

STING Pathway and Cancer Therapy



WuXi AppTec Research Service Division, Oncology & Immunology Unit

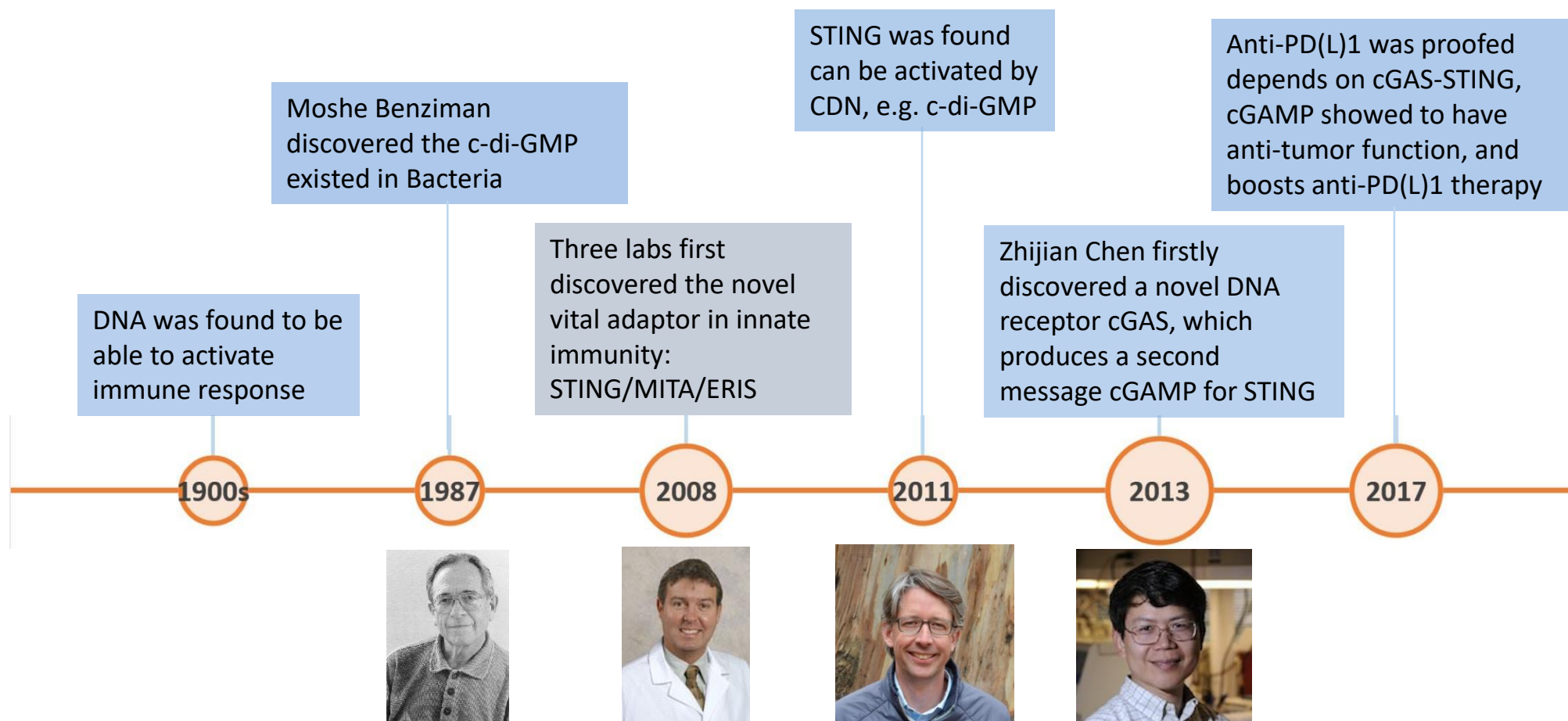


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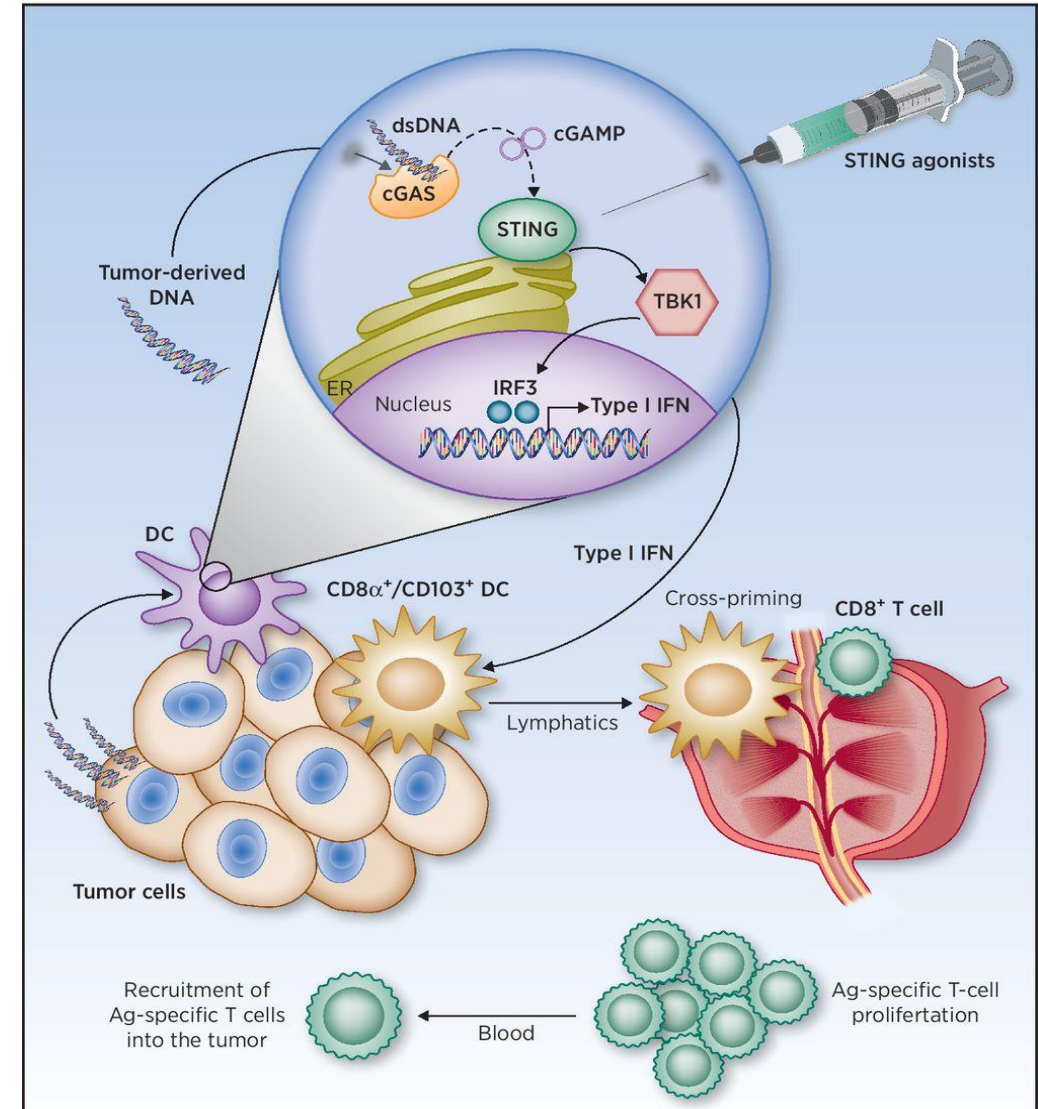
Background: The STING-cGAMP-cGAS chronicle



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- The diagram illustrates the STING pathway, a central mediator of innate and adaptive immunity. At the top, Bacteria, Protozoa, and Viruses are shown as pathogens. These pathogens enter the cell and interact with various sensors: CDG (cyclic di-GMP), DDX41, IFI16, DAI, and DNA-PK. These sensors activate the STING protein (green oval). STING then activates two main branches: one involving IKK and NF-κB, and another involving TBK-1, IRF-3, and STAT6. The activation of these pathways leads to the production of pro-inflammatory cytokines, IFN-β, and Th-2 cytokines. The diagram also shows the conversion of ATP to GTP by cGAS, which then produces cGAMP (cyclic-GMP-AMP) in the presence of DNA. cGAMP also activates STING. The chemical structures of CDG and cGAMP are shown. A red arrow points to STING with the text "Central mediator of innate and adaptive immunity".
- Therapeutic Advances in Vaccines**

Background: STING pathway and cancer therapy

- Activation of cGAS-STING signaling pathway can be deliberately stimulated by the use of direct STING agonists, when compounds are therapeutically administered into the tumor microenvironment.
- *in vivo* studies using gene-targeted mice demonstrated a crucial role of STING-dependent type I IFNs production, and its signaling on BATF3 (basic leucine zipper transcription factor ATF-3) lineage of DCs for spontaneous antitumor T-cell responses *in vivo* and recruitment of effector T cells into the tumor microenvironment.



Background: The current industrial pipelines on STING agonists

Clinical stage



preclinical stage

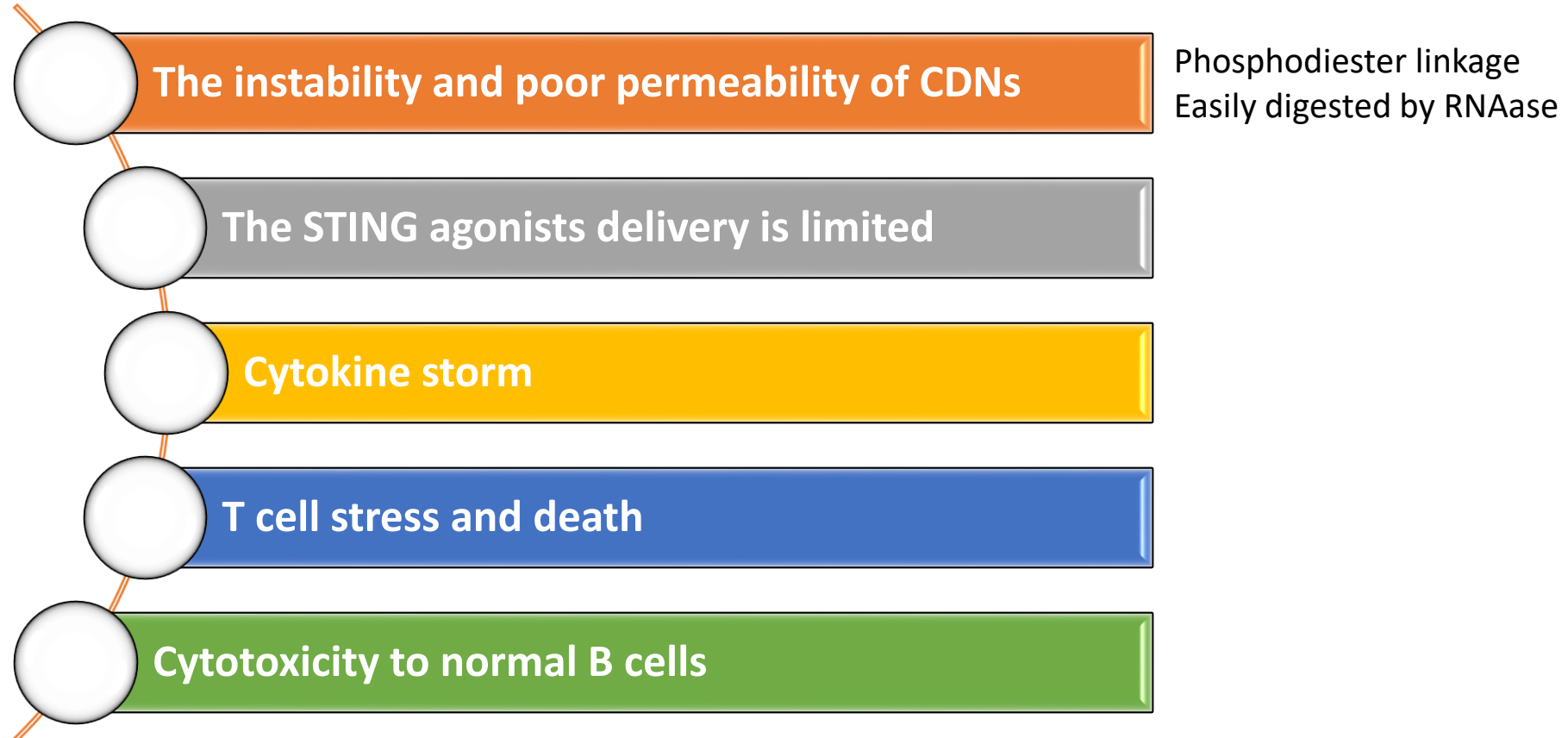


Drug discovery stage



Cited from Evaluated Pharma database

Background: The limitations and challenges of the STING agonists based therapies



Background: The current strategies to overcome the limitations of the first generation of STING agonists (CDNs)

Different formulation of the first generation of STING agonists (CDNs)

- Formulated cancer vaccines: STINGVAX, CT26, SCCFV^{II}, Panc02 **Aduro Biotech**
- Nanostructures+SB11285 **Spring Bank, iTeos therapeutics**
- ADC (Antibody drug conjugated): CRD5500 conjugated with Trastuzumab **Curadev**
SB11285 **Spring Bank**

The second generation of STING agonists: Non-CDN structure

- **GSK**: comp3 i.v
- **Curadev**: CRD5500, licensed to Takeda, i.v., s.c.

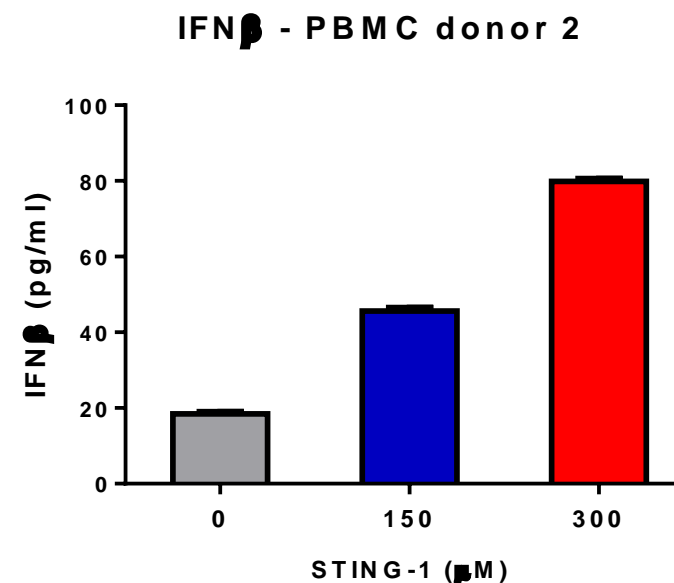
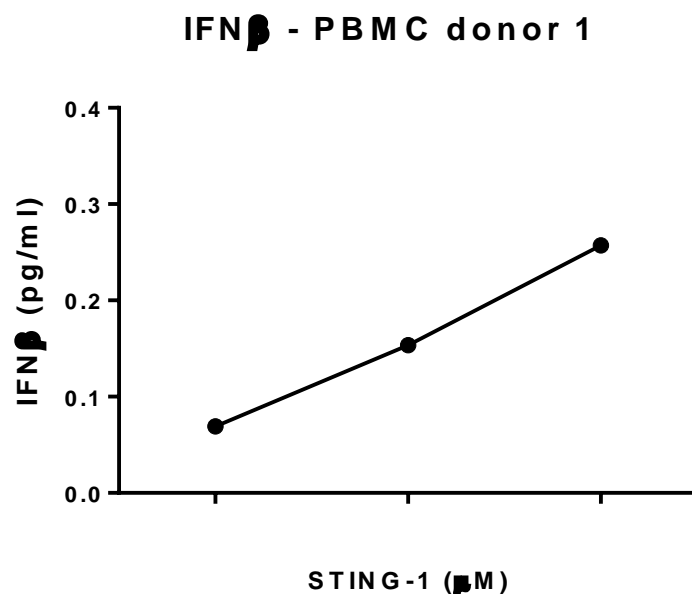
The STING pathway enhancer

- **Mavupharma**: MAVU-104 is a first-in-class, orally active, small molecule inhibitor of ENPP1, a phosphodiesterase that negatively regulates the STING (Stimulator of Interferon Genes) pathway.

Injection of viruses/bacteria to produce endogenous c-di-A/GMP

- IT Injection of engineered E. coli specifically engulfed by APCs, SYN1891 **Synlogic**
- IT Injection of adenovirus: **Venn Therapeutics**

STING pathway activation readout: the production of IFN β

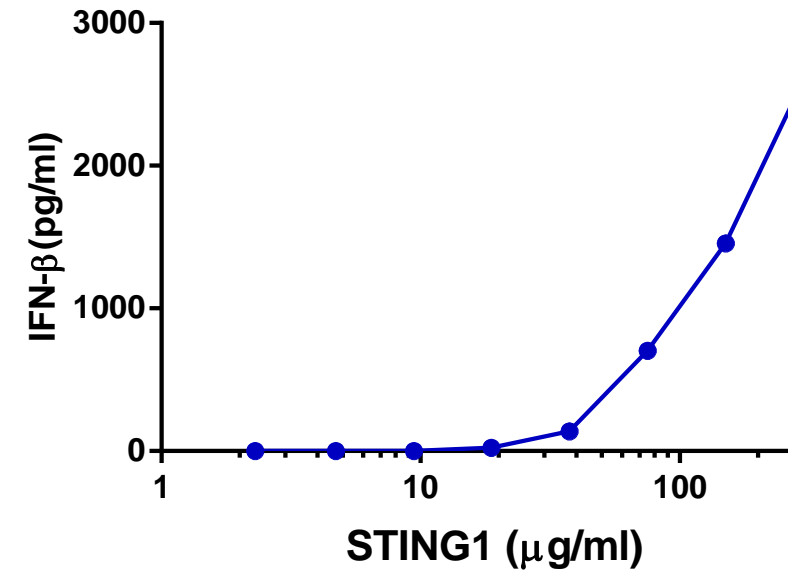
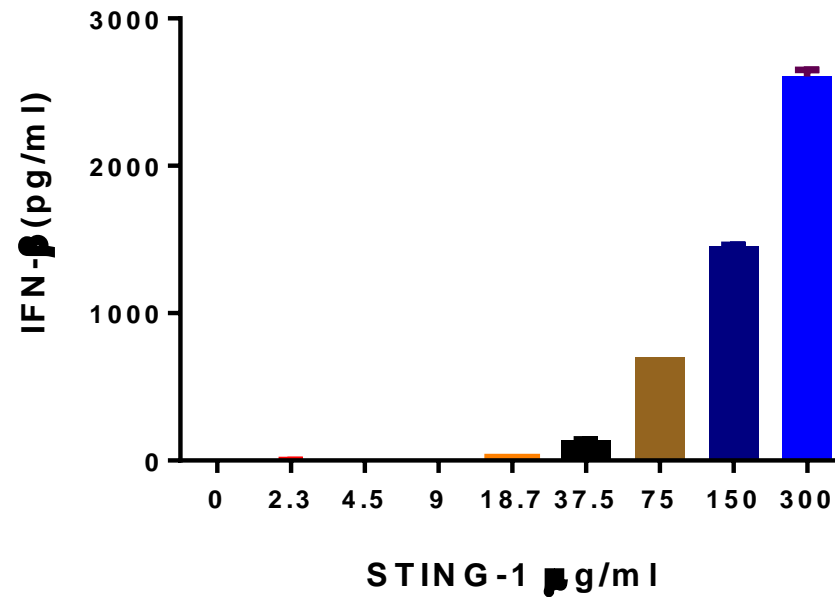


STING activation in fresh human PBMCs in response to a STING agonist (STING-1)

In vitro cellular functional STING pathway assay

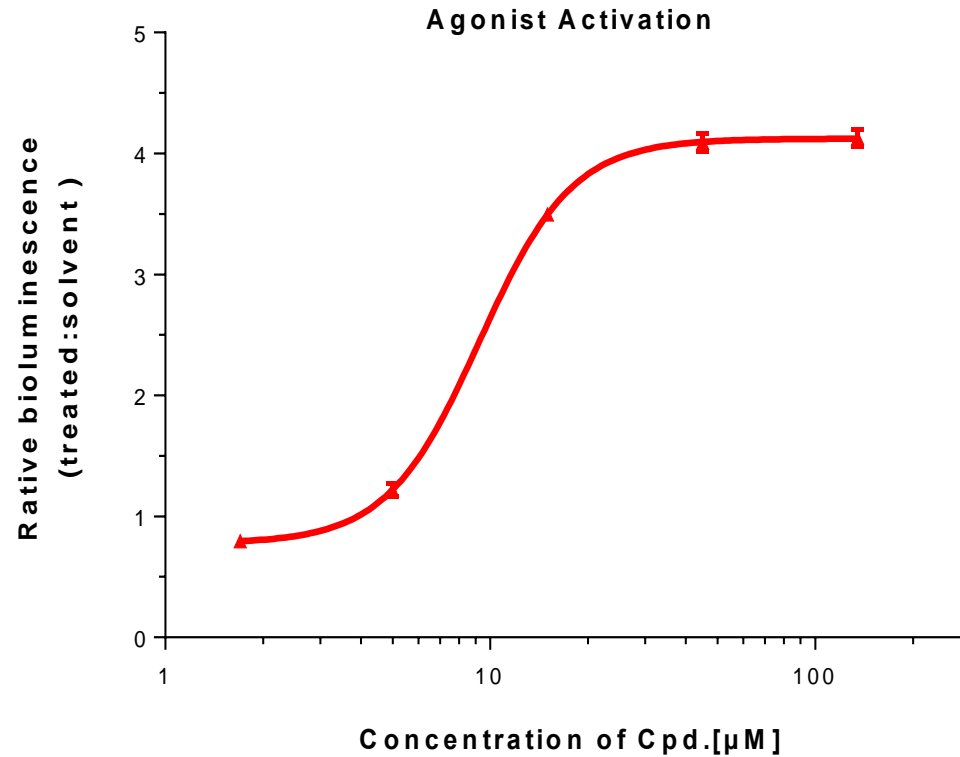
STING agonist stimulation in THP1 cell line

THP-1 (human acute monocytic leukemia)



In vitro cellular functional STING pathway assay

THP1-IFN β -Luc reporter cell line for STING agonist screening

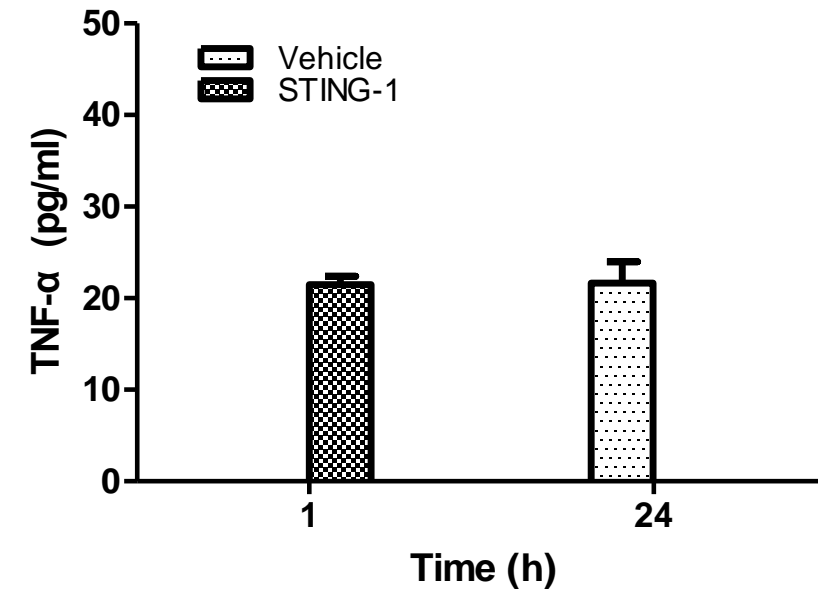
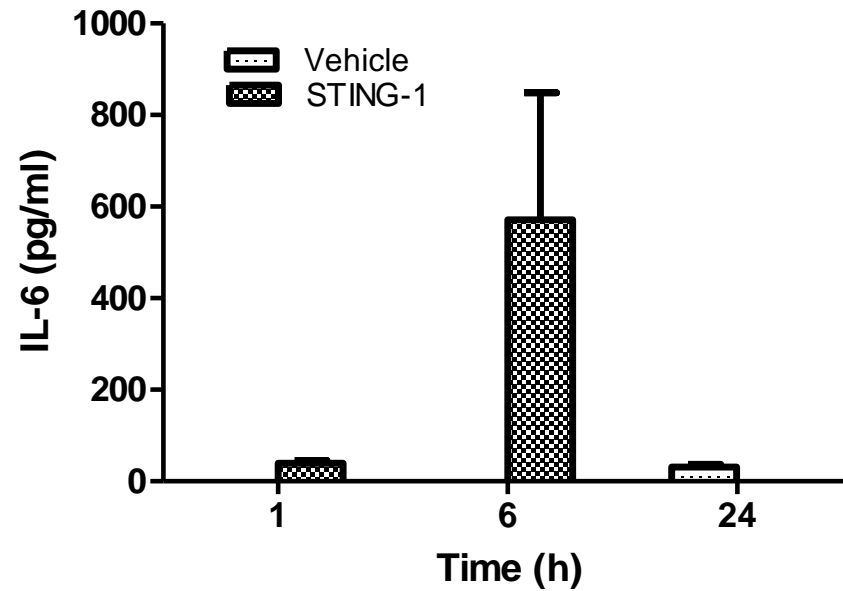


The reporter cell line was treated with agonist for 18 hours.

Cytokine analysis of B16F10 model post STING-1 treatment (*in vivo*)

CBA analysis

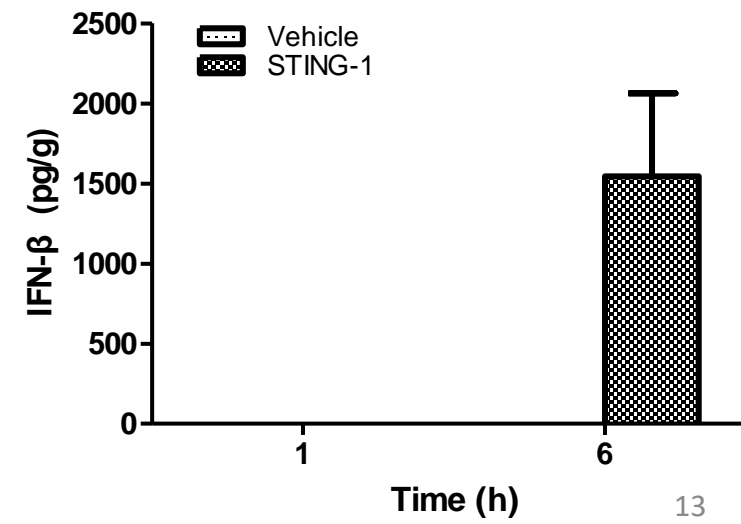
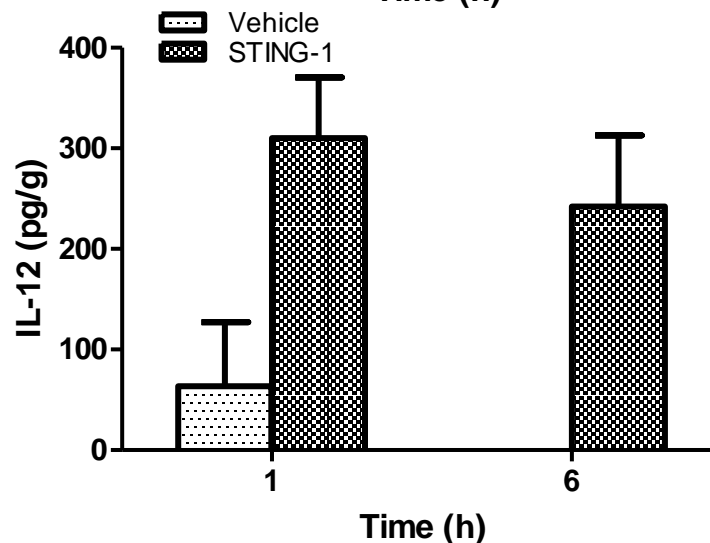
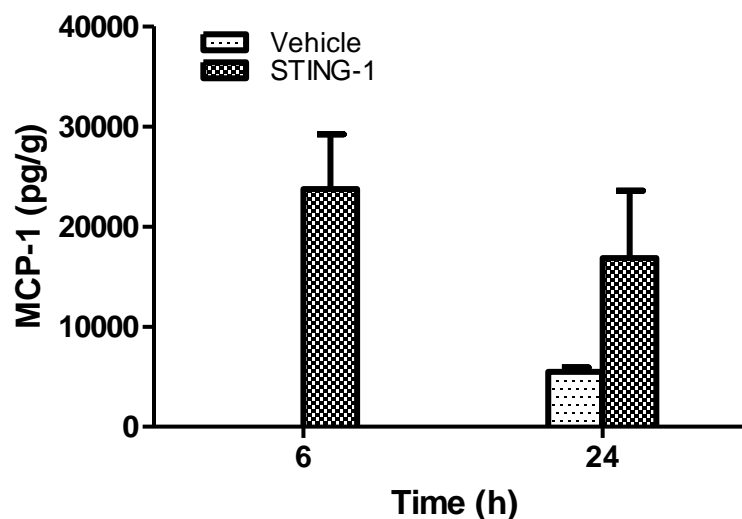
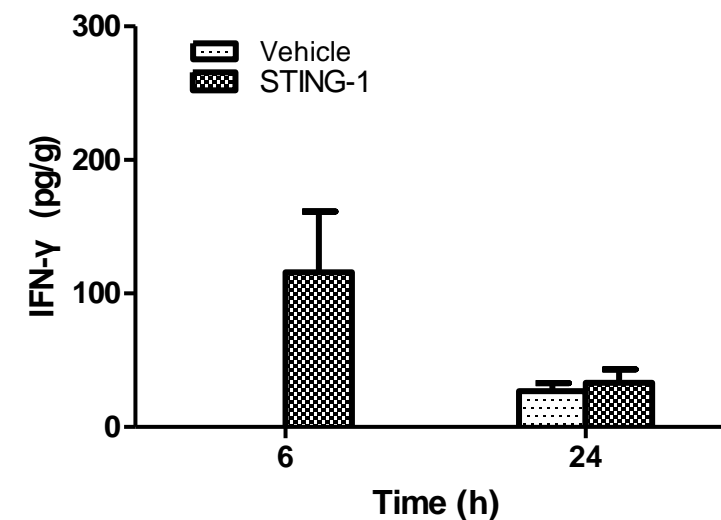
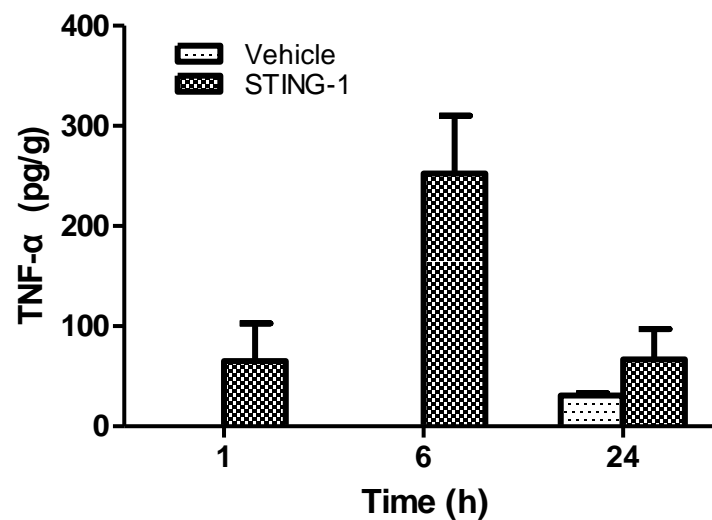
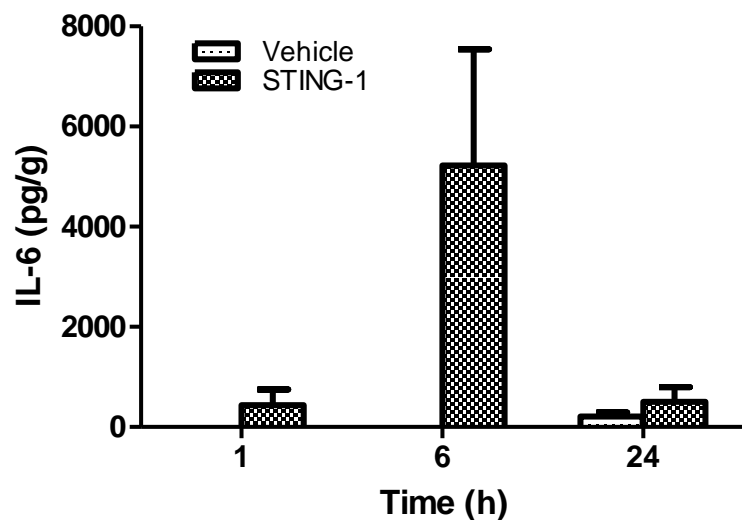
IL-6 and TNF- α levels in Plasma



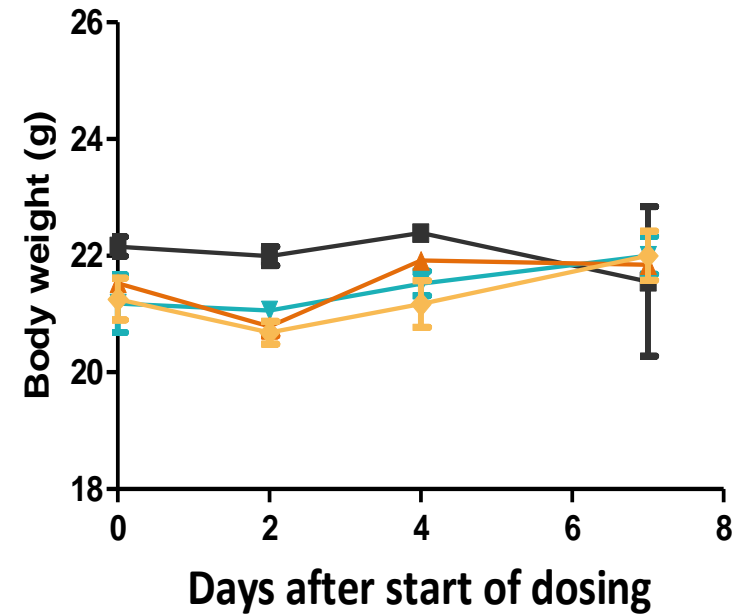
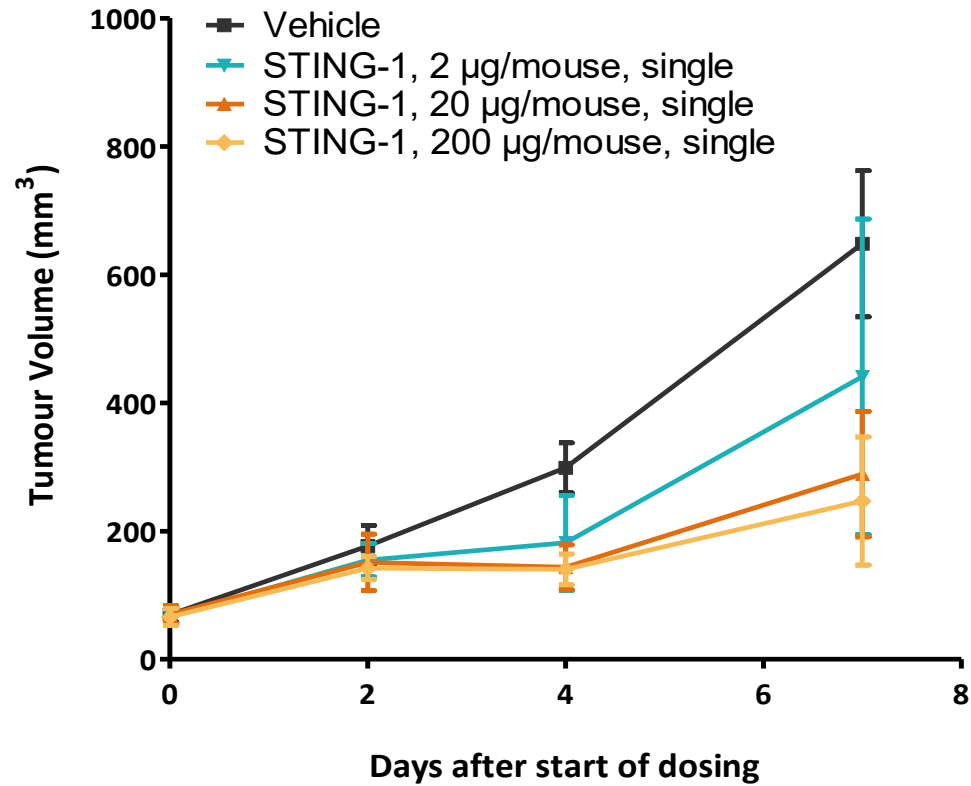
Cytokine analysis of B16F10 model post STING-1 treatment (*in vivo*)

CBA analysis

IL-6, TNF- α , IFN- γ , MCP-1, IL-12 and IFN- β levels in Tumor

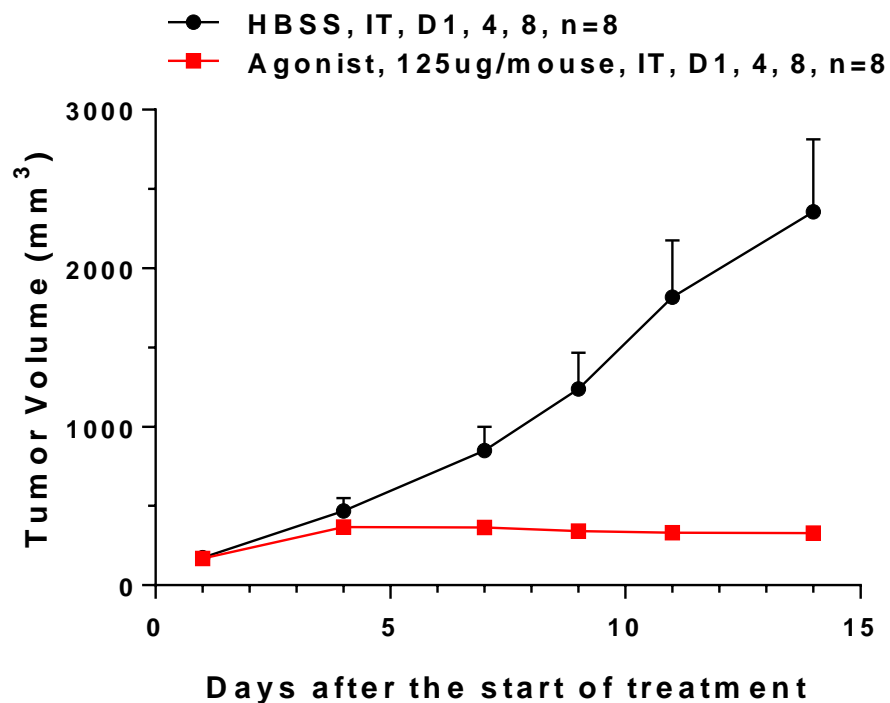


In vivo anti-tumor efficacy study of STING-1 in B16F10 model

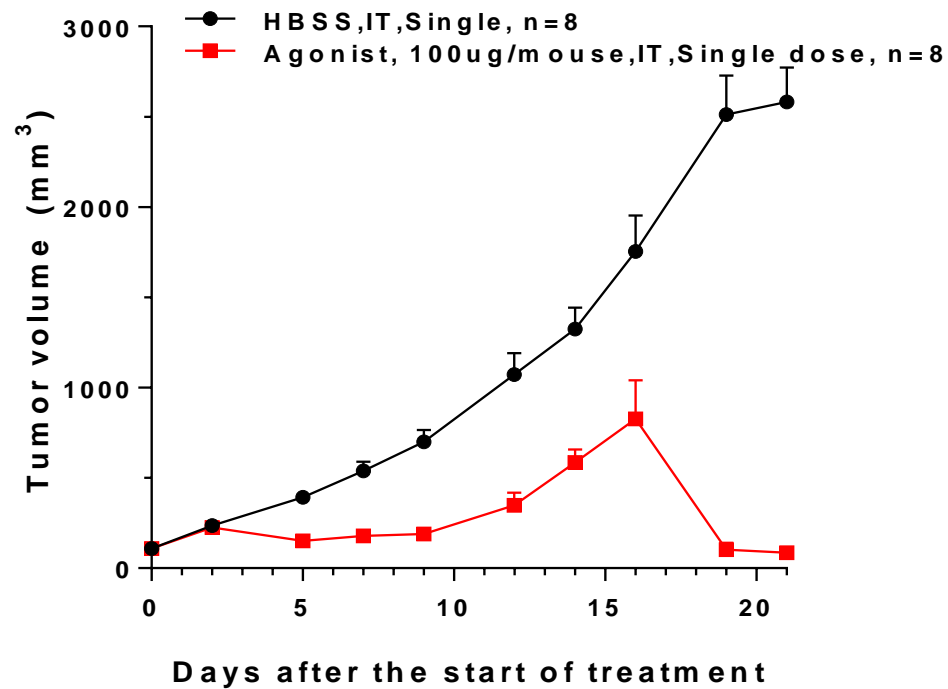


In vivo anti-tumor efficacy study of STING-1 in CT26/4T1 model

CT-26



4T1



Immune cell analysis in B16F10 model post STING-1 treatment

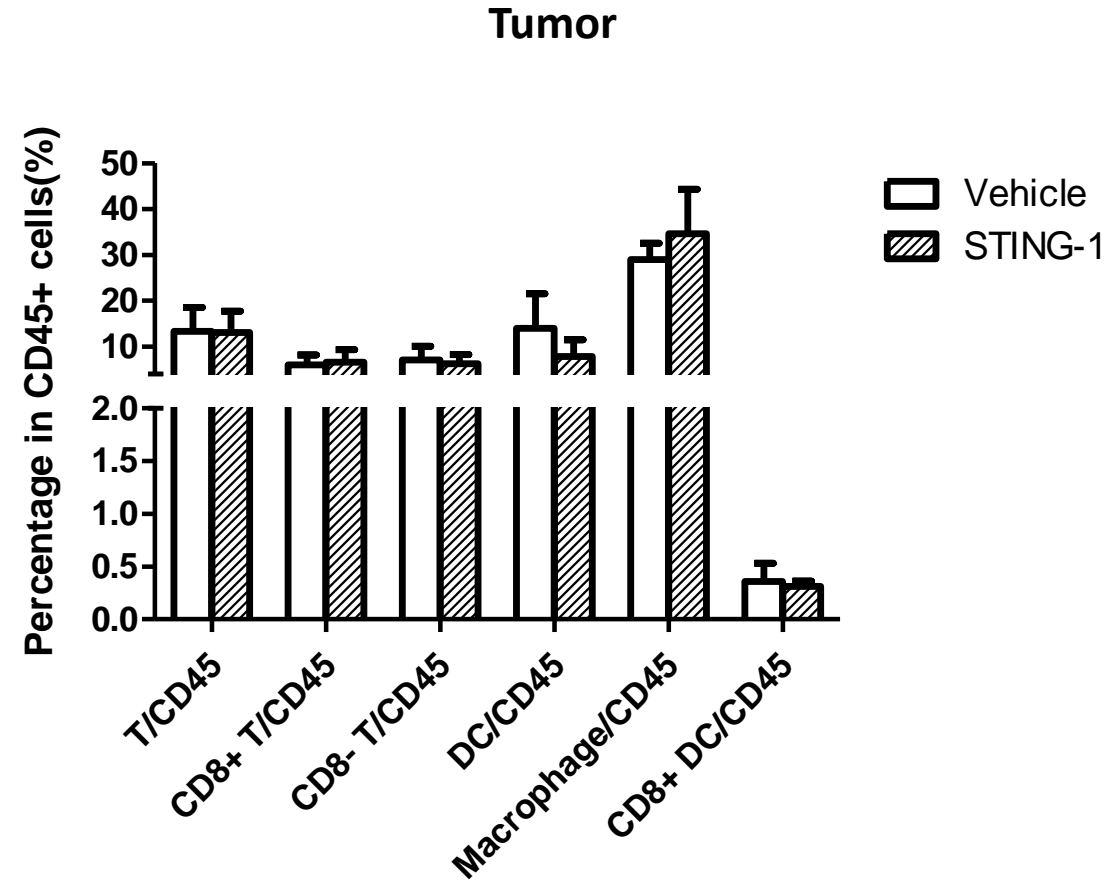
TIL analysis were carried out in B16F10 Melanoma tumors

Model	Cancer Type	Mouse
B16F10	Melanoma	C57BL/6

Panel Design for TIL Analysis:

Channel	Fluorescein	Panel 1(Tumor and Spleen)	Panel 2(Blood)
FITC	FITC	F4/80	-
PE	PE	CD69	-
PerCP	PerCP-Cy5.5	CD11c	CD19
APC	APC	CD8	-
APC-R700	AF700	CD45	CD45
APC-Cy7	APC-Cy7	CD3	CD3
V450	BV421	Live/dead	Live/Dead
V500	BV510	CD86	-
BV605	BV605	MHCII	-

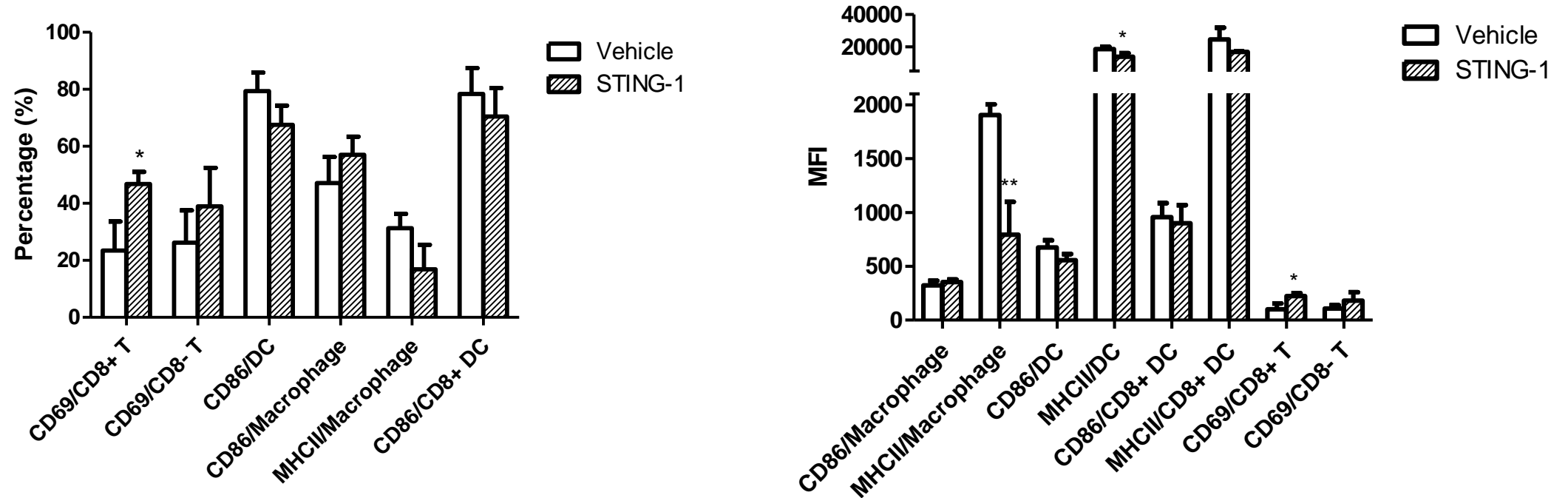
Murine Tumor-Infiltrating Leukocytes (TIL) composition in response to STING-1



Immune cell activation markers in TILs in respond to STING-1

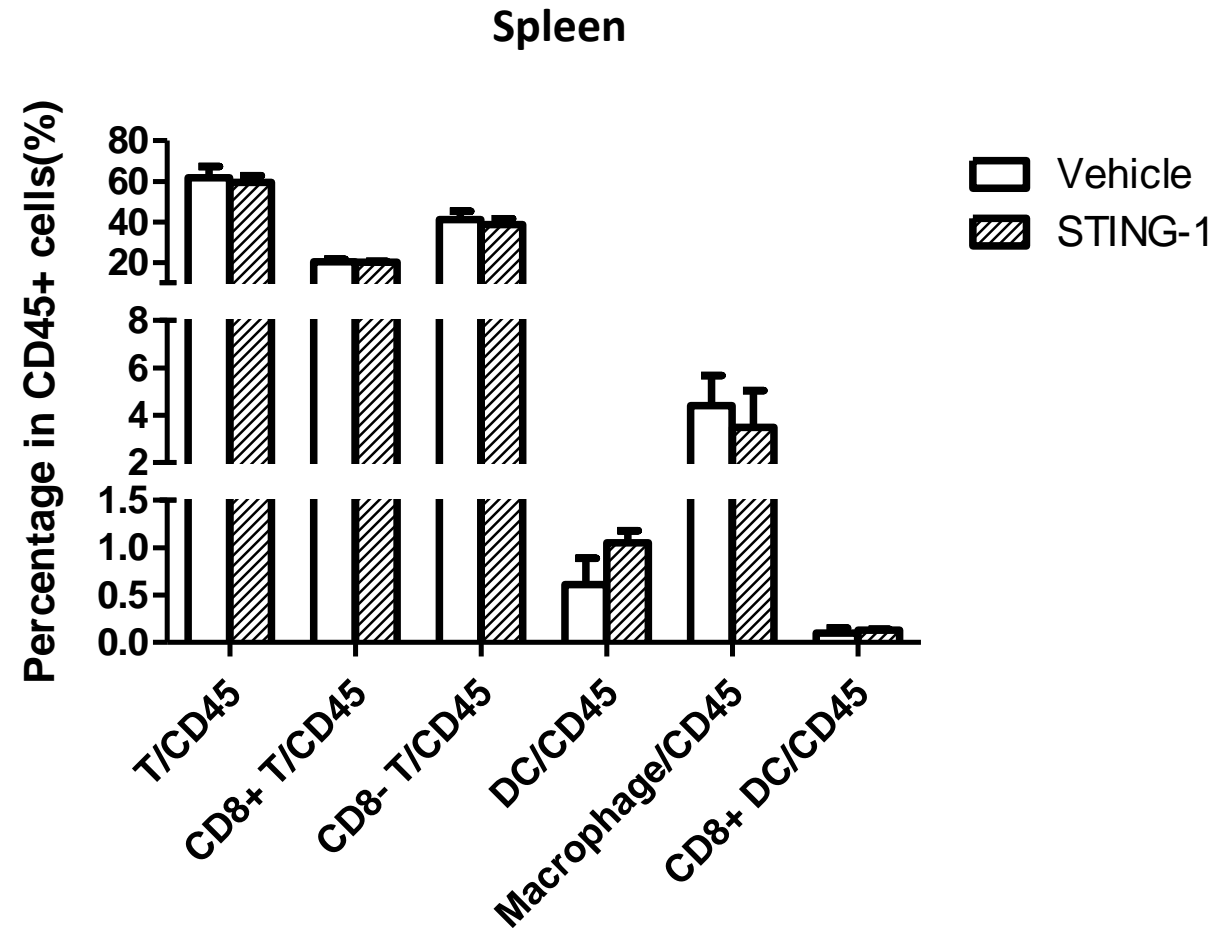
Expression of CD69, MHCII and CD86

Tumor

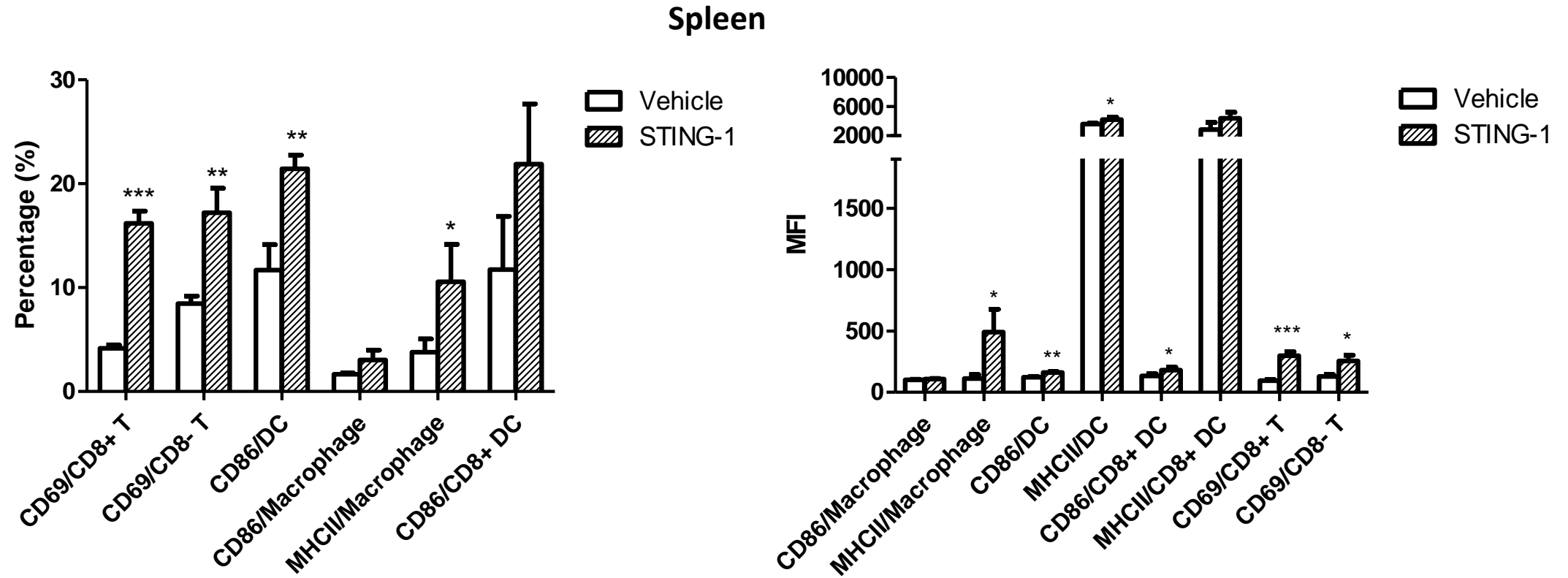


- In STING-1 group, the percentage of CD69 was increased in CD8+ T cells in TILs.
- In STING-1 group, the MFI of CD69 was increased in CD8+ T cells, and the MFI of MHCII was decreased in Macrophage and DC in TILs.

Immune cell subpopulations in spleen in response to STING-1



Immune cell activation markers in T cells, DCs and macrophages in spleen in respond to STING-1



- In STING-1 group, the percentage of CD69 was increased in CD8+ and CD8- T cells, and the percentage of CD86 was increased in DC, meanwhile, the percentage of MHCII was increased in Macrophage in spleen.
- In STING-1 group, the MFI of CD69 was increased in CD8+ and CD8- T cells, and the MFI of CD86 was increased in DC and CD8+ DC, meanwhile, the MFI of MHCII was increased in Macrophage and DC in spleen.



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