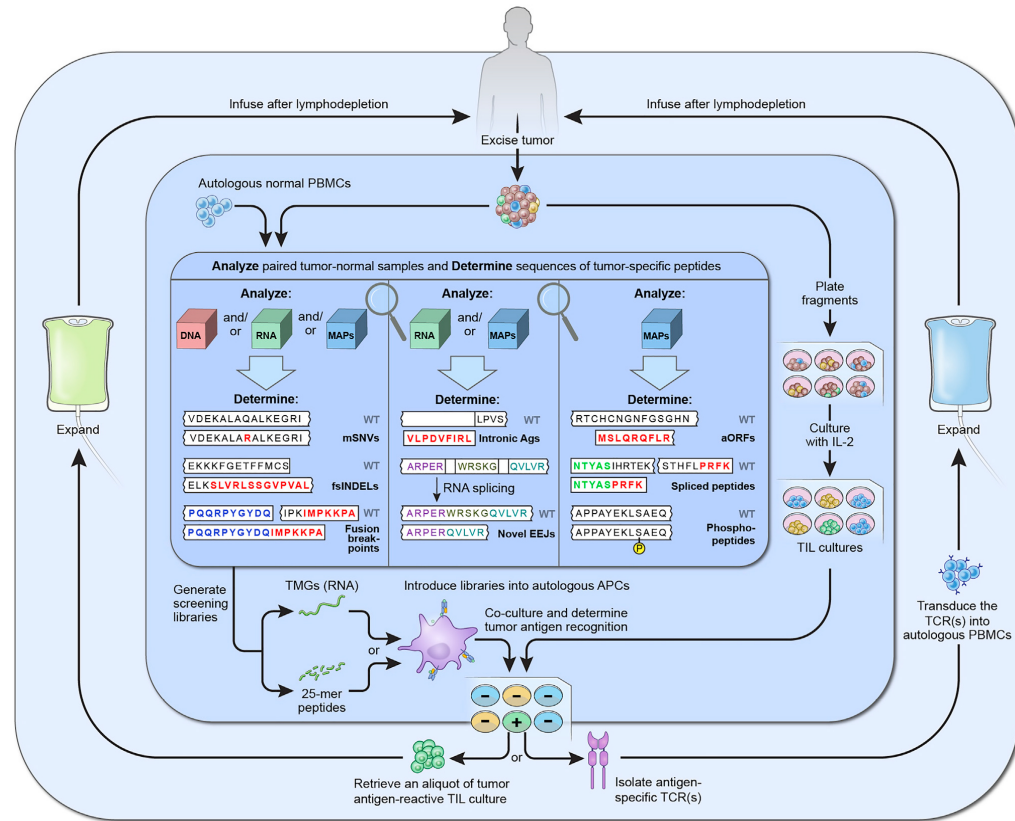




# Toolset for personalized enrichment of T-cell infusion products



# A Suggested Approach for Comprehensive Identification of Tumor Neoantigen-Reactive T Cells and Their Use for Personalized Immunotherapy



**Table 2. Characteristics of Different Tumor Antigen Types**

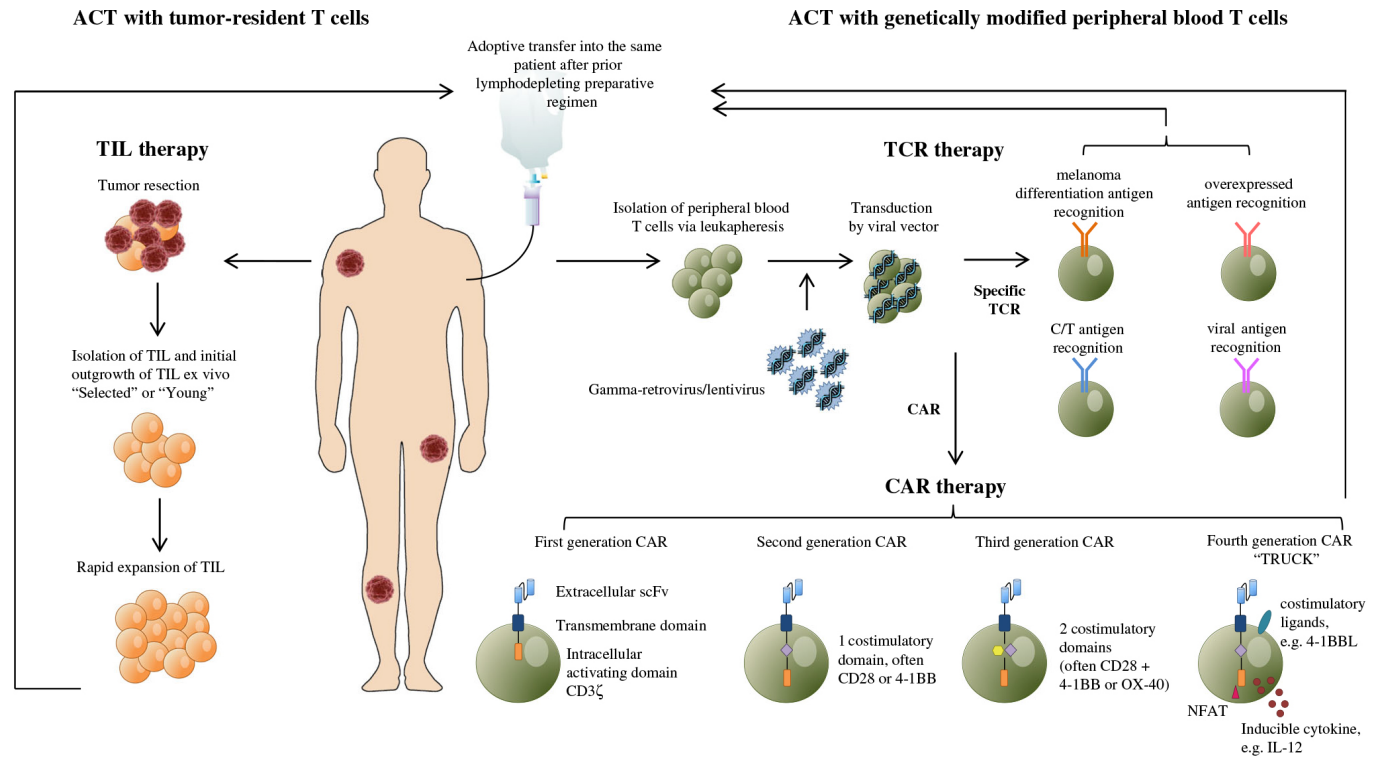
Tumor Antigen		Role in	Expression in Normal Tissues	Structural Similarity	Shared Among	Clinical Experience
Class	Type	Oncogenesis		to Normal Proteins	Patients?	with Targeting?
TAAs	CGAs	uncertain	limited (germ cells, placenta)	high	yes	yes
	HERVs	uncertain	variable (type dependent)	low	yes	limited
	TDAs	uncertain	yes	high	yes	yes
	overexpressed antigens	uncertain	yes	high	yes	yes
TSAs	mSNVs	rarely drivers	no	moderate	rarely	yes
	INDELs	rarely drivers	no	low	rarely	limited
	gene fusions	rarely drivers	no	low	rarely	limited
	viral oncoproteins	drivers	no	low	yes	yes
UCAs	splice variants alternative ORFs post-translational modifications	unexplored	unexplored; some are expressed in normal cells	variable	unexplored	no

TSAs, tumor-specific antigens; UCAs, unconventional antigens.

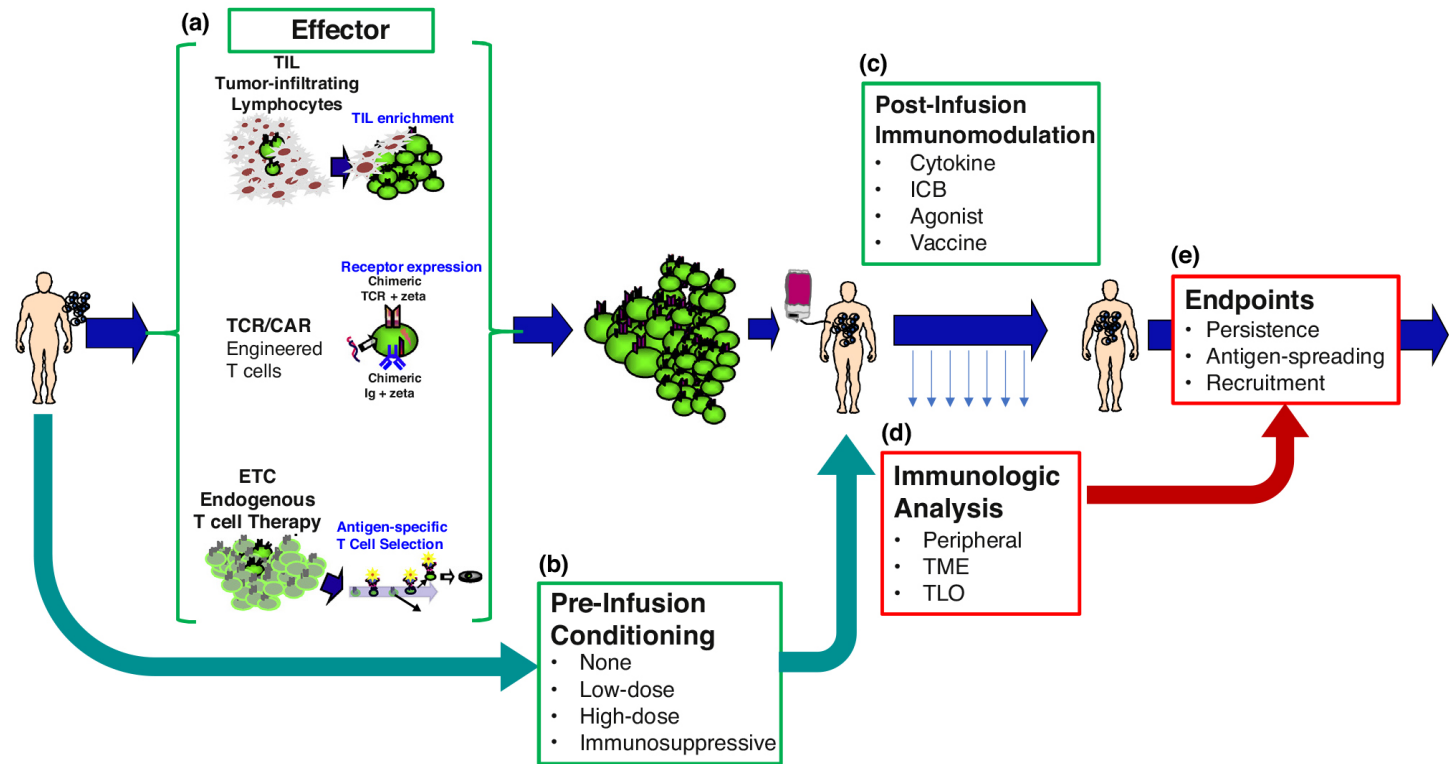
**Table 3. Neoantigens Recognized by TILs from Patients with Select Epithelial Cancers**

Cancer Type	# Of Patients Screened	# Of Patients with Neoantigen Reactivity (%)	# Of Mutations Screened	# Of Immunogenic Mutations (%)
All gastrointestinal	75	62 (83)	7,654	124 (1.6)
Colorectal	51	45 (88)	5,833	94 (1.6)
Biliary	12	8 (67)	866	12 (1.4)
Pancreatic	7	5 (71)	352	8 (2.3)
Gastric	3	2 (67)	378	6 (1.6)
Esophageal	2	2 (100)	225	4 (1.8)
Ovarian	7	5 (71)	1714	8 (0.5)

Schematic overview of the processes for adoptive cell therapy (ACT) of tumor-infiltrating lymphocytes (TIL), ACT with T cell receptor (TCR) gene therapy and ACT with chimeric antigen receptor (CAR)-modified T cells

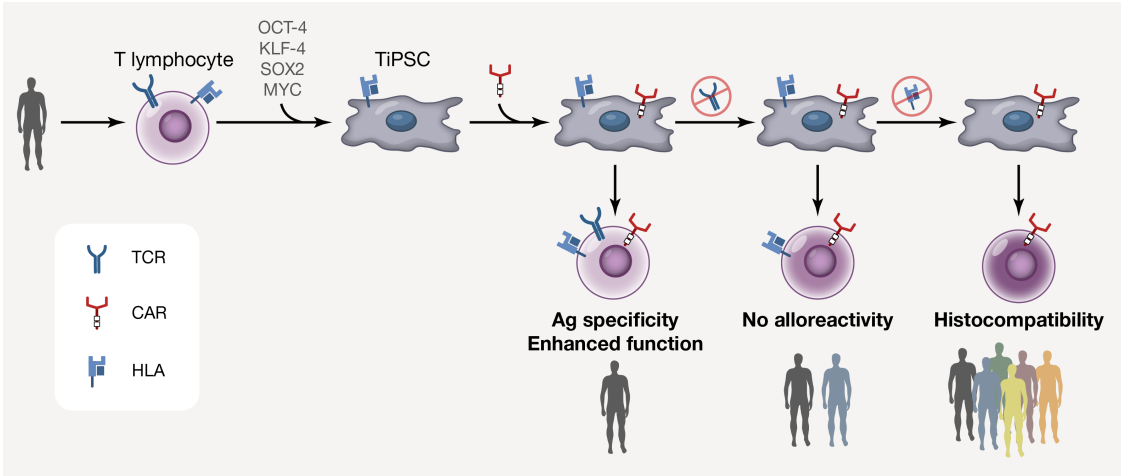


# Adoptive cell therapy: points to consider



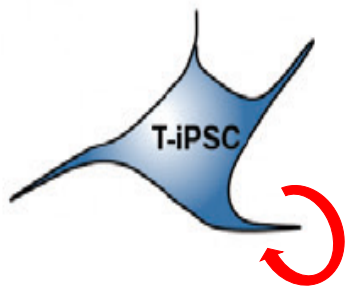
# CAR T cell sources

<b>Autologous T cells</b>	With TCR	» Bulk PBMCs » T cell subsets
	With TCR	» DLI » VSTs » $\gamma\delta$ T cells » iNKT cells
<b>Allogeneic T cells</b>	Without TCR	» $\alpha\beta$ -TCR <sup>-/-</sup> DLI » (NK cells)
	With/Without	» CB » ESC » TiPS



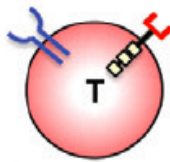
Themeli, Riviere & Sadelain, Cell Stem Cells, 2015

# TiPS for T cell immunotherapy: a long-term aspiration for synthetic immunity



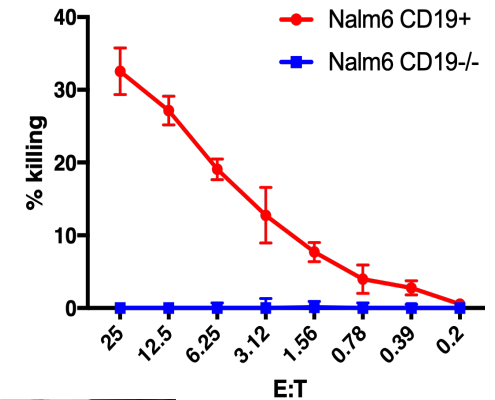
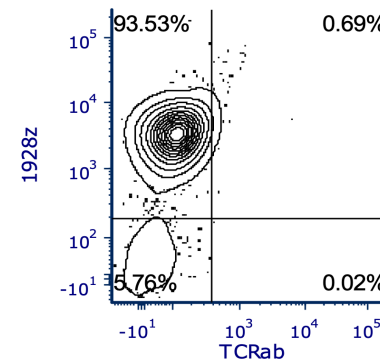
Antigen specificity  
Targeted gene disruption  
Targeted integration  
Checkpoint modulation  
Histocompatibility

**Genotype selection**



$T_{SCM}$   $T_N$  phenotype  
CD8 or CD4 T cells  
 $\gamma\delta$  T cells  
NKT cells  
Tregs

**100% purity**

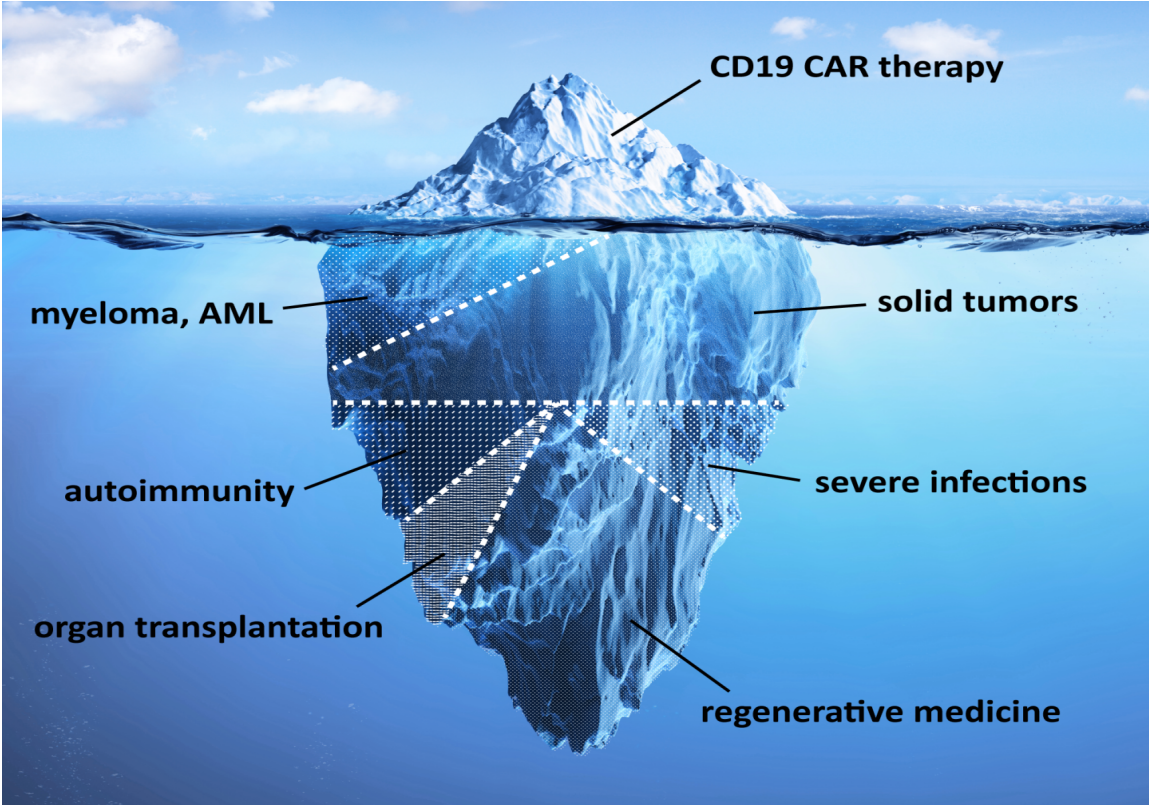


**Sjoukje van der Stegen**

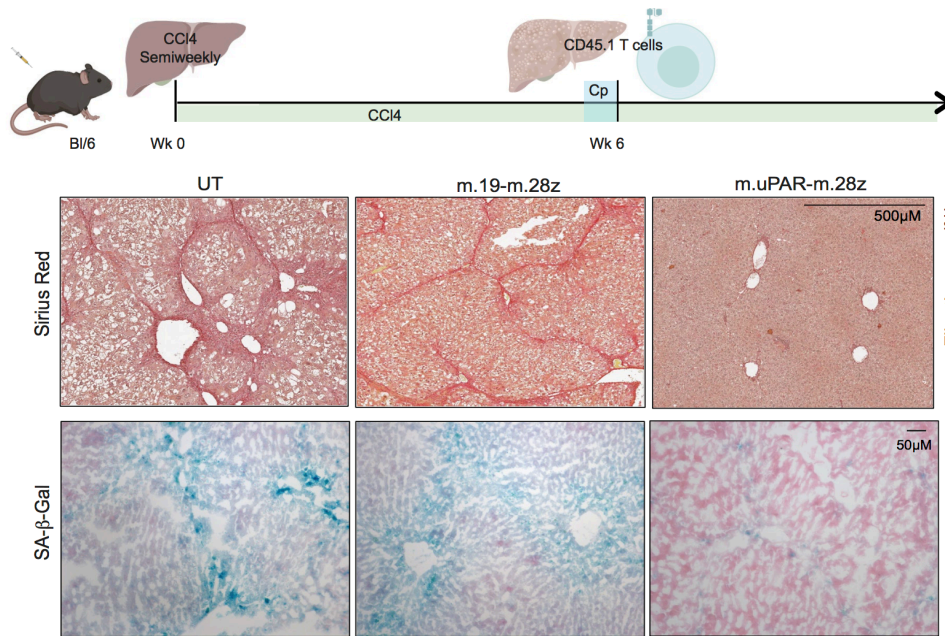




**CD19 CAR therapy**



# CAR T cells: beyond cancer



Senescence-associated pathologies

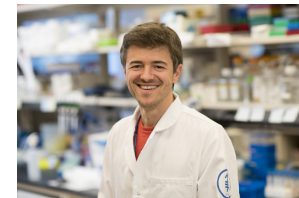
**Senolytic CAR T cells**  
e.g., liver fibrosis, NASH



**Judith C. Feucht**



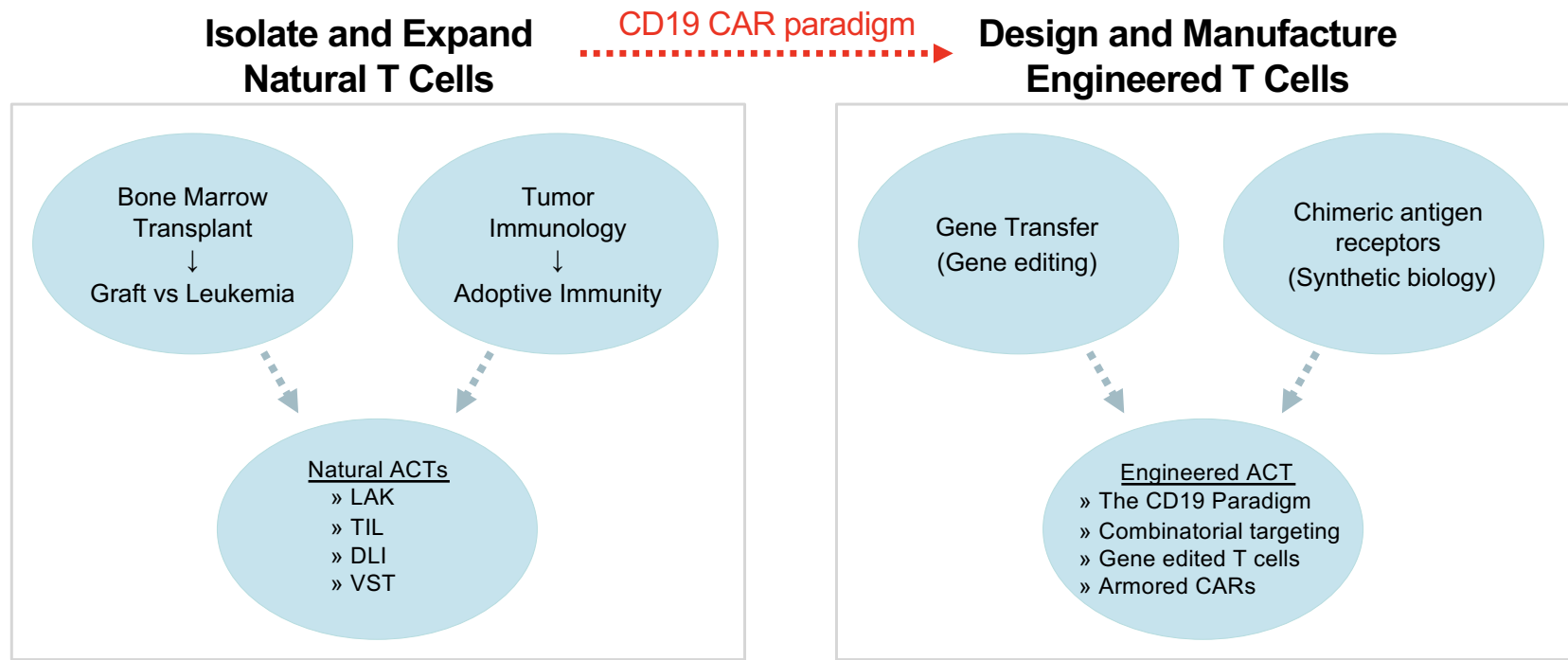
**Corina A. Vegas** Lowe Lab



**Josef Leibold** Lowe Lab



**Scott Lowe**



Sadelain. CARs: driving immunology toward synthetic biology, Curr Opin Immunol, 2016



NASDC

NCI Awardee Skills Development Consortium

# Adoptive T cell Therapies

## Questions