Mechanisms of immunoevasion in acute lymphoblastic leukemia

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Disclosure of Conflicts of Interest

None



Learning Objectives

Within the setting of acute lymphoblastic leukemia, this presentation will:

Survey the evidence linking T-cell exhaustion with subsequent relapse

•Describe mechanisms by which immune checkpoint blockade can prolong survival in murine models

Highlight promising clinical trial strategies to counter T-cell exhaustion

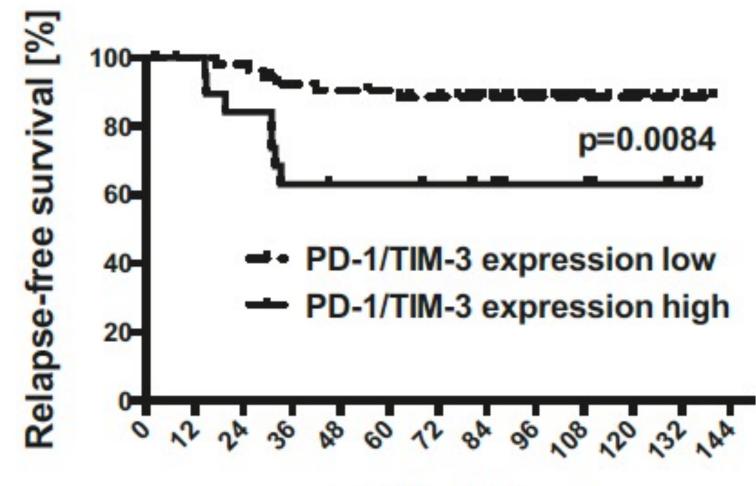


T-cell exhaustion in acute lymphoblastic leukemia

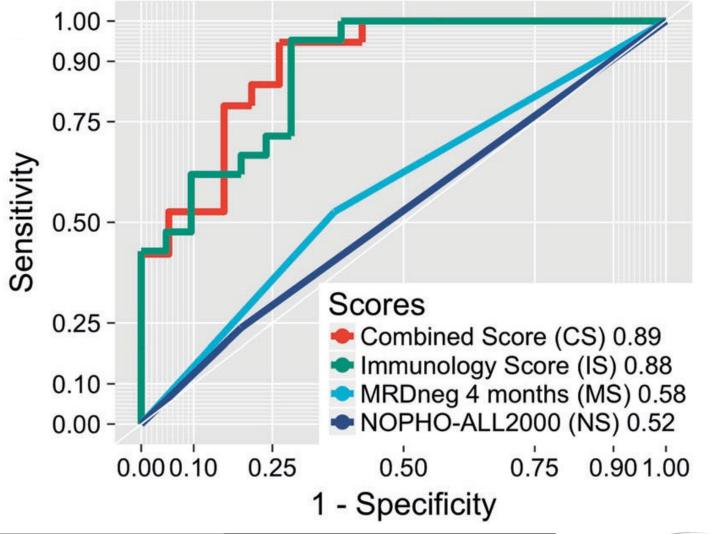
- T-cell exhaustion is associated with treatment failure following chimeric antigen receptor T-cells (CART), bi specific T-cell engagers (BiTEs), and allogeneic hematopoietic cell transplantation
- Leukemic relapse risk is also increased in the setting of endogenous CD4+ T-cell exhaustion
- Understanding of the mechanisms governing the induction of T-cell exhaustion and its contribution to relapse remains inadequate

Research Questions:

- 1. What are the mechanisms linking CD4+ T-cell exhaustion and relapse in ALL?
- 2. Why do some patients present with T-cell exhaustion while most do not?
- 3. How can we recruit the endogenous immune system to eradicate residual disease?

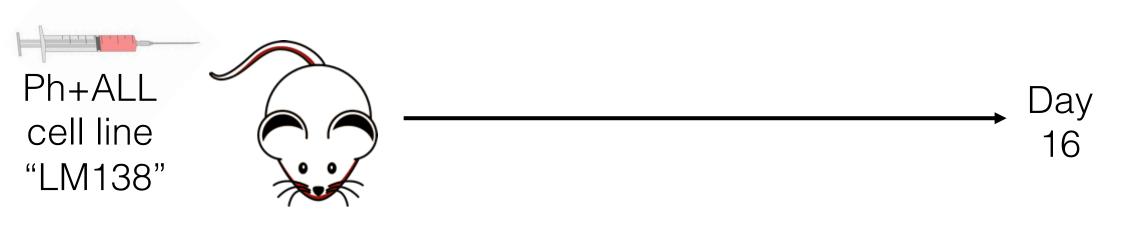


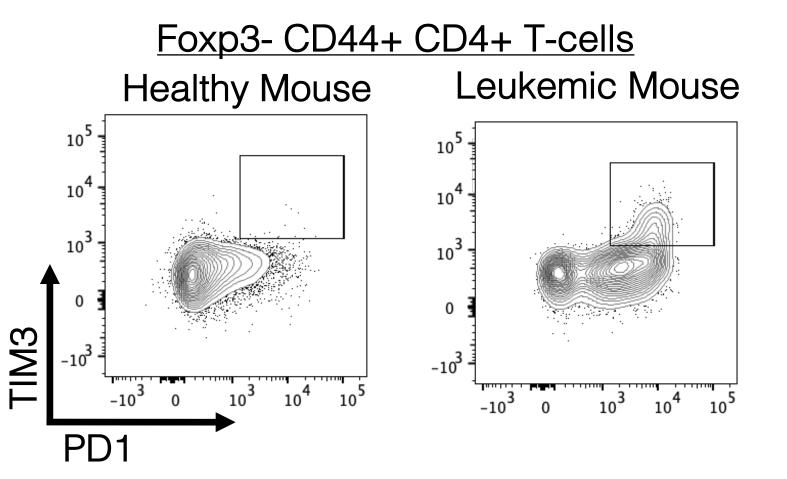


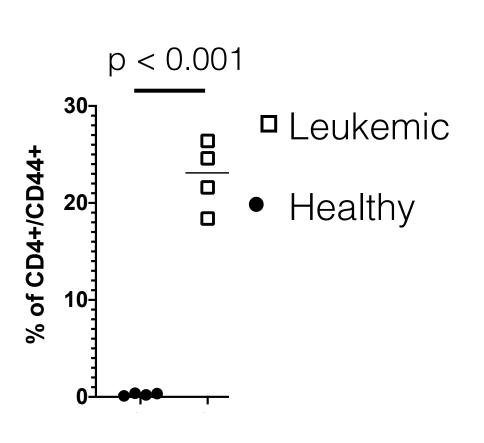


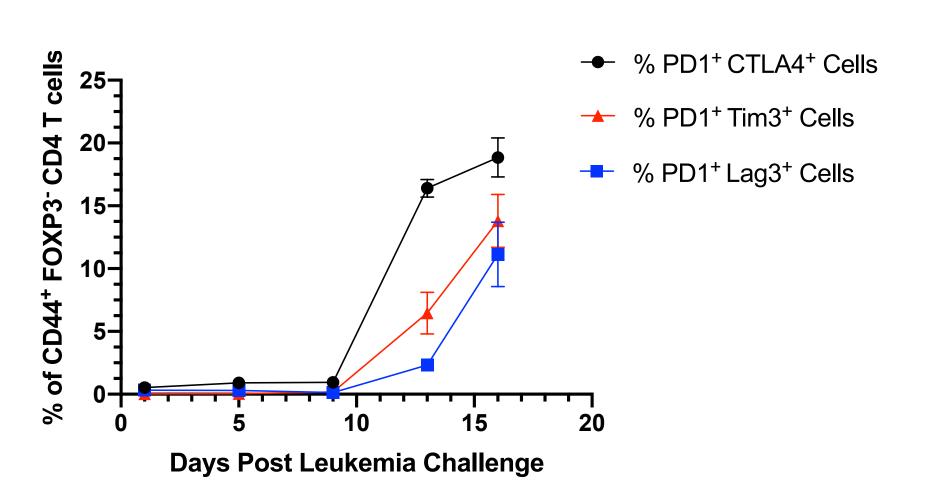


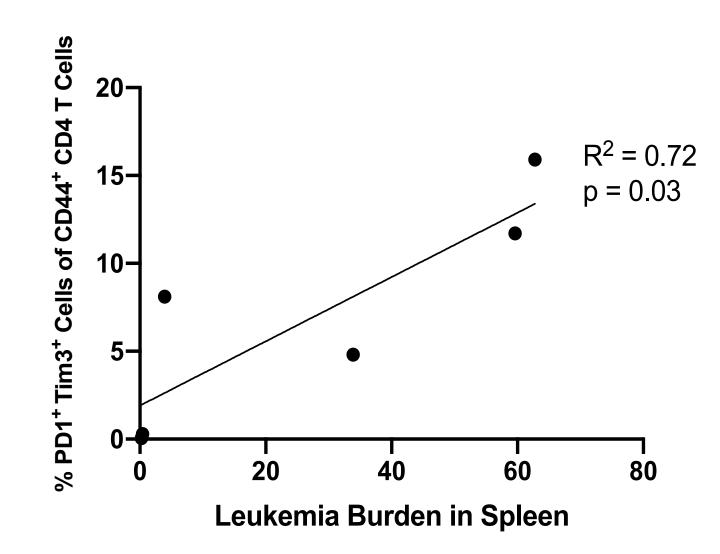
Murine models of ALL recapitulate T-cell exhaustion

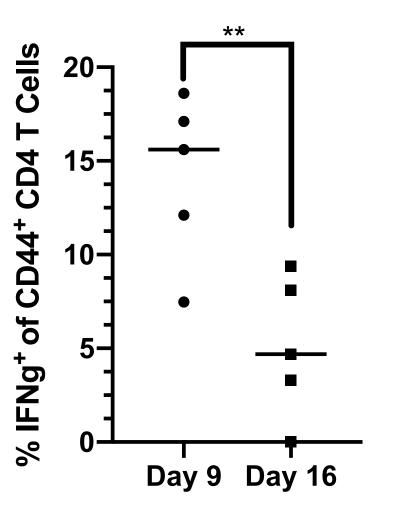






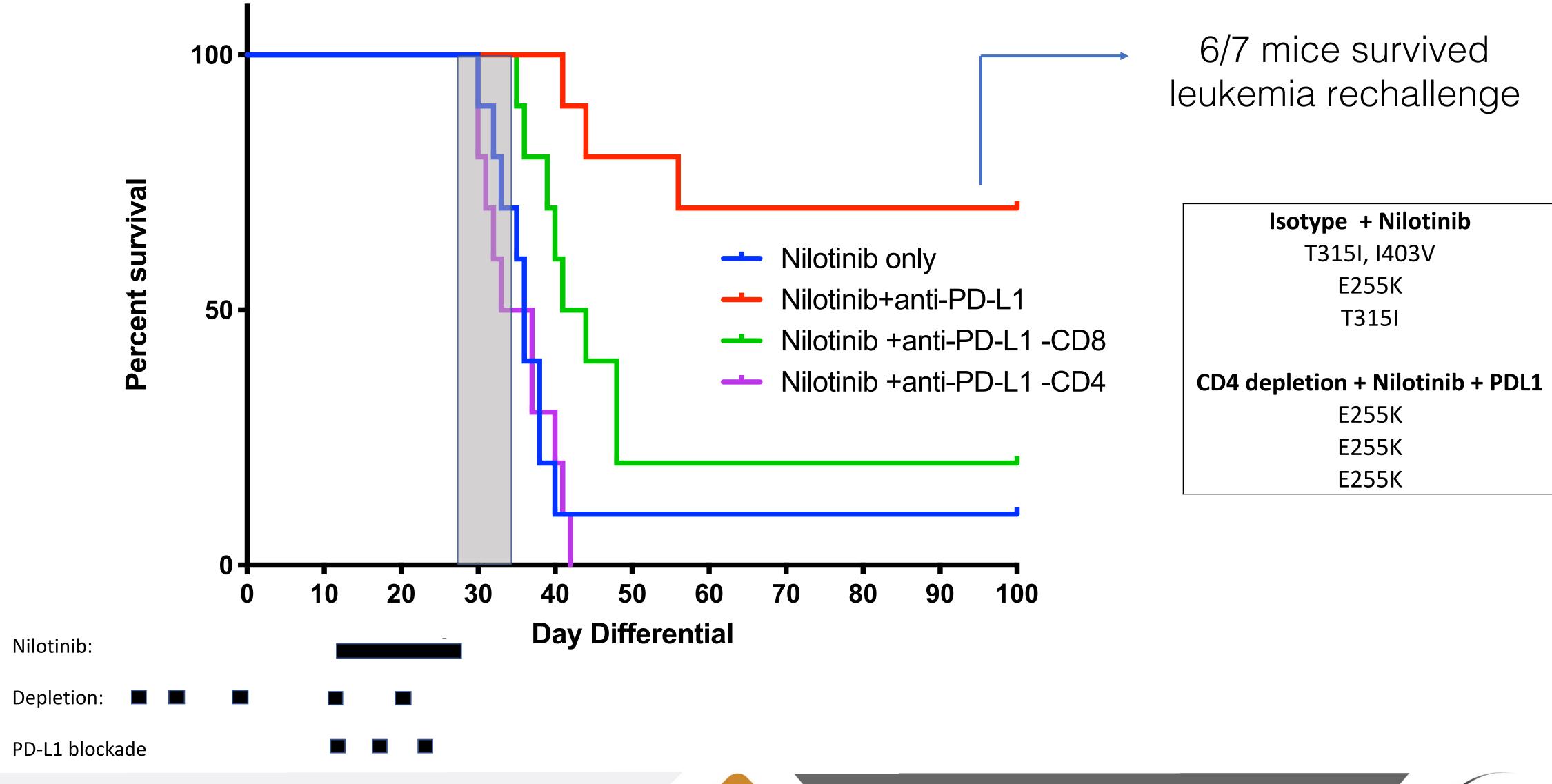






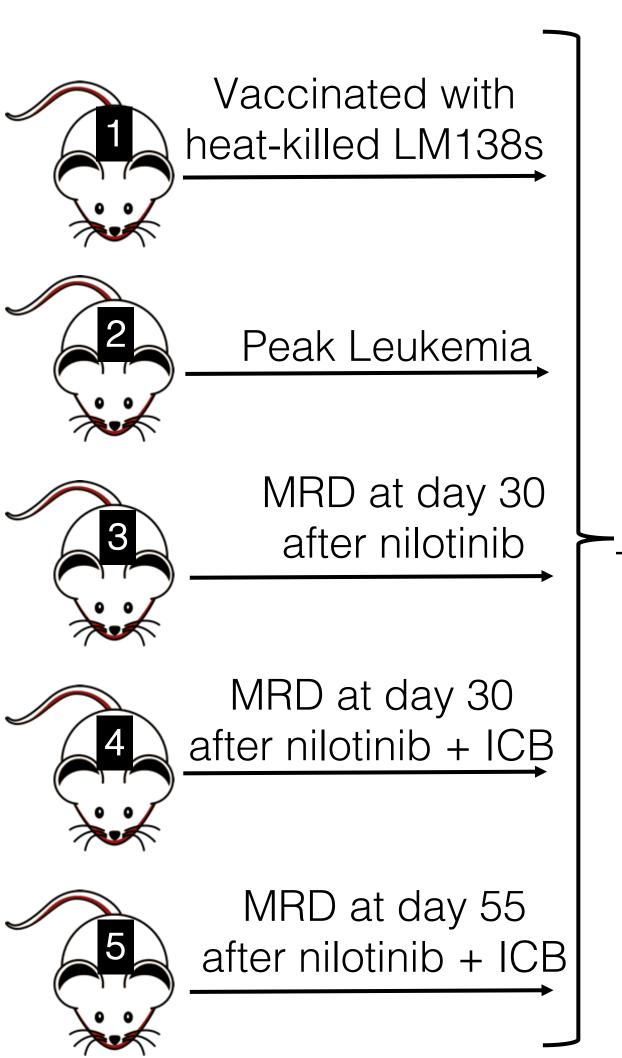


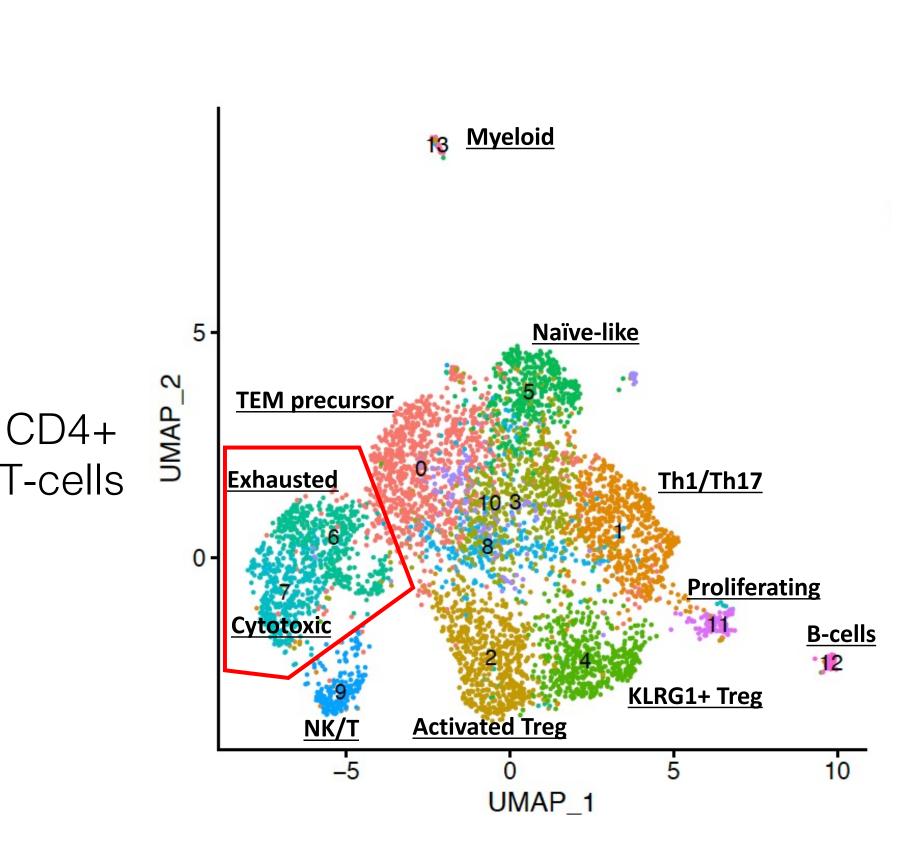
PD-L1 ICB leads to eradication of residual leukemia

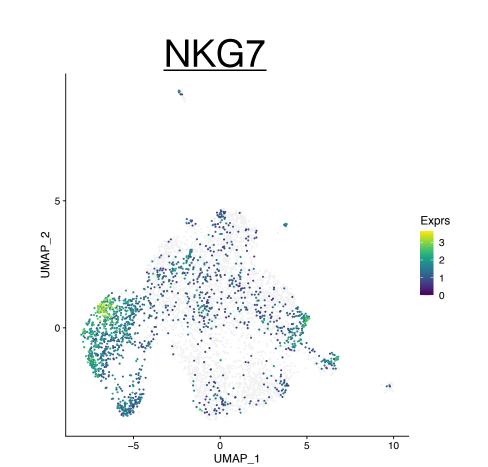


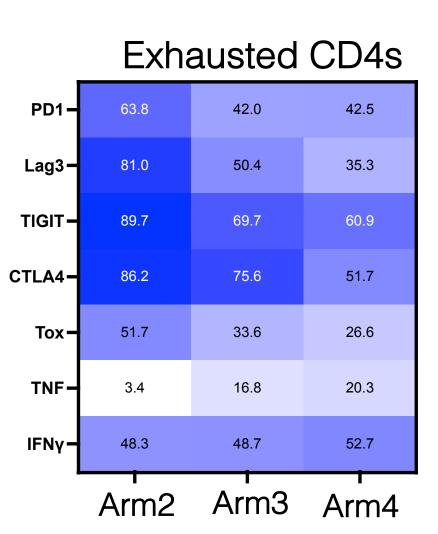


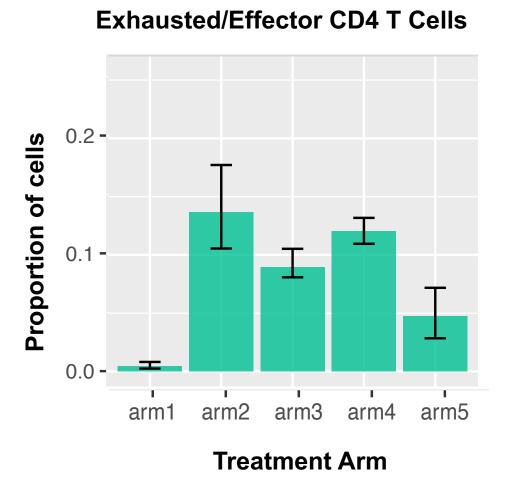
scRNA-seq reveals that PD-L1 ICB rescues an NKG7+ cytotoxic subset from exhaustion

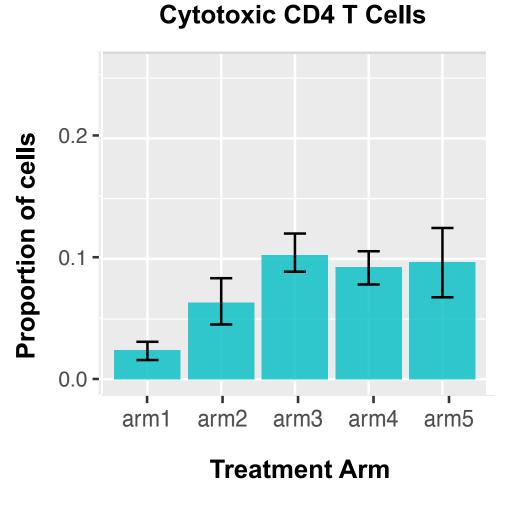














Conclusions and Future Directions

- •CD4+ T-cell exhaustion is associated with inferior outcomes in B-cell ALL
- Murine models recapitulate key features of ALL-induced T-cell exhaustion
- •PD-L1 immune checkpoint blockade counters CD4+ T-cell exhaustion and is able to eradicate minimal residual disease
- •B-cell ALL induces exhaustion of an NKG7+ cytotoxic CD4+ T-cell subset
- •Ongoing research is being conducted on patient-derived bone marrow specimens to identify immunological correlates of responsiveness to immune checkpoint blockade
- •Immune checkpoint blockade is being explored following allogeneic HCT (NCT03286114), and in combination with blinatumomab (NCT04546399), (NCT02879695).

