

Heterologous ChAd/samRNA SIV Vaccine Induces Robust T-Cell Responses in Macaques

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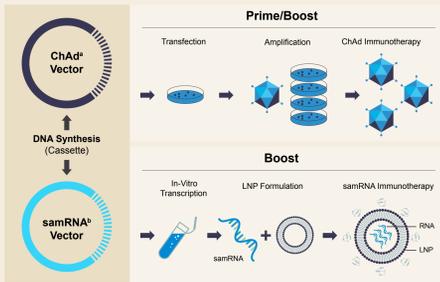
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Introduction

- B- and T-cell responses to HIV are detected in most people living with HIV, but are largely insufficient to control the infection without antiretroviral therapy
- Highly functional T-cell responses, especially of cluster of differentiation (CD)-8⁺ T cells, have been implicated in maintaining viral control in a small subset of people with HIV¹
- In addition, human leukocyte antigen (HLA) class I alleles have been associated with HIV control in genome-wide association studies^{2,3}; thus, therapeutic vaccines that can activate T-cell responses required for immune control of HIV-1 infection may represent a key component of a future HIV-1 remission/cure regimen
- To induce high-titer, antigen-specific, cytotoxic CD8⁺ T cells, Gritstone bio has developed a heterologous prime/boost vaccine regimen comprised of a chimpanzee adenoviral (ChAd) vector prime, followed by boost vaccinations with self-amplifying messenger RNA (samRNA) formulated in lipid nanoparticles (LNPs)
- This regimen has demonstrated strong T-cell immune responses in nonhuman primates and ongoing oncologic clinical trials⁴

ChAd/samRNA Vaccine Platform



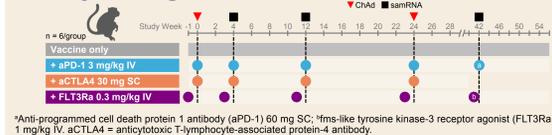
*ChAd 68; ⁴Based on Venezuelan equine encephalitis virus.

Objectives

- To evaluate the safety and immunogenicity of a novel heterologous simian immunodeficiency virus (SIV) vaccine in combination with immune modulators in macaques

Methods

Study Design

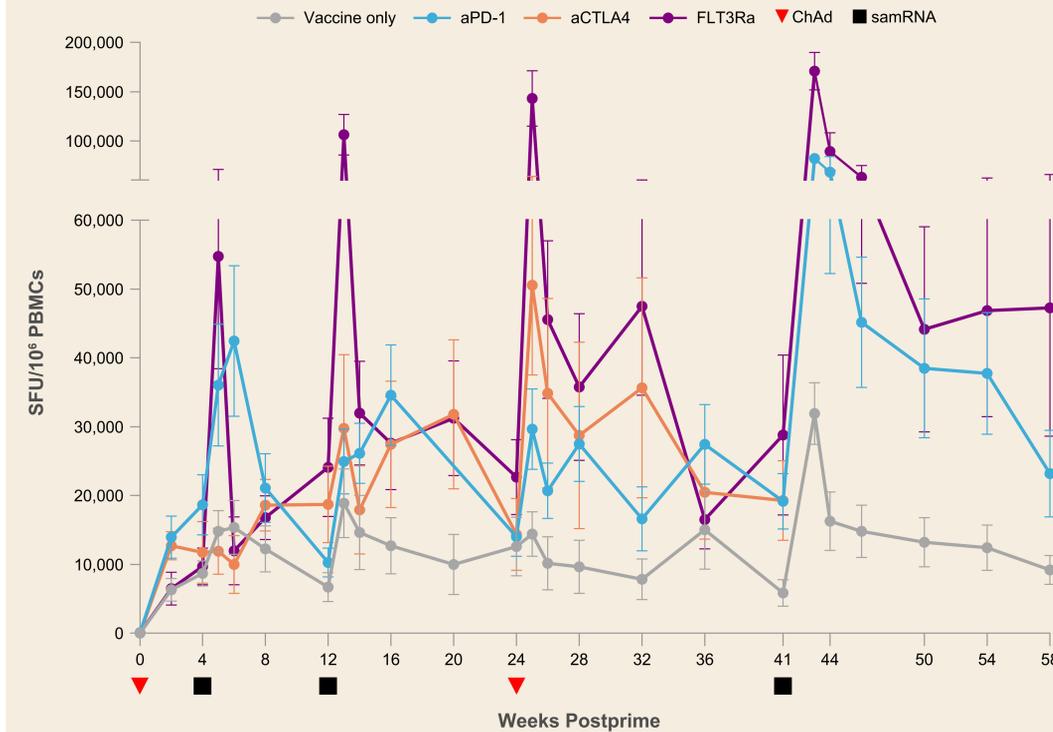


- Naive rhesus macaques (n = 6/group) were immunized with a ChAd and samRNA-based vaccine alone or in combination with aPD-1, aCTLA4, or FLT3Ra

- ChAd and samRNA vectors encoding full-length SIV group-specific antigen (Gag), polymerase (Pol), and envelope (Env) antigens were administered intramuscularly
- aPD-1 and aCTLA4 were dosed subcutaneously or intravenously concomitant with immunization
- FLT3Ra was dosed intravenously 1 week prior to each immunization
- Immunogenicity was characterized by ex vivo overnight interferon (IFN)- γ enzyme-linked immunosorbent spot (ELISpot) and multiparameter flow cytometry

Results

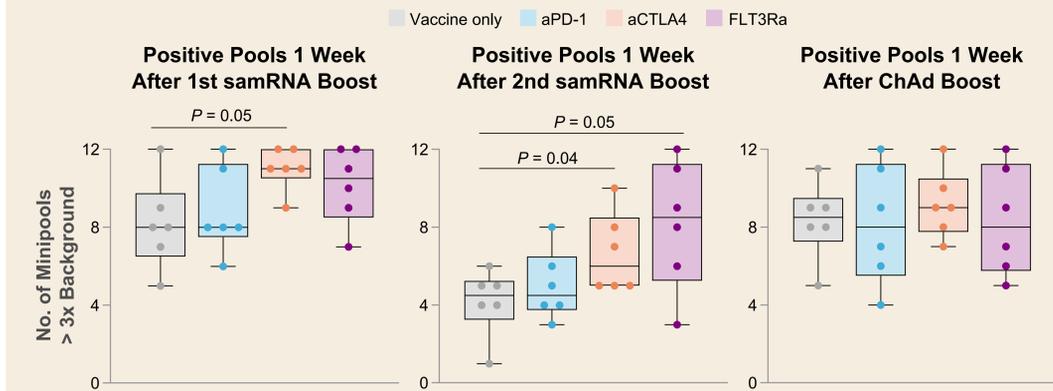
Heterologous ChAd/samRNA Vaccine Regimen Drove Potent and Durable SIV-Specific T-Cell Responses, Which Were Enhanced by Combination With aPD-1, aCTLA4, or FLT3Ra



SIV-specific T-cell responses in peripheral blood mononuclear cells (PBMCs) assessed by overnight IFN γ ELISpot at specified time point postimmunization; sum of 13 overlapping peptide pools spanning Gag, Pol, and Env were background subtracted; data presented as mean \pm standard error of mean (SEM); n = 6/group.

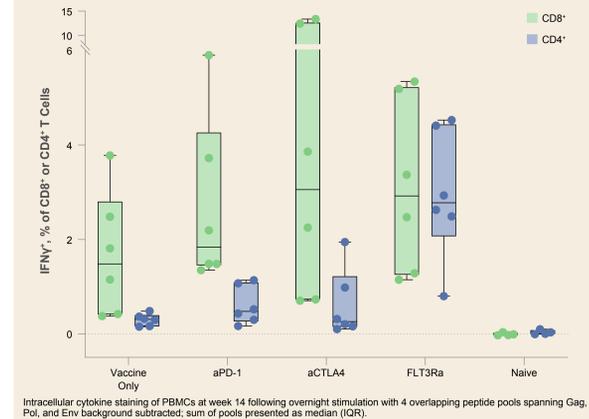
- All regimens were well tolerated, with transient small increases in inflammatory markers and body temperature
- The vaccine elicited strong IFN γ T-cell responses 4 weeks post-ChAd prime (mean \pm SEM 8724 \pm 1845 SFU/10⁶ PBMCs), which were further augmented by boosts with samRNA (mean 1.8-, 3.7-, and 11.5-fold increases after each boost) and ChAd (1.7-fold increase)
- The responses peaked at a mean \pm SEM 32,234 \pm 4433 SFU/10⁶ PBMCs and were durable through \geq 16 weeks after last immunization (range 3398-15,360 SFU/10⁶ PBMCs)
- Combination with aPD-1, aCTLA4, or FLT3Ra further augmented mean peak T-cell response magnitudes by 2.8-, 2.4-, and 5.7-fold, respectively

Combination With aCTLA4 or FLT3Ra Increased Breadth of T-Cell Response



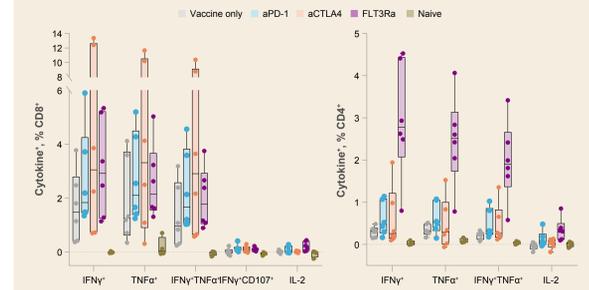
Gag-specific T-cell responses in PBMCs assessed by overnight IFN γ ELISpot using 12 overlapping peptide pools spanning Gag (~10 peptides/pool) at study weeks 5, 13, and 25; no. of minipools with response > 3x background shown for each animal; data presented as median (interquartile range [IQR]); Mann-Whitney test; only P values \leq 0.05 are shown.

Vaccine Drove Predominantly CD8⁺ T-Cell Response; Combination With FLT3Ra Also Expanded CD4⁺ T-Cell Population



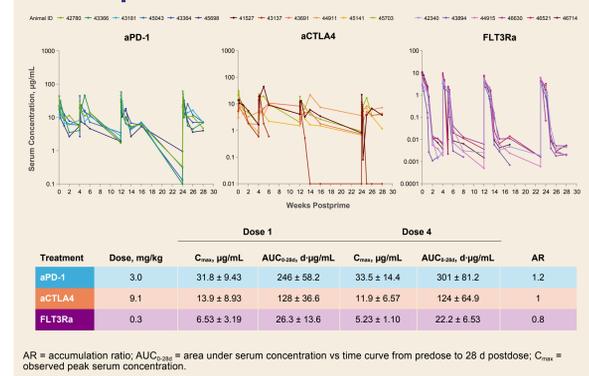
Intracellular cytokine staining of PBMCs at week 14 following overnight stimulation with 4 overlapping peptide pools spanning Gag, Pol, and Env background subtracted; sum of pools presented as median (IQR).

Vaccine Induced Predominantly IFN γ TNF α Polyfunctional T Cells, Which Were Increased by Combination With aPD-1, aCTLA-4, or FLT3Ra



Intracellular cytokine staining of PBMCs at week 14 following overnight stimulation with 4 overlapping peptide pools spanning Gag, Pol, and Env background subtracted; sum of pools presented as median (IQR). IL-2 = interleukin 2; TNF α = tumor necrosis factor- α .

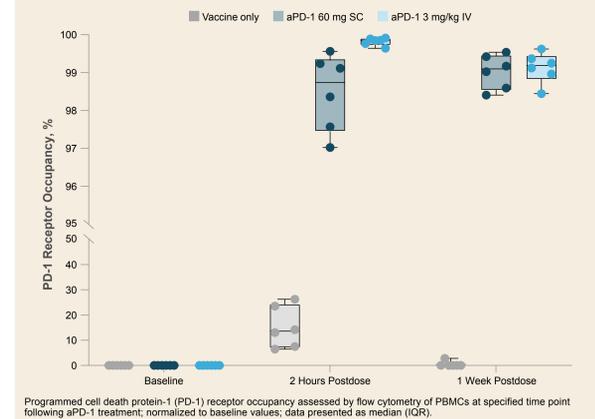
Serum Exposures of aPD-1, aCTLA4, and FLT3Ra Were Consistent Across Animals and Repeat Doses



AR = accumulation ratio; AUC_{0-28h} = area under serum concentration vs time curve from predose to 28 d postdose; C_{max} = observed peak serum concentration.

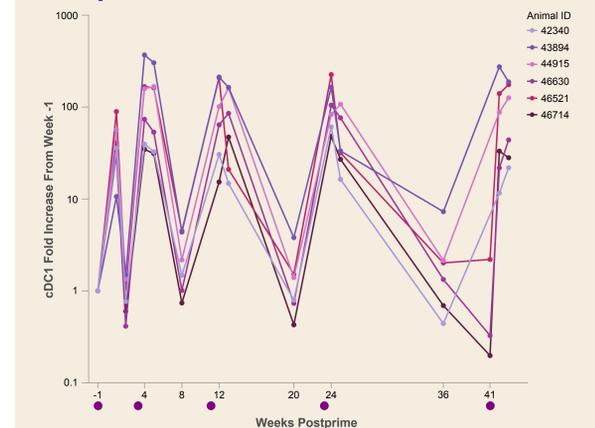
- Consistent aPD-1, aCTLA4, and FLT3Ra exposures were observed across animals and repeat doses with no accumulation (1 animal [#43137] receiving aCTLA4 developed apparent immunogenicity)

Complete Blockade of PD-1 Receptor Following aPD-1 Treatment Via Subcutaneous or Intravenous Route



Programmed cell death protein-1 (PD-1) receptor occupancy assessed by flow cytometry of PBMCs at specified time point following aPD-1 treatment; normalized to baseline values; data presented as median (IQR).

FLT3Ra in Combination With Vaccine Led to Expansion of cDC1 Cells in PBMCs



Conventional type 1 dendritic cell (cDC1) population (defined as CD14 CD123/CD11c/HLA-DR/Clec4e/CD11c of viable singlets) assessed in PBMCs for each animal by flow cytometry at specified time points; normalized to baseline value for each animal; purple circles indicate FLT3Ra dosing.

Conclusions

- The ChAd/samRNA heterologous SIV vaccine was well tolerated, and induced robust and broad antigen-specific T-cell responses in uninfected rhesus macaques
- T-cell responses were predominantly CD8⁺ and polyfunctional
- Magnitude and/or breadth of SIV-specific T-cell responses were augmented by aPD-1, aCTLA4, or FLT3Ra, warranting their further exploration as part of a combination therapeutic approach for HIV cure, depending on clinical safety profiles

References: 1. Deeks SG, Walker BD. Immunity 2007;27:406-16; 2. Fellay J, et al. Science 2007;317:944-7; 3. International HIV Controllers Study. Science 2010;330:1551-7; 4. Palmer CD, et al. Nat Med 2022;28:1619-29.
 Acknowledgments: This study was funded by Gilead Sciences, Inc. and Gritstone bio. The nonhuman primate study was performed at California National Research Primate Center, University of California, Davis. Editing and production assistance were provided by BioScience Communications, New York, NY, funded by Gilead.
 Disclosures: A Rappaport, G Boucher, C Corzo, S-J Hong, H Larson, C Scallan, B Wang, K Jooss: employees and shareholders of Gritstone; E Bekerman, J Sung, B Carr, R Geleziunas, D SenGupta: employees and shareholders of Gilead.