

T Cell Immunotherapy- Optimizing Trial Design

Session I

Current Status of Cancer Immunotherapy: Trials, Results, and Challenges

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Overview of Trials

Protocol number/title	IND 13859, RAC 0802-901 MART-1 F5 ACT	IND 15167, RAC 1203-1157 NY ESO TCR ACT
Disease indication/Research Participant population	Metastatic melanoma HLA-A2.1 positive MART-1 positive	Metastatic cancer HLA-A2.1 positive NY ESO-1 positive
TCR or CAR product (ex vivo cell/ vector/transgene) and Dose	F5 TCR 1 x 10 ⁹ to up to 1 x 10 ¹⁰	NY ESO-1 TCR 1 x 10 ⁹
Trial initiation date/status /enrollment	July 2009 14 patients enrolled	January 2013 2 patients enrolled

Lessons Learned

- **F5 TCR clinical trial:**
 - High frequency of tumor responses
 - All non-durable
 - TCR transgenic cells can be made in 6 days
 - Fresh TCR transgenic cells may have higher functionality than cryopreserved TCR transgenic cells
 - F5 TCR transgenic cells lose polyfunctionality after ACT

Lessons Learned

- Summary of unexpected results

Subject ID#	SAE Description	Related to
F5 trial		
F5-6	Seizures	Disease progression with brain metastases
F5-10	Bone marrow aplasia	Disease progression with bone marrow involvement
F5-12	Respiratory distress, respiratory acidosis, renal insufficiency, and hypotension, anemia	Pneumonia due to Klebsiella with ARS
F5-14	Acute respiratory distress, renal insufficiency, hypotension, supraventricular tachycardia, pancytopenia	Required corticosteroid therapy and recovered
F5-15	DVT left subclavian, cardiopulmonary arrest, rapid drop in hemoglobin level, death	Massive retroperitoneal bleed from a melanoma lesion while on anticoagulant therapy
NY ESO TCR trial		
ESO-2	Pancytopenia, vision loss	No recovery of pancytopenia after Cy-Flu, and fludarabine-induced vision loss