

Viagenpumatulcel-L (HS-110) Bolsters Response to Nivolumab Therapy in Advanced Lung Adenocarcinoma: Preliminary Data From The DURGA Trial

Daniel Morgensztern MD, Washington University School of Medicine, St. Louis, MO, USA

Wael A. Harb MD, Horizon Oncology, Lafayette, IN, USA

Vamsidhar Velcheti, MD, Cleveland Clinic, Cleveland, OH, USA

Kurt A. Schalper MD, Yale University Translational Immuno-Oncology Laboratory, New Haven, CT, USA

Melissa L. Price PhD, S. Brandon Early, MS, Taylor H. Schreiber MD, PhD, Heat Biologics, Inc., Durham, NC, USA

Presentation Number: 4650, Viagenpumatulcel-L Bolsters Response to Nivolumab Therapy in Advanced Lung Adenocarcinoma: Preliminary Data From The DURGA Trial – Daniel Morgensztern, MD

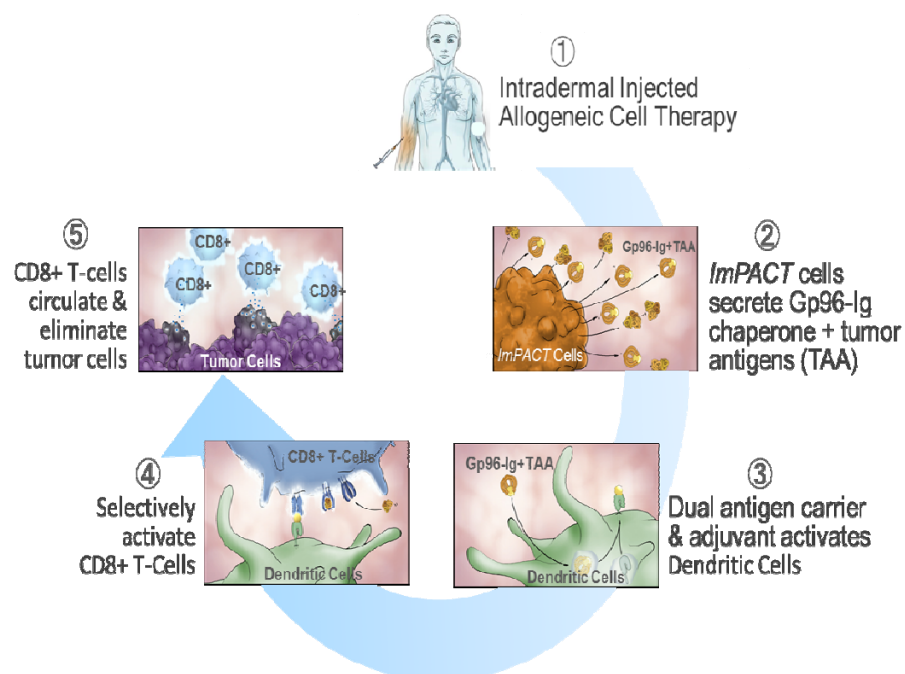


Disclosures:

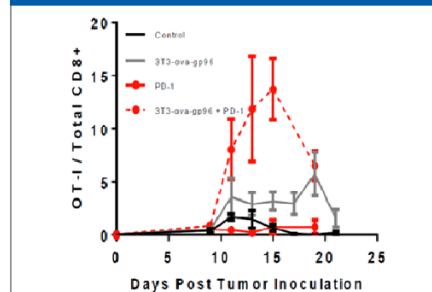
Advisory Board: Bristol-Myers Squibb

Presentation Number: 4650, Viagenpumatulcel-L Bolsters Response to Nivolumab Therapy in Advanced Lung Adenocarcinoma: Preliminary Data From The DURGA Trial – Daniel Morgensztern, MD

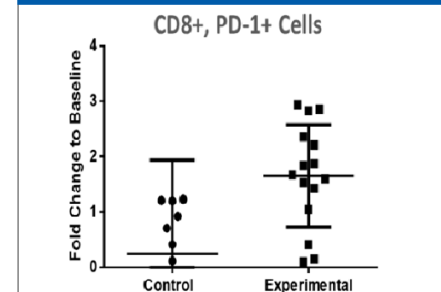
Viagenpumatucl-L Vaccine Background



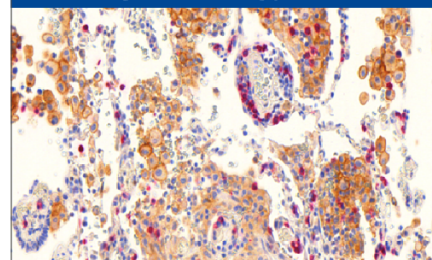
1 Synergy between ImPACT + anti-PD-1 Mab



2 HS-110 upregulates PD-1 on CD8+ T cells



3 Strong PD-L1 staining post HS-110



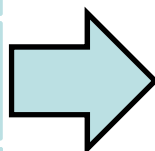
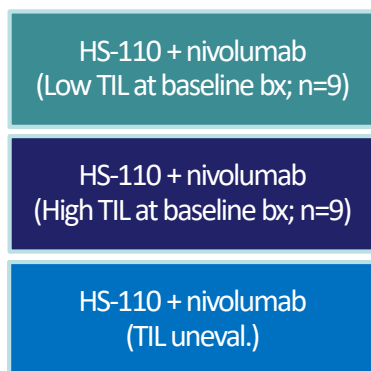
1. Schreiber T.H., et al. *Kayastane* 2014; 2. Cohen, R.B. et al. *ASCO* 2015;

- 1 Preclinical studies combining ImPACT (gp-96) + Anti-PD-1 Mab
- 2 Clinical data: vaccine upregulates PD-1 on CD8+ T cells in patients
- 3 Patient tumor biopsies show strong PD-L1 staining post vaccine

Presentation Number: 4650, Viagenpumatucl-L Bolsters Response to Nivolumab Therapy in Advanced Lung Adenocarcinoma: Preliminary Data From The DURGA Trial – Daniel Morgensztern, MD

DURGA Design

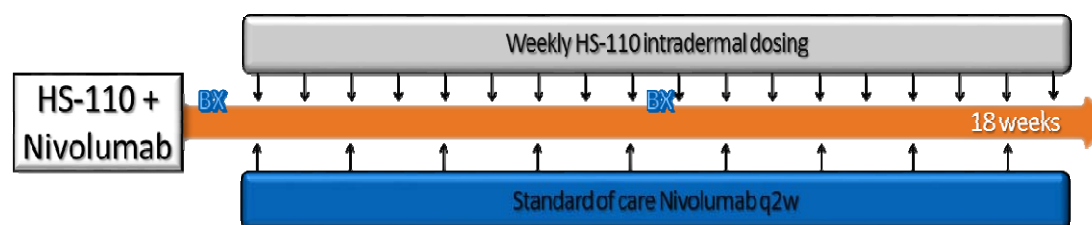
Phase 1b



Phase 2



- 2L+ lung adenocarcinoma
- No prior checkpoint or cancer vaccine
- Primary Endpoints: Safety (phase 1b) and ORR (phase 2)
- Secondary Endpoints: PFS, OS, and immune response correlates



Presentation Number: 4650, Viagenpumatucel-L Bolsters Response to Nivolumab Therapy in Advanced Lung Adenocarcinoma: Preliminary Data From The DURGA Trial – Daniel Morgensztern, MD

Demographics and Safety

	N = 8
Sex: n (%)	Female: 6 (75.0%) Male: 2 (25.0%)
Age: median (range)	64 (54–87) years
Prior Treatments: n (%)	
1 Line	5 (62.5%)
2 Lines	0 (0.0%)
3+ Lines	3 (37.5%)
Smoking Status: n (%)	
Current	3 (37.5%)
Former	4 (50.0%)
Never	1 (12.5%)

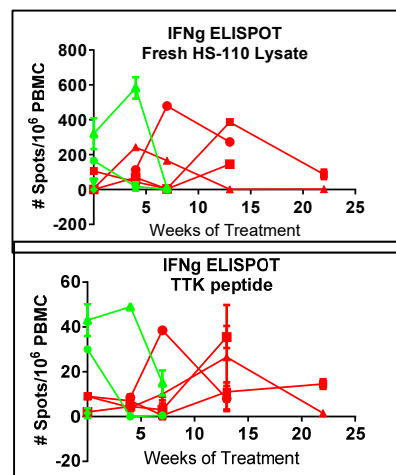
AE Preferred Term	N=8 n (%)
Cough	2 (25%)
Nausea	2 (25%)
Rash	2 (25%)
Sinus congestion	2 (25%)
ALL OTHERS: n=1 (12.5%) each Anemia, atrial fibrillation, constipation, decreased appetite, diarrhea, dizziness, epistaxis, herpes zoster, hyperkalemia, hypokalemia, hyponatremia, pulmonary embolism, rash, thrombocytopenia, vomiting	

Immune Response

1. Tumor immunohistochemistry

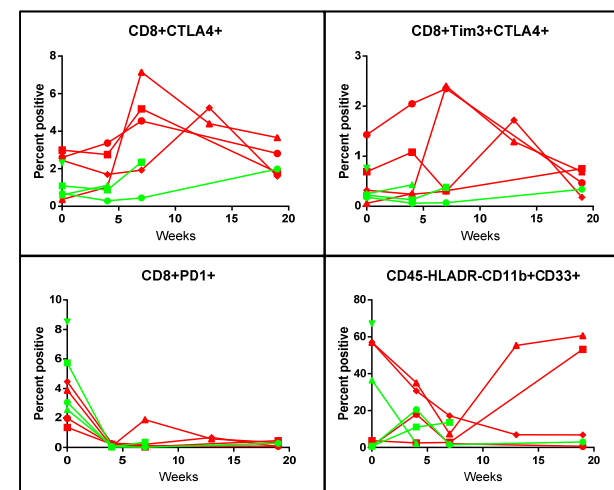
	High TIL (>10% CD8+)	Low TIL (≤10% CD8+)
Baseline	2	2
Week 10	2	0
Unevaluable: 4 baseline; 1 Week 10		

2. Antigen-specific ELISPOT



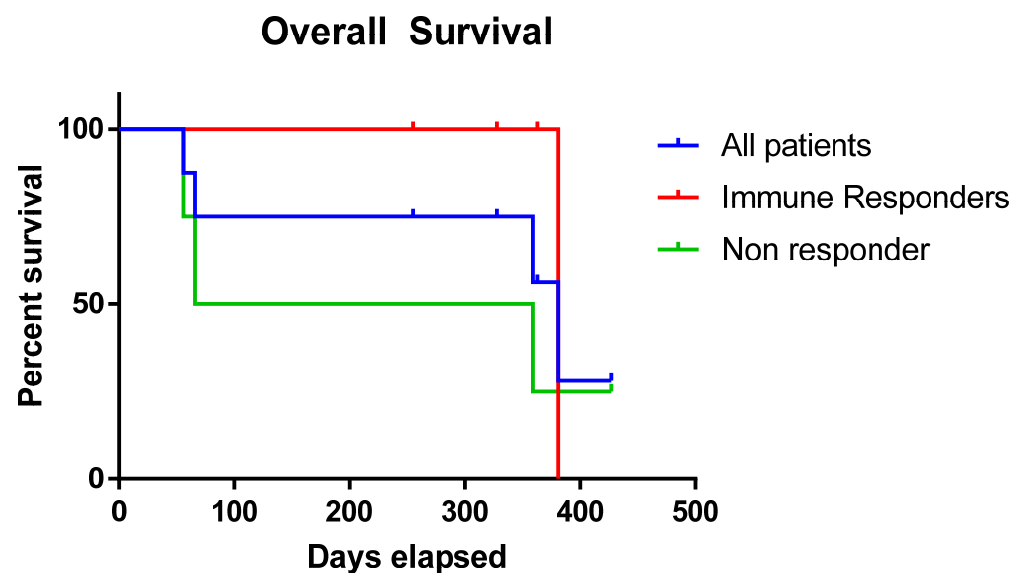
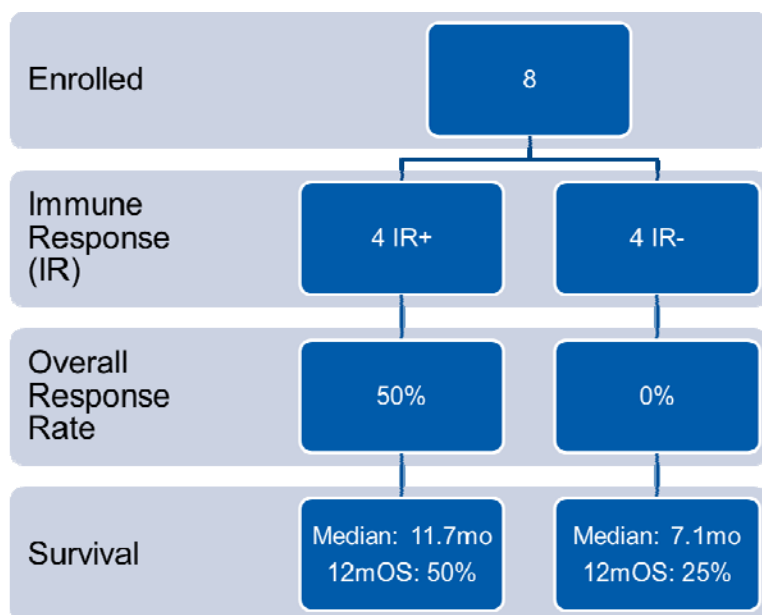
Immune Responder ————
Non immune responder ————

3. Peripheral blood flow cytometry



Doubling of IFNγ-secreting CD8 cells by ELISPOT defines “immune responder”

Efficacy & Survival



Presentation Number: 4650, Viagenpumatulcel-L Bolsters Response to Nivolumab Therapy in Advanced Lung Adenocarcinoma: Preliminary Data From The DURGA Trial – Daniel Morgensztern, MD

Conclusions and Future Directions

- There have been no additional toxicities for combination of Viagenpumatucl-L plus nivolumab compared to existing data on single agent immune checkpoint inhibitors alone.
- Immune responses may correlate with clinical efficacy
- The phase 1b part of the study is still ongoing and the expansion phase will be determined based on the preliminary ORR
- Additional combinations with chemotherapy, anti-CTLA-4 and other T-cell co-stimulators being considered
- Manufacturing started for the second generation vaccine *ComPACT*, which incorporates OX40-L costimulatory molecule