

OncoResponse

Interrogating for Cures™

Targeting Tumor-Associated Macrophages to Reverse Immunosuppression in the Tumor Microenvironment

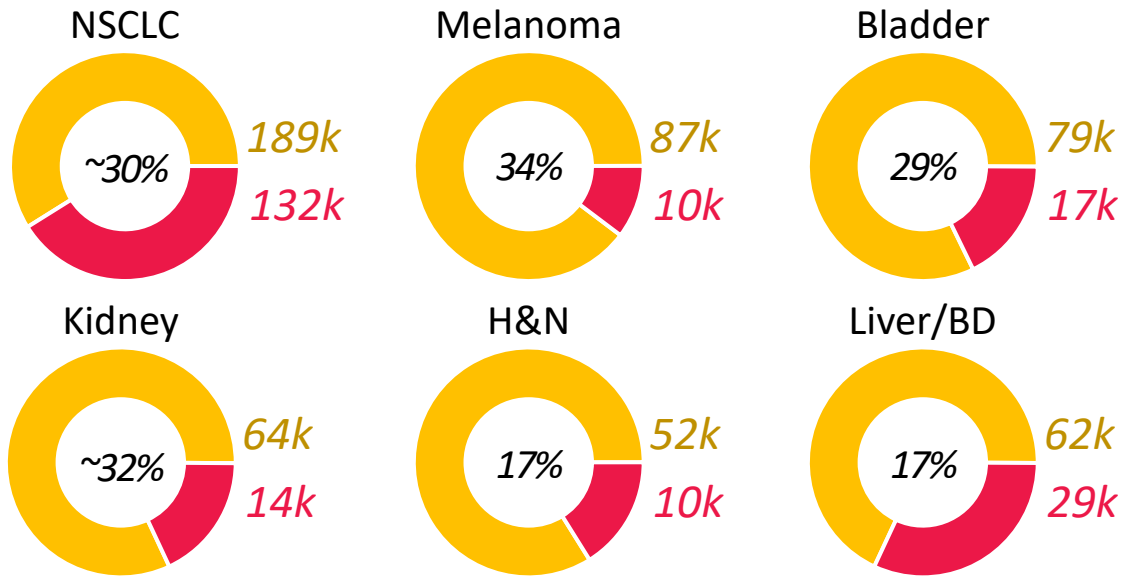
Peter Probst

Immuno-Oncology Summit

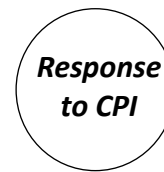
October 12-14, 2022

Overcoming resistance to CPI therapy

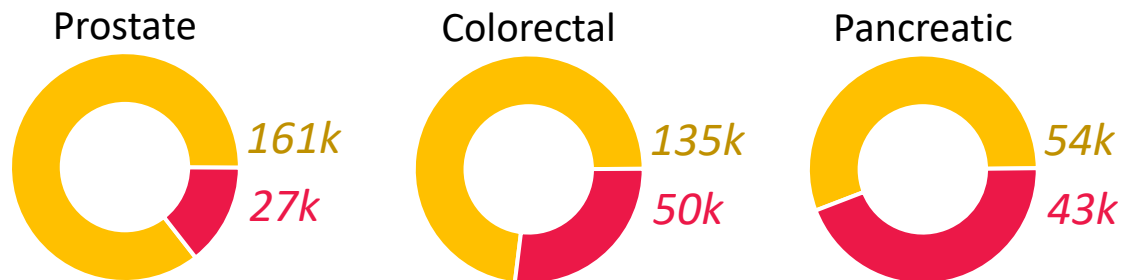
CPI-Responsive Cancer Types



■ Annual New US Cases
■ Annual US Deaths



CPI-Non-Responsive Cancer Types



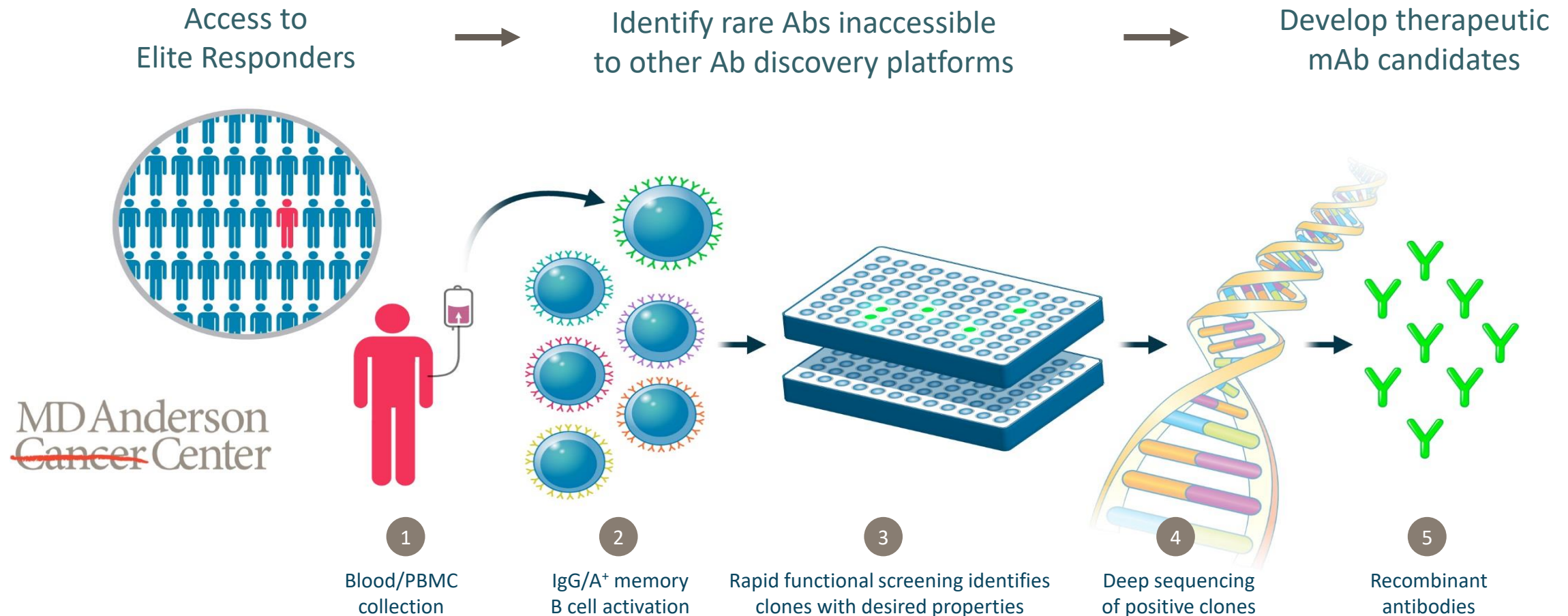
Abbreviations: CPI, checkpoint inhibitor; IO, immuno-oncology; TME, tumor microenvironment

- Response to checkpoint inhibitors (CPI) continue to be low due in part to the suppressive tumor microenvironment (TME)
- Large unmet need to overcome immunosuppression of the TME to increase response and survival

• **OncoResponse: Discover new therapies that leverage the immune system to attack cancer**

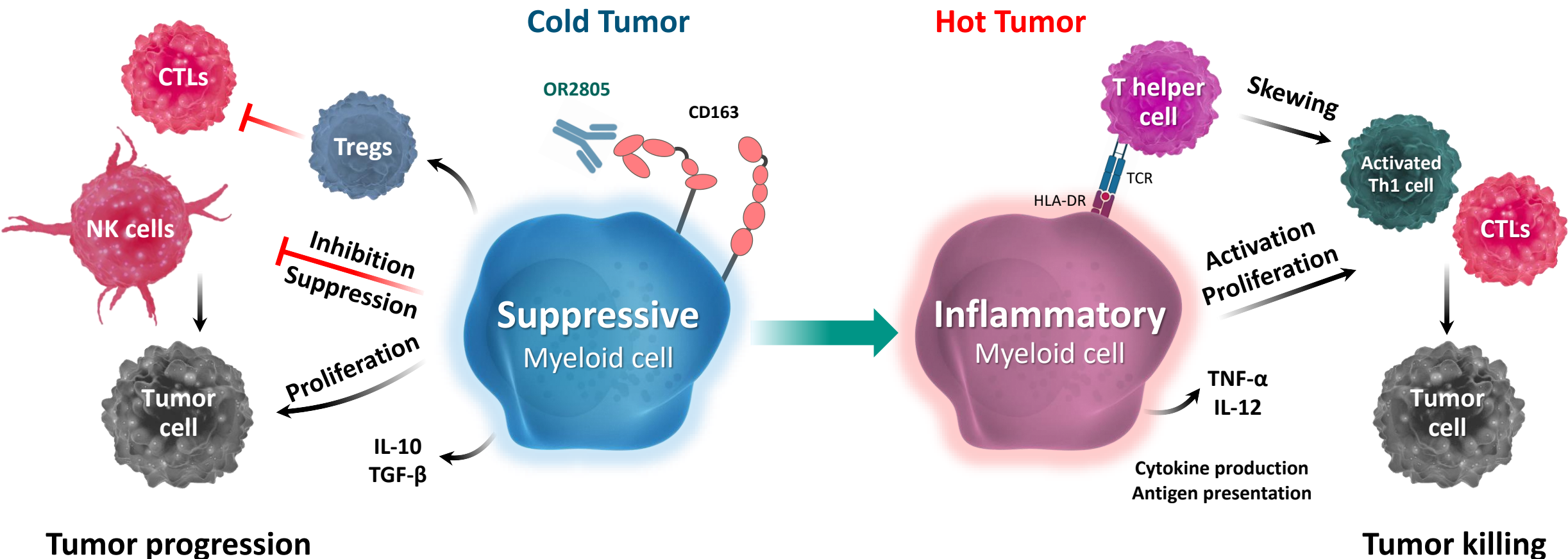
- Rare antibodies from Elite Responders that modulate immunosuppression in the TME
- Used as single agent or in combination with CPI to improve patient outcomes

OncoResponse platform interrogates the entire B-cell repertoire to discover antibodies modulating the TME



Validated antibody platform delivered preclinical and clinical stage antibodies

OR2805 relieves myeloid cell mediated immune suppression in the TME



OR2805 targets CD163 and reprograms the immune suppressive functions of tumor-associated macrophages (TAMs)

CD163 - Normal physiology and role in cancer

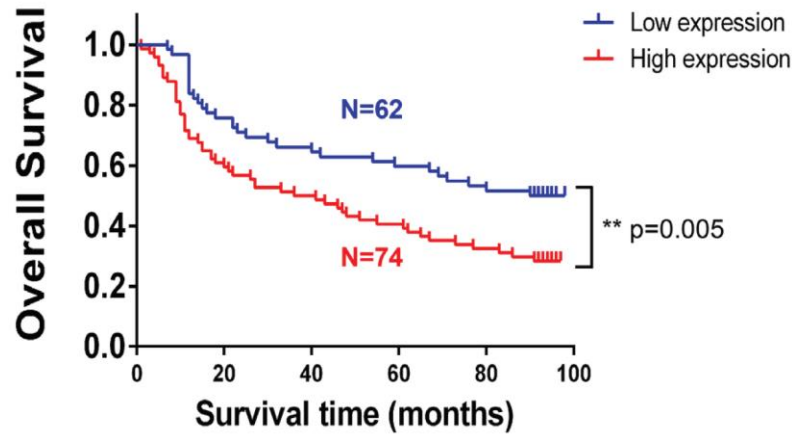
- Expression predominantly limited to and upregulated on immunosuppressive macrophages¹
- Binding by its ligands induces secretion of immunosuppressive cytokines^{2,3}
- Overexpression in human macrophages results in an immune suppressive phenotype⁴
- Knockout mice develop normally but have impaired tumor implantation⁵
- Expression in tumors correlates with poor survival⁶⁻⁹

¹Genomics Institute of the Novartis Research Foundation, ²Molecular Immunology 2010;47:1650, ³JCI Insight. 2016;1:e85375, ⁴Immunobiology 2017;222:900, ⁵Cancer Res 2018;78:3255, ⁶Clin Transl Immunology 2020;9:e1108, ⁷Cancer Management and Research 2020;12:5831, ⁸Cell 2016;165:35, ⁹J Exp Med. 2019;216:2394.

CD163 expression on TAMs is a negative prognostic marker in cancer

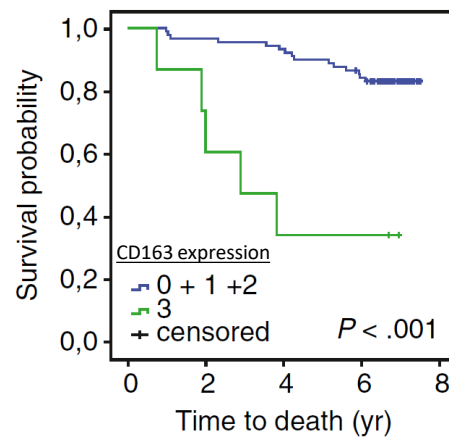
Gastric Cancer¹⁰

Overall survival



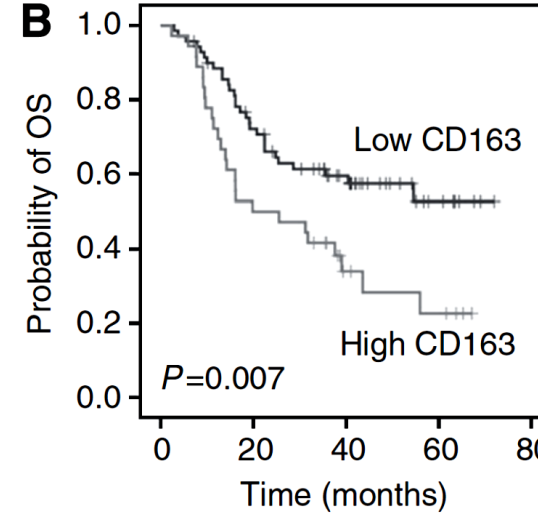
Breast Cancer¹¹

Survival probability

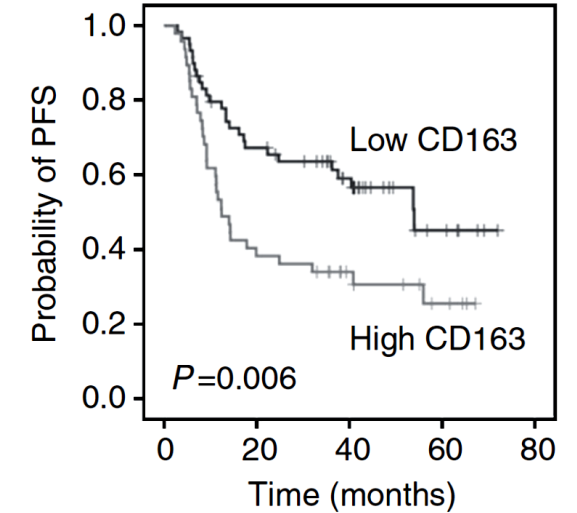


Head and Neck Cancer¹²

Overall survival

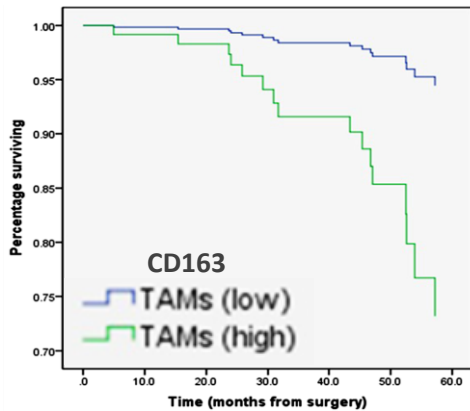


Progression-free survival

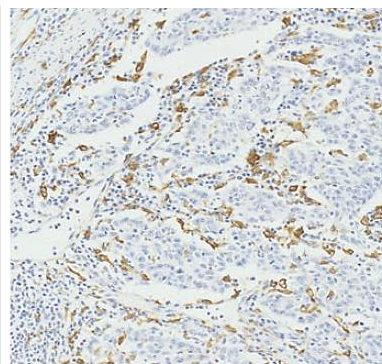


Colorectal Cancer¹⁴

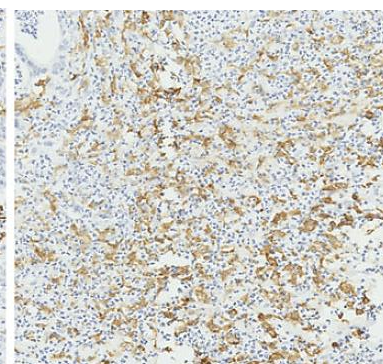
Overall Survival



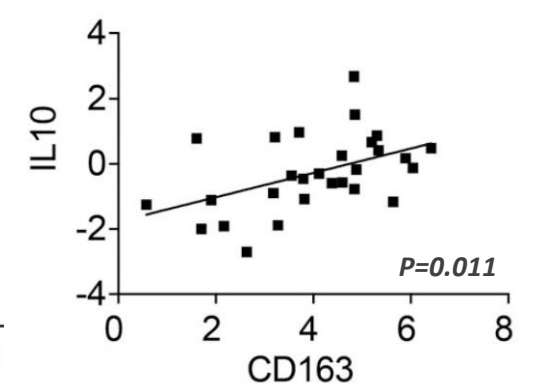
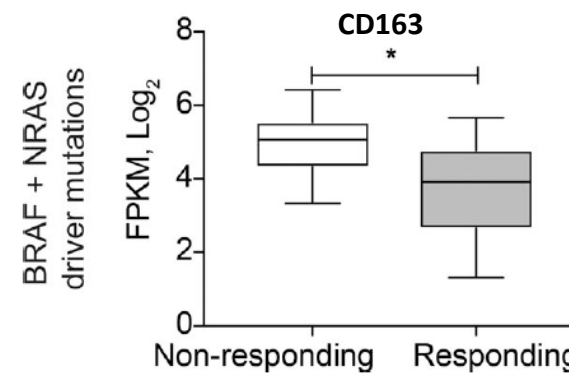
Low TAM Infiltration



High TAM Infiltration



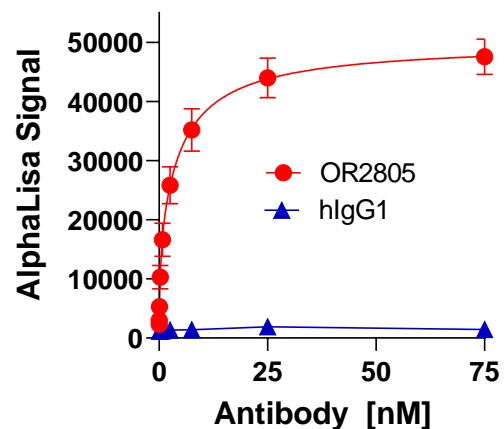
Melanoma patients on anti-PD-1 therapy^{13,15}



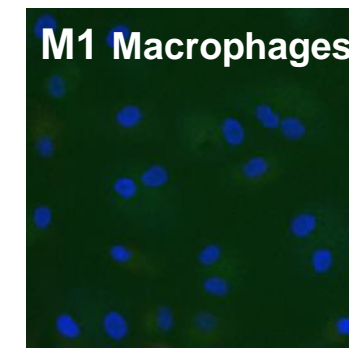
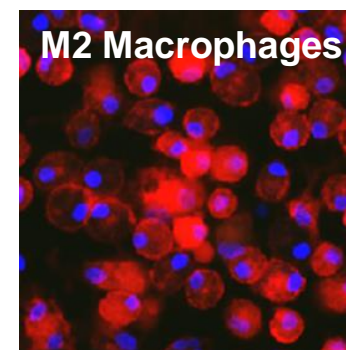
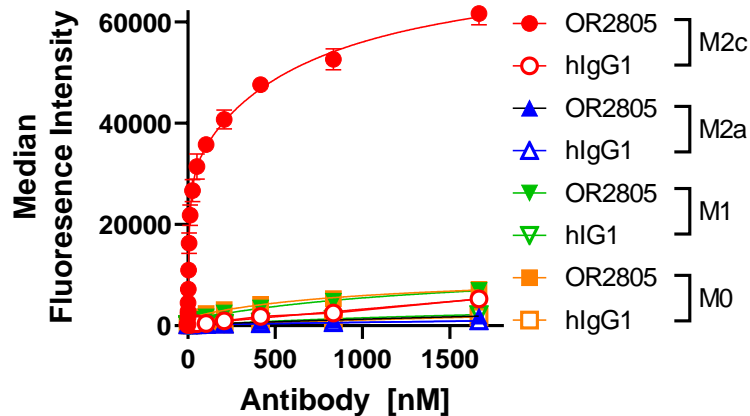
¹⁰Oncotarget 2017;8:87244, ¹¹BMC Cancer 2012;12:306, ¹²Br J Cancer 2014;111:1509, ¹³J Exp Med. 2019;216:2394, ¹⁴World J Surg Oncol. 2021;19:186, ¹⁵Cell 2016;165:35.

OR2805 demonstrates specific binding to immunosuppressive myeloid cells

OR2805 binds to CD163



OR2805 preferentially binds to M2c macrophages



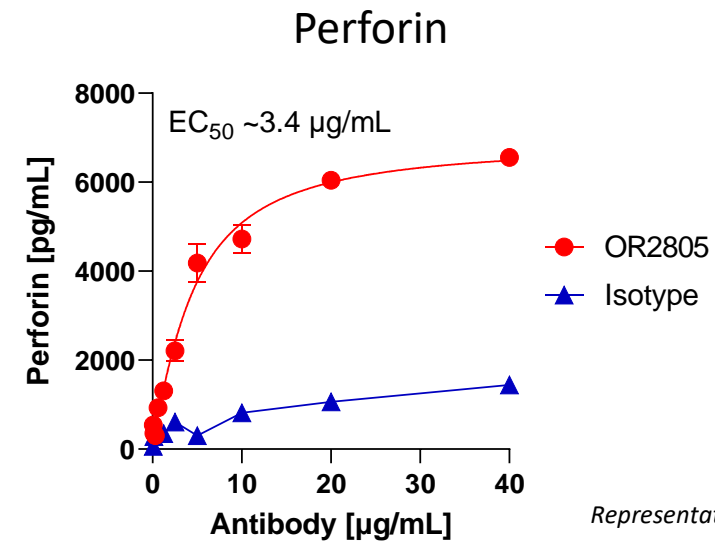
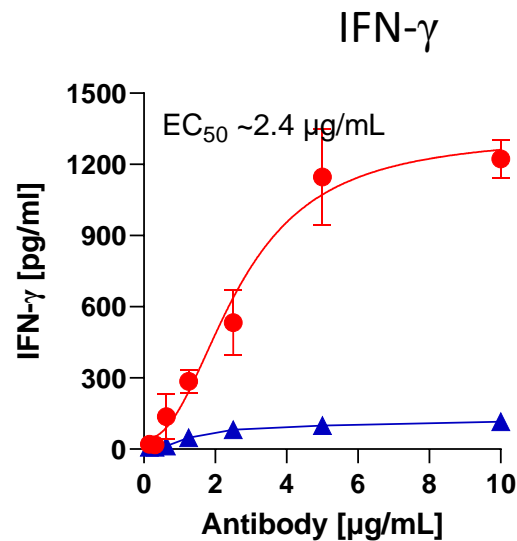
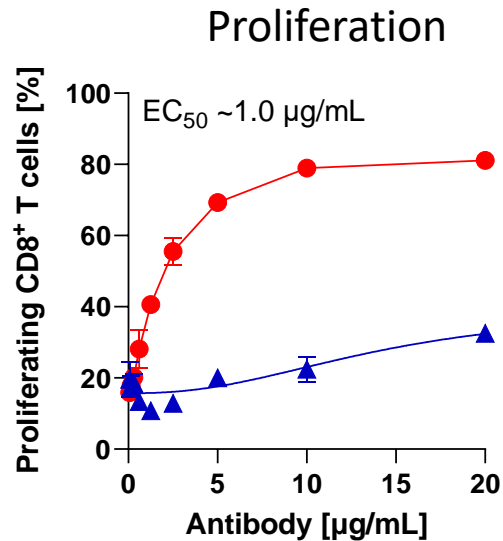
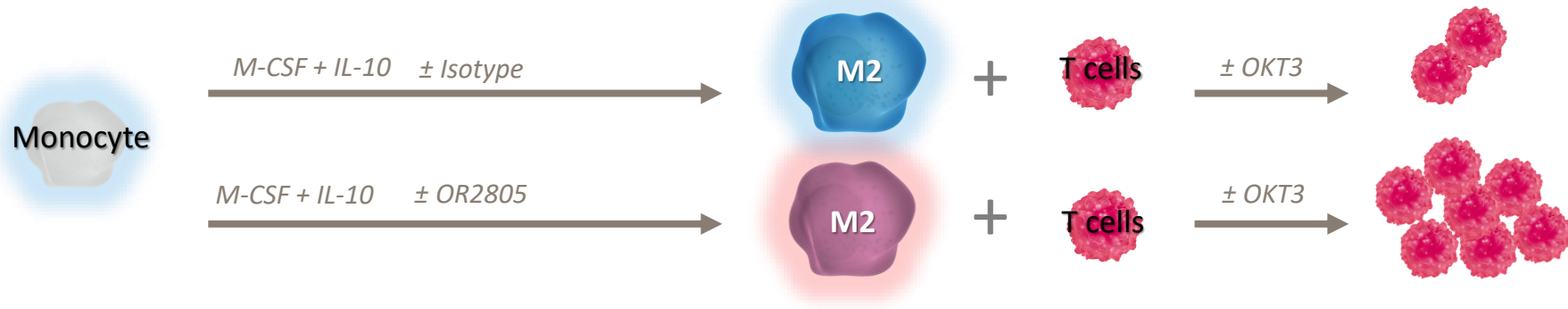
OR2805 Staining

Binding to TAMs in dissociated NSCLC tumors

Cell surface markers	Patient 1 cells (%)	Patient 2 cells (%)
Total TAMs	26	30
CD163 ⁺ TAMs	69	88
OR2805⁺ of CD163⁺ TAMs	82	77
CD163 ⁻ CD80 ⁺ TAMs	20	11
OR2805 ⁺ of CD163 ⁻ CD80 ⁺ TAMs	11	9

OR2805 has a potential to target immunosuppressive myeloid cells in the TME without impacting other cells

OR2805-treated M2c macrophages promote T-cell activation & proliferation



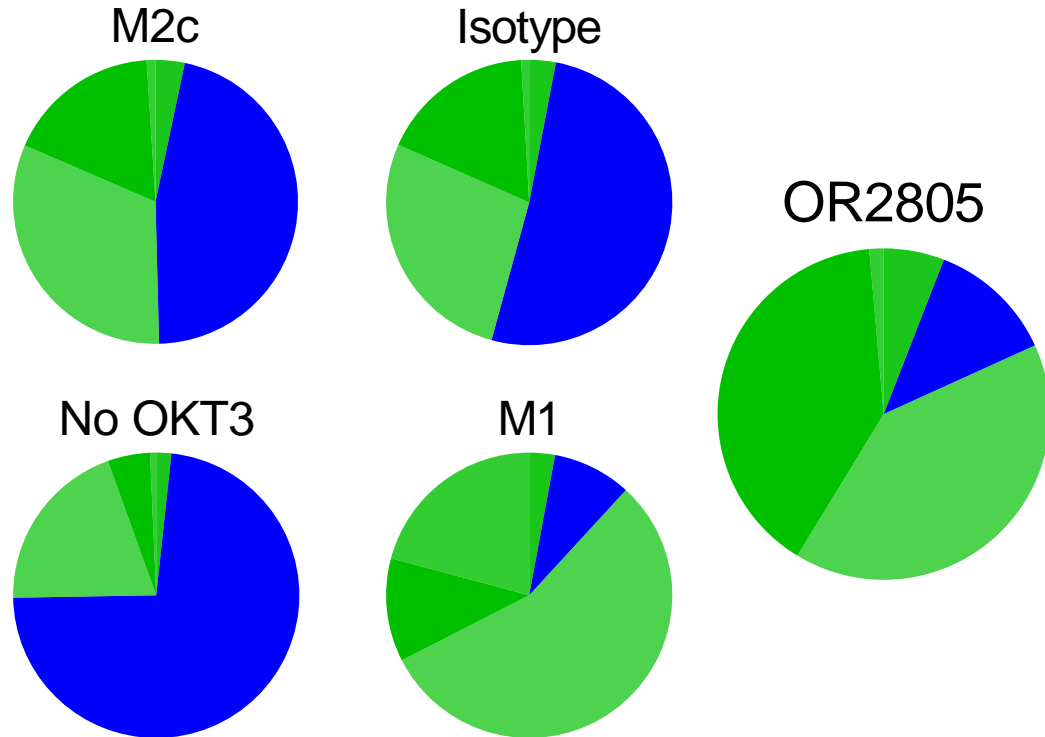
Representative data of 10 subjects



OR2805-treatment reduces the ability of M2c to suppress T-cell stimulation leading to enhanced T-cell proliferation and activation (IL-2, IFN- γ , TNF- α , & perforin production)

OR2805-treated M2c macrophages skew T cells towards a CXCR3⁺ Th1 phenotype

Distribution of CD4⁺ T cells phenotypes



- CXCR3 expression promotes T cell infiltration
- IFN- γ enhances CXCR3-mediated T-cell recruitment
- CXCR3-expressing CD8⁺ T cells show enhanced anti-tumor cytotoxicity

Resting T cells

Dark Blue: CXCR3⁻ CD69⁻ CD25⁻

Activated CXCR3⁻ T cells

Light Green: CXCR3⁻ CD69⁺ CD25⁺

Activated CXCR3⁺ T cells

Bright Green: CXCR3⁺ CD69⁺ CD25⁺

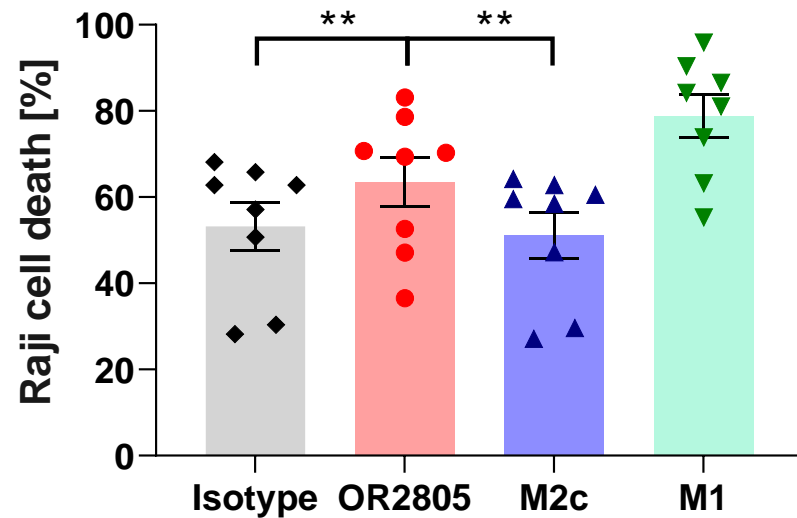
Light Green: CXCR3⁺ CD69⁻ CD25⁺



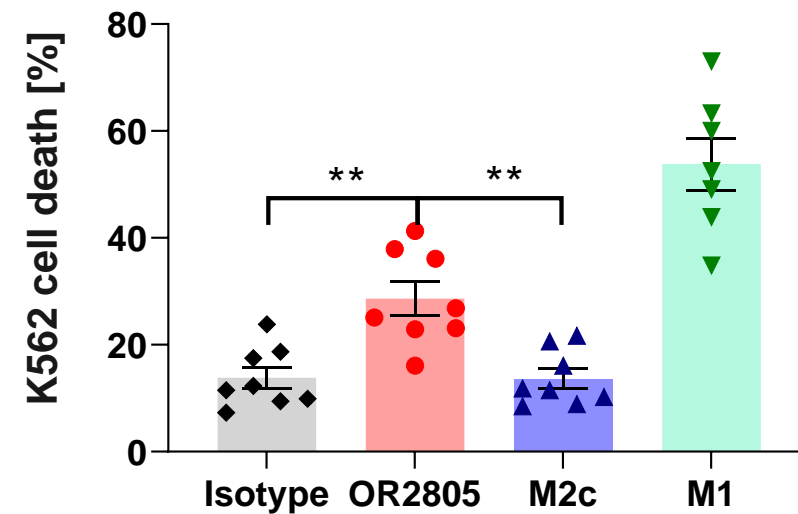
OR2805-treated macrophages promote T-cell activation leading to greater expression of T-cell activation markers (CD69, ICOS, OX40)

OR2805-treated M2c macrophages enhance the cytotoxic anti-tumor activity of CD8⁺ T cells

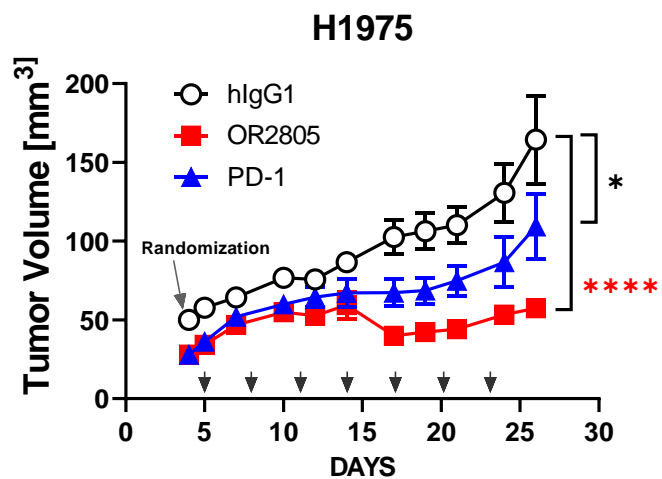
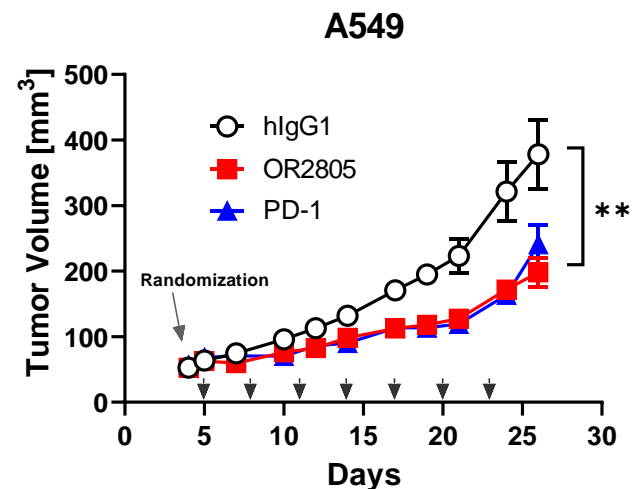
CD19-CD3 BiTE®-mediate killing of B-cell lymphoma by CD8⁺ T cells



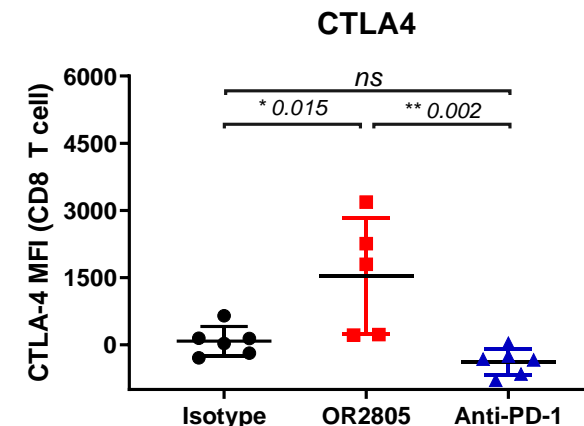
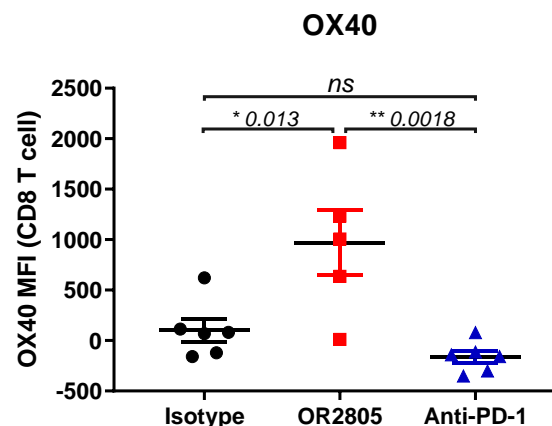
Killing of K562 leukemia cells by non-HLA restricted CD8⁺ T cells



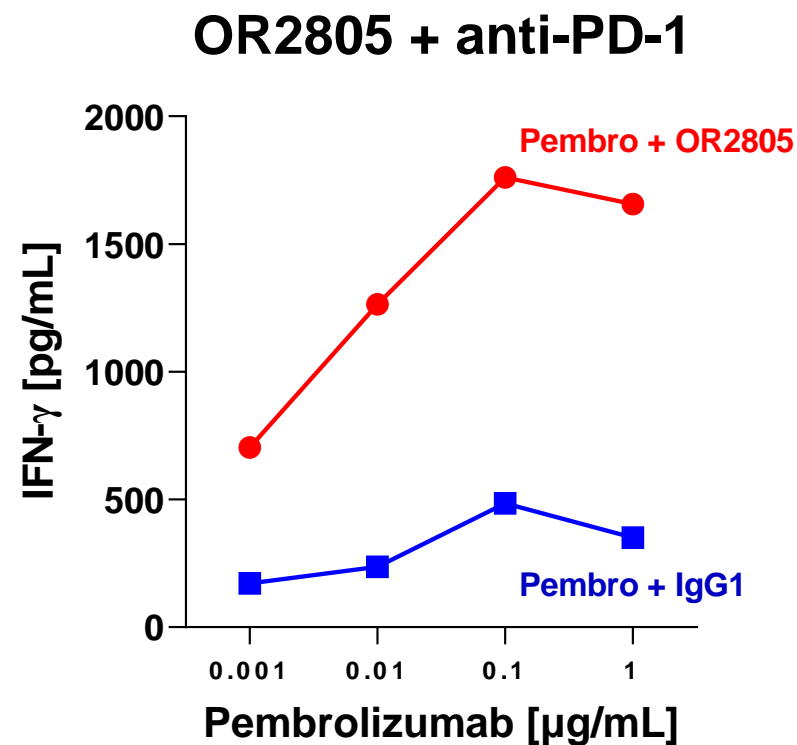
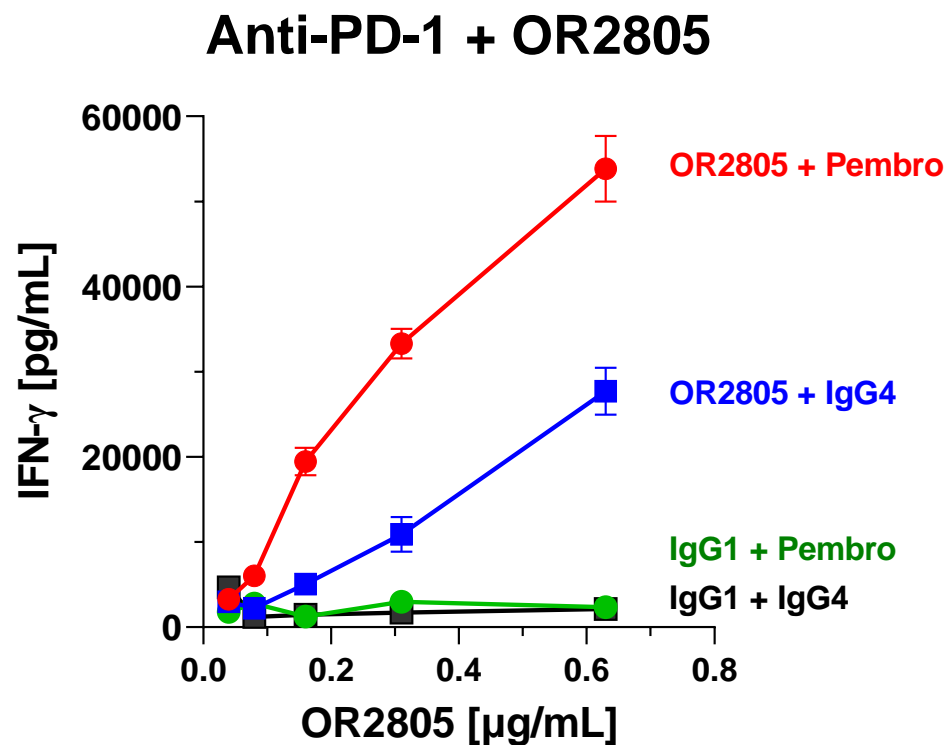
OR2805 treatment induces robust anti-tumor activity in humanized lung cancer xenograft models



Expression of activation markers on human CD8⁺ T cells in spleens



Combination with OR2805 enhances activity of anti-PD-1 in M2c/exhausted T cell coculture assays



OR2805 has the potential as a single agent or in combination with CPI to increase the number of patients who may benefit from immunotherapy

Summary: OR2805 relieves immunosuppression caused by myeloid cells in the tumor microenvironment

- Binds with high specificity to immunosuppressive TAMs
- Minimizes suppressive effect of macrophages on T-cell activation and proliferation and skews T cells towards an anti-tumor Th1 phenotype
- Enhances the cytolytic anti-cancer activity of cocultured T cells
- Demonstrates robust anti-tumor activity in lung cancer xenograft models
- Combination with OR2805 amplifies anti-PD-1 activity on exhausted T cells in coculture assays
- A phase 1-2 dose escalation-expansion study of OR2805 alone or in combination in subjects with advanced solid tumors is ongoing (NCT05094804)



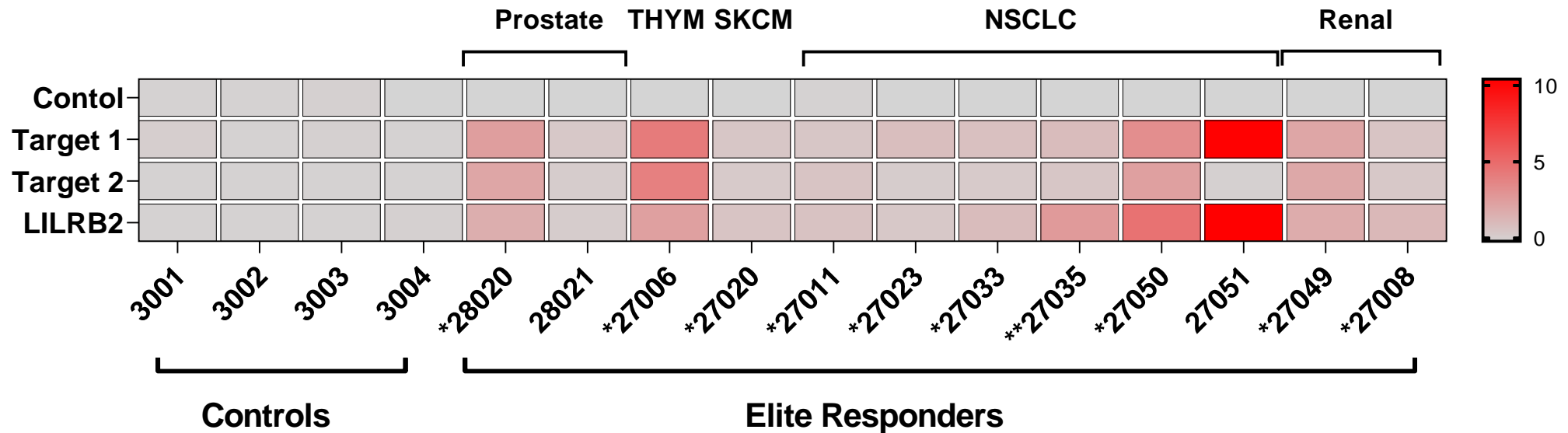
OR2805 has therapeutic potential as a single agent or in combination with checkpoint inhibitors

Leukocyte Immunoglobulin-Like Receptor B2 (LILRB2/ILT4)

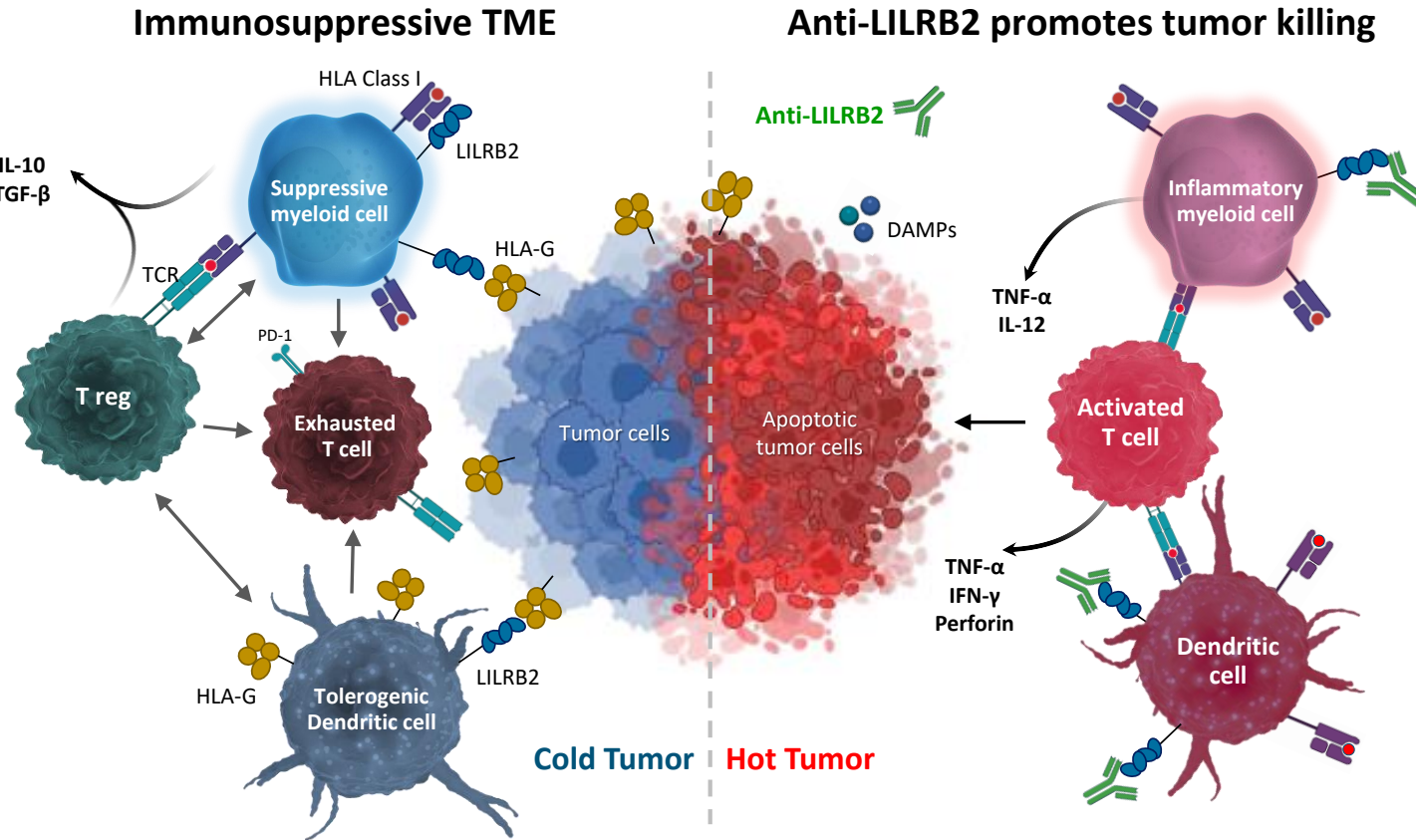
Targeting LILRB2–HLA class I binding to reverse immunosuppression in cancer

Elite Responders of immunotherapy mount a strong antibody response to leukocyte immunoglobulin-like receptor B2 (LILRB2/ILT4)

Presence of anti-LILRB2 antibodies in Elite Responder sera



LILRB2 promotes immunosuppression and blockade drives anti-tumor activity

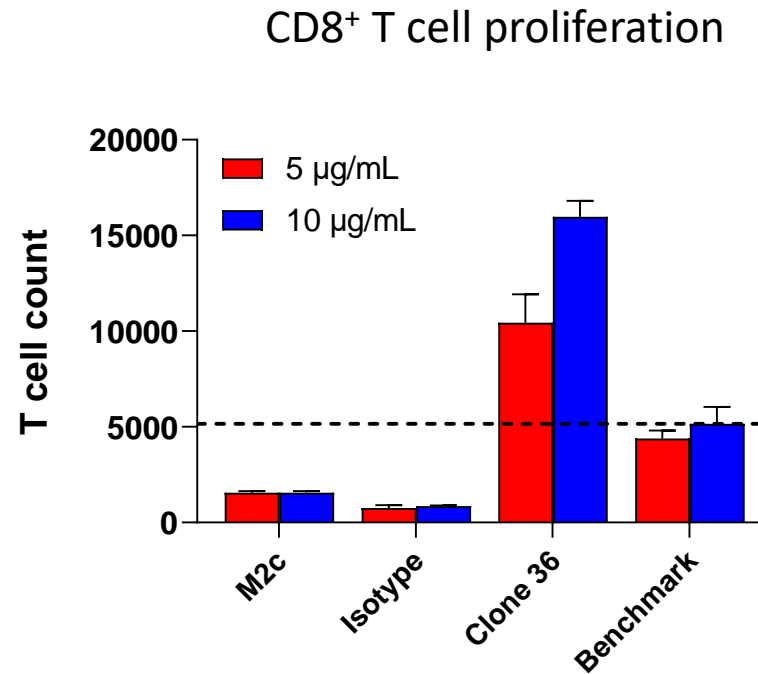
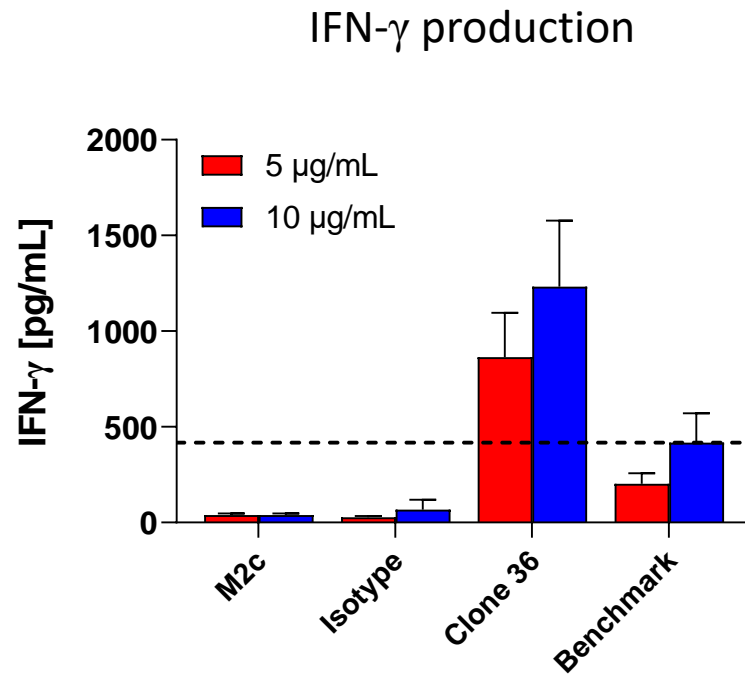


- ITIM-containing inhibitory receptor expressed on myeloid cells
- Expression correlates with poor survival in multiple cancers including NSCLC, breast, CRC, and renal
- Expression contributes to anti-PD1 resistance
- Receptor with multiple immune inhibitory activities mediated by SHP-1 recruitment
- Impairs DC maturation to induce Th1 cell anergy and promotes Treg and Th2 differentiation

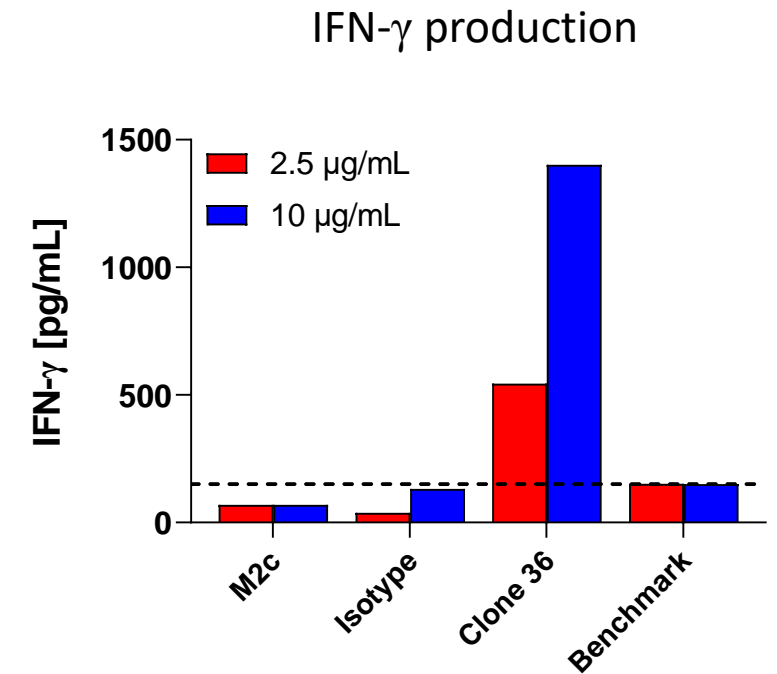
J Clin Invest. 2018;128:5647, *Biochim Biophys Acta.* 2018;1869:278, *Clin. Cancer Res.* 2021;28:57-70, *J Immunol.* 1998;160:3096-3100, *Eur. J. Immunol.* 1998;28:3423-34., *Nat Immunol.*, 2002;3:237-43, *PNAS* 2003;100:8856-61

OncoResponse antibody enhances CD8⁺ T cell proliferation and IFN- γ production in M2c/T cell coculture assay

M2c/CD8⁺ T cell coculture

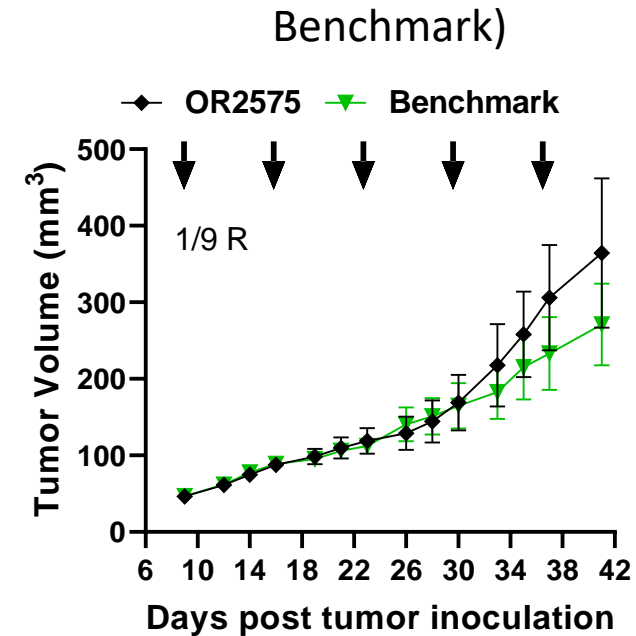
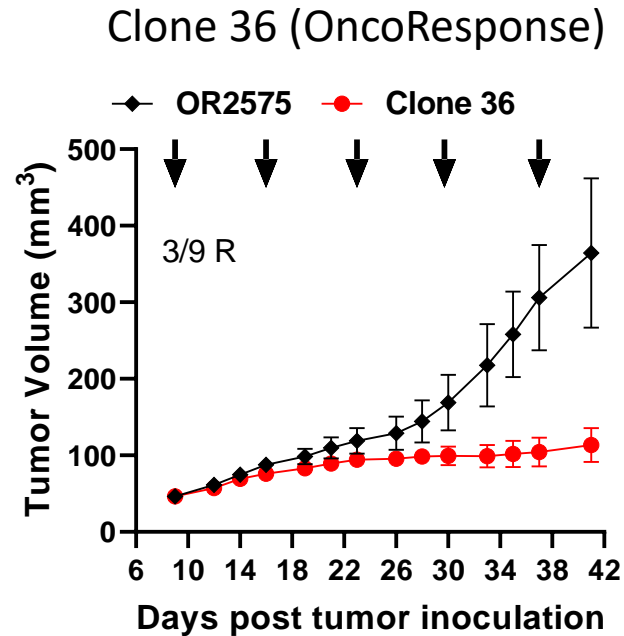


M2c/exhausted T cell coculture



OncoResponse antibody outperforms benchmark in M2/T cell coculture assay

OncoResponse antibody induces anti-tumor response in SK-MEL-5 tumor model in humanized NSG-SGM3 mice



- Dosing: 20 mg/kg i.p.
 - Dosing Days: 9, 16, 23, 30, 37
- All groups N=9

Group	Tumor Growth Inhibition (%)						Regression (%)
	d28	d30	d33	d35	d37	d41	d41
Clone 36 (OncoResponse)	47	57	69	74	78	79	33
Benchmark	-5	3	16	17	24	26	11

Summary

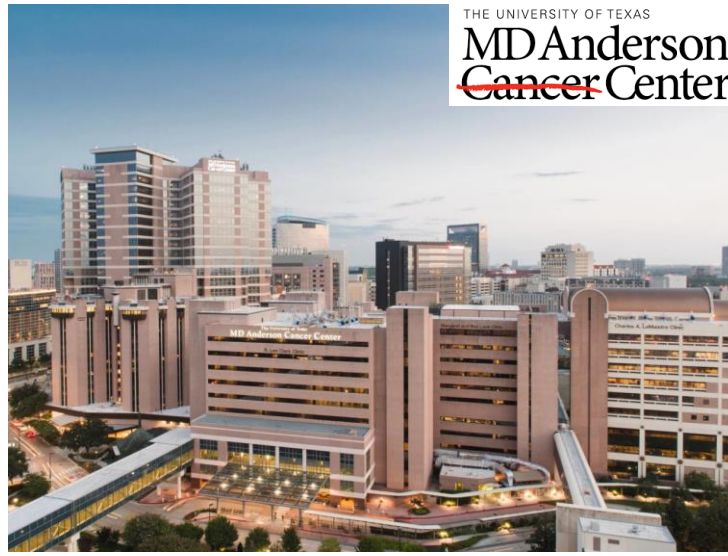
- Identified LILRB2 lead antibodies that block the interaction of LILRB2 with HLA-G and other HLA-class I molecules
- LILRB2 blockade modulates the immunosuppressive function of TAMs and enhances adaptive anti-tumor responses
- LILRB2 blockade boosts the innate immune response and enhances cytokine secretion to make a cold tumor hot
- A representative anti-LILRB2 clone inhibits human SK-MEL-5 melanoma tumor growth by 79% in humanized NSG-SGM3 mice
- Superior profile compared to benchmark



Preclinical data support further development of anti-LILRB2 lead antibodies

Acknowledgements

OncoResponse



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Patients who provided precious tissue samples for this study

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Thank You.

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