



Leveraging Humanized Mouse Models to Support T-Cell Engager Development

Tumor Models Summit San Francisco

January 29, 2025

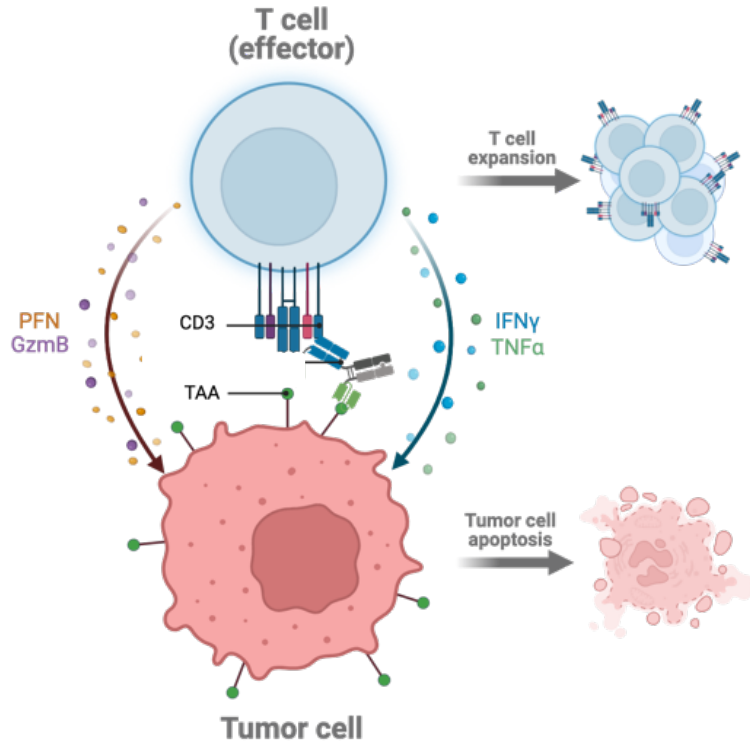
Nichole Escalante, PhD

Senior Scientist and Group Lead
in vivo Pharmacology and Pharmacokinetics

Nasdaq: ZYME | [zymeworks.com](https://www.zymeworks.com)

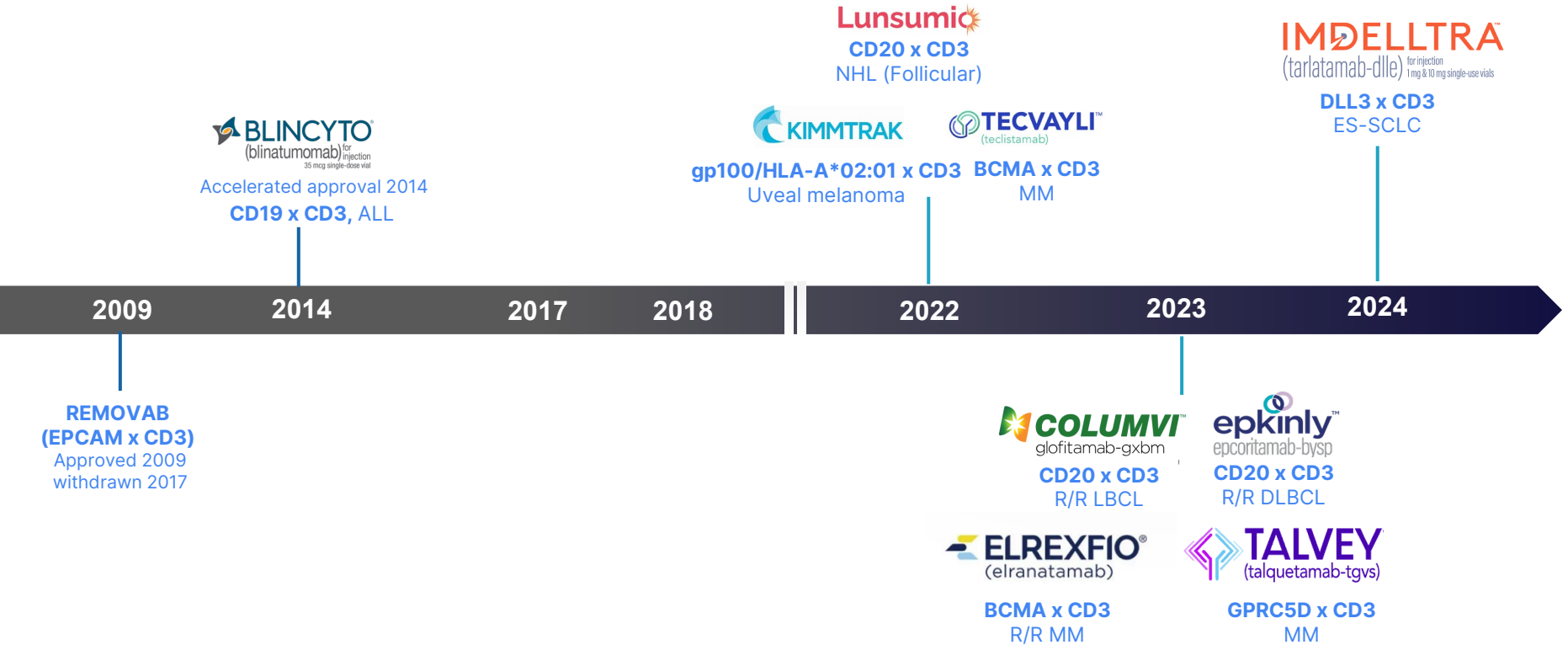


T Cell Engagers for Cancer Immunotherapy

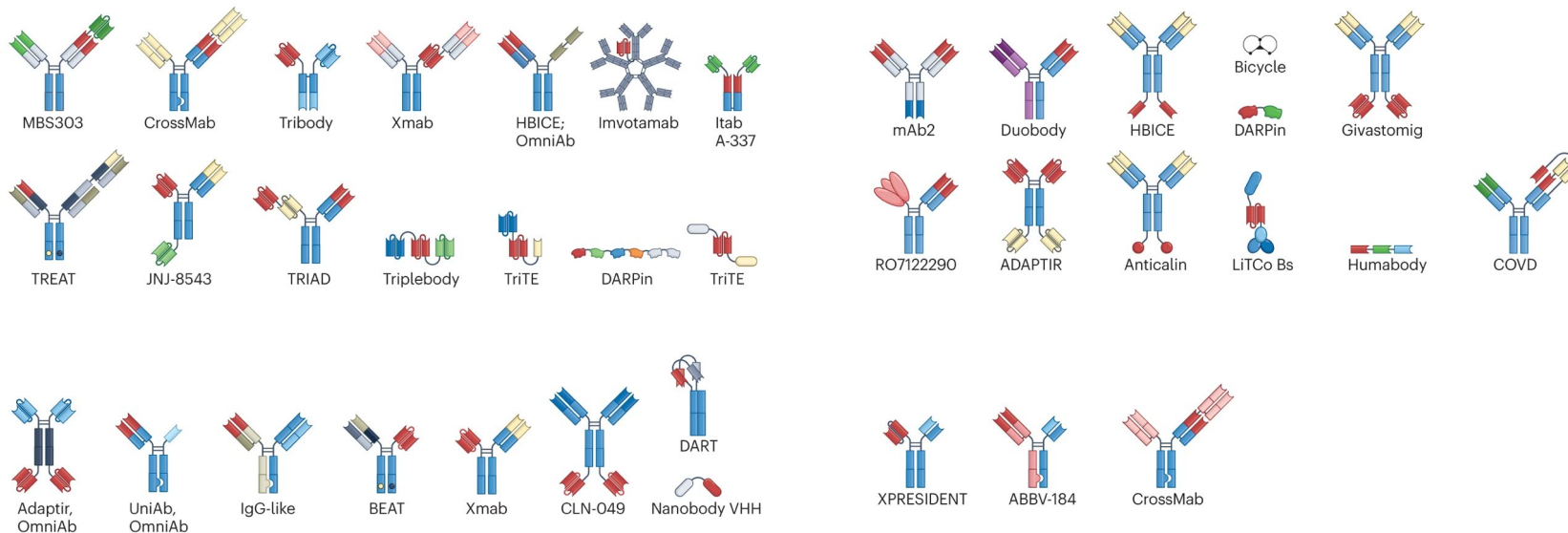


- T cell Engagers (TCEs) are classically designed as bi-specific antibody-like proteins that simultaneously engage T cells and tumor cells leading to targeted tumor cell death
- Targeting of T cells through anti-CD3 arm leads to T cell recruitment and activation
- Targeting of tumor cells through anti - Tumor Associated Antigen (TAA) arm increases specificity of killing

Accelerated Pace of T Cell Engager Approvals in Oncology



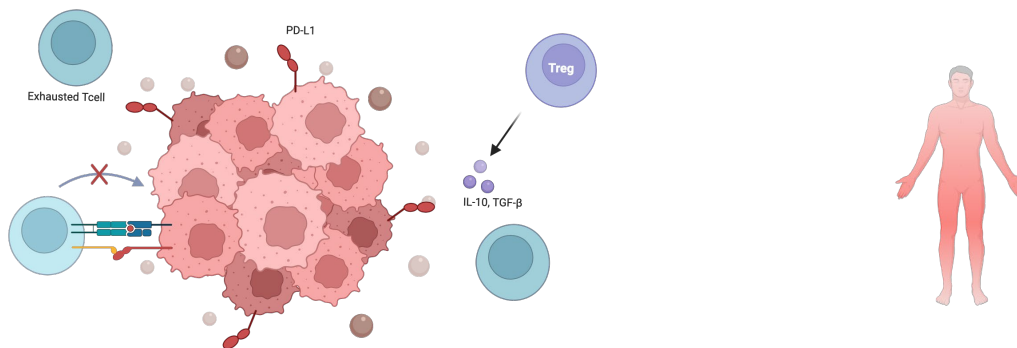
TCEs are Rapidly Evolving in Format and Functionality



Fenis, A., Demaria, O., Gauthier, L. *et al.* New immune cell engagers for cancer immunotherapy. *Nat Rev Immunol* **24**, 471–486 (2024).

Challenges Exist for TCEs in the Clinic

- Dose limiting toxicities (CRS, neurotoxicity, on-target off tumor)
- Post-treatment relapse (PD-L1 upregulation, Treg increases, T cell exhaustion, Loss of TAA)
- Short serum half life of first generation of T cell engagers
- Poor efficacy in solid tumors (less penetration and T cell presence)



Innovative Engineering of TCEs to Overcome Clinical Challenges

α CD3 Paratope

Fine tuned affinity and valency to reduce toxicity from CRS.

Fc engineering

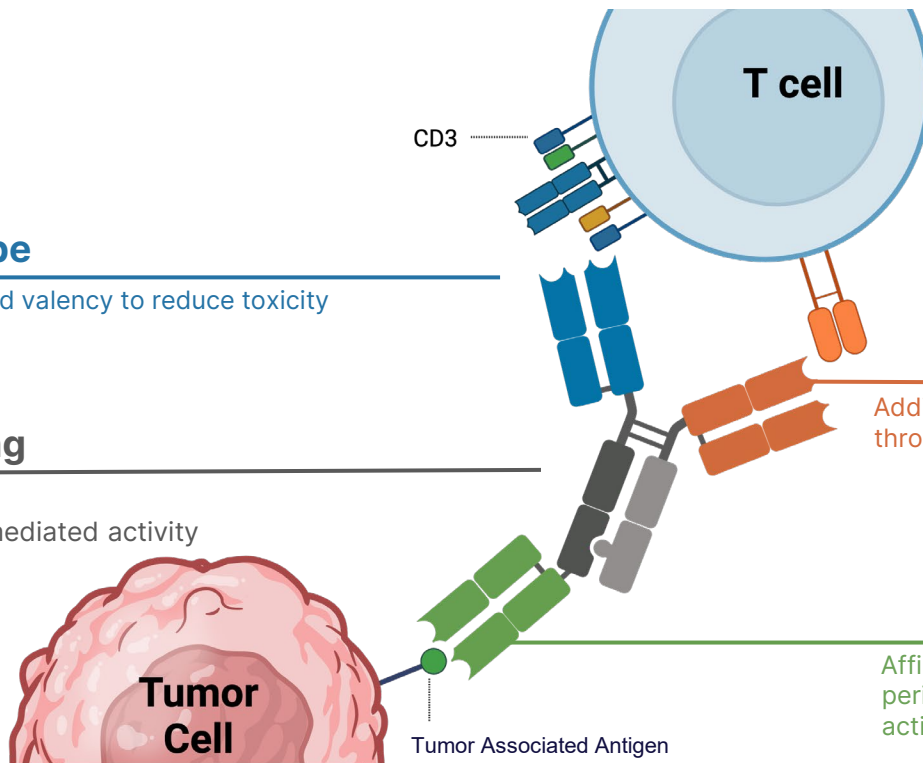
Half-life extension
Modulation of Fc mediated activity

Checkpoint blockade or Co-stimulation Paratope

Additional functionality that enhances anti-tumor activity through a complimentary pathway

α TAA Paratope

Affinity and valency adjusted to mitigate the risk of peripheral T cell activation and on-target off tumor activity



Zymeworks Data References:
L. Newhook, P. Bhojane et al. SITC 2023. Poster#1372
L. Newhook, P. Bhojane et al. AACR 2023. Poster#5121.

Engineering of TCEs Increases Complexity of *in vivo* Modeling

α CD3 Paratope

Requires presence of human T cells or transgenic expression of human CD3

Fc engineering

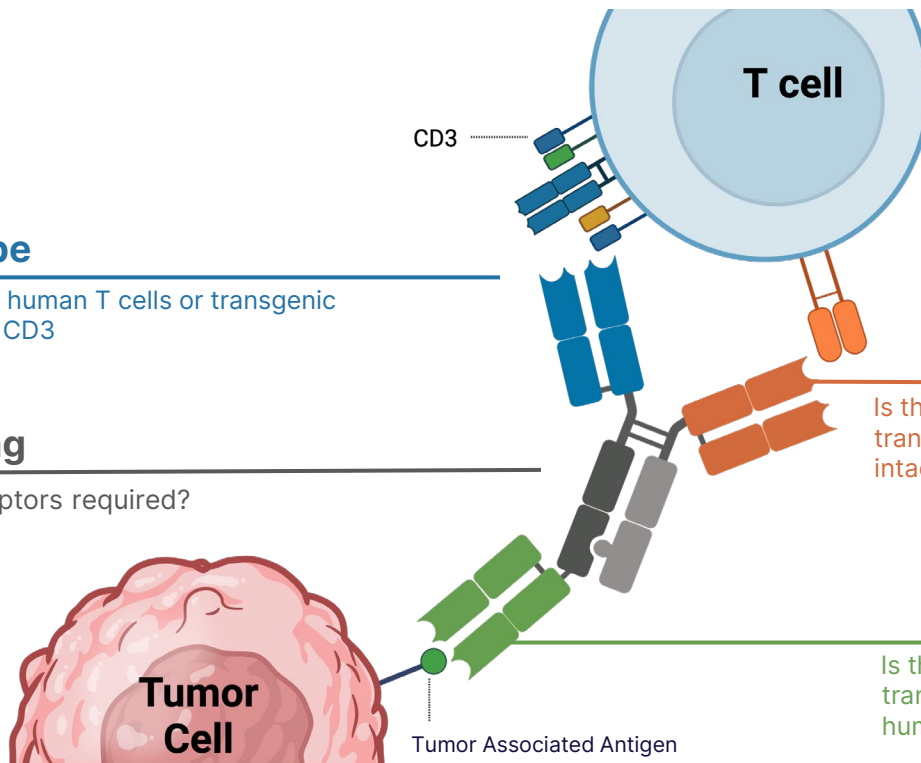
Binding to Fc Receptors required?

Checkpoint blockade or Co-stimulation Paratope

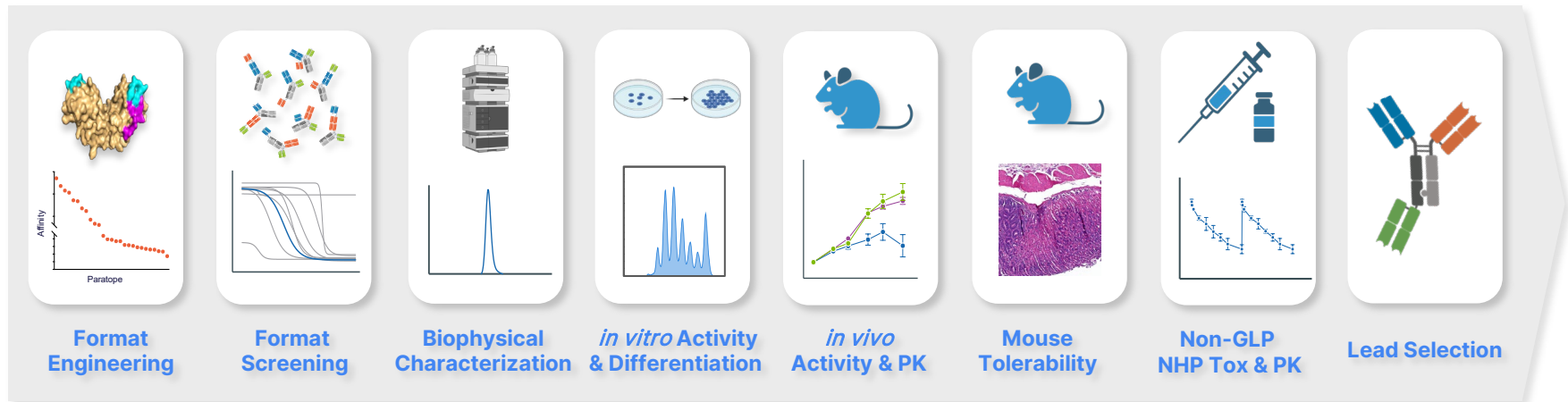
Is there cross-reactivity to mouse proteins or is a transgenic mouse required? Is your signaling pathway intact?

α TAA Paratope

Is there cross-reactivity to mouse protein or is a transgenic mouse required? Cell line expression of human protein? Expression patterns.



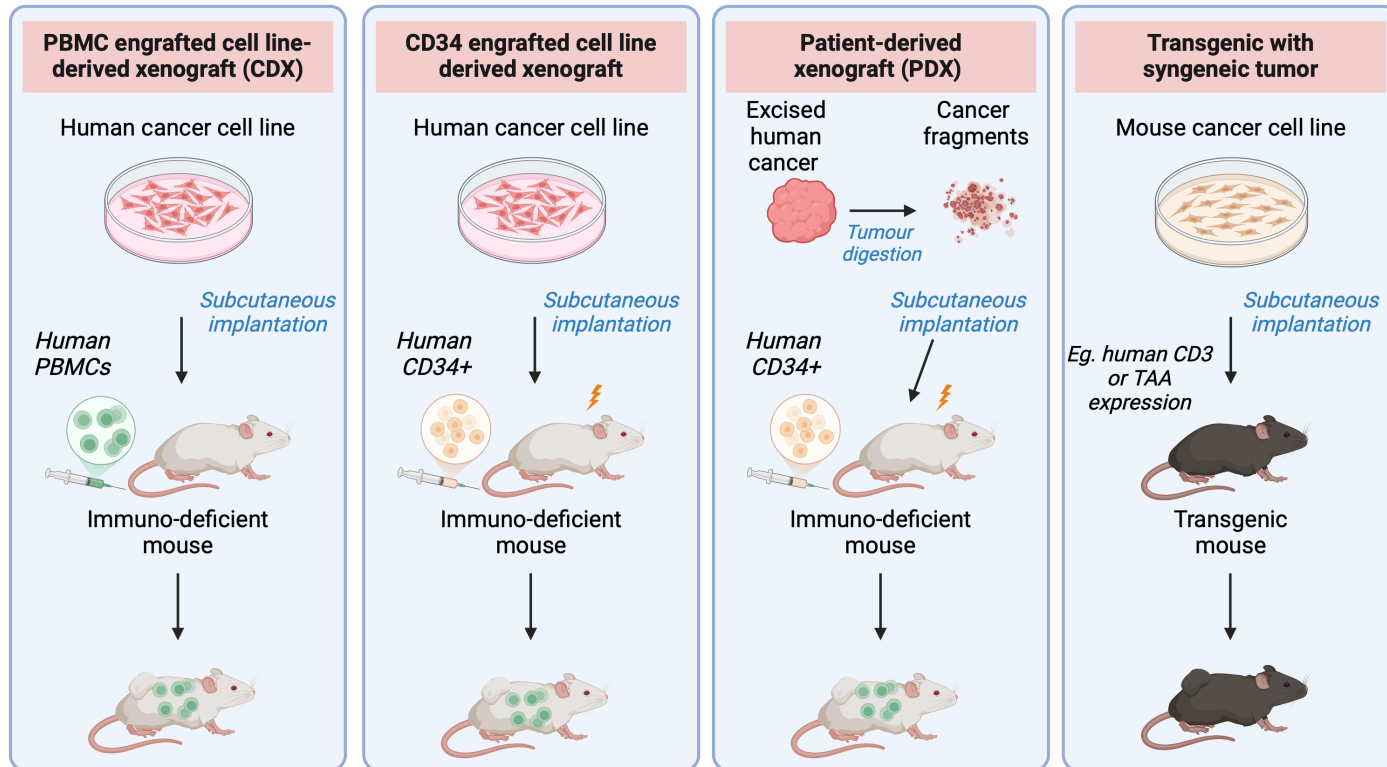
Workflow For Preclinical Development of Multispecific TCEs



Why Humanized Mouse Models?

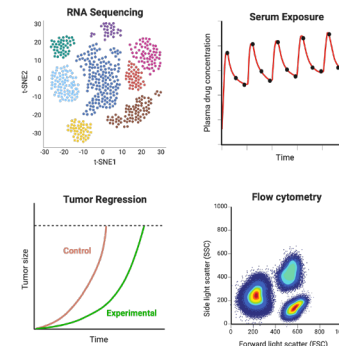
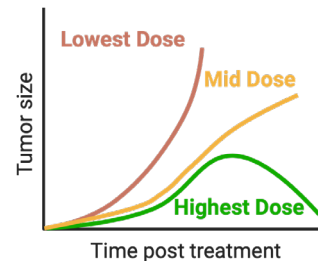
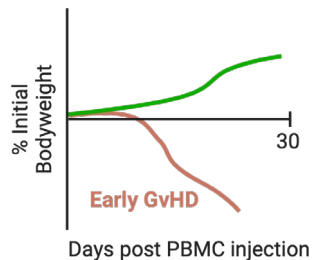


Humanized *in vivo* Models for Evaluating TCE Anti-tumor Activity



PBMCs = Peripheral Blood Mononuclear Cells

Focus in: PBMC Humanized Models



Model Selection / Growth Kinetics

- Expression of TAA
- Indication of interest
- Previous use with humanized mice
- Evidence of activity with similar molecules

PBMC Donor Screen

- Timeline for graft versus host disease
- Non-treatment PBMC vs Tumor activity
- Responsiveness to positive control

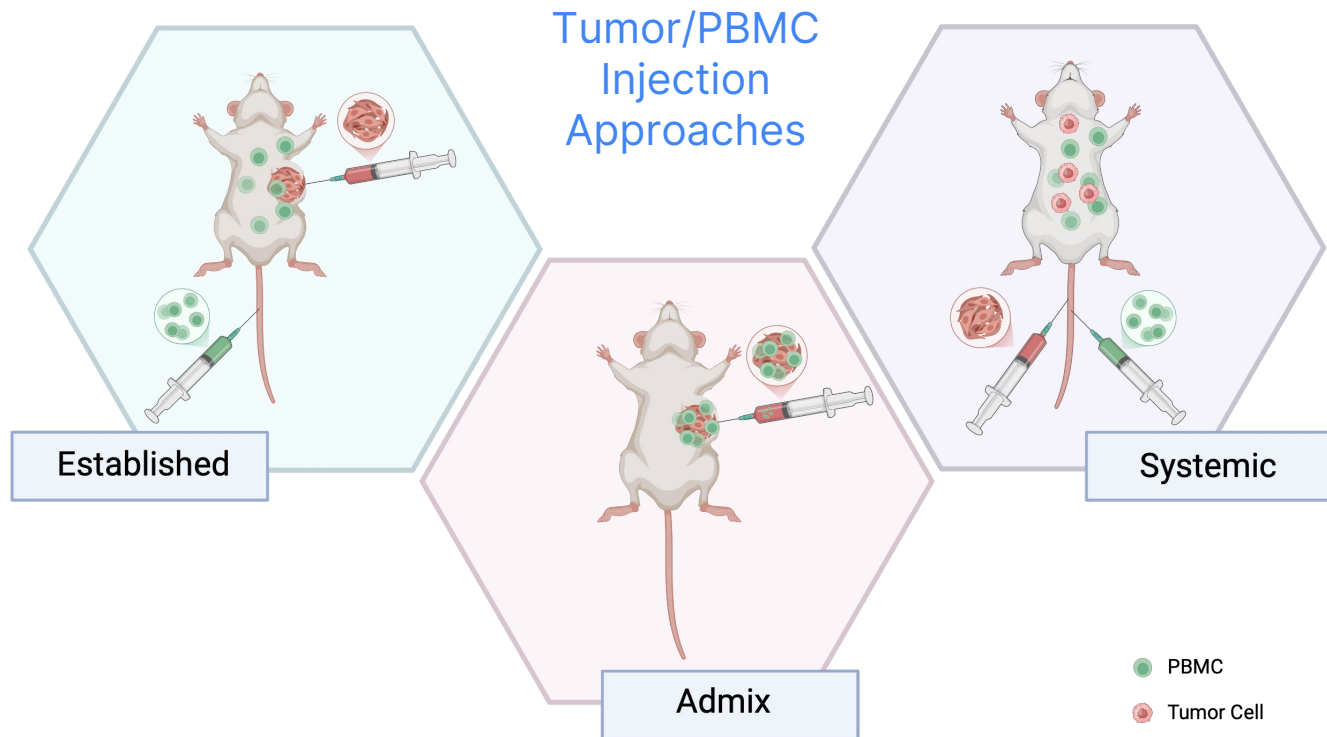
Dose Range Finding Study

- Active dose ranges for our positive control or lead molecule

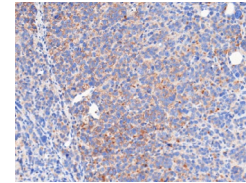
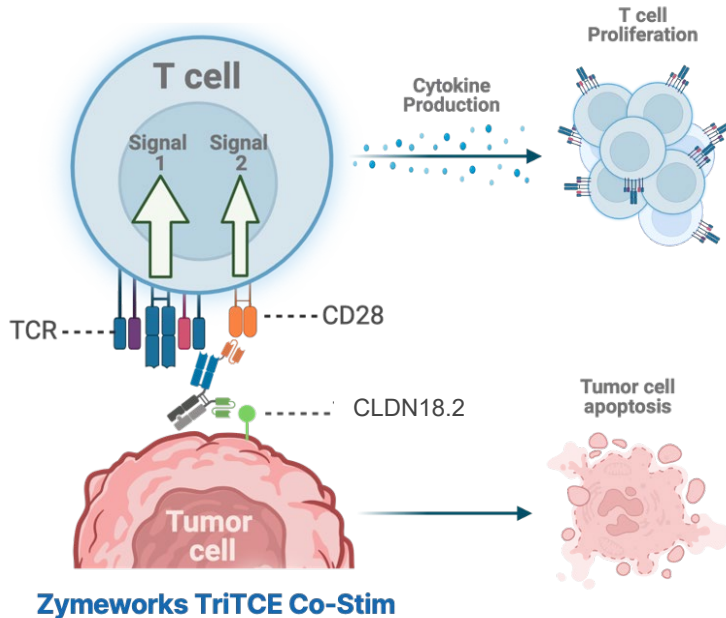
In vivo Anti-tumor Study

- Activity compared to controls and benchmarks
- Blood Pharmacokinetics
- Bodyweight loss
- Clinical health
- Pharmacodynamic analysis

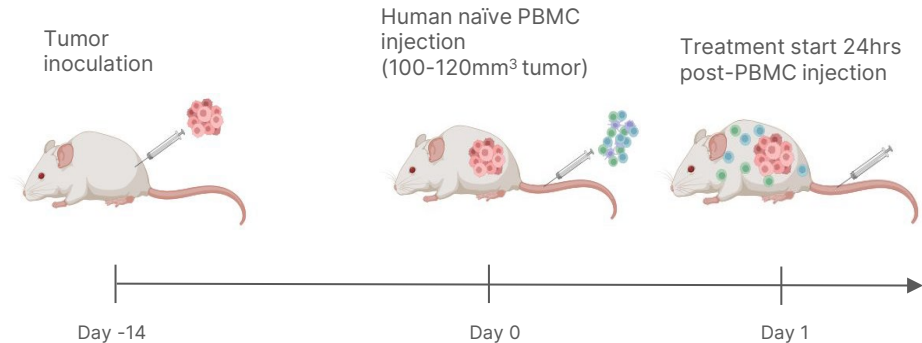
Focus in: PBMC Humanized Models



Case Study 1: Established PBMC Humanized Models can be used to Evaluate Activity of Trispecific TCEs with Co-stimulatory Function

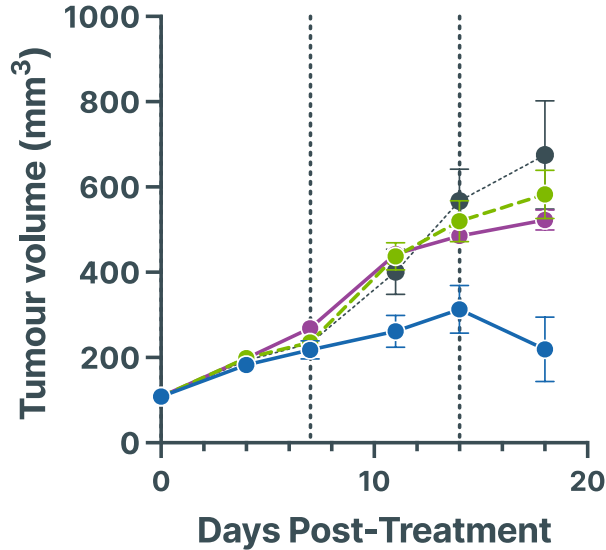


CLDN18.2 IHC of Gastric Cancer Cell line (SNU620)

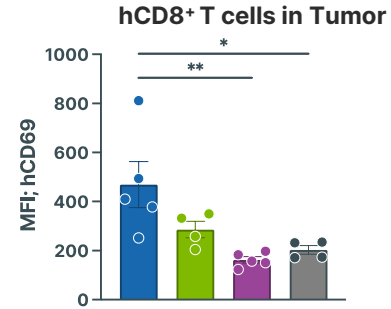
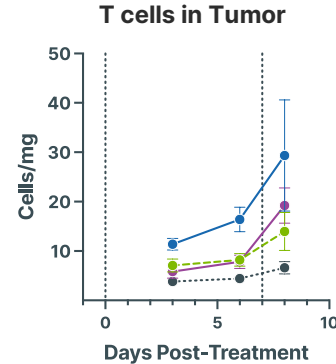
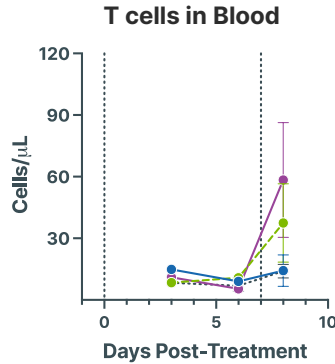


Goal: Evaluate activity of TriTCE molecule compared to Bispecific or Clinical Benchmark

CLDN18.2 Trispecific TCE (ZW239) has Enhanced Activity in an Established PBMC Model of Gastric Cancer



..... Test articles dosed weekly at 0.01 mg/kg



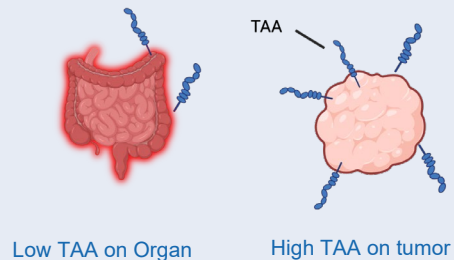
CD69 = T cell activation marker

- CLDN18.2 TriTCE Co-Stim (CD3 x CLDN18.2 x CD28)
- CLDN18.2 Bispecific TCE (CD3 x CLDN18.2)
- Benchmark (CD3 x CLDN18.2)
- Negative Control

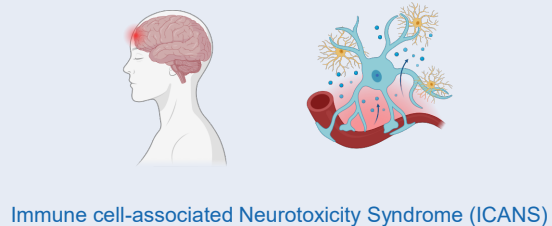
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Tolerability Concerns for TCEs

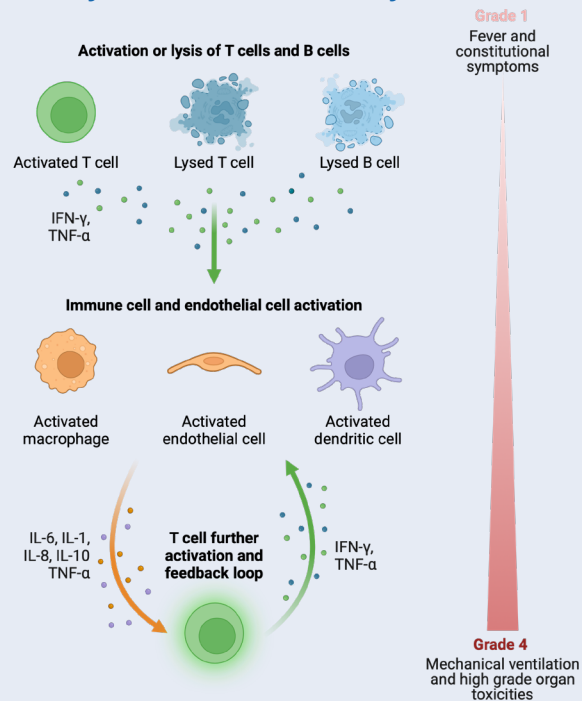
On Target Off Tumor Activity



Neurotoxicity



Cytokine Release Syndrome

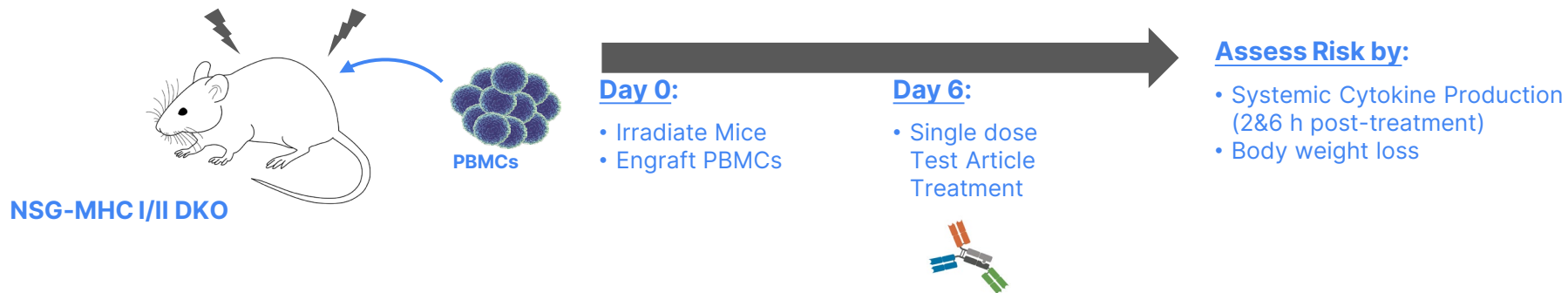


In vivo Modeling of Cytokine Release Syndrome Risk

In vivo Model	Features of CRS
PBMC Cytokine Release High cytokine producing PBMCs in immunocompromised mouse	<ul style="list-style-type: none">✓ T cell cytokine response (human)✗ Myeloid cell activation and signal amplification from cytokines✗ Non-immune cell response and activation by cytokines (e.g. Endothelial cells)
CD34⁺ Human w/ Cytokine Human stem cells engrafted in immunocompromised mouse with human cytokines (supports non-T cell immune engraftment)	<ul style="list-style-type: none">✓ T cell cytokine response (human)✓ Myeloid cell activation and signal amplification from cytokines✗ Non-immune cell response and activation by cytokines (e.g. Endothelial cells)
Transgenic Human protein expression in immunocompetent mouse (eg. Human CD3 & Human TAA)	<ul style="list-style-type: none">✓ T cell cytokine response (mouse)✓ Myeloid cell activation and signal amplification from cytokines✓ Non-immune cell response and activation by cytokines (e.g. Endothelial cells)

Case Study 2: PBMC Humanized Cytokine Release Model can be used to Assess Risks of Human T Cell Activation

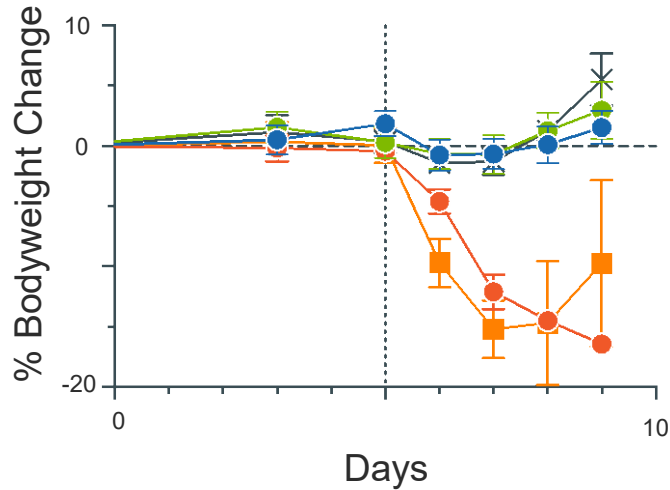
- Utilizes PBMCs pre-screened and identified as high cytokine producers



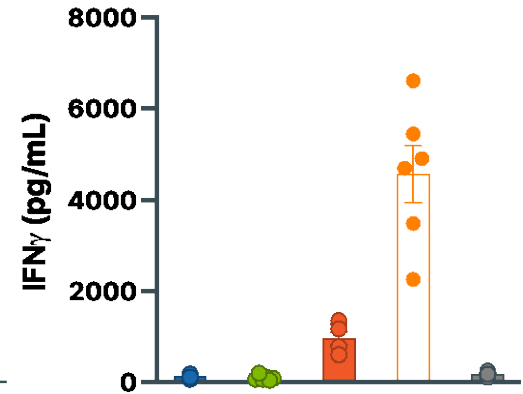
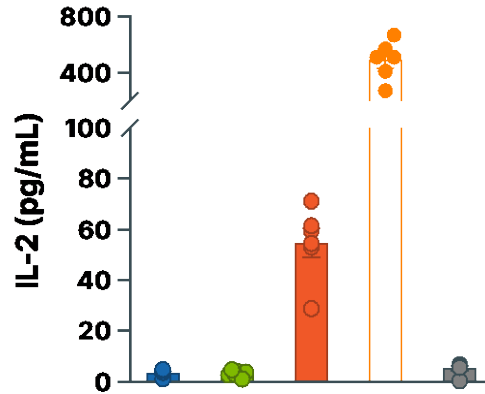
Goal: Evaluate T cell mediated tolerability risk of CD3 and CD28 engagement

Model References: A rapid, sensitive, and reproducible in vivo PBMC humanized murine model for determining therapeutic-related cytokine release syndrome. C. Ye et al. FASEB J. 2020 Aug 9;34(9):12963–12975.

OKT3 and an Anti-CD28 Superagonist cause Bodyweight Loss and Peripheral Cytokine Production but CLDN18.2 TriTCE Molecule Does Not



..... Test articles dosed at 1 mg/kg except OKT3 (0.25mg/kg)



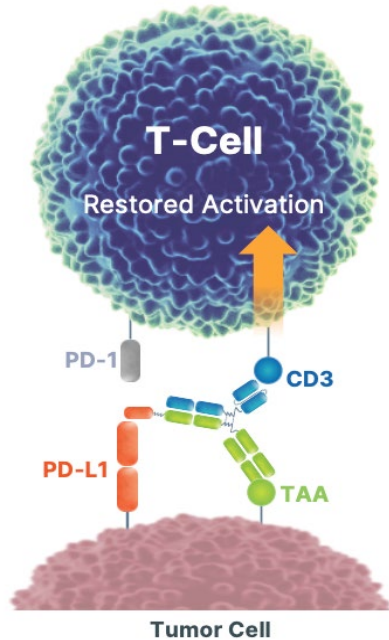
- CLDN18.2 TriTCE (ZW239)
- CLDN18.2 Bispecific TCE
- Anti-CD28 Superagonist
- Anti-CD3 (OKT3)
- Vehicle

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In vivo Modeling of Cytokine Release Syndrome Risk

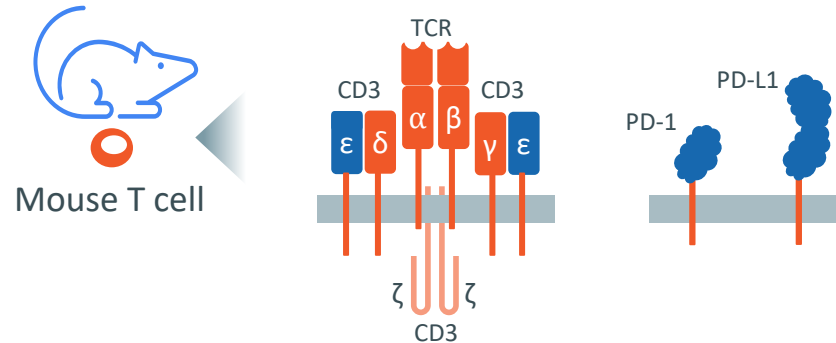
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Case Study 3: Transgenic Models can be used to Assess CRS & On-target Off-tumor Activity Risk



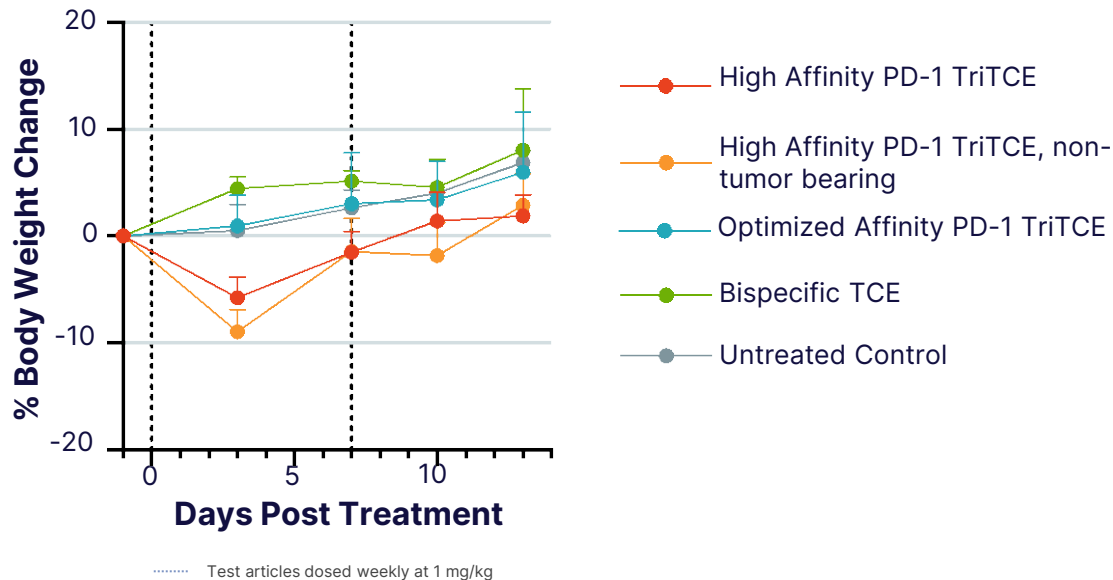
In vivo toxicity model

Transgenic mouse with human PD-1, PD-L1, and CD3 ϵ

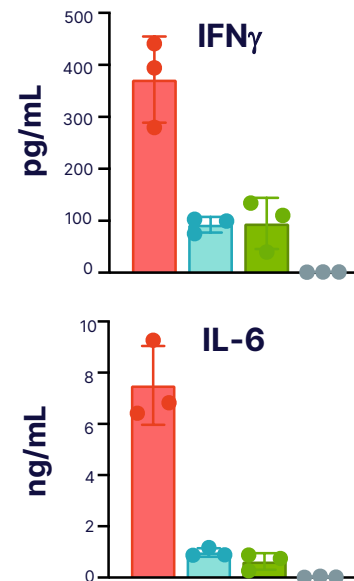


Goal: Assess PD-L1 & CD3 mediated tolerability risk of TriTCE Checkpoint Inhibitor molecules

Tuning PD-1 Domain Affinity Improves Tolerability and Peripheral Cytokine Release



Serum cytokines 24hrs post dosing



Conclusions and Outstanding Challenges For TCE Screening

Conclusions:

- Innovative engineering of TriTCEs increases the complexity of *in vivo* modelling
- Humanized models can be used to evaluate efficacy and tolerability
- Each model has its limitations, and often multiple preclinical models are required

How to improve translatability?

- Testing primary patient derived tumor tissues (*ex-vivo*, *in vivo*)
- Use of more physiologically relevant models (e.g. Orthotopic, patient derived PBMCs)
- Comparing TCEs in combination with approved standard care

Thanks to the Zymeworks Multispecific Antibody Therapeutics Team



Check Out Our Poster!

Title: TriTCE Co-Stim: A next generation trisppecific T cell engager platform with integrated CD28 co-stimulation to improve T cell function and antitumor responses in hard-to-treat cancers

