EDIT-202, a multiplexed AsCas12a-edited iPSC-differentiated iNK, displays a mature phenotype, high KIR expression, and ADCC towards multiple solid tumor lines

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OBJECTIVE

To determine if a correlation could be made between the phenotype of EDIT-202 cells and their potency *in vitro*. In addition, EDIT-202 cells were screened against solid tumor lines from multiple indications with different antibodies.

INTRODUCTION

It has been demonstrated that chimeric antigen receptor T-cell (CAR-T) therapy can achieve durable remissions in hematologic malignancies.¹ However, CAR-T therapies have limited efficacy in solid tumors and are often associated with severe toxicity,² highlighting the need for safer, more efficacious cell therapies. Natural killer (NK) cells with high-affinity cluster of differentiation 16 (CD16) represent an attractive alternative therapy option to CAR-Ts because of their natural cytotoxic ability and low toxicity. Therefore, we have generated an off-the-self, allogeneic, feeder-free, induced pluripotent stem cell (iPSC)-derived iNK cell (EDIT-202) for targeting solid tumors.



ADCC, antibody-dependent cellular cytotoxicity; CISH, cytokine-inducible SH2-containing protein; HLA, human leukocyte antigen; IL-15, interleukin-15; IL-15Ra, interleukin-15 receptor alpha; iNK, induced pluripotent stem cell-derived natural killer; mblL-15, membrane-bound IL-15; SLEEK™, SeLection by Essential-gene Exon Knock-in: TGF-β, transforming growth factor beta; TGF-βR2, transforming growth factor-beta receptor 2.

METHODS

- Flow cytometry was performed to determine expression levels of the indicated markers. Perforin, granzyme b, and T-bet required intracellular staining.
- To determine the IC_{50} , a 3D tumor spheroid-killing assay was used with SKOV-3 target cells. Killer cell immunoglobulin-like receptor (KIR) and perforin levels were correlated using linear regression analysis. Non-linear regression analysis was used to correlate KIR and perforin levels with IC_{50} .
- Flow cytometry was used to determine the expression levels of epidermal growth factor receptor (EGFR) and human epidermal growth factor receptor 2 (HER2) in different cancer cell lines. A biosimilar (trastuzumab or cetuximab) antibody was used to bind the indicated antigen and a conjugated secondary antibody (AF488) was used to bind the biosimilar antibody.
- Cryopreserved EDIT-202 cells were plated with the indicated target cell lines and incubated for 48 hours. A lactate dehydrogenase (LDH) release assay was used to determine EDIT-202-induced cytotoxicity. An AlphaLISA[®] IFN-γ (human) detection kit was used to detect interferon gamma (IFN-γ) in the supernatant of the LDH assays used in Figure 4.

Enhanced survival and/or expansion of iNK cells Increased IL-15 signaling through: Knock-in of mblL-15 complex

Enhanced ADCC

Constitutive overexpression of

RESULTS

Figure 1: EDIT-202 cells express high levels of maturation markers such as KIR **Perforin, Granzyme B, and T-bet**







IFN-y, interferon gamma.

CONCLUSIONS

- EDIT-202 cells:

DISCLOSURES

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• Display a mature phenotype, which is correlated with potent killing of tumor cells • Can be cryopreserved and still maintain their potent killing activity after thawing • Demonstrate significantly better cytotoxicity and IFN-γ secretion when combined with an ADCC-enabling antibody and target cells that express sufficient levels of antigen • Showed cytotoxic activity against ten different cancer cell lines from four different tumor types, using two different antibodies

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REFERENCES

2. Barayan V et al. Nat Med 2022; 28: 724–734.