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# The Future of Cellular Therapies: Targeting GPRC5D for multiple myeloma as a case study

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Immune Effector Cell Therapies  
Dana-Farber Cancer Institute

**MIT Health Science Technologies**

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**HARVARD**  
MEDICAL SCHOOL



**Dana-Farber**  
Cancer Institute

# Disclosures

Commercial Interest(s)	Nature of Relationship
BMS	Licensed patents/royalties for CAR T cell therapies for MM, including, stemming from my lab work currently under clinical investigation: -Orvacabtagene autoleucel (BCMA, formerly JCARH125), -BCMA NEX-T (CC-98633), -MCARH171, -FCARH143, -JWCAR129, -MCARH109 (GPRC5D), -CC-95266 (GPRC5D) Research Funding
Sanofi	Licensed patents/royalties for GPRC5D targeted Antibodies/Bi-Specifics to treat MM Research Funding
Novartis; Chimeric Therapeutics; BMS	Scientific Advisory Board
Chroma Medicine; ImmuneBridge; Secura Bio; Clade Therapeutics; Eureka Therapeutics; Sana Biotech	Consulting

# Approved Indications

## **Axicabtagene ciloleucel** (Gilead/Kite) anti-CD19/CD28z

- Adults, R/R FL after 2+ lines (ZUMA-1; Neelapu S *NEJM* 2017)
- Adults, R/R large B-cell lymphoma after 1+ line (ZUMA-7; Locke F *NEJM* 2022)

## • **Tisagenlecleucel** (Novartis) anti-CD19/4-1BBz

- $\leq$  25yo, B-ALL primary refractory or 2+ relapses (ELIANA, Maude S *NEJM* 2018)
- Adults, R/R large B-cell lymphoma 2+ lines (JULIET; Schuster S *NEJM* 2019)

## • **Brexucabtagene autoleucel\*** (Gilead/Kite) anti-CD19/CD28z

- Adults, R/R mantle cell lymphoma (ZUMA-2; Wang M *NEJM* 2020)

## • **Lisocabtagene maraleucel** (BMS/Juno) anti-CD19/4-1BBz

- Adults, R/R large B-cell lymphoma; FL 2+ lines (TRANSEND; Abramson J *Lancet* 2020)

## • **Idecabtagene vicleucel** (BMS/Bluebird) anti-BCMA/4-1BBz

- Adults, R/R multiple myeloma 4+ lines (KarMMA; Raje N *NEJM* 2019, Munshi N *NEJM* 2021)

## • **Ciltacabtagene autoleucel** (Janssen/Legend) anti-BCMA/4-1BBz

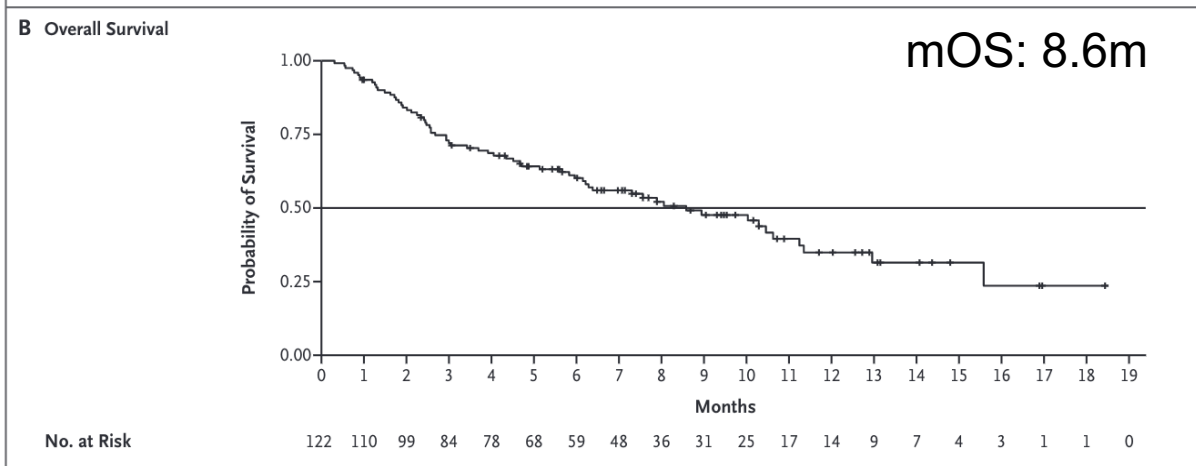
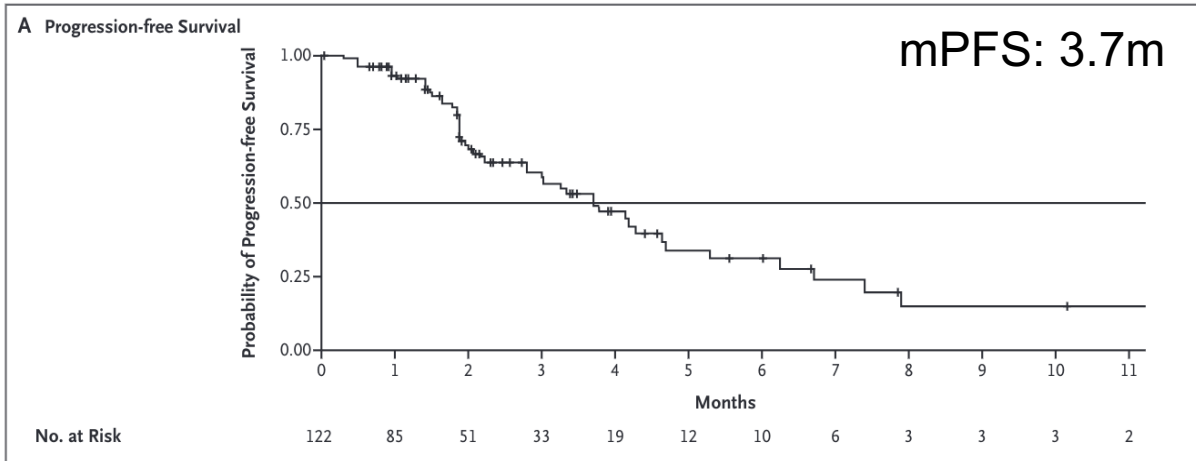
- Adults, R/R multiple myeloma 4+ lines (CARTITUDE-1; Berdeja J *Lancet* 2021)



# CAR T cell therapies provide historic advance for patients with relapsed/refractory hematologic malignancies

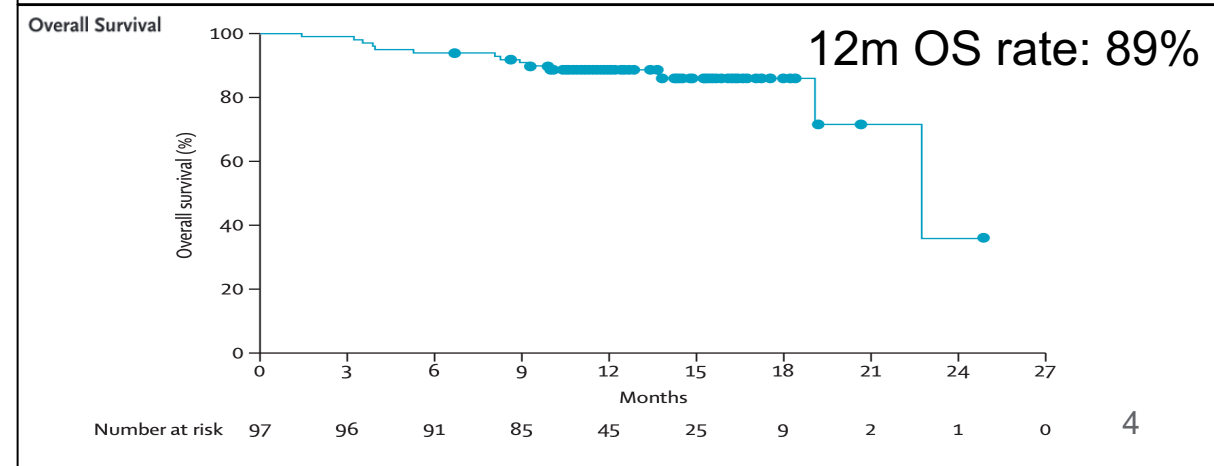
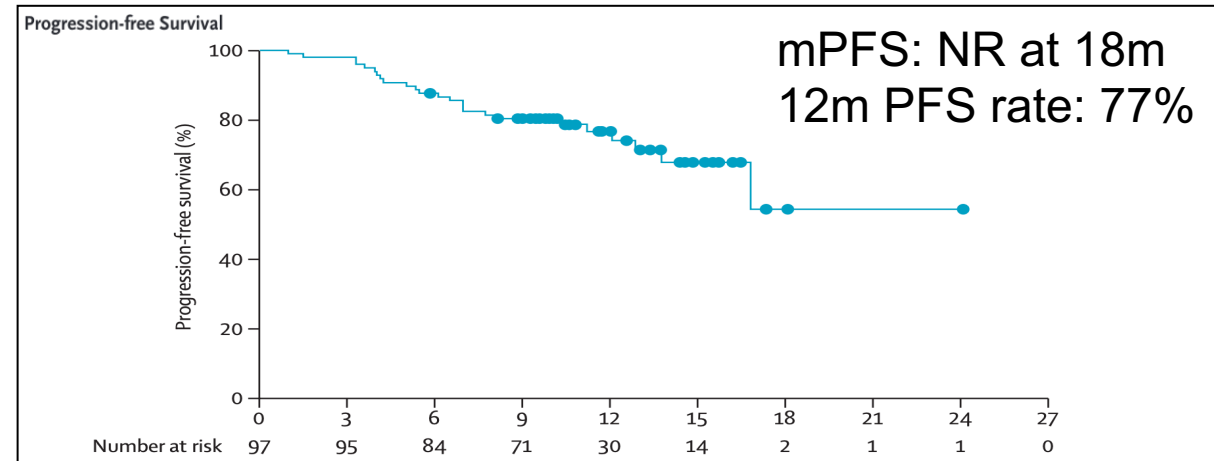
## Selinexor

N ENGL J MED 381;8 NEJM.ORG AUGUST 22, 2019



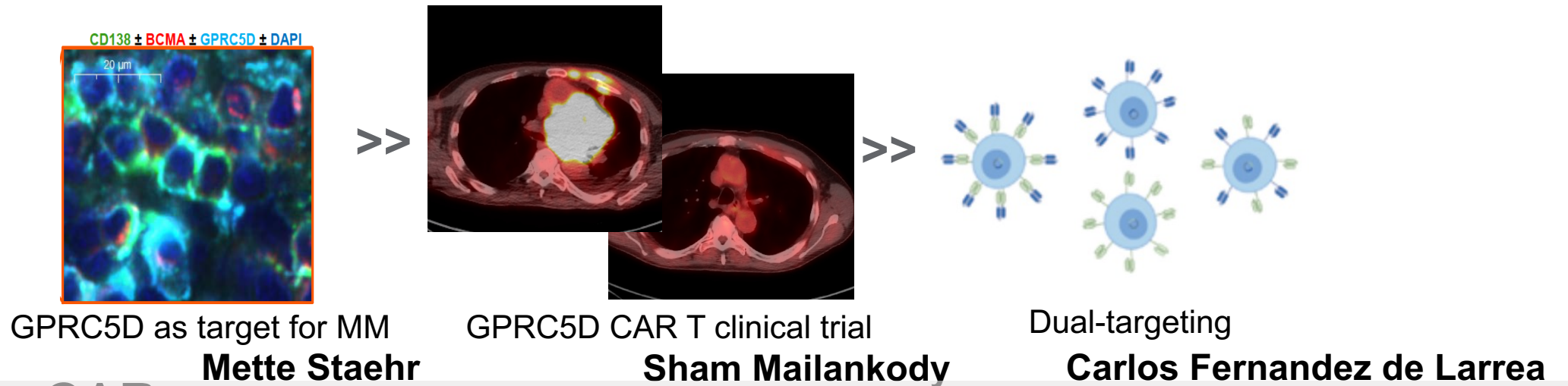
## Cilta-cel

Lancet 2021; 398: 314-24 July 24, 2021



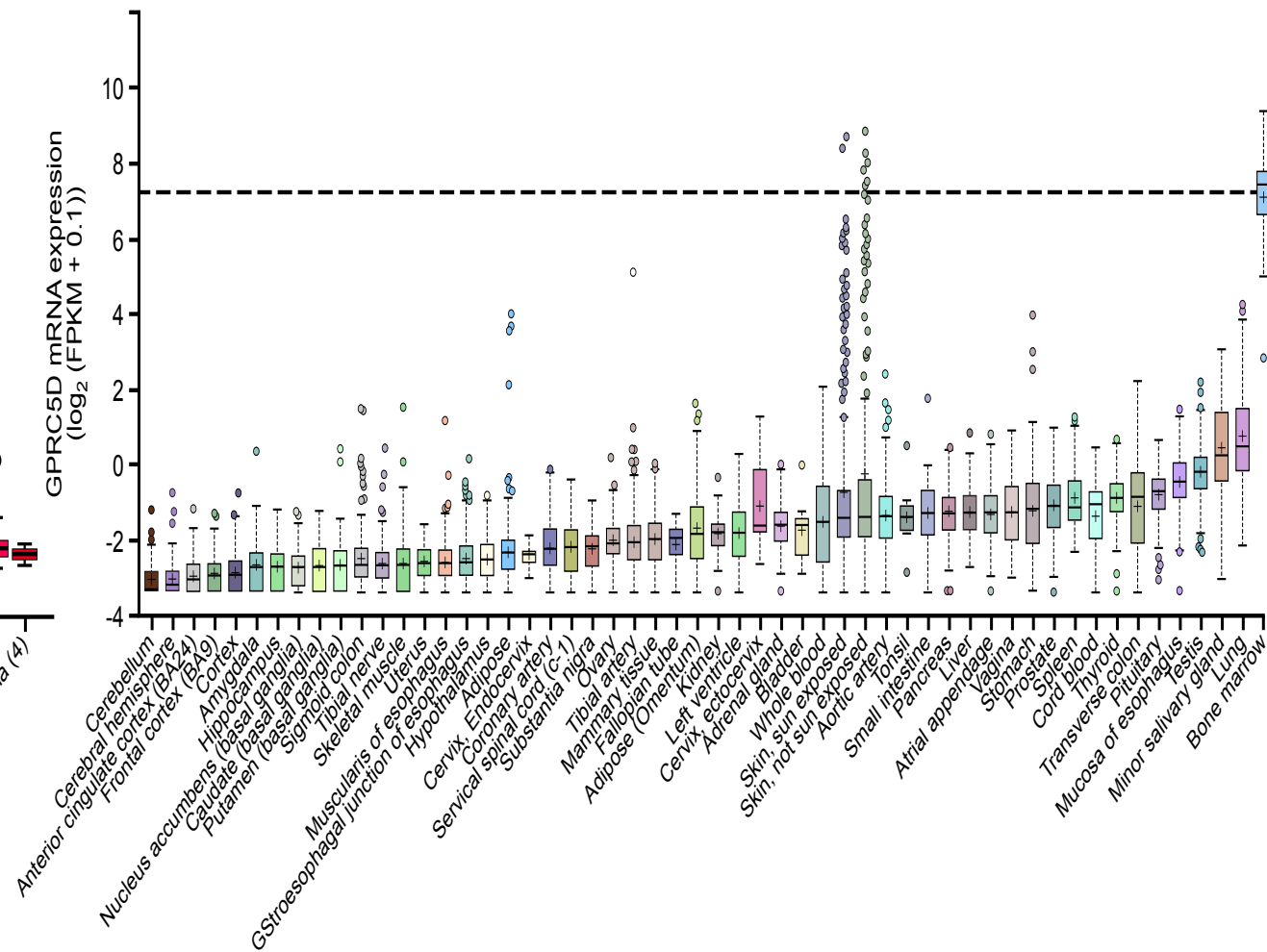
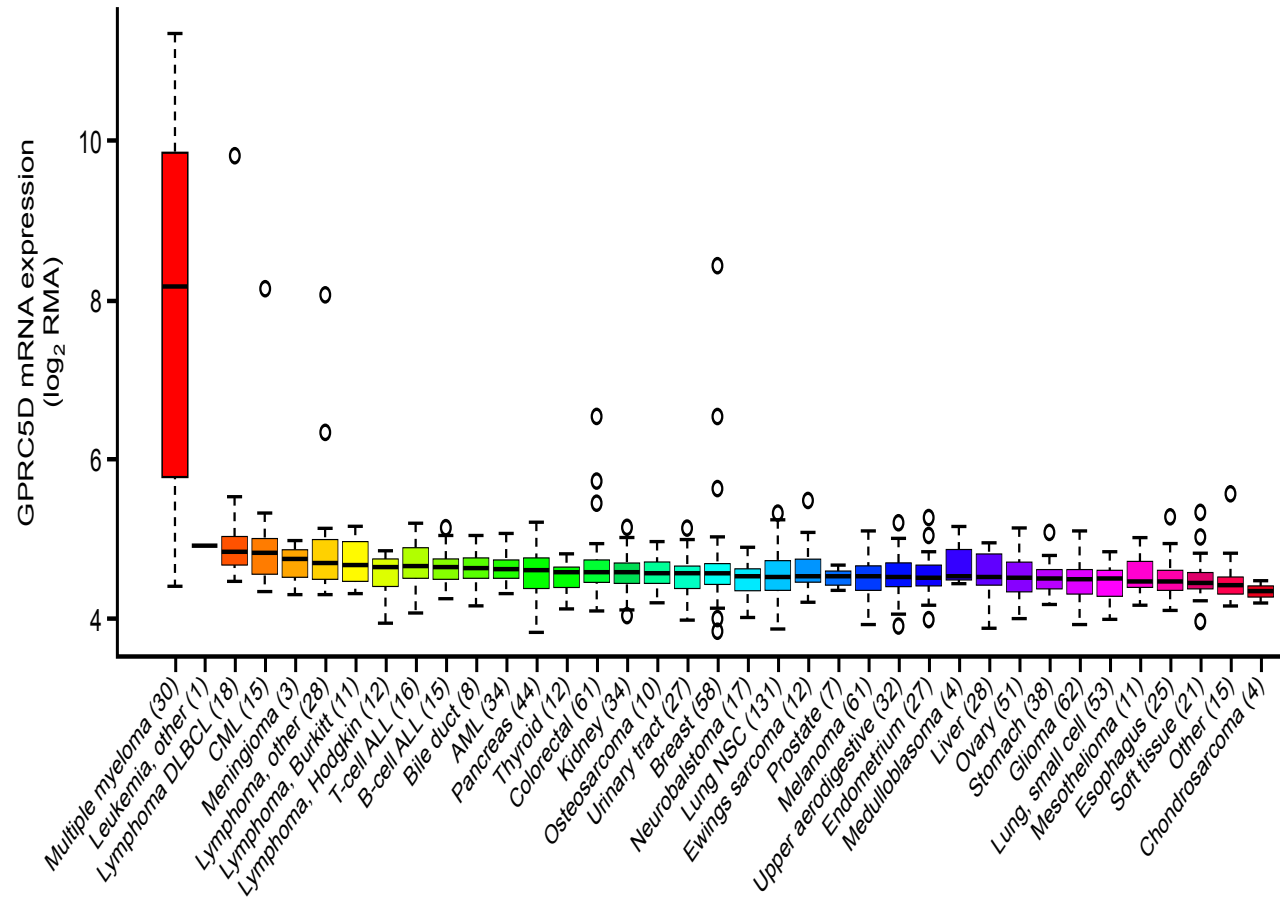


- New targets and logic gating



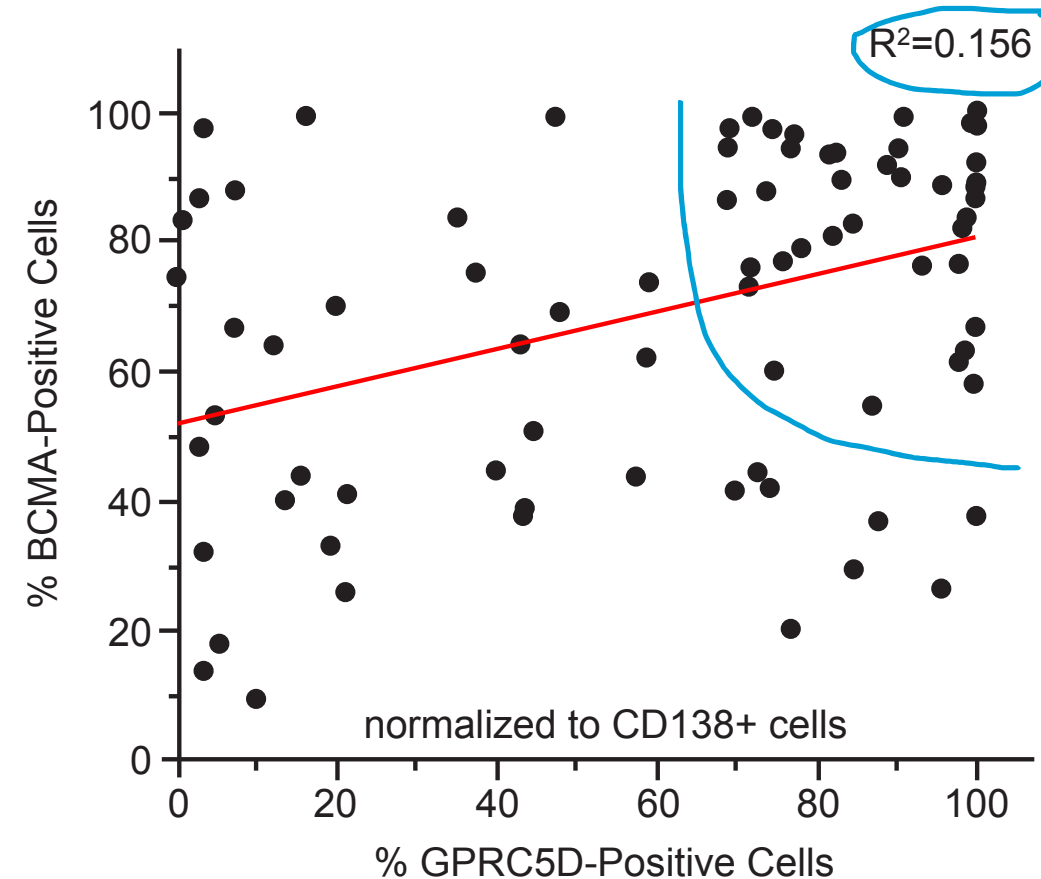
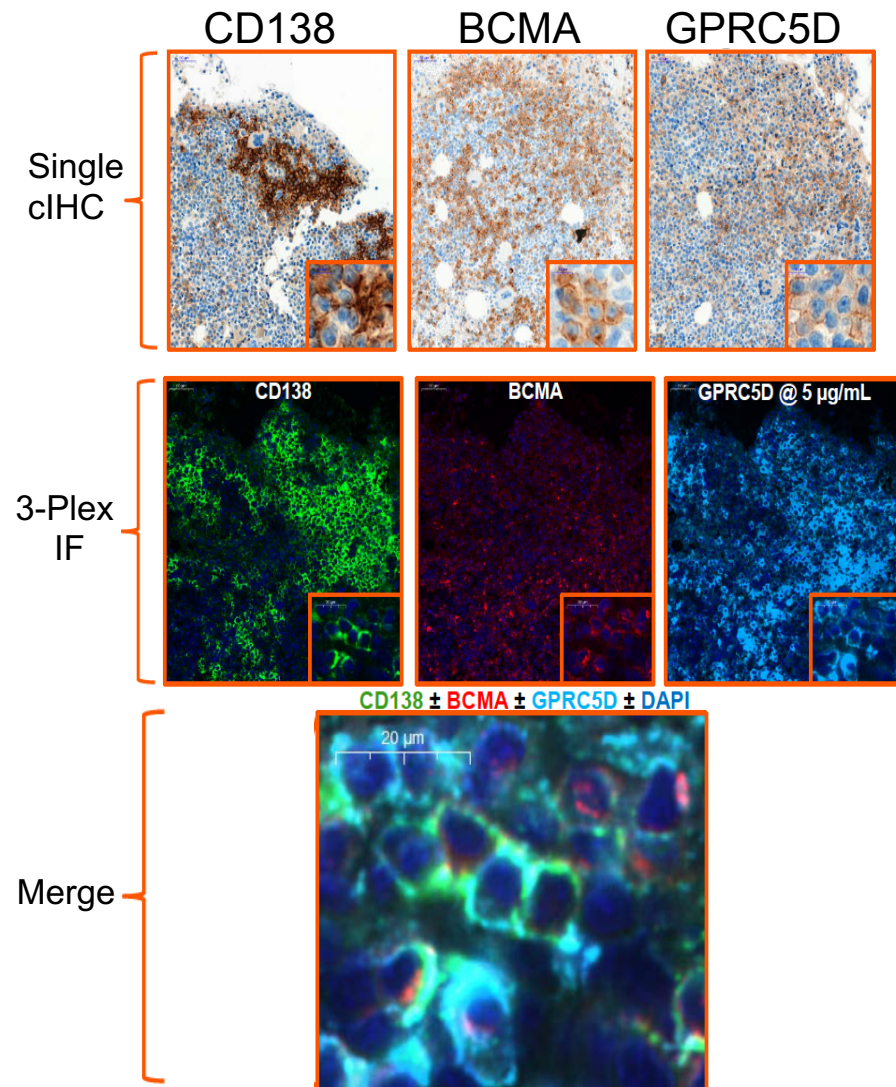
- Next-gen CARs
- Intracellular targets • non-T cell types
- mRNA as a target and a therapeutic
- Advances in manufacturing

# G Protein-Coupled Receptor Class C Group 5 Member D (GPRC5D)

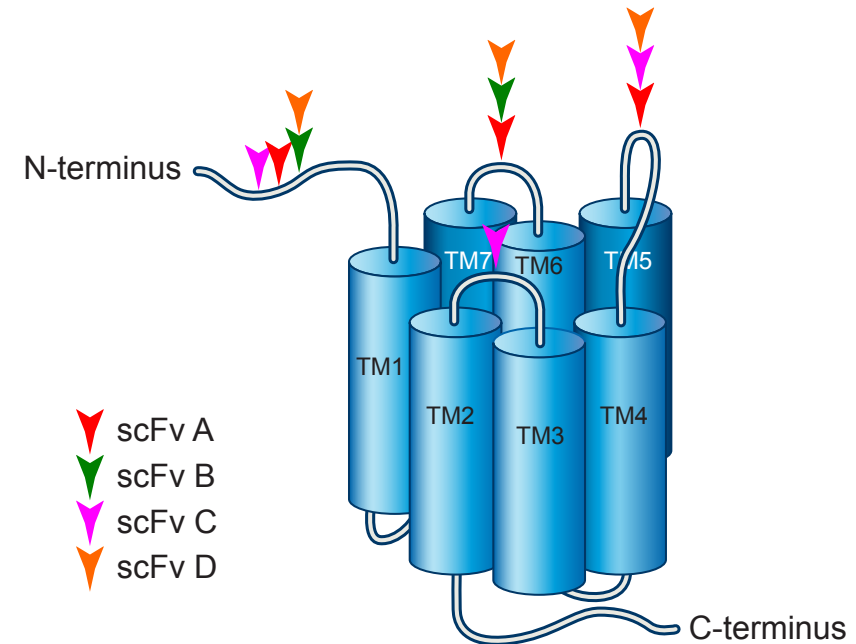
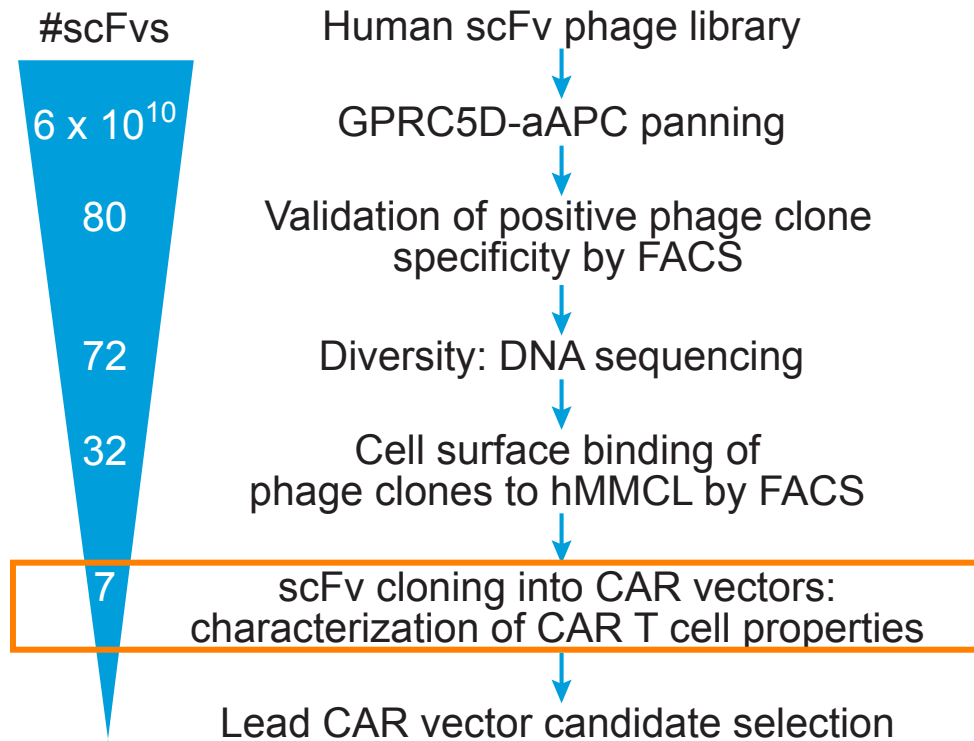


- Orphan 7 trans-membrane receptor
- Expressed in subset of cells in hair follicle, hard keratinizing tissue

# GPRC5D protein expression is identified on MM cells and is expressed independently of BCMA



# Identification of candidate GPRC5D-specific scFvs by screening a human B cell-derived phage display library

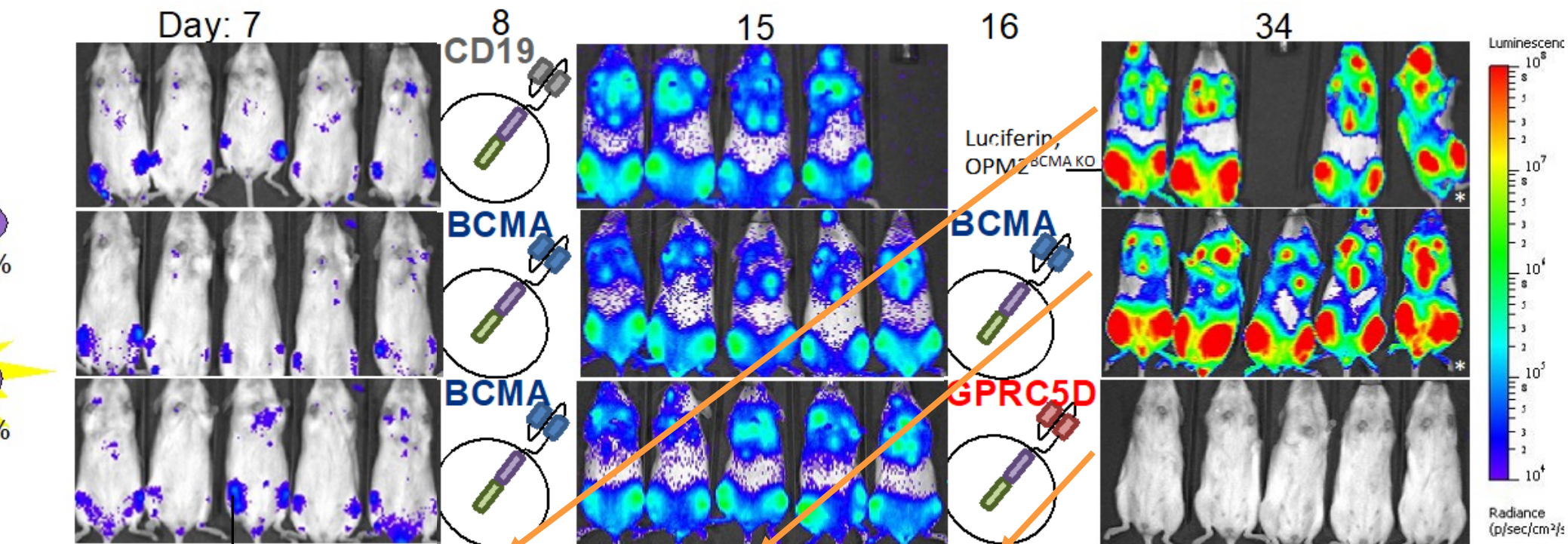
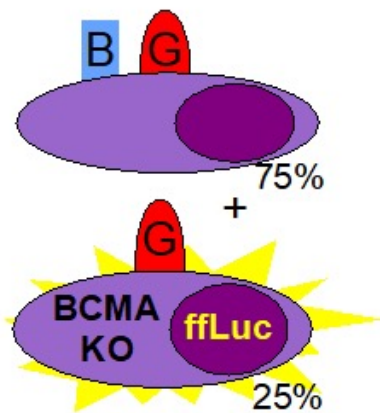


V<sub>H</sub>/V<sub>L</sub>  
V<sub>L</sub>/V<sub>H</sub>

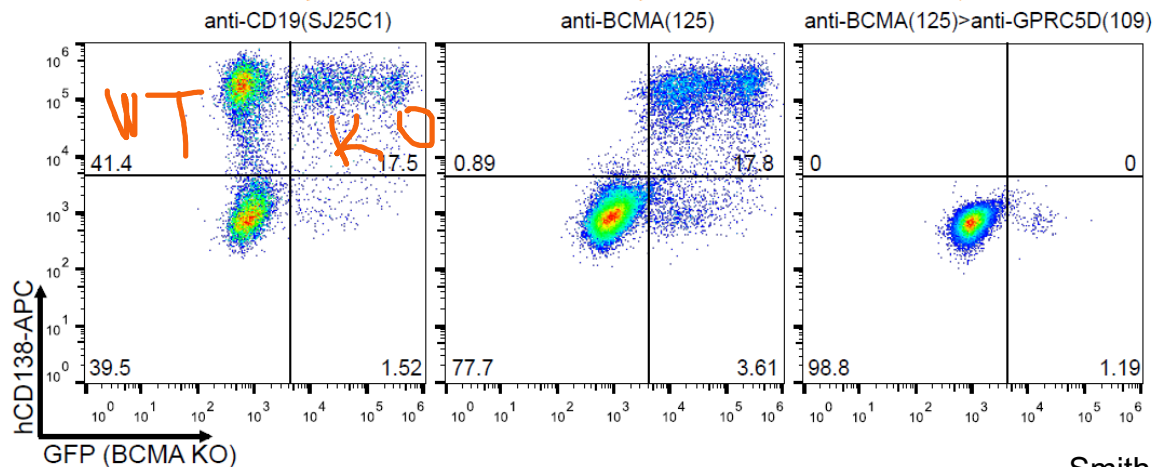
short (hinge only)  
medium (hinge-CH3)  
long (hinge-CH2-CH3)



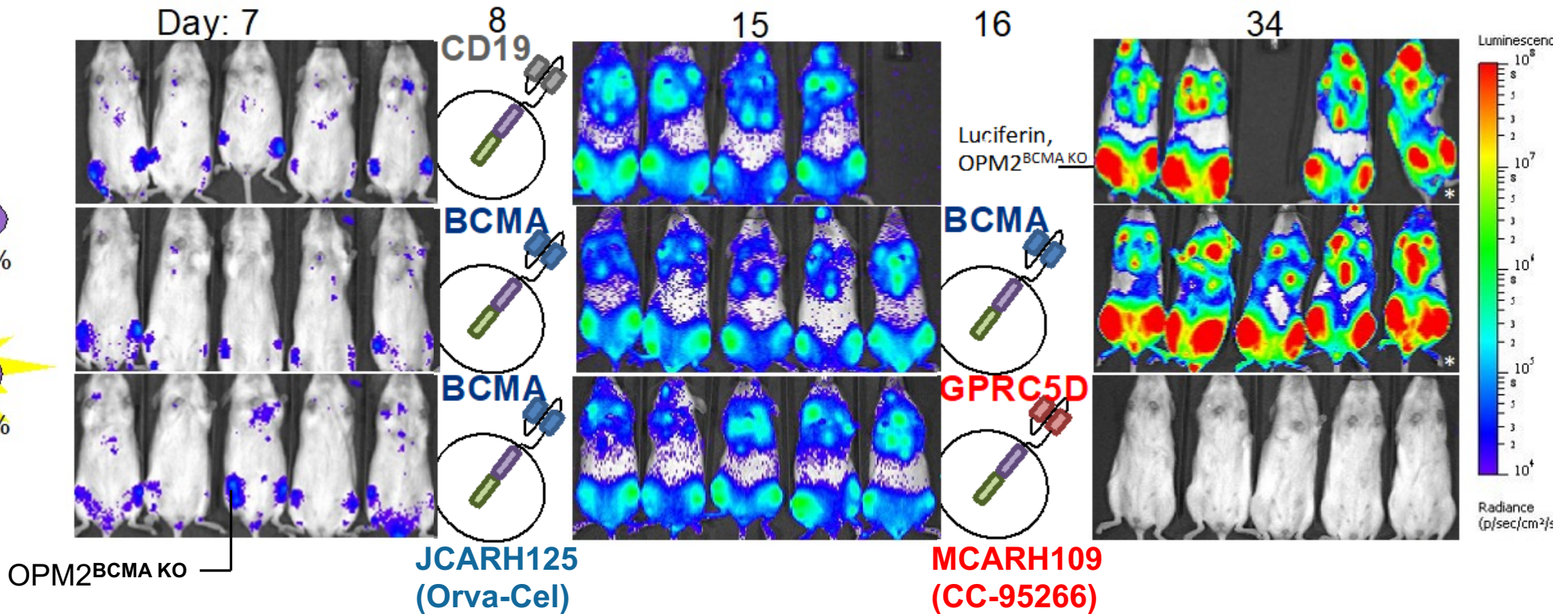
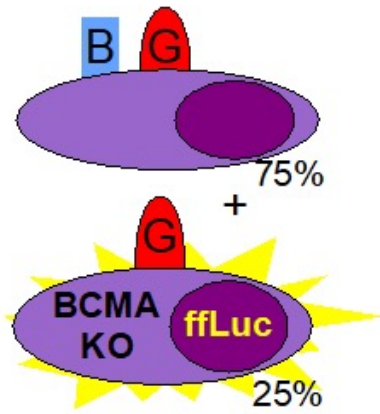
# GPRC5D-targeted CAR T cells rescued mice from BCMA negative tumor escape model



OPM2<sup>BCMA KO</sup>



# GPRC5D-targeted CAR T cells rescued mice from BCMA negative tumor escape model



NIH U.S. National Library of Medicine  
*ClinicalTrials.gov*



**MCARH109 Chimeric Antigen Receptor (CAR) Modified T Cells for the Treatment of Multiple Myeloma**

Sham Mailankody, PI

ClinicalTrials.gov Identifier: NCT04555551



**A Study of CC-95266 in Subjects With Relapsed and/or Refractory Multiple Myeloma**

Omar Nadeem, PI

ClinicalTrials.gov Identifier: NCT04674813

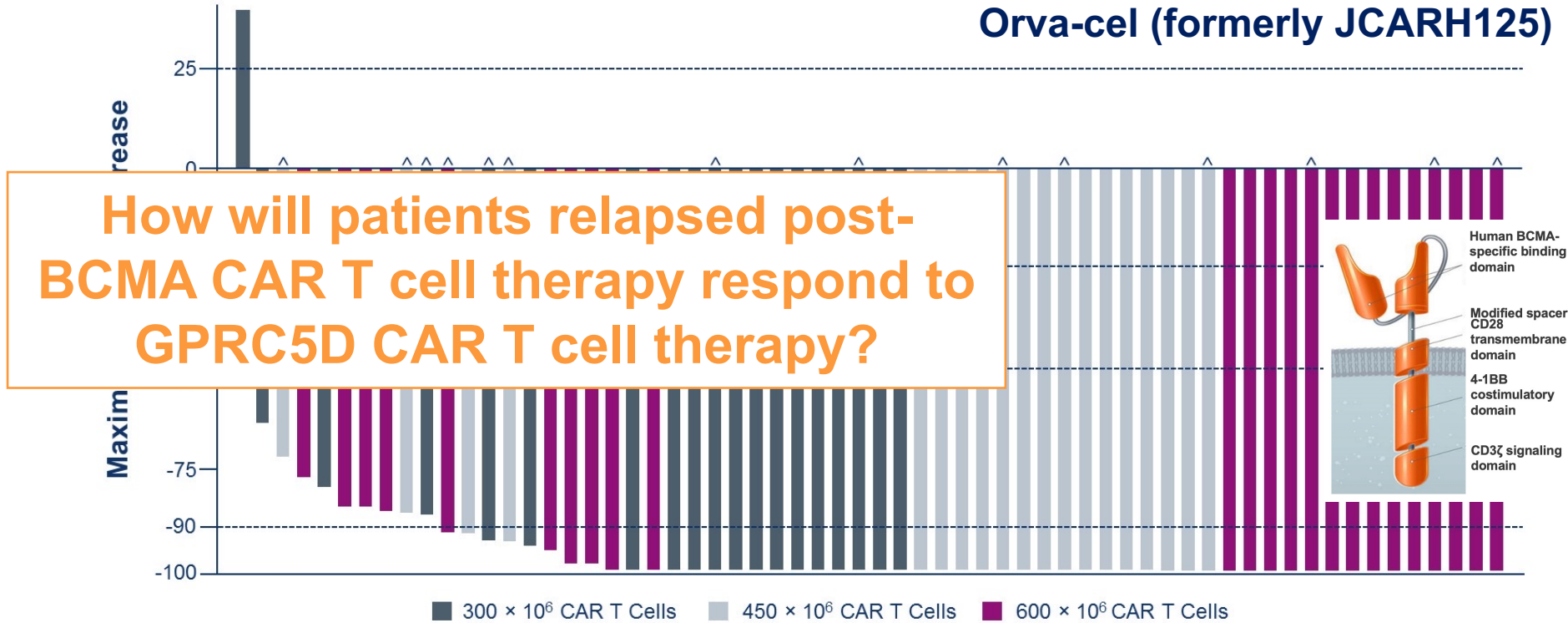
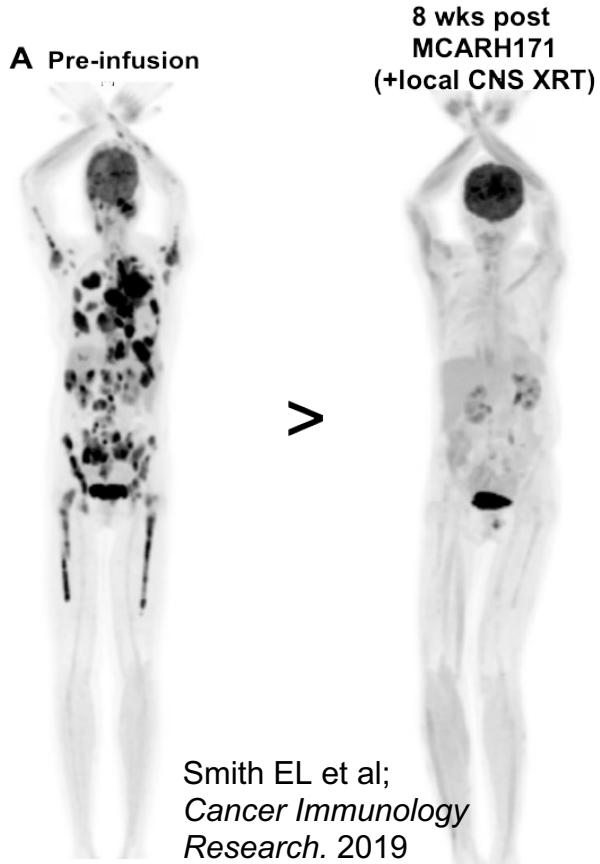
Dana-Farber Cancer Institute



# BCMA CAR T cell therapies have dramatic efficacy in RRMM

## EVOLVE: Deep Tumor Burden Reduction Across Dose Levels

Orva-cel (formerly JCARH125)



Serological responses\* were observed in all patients treated at 450 × 10<sup>6</sup> and 600 × 10<sup>6</sup> DLs

\*Involved serum or urine paraprotein, free light chains. <sup>^</sup>Patient with baseline extramedullary plasmacytoma.



Memorial Sloan Kettering  
Cancer Center™

# Phase I First-in-Class Trial of MCARH109, a G Protein Coupled Receptor Class C Group 5 Member D (GPRC5D) Targeted CAR T Cell Therapy in Patients with Relapsed or Refractory Multiple Myeloma

**Sham Mailankody**, Claudia Diamonte, Lisa Fitzgerald, Peter Kane, Xiuyan Wang, Devanjan Sikder, Brigitte Sénéchal, Vladimir Bermudez, Diana Frias, Justina Morgan, Patrick Grant, Terence Purdon, Kinga Hosszu, Sean Devlin, Urvi Shah, Jonathan Landa, Alexander Lesokhin, Neha Korde, Hani Hassoun, Carlyn Tan, Malin Hultcrantz, Gunjan Shah, Heather Landau, David Chung, Michael Scordo, Mikhail Roshal, Ola Landgren, Ahmet Dogan, Sergio Giralt, Jae Park, Isabelle Rivière, Renier Brentjens, **Eric L. Smith**

ASH Annual Meeting 12/2021; Abstract 827

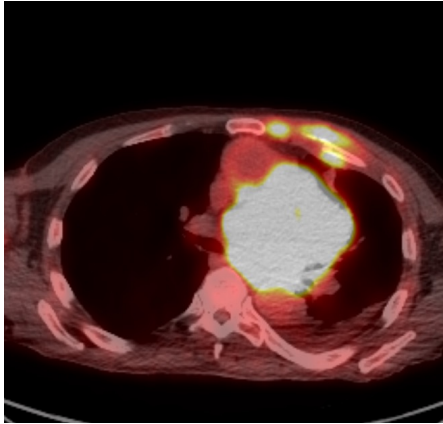


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Cancer Center..

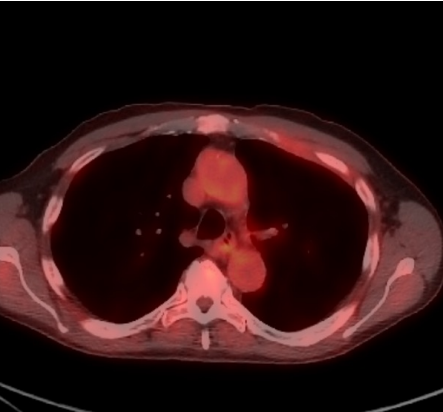
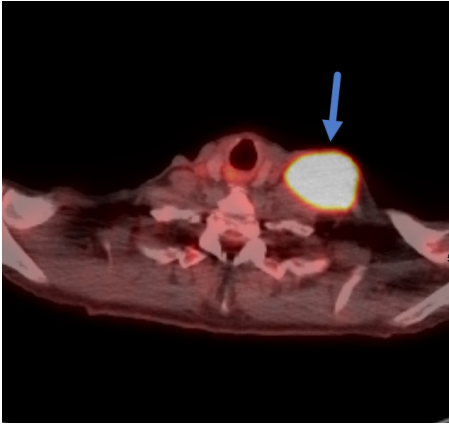
# Key Safety Events (n=16)

	25 X10 <sup>6</sup> CAR+ T cells (n=3)	50 X10 <sup>6</sup> CAR+ T cells (n=3)	150 X10 <sup>6</sup> CAR+ T cells (n=5)	450 X10 <sup>6</sup> CAR+ T cells (n=5)	Total (N=16)
<b>Cytokine Release Syndrome, Any Grade, n (%)</b>	3 (100)	3 (100)	4 (100)	4 (80)	14 (93)
<b>Cytokine Release Syndrome, Grade 3 or higher, n (%)</b>	0 (0)	0 (0)	0 (0)	1 (20)	1 (7)
<b>Neurologic Toxicity, Any Grade, n (%)</b>	0 (0)	0 (0)	0 (0)	1 (20)	1 (7)
<b>Neurologic Toxicity, Grade 3 or higher, n (%)</b>	0 (0)	0 (0)	0 (0)	1 (20)	1 (7)
<b>Macrophage Activation Syndrome, n (%)</b>	0 (0)	0 (0)	0 (0)	1 (20)	1 (7)
<b>Infections, n (%)</b>	1 (33)	0 (0)	1 (20)	1 (20)	3 (19)
<b>Grade 1 Nail changes, n (%)</b>	1 (33)	2 (67)	2 (40)	4 (80)	9 (56)
<b>Grade 1 Maculo-papular rash, n (%)</b>	0 (0)	0 (0)	2 (40)	1 (20)	3 (19)
<b>Grade 1 Dysgeusia, n (%)</b>	0 (0)	0 (0)	1 (20)	0 (0)	1 (6)
<b>Grade 3 or higher Hematologic Toxicities, n (%)</b>					
Anemia	3 (100)	0 (0)	1 (20)	3 (60)	7 (44)
Thrombocytopenia	3 (100)	1 (33)	1 (20)	5 (100)	10 (63)
Neutropenia	3 (100)	3 (100)	5 (100)	5 (100)	16 (100)

# Radiologic Response: Patient #1 (25M cells)



Pre-treatment



4 week follow-up



# Clinical Responses (n=16)

Response	25 X10 <sup>6</sup> CAR+ T cells (n=3)	50 X10 <sup>6</sup> CAR+ T cells (n=3)	150 X10 <sup>6</sup> CAR+ T cells (n=5)	450 X10 <sup>6</sup> CAR+ T cells (n=5)	Total (N=16)
Minimal Response or better, n (%)	2 (67)	3 (100)	3 (60)	5 (100)	13 (81)
Partial Response or better, n (%)					11 (69)
Very Good Partial Response or better, n (%)					7 (44)
Complete Response or better, n (%)					4 (25)
BM MRD negative					8 (50)

CAN WE ENGINEER AROUND  
BCMA-low RESISTOR FOR RELAPSE  
WITH DUAL-TARGETING TO  
PREVENT ANTIGEN ESCAPE RELAPSE  
AND IMPROVE DURABILITY OF  
REMISSIONS?

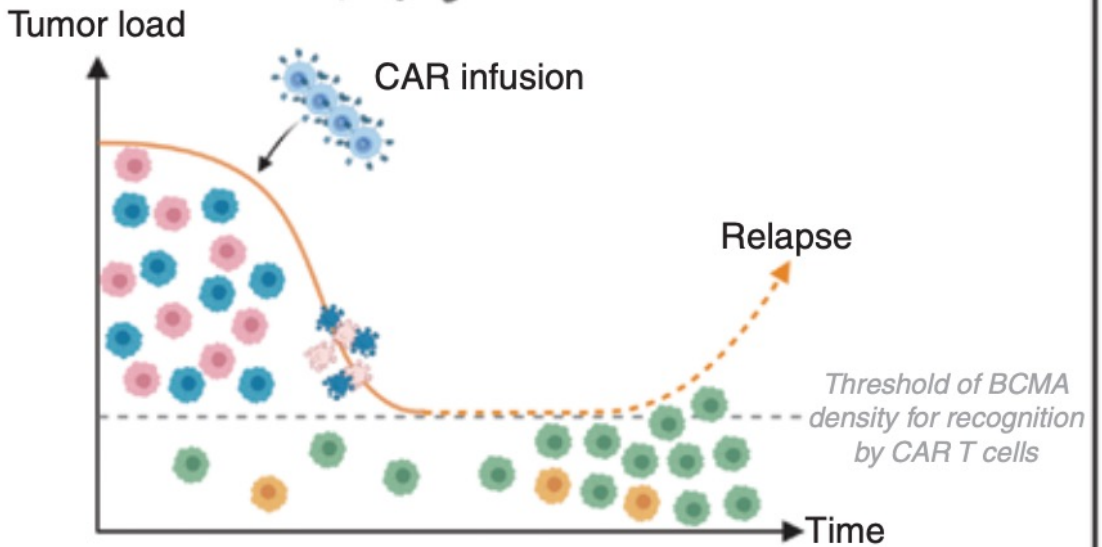
Response	Prior BCMA therapy (n=10)	Prior CAR T therapy (n=8)
Partial Response or better, n (%)	8 (80)	6 (75)
Complete Response or better	3 (30)	3 (38)

### Mono-specific BCMA CAR T cells

MM patient

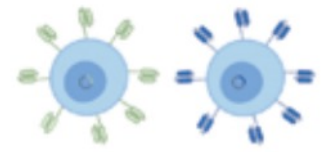


BCMA-specific CAR T cells



### Dual BCMA/GPRC5D CAR T cells

CARpool  
Coadministration of two mono-specific CAR T-cell populations



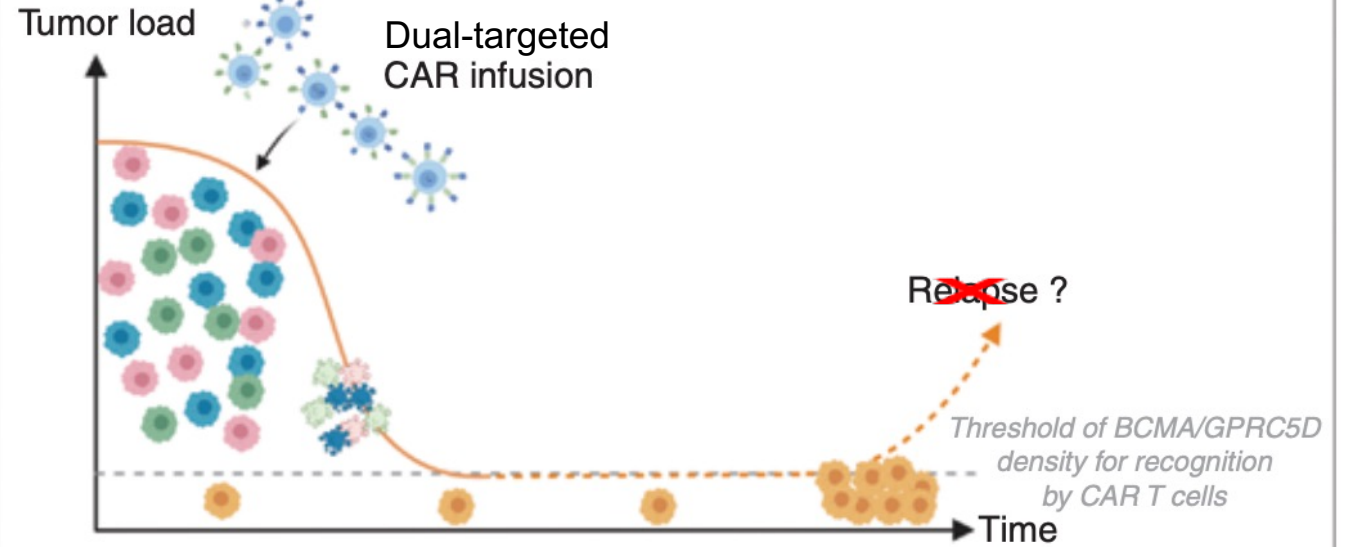
2 virus  
Coexpression of two vectors



Bicistronic  
Expression of a single bicistronic vector



Single-stalk  
Tandem CAR



- Tumor cells BCMA<sup>+</sup> GPRC5D<sup>+</sup>
- Tumor cells BCMA<sup>low/neg</sup> GPRC5D<sup>+</sup>
- Tumor cells BCMA<sup>+</sup> GPRC5D<sup>low/neg</sup>
- Tumor cells BCMA<sup>low/neg</sup> GPRC5D<sup>low/neg</sup>

Tumor antigen expression



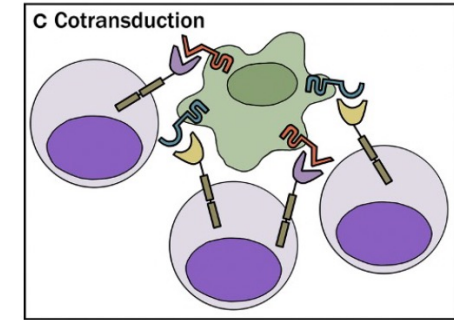
# PLAT-05: Phase 1 Trial of Dual Specificity of CD19 and CD22 CAR T cell products in Rel/Ref Pediatric and Young Adult B-ALL

## Study Objectives

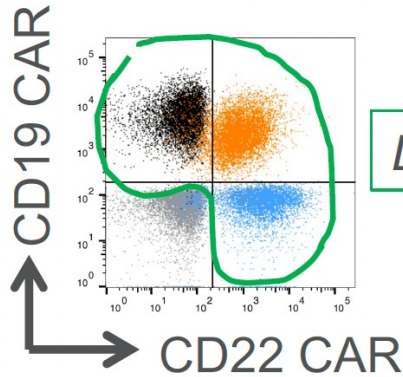
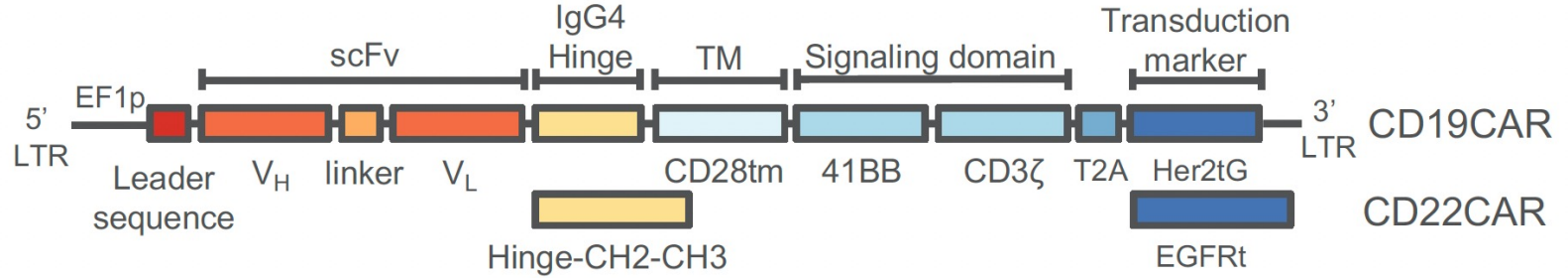
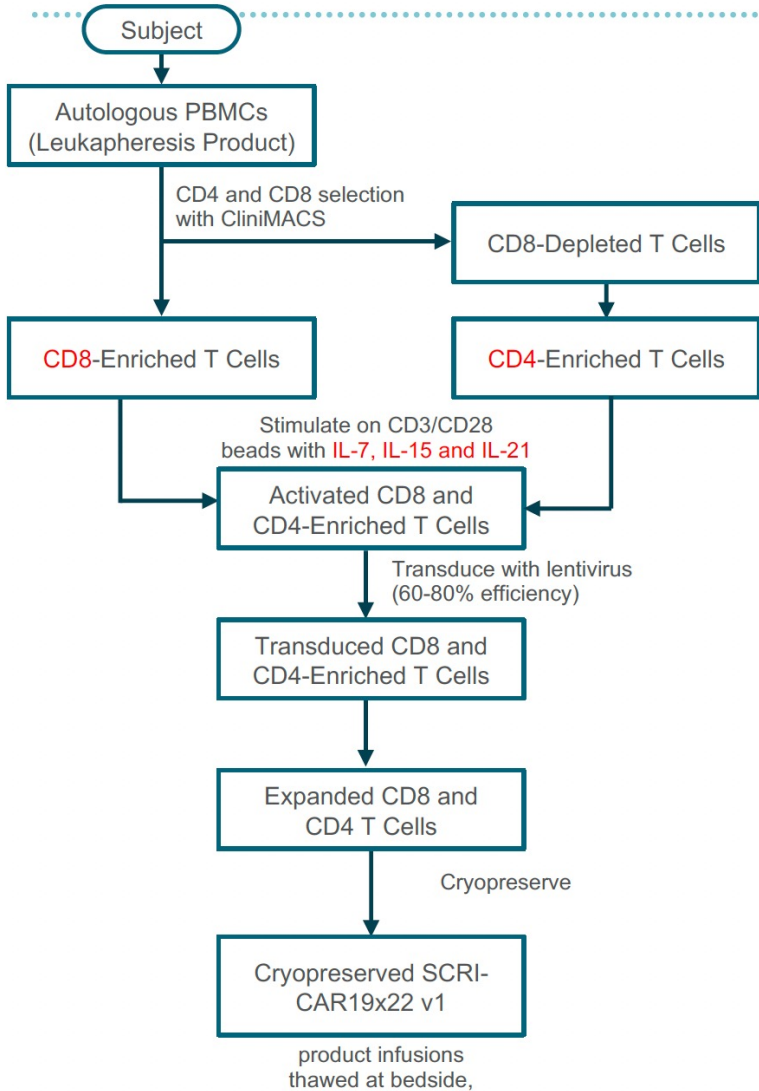
- Determine feasibility of manufacturing SCRI-CAR19x22 in patients with Rel/Ref B-ALL
- Determine safety of SCRI-CAR19x22 cell product infusion
- Determine toxicity profile in Rel/Ref pediatric and young adult CD19+ B-ALL

## Eligibility Criteria

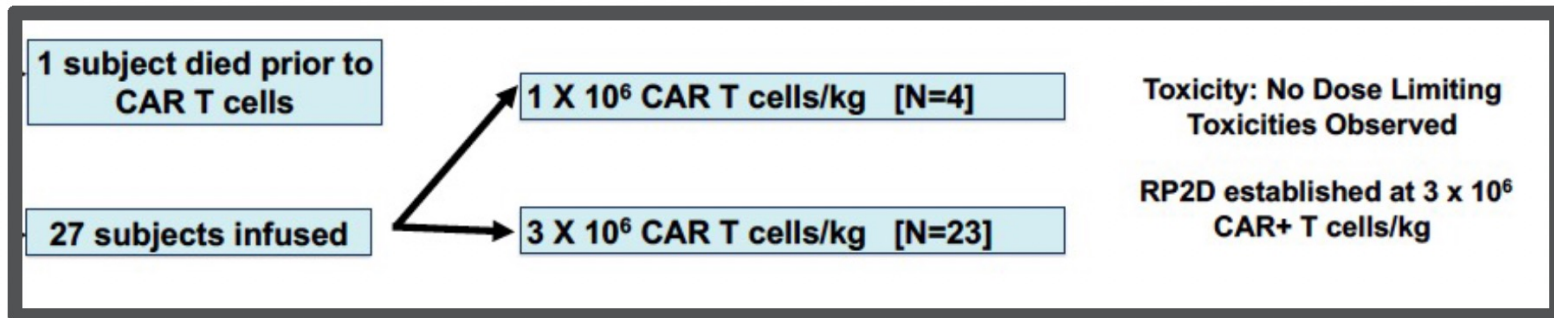
- Age: < 27 years
- Relapsed or refractory CD19+ CD22+ acute leukemia
- No active GVHD
- Absolute lymphocyte count of  $\geq 100/\mu\text{l}$



# SCRI-CAR19x22v1

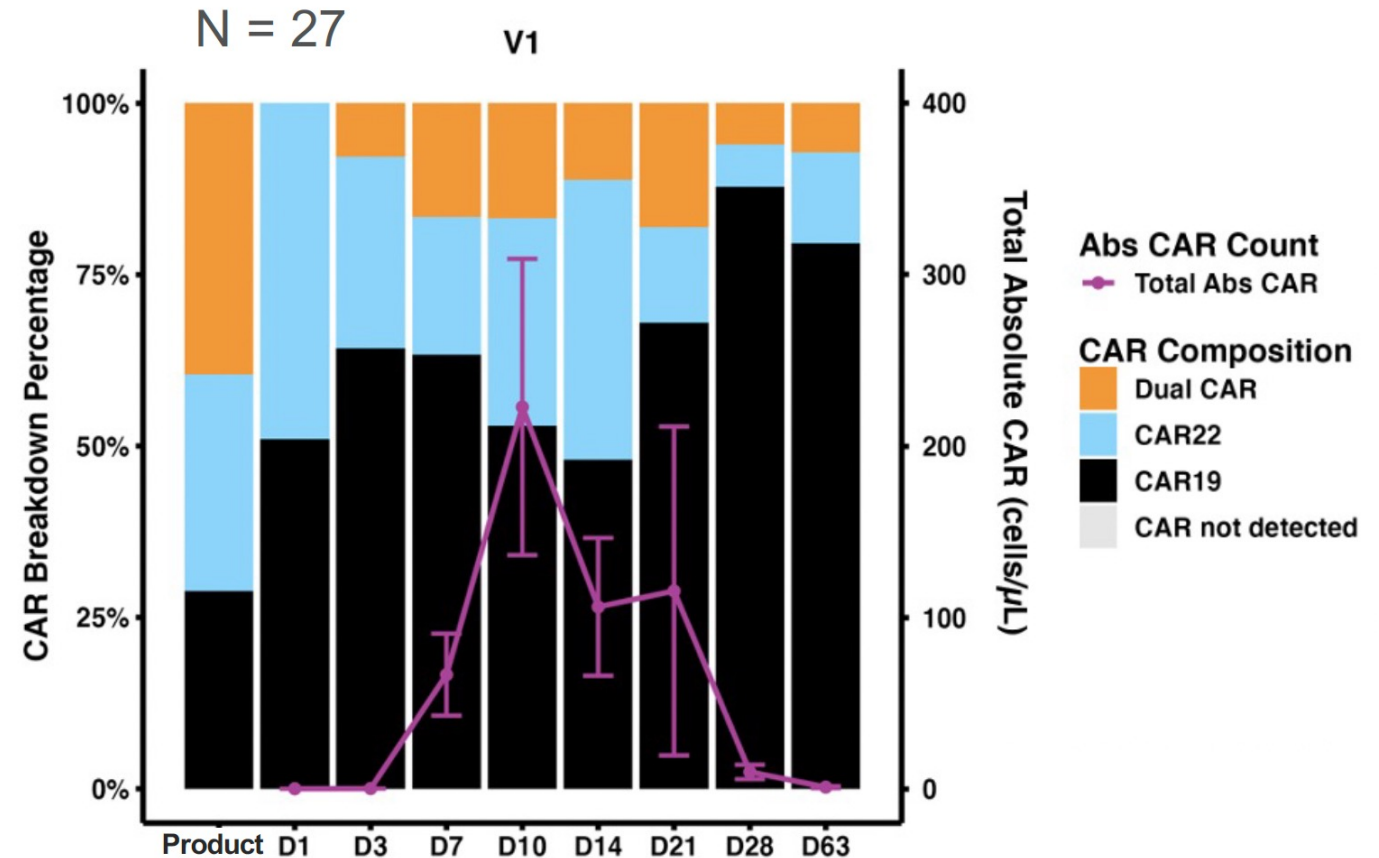


*Dosing is based off the three CAR<sup>+</sup> populations in total*



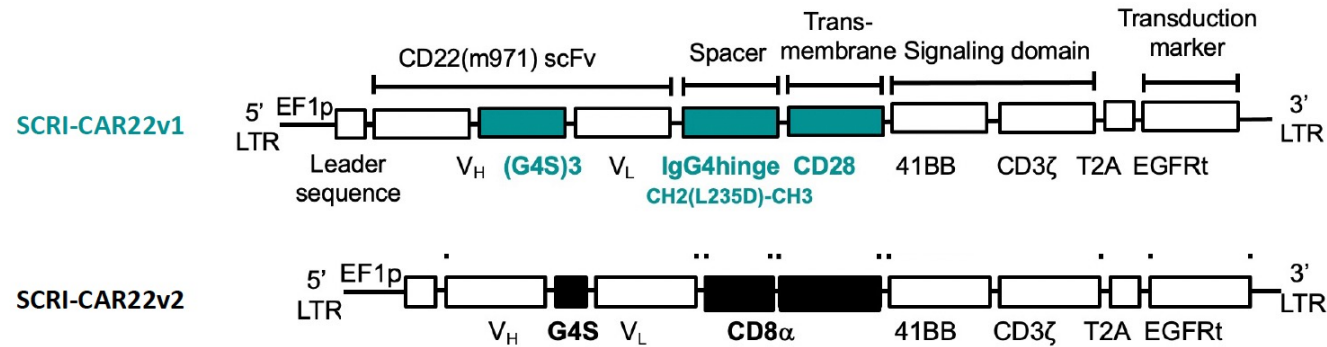
# SCRI-CAR19x22v1 on PLAT-05: 85% MRD-neg CR

- Product split nicely between three CAR+ populations
- Engraftment predominated by the CD19 CAR
  - Especially at later timepoints
- Inferior CD22 activity:
  - 2/4 non-responders were related to CD19 negative/CD22+ disease
  - 5/7 relapses were CD19 negative
    - Only 2 had concurrent CD22 dim/negative findings



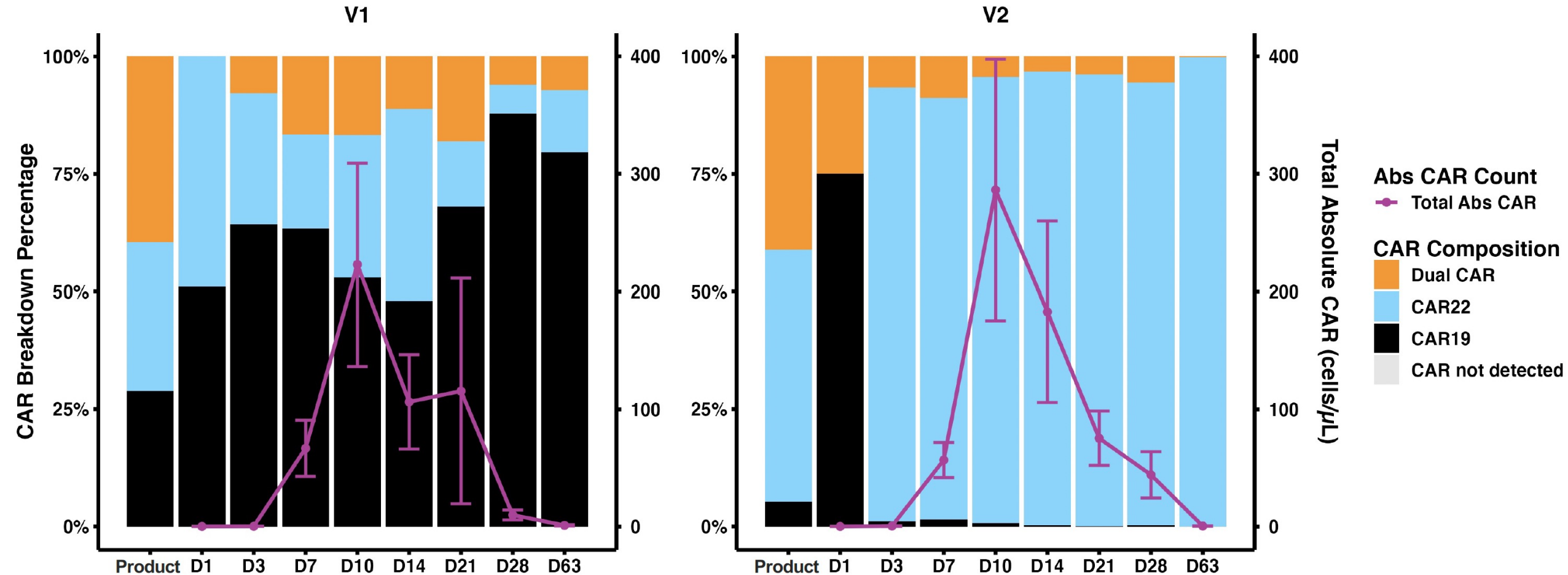
# SCRI-CAR19x22v2: A re-engineered CD22 CAR construct

- Although SCRI-CAR19x22v1 is safe and tolerable with strong initial efficacy, the CD22 CAR lacked activity
  - Re-engineered the CD22 CAR (C Summers et al, ASH 2021 abstract #403) to create SCRI-CAR19x22v2



- Modified the PLAT-05 protocol to investigate SCRI-CAR19x22v2 with dose finding and expansion cohort

# SCRI-CAR19x22v2 engraftment favors CD22 CAR

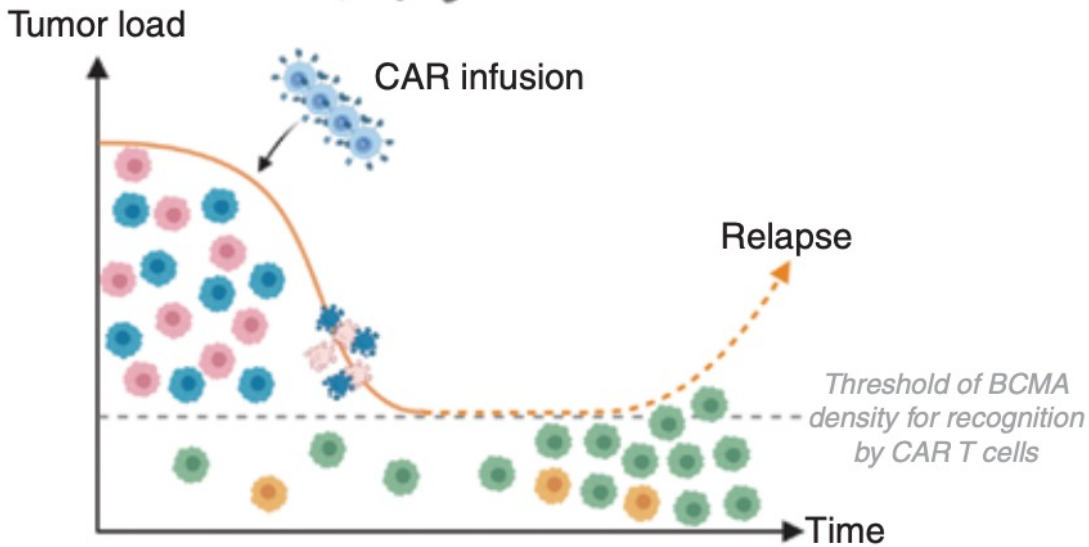


### Mono-specific BCMA CAR T cells

MM patient

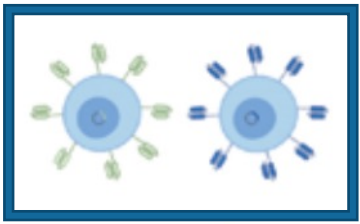


BCMA-specific CAR T cells



### Dual BCMA/GPRC5D CAR T cells

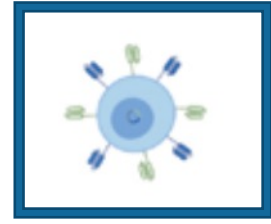
CARpool  
Coadministration of two mono-specific CAR T-cell populations



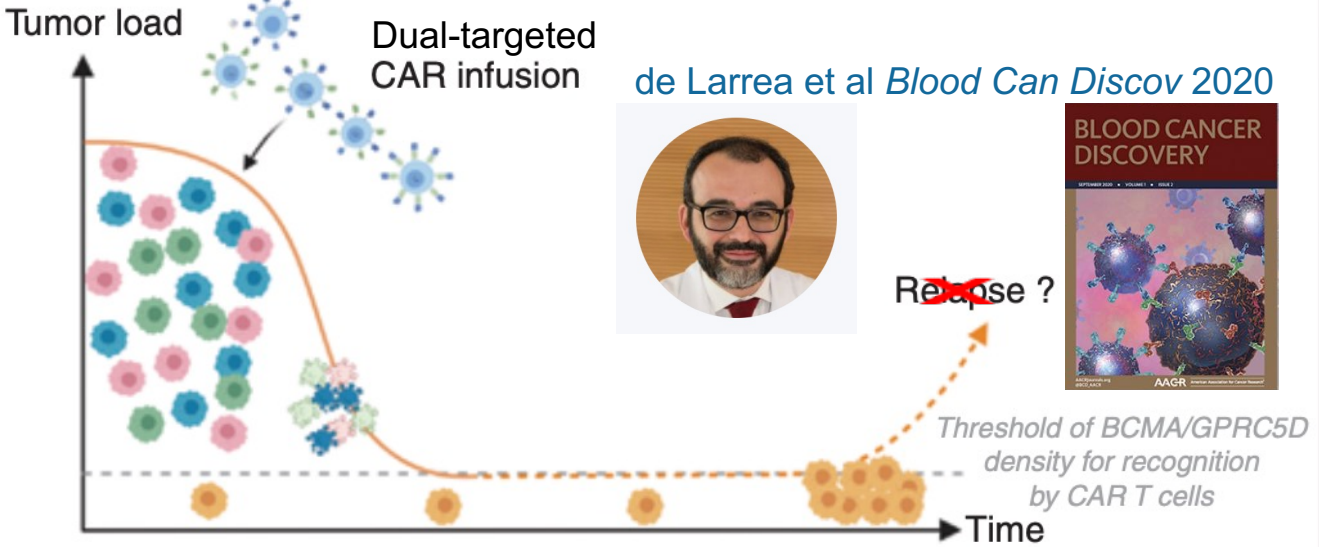
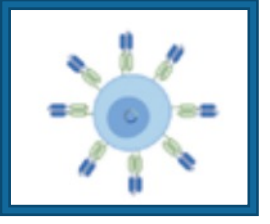
2 virus  
Coexpression of two vectors



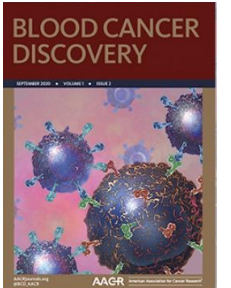
Bicistronic  
Expression of a single bicistronic vector



Single-stalk  
Tandem CAR



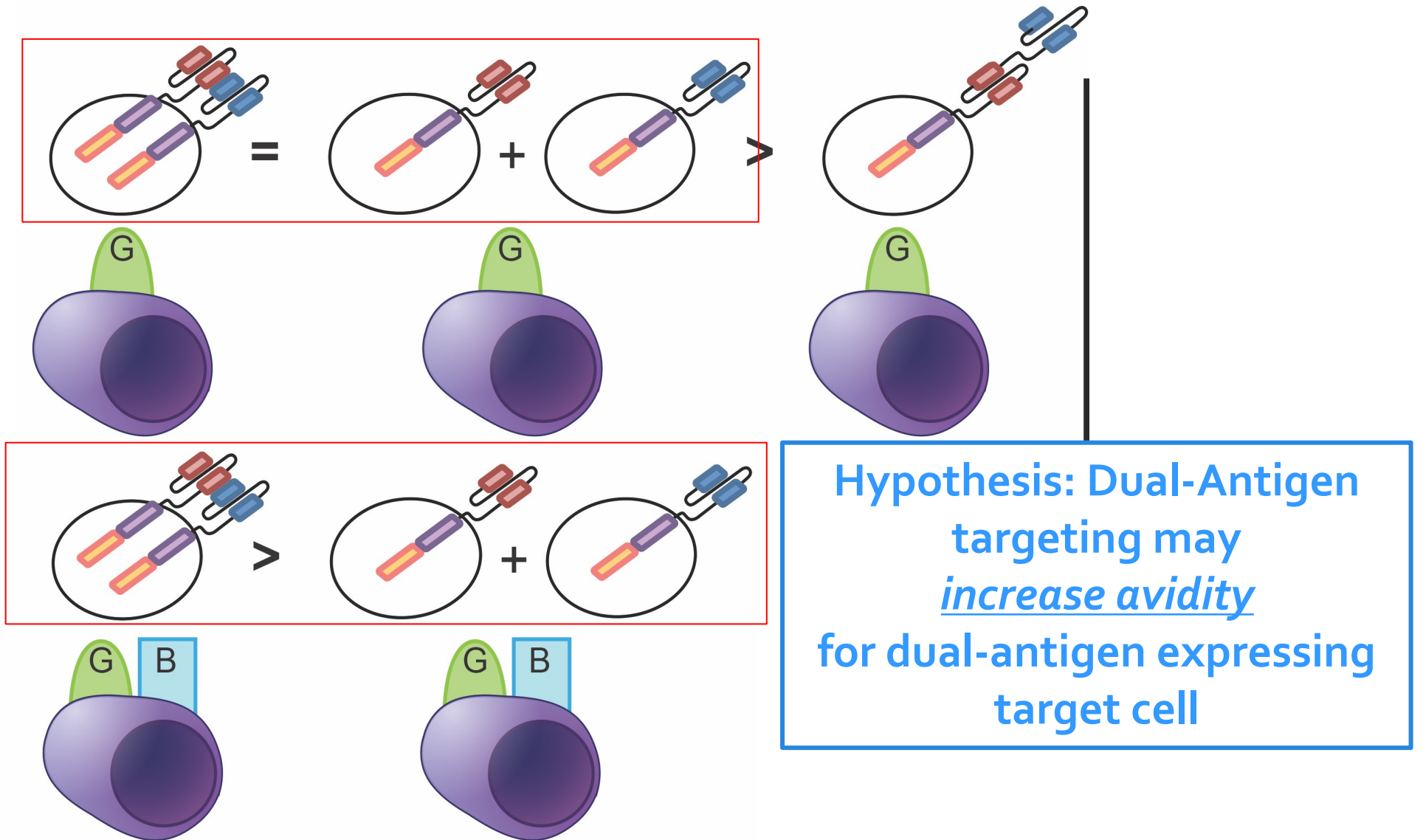
de Larrea et al *Blood Can Discov* 2020



- Tumor cells BCMA<sup>+</sup> GPRC5D<sup>+</sup>
- Tumor cells BCMA<sup>low/neg</sup> GPRC5D<sup>+</sup>
- Tumor cells BCMA<sup>+</sup> GPRC5D<sup>low/neg</sup>
- Tumor cells BCMA<sup>low/neg</sup> GPRC5D<sup>low/neg</sup>

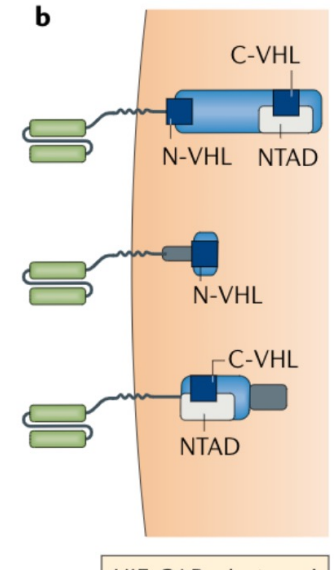
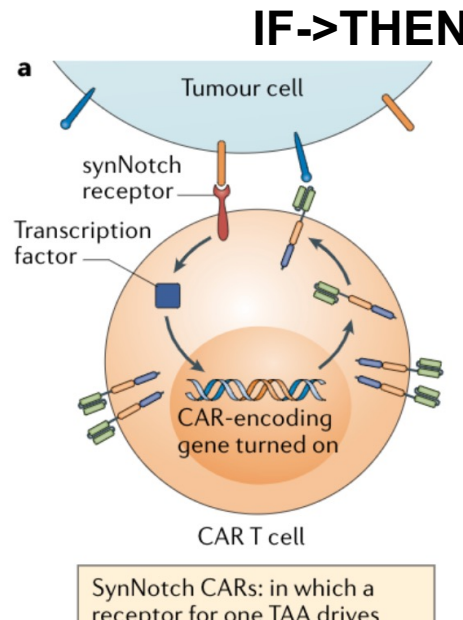
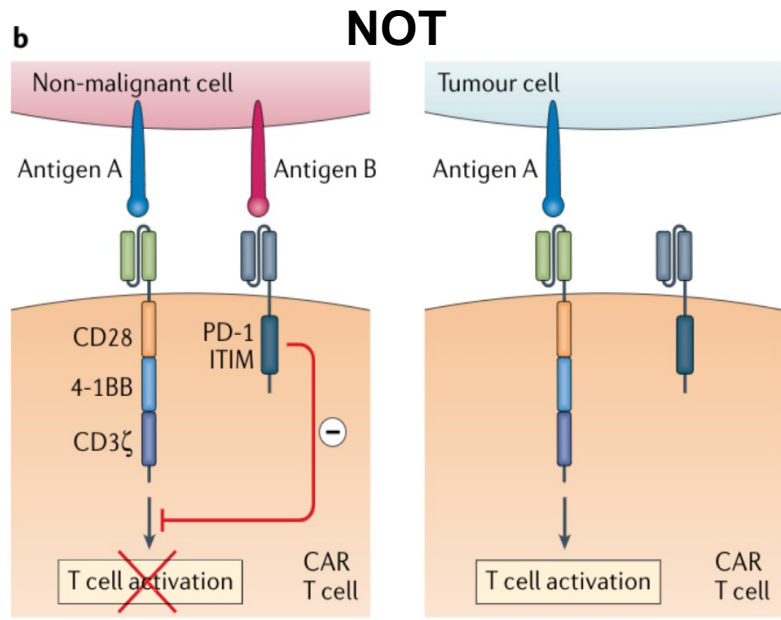
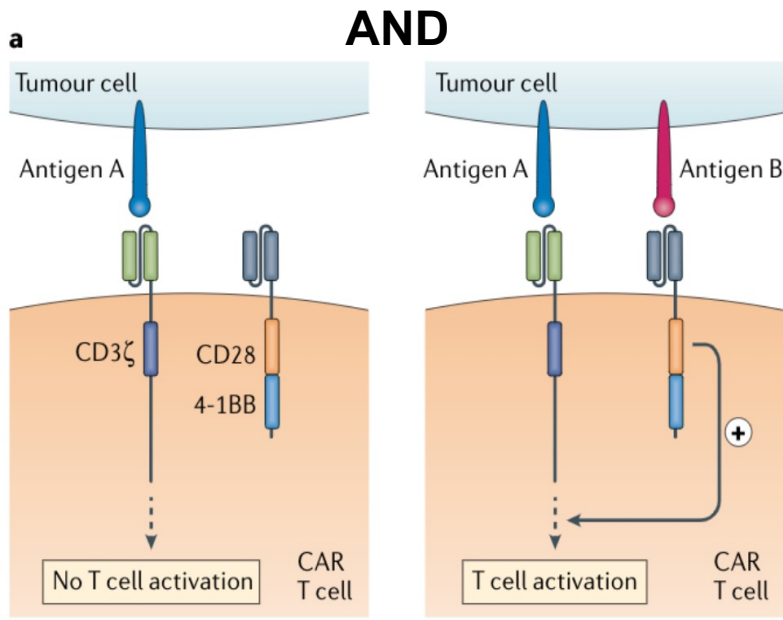
Tumor antigen expression

# Dual-targeting model





# Logic Gated/Conditional CARs to increase specificity



Split CARs: one receptor with a CD3ζ activation domain and a second with a co-stimulatory domain, requiring binding to multiple TAAs for CAR T cell activation

iCARs: inclusion of inhibitory CAR against a specific non-tumour antigen, requiring the absence of this antigen on tumour cells for CAR T cell activation

SynNotch CARs: in which a receptor for one TAA drives expression of a second receptor for a different TAA, requiring binding to multiple TAAs for CAR T cell activation

HIF-CARs designed to be expressed selectively in the hypoxic TME






- New targets and logic gating



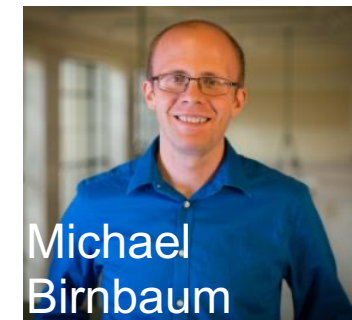
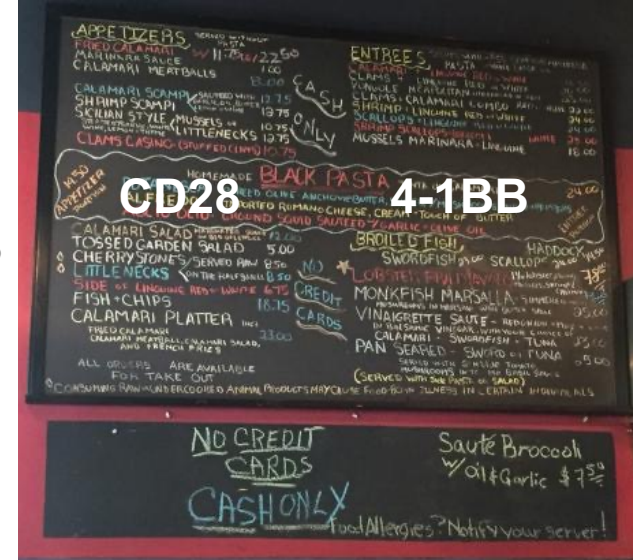
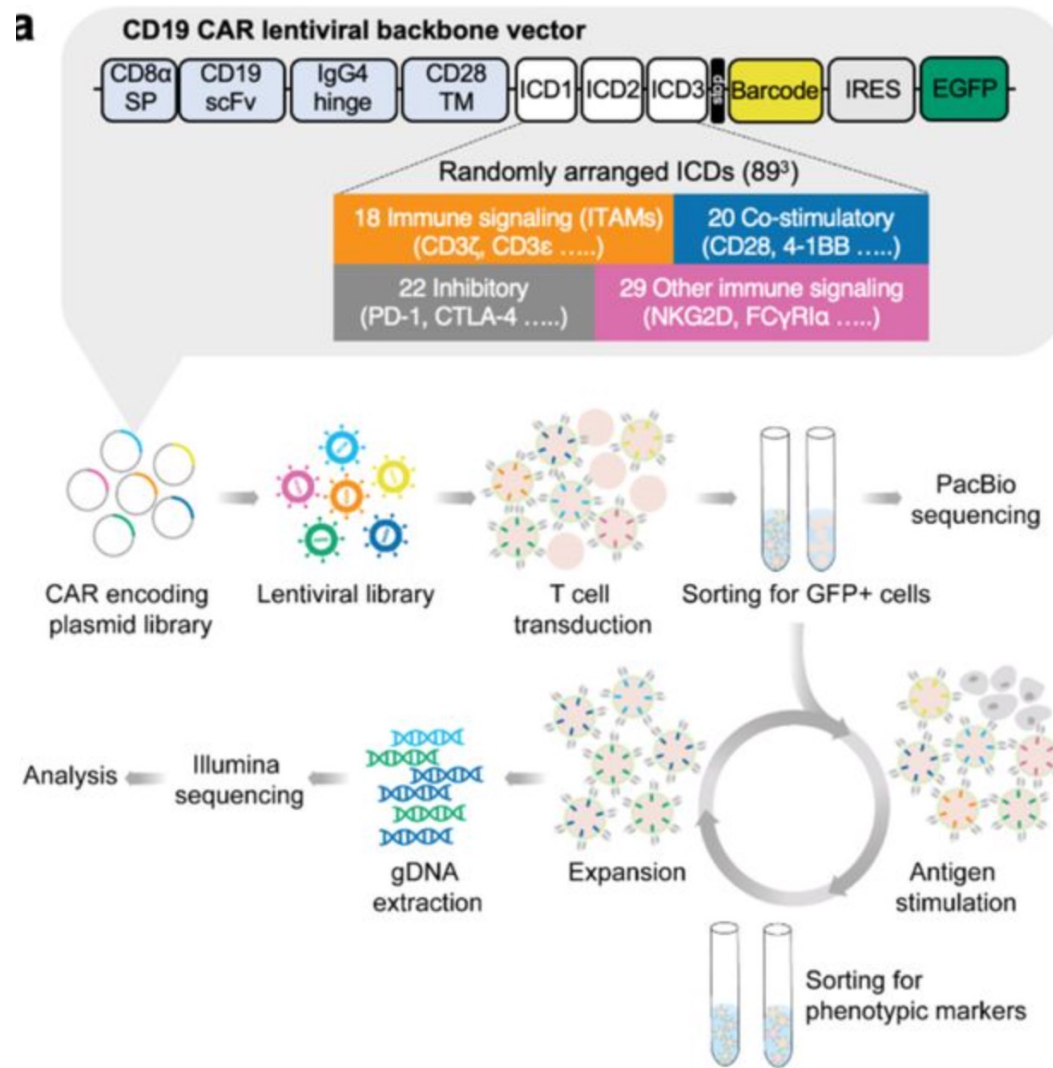
- Next-gen CARs
- Intracellular targets
- non-T cell types
- mRNA as a target and a therapeutic
- Advances in manufacturing

**2022 MIT Health Science Technologies Conference**  
*The Future of Cell & Gene Therapies*  
 April 12, 2022

# CARPOOL: A library-based platform to rapidly identify next generation chimeric antigen receptors

Taeyoon Kyung, Khloe S. Gordon, Caleb R. Perez, Patrick V. Holec, Azucena Ramos, Angela Q. Zhang, Yunpeng Liu, Catherine Koch, Alina Starchenko, Brian Joughin, Douglas A. Lauffenburger, Darrell J. Irvine, Michael T. Hemann,  Michael E. Birnbaum

**bioRxiv**  
THE PREPRINT SERVER FOR BIOLOGY

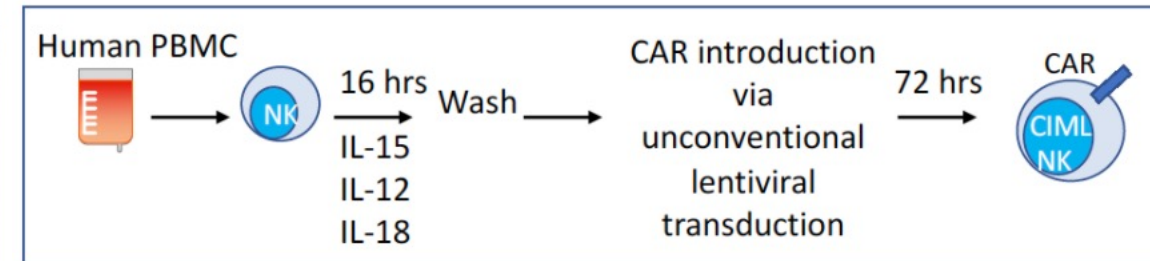
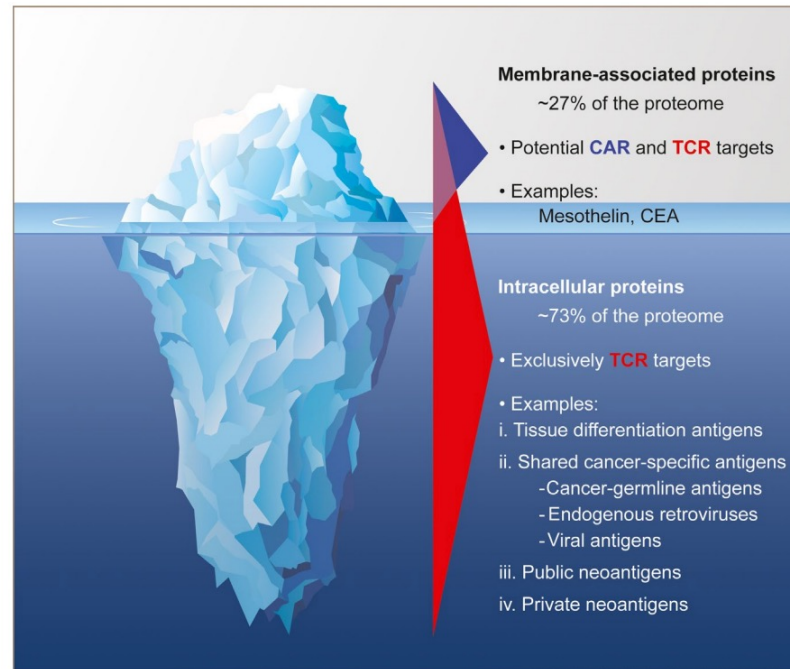
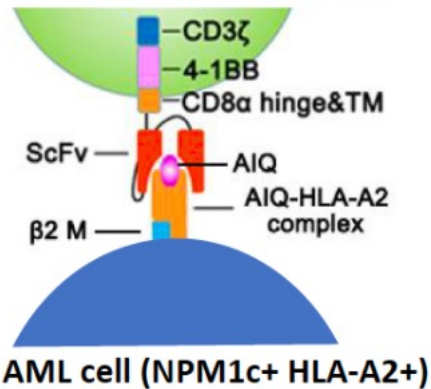


# Intracellular targets CAR NK cells

## CAR-T cells targeting a nucleophosmin neopeptide exhibit potent specific activity in mouse models of acute myeloid leukaemia

Guozhu Xie<sup>1,2</sup>, Nikola A. Ivica<sup>1,2</sup>, Bin Jia<sup>1,2</sup>, Yingzhong Li<sup>1,2</sup>, Han Dong<sup>3,4</sup>, Yong Liang<sup>5</sup>, Douglas Brown<sup>1,2</sup>, Rizwan Romee<sup>5</sup> and Jianzhu Chen<sup>1,2</sup>✉

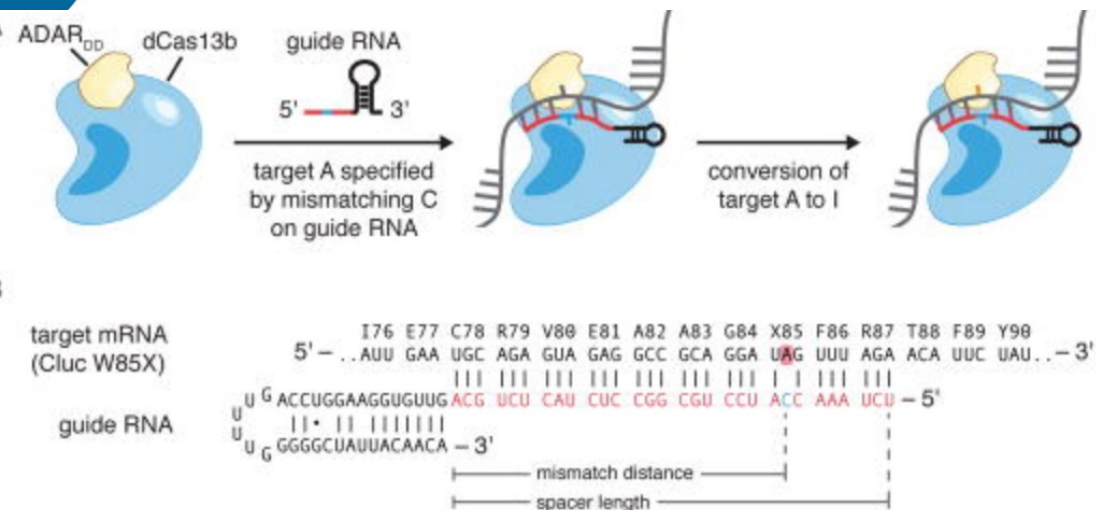
### A. NPM1c-CAR T cell/NK cell



Dong H et al (Chen, Ritz, and Romee). *ASH*. 2020



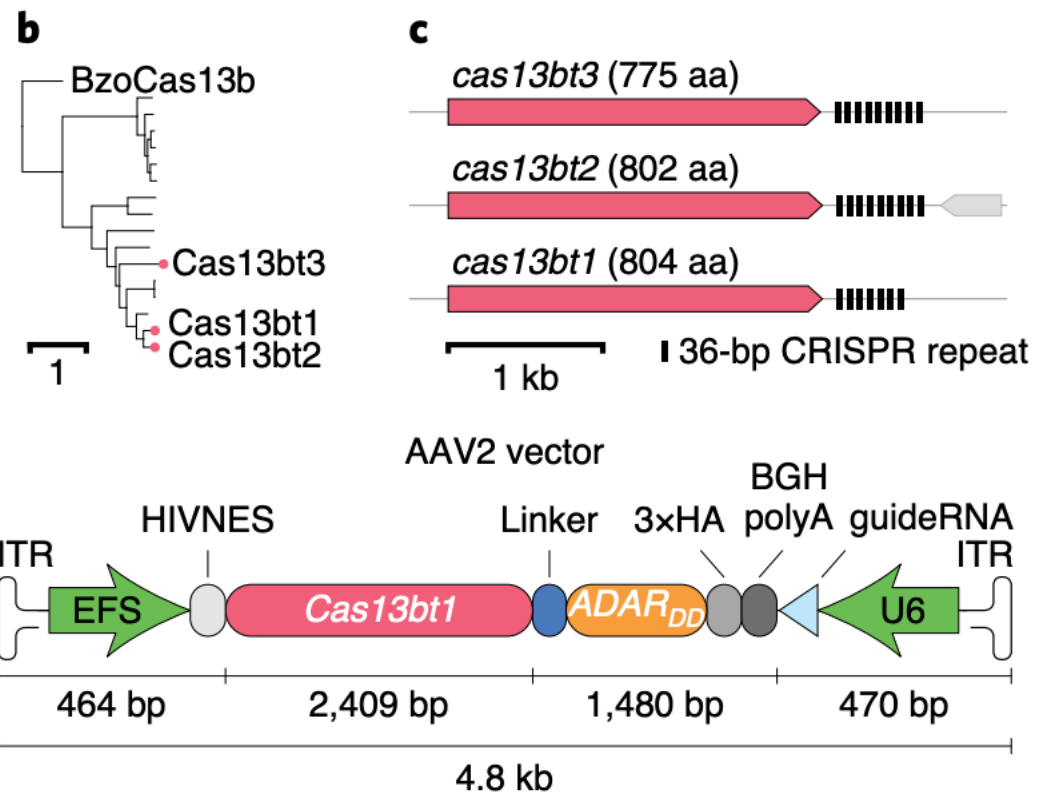
# Therapeutics to edit mRNA



*Science* **358**, 1019–1027 (2017)

## RNA editing with CRISPR-Cas13

David B. T. Cox,<sup>1,2,3,4,5,6\*</sup> Jonathan S. Gootenberg,<sup>1,2,3,4,7\*</sup> Omar O. Abudayyeh,<sup>1,2,3,4,6\*</sup> Brian Franklin,<sup>1,2,3,4</sup> Max J. Kellner,<sup>1,2,3,4</sup> Julia Joung,<sup>1,2,3,4</sup> Feng Zhang<sup>1,2,3,4,†</sup>



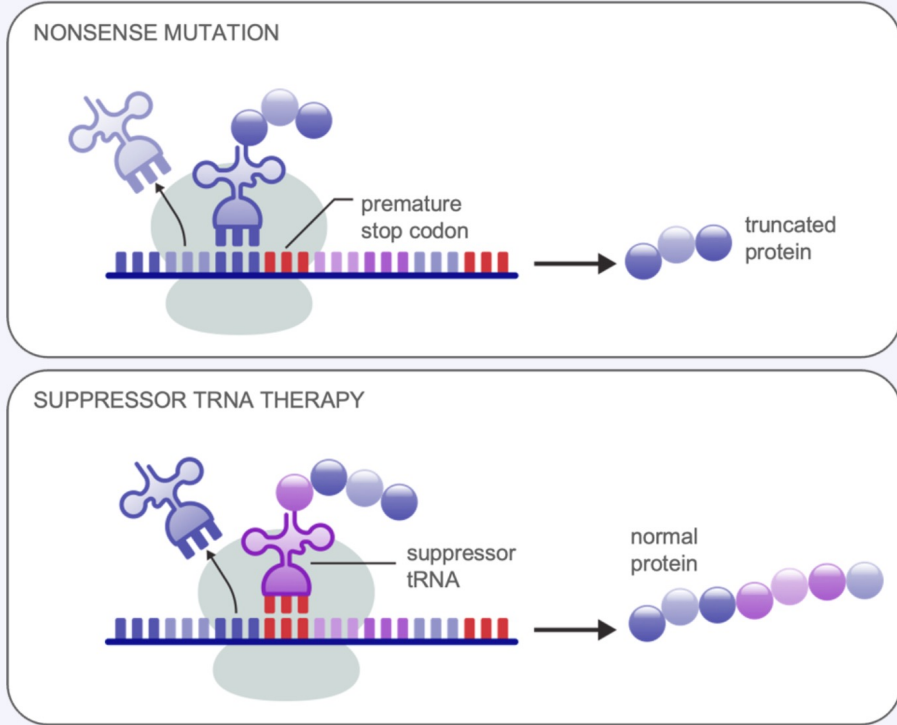
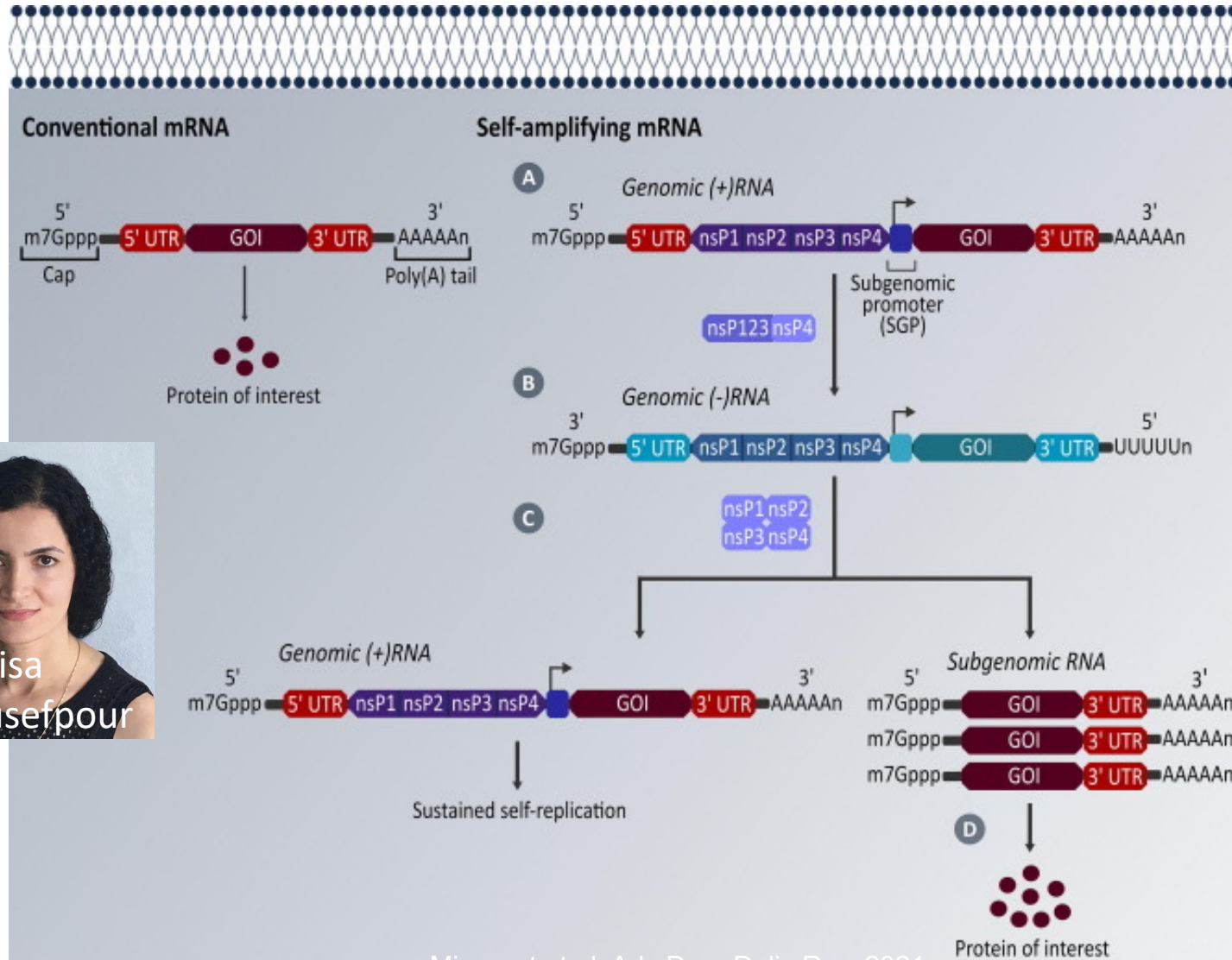
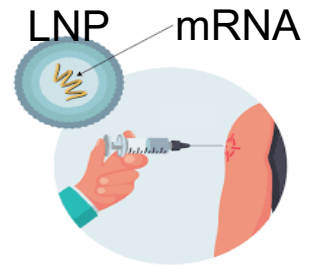
**NATURE BIOTECHNOLOGY** | VOL 40 | FEBRUARY 2022 | 194–197

## Compact RNA editors with small Cas13 proteins

Soumya Kannan<sup>1,2,3,4,5,9</sup>, Han Altae-Tran<sup>1,2,3,4,5,9</sup>, Xin Jin<sup>1,2,3,4,5,6,7</sup>, Victoria J. Madigan<sup>1,2,3,4,5</sup>, Rachel Oshiro<sup>1,2,3,4,5</sup>, Kira S. Makarova<sup>8</sup>, Eugene V. Koonin<sup>8</sup> and Feng Zhang<sup>1,2,3,4,5</sup>



# Advances in mRNA therapies



**Pioneering tRNA/mRNA-based gene therapy platforms**

**Gopi Shanker**

Chief Scientific Officer, **Tevard Biosciences**



Parisa Yousefpour



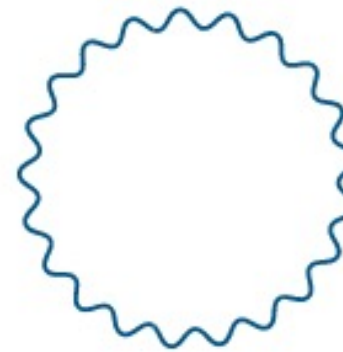
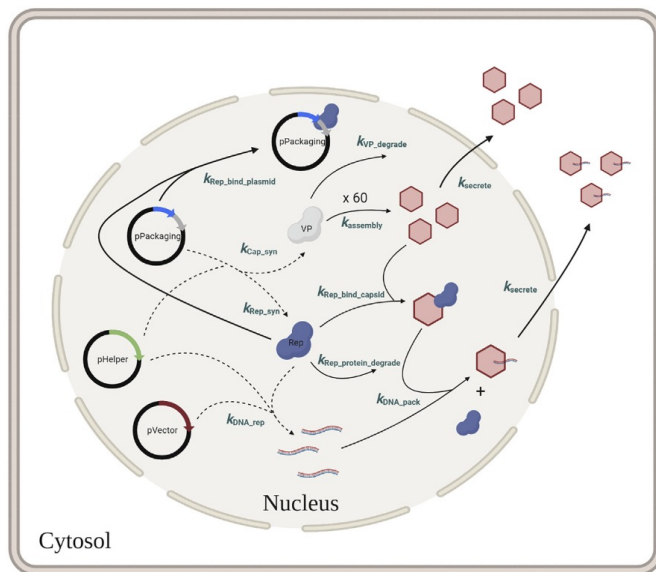


# Next-gen cell therapy manufacturing

## Rational Design of rAAV Production via Mechanistic Modeling

**Richard Braatz**  
Gilliland Professor, Chemical Engineering  
Faculty Research Officer

**Tam Nguyen**  
Ph.D. student in chemical engineering at M

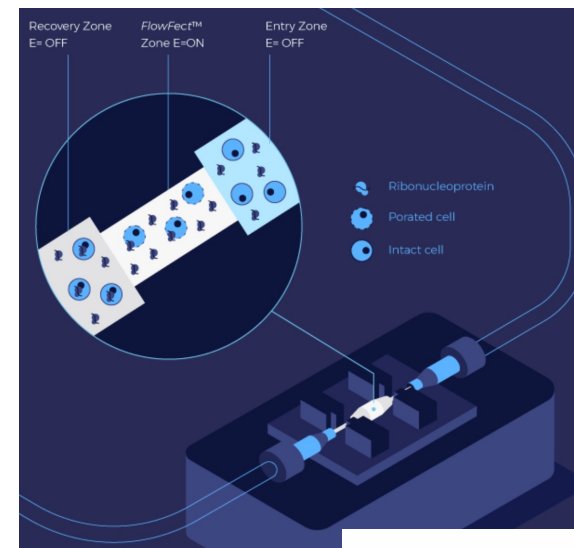


## Single-stranded DNA vectors for gene insertions and replacement

**Floris Engelhardt**  
CEO, Kano Therapeutics

## Label-Free Biophysical Critical Quality Attributes (CQAs) for Cell Therapy Products

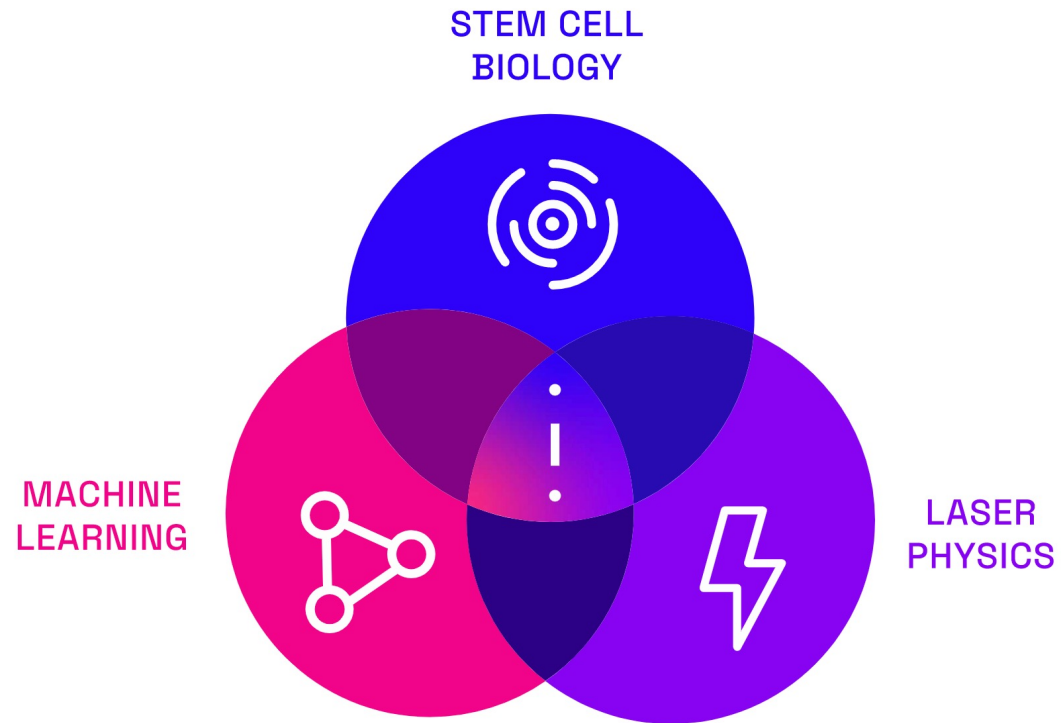
**Jongyoon Han**  
Professor of Electrical Engineering and Professor of Biological Engineering



## The future in cell therapy discovery and manufacturing

**Paulo Garcia**  
CEO & Co-founder, Kytopen

# Next-gen manufacturing: automation to increase scale



**Making personalized cell therapies scalable**

**Marinna Madrid**

Co-founder, **Cellino**



**Cell therapy manufacturing, enabled by robotics**

**Fred Parietti**

Founder & CEO, **Multiply Labs**



## New cell/gene/mRNA GMP capabilities:

Landmark Bio is building a multi-modality, state-of-the-art innovation and development laboratory and GMP manufacturing facility in Watertown, MA to help turn today's cutting-edge research into tomorrow's breakthrough therapies.

---



**Ran Zheng**  
CEO, LANDMARK BIO

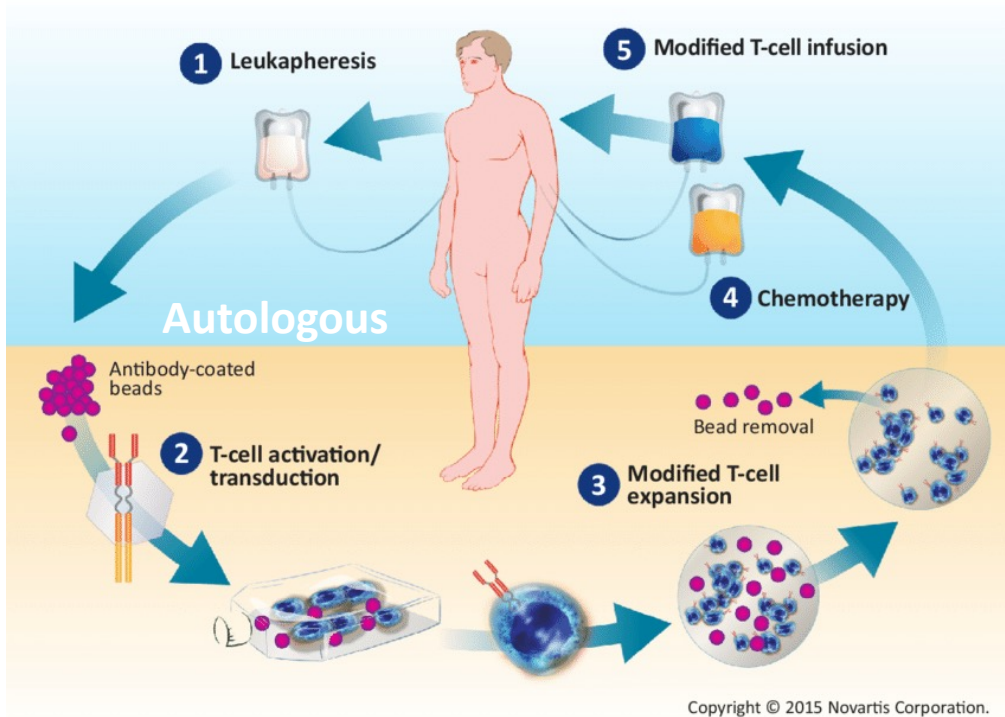


Image: Alexandria Real Estate Equities Inc.

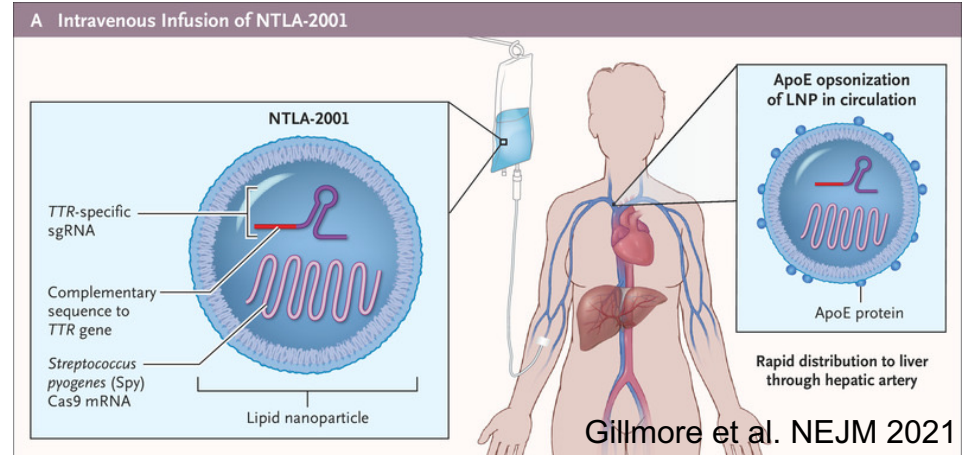
The Massachusetts Center for Advanced Biological Innovation and Manufacturing has closed a \$76 million funding round will open its headquarters and a biomanufacturing facility in Watertown's Arsenal on the Charles.



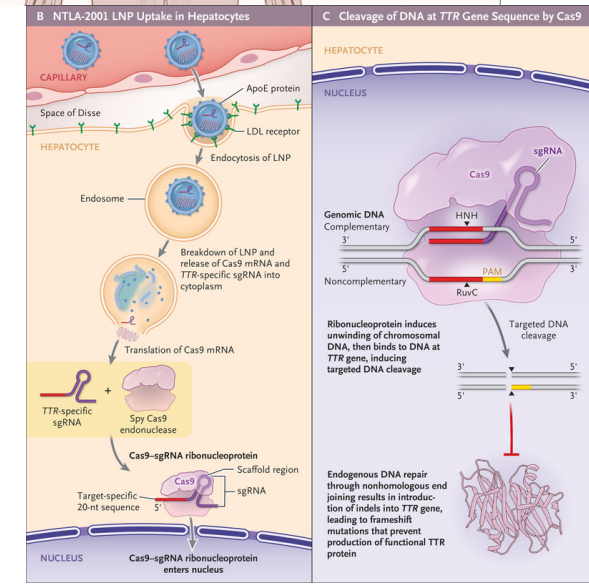
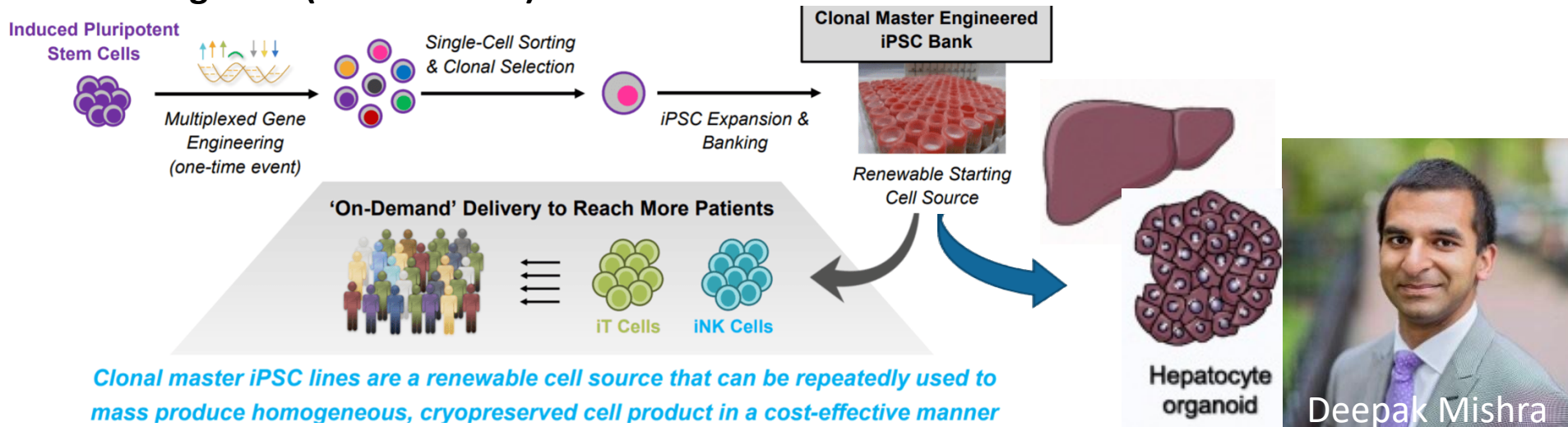
# Manufacturing platforms – big picture



## In situ

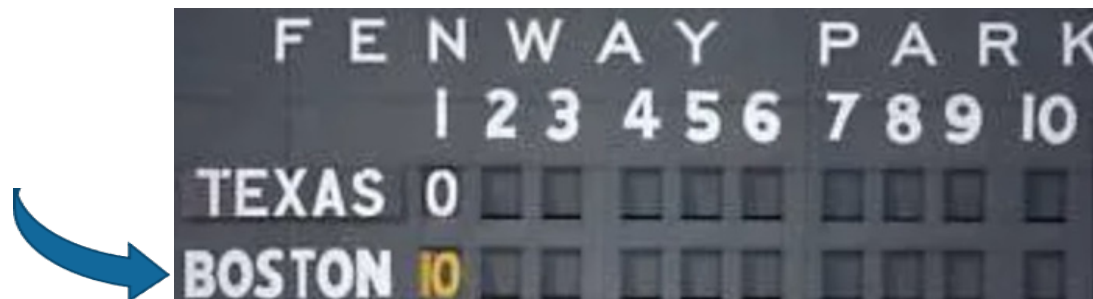


## Allogeneic (Off-the-shelf)



# Summary

- Cellular and genetic based immunotherapies are rapidly translational with the potential for substantial efficacy even in the most heavily pre-treated patients (example: GPRC5D CAR T cells)
- Advances in design/bioengineering and manufacturing will drive improvements in patient outcomes
- Given the rapid advances in technology and practical advantages of cell/gene/mRNA clinical translation, these platforms are likely to supplant traditional biologics over the next several years



**Smith Lab for Gene & Cell Engineering @ DFCI**

Katherine Antel

Elliott Brea

Liz Carstens

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**Carlos Fernandez de Larrea (DUAL)**

Urvi Shah

Yunxin Chen



**DF/HCC Myeloma and GI SPORES**

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**DFCI/Harvard/MIT/BCH/Broad**

Cathy Wu

Jerry Ritz

Bill Hahn

Kevin Hahn

Laurie Glimcher

Ken Anderson

Steve Carr (Broad)

David Mooney (Wyss)

Dan Anderson (MIT)

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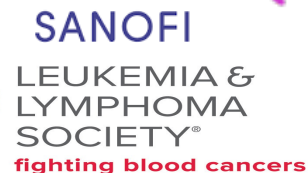
Steve Hodi

Ran Zheng (Landmark Bio)

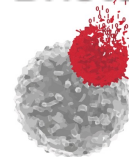
Kai Wucherpfennig

Gordon Freeman

Xin Zhou



**DFCI Accelerator Wong Family**



**DFCI/Harvard/MIT/BCH/Broad**

Rizwan Romee

Ming-Ru Wu

Irene Ghobiral

Nikhil Munshi

Caron Jacobson

Sarah Nikiforow

Myriam Armant

Dan Bauer

Christian Brendel

Susanne Baumeister

Roberto Chiarle

Leslie Kean

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Ola Landgren

**Sham Mailankody (Clinical PI)**

Michel Sadelain

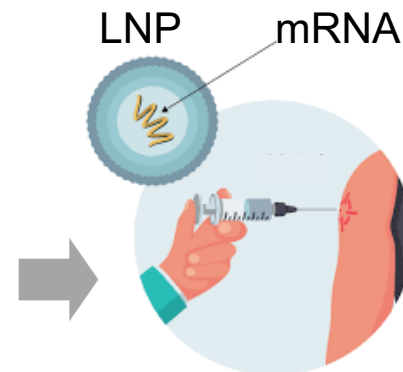
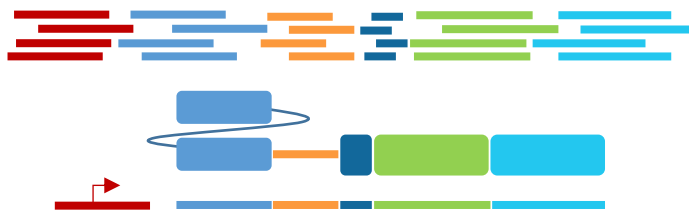


# Thank you



**Eric Smith, MD PhD**  
Director of Translational Research,  
Immune Effector Cell Therapies  
Dana-Farber Cancer Institute

Email: [EricL\\_Smith@dfci.harvard.edu](mailto:EricL_Smith@dfci.harvard.edu)  
**Smith Lab for Gene and Cell Engineering**





# Expanding Cell/Gene Immunotherapies @ DFCI

## Lead Scientist - Immunotherapy Platform for Antibody and CAR Therapeutics discovery (IMPACT)

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**Job ID:** 23920

**Location:** 450 Brookline Ave, Boston, MA 02215

**Category:** Research Technician/Scientist

**Employment Type:** Full time

### Overview

Dana-Farber Cancer Institute is seeking an experienced PhD scientist to lead IMPACT, a new pre-clinical group with the mission to speed “discovery to translation” of antibody-based therapies for immunotherapy of cancer. The IMPACT team will work closely with DFCI PIs and outside antibody discovery groups to develop and carry out streamlined ‘hit-to-lead’ functional screening and protein engineering approaches for potential therapeutic antibodies/nanobodies/bispecifics and CAR T cell immunotherapies. The candidate should be an exceptionally motivated individual with substantial past lab and management experience in the area of antibody screening and/or protein engineering.

mAb engineering  
High throughput screening

[EricL\\_Smith@dfci.harvard.edu](mailto:EricL_Smith@dfci.harvard.edu)  
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