

How the DNA Vaccine Format Used in a Novel Manner can Generate Potent CD8-Dominated Neoantigen-Specific T Cell Responses

Molecular Med TriCon Neoantigen Based Immunotherapies March 15 2019, San Francisco

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Vaccibody Product Pipeline

PROGRAM	DISCOVERY	PRE-CLINICAL	PHASE I	Pŀ
MELANOMA LUNG (NSCLC)				
BLADDER RENAI	VB10.NEO			•
HEAD AND NECK				
HEAD AND NECK	VB10.NEO + I	NKTR-214	NEKT	١F
PRECANCEROUS CERVICAL LESIONS	VB10.16			
CERVICAL	VB10.16 + Ate	ezolizumab (CPI)	Roche	





The Workflow of Personalised Cancer Treatment





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Rapid, cost-effective, efficacious

Vaccibody – Proprietary Vaccine Technology Platform

The Vaccibody Technology Platform was developed based on the concept of **targeting antigen to APC** in order to create more efficacious vaccines.





Target to Antigen Presenting Cell

Dimerization for crosslinking target receptor

Antigen moiety

VB10.NEO – A Robust Vaccine Format



VB10.NEO-X

VB10.NEO-XX

>90 different VB10.NEO constructs with >450 neoepitopes constructed to date with up to 40 neoepitopes





VB10.NEO-XD

Mechanism of action: Intrinsic adjuvant for direct targeting



Targeting is elicited by the MIP-1a chemokine



Vaccibody VB10.NEO induces Rapid, Broad and Strong responses to multiple Neoepitopes by single Vaccination

- VB10.NEO induces a broader and stronger
 response than Peptide + Poly (I:C) Adjuvant
 vaccines after a single immunization.
- VB10.NEO vaccinated animals respond to all 10 neoepitopes after a single immunization.
- Immunodominant neoepitopes differ between delivery vehicles



Vaccibody VB10.NEO generates a broader immune response profile dominated by CD8⁺ T cells than competing technologies

		Pep 1	1 Pep 2	2 Pep	3 Pep 4	4 Pep 5	Рер 6
Peptide*	CD4						
	CD8						
RNA*	CD4						
	CD8						
Non-targeted	CD4				nt		nt
DNA	CD8						
VB10.NEO	CD4						
	CD8						

Peptide and RNA vaccines induces primarily CD4+ T cell responses, while VB10.NEO induces strong, dominating CD8+ responses to the identical neoepitope sequences Non-targetd DNA vaccines induced a CD8+ response towards 1 of 6 tested neoepitopes

- Castle et al., 2012 and Kreiter et al., 2015
- Aurisicchio et al., 2019



VB10.NEO leads to a unique CD8+ dominated neoepitope response



VB10.NEO induces strong, dominantly CD8+ T cell response to identical neoepitopes that induces **no or weak** immune response if delivered as peptide vaccine

• Castle et al., 2012 and Kreiter et al., 2015-adapted figure based on B16 melanoma results

Confirmation of VB10.NEO's unique ability to induce strong neoepitope-specific CD8+ responses



- VB10.NEO induces a strong CD8+ T cell response, combined with a CD4+ response to 5 of 6 MC38 neoantigens.

- 3 of these neoepitopes have been shown to be **non-immunogenic delivered as peptide + adjuvant** - Confirmation of VB10.NEO's ability to induce stronger CD8+ responses to neoantigens

Yadav et al., 2014

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DNA vaccine delivery alone is not explaining the ability to induce strong CD8 dominated immune responses to a higher number of neoantigens.

Vaccibody's unique targeting mechanism is essential for this observed feature.



CD4 responses



Vaccibody Induces Tumor Protection as Monotherapy



>Vaccibody vaccination induces strong CD8+ T cell responses and tumour protection as Monotherapy >Combination with anti-PD-1 immunotherapy induced enhanced anti-tumour responses in mice involving **complete tumour regression** of large, established tumours > Long-term memory responses ensure effective anti-tumour responses after a 2nd tumour challenge in surviving mice with no sign of tumour growth

Neoepitope-specific CD8+ T cells are crucial for tumour protection



Depletion of CD8+ T cells prohibit tumour protection in VB10.NEO vaccinated mice, indicating a crucial role of neoepitope-specific CD8+ T cells for anti-tumour efficacy

Developing VB10.NEO specific Neoepitope Selection





Successful development of a strong proprietary neoepitope selection method NeoSELECTTM

Immunogenic neoepitopes identified by different prediction methods



- Vaccibody has since 2017 successfully developed a proprietary neoepitope selection method able to identify a high number of immunogenic neoepitopes when used in VB10.NEO vaccines
- Majority of the induced responses are CD8+ restricted (measured ex vivo) with latest version
- This method, NeoSELECT, is used in the VB N-01 clinical trial

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**Tecentriq*® (*Atezolizumab*) is Roche's proprietary anti-PD-L1 checkpoint inhibitor (CPI)





Strong, long-lasting immune responses elicited to HPV16, VB C-01



- The vaccination regiment from cohort 1 (week 0, 3 and 6) plus a booster vaccination at W16 was introduced in phase IIa
- 16 of 17 patients (94%) from phase IIa elicited increased HPV16-specific T cell responses after vaccination with VB10.16.
 - Rapid, strong and long-lasting

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Expansion Cohort (N = 17)Dosing Cohort 1 (N=7)

Promising clinical efficacy with excellent safety, VB C-01



VB10.16 as a monotherapy in HPV16-positive, precancerous cervical lesions induces:

- Lesion size reduction in all patients followed >4 months
- CIN regression to CIN1 or no CIN in 10 patients
- HPV16 clearance in 6 patients

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Preliminary phase IIa results

VB C-01: Strong multi-functional CD8+ and CD4+ T cell responses induced CD8+ T cell responses linked to clinical benefit



- In patients with CIN regression and HPV clearance, induction of multi-functional CD8+ T cells were significantly induced compared to non-responders.
- In contrast, CD4+ responses were similarly induced in all patients tested.

VB10.16 upregulates PD-L1, suggesting beneficial effect of combination therapy



- 5 of 6 patients that were CIN2/3 after completing the study (12M) showed **upregulation of PD-L1** $\geq 10\%$ ٠
- PD-L1 is upregulated by a strong local T cell response and may inhibit an efficacious long-term immune response ۲
- Anti-PD-1/PD-L1 inhibitors blocks the brake and activates the immune system to attack PD-L1+ tumour cells lacksquare
- VB10.16 induces a strong T cell response and creates a target for PD-1/PD-L1 inhibitors. Thus, there is a strong rationale for ۲ combination of VB10.16 with an anti-PD-1/PD-L1 checkpoint inhibitor to improve its effect, especially in PD-L1 negative patients

VB C-02: combination of VB10.16 & Atezolizumab (Tecentriq[™]) in patients with advanced or recurrent, non-resectable HPV16+ cervical cancer





Clinical Trial VB N-01

VB N-01: An open labelled first human dose phase 1/2a study to evaluate safety, feasibility and efficacy of multiple dosing with individualised VB10.NEO immunotherapy in patients with locally advanced or metastatic melanoma, NSCLC, clear renal cell carcinoma, urothelial cancer or squamous cell carcinoma of head and neck, who did not reach complete responses with current standard of care immune checkpoint blockade



Study Design and Treatment Schedule VB N-01



Plan to open expansion cohort(s) in 2H 2019



Safety and immunogenicity acceptance criteria

- 100% vaccine manufacturing success for all patients with a successful biopsy so far
- 20 neoepitopes selected for all patients in the trial
- First expansion cohort(s) could be initiated in H2, 2019



Combination with Bempegaldesleukin (NKTR-214) has the potential to significantly expand neoantigen-specific CD8+ T cells



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Immunosuppressive cells limit anti-tumor response



Vaccibody's Solution to Personalised Cancer Treatment



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