

# Highlights from IMS 20th meeting 2023

Carolina Terragna

**Meccanismi di perdita  
dell'antigene**

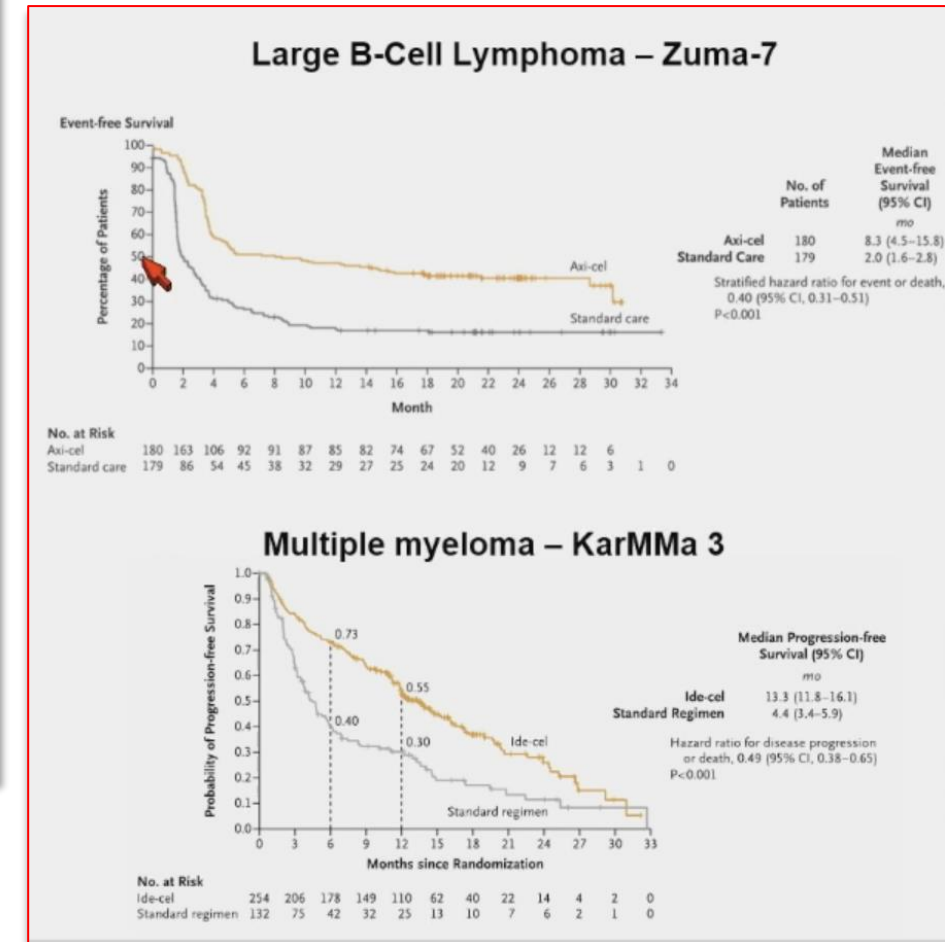
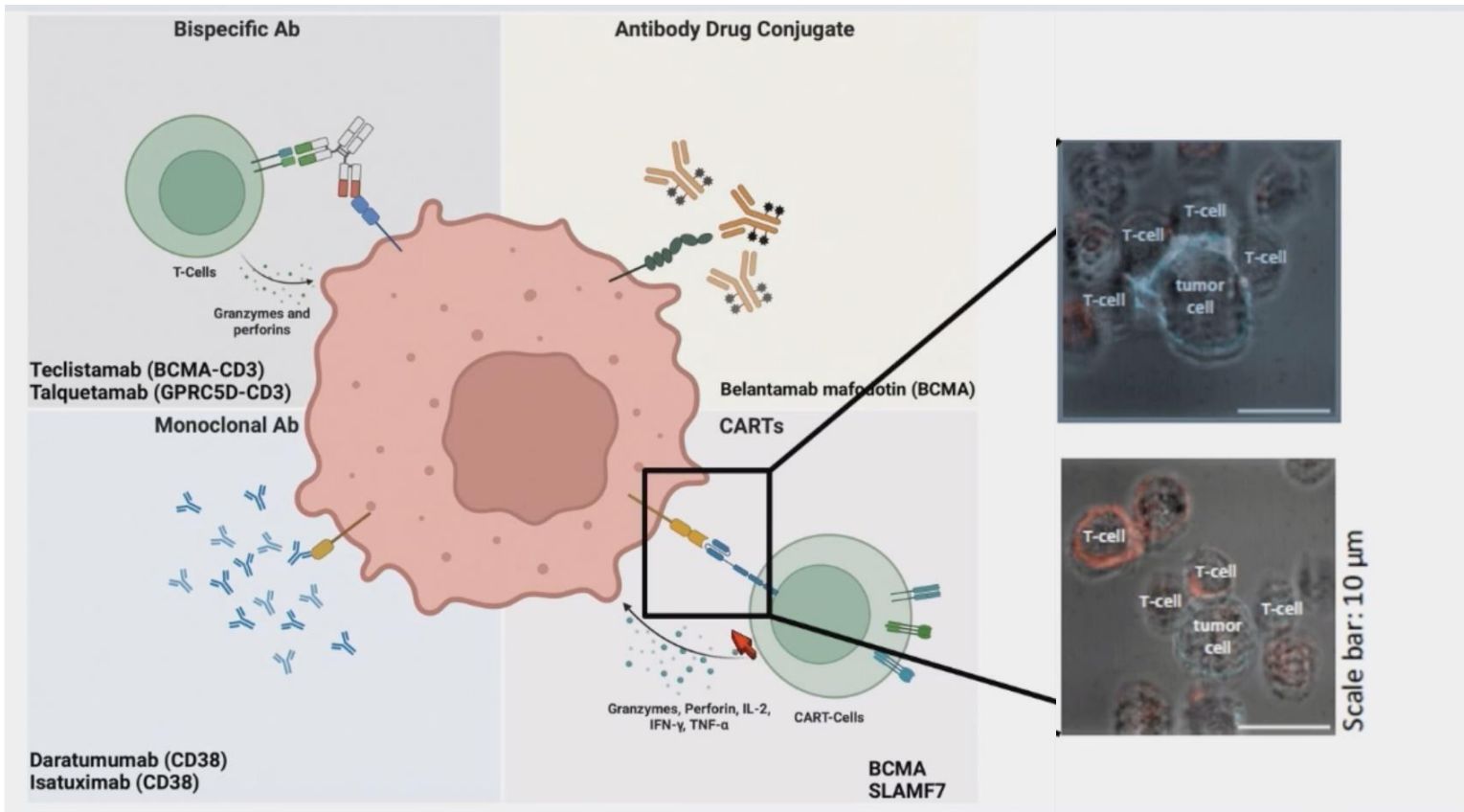
30-31 gennaio 2024

BOLOGNA, Royal Hotel Carlton

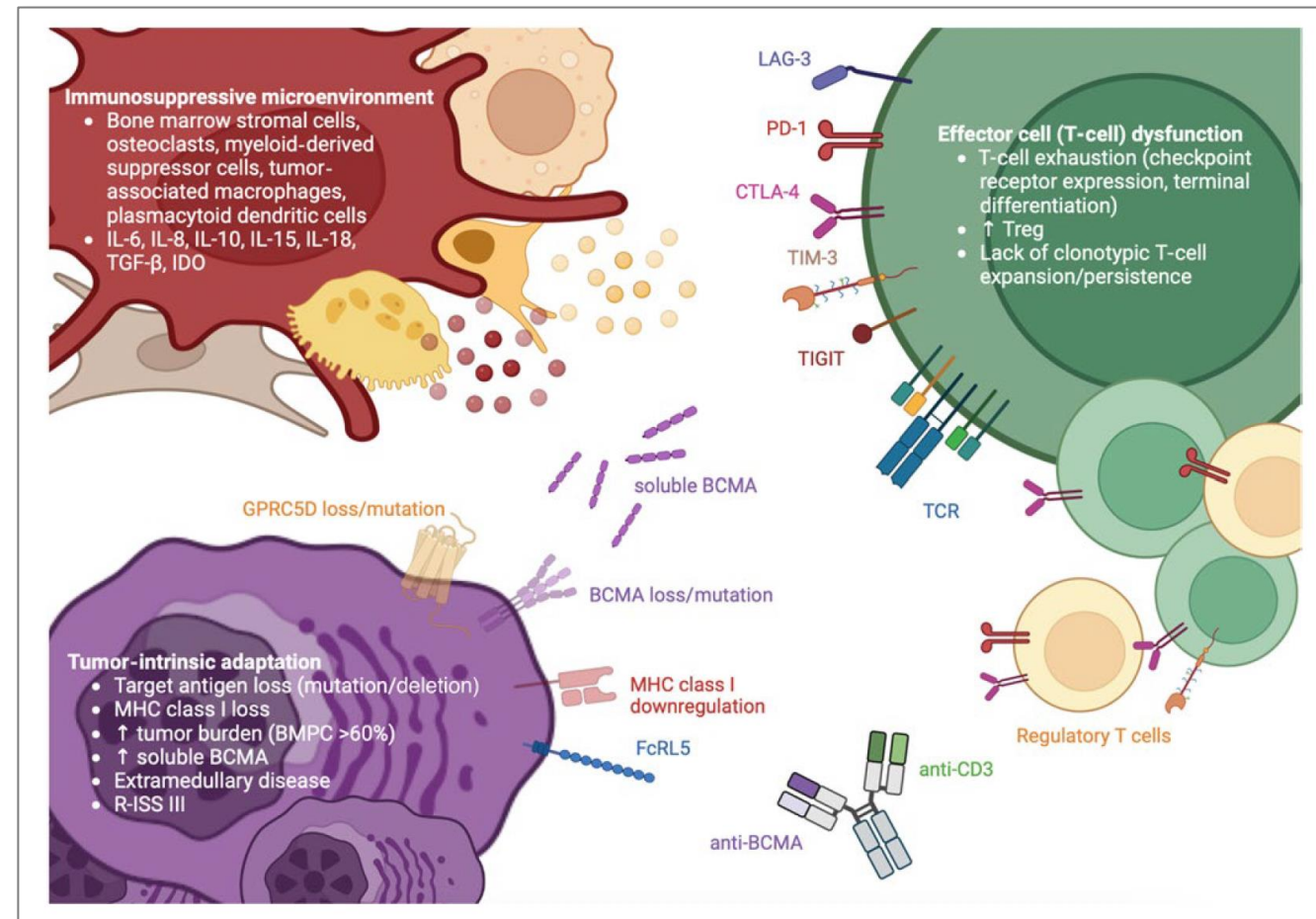
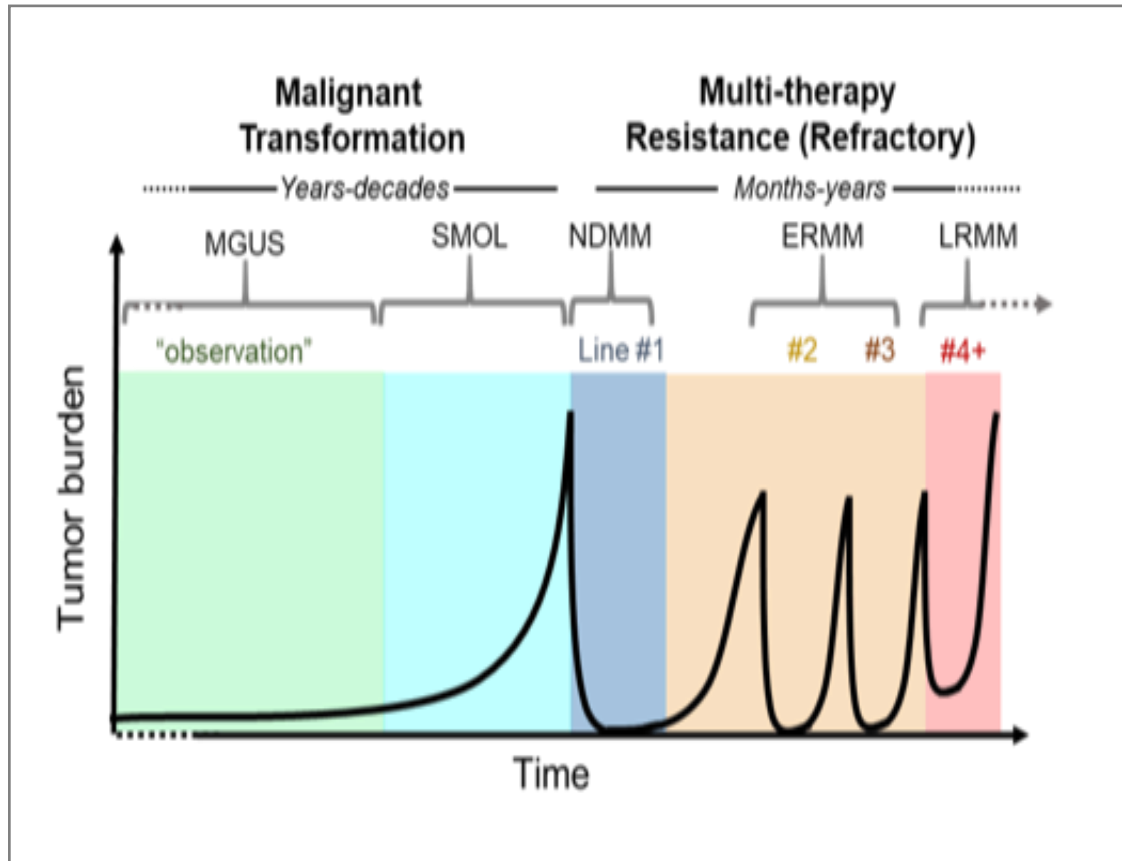
# Carolina Terragna

*nothing to disclose*

# mechanism of resistance to immunotherapy

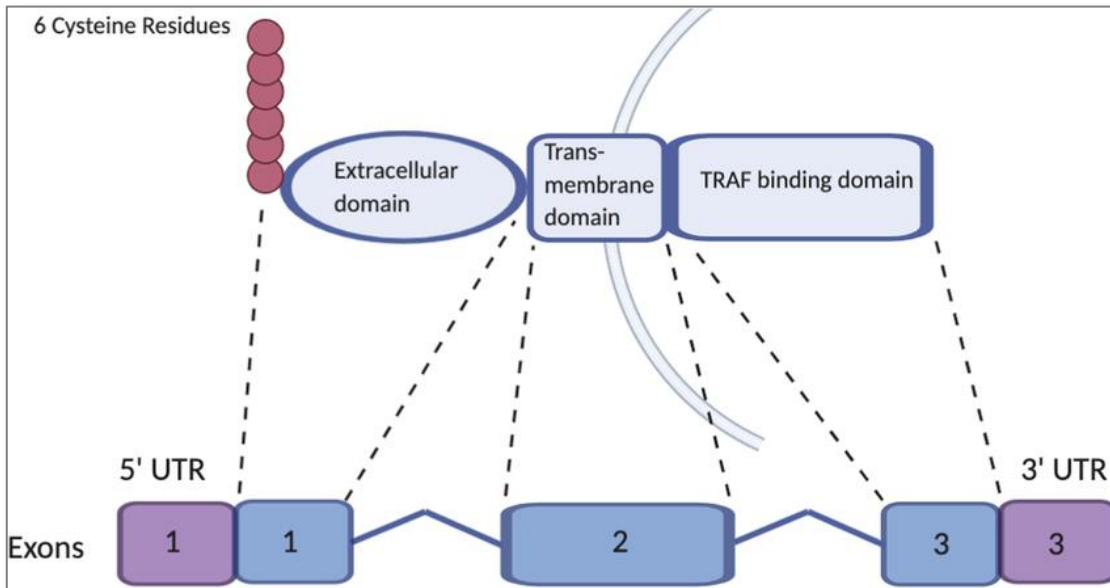
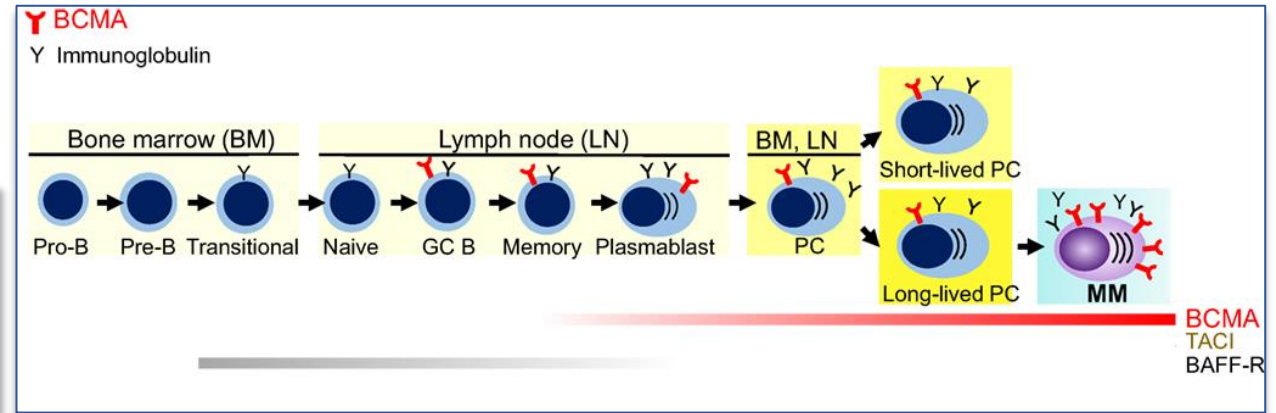


# mechanism of resistance to immunotherapy

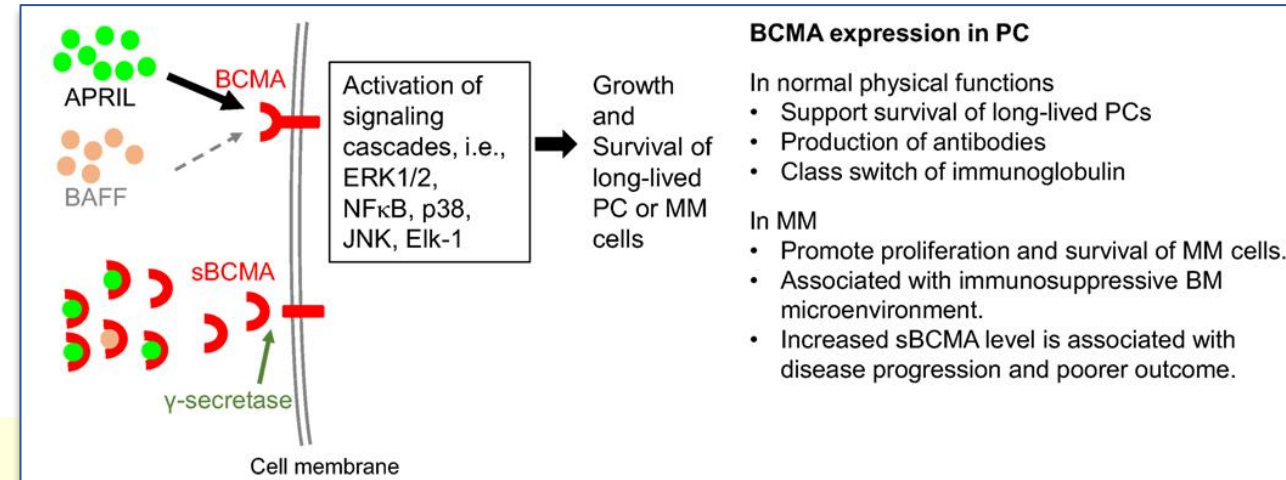
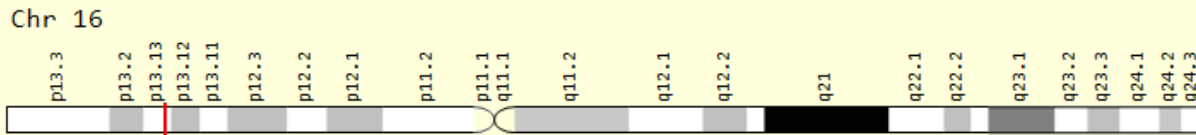


*know your enemy*

# B-cell Maturation Antigen, **BCMA**

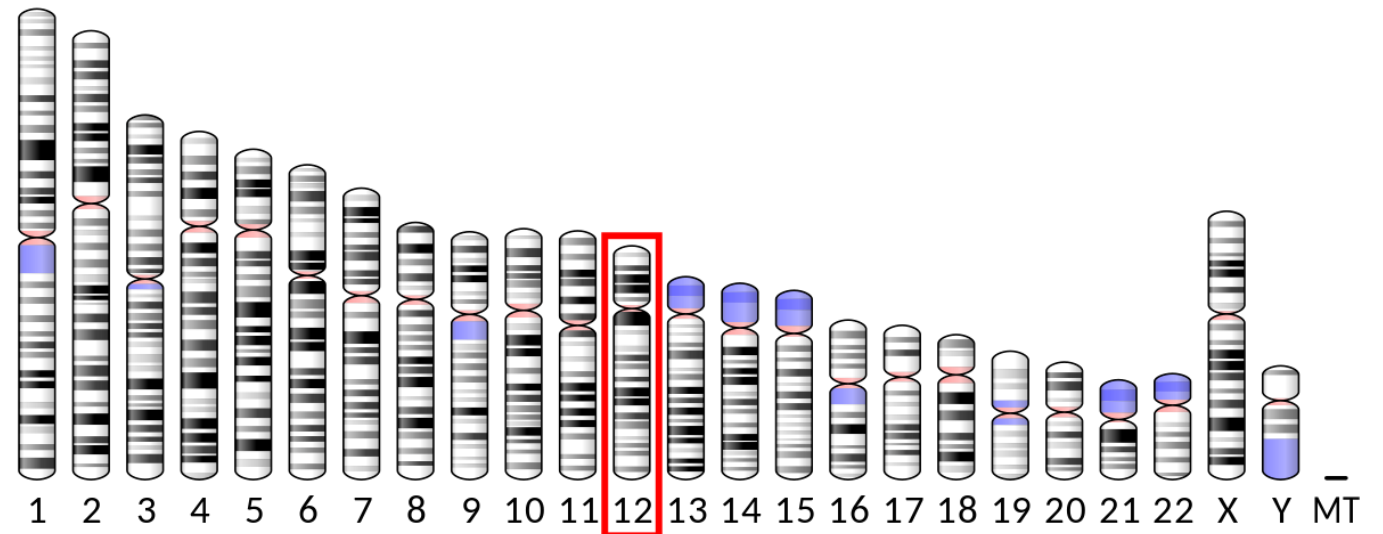
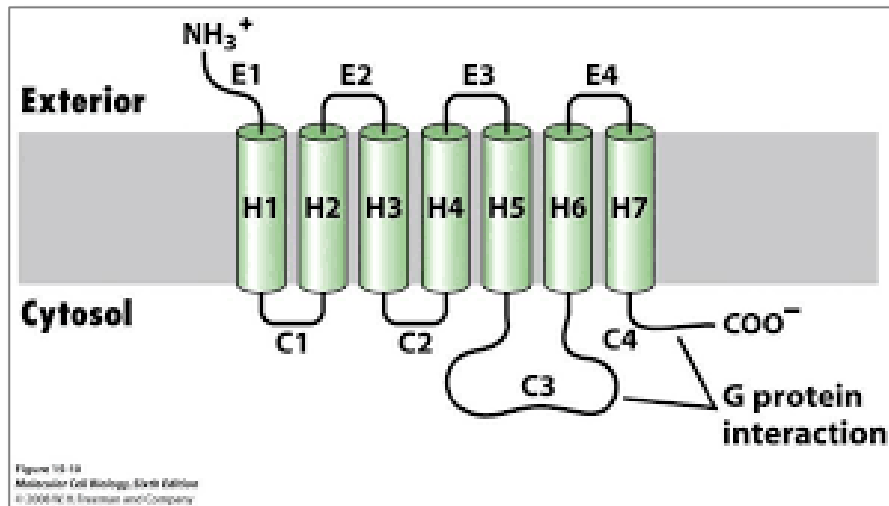


**TNFRSF17 – chromosome 16p**



*know your enemy*

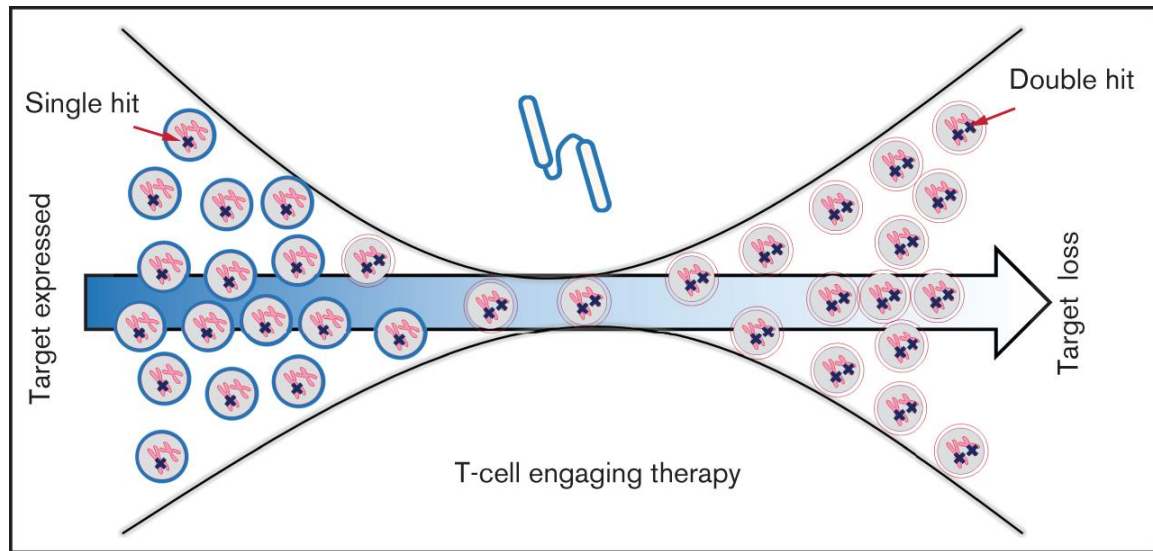
# G protein-coupled Receptor class C group 5 member D, **GPRC5D**



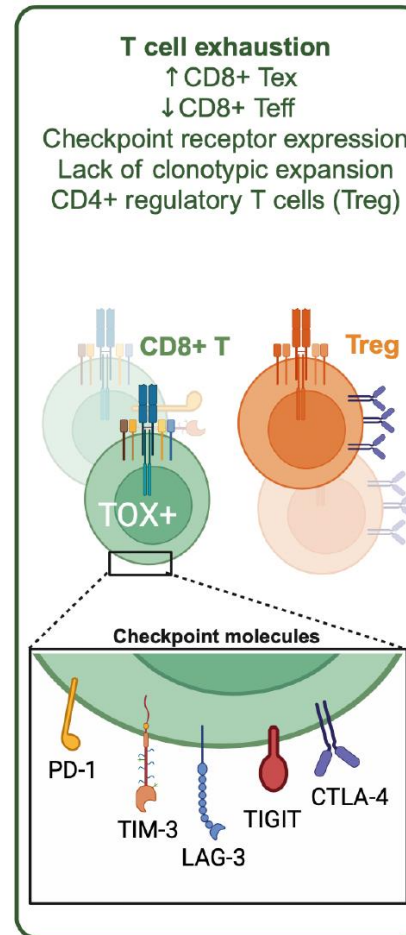
12p32

*a stressful situation*

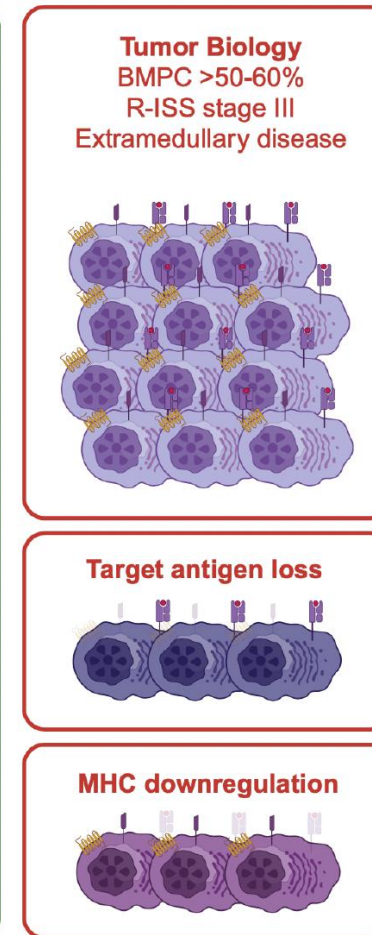
# what affects the response to immunotherapy



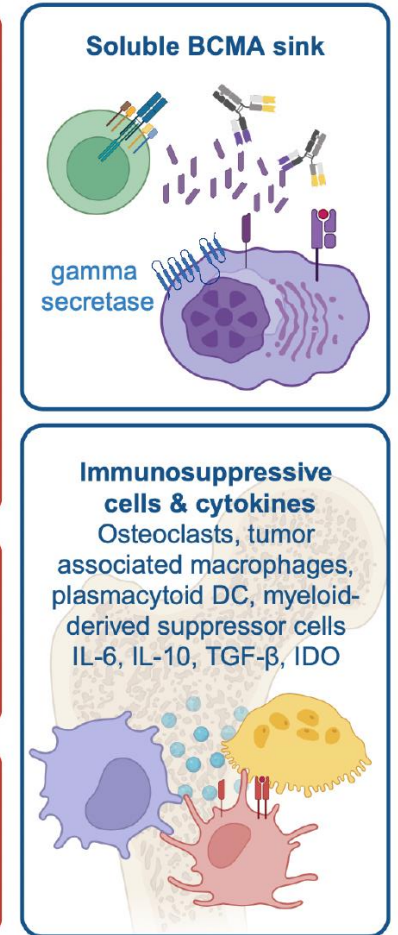
## T cell dysfunction



## Tumor intrinsic



## Tumor microenvironment



*pre-therapy mutations*

**pre-existing focal *TNFRSF17* and *GPRC5D* (and other possible target) mutations**

➔ 100 patients *T cell immunotherapy-naive*  
=> WGS screening for genomic alteration

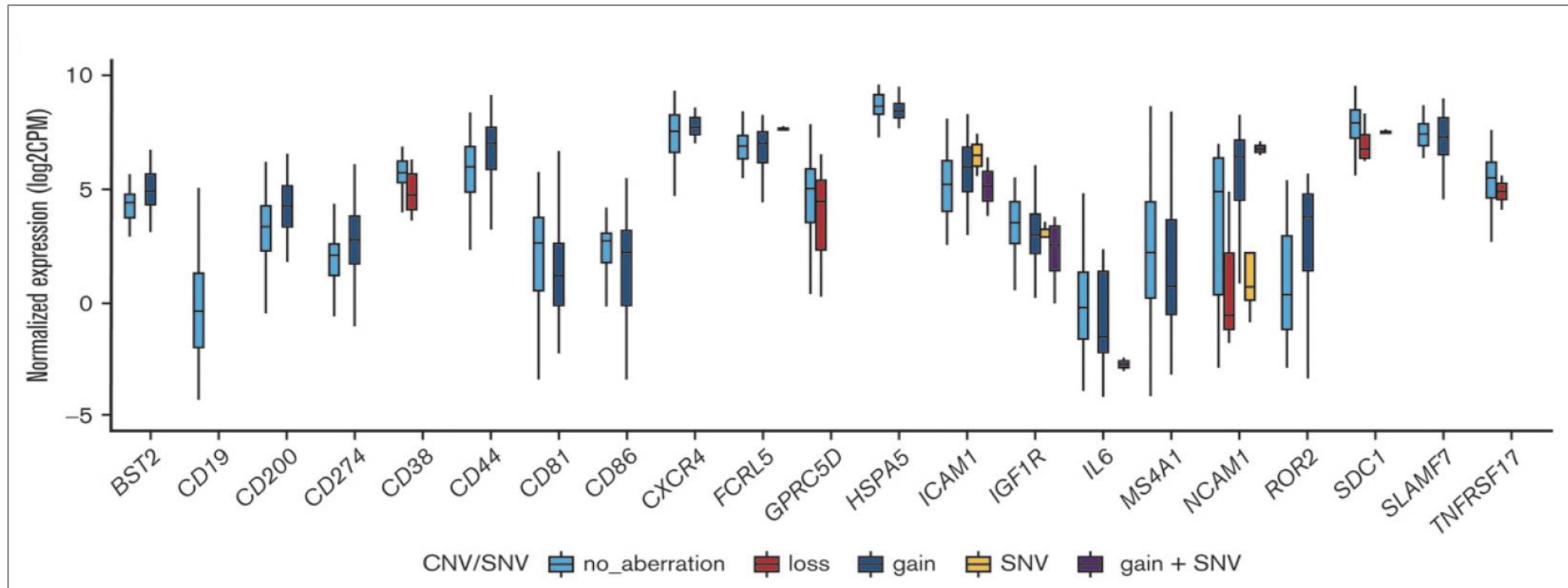
Gene	Chromosome	Genomic position (hg19)		Examples of currently available preclinical and clinical immunotherapies
		start	end	
<i>TNFRSF17</i> (BCMA)	16p13.13	12058964	12061925	multiple uni- and multispecific CAR T-cells, bispecific antibodies and antibody drug conjugates under clinical investigation
<i>CD19</i>	16p11.2	28943260	28950667	CAR T-cell under clinical investigation
<i>GPRC5D</i>	12p13.1	13093709	13105081	bispecific antibody under clinical investigation
<i>CD38</i>	4p15.32	15779898	15854853	uni- and multispecific CAR T-cells under clinical investigation, daratumumab, isatuximab
<i>SLAMF7</i>	1q23.3	160709037	160724611	CAR T-cell, antibody drug conjugate under clinical investigation, elotuzumab
<i>FCRL5</i> (CD307)	1q23.1	157483167	157522310	bispecific antibody under clinical investigation
<i>IL6</i>	7p15.3	22765503	22771621	monoclonal antibody tocilizumab, siltuximab
<i>IGF1R</i>	15q26.3	99192200	99507759	monoclonal antibody AVE1642
				94 CAR T-cell, antibody drug conjugate under clinical investigation
				158 CAR T-cell in preclinical setting
				609 monoclonal antibody PAT-SM6 under clinical investigation
				735 monoclonal antibody ulocuplumab under clinical investigation
				233 monoclonal antibody rituximab
				49 monoclonal antibody in preclinical setting
				66 monoclonal antibody nivolumab under clinical investigation
				57 monoclonal antibody in preclinical setting
				659 monoclonal antibody samalizumab under clinical investigation
				49 CAR T-cell under clinical investigation
				91 antibody drug conjugate in preclinical setting
				983 monoclonal antibody CTLA4lg in preclinical setting
<i>ROR2</i>	9q22.31	94325373	94712444	potential target in preclinical setting

gene	monoallelic CN loss/SNVs			
	NDMM (=50)	RRMM (=50)	CoMMpass dataset (=896 NDMM)	MLL dataset (=400 NDMM)
<i>TNFRSF17</i>	1-5%	8%	3%	2%
<i>GPRC5D</i>	10-20%%	20%	15%	13%
<i>NCAM1</i> (CD56)	2%	4%	/	/
<i>CD38</i>	2%	18%	/	/
<i>SLAMF7</i>	3%	4%	/	/



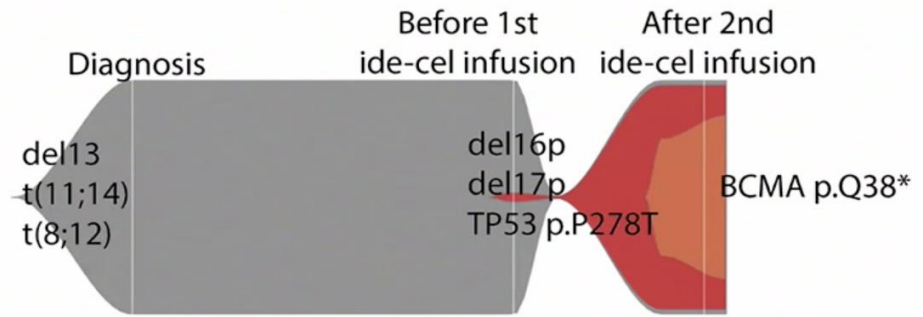
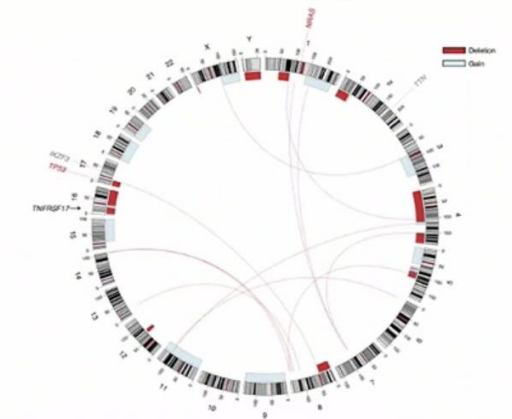
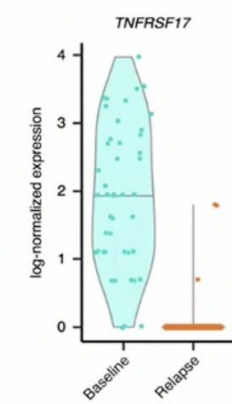
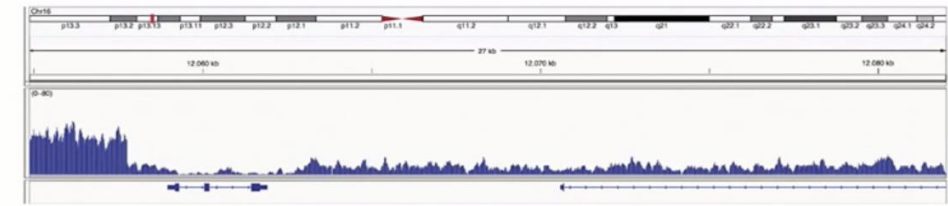
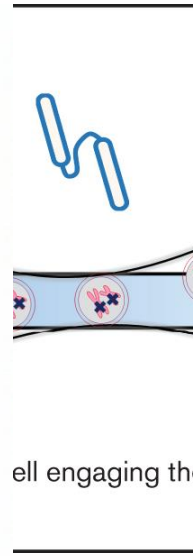
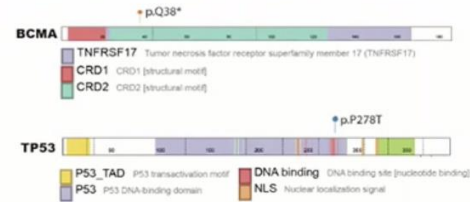
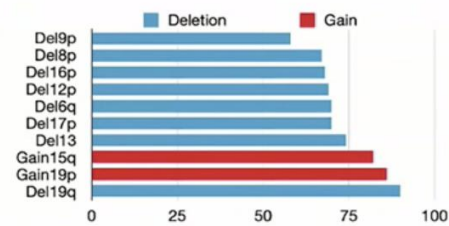
*pre-therapy mutations*

## *TNFRSF17 and GPRC5D (and other possible target) expression profile*



*post T-cell immunotherapy landscape*

**resistance to anti BCMA & anti-GPRC5D  
immunotherapy → the loss of antigen**

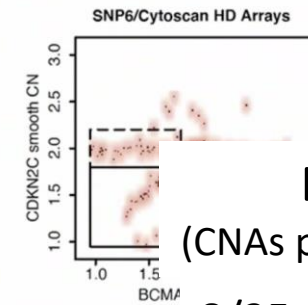
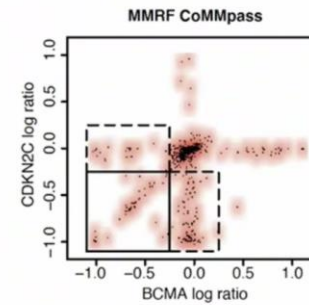
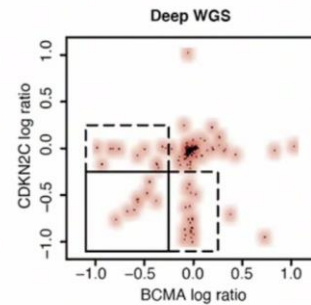
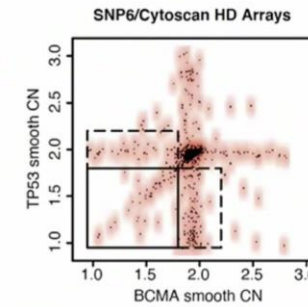
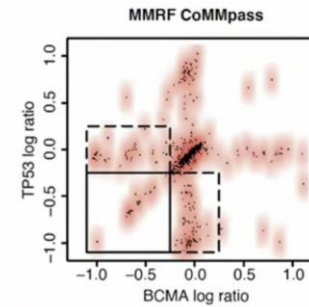
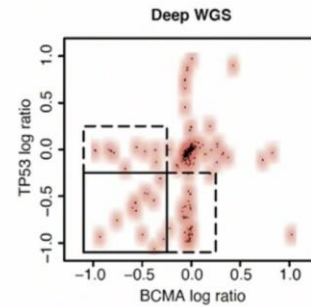
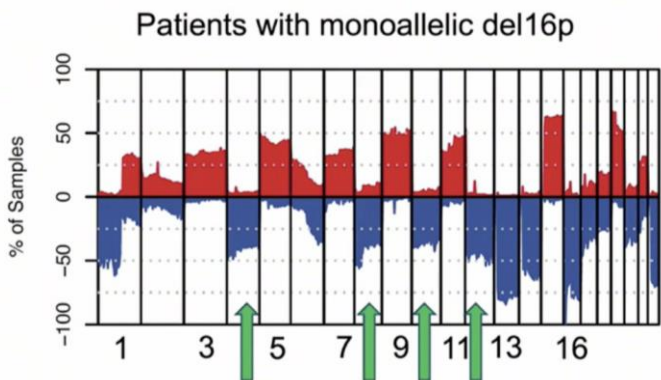
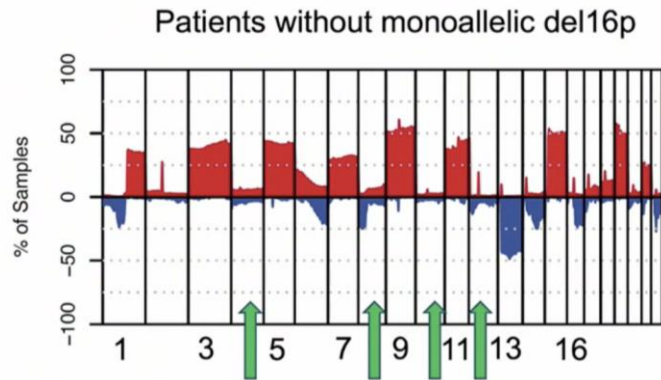


*M.Samur et al., 2021*

*M.Da Vià et al., 2021*

*post T-cell immunotherapy landscape*

**resistance to anti BCMA & anti-GPRC5D  
immunotherapy → the loss of antigen**

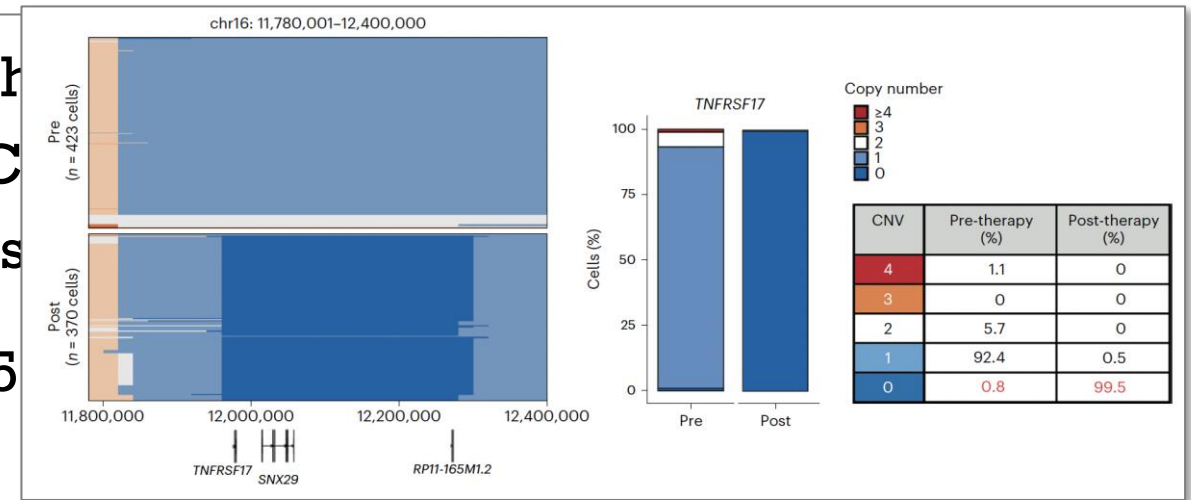
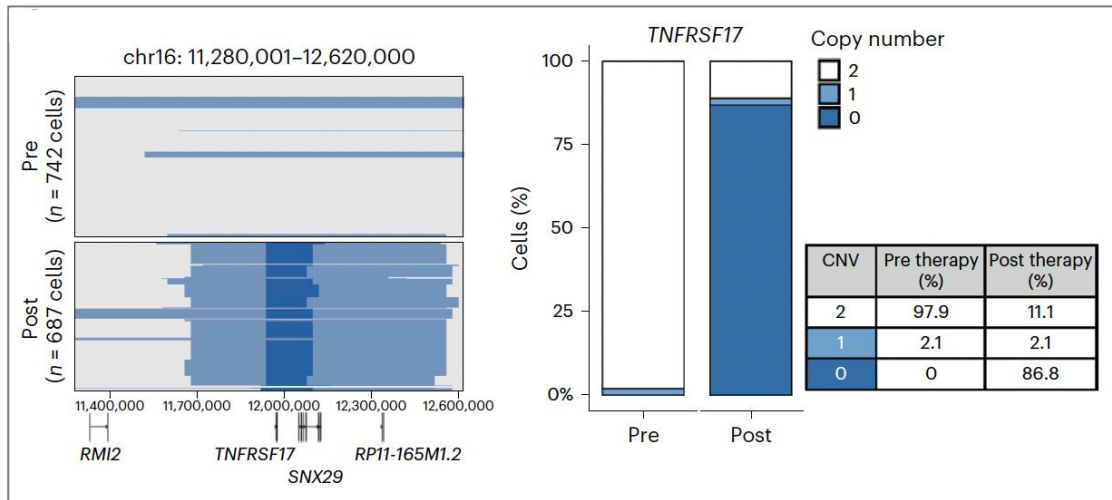


**BO dataset**  
(CNAs profile by SNPs array)

8/25 del *BCMA* & del *TP53* (**44%**)  
4/25 del *BCMA* & amp *MYC* (16%)

*TNFRS17* biallelic loss

**biallelic loss of *TNFRS17* upon anti-BCMA treatment → loss of the target**



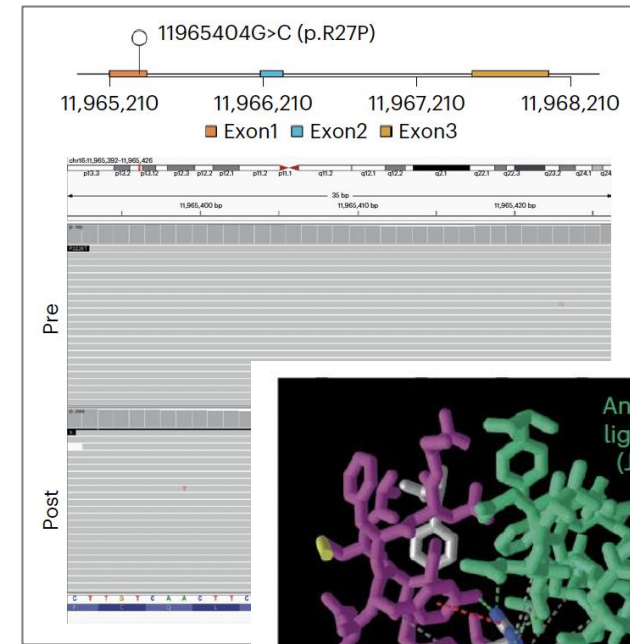
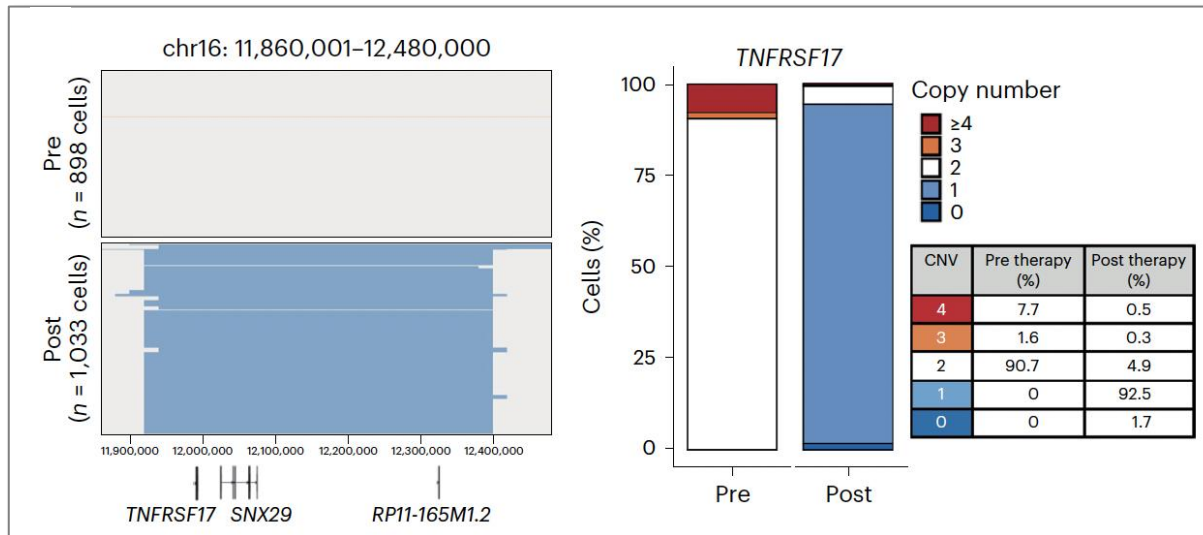
ed with  
5D TC  
therapies  
an of 5

**MM-1:** RRMM receiving Ide-cel as third-line therapy and relapsed with a BCMA-negative clone

**MM-2:** triple refractory MM, who relapsed 6 months after anti-BMA TCE therapy with a BCMA-negative clone

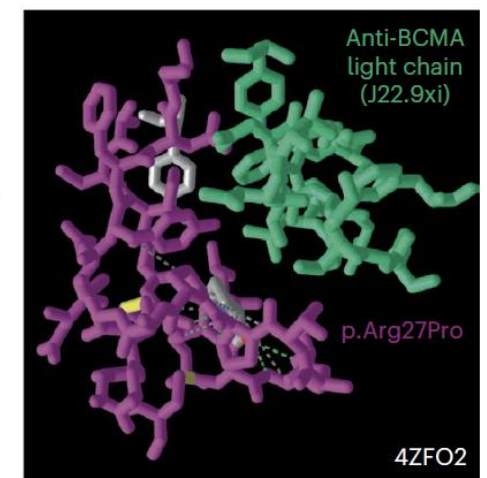
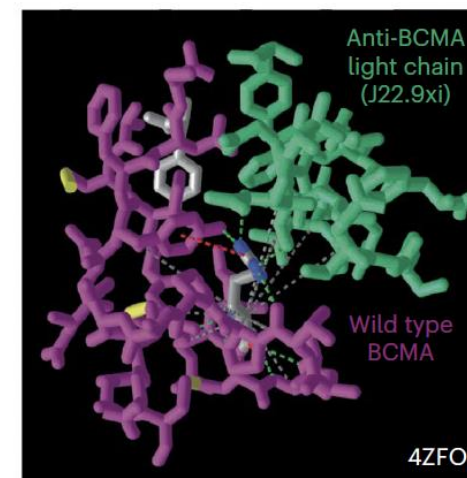
## BCMA extracellular domain mutations

# 1. non-truncating point mutation in the BCMA extracellular domain (2 patients)



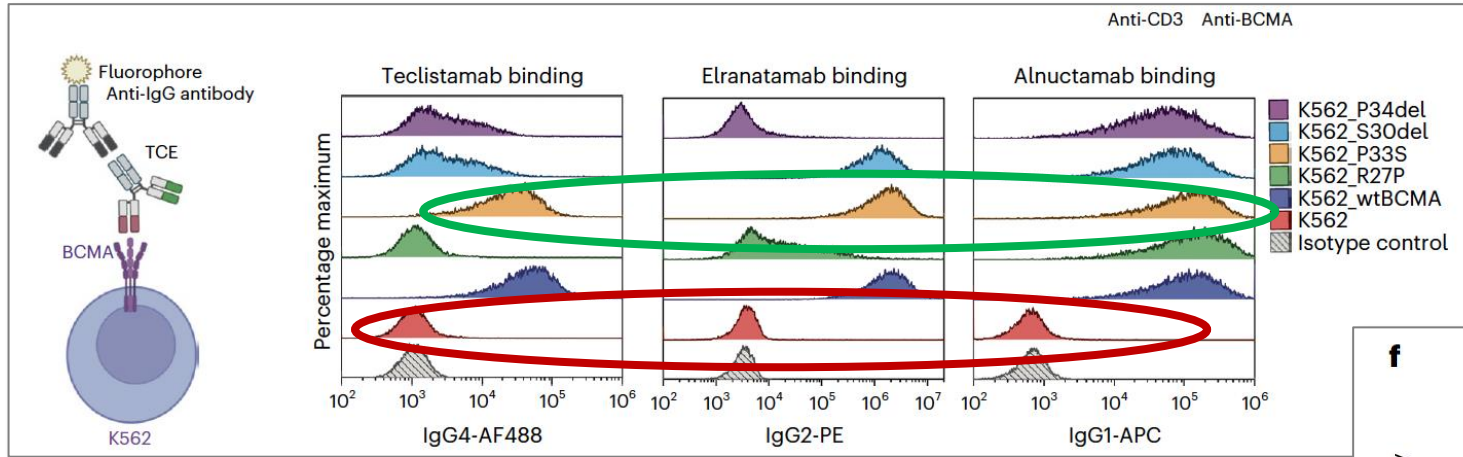
=> monoallelic loss of  
*TNFRSF17* & clonal  
missense mutation in  
exon 1 (80G>C Arg27Pro)

**MM-3:** penta-drug refractory MM (no previous exposure to anti-BCMA tp) receiving anti-BCMA TCE therapy; 11 months of CR



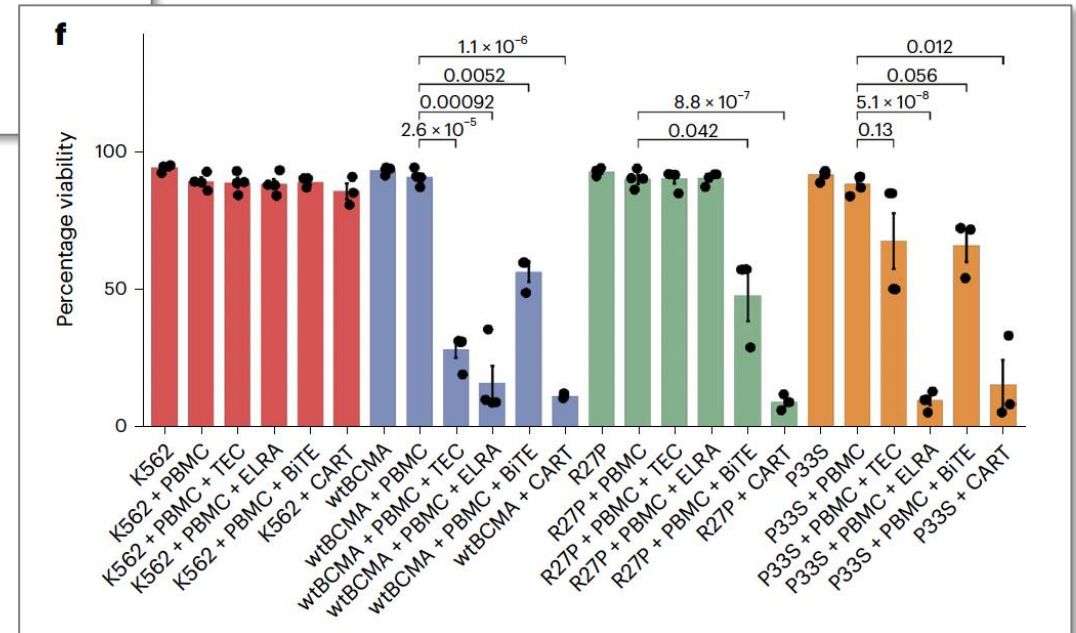
*BCMA extracellular domain mutations*

**Arg27Pro mutation & TME**



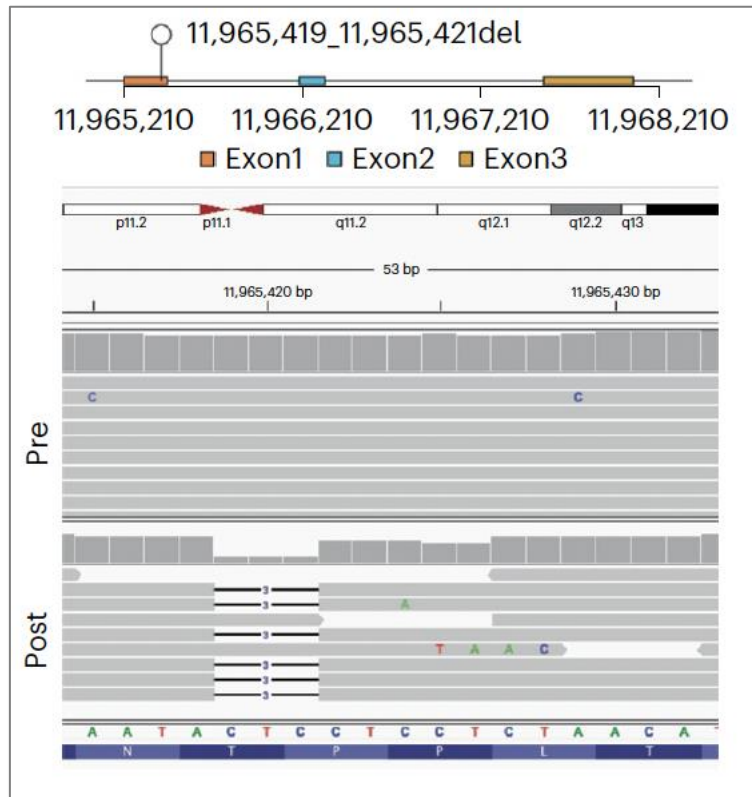
**1. binding efficacy**  
(TEC vs elranatamab vs alnuctamab)

**2. cytotoxic effect**  
(TEC vs elranatamab vs alnuctamab)

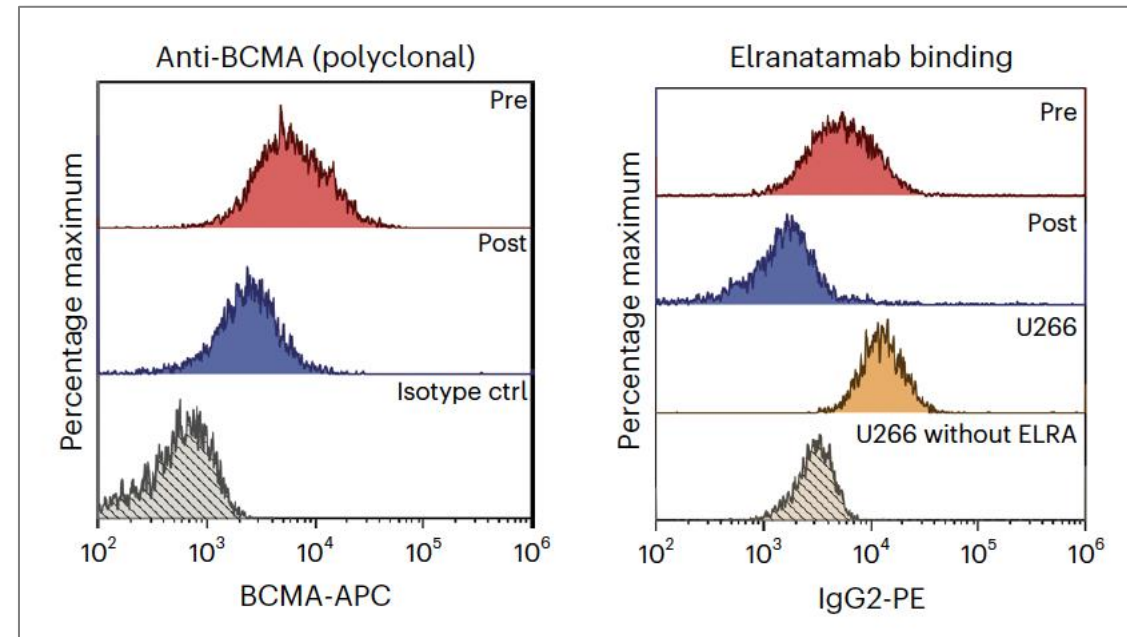


## BCMA extracellular domain mutations

# 2. in-frame deletions in BCMA extracellular domain (4 patients)

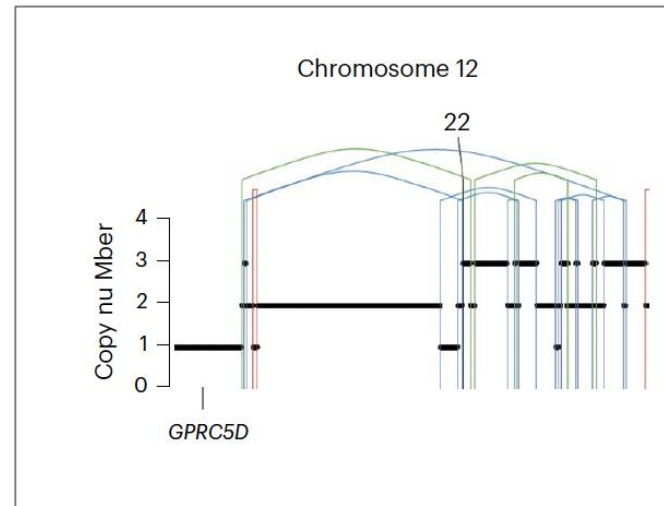
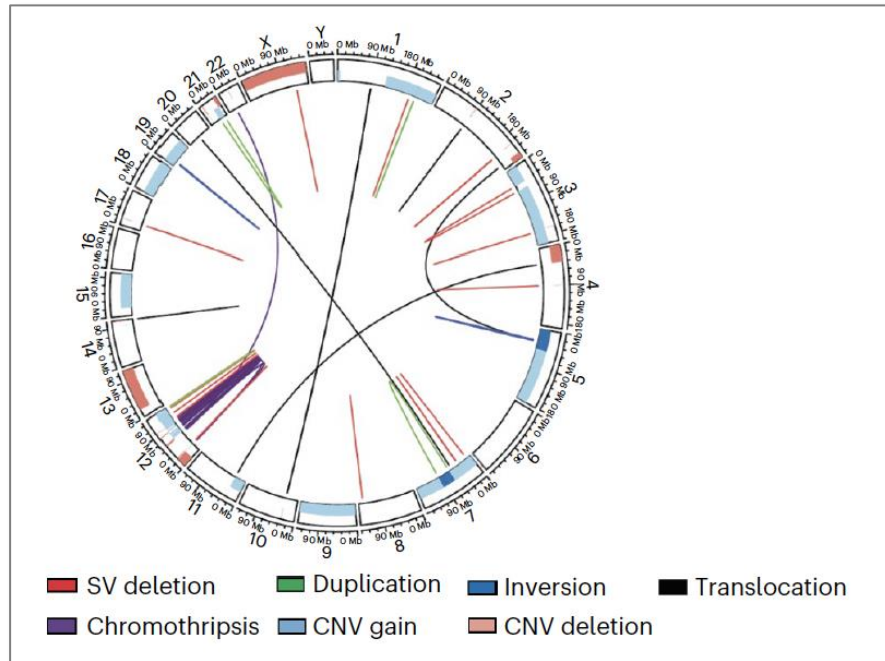


**MM-10:** penta-drug refractory MM (no previous exposure to anti-BCMA tp) receiving anti-BCMA TCE therapy for 19 months



## *GPRC5D mutations*

# ***GPRC5D* biallelic deletion post anti-*GPRC5D* TCE therapy (4 mutation)**



- chromotripsis at baseline on chr 12p and monoallelic *GPRC5D* loss)

**MM-18:** relapsed after Talq-DPd (6<sup>o</sup> line of therapy) and 12 months of remission



## NGS genomic profile: is it prime-time?

### *MM-NGS panel for the daily practice*

=> **UMA panel**, NGS Unique Molecular Assay has been designed\* to detect all the currently validated and suspected genomic DNA aberrations with prognostic value in a single assay (all-in-one panel)

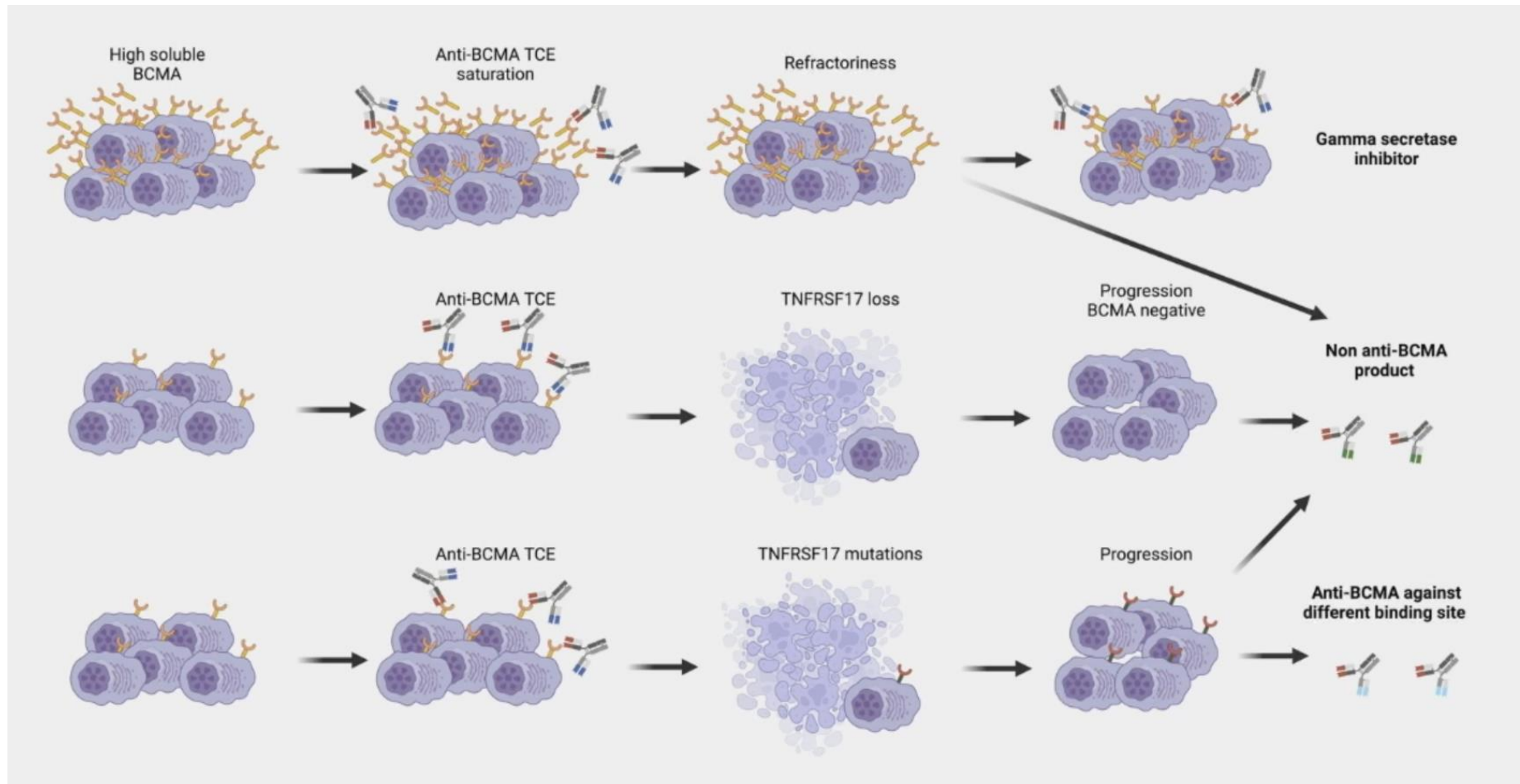


- **CNAs**: pipeline steps and analysis tools that take advantage of off-target reads to compute a whole genome Log2ratio signal precise enough for ARM-level calls
- **IgH traslocations**: custom design on IgH region to minimize costs
- **SNV and Indels**: pipelines already validated (Mutect, Strelka, Seurat)

Number	GENE	Mean cov	Min cov	Max cov	Number	GENE	Mean cov	Min cov	Max cov
1	ATM	255	27	816	42	KDM6A	142	4	358
2	ATR	253	11	643	43	KMT2B	168	1	537
3	BAX	167	10	512	44	KRAS	217	33	409
4	BCL7A	161	3	368	45	LEMD2	180	12	522
5	BIRC2	268	26	866	46	LTB	147	48	394
6	BIRC3	243	9	886	47	MAX	164	23	411
7	BRAF	235	13	689	48	MYC	202	65	520
8	BTG1	143	2	303	49	MYD88	241	53	577
9	CARD11	173	22	559	50	NF1	222	4	534
10	CCND1	145	36	607	51	NFKB1	206	9	544
11	CD19	156	25	415	52	NFKB2	156	19	396
12	CD27	150	21	368	53	NFKBIA	169	14	382
13	CD38	196	18	502	54	NOTCH2	199	11	642
14	CDKN1B	194	47	446	55	NRAS	222	83	402
15	CDKN2C	193	43	368	56	PIK3CA	266	13	675
16	CKS1B	188	53	496	57	PRDM1	196	31	533
17	CRBN	233	25	582	58	PRKD2	182	29	601
18	CUL4B	172	6	425	59	PSMB5	227	41	489
19	CYLD	191	10	448	60	PSMD1	218	4	441
20	DDB1	237	32	757	61	PTEN	175	2	417
21	DIS3	183	25	402	62	PTPN11	189	1	450
22	DNAH5	239	10	622	63	RASA2	234	2	599
23	DTX1	138	17	330	64	RB1	173	1	389
24	DUSP2	110	18	239	65	RBX1	209	42	430
25	EGR1	219	60	492	66	RPL10	155	29	434
26	EVIS	185	31	428	67	RPL5	169	26	455
27	FAF1	197	7	441	68	SAMHD1	229	31	479
28	FAM46C	223	92	373	69	SETD2	240	13	715
29	FANCA	181	3	476	70	SFB1	225	35	467
30	FBXO4	221	15	610	71	SGPP1	133	10	364
31	FGFR3	81	3	312	72	SNX7	176	3	434
32	HIST1H1B	133	29	303	73	SP140	194	1	457
33	HIST1H1D	159	42	367	74	STAT3	218	57	512
34	HIST1H1E	125	47	243	75	TGDS	178	19	413
35	HIST1H4H	278	106	539	76	TNFRSF17	188	42	413
36	IDH1	230	56	454	77	TNFRSF12	95	7	373
37	IDH2	190	1	735	78	TP53	144	10	423
38	IGLL5	68	0	344	79	TRAF2	187	16	624
39	IKZF1	227	36	672	80	TRAF3	184	6	421
40	IL6ST	245	28	670	81	XBP1	173	12	389
41	IRF4	229	26	559	82	XPO1	239	66	543

*NGS genomic profile: is it prime-time?*

## *Hhw can genomics guide clinical decisions?*



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