



I “LINFOMI INDOLENTI”

Milano, Best Western Hotel Madison
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Macroglobulinemia di Waldenström – Basi Biologiche

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ASST Spedali Civili di Brescia
S.C. Clinical Trial Center, Laboratorio di Ricerca C.R.E.A.



C.O.I. for Aldo M. Roccaro

Last two years

Company name	Research support	Employee	Consultant	Stockholder	Speakers bureau	Advisory board	Other
AstraZeneca (Provider Dynamicon)					X		
Daiiki-Sankyo (Provider Dynamicon)					X		
Beigene (Provider CTP)					X		
Roche (Provider CTP)					X		
Abbvie (Provider CTP)					X		
Janssen (Provider CTP)					X		

***The Importance of Translational Research in Defining Mechanisms
Underlying Waldenström's Macroglobulinemia Biology***

Tumor Clone

Bone Marrow Niche

Tumor Cell-to-Bone Marrow Niche Interaction

The Importance of Translational Research in Defining Mechanisms Underlying Waldenström's Macroglobulinemia Biology

Tumor Clone

Bone Marrow Niche

Tumor Cell-to-Bone Marrow Niche Interaction

Waldenström's Macroglobulinemia: Overview

✓ Lymphoplasmacytic lymphoma (WHO)

Alaggio et al. Leukemia, 2022

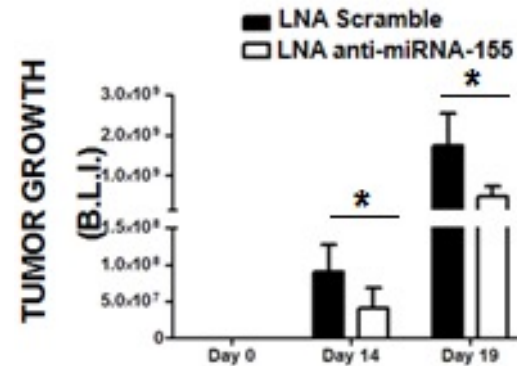
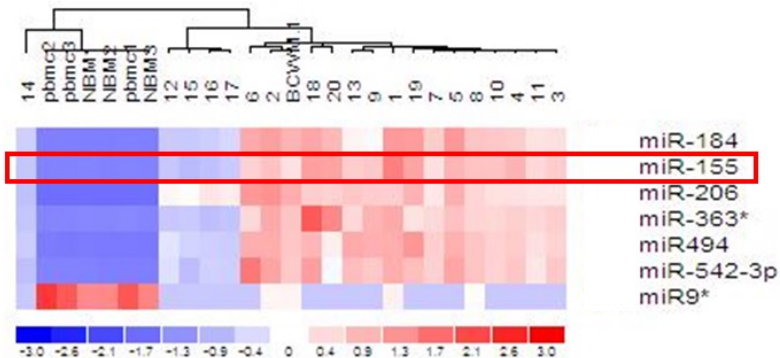
Waldenström's Macroglobulinemia: Overview

- ✓ Lymphoplasmacytic lymphoma (WHO)
- ✓ 1-2% of all hematologic neoplasms

Alaggio et al. Leukemia, 2022
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Chen et al. Blood, 2006

Waldenström's Macroglobulinemia: Overview

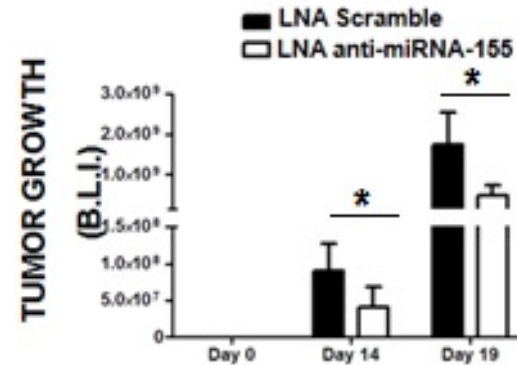
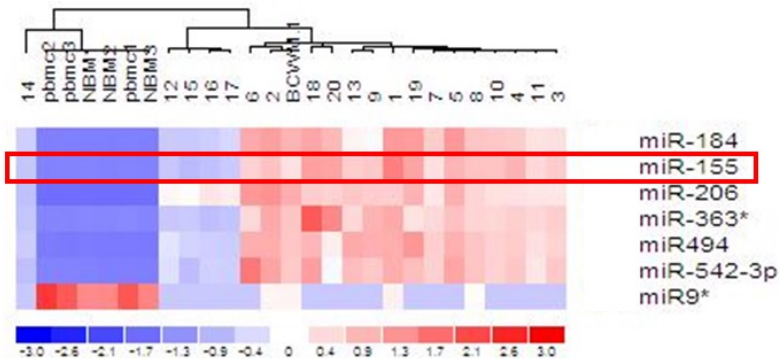
- ✓ Lymphoplasmacytic lymphoma (WHO)
- ✓ 1-2% of all hematologic neoplasms
- ✓ Specific miRNA signature



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Waldenström's Macroglobulinemia: Overview

- ✓ Lymphoplasmacytic lymphoma (WHO)
- ✓ 1-2% of all hematologic neoplasms
- ✓ Specific miRNA signature - 6q deletion



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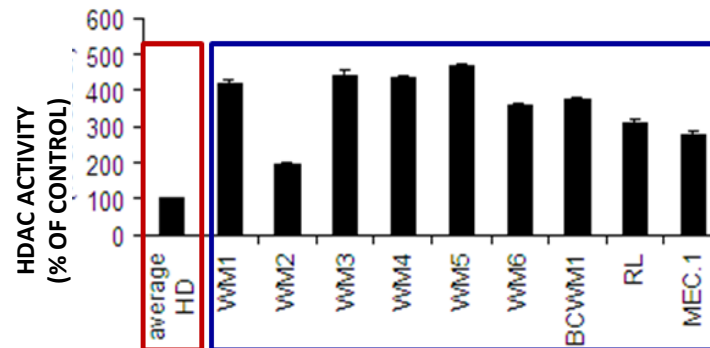
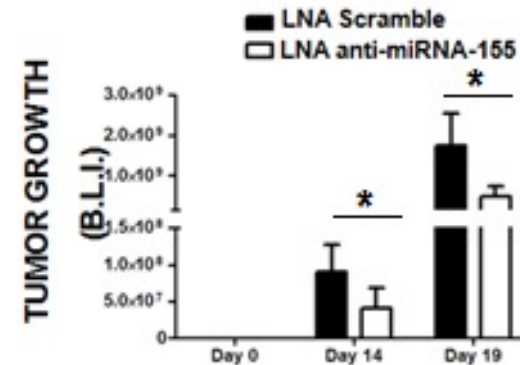
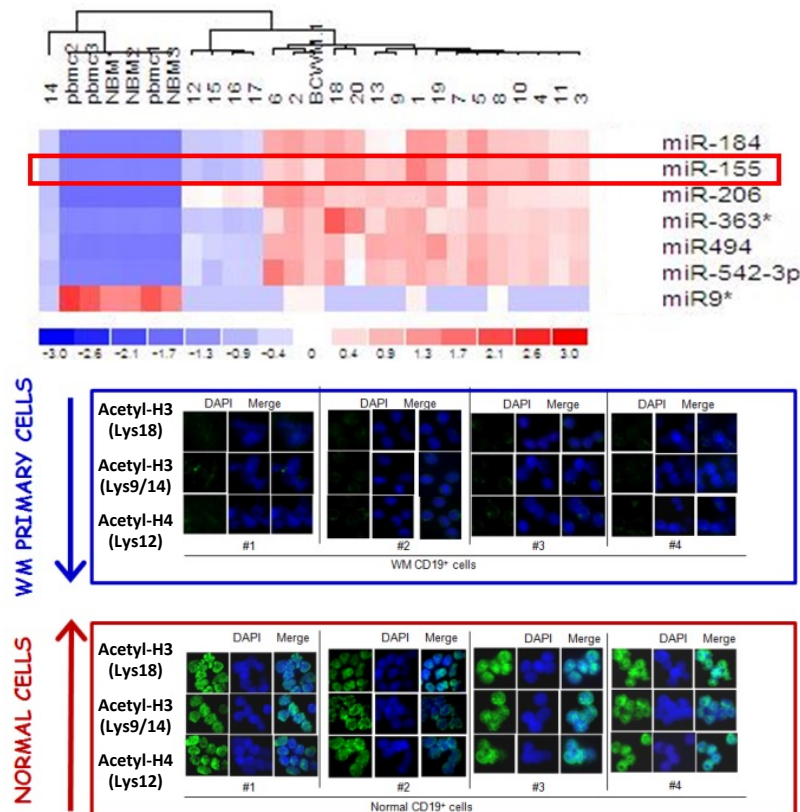
Chen et al. Blood, 2006

Roccaro et al. Blood, 2009

Zhang et al. Blood, 2012 – Treon Ann. Oncol, 2006

Waldenström's Macroglobulinemia: Overview

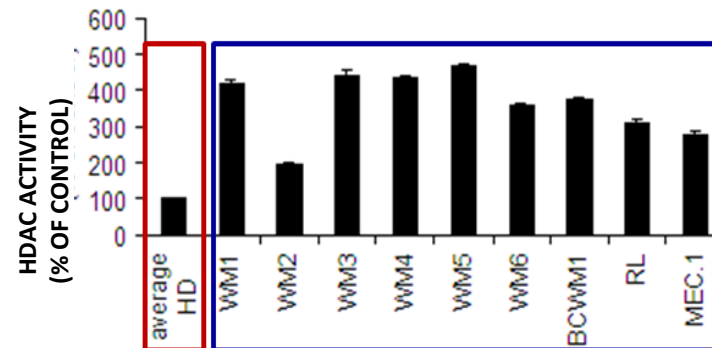
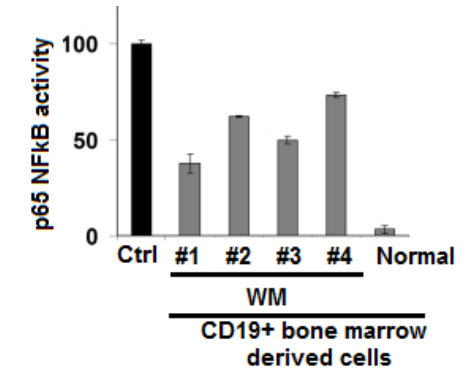
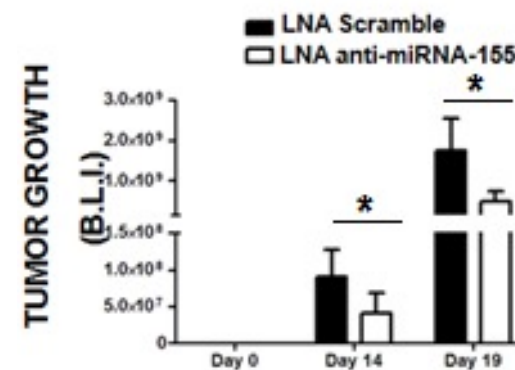
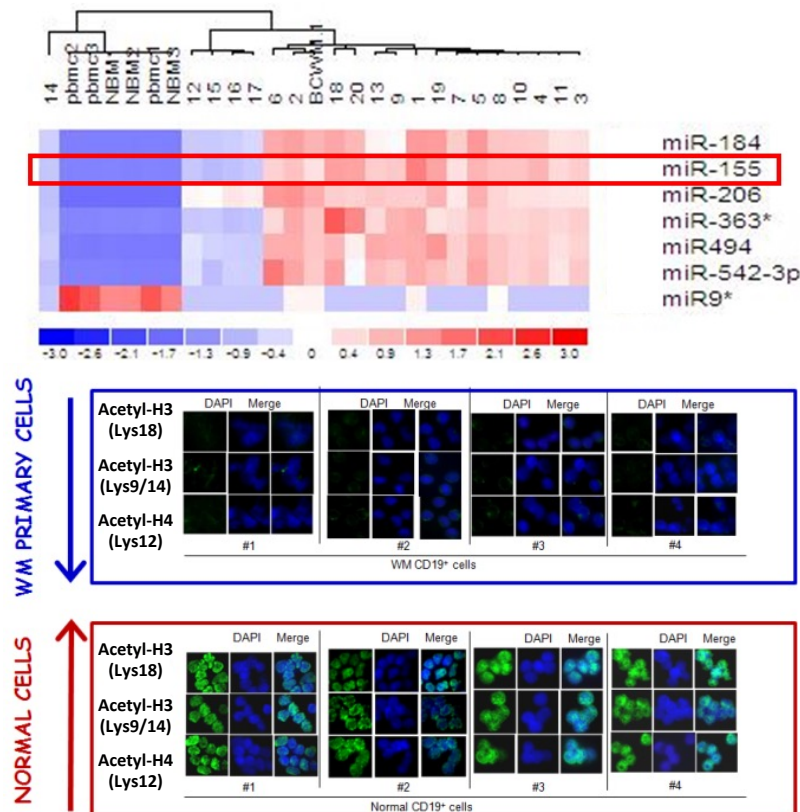
- ✓ Lymphoplasmacytic lymphoma (WHO)
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- ✓ Specific miRNA signature - 6q deletion
- ✓ Reduced histone acetylation and increased HDAC activity



Alaggio et al. *Leukemia*, 2022
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 Leleu et al. *Blood*, 2007
 Roccaro et al. *Blood*, 2010

Waldenström's Macroglobulinemia: Focus on Somatic Mutations

- ✓ Lymphoplasmacytic lymphoma (WHO)
- ✓ 1-2% of all hematologic neoplasms
- ✓ Specific miRNA signature - 6q deletion
- ✓ Reduced histone acetylation and increased HDAC activity
- ✓ Constitutive PI3K/Akt and NFκB pathways
- ✓ **Recurrent somatic aberrations (90%: MYD88^{L265P}; 30%: CXCR4^{C1013G})**



**Genomic scenario
(somatic mutations)**

Waldenström's Macroglobulinemia: a Model for Studying Lymphoplasmacytic Transformation

high prevalence
of *MYD88*^{L265P}



Genetic marker
of the disease

Waldenström's Macroglobulinemia: a Model for Studying Lymphoplasmacytic Transformation

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Genetic marker
of the disease

Bone marrow infiltration
of mutated B-lymphocytes
and plasma cells



Characterization of
intratumor diversity

Waldenström's Macroglobulinemia: a Model for Studying Lymphoplasmacytic Transformation

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Characterization of
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Existence of the IgM MGUS
pre-malignant condition



Observation of clonal evolution
preceding full-blown disease status

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WM provides a singular model for investigating lymphoplasmacytic transformation

MYD88^{L265P}: the Only Player?

Is MYD88^{L256P} Present in Progenitor and Mature B-cell Sufficient to Drive WM Transformation?

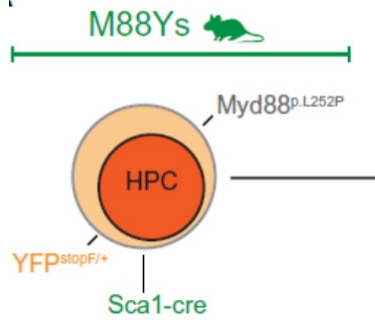
MYD88^{L256P}

X

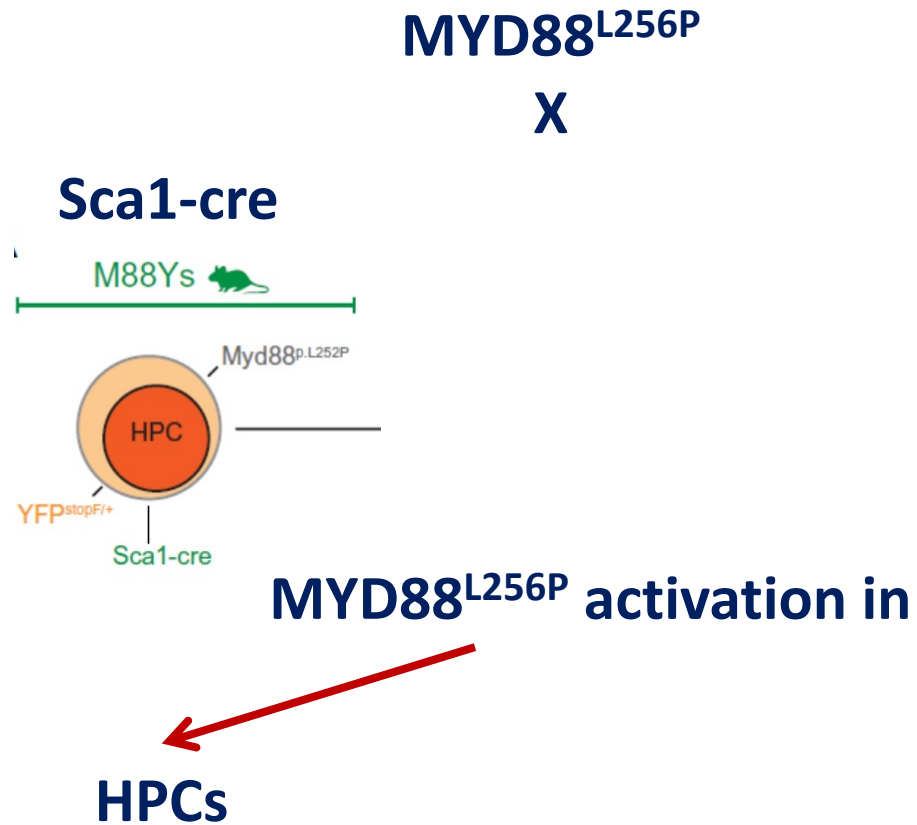
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MYD88^{L256P}
X

Sca1-cre



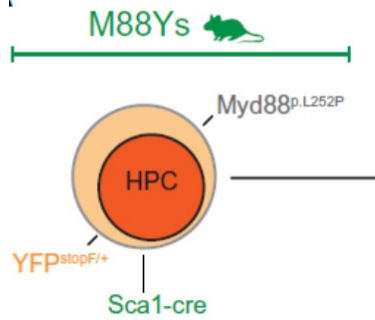
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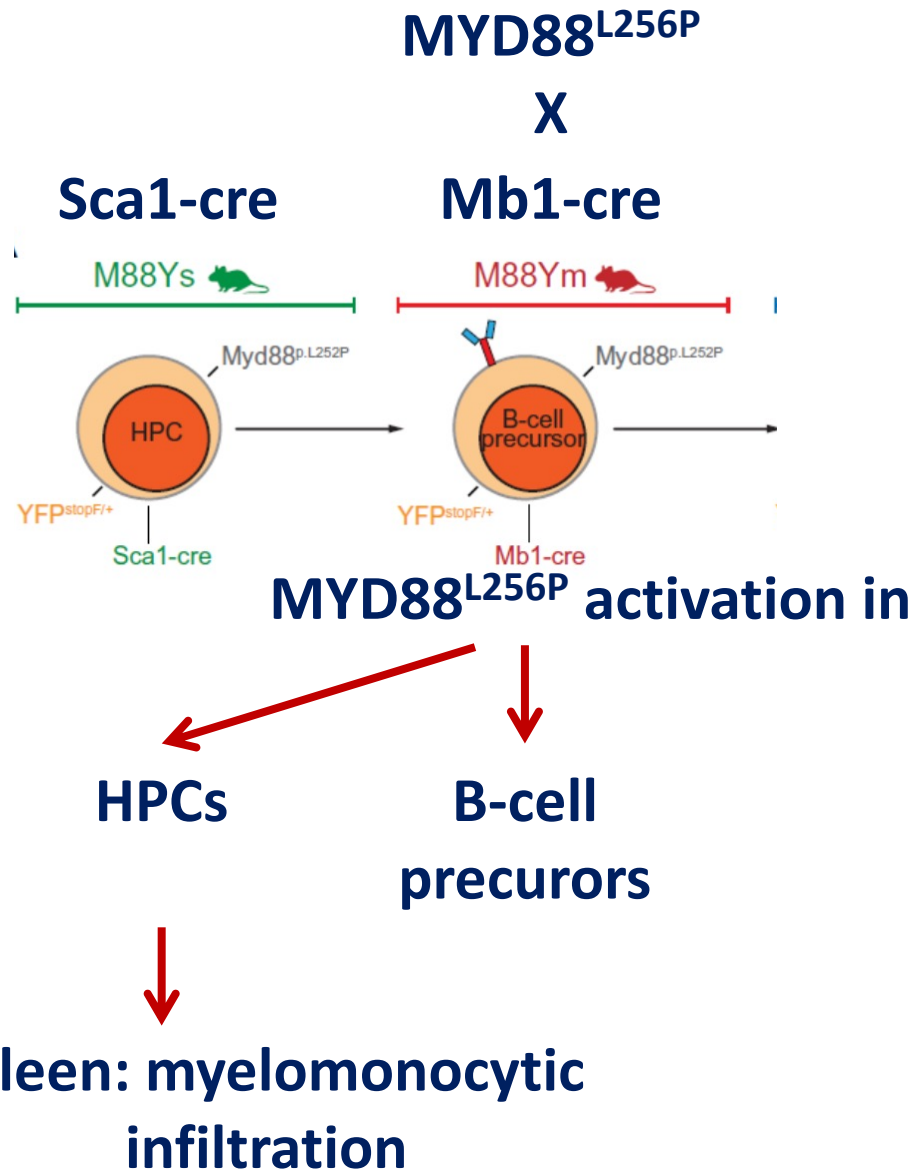
MYD88^{L256P} activation in

HPCs

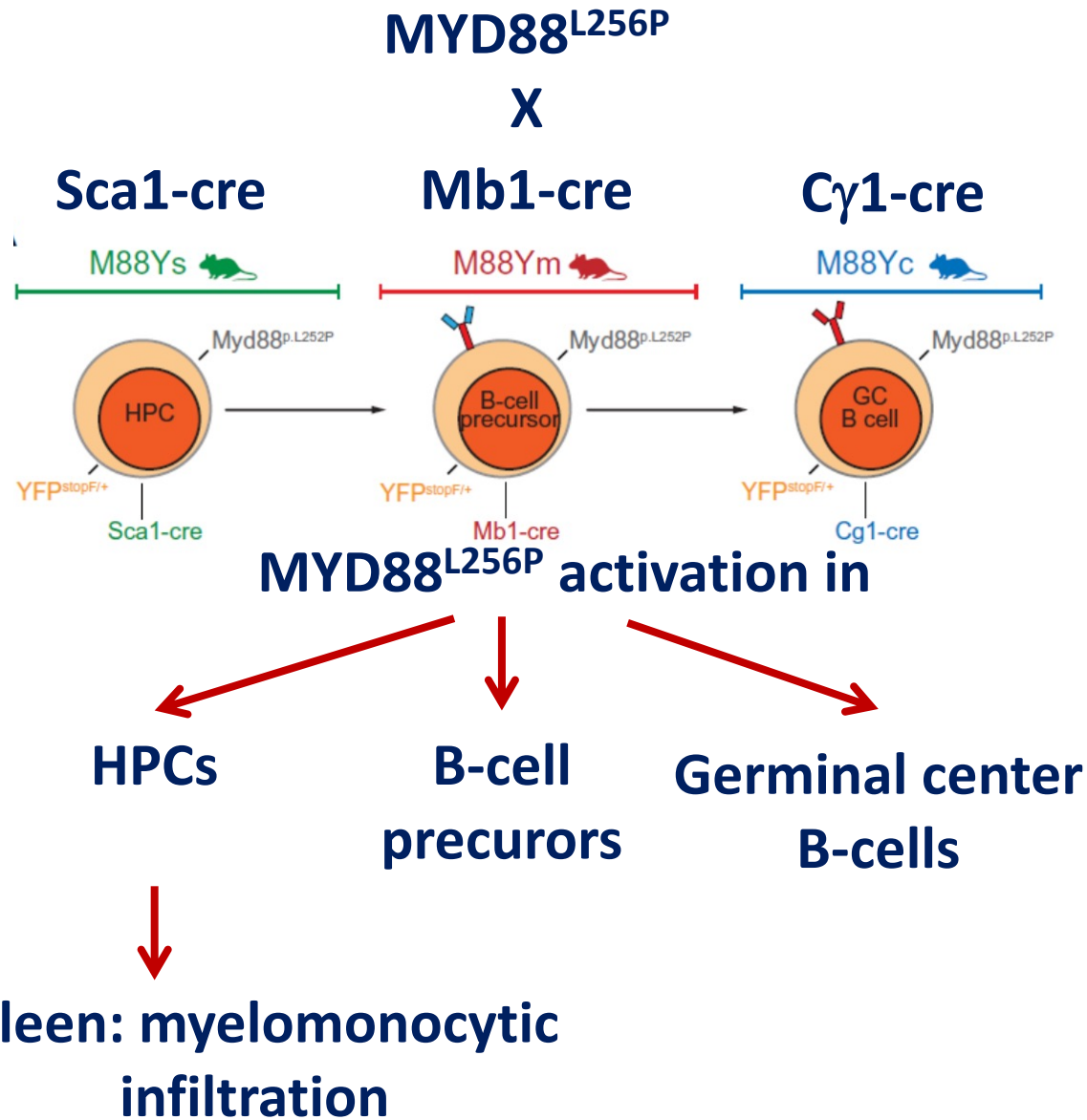


Spleen: myelomonocytic
infiltration

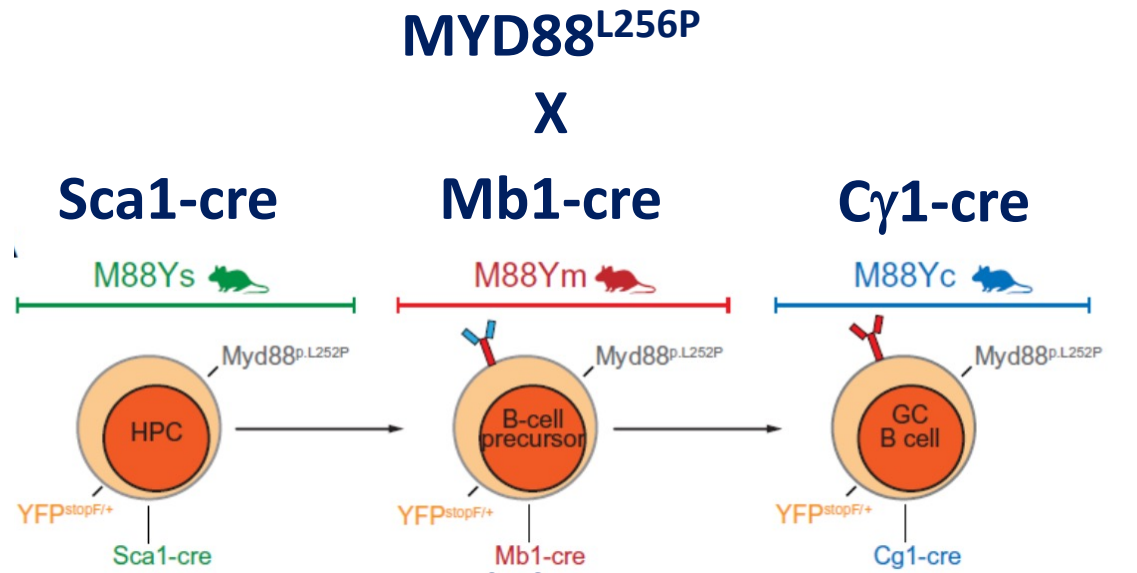
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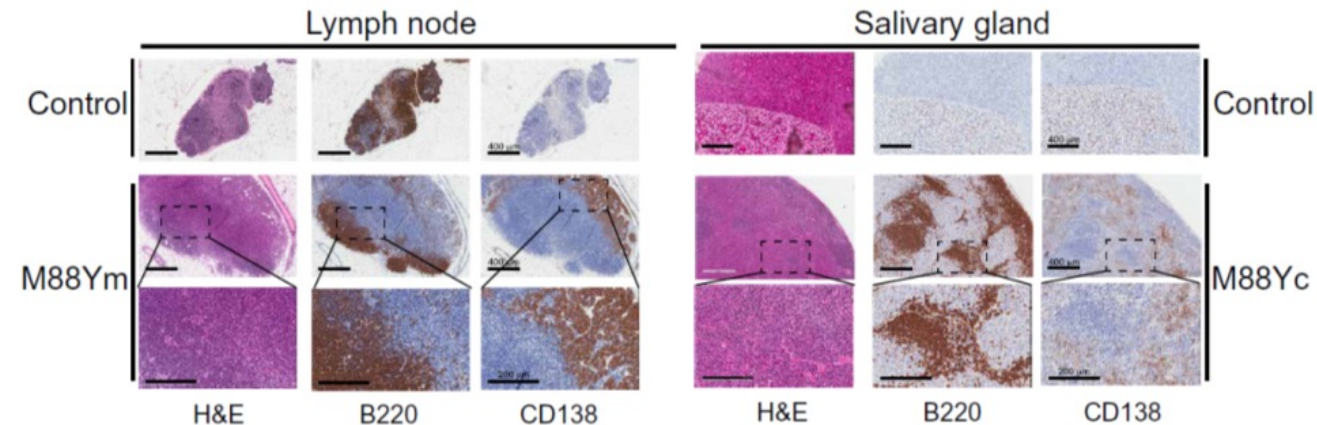
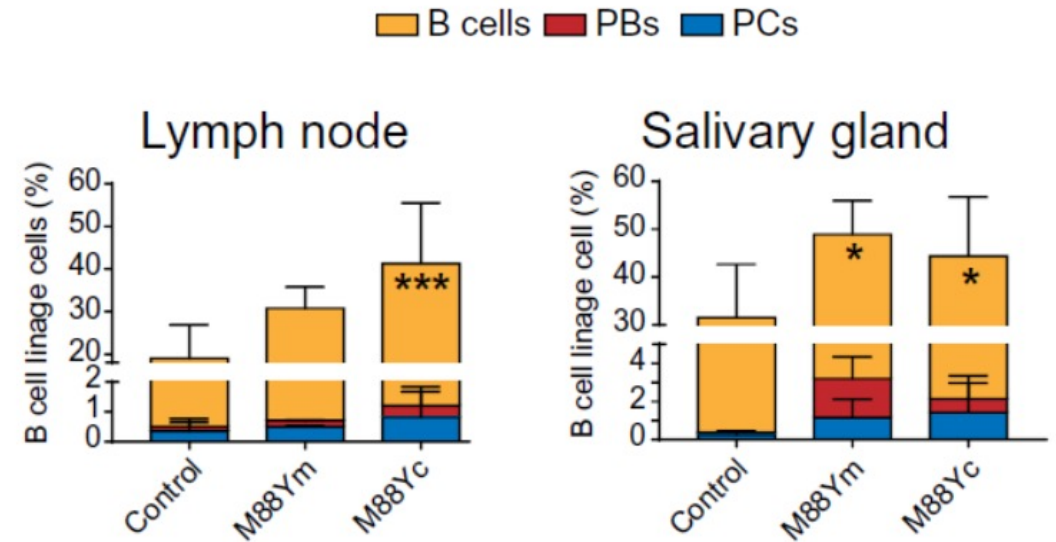
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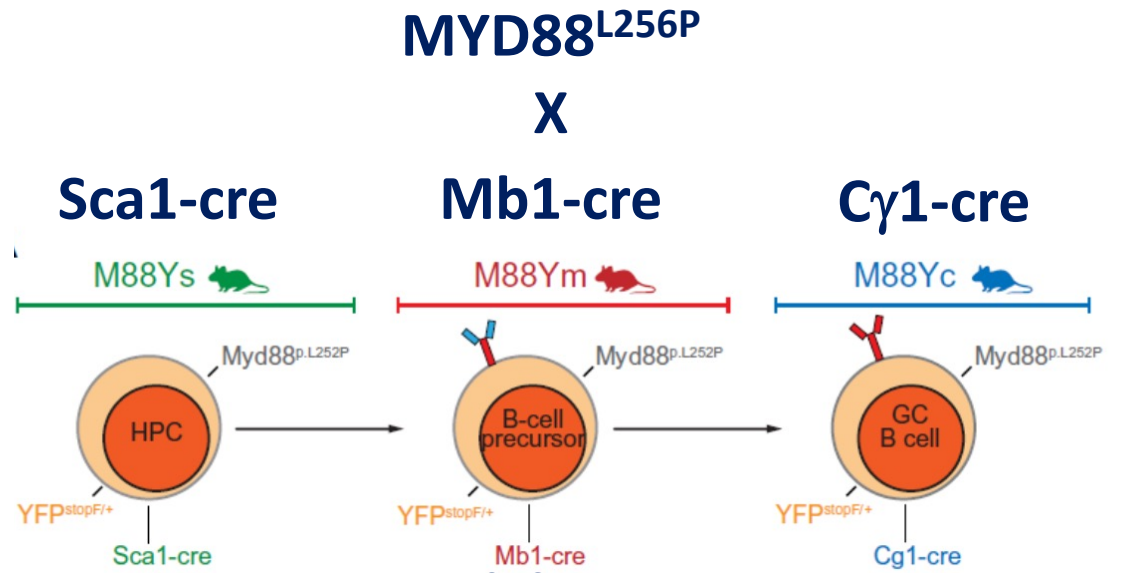
**B-cell
precursors**

**Germinal center
B-cells**

**Spleen: myelomonocytic
infiltration**



Is MYD88^{L256P} Present in Progenitor and Mature B-cell Sufficient to Drive WM Transformation?



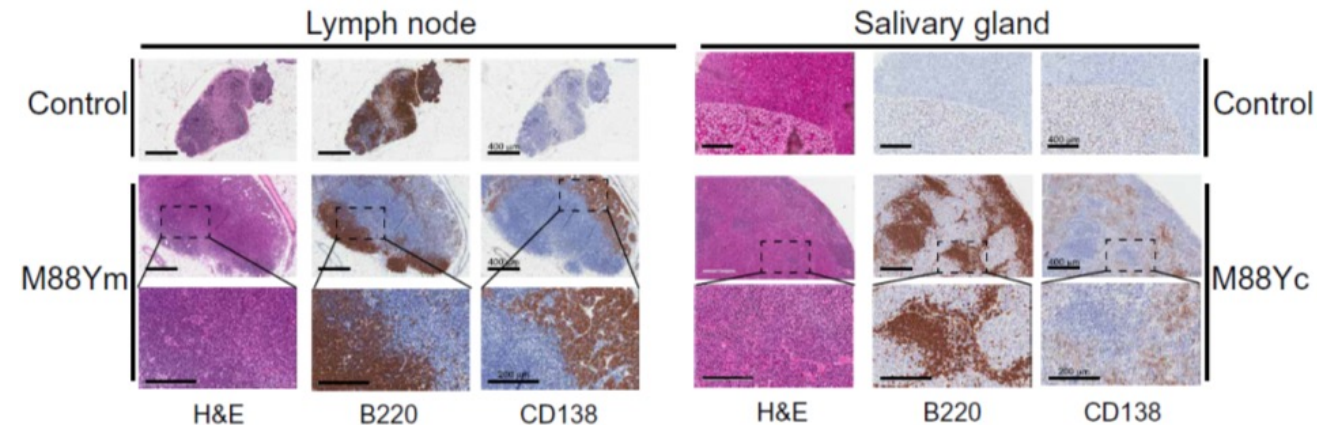
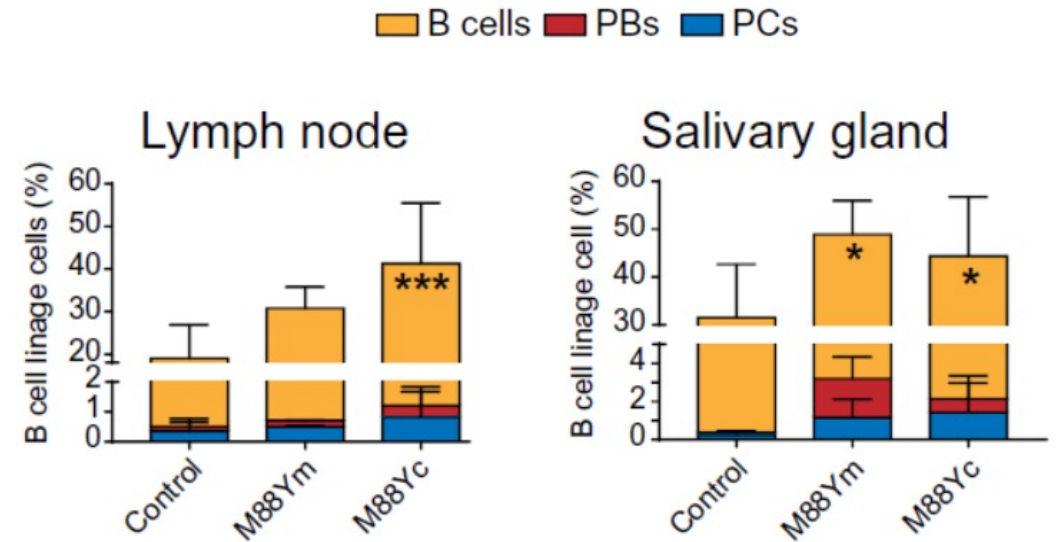
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**B-cell
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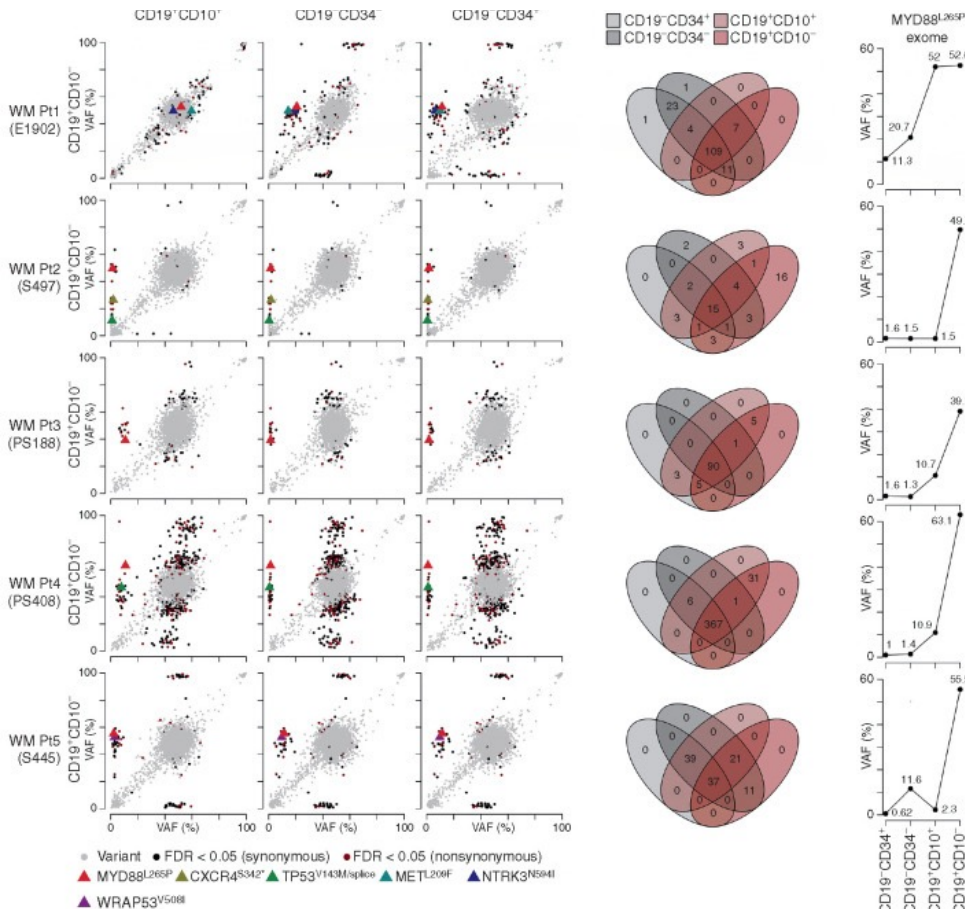


Lack of BM infiltration

Is MYD88^{L256P} Present in Progenitor and Mature B-cell Sufficient to Drive WM Transformation?

Mutated MYD88^{L256P} alone is insufficient to induce WM transformation in mice

Is MYD88^{L256P} Present in Progenitor and Mature B-cell Sufficient to Drive WM Transformation?



MYD88^{L256P} mutation could be detected in pre-B progenitor compartments and involved the entire mature B-cell clone (100% of pts). Not detected in any fraction of HD marrow.

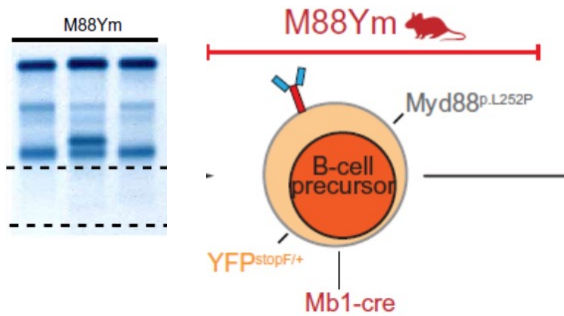
Mutated MYD88^{L256P} alone is insufficient to induce WM transformation in the human setting

Are Other Molecular Aberrations Required for WM Transformation in Addition to MYD88^{L265P}?

MYD88^{L256P}

X

Mb1-cre



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Mb1-cre

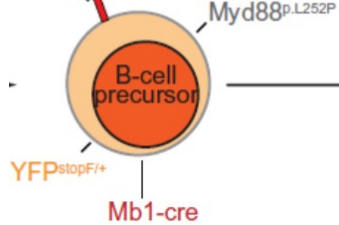
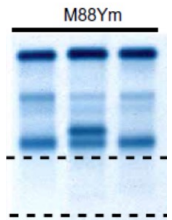
M88Ym



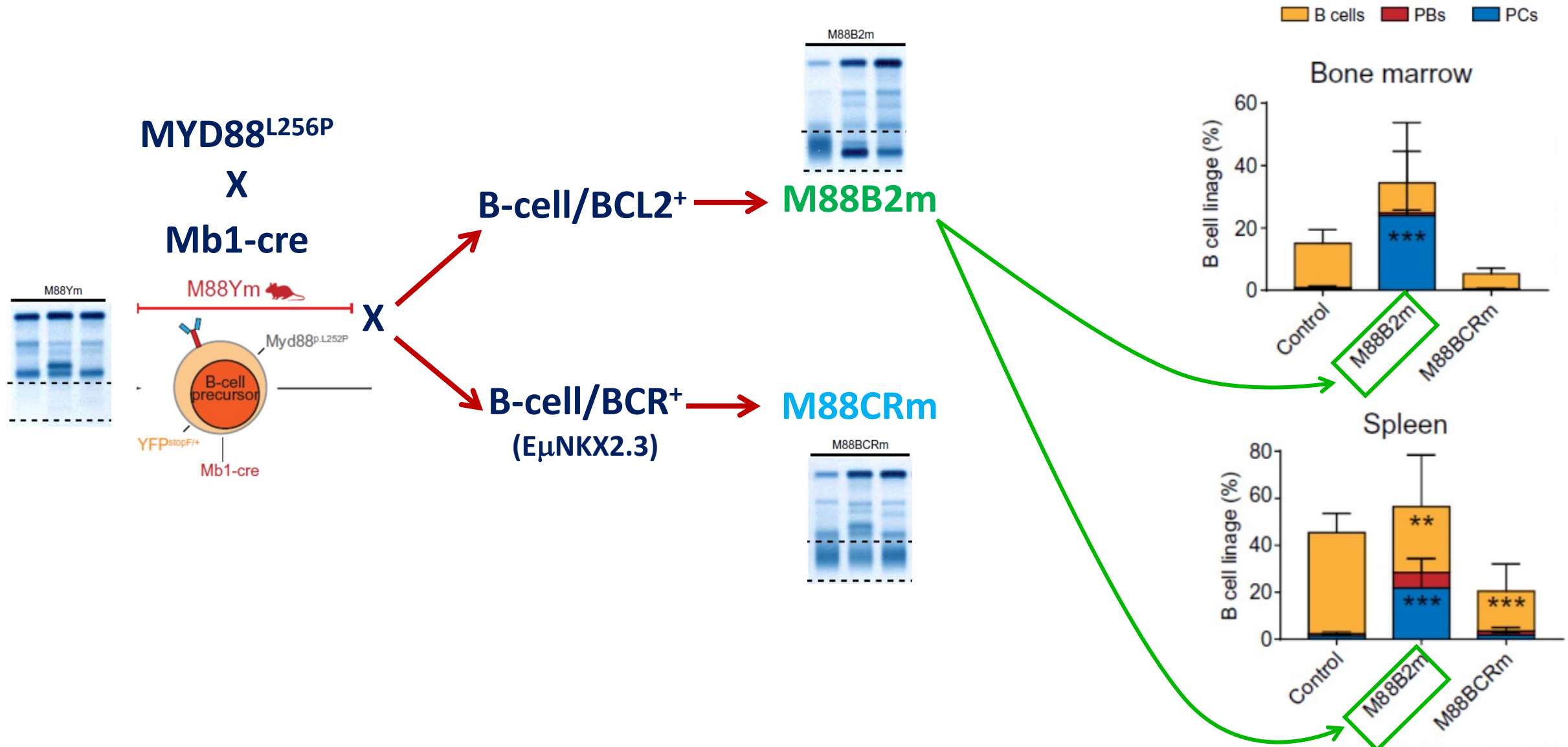
X

B-cell/BCL2⁺ → M88B2m

B-cell/BCR⁺
(EμNKX2.3) → M88CRm



Are Other Molecular Aberrations Required for WM Transformation in Addition to MYD88^{L265P}?



Are Other Molecular Aberrations Required for WM Transformation in Addition to MYD88^{L265P}?

**Yes: co-occurrence of MYD88^{L265P} and BCL2
overexpression or constitutive BCR signaling
accelerates LPL/WM development**

Waldenström's Macroglobulinemia: a Model for Studying Lymphoplasmacytic Transformation

MYD88^{L265P} is detectable in most cases of IgM MGUS

after a median follow-up of 34 years, approximately 84% of individuals with IgM MGUS do not progress to WM

many patients with MYD88^{L265P} do not develop a B cell malignancy



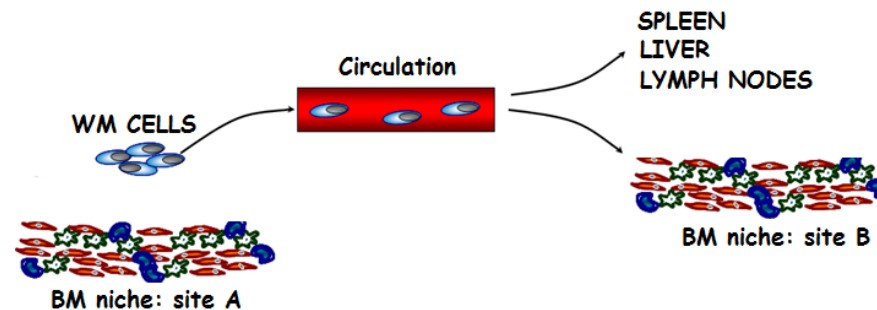
Progression to WM is driven by both the cellular origin of the MYD88^{L265P} and the emergence of cooperating genetic alterations

CXCR4-Genomic Aberrations: Role in WM Biology

Whole genome sequencing
WM patients

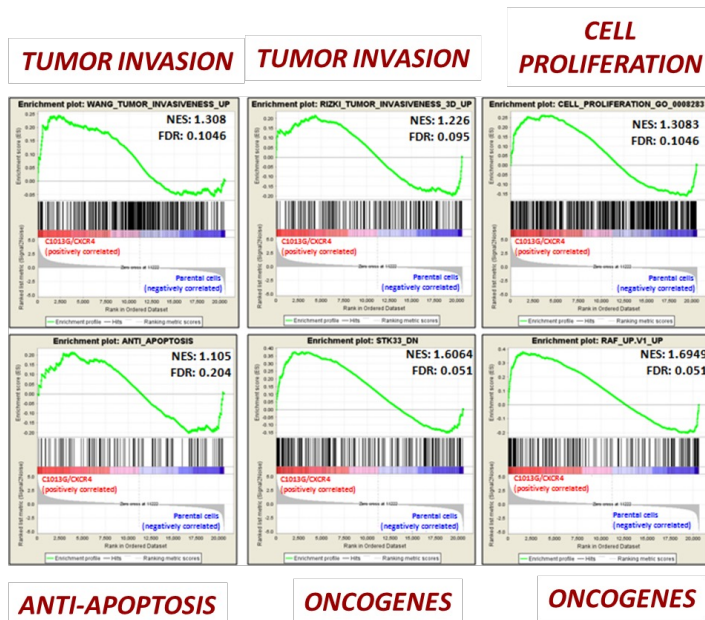
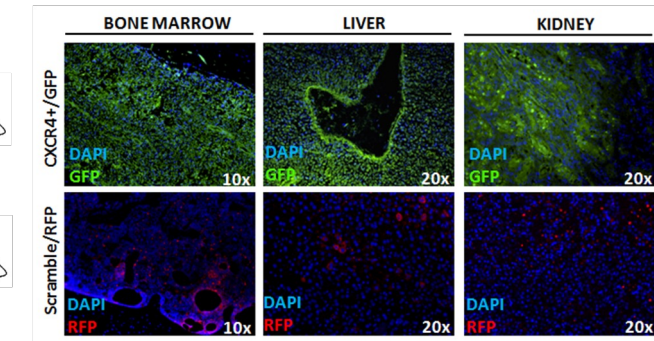
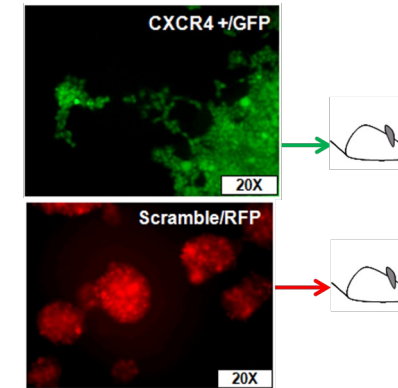
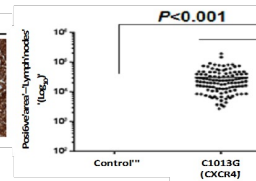
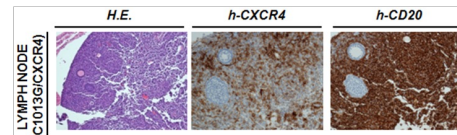
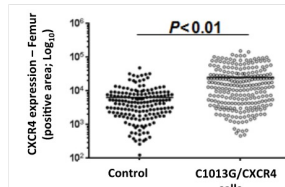
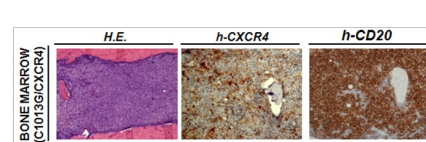
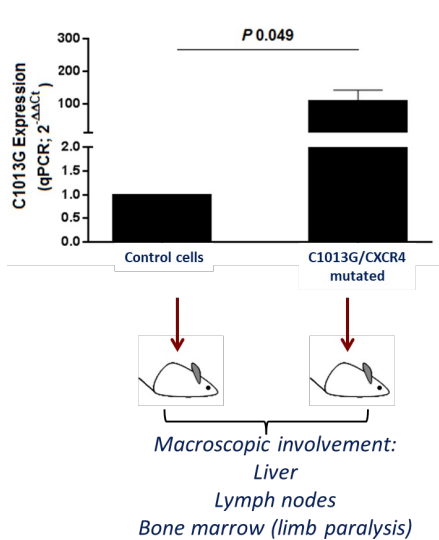
27% harboring aberrations within the
carboxyl terminal domain of CXCR4

CXCR4-related somatic variant in primary WM cells may modulate WM biology



Hunter et al. Blood, 2013
Roccaro et al. Cell Reports, 2014
Roccaro et al. Cell Reports, 2015

CXCR4^{C1013G}: *in Vivo* Functional Role in WM



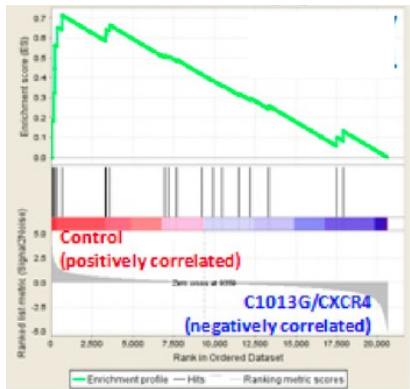
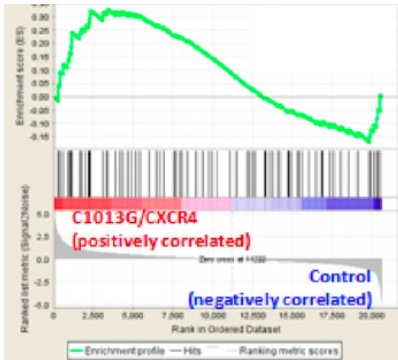
Functional relevance of **CXCR4^{C1013G}** variant in WM:
- **Oncogenic** role
as shown both *in vivo* and at molecular level

CXCR4^{C1013G} Confers Resistance to Ibrutinib Therapy: Pre-Clinical Setting

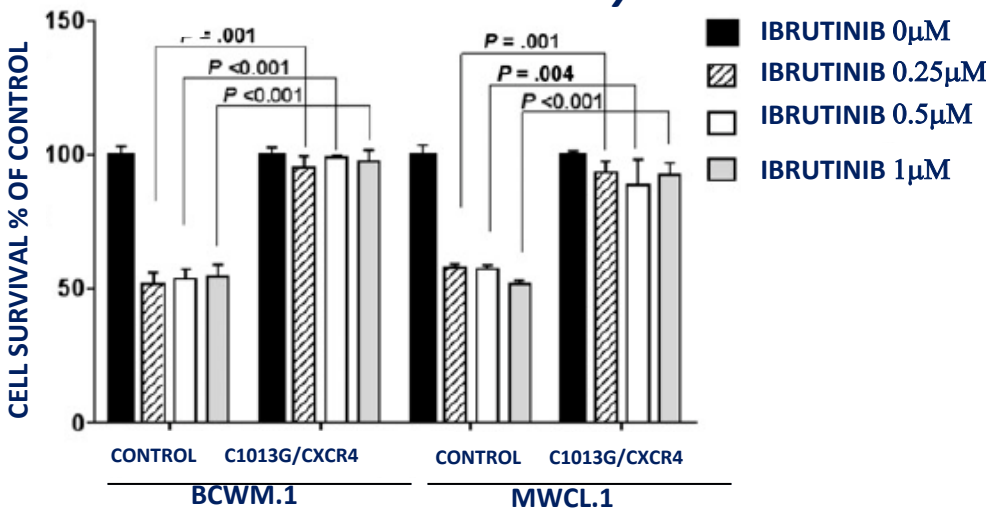
Transcriptome signature

DRUG RESISTANCE
enriched in CXCR4 mutated cells

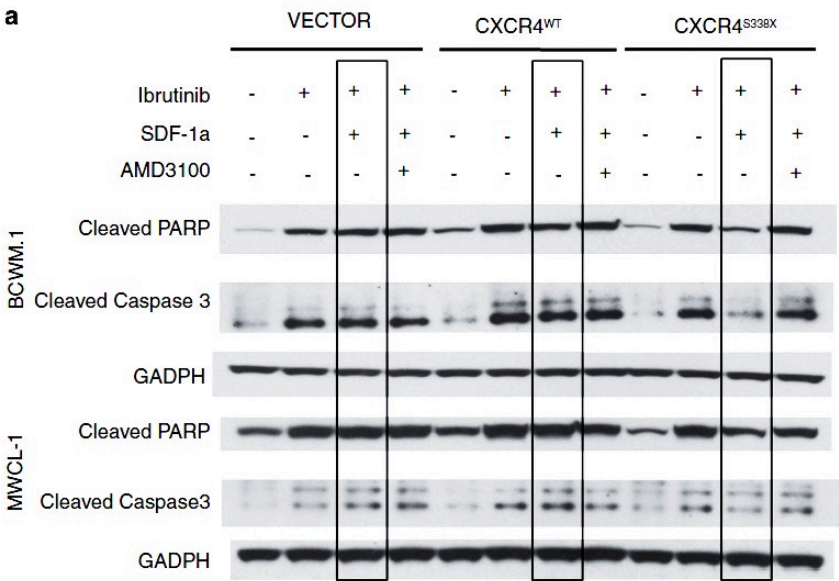
RESPONSE TO DRUGS
enriched in CXCR4 non-mutated cells



In vitro survival assay



Protein signature

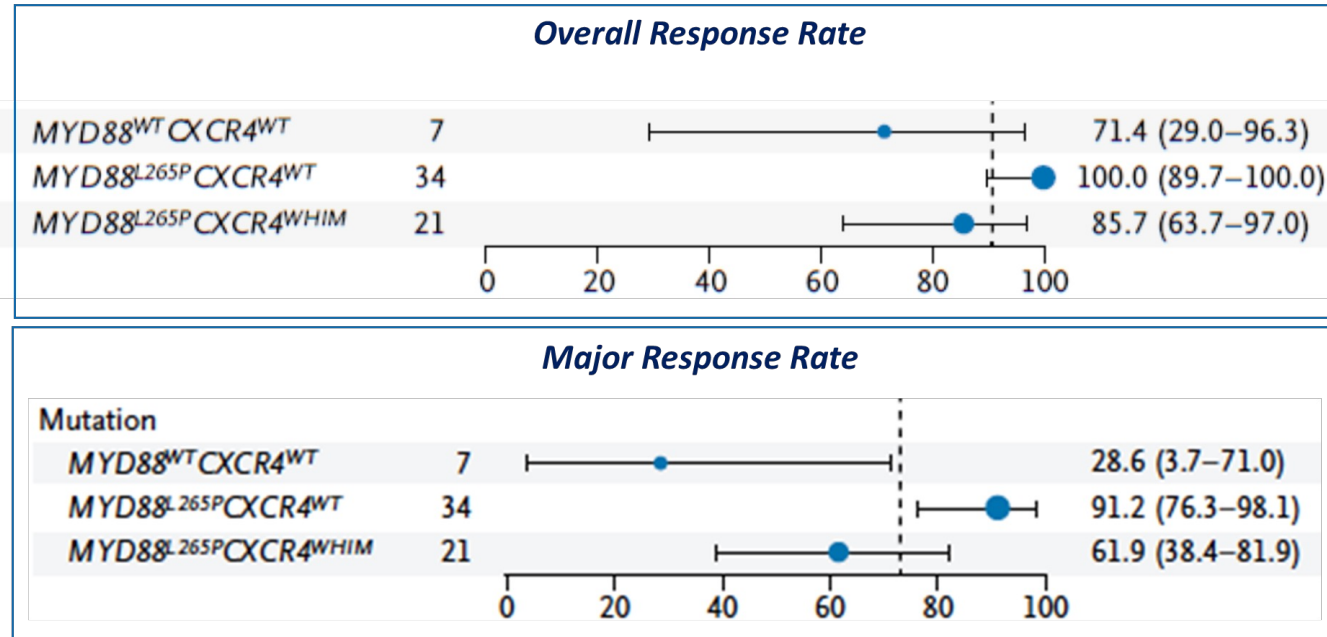


Roccaro et al. Blood, 2014

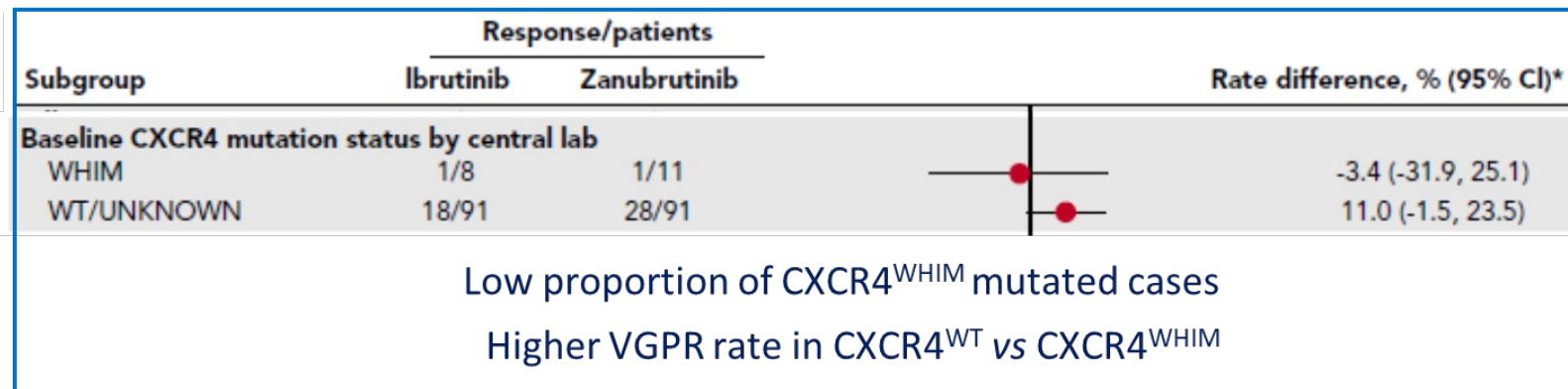
Cao et al. Leukemia, 2015

Treon et al. N Engl J Med, 2015

CXCR4^{C1013G} Confers Resistance to Ibrutinib Therapy: Clinical Setting

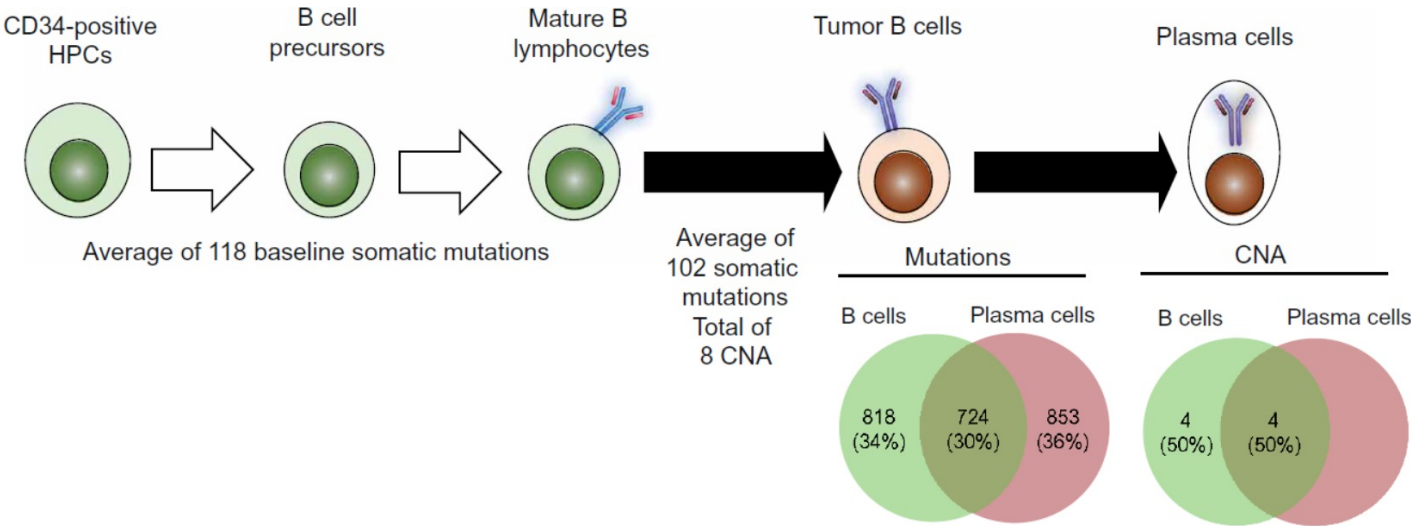


Treon et al. *N Engl J Med*, 2015



Tam et al. *Blood*, 2020

Shared vs Unique Somatic Mutations Between Normal and Tumor Cells

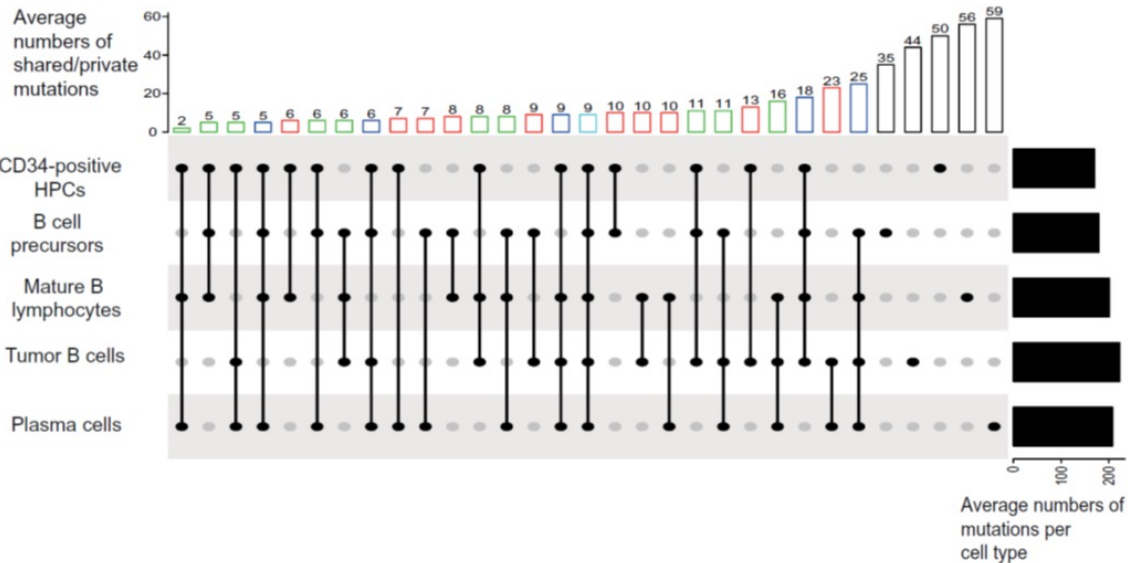


shared somatic mutations
between normal and tumor cells
n. 156 (average)

somatic mutations
unique to WM cells
associated with progression
n. 44 (average)



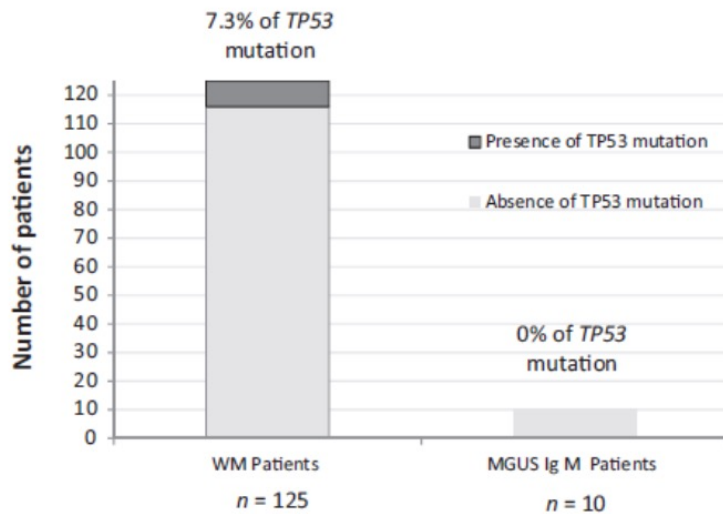
CXCR4, IGLL5, NADH3
TP53, DICER1



TP53 and Its Prognostic Significance in WM

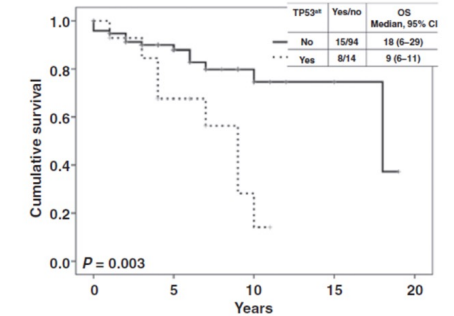
WM: n. 125
IgM MGUS: n. 10

Sanger sequencing
ultradeep-targeted sequencing

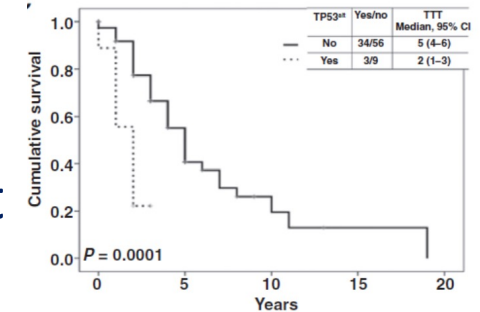


TP53 Mutation
7.3% WM
0% IgM MGUS

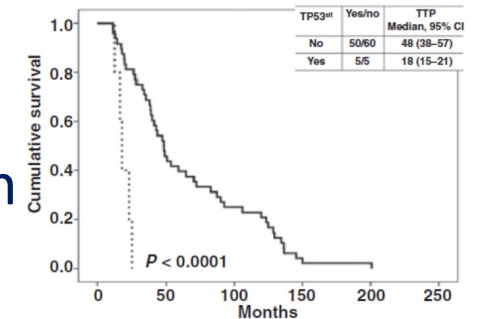
↓ Overall
Survival



↓ Time To
Treatment



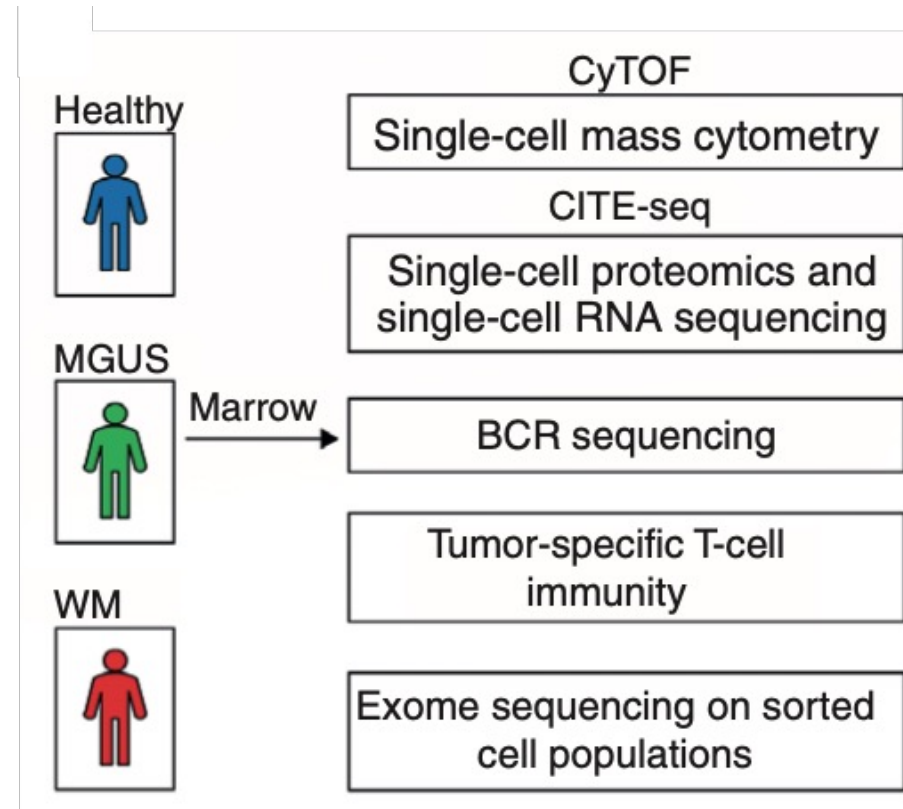
↓ Time To
Progression



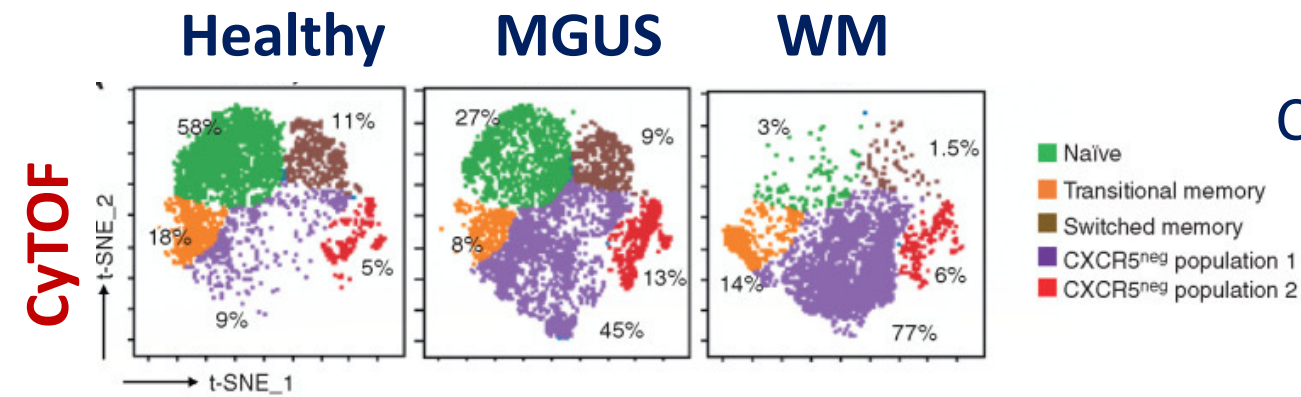
TP53: negative prognostic impact in WM

How to Better Know and Investigate Potential Aberrations

Going from IgM-MGUS Towards WM



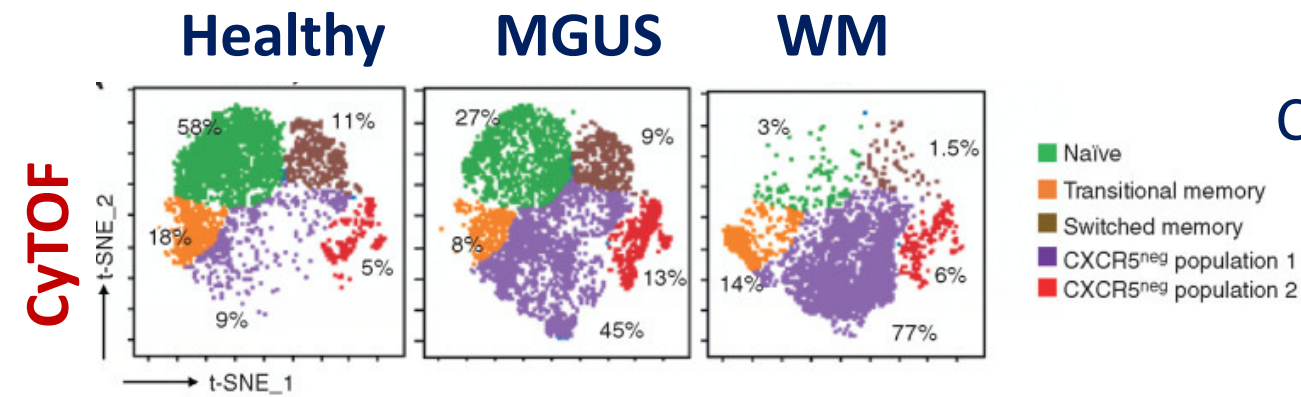
CD19⁺ B Cells: Changes Going from HD to MGUS to WM



Changes in the B-cells evident as early as MGUS

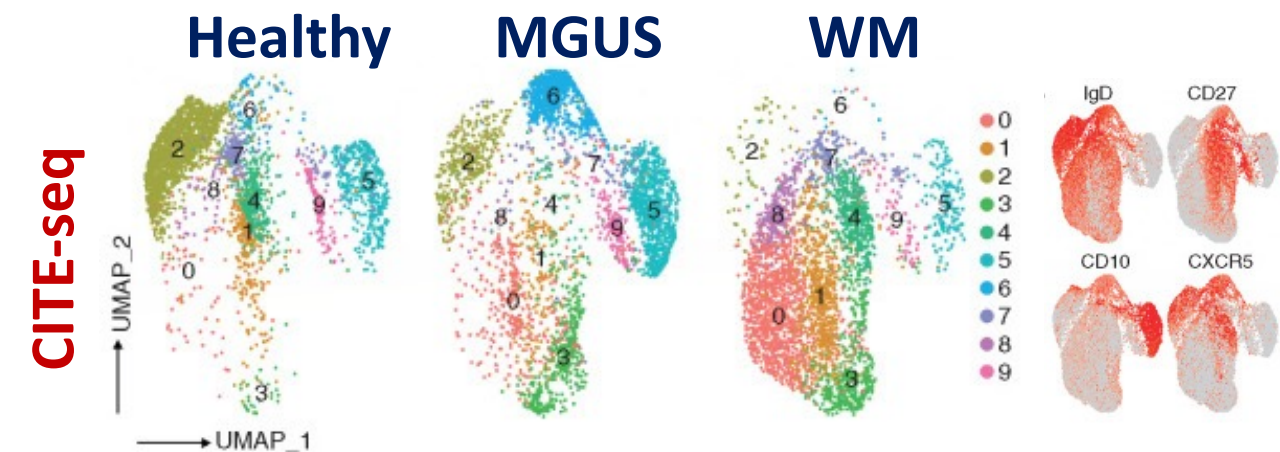
- increase in CXCR5^{neg} B cells
- decline in naïve B cells

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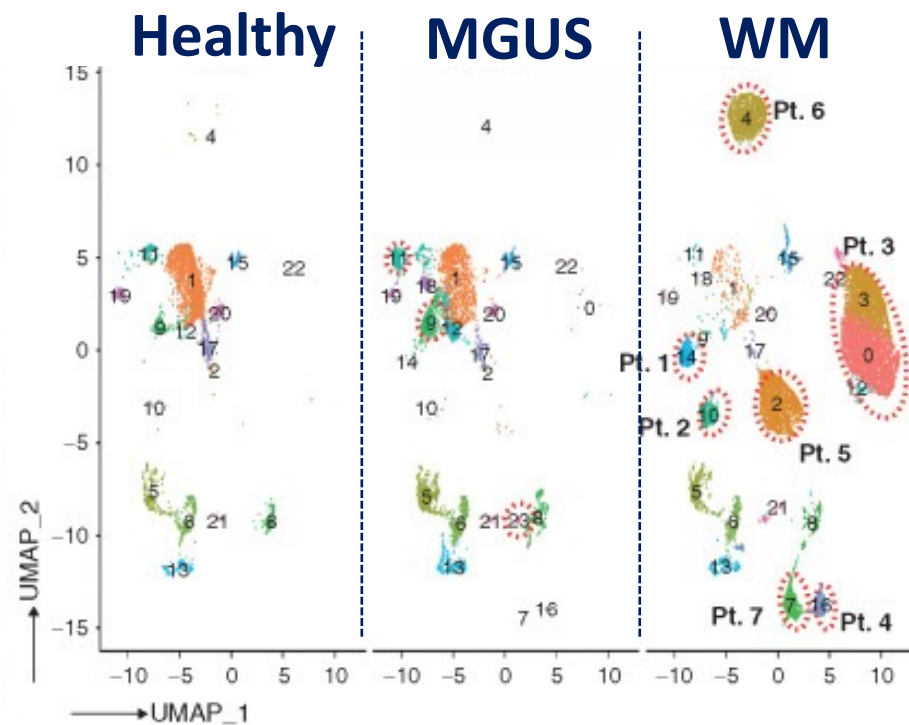
- increase in CXCR5^{neg} B cells
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CD19⁺ B cells: 10 distinct clusters

- progressive loss of IgD⁺CD27⁻ naïve B cells
- increase CXCR5^{neg} B cells

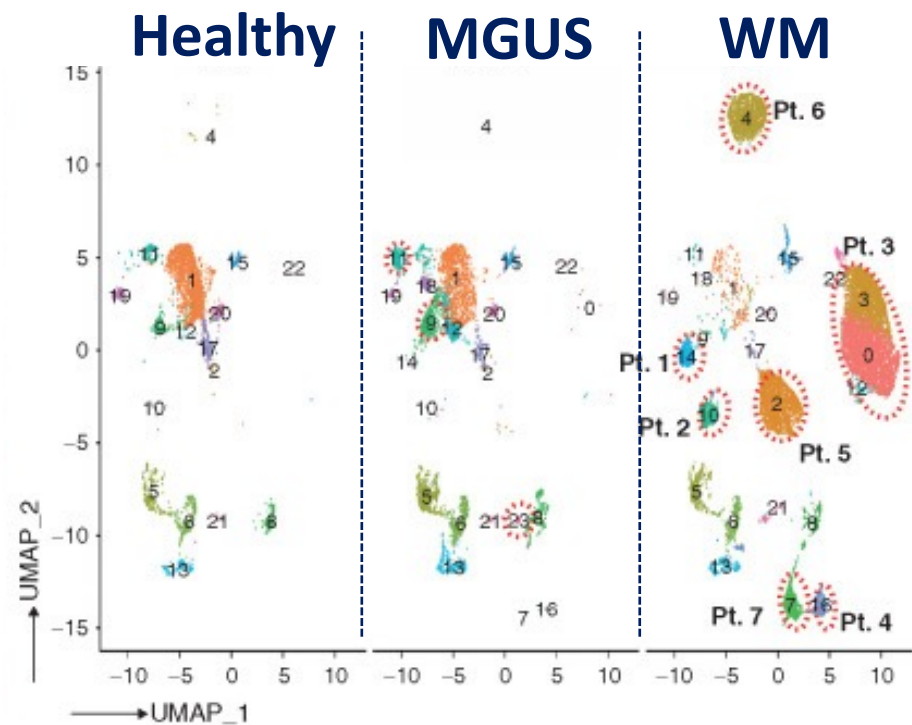
CD19⁺ B Cells: Changes Going from HD to MGUS to WM



- CD19⁺ B cell and transcriptome
 - existence of distinct clusters
 - each patient is transcriptionally distinct

Top genes characterizing specific clones:
EZH2, CD79b, CXCR4, BCL2, and LT- β /TNF-c

CD19⁺ B Cells: Changes Going from HD to MGUS to WM

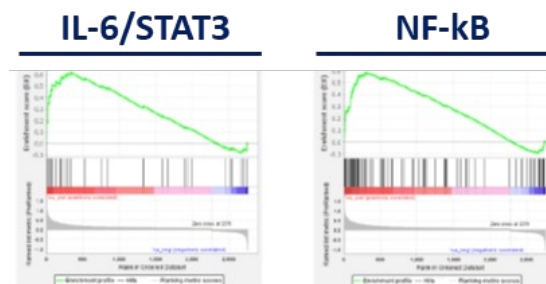
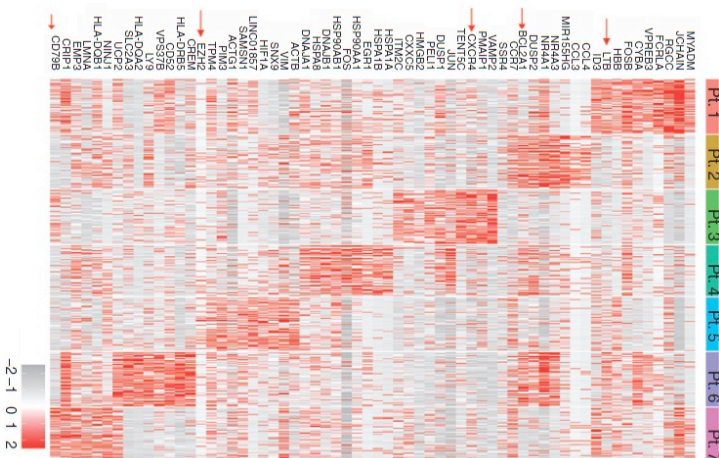


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Overall:

- B cells from WM and IgM MGUS patients transcriptionally distinct vs HDs



Top pathways
increased in WM and IgM MGUS B cells
included NF-kB, IL6/STAT3

Take-Home Points - I -

MYD88 mutation represents a pre-neoplastic event

Low frequency of MYD88 in HSCs: hard to think they act as Cancer-SCs

Progression to WM is driven by both the cellular origin of the MYD88^{L265P}
and the emergence of cooperating genetic alterations
(i.e.: BCL2; BCR; CXCR4^{C1013G})

The Importance of Translational Research in Defining Mechanisms Underlying Waldenström's Macroglobulinemia Biology

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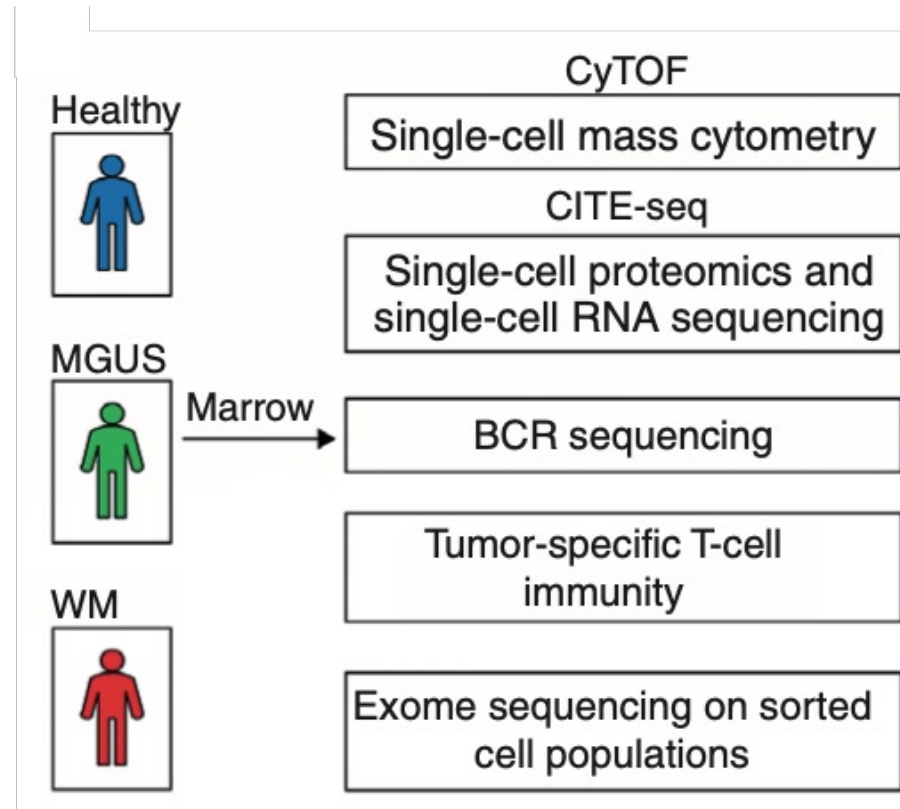
- ✓ *Bone marrow microenvironment*
 - ✓ *Myeloid compartment*
 - ✓ *Innate cells*
 - ✓ *T-cells*

How to Better Know and Investigate the Bone Marrow Milieu

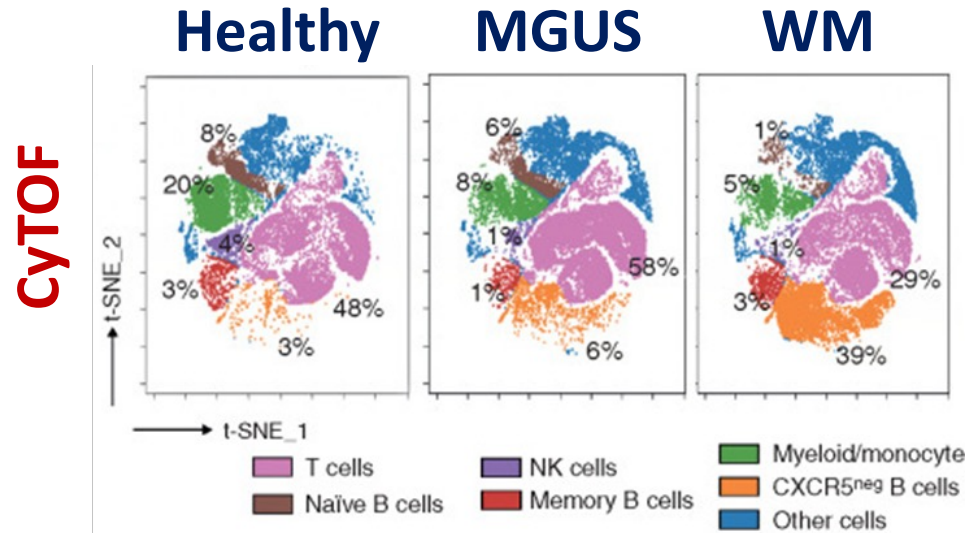
Going from IgM-MGUS towards WM?

How to Better Know and Investigate the Bone Marrow Milieu

Going from IgM-MGUS towards WM?

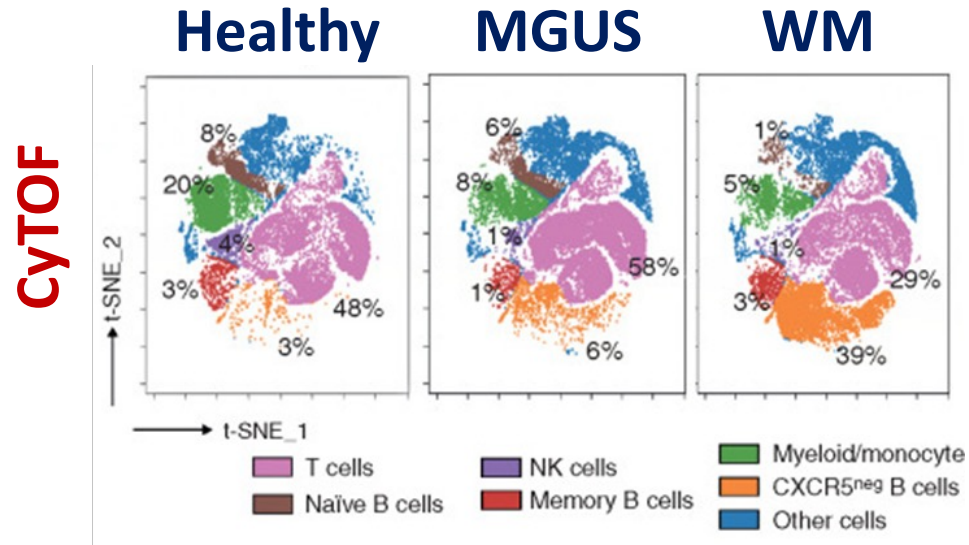


Changes in the Bone Marrow Microenvironment Comparing HDs, IgM MGUS, and WM

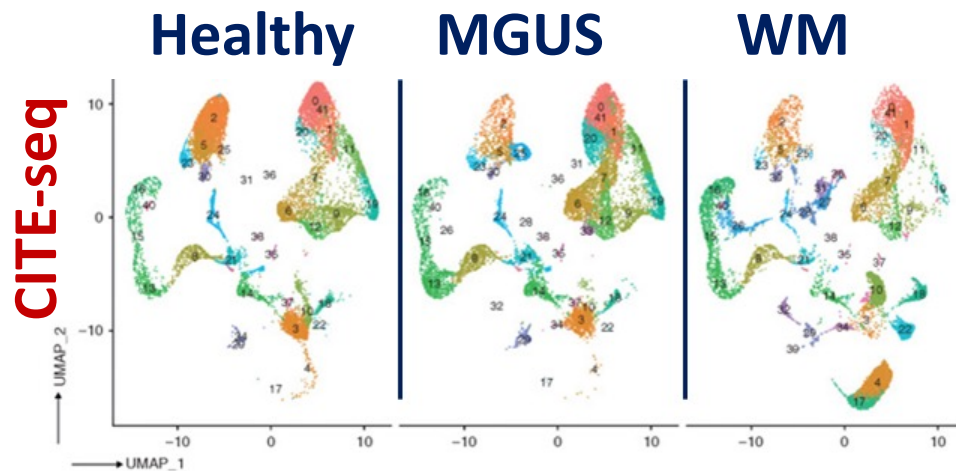


- HD to IgM-MGUS to WM:
- increase in CXCR5^{NEG} B cells in WM
 - decline in myeloid cells
 - increase in BM-T cells in MGUS

Changes in the Bone Marrow Microenvironment Comparing HDs, IgM MGUS, and WM

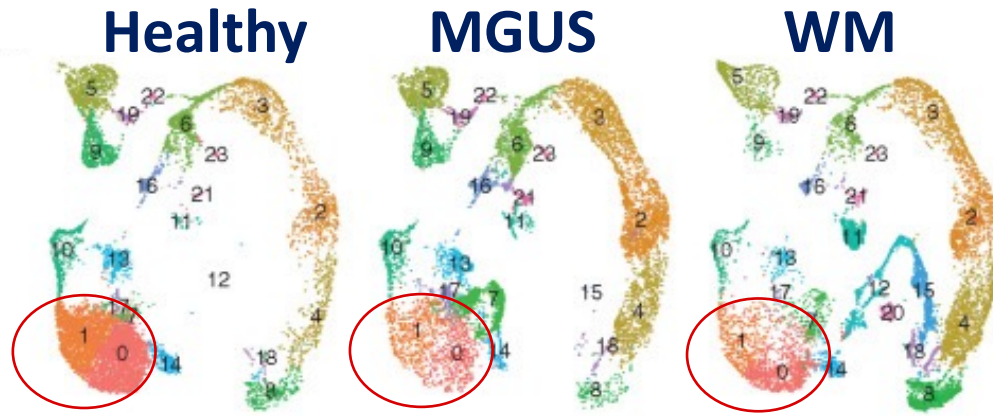


- HD to IgM-MGUS to WM:
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Overall:
BM cells in WM and IgM-MGUS
are characterized by alterations
in several hematopoietic lineages vs HD

Changes in the Myeloid Compartment

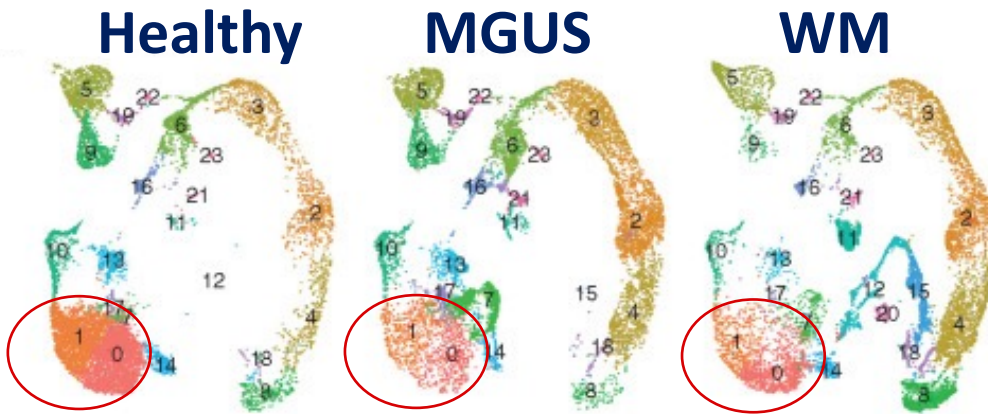


CD19-/CD3-depleted cells:

CD14+/CD11c+ cells

Both IgM-MGUS and WM showed
- decline in classic monocytes (cluster #1)

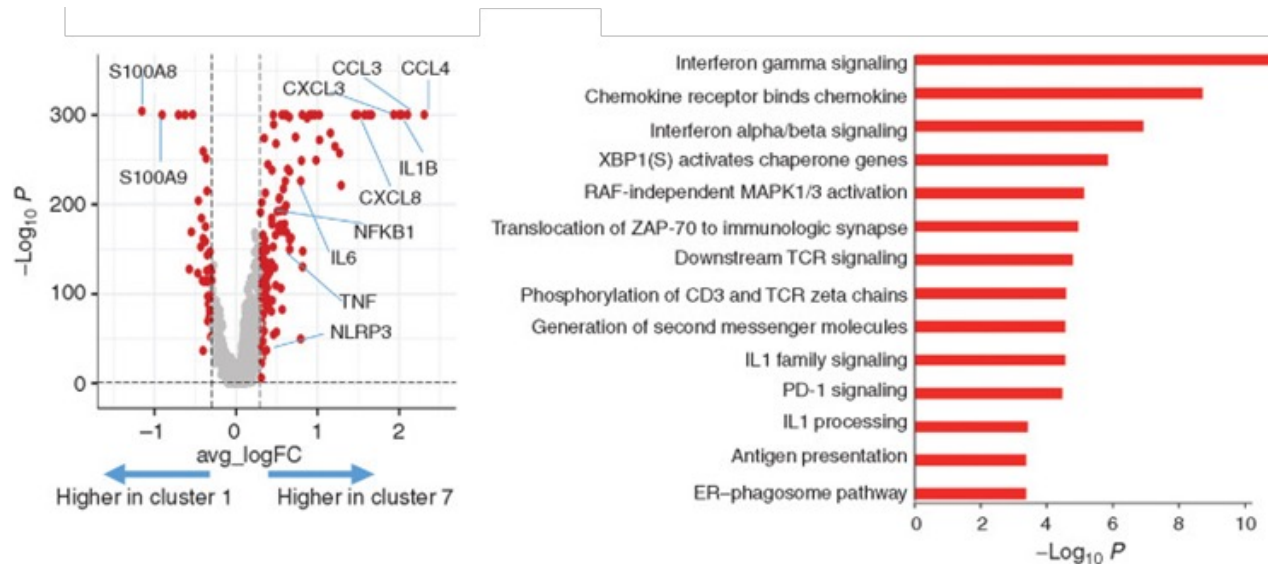
Changes in the Myeloid Compartment



CD19-/CD3-depleted cells:

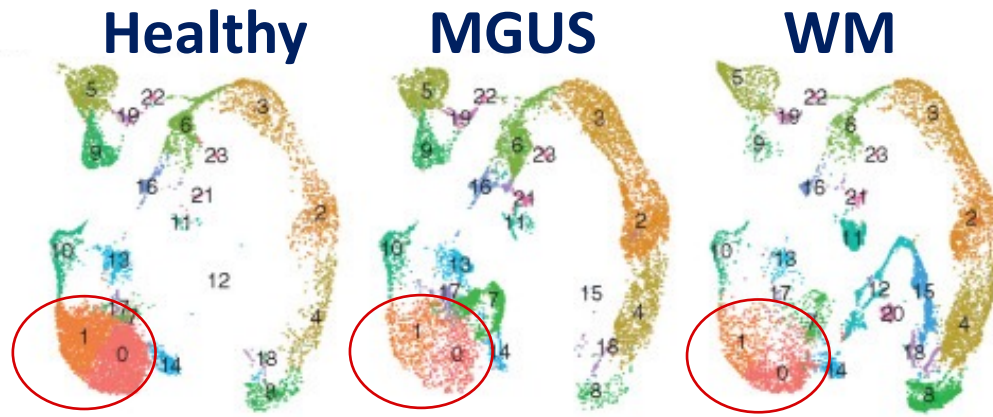
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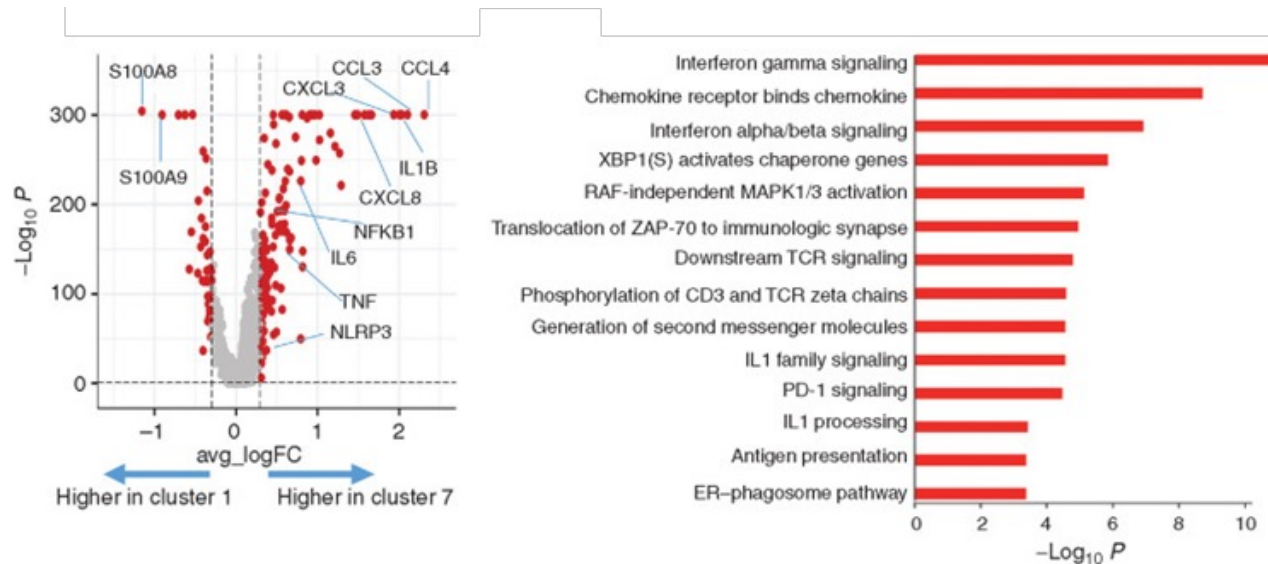


Myeloid population:
distinct genomic signature
of inflammation-associated genes (IL1 β ,
CCL4, CCL3, IL6, NLRP3, CXCL3) (> in MGUS)

Changes in the Myeloid Compartment



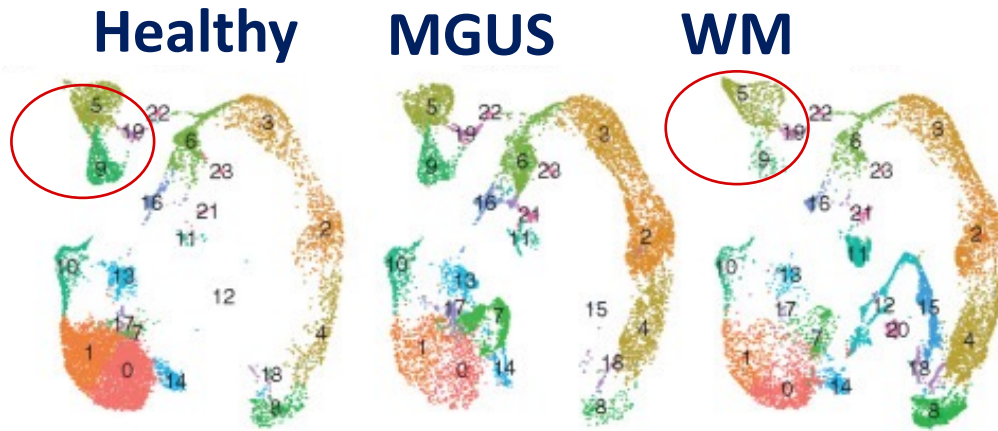
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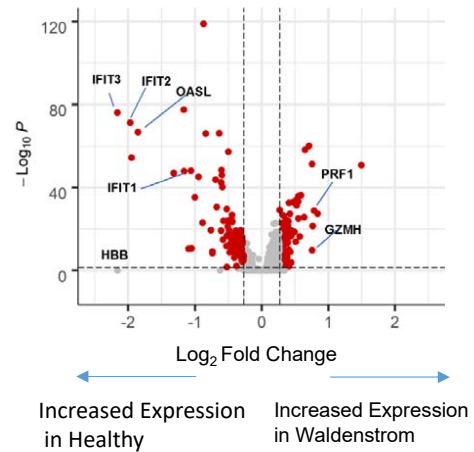
Myeloid population:
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Together, these data suggest that activation of myeloid inflammation is an early feature of MGUS, occurring before the evolution of the malignant clone

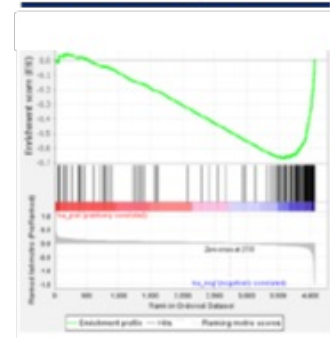
Changes in Innate Cells



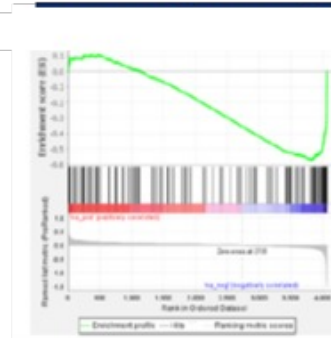
- CD3-/CD56+ NK clusters:
- prominent alterations in WM
 - greater expression of lytic/exhaustion markers
 - loss of IFN-signature



TNF- α signaling

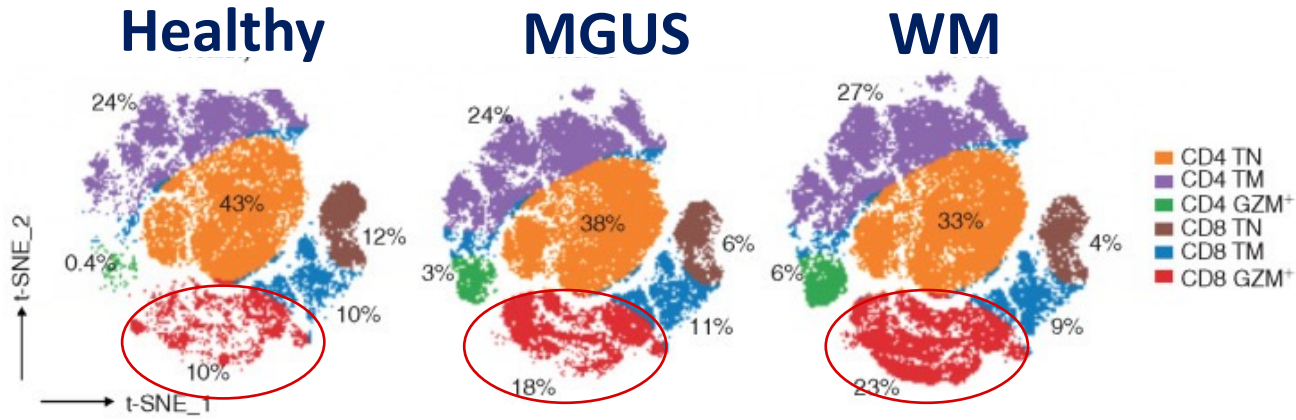


IFN-signaling



Immune exhaustion and dysfunction in NK cells with evolution of WM

Changes in T Cells

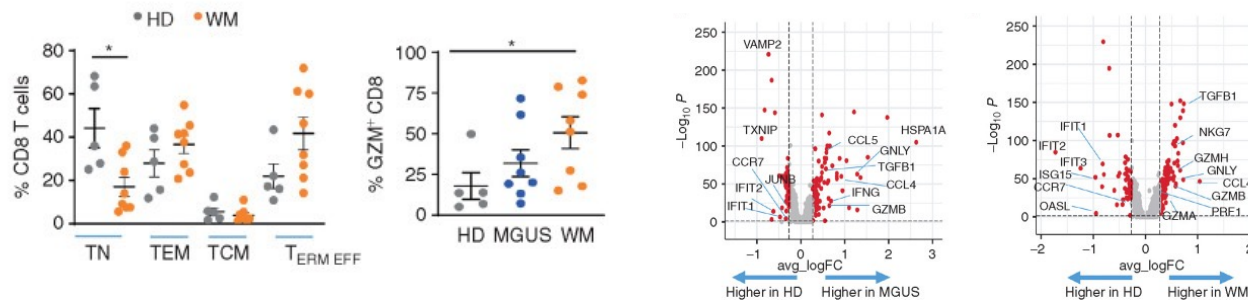


T-cell niche:

- decrease in naïve CD8 T cells
- increase CD8+/Granzyme+ T cells

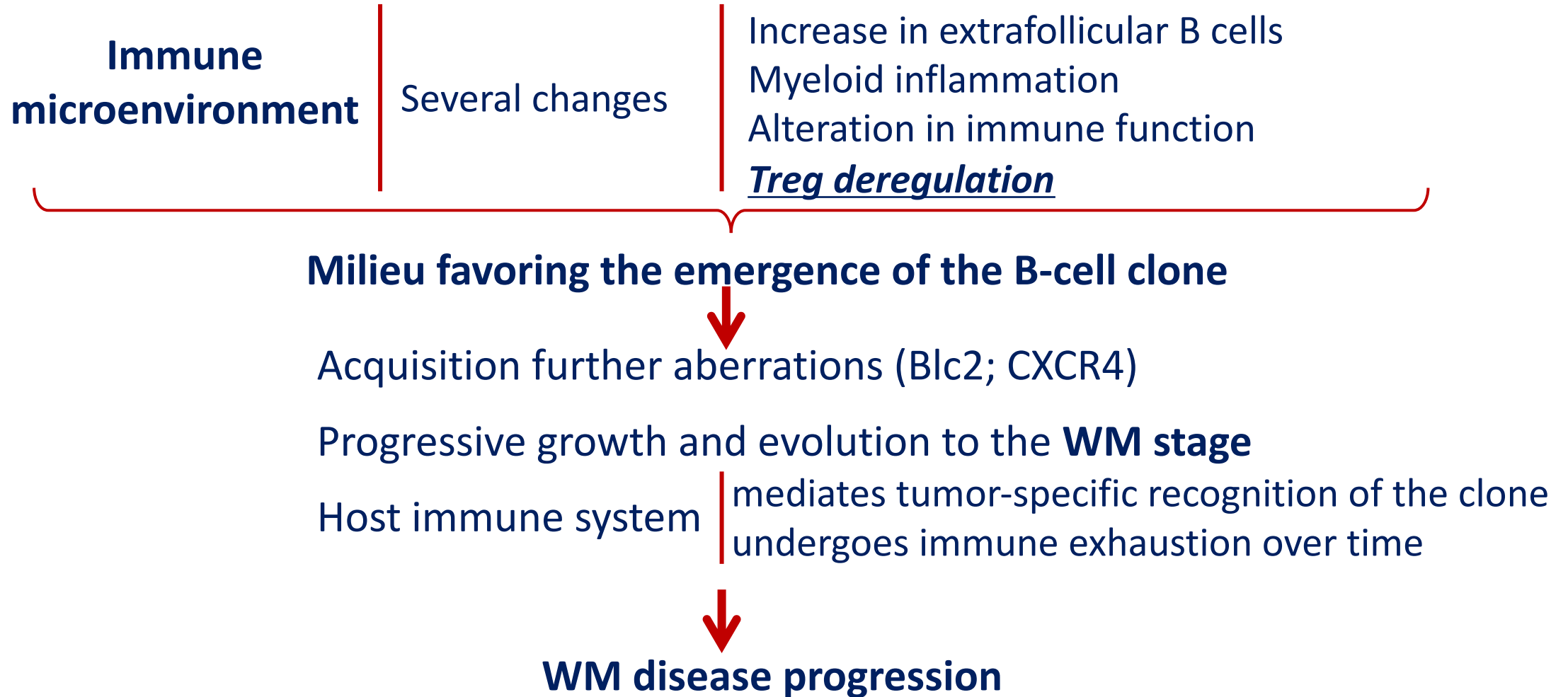
Most prominent transcriptome changes in CD8+T cells:

- increased lytic genes and markers associated with T-cell exhaustion in WM/MGUS
- loss of IFN-response genes



Changes in the T-cell compartment begin early in MGUS, before the establishment of progressive malignant clone, and are characterized by progressive depletion of naïve T cells and enrichment of terminal effector T cells

Take-Home Points - II -



The Importance of Translational Research in Defining Mechanisms Underlying Waldenström's Macroglobulinemia Biology

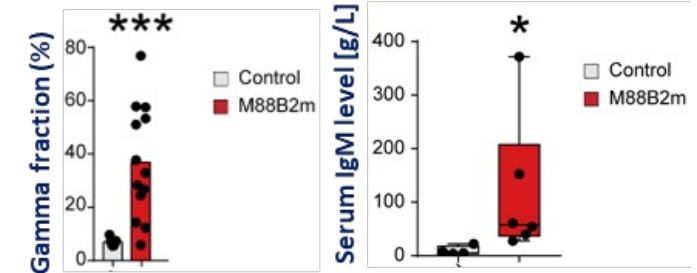
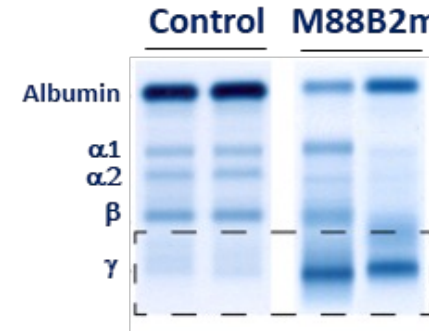
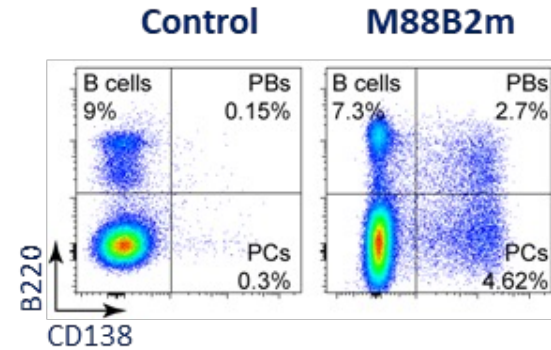
Tumor Clone

Bone Marrow Niche

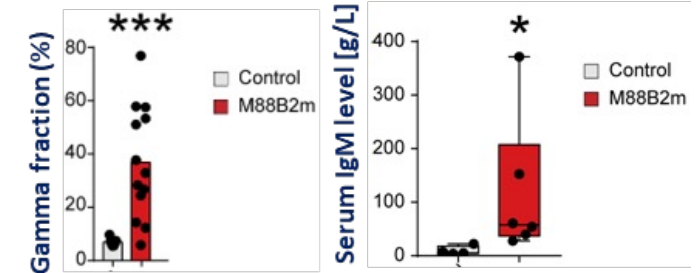
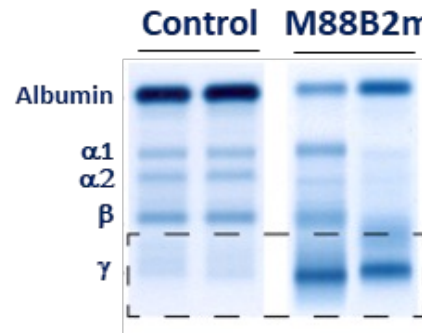
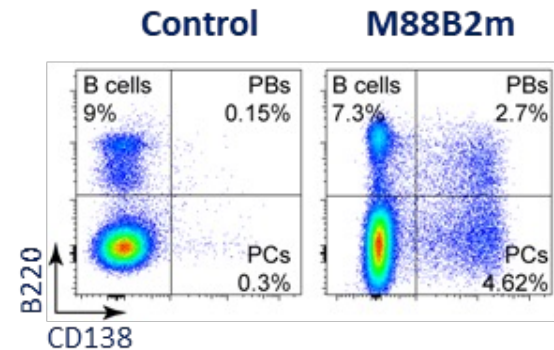
Tumor Cell-to-Bone Marrow Niche Interaction

***WM Cell-to-TREG cell Interaction
Via
CD40-CD40 ligand***

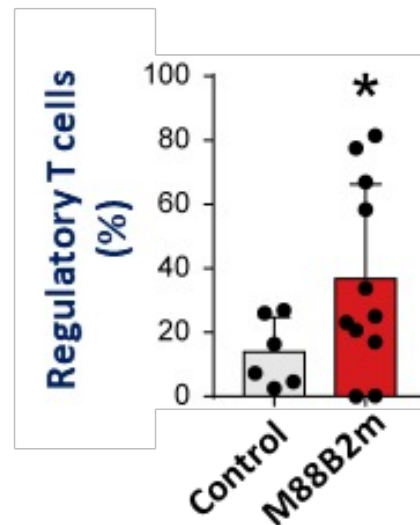
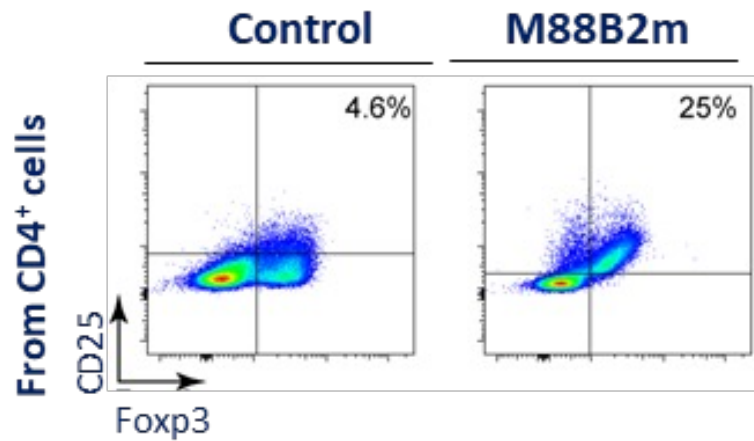
Transgenic Murine Lymphoplasmacytic/WM Model Points Towards a Role of Treg in Supporting WM Biology



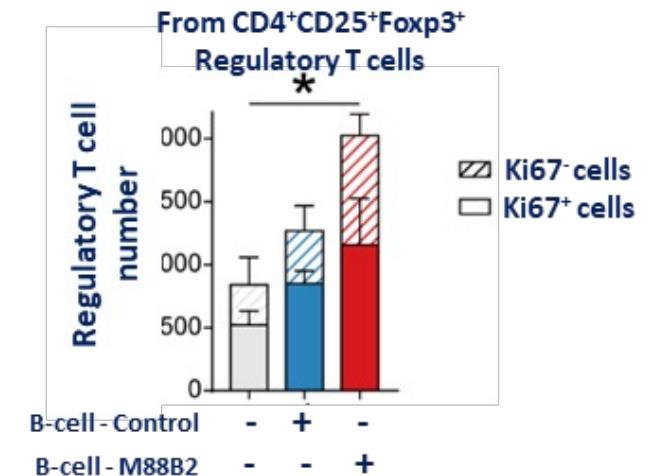
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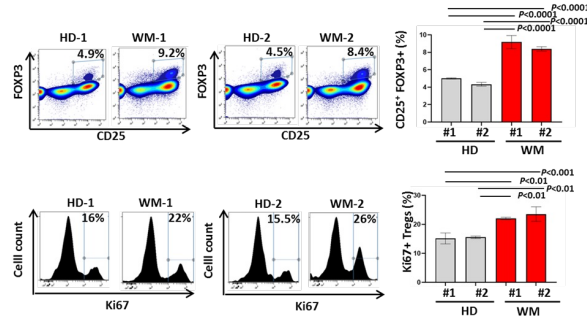
Higher levels of Treg cells in the M88B2m model vs control mice



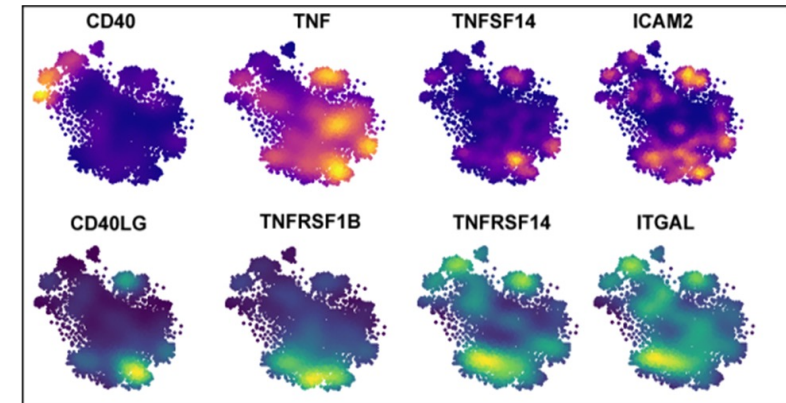
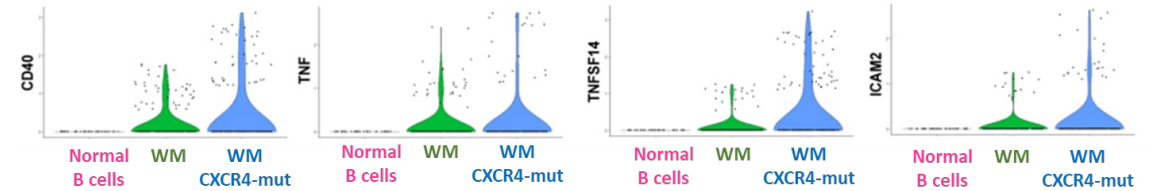
WM murine cells recruited a higher number of more abundant Ki67+ Treg cells



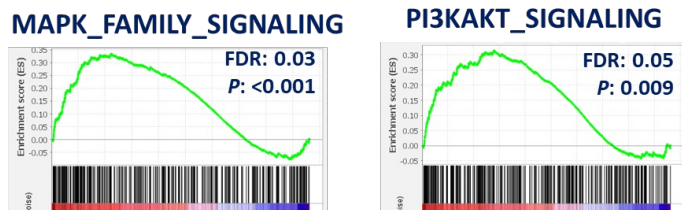
Primary WM Cells: Impact on Treg-Induction and Treg-Proliferation



Enhanced Treg-proliferation exerted by WM primary cells as compared to normal-B cells

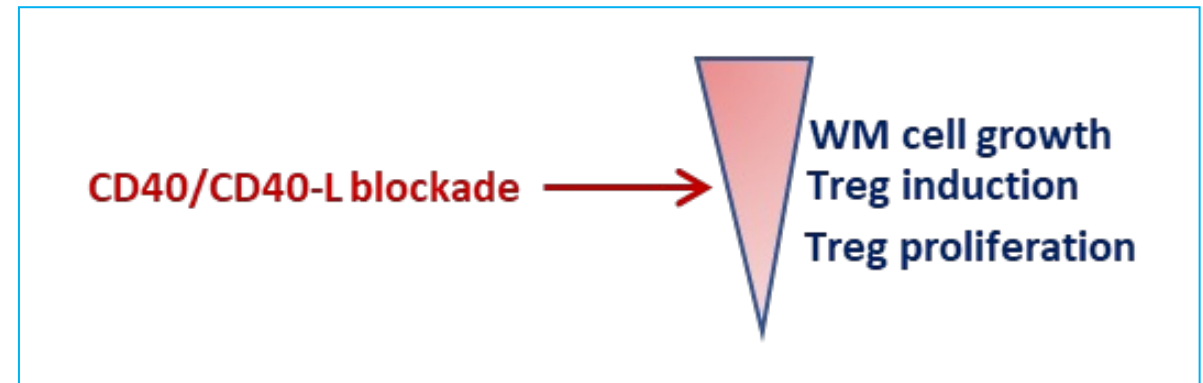
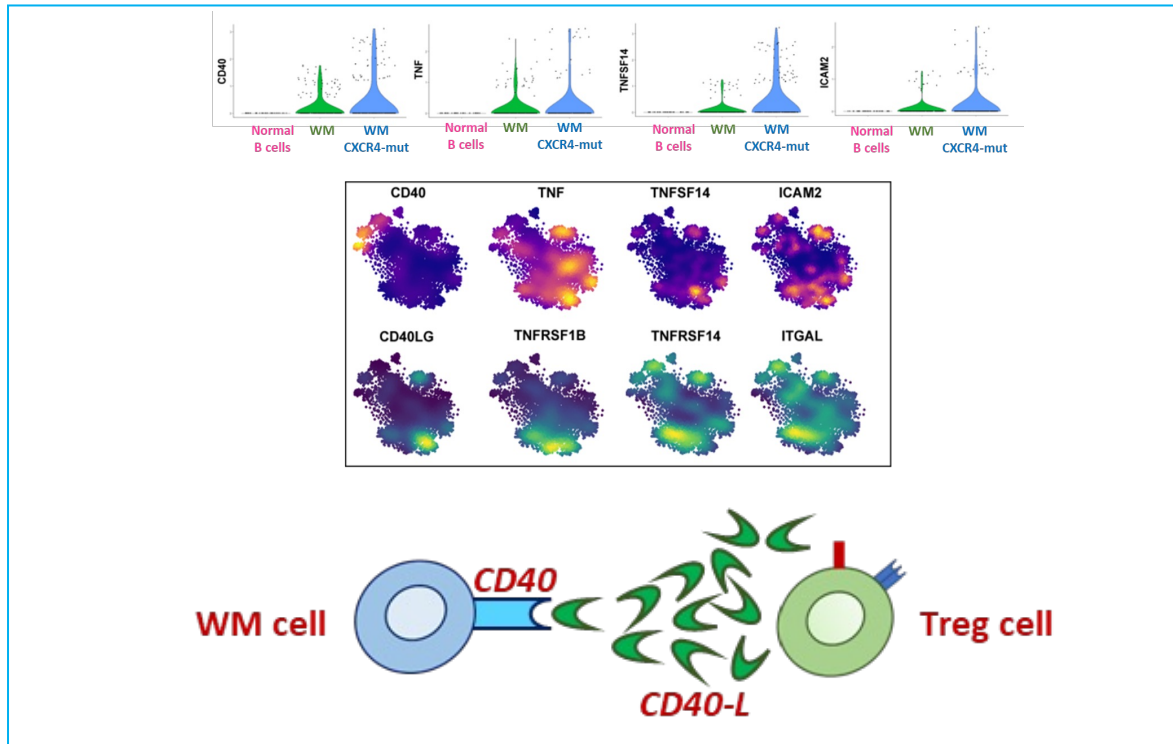
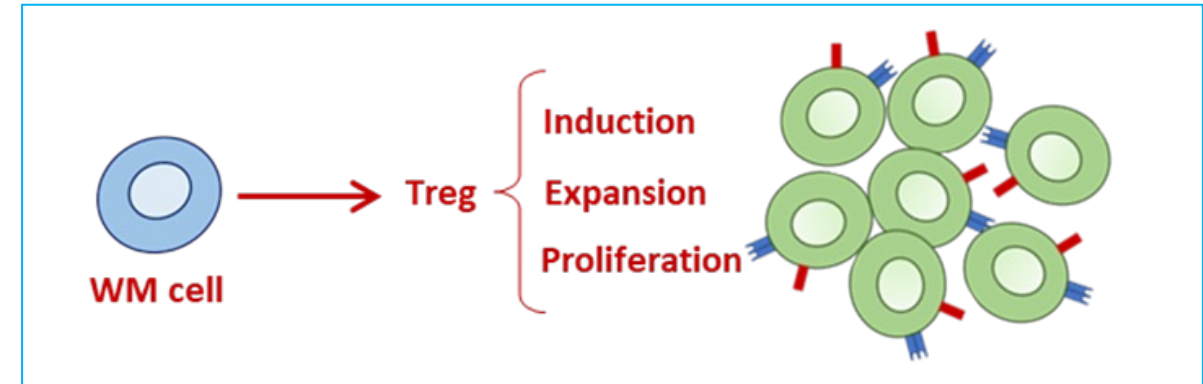
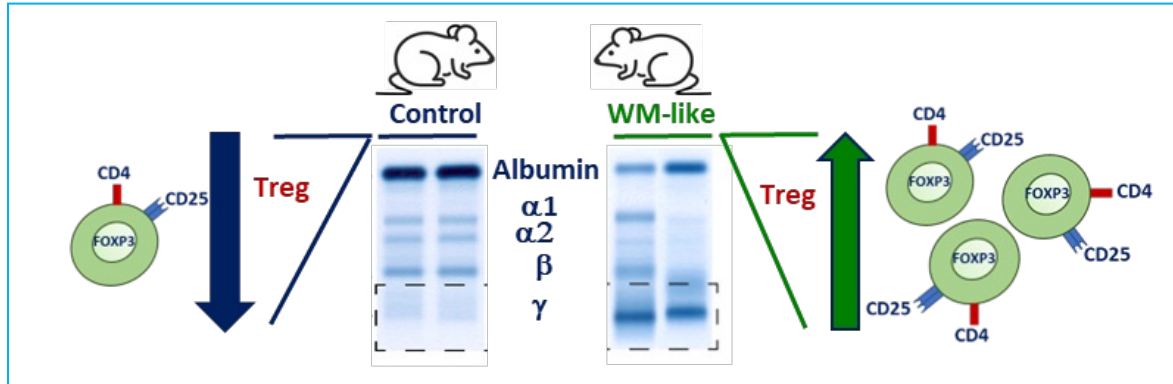


CD40: restricted on B-cells
CD40L: Treg-counterpart

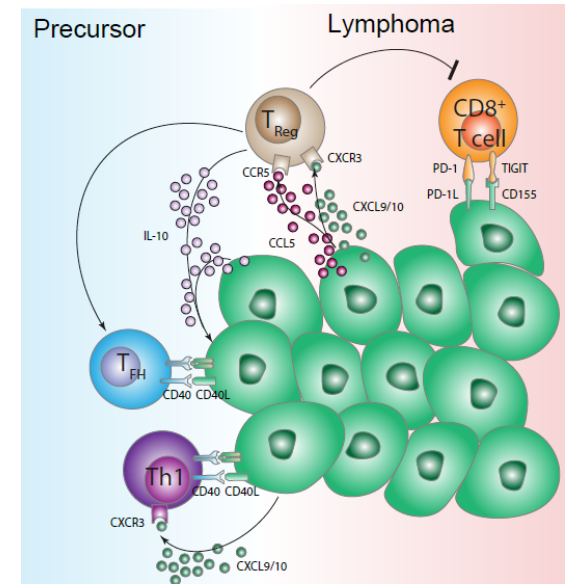
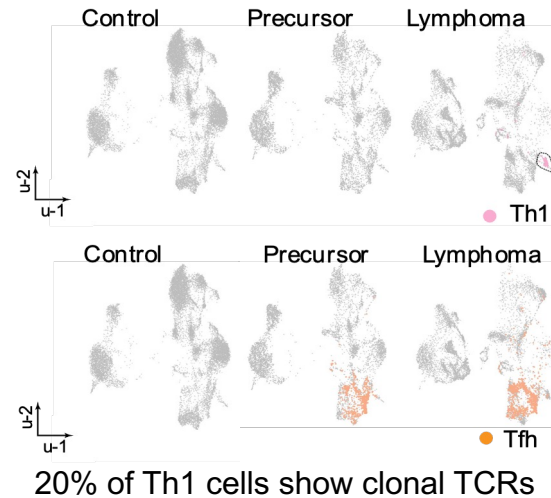
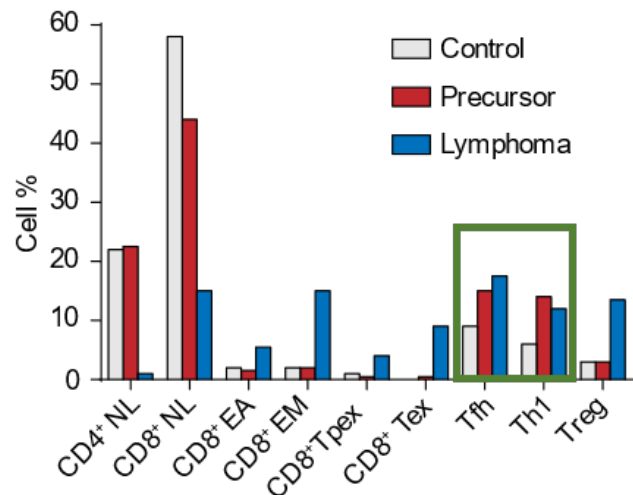
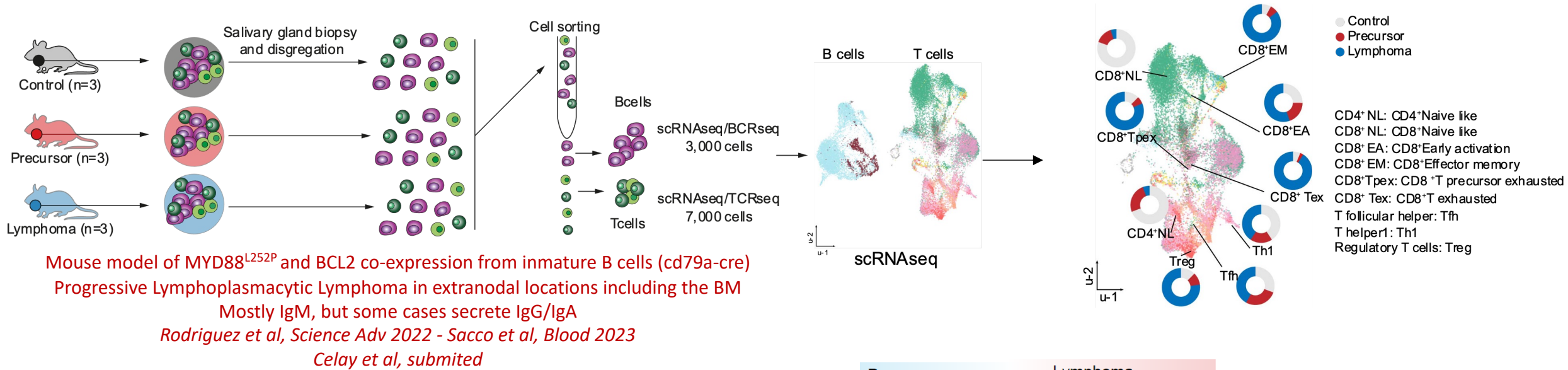


Enrichment for MAPK- and PI3K/AKT-related genes in WM-versus HD-derived Tregs

Treg Cells Interact with WM Cells via CD40/CD40-Ligand Axis



WM Cells Depend on CD4+ Th1 Cells for Survival via CD40:CD40L From Early Stages



Ion Celay, PhD
José A. Martinez-Climinet MD, PhD
 Univ. Navarra, Pamplona, Spain

Take-Home Points - III -

Halting CD40/CD40-ligand interaction may represent a strategy to inhibit the Treg-mediated immunosuppressive in WM

Translational Research: Novel Drug Discovery

MOLECULES	PEER-REVIEWED PUBLICATION	INITIATED CLINICAL TRIALS	PHASE
BMS936564 Anti-CXCR4 MoAb	Roccaro AM, Sacco A, Jimenez C, et al. Blood, 2014	BMS936564+Len+Dex (MM) (Pending in WM)	I
CARFILZOMIB proteasome inhibitor	Sacco A, Aujay M, Morgan B..., Roccaro AM*, Ghobrial IM* (*Co-last Authors) Clin Cancer Res, 2012	Carfilzomib + Rituximab + Dexamethasone	II
		Carfilzomib + Belinostat	I
		Carfilzomib	II
OPROZOMIB (ONX0912) proteasome inhibitor	Roccaro AM, Sacco A, Aujay M, et al. Blood, 2010	Oprozomib	II
PANOBINOSTAT (LBH589) HDAC inhibitor	Roccaro AM, Sacco A, Jia X, et al. Blood, 2010	Panobinostat	II
BORTEZOMIB proteasome inhibitor	Roccaro AM, Hideshima T, Raje N, et al. Cancer Res, 2006	376 Bortezomib-based clinical trials - MM 31 Bortezomib-based clinical trials - WM	II/III

Translational Research: Novel Drug Discovery

MOLECULES	PEER-REVIEWED PUBLICATION	INITIATED CLINICAL TRIALS	PHASE
OLAPTESED PEGOL Oligonucleotide anti-SDF1	Roccaro AM, Sacco A, et al. Cell Reports, 2014	ola-PEG + Dex + Bortezomib (MM)	II
		ola-PEG + Rituximab + Bendamustine (CLL)	II
EVEROLIMUS (RAD001) mTOR inhibitor	Roccaro AM, Sacco A, Jia X, et al Clin Cancer Res 2012	Everolimus+Bortezomib+/-Rituximab	I/II
		Everolimus +/- Bortezomib+Ritux+Dex	I/II
		Everolimus (first line)	II
		Everolimus + Lenalidomide	I/II
		Everolimus + Panobinostat	I/II
		Everolimus + Bortezomib	I
		Everolimus + Sorafenib	I/II

Overall Summary

Tumor clone

Bone marrow niche

Tumor cell-to-Bone marrow niche interaction



Novel insight into Waldenström's Macroglobulinemia biology

Identification of novel targets for novel therapeutical interventions

Acknowledgements



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University of Genoa

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