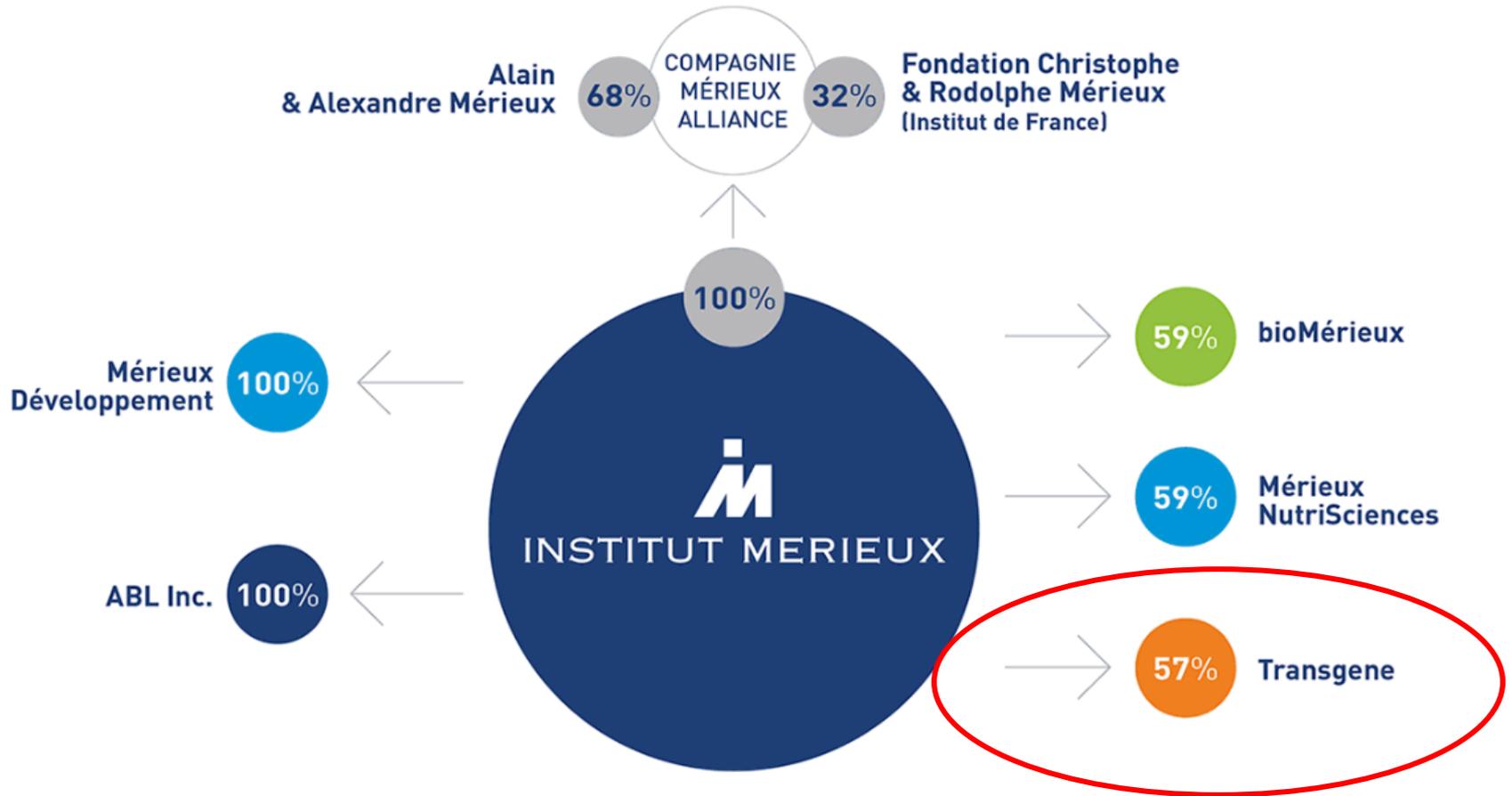




# In vitro Systems Towards a Personalized medicine approach

Workshop: « Systèmes modèles précliniques en cancérologie »  
15 Novembre 2019

# Institut Mérieux



# Transgene | Company overview

- **150** employees
- Operations in **Strasbourg, Lyon** and in the **US**
- Listed on **the Paris stock exchange**
- Part of the **Mérieux Group**



## Player of the global healthcare ecosystem



- Clinical trials active in **Europe** and in **the US**
- **>60** peer-reviewed publications and **>100** presentations in international/national conferences in 5 years

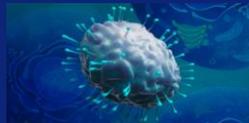
# Current pipeline

Product	Indication	Partner	Preclinical	Clinical Phase		Next-steps
				Phase 1	Phase 2	
<b>THERAPEUTIC VACCINES</b>						
TG4010	Non-small cell lung cancer – 1 <sup>st</sup> line	 Bristol-Myers Squibb *	+ nivolumab (ICI) + CT			6-month efficacy readout in Dec. 2019
TG4001	Recurrent HPV positive cancers	 Merck Pfizer *	+ avelumab (ICI)			1st efficacy readout @ESMO 2019
TG4050	Ovarian cancer HPV- Head & Neck cancers	 myvac Orchestrating a brighter world NEC *				FPI in 4Q 2019 FPI in 4Q 2019
<b>ONCOLYTIC VIRUSES</b>						
TG6002	Colorectal cancer – IV Route Colorectal cancer – IHA Route	 AZTASLY *				Safety data in 4Q 2019 FPI in 4Q 2019
VV- $\alpha$ -CTLA-4	Solid tumors	 invirio BioInvent *				IND filing in 1Q 2020
5 OV <sub>s</sub>	Confidential targets	 AstraZeneca *				

\* Research or clinical collaboration / \*\* Chinese rights sold to Tasly Biopharmaceuticals

# Experience driven innovation to develop virus-based immunotherapeutics

## Therapeutic Vaccines



- Individualized immunotherapy based on patient's own tumor mutations called neoantigens
- Expected to induce broader and stronger T cell response for better treatment outcomes
- Ability to prime/boost patient's immune system to overcome the immunosuppressive environment of the tumor sites
- The advantages of personalized treatment without the drawbacks of autologous approaches
- Integrates Artificial Intelligence with NEC's prediction systems

**Lead candidate TG4050 to enter the clinic in 2019**

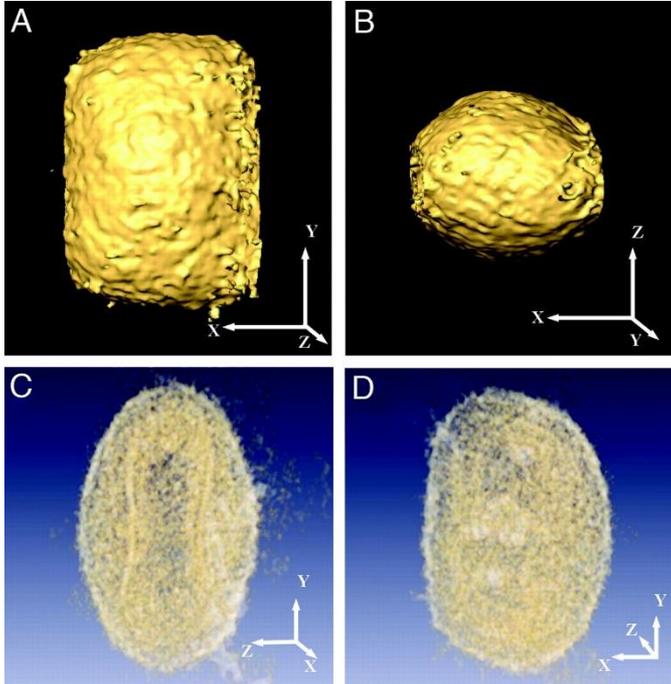
## Oncolytic Viruses



- Novel platform for multifunctional oncolytic viruses based on a proprietary virus (VV<sub>Cop</sub> TK-RR-)
- Express a range of anti-cancer weapons to better modulate the Tumor Micro Environment (TME)
- Sustained anti-tumor response via immunogenic cell death boosting innate and adaptive immune responses
- Large genome capacity to accommodate multiple transgenes
- TG6002 is paving the way for Invir.IO®
- Research collaboration with AstraZeneca

**First Invir.IO® candidate (VV- $\alpha$ -CTLA-4) in the clinic in 2020**

# VACV Transgene Platform: Copenhagen Strain based



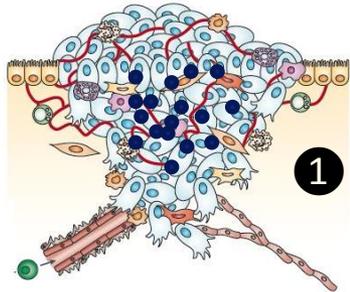
- Vaccinia Particles are Live Nanometric Autoreplicative objects (~400x200 nm).
- Large genome ~200Kb, allowing introduction of large genetic inserts ~20Kb.
- Metabolic restriction with improve therapeutic index:
  - J2R kinase deletion
  - I4L Ribonucleoside-diphosphate reductase deletion

Cyrklaff M et al. PNAS 2005;102:2772-2777

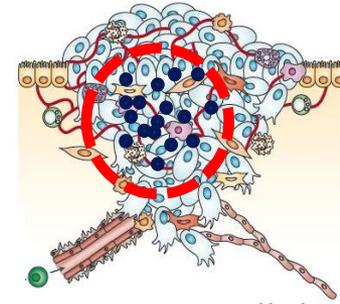
©2005 by National Academy of Sciences



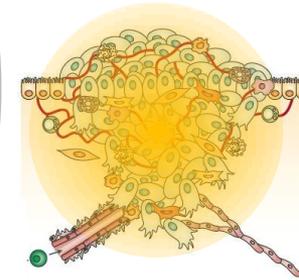
# COP<sub>TK-RR-</sub>: Concepts and mechanisms of action



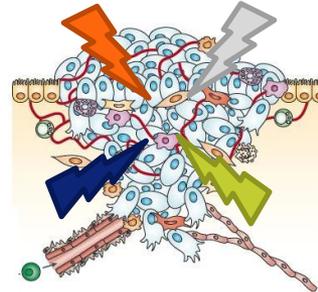
1 Tumor cell lysis induced after specific viral replication in tumor cells



2 Immunogenic cell death, proinflammatory response and induction of both immune innate & adaptive responses



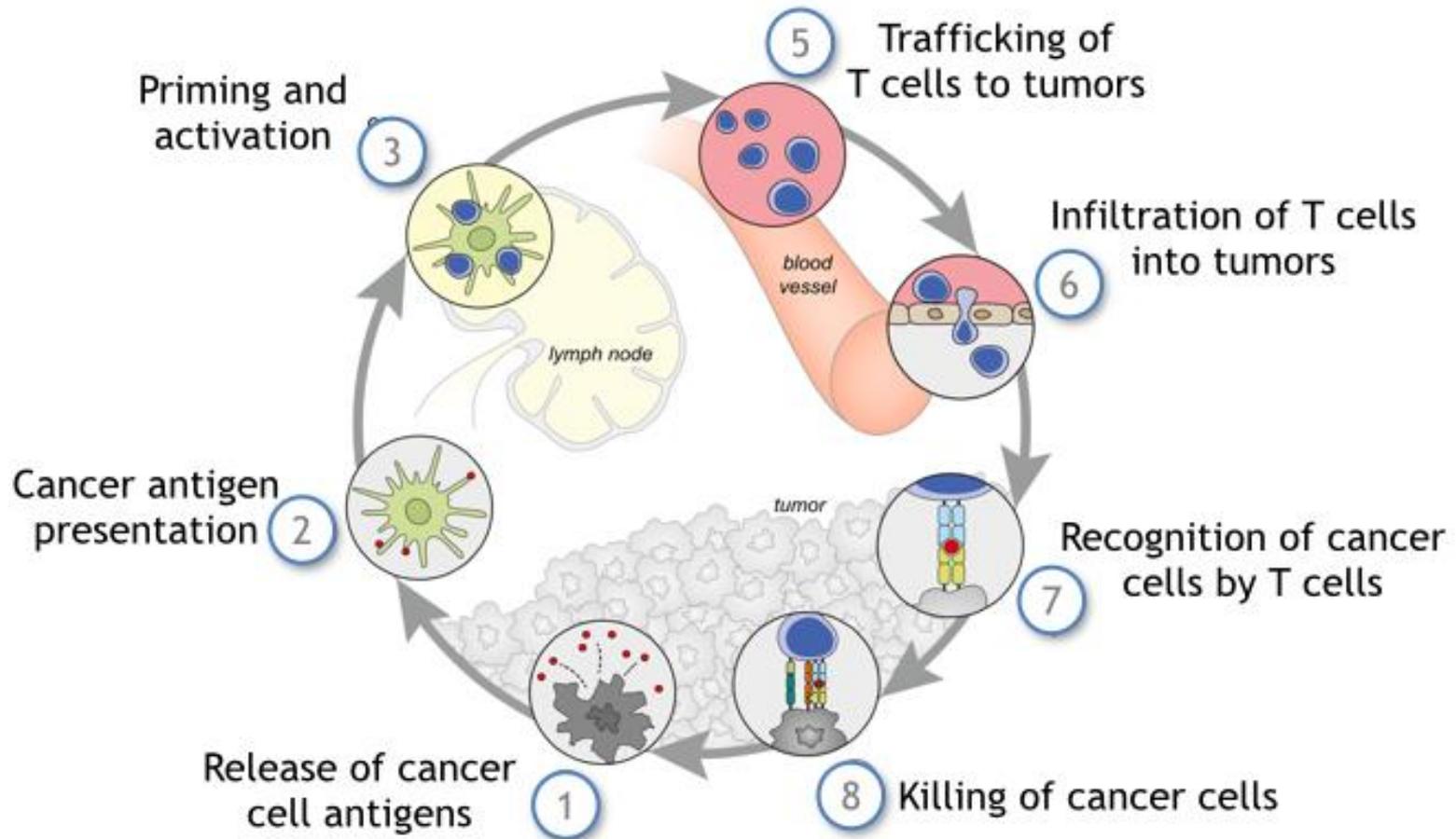
3 Local release of active payload in the TME



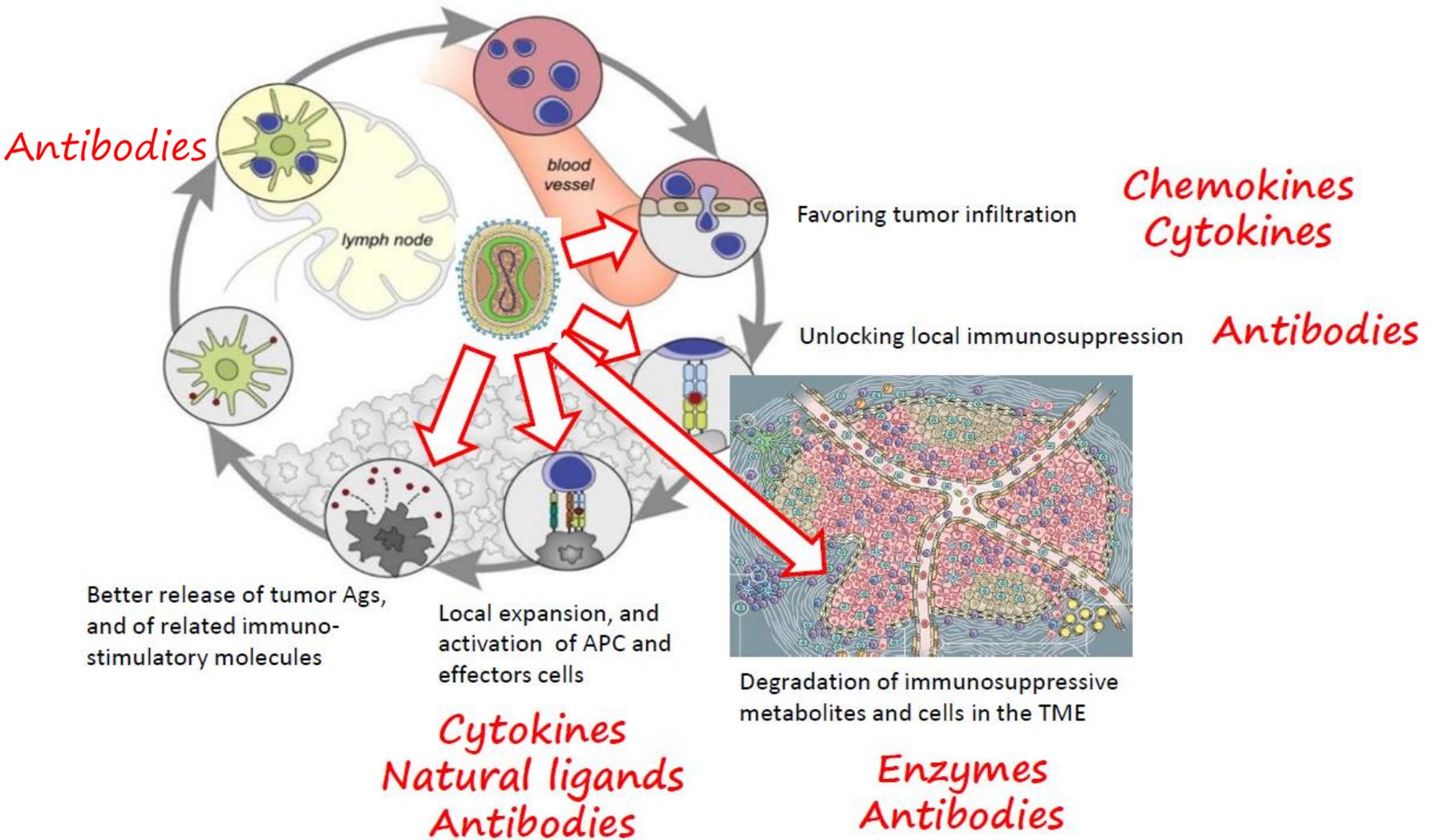
Suitable for either IT or IV routes

3 complementary ways to tackle solid Tumors

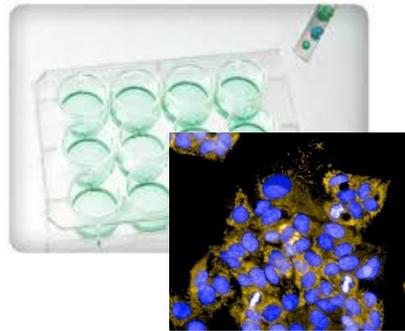
# The cancer immunity cycle



# A versatile platform for engineering innovative immuno-armed OV<sub>s</sub>



# Today *In Vitro-In vivo* Pre-clinical Models



2D culture cells, static



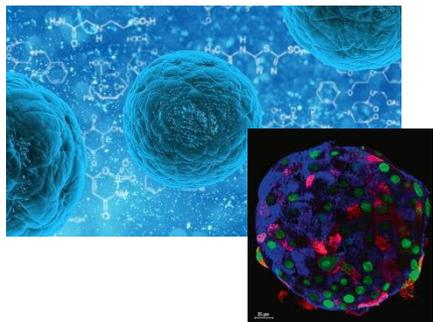
Nude Mice,



Spontaneous cancer (glioblastoma, osteosarcoma, ...)



Regulatory Toxicology



3D Spheroids, static



Immuno-competente mice

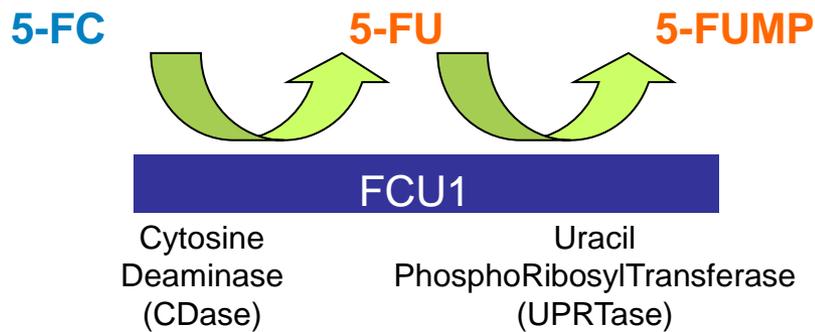
NOD.CgPrkdcscid Il2rgtm1Wjl/SzJ NOD.Cg-Prkdcscid Il2rgtm1Wjl/SzJ (to be humanized by engraftment of human CD34+ hematopoietic stem cells (HSC), peripheral blood mononuclear cells (PBMC), patient derived xenografts (PDX), or adult stem cells and tissues)



# COP<sub>TK-RR-</sub> is “ARMED” with FCU1: Molecular Chemotherapy

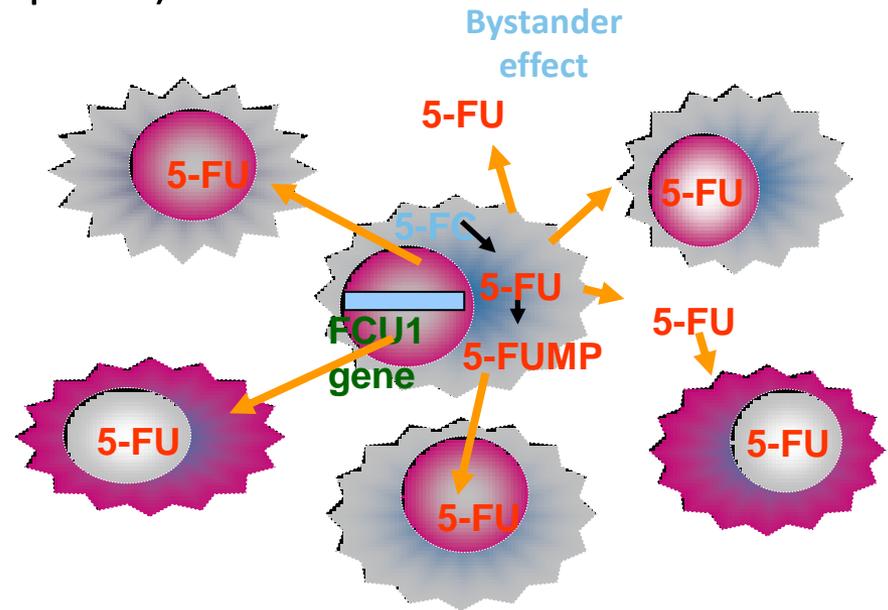
FCU1 = Bifunctional chimeric protein

Conversion of **non-cytotoxic** flucytosine (5-FC) into **cytotoxic** 5-FU (5-fluorouracil) and 5-FUMP (5-fluorouridine 5'-monophosphate)



5-FC: 5-Fluorocytosine    5-FU: 5-Fluorouracil

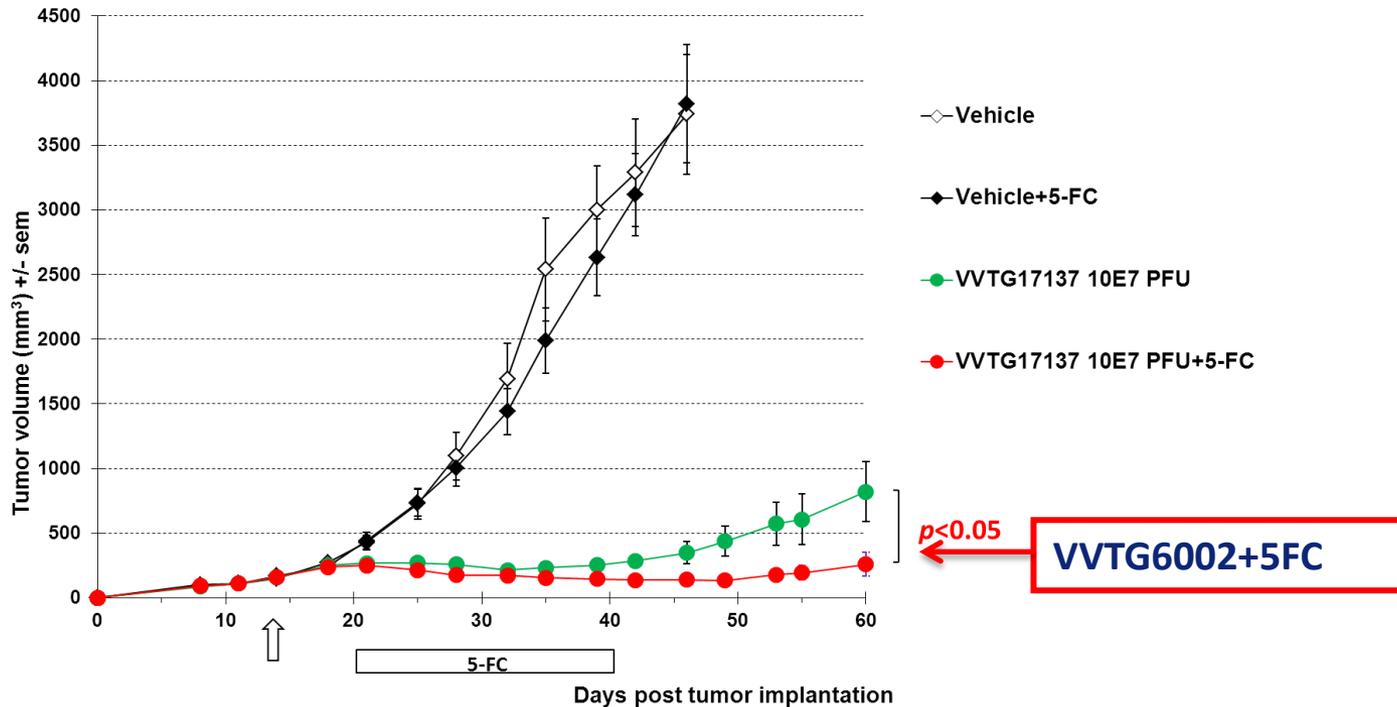
*Erbs P et al. 2000, 2008; Foloppe J et al. 2008*



TG6002 therapy combines the destruction of cancer cells by viral oncolysis and molecular chemotherapy

# Example: In vivo anti-tumor activity of COP<sub>TK-RR</sub>-FCU1 (VVTG6002)

Human esophageal cancer model

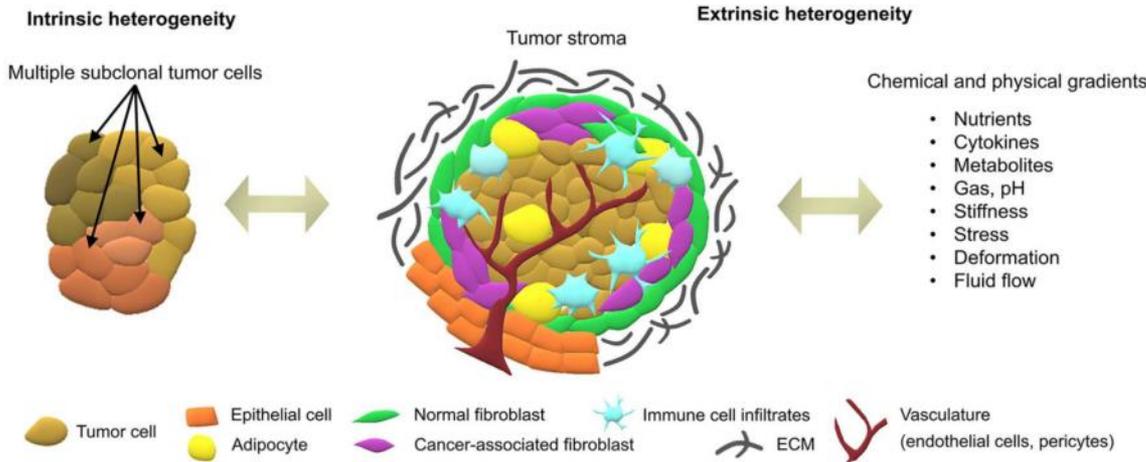


• Mice: n=12



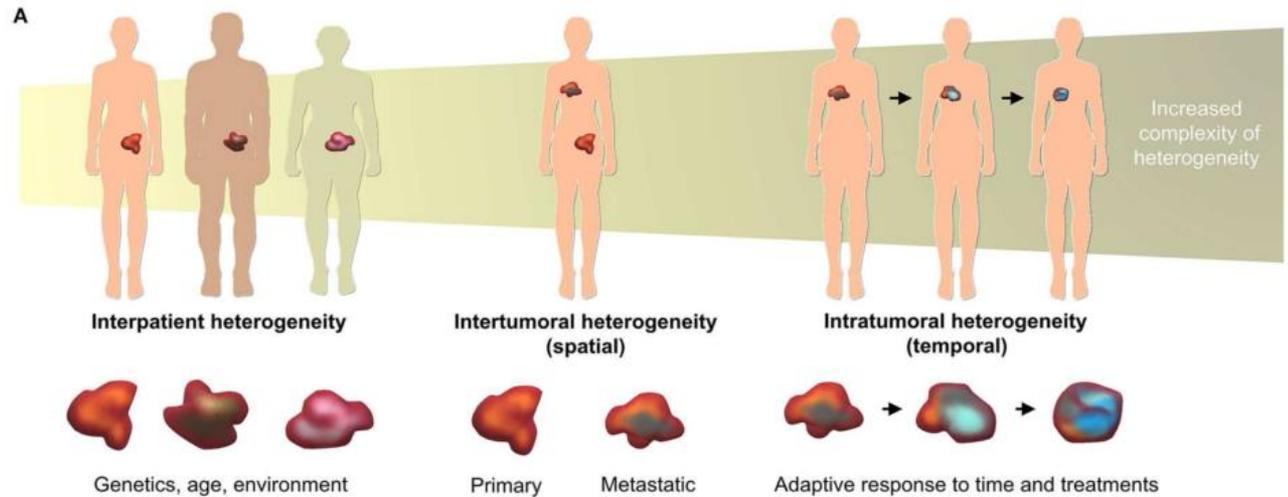
Significant anti-tumor activity by viral oncolysis, increased by the combination of FCU1 gene expression and 5-FC pro-drug administration

# Cancer heterogeneity:



Tumors are composed of various cell types.

Tumors vary according to patients, location in the body, along with time and treatments.



Necessity to include patient-derived samples : tumoral cells + stroma cells + extra cellular matrix

# Tomorrow needs

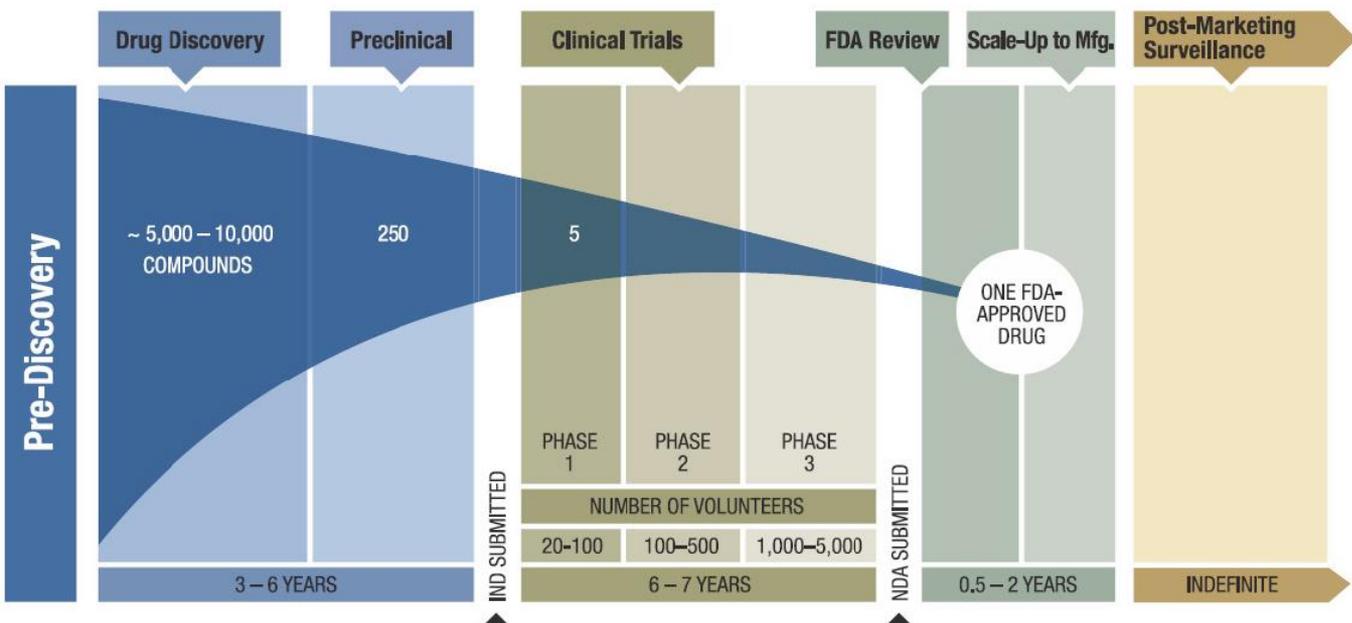
- Urgent need to better understand inherent risks of innovative therapeutics for Immuno-Oncology and Immuno-Inflammatory disease indications
  - e.g. cytokine release syndrome, infection, malignancy, autoimmunity
- Toxicities induced by immunomodulatory therapeutics in patients are often not detected in traditional animal models
  - e.g. lack of expression of appropriate targets/pathways in young healthy animals
  - differential target genetics/expression/functions in animals versus intended patient populations

# Non-Animal approach: why ? (1)

- Animals are still necessary to understand basic physiology and pathophysiology, and to reproduce cause and biology of disease
- But there are significant concerns over how animal research is designed and how data is Analysed
- Some analysis shows that experimental animals have no or very low predictive power of drug effects in humans

[https://ec.europa.eu/environment/chemicals/lab\\_animals/3r/pdf/scientific\\_conference/concluding\\_remarks.pdf](https://ec.europa.eu/environment/chemicals/lab_animals/3r/pdf/scientific_conference/concluding_remarks.pdf)

# Non-Animal approach: why ? (2)



- 80 to 90% failure of clinical trials
- Relevance of preclinical models ??

FDA = Food and Drug Administration; IND = investigational new drug; Mfg. = manufacturing; NDA = New Drug Application.

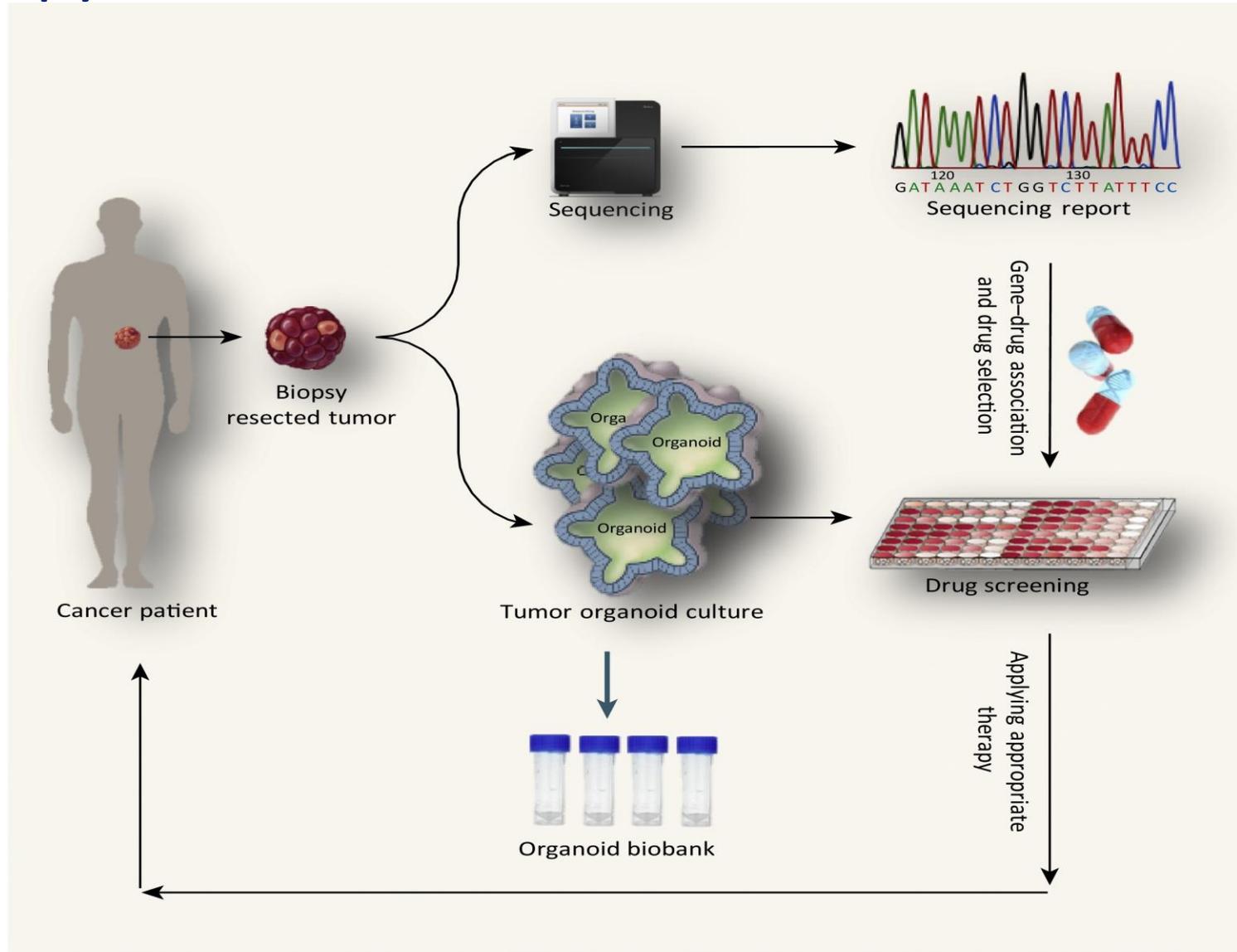
SOURCES: Sigal presentation, December 12, 2016; [AACR, 2011](#).

## Non-Animal approach: why ? (3)

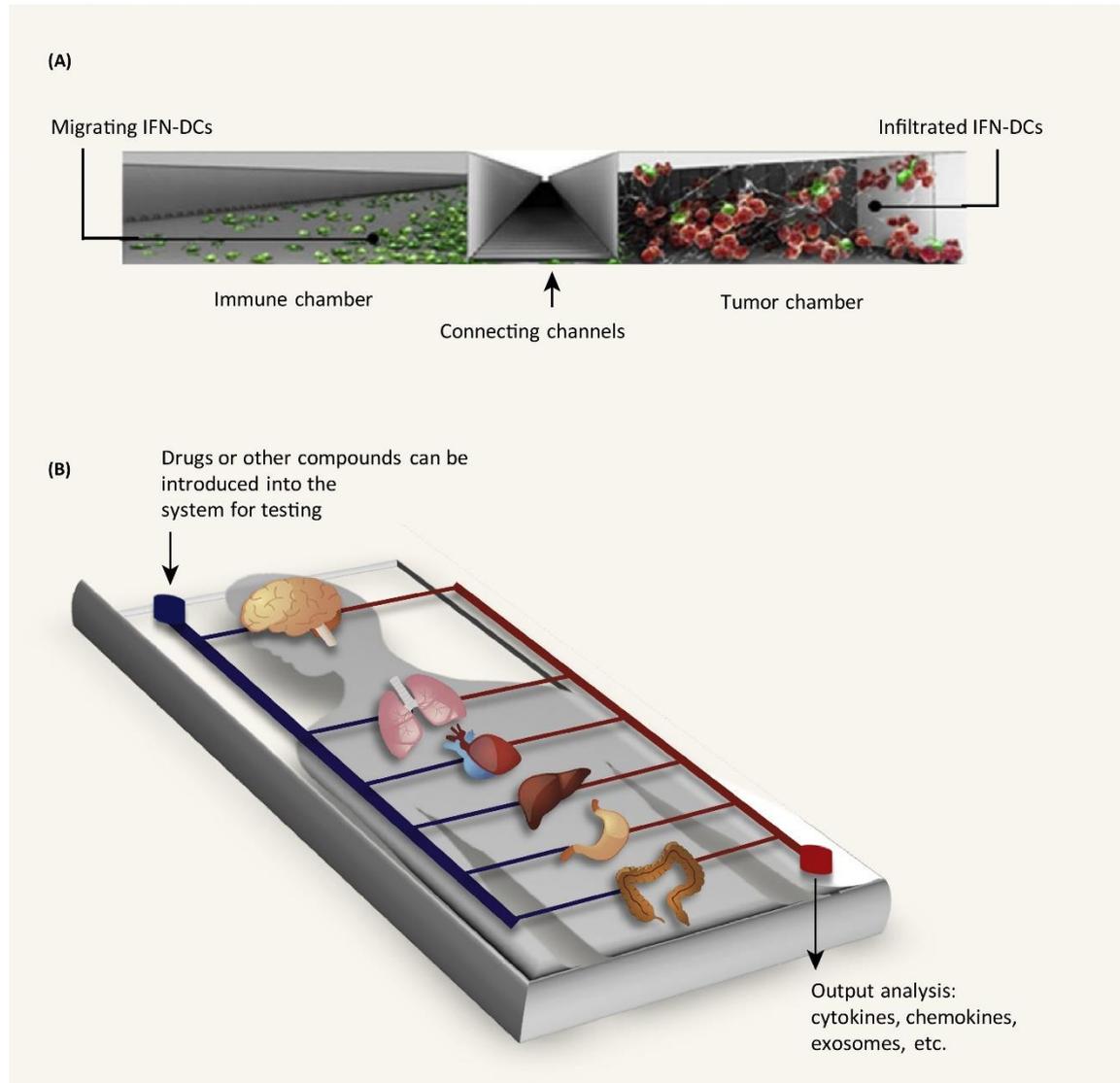
- Human cell-based models and organs on a chip have great potential, but still need an in vivo test to confirm if 3D – cell simulation reflects in vivo
- Repeated dose toxicity and repro – or developmental toxicity still a challenge
- Human genomics helps to use animal models wisely, and reduce use of larger species. Targeted gene editing of animal helps to exactly model a human disease
- Safety studies to investigate severe adverse effects could be replaced by in vitro methods
- Metabolism info and computer modelling can help bridge differences between species

[https://ec.europa.eu/environment/chemicals/lab\\_animals/3r/pdf/scientific\\_conference/concluding\\_remarks.pdf](https://ec.europa.eu/environment/chemicals/lab_animals/3r/pdf/scientific_conference/concluding_remarks.pdf)

# Schema of Organoid-Based Personalized Cancer Therapy



# Application of Microfluidic Technology in Cancer–Immune Interaction and Organ-On-Chip Concepts

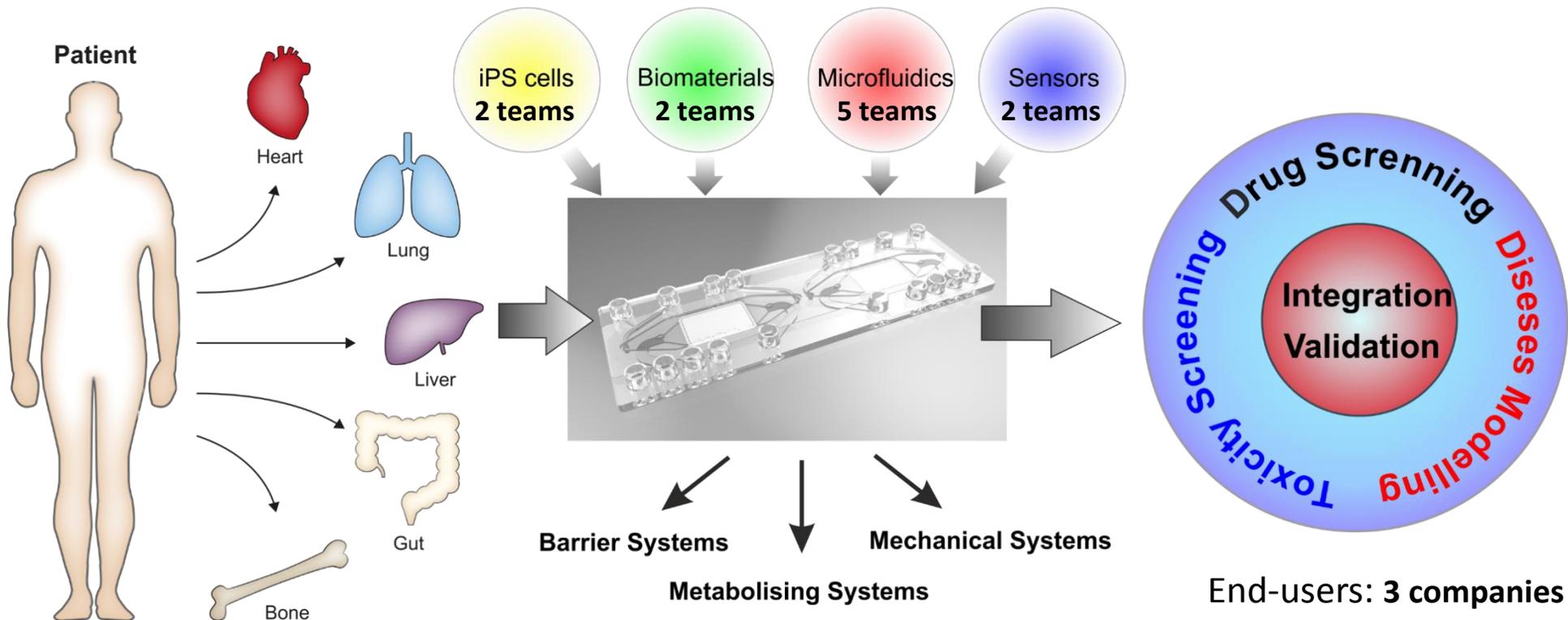


# H2020-MSCA-ITN-2018:

Marie Skłodowska-Curie Actions , Innovative Training Network



To support innovative research projects, which together target the development of advanced Organ-on-a-chip systems with higher physiological significance and that directly integrate endpoint analysis



End-users: 3 companies

Regulatory Agencies: 4 agencies

# Transgene' Project Objectives

- Making personalized organs-on-chips from tissues of specific patients in order to select best therapeutic (High Content Low Throughput):
  - MOA
  - Tox
- Bio design principles
- Tissue-Tissue Interface
  - Human tissue human cancer cell and Healthy tissues
  - Endothelial cell (Vasculature Model, Lymph circuit, ...)
  - Immune compartment (Synthetic LN, PBMC, ...)
- Dynamic Flow
- Nanomaterial selection
- Biosensors/analytics (MS, microscopy, PCR, sample recovery for titration, immunoprofiling)

Thank you for your attention

# Immunotherapeutics against cancers & infectious diseases

*We must think differently, if we think as we usually  
do, we do not get anything*