

Armoring CAR-T Therapy with PD-1 Blockade: A Powerful Strategy for Enhancing Anti-Tumor Effects in Pancreatic Cancer

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Abstract

Chimeric antigen receptor-modified T cells (CAR-T) have been widely applied in the treatment of hematological malignancies and are currently under investigation for their potential effectiveness against solid tumors. Nevertheless, the effectiveness of CAR-T in treating solid tumors remains unsatisfactory due to a range of factors, including CAR-T cell infiltration and heterogeneity. The efficacy of CAR-T therapy is substantially influenced by the tumor microenvironment. This is particularly evident when PD-L1 is activated through CAR-T, leading to the inhibition of CAR-T cell activity via the PD-1 pathway.

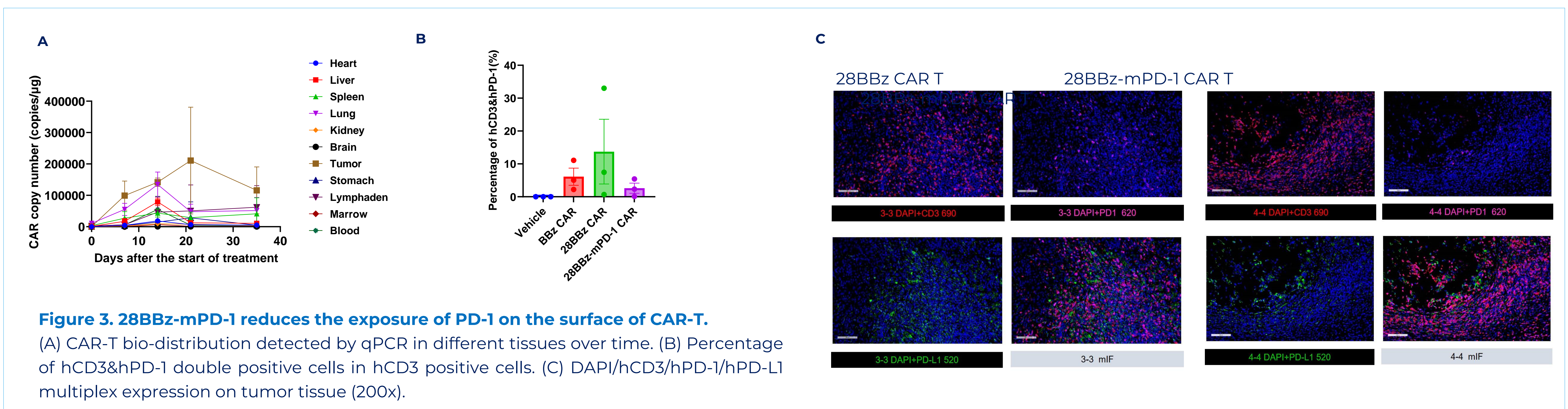
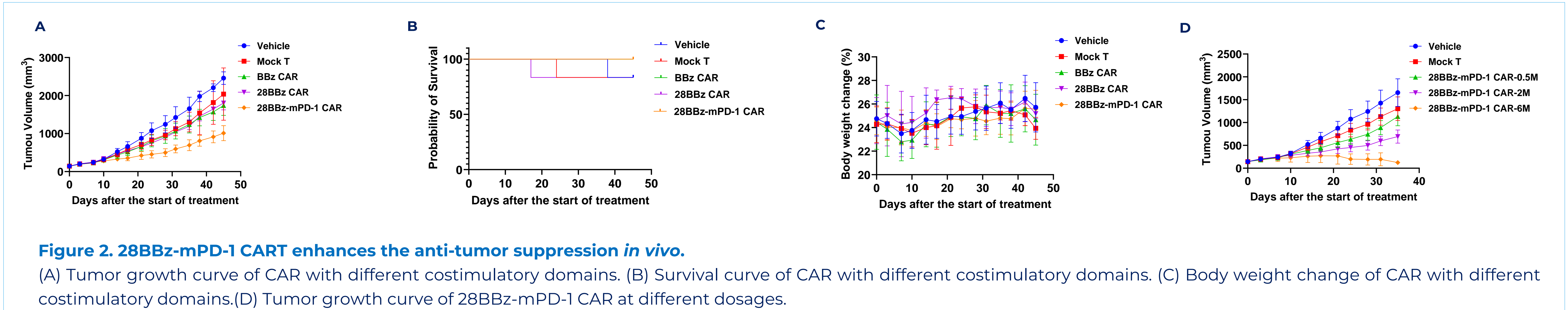
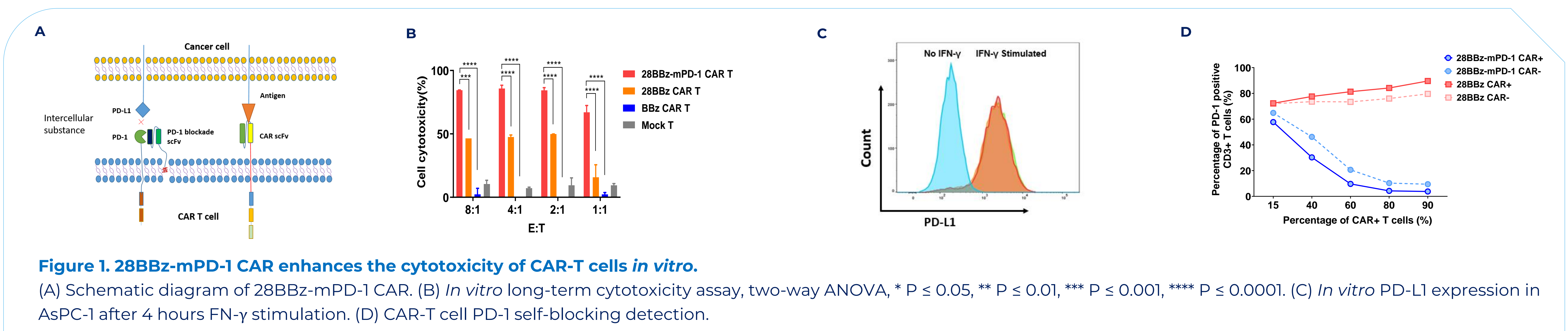
In this study, we engineered a CAR-T therapy that targets mesothelin (MSLN) and concurrently expresses a membrane-bound PD-1 receptor. This design blocks the PD-1 on CAR-T cells, effectively counteracting the suppression of CAR-T function mediated by PD-L1. We observed a substantial upregulation of PD-L1 on AsPC-1 tumor cells after 4 hours of IFN- γ stimulation *in vitro*. CAR-T cells engineered to co-express PD-1 antibody (aMSLN-28BBz-mPD-1) exhibited similar short-term cytotoxicity and cytokine secretion profiles to those of the traditional third-generation CAR-T (aMSLN-28BBz). Notably, aMSLN-28BBz-mPD-1 displayed significantly improved long-term target cell killing. Furthermore, in an *in vivo* model of pancreatic cancer, aMSLN-28BBz-mPD-1 demonstrated enhanced anti-tumor activity when compared to the traditional aMSLN-28BBz, as supported by immunofluorescence analysis and immunofluorescence assays of tumor tissues. These analyses revealed a marked upregulation of PD-L1 expression and enhanced CAR-T cell infiltration in the aMSLN-28bbz-mPD-1 treatment group. In summary, our study demonstrates that co-expression of a membrane-bound PD-1 antibody overcomes PD-L1 mediated CAR-T suppression, as observed in both *in vitro* and *in vivo*. This innovative strategy underscores its therapeutic potential and value in treating solid tumors.

Methods

In vitro, CAR T cells were collected for surface marker expression analysis after second round of stimulation, enriched via bead-based method, then co-cultured with Luciferase-transduced tumor cells for re-challenge cytotoxicity assay.

In vivo, an AsPC-1 cell line with overexpression of human MSLN was inoculated subcutaneously into NCG mice. When the tumor volume reached about 100 mm³, grouping and T cell dosing were carried out. Tumor volume and animal body weight were continuously monitored until the end of pharmacodynamics study. The bio-distribution of CAR was detected by QPCR on day 0 (2 hours), day 4, day 7, day 11, day 14, day 21, day 28, and day 35 after T cell treatment in pharmacokinetics study. The distribution of hCD3+, hPD-1+ or hPD-L1+ cells in tumor on day 14 was detected by immunofluorescence (IF).

Results



Conclusion

The inclusion of PD-1 immune checkpoint blockade protein enhances and prolongs CAR-T cells tumor suppression effect both *in vitro* and *in vivo*. This opens up the possibility of adding an immune checkpoint inhibitor transgene to improve the tumor microenvironment and extend the survival of CAR T cells.

References

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- Wu P, Wu D, Li L, Chai Y, Huang K. PD-L1 and Survival in Solid Tumors: A Meta-Analysis. *PLoS ONE.* 2015; 10:e0131403

