



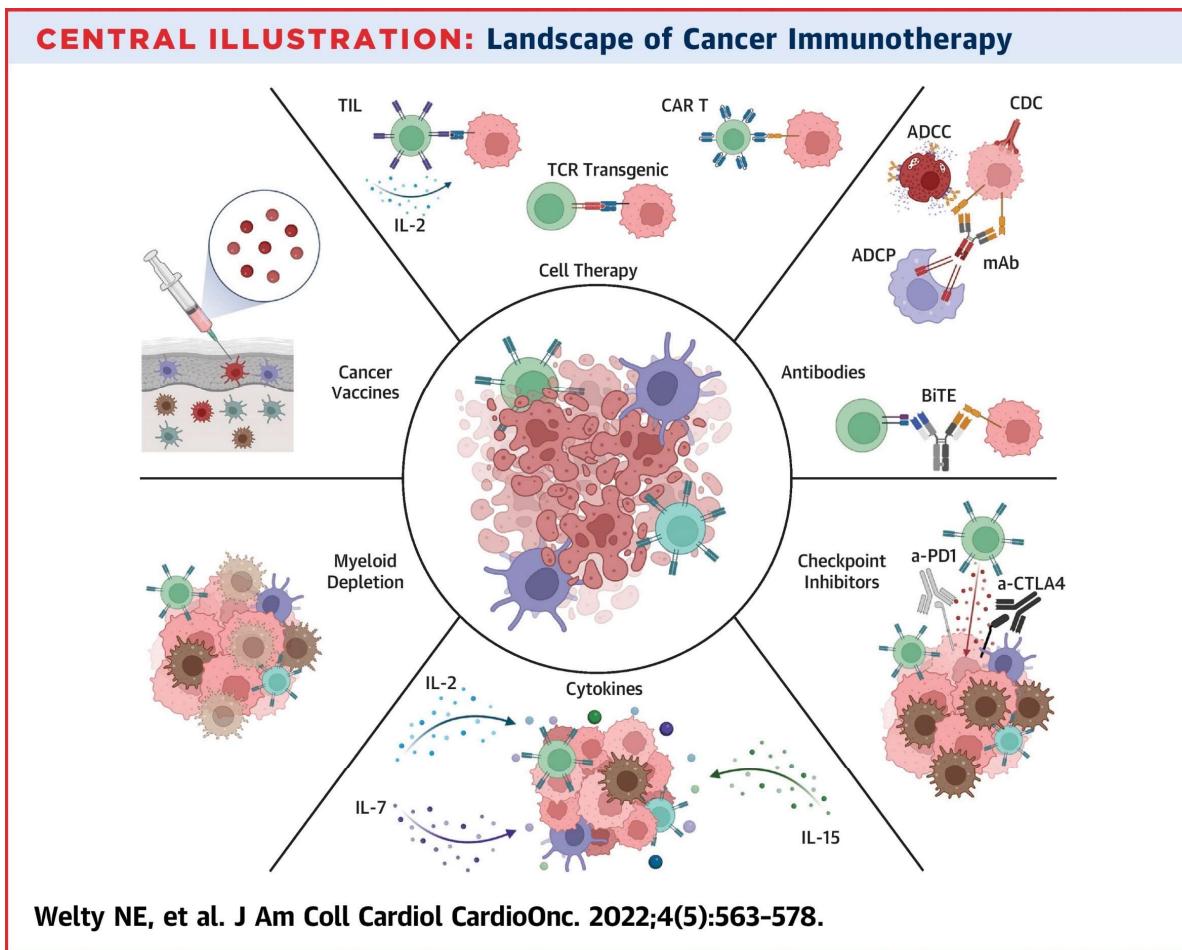
MULTISPECIFIC ANTIBODIES

JANUARY 10TH 2024

IMMUNOSCIENCE ACADEMY

Prof. Dr. Tessa Kerre

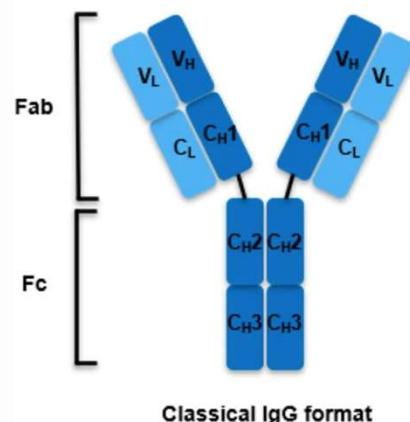
OVERVIEW: IMMUNOTHERAPY



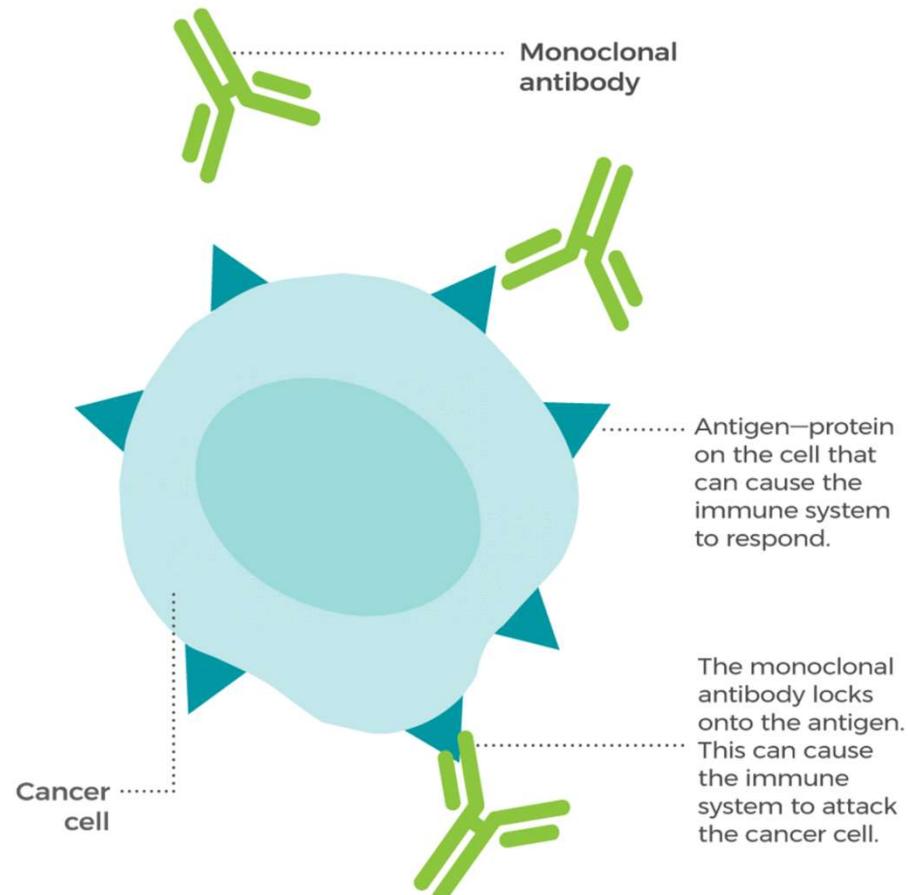
MONOCLONAL ANTIBODIES

MONOCLONAL ANTIBODIES

– Principle

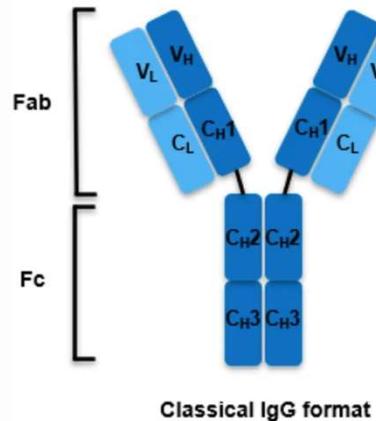


S Huang et al, J Cancer Res and Clin Oncol, 2020

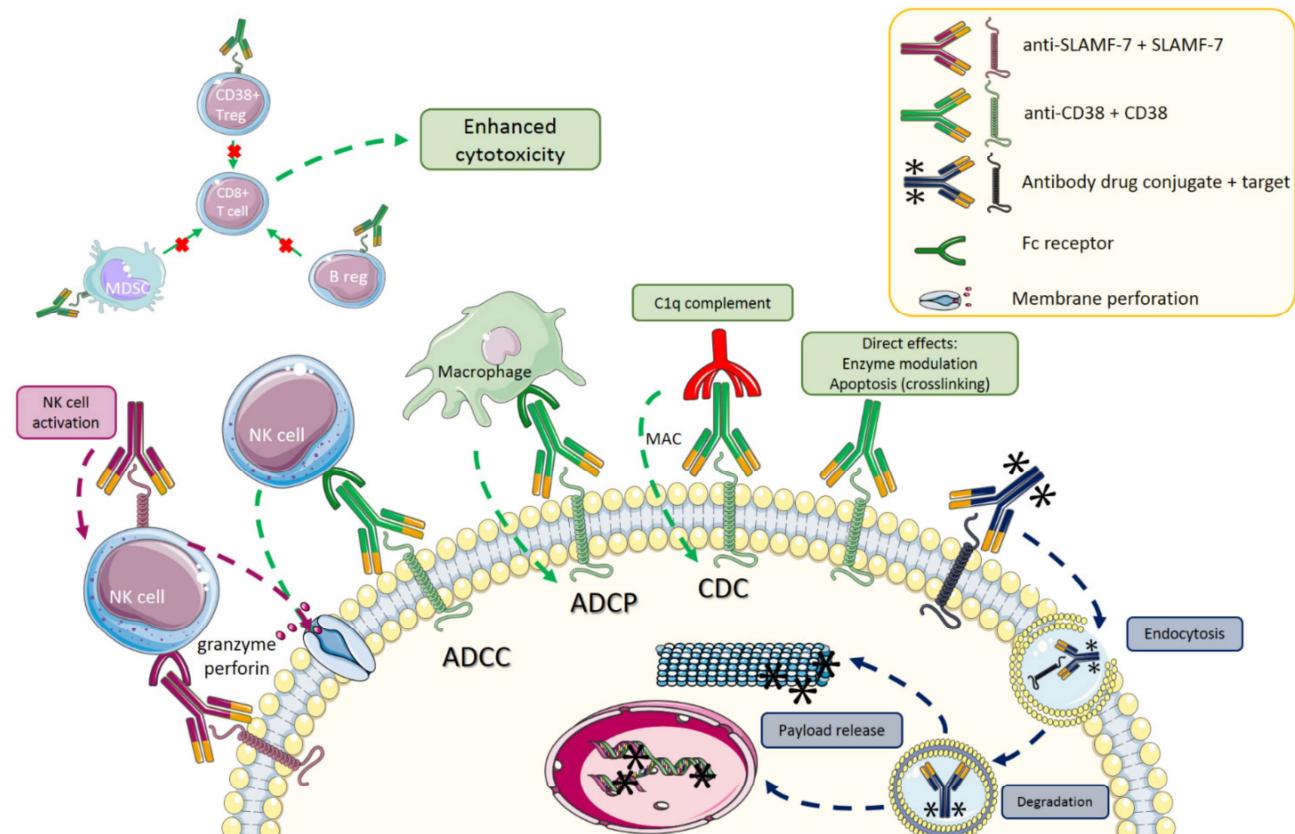


MONOCLONAL ANTIBODIES

– Mechanisms of action



S Huang et al, J Cancer Res and Clin Oncol, 2020

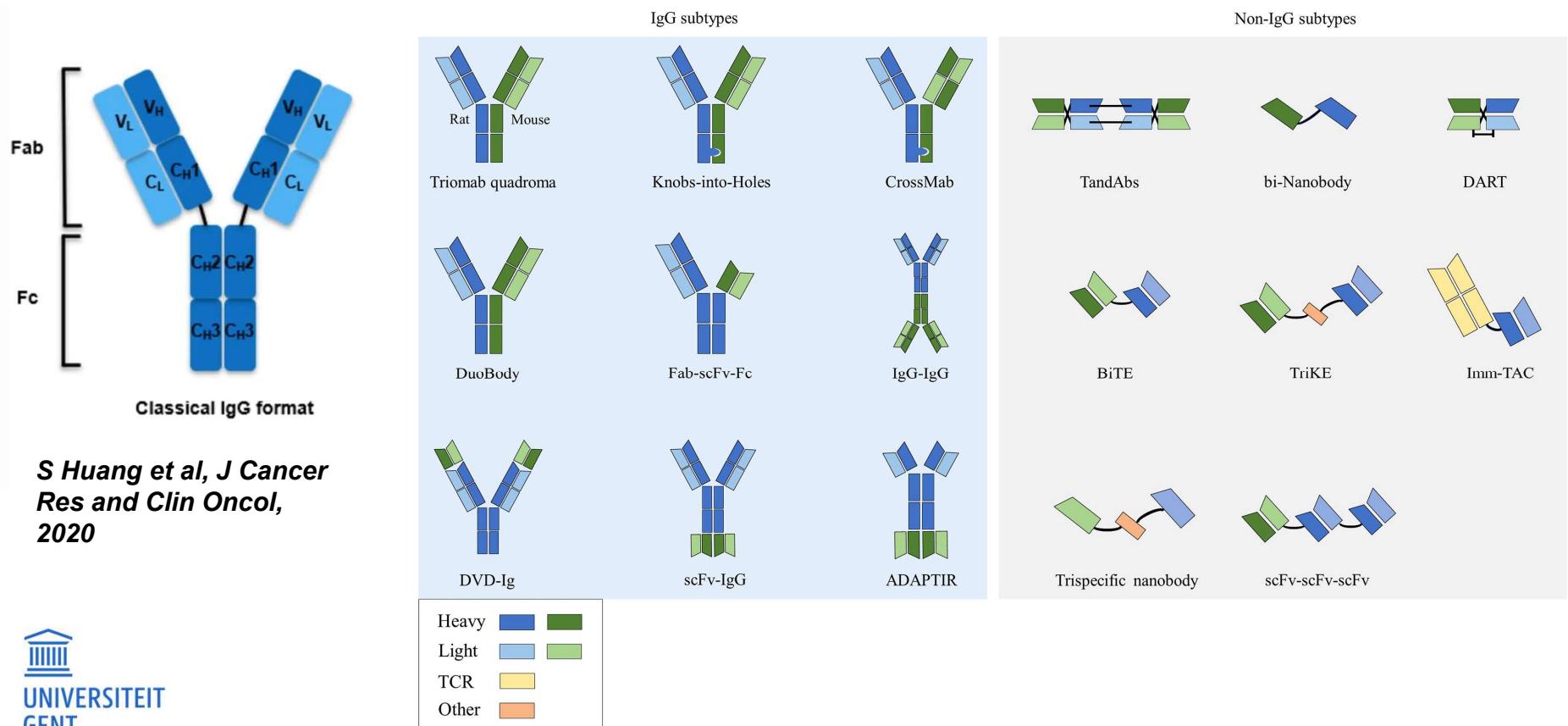


J Radocha, Cancers, 2021

MULTISPECIFIC ANTIBODIES

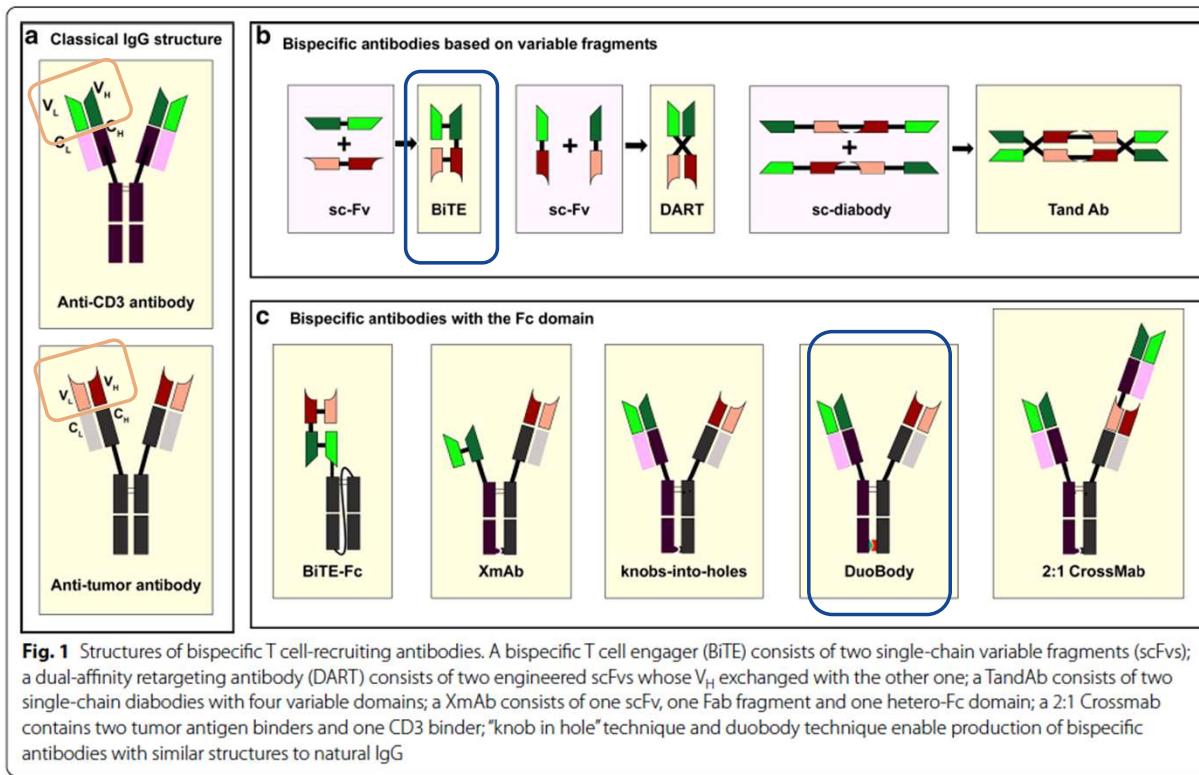
MULTISPECIFIC ANTIBODIES

Structure



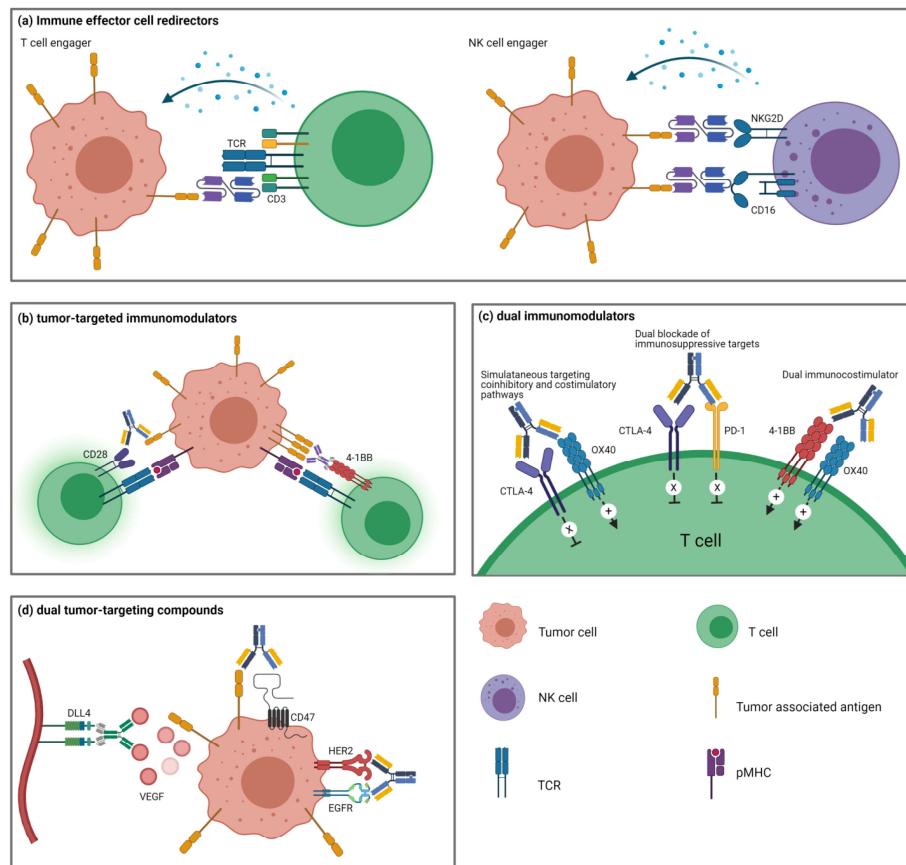
MULTISPECIFIC ANTIBODIES

Structure



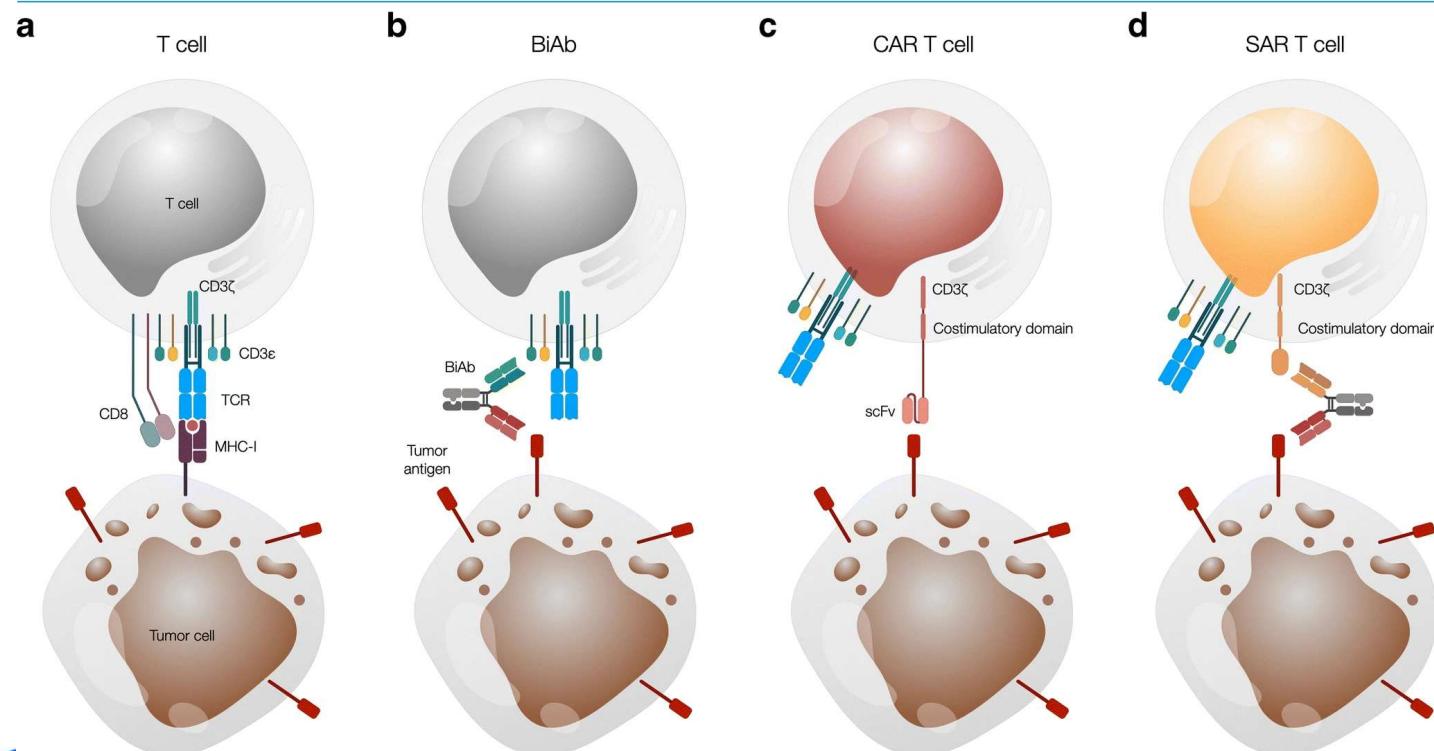
MULTISPECIFIC ANTIBODIES

Mechanisms of action



MULTISPECIFIC ANTIBODIES

Mechanisms of action

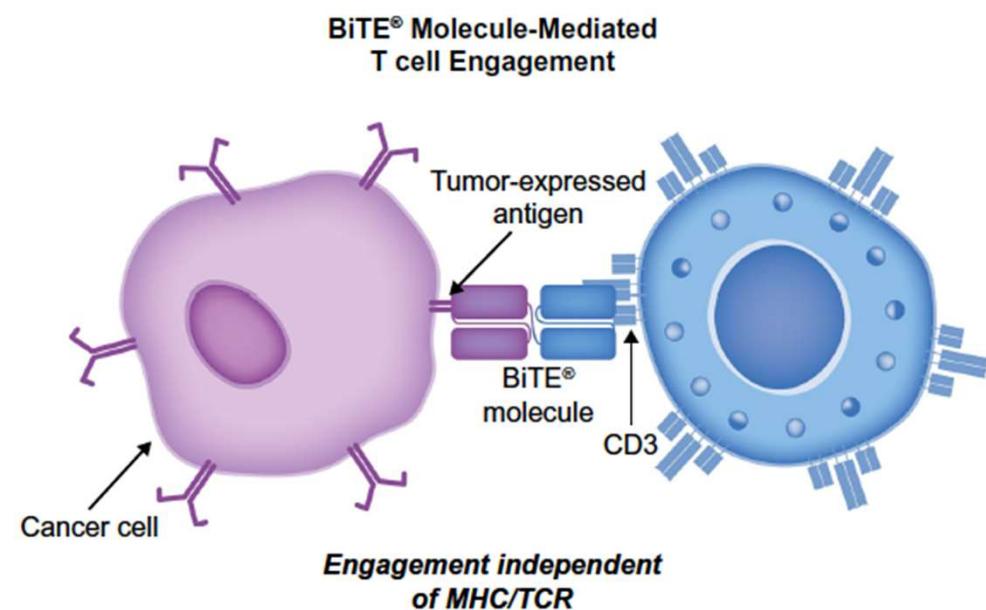
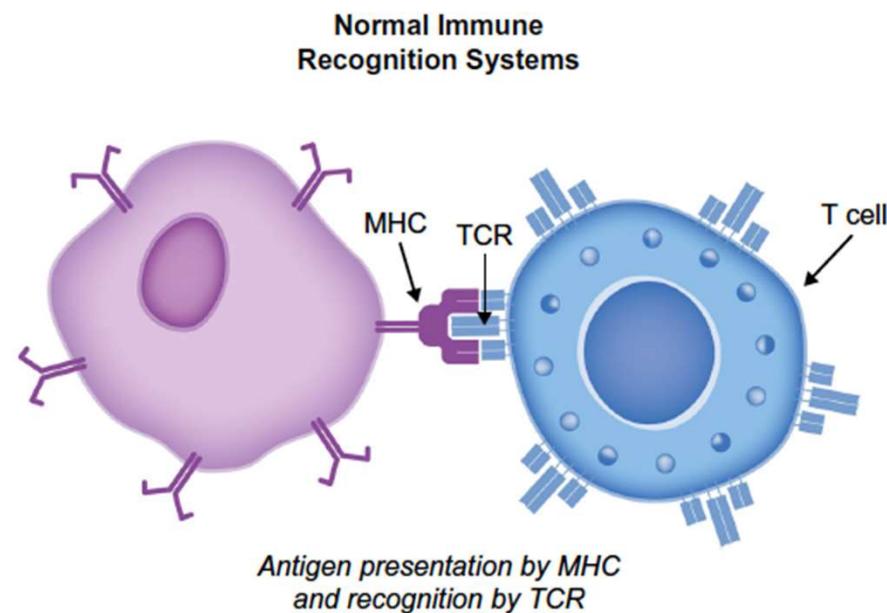


PK0 added abbreviations

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BITES

Mechanisms of action

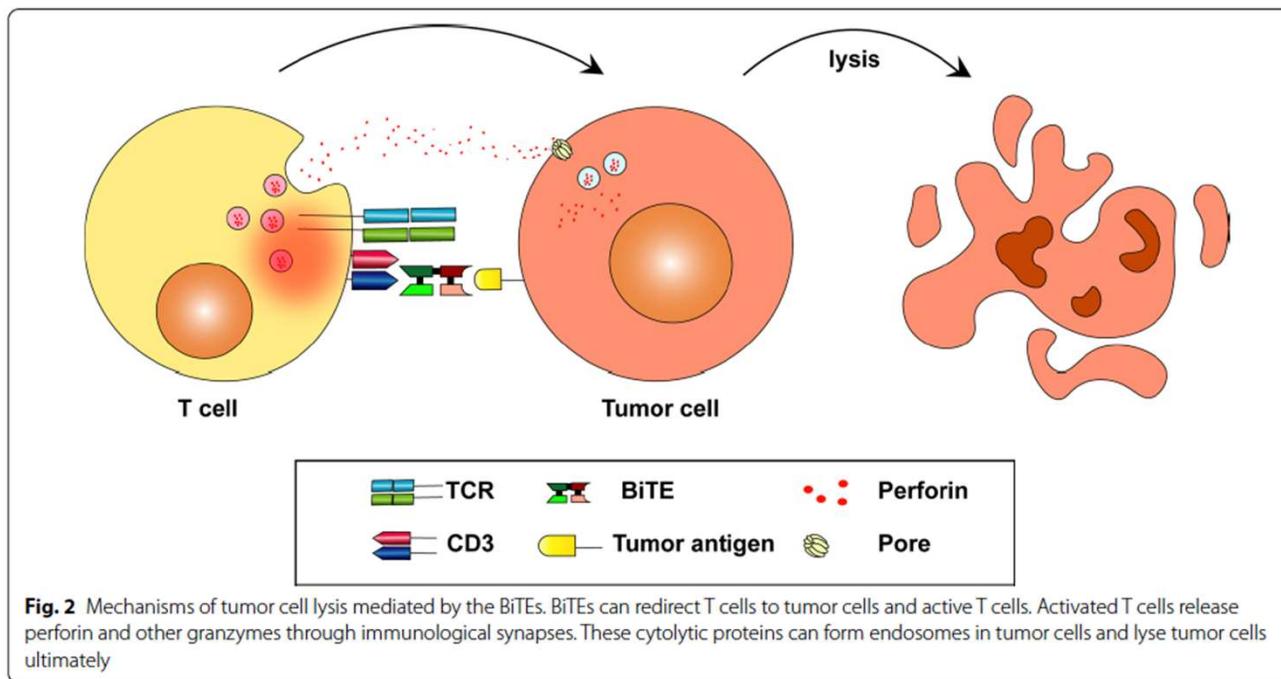


PK0 added abbreviations

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BISPECIFIC ANTIBODIES AND BITES

Mechanisms of action

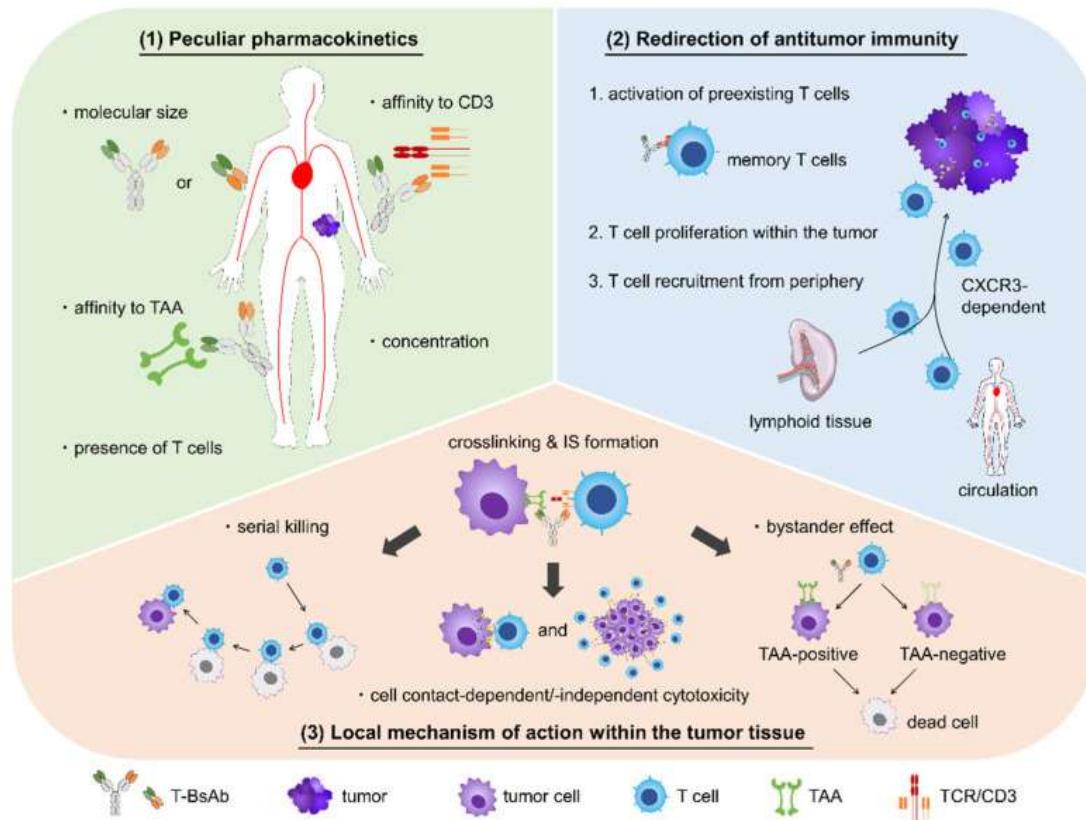


PK0 added abbreviations

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MULTISPECIFIC ANTIBODIES

Mechanisms of action



MULTISPECIFIC ANTIBODIES

Multi(bi)specifics for hematologic malignancies reimbursed in Belgium

B-ALL

- **Blinatumumab** – CD19/CD3 BiTE – B-ALL

Lymphoma

Multiple myeloma

- **Teclistamab** = BCMA/CD3 bispecific Ab (duobody) – MM

Slide 14

PK0 Please note we removed the brand names due to the educational nature of this symposium

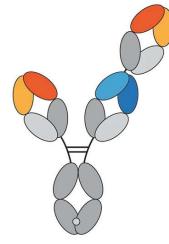
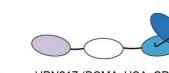
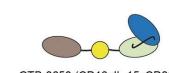
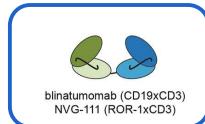
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PK1 added abbreviations

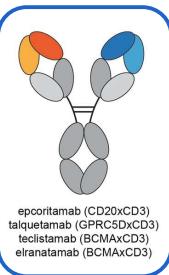
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MULTISPECIFIC ANTIBODIES

Structure



mosunetuzumab (CD20xCD3)

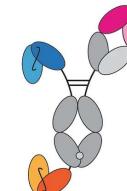
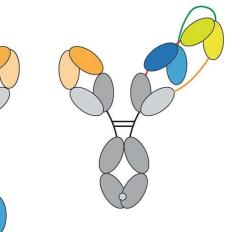
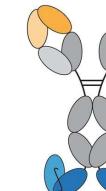
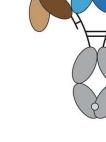
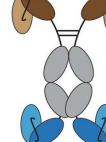
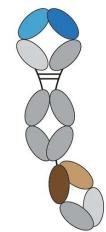
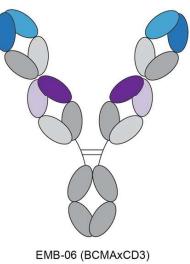
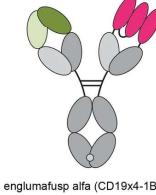
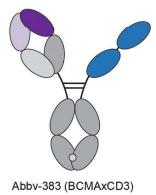
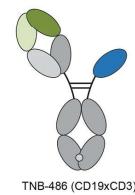


odronextamab (CD20xCD3)

linvosettamab (BCMAxCD3)

plamotamab (CD20xCD3)

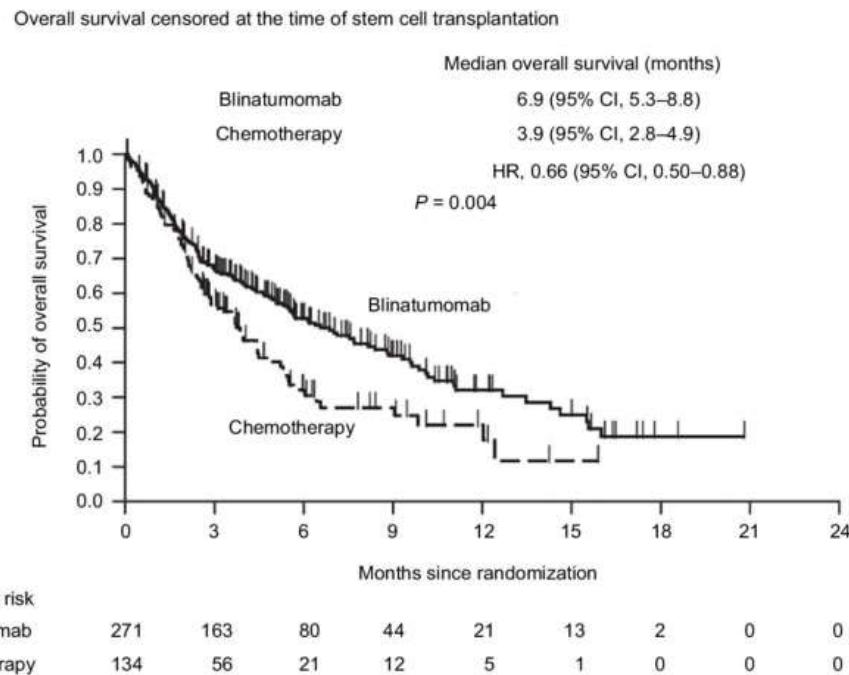
ISB1342, Y150 (CD38xCD3)



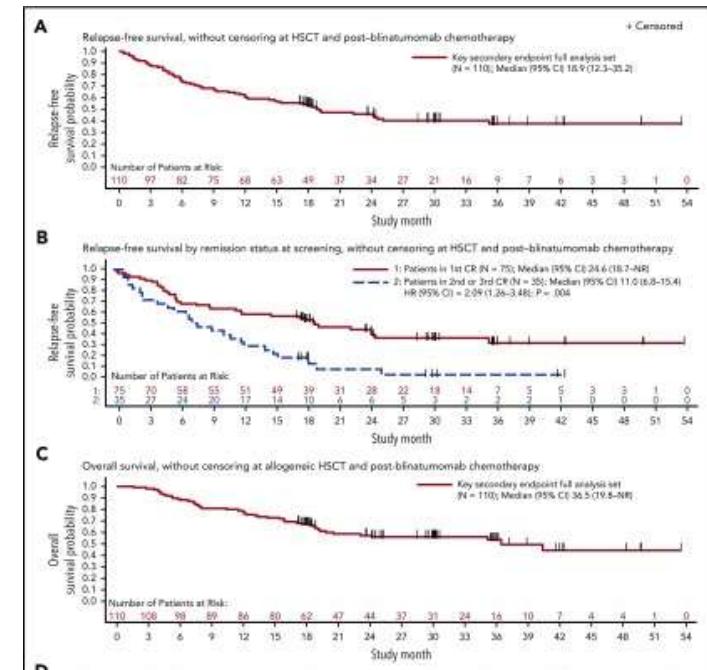
MULTISPECIFIC ANTIBODIES

Blinatumomab = anti-CD19/anti-CD3 BiTE = the pioneer

R/R B-ALL



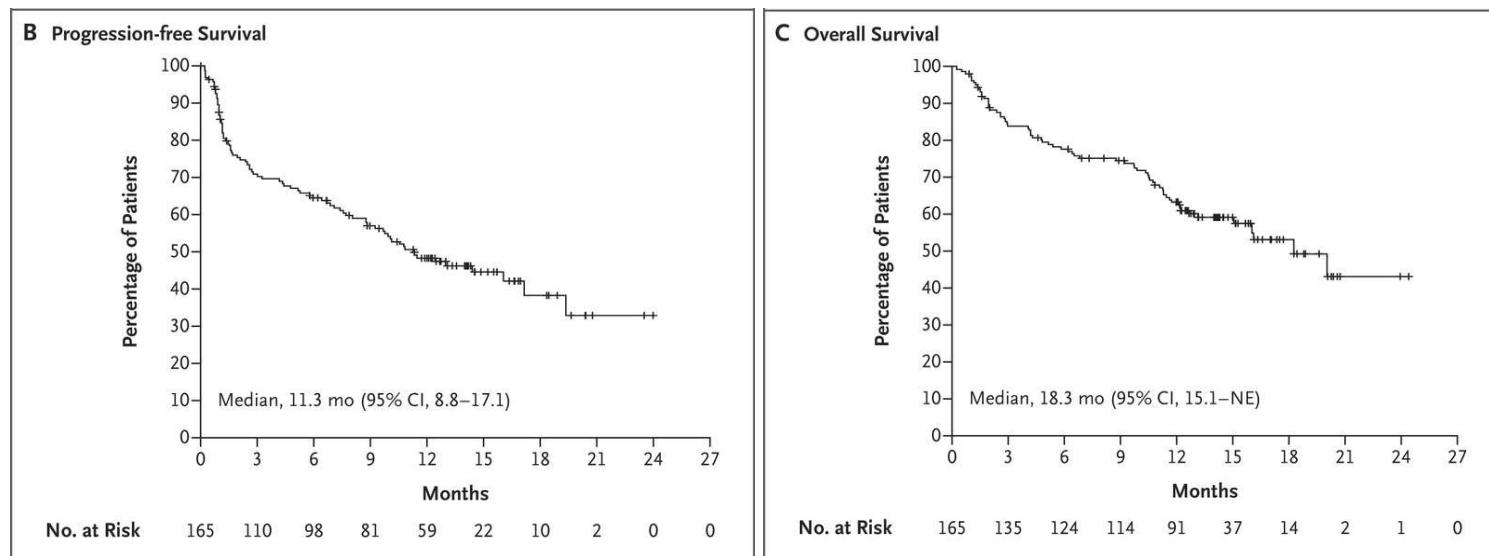
MRD+ B-ALL



MULTISPECIFIC ANTIBODIES

Teclistamab = anti-BCMA/anti-CD3 BiAb

Relapsed/refractory myeloma after at least three therapy lines, including triple-class exposure (immunomodulatory drug, proteasome inhibitor, and anti-CD38 antibody)



PK0 added abbreviations

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MULTISPECIFIC ANTIBODIES

Bispecific antibodies for hematologic malignancies

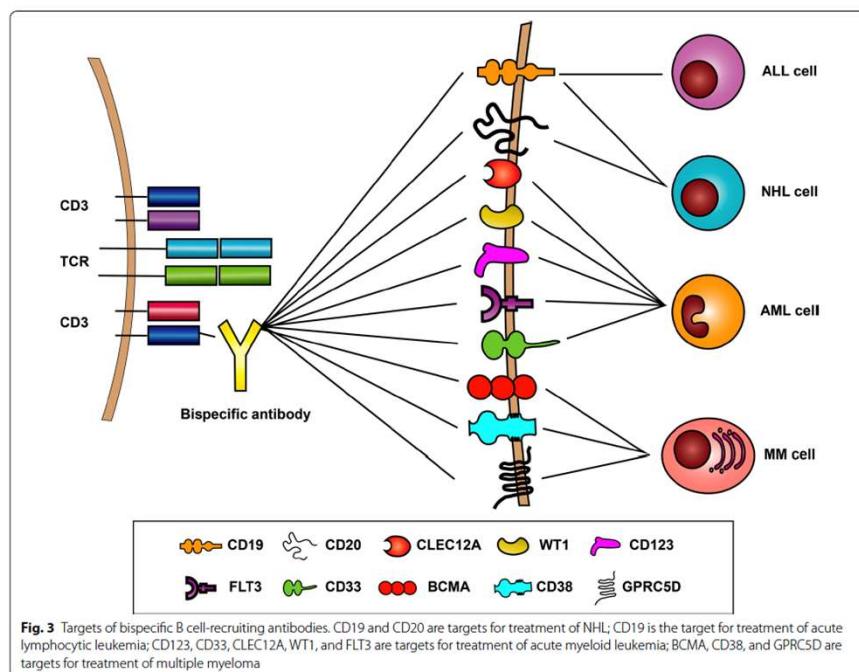


Table 1 Bispecific T cell-recruiting antibodies for the treatment of hematologic malignancies

Disease	Target	Name	Antibody format
AML	CD123-CD3	MGD006	DART
		XmAb14045	XmAb
	CD33-CD3	AMG 330	BiTE
		AMV 564	TandAb
	FLT3-CD3	7370	BiTE
	CLEC12A-CD3	MCLA-117	Biconics
	WT1-CD3	ESK1-BiTE	BiTE
	ALL	CD19-CD3	Blinatumomab
		AFM11	TandAb
MM	BCMA-CD3	AMG420	BiTE
		AMG701	BiTE-Fc
	GPRC5D-CD3	Talquetamab	DuoBody
	CD38-CD3	AMG424	XmAb
		Bi38-3	BiTE
	FCRL5-CD3	anti-FcRH5/CD3 TDB	Knobs-into-holes
NHL	CD19-CD3	Blinatumomab	BiTE
	CD20-CD3	REGN1979	Veloci-Bi platform
		Mosunetuzumab	Knobs-into-holes
		RG6026	2:1 CrossMab
	MDS	AMV564	TandAb
	CD123-CD3	MGD006	DART

PKO abbreviations

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MULTISPECIFIC ANTIBODIES

Multi (bi) specifics for hematologic malignancies coming (soon?)...

Lymphoma

- **Epcoritamab** = CD20/CD3 bispecific Ab (duobody) – DLBCL – CUP
- **Glofitamab** = CD20/CD3 bispecific Ab (crossbody) - DLBCL (DLBCL - 3rd line) – CUP
- **Mosunetuzumab** = CD20/CD3 KIH – FL
- **Odronextamab** = CD20/CD3 VelociBi - NHL

Multiple myeloma

- **Talquetamab** = GPRC5D/CD3 bispecific Ab (duobody) - MM - CUP

PK0 please note we removed the brand names due to the educational nature of the symposium

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PK1 added abbreviations

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MULTISPECIFIC ANTIBODIES

Multispecifics for solid tumors

Table 1. Bispecific T-cell engagers therapy in solid tumors ([clinicaltrials.gov](#) accessed on 1 November 2022).

NCT	Phase	Drug (Format)	Target	Indication	Status	Results	Ref.
NCT00836654	2/3	Catumaxomab or Removab® (Triomab®)	EpCAM xCD3	Malignant ascites and EpCAM-positive tumors	Completed	N = 258 (129 ovarian cancer) Puncture-free survival: 46 vs. 11 days AE: fever (60%); abdominal pain (43%)	[51]
NCT01065246	2	Catumaxomab	EpCAM xCD3	Malignant ascites due to epithelial carcinoma	Completed	N = 8 (rechallenge of intraperitoneal catumaxomab) Puncture-free survival: 47.5 days	[57]
NCT00326885	2	Catumaxomab	EpCAM xCD3	Malignant ascites ovarian cancer	Completed	Puncture-free survival: 29.5 days Ascites symptoms improved	[58]
NCT01246440	2	Catumaxomab	EpCAM xCD3	Ovarian cancer	Completed	N = 46 (consolidation therapy) Median duration treatment: 13 days Grade 3-4 AE in 29 pts (74.4%) Treatment interruption in 4 (10.2%)	[59]
NCT00189345	2	Catumaxomab	EpCAM xCD3	Platinum refractory ovarian, fallopian tube, and peritoneal neoplasms	Completed	N = 46 (low dose 23 + high dose 22) No difference AE low vs. high Stable disease in 2 pts (low) and 5 pts (high)	[60]
NCT01815528	2	Catumaxomab	EpCAM xCD3	Recurrent epithelial ovarian cancer	Completed	Not reported	
NCT00563836	2	Catumaxomab	EpCAM xCD3	Ovarian cancer	Completed	Not reported	
NCT04222114	3	Catumaxomab	EpCAM xCD3	Gastric cancer	Recruiting		
NCT	Phase	Drug (Format)	Target	Indication	Status	Results	Ref.
NCT01504256	2	Catumaxomab + FLOT	EpCAM xCD3	Gastric adenocarcinoma with peritoneal carcinomatosis	Completed	N = 31 (FLOT + catumaxomab 15 pts (A) vs. FLOT alone 16 pts (B)) Complete remission of carcinomatosis: 27% (A) vs. 19% (B) (p = 0.69). Severe AE: fever (23%), abdominal pain (31%), elevated liver enzymes (31%). Median PFS: 6.7 (A) vs. 5.4 months (B) (p = 0.71).	[61]
NCT00464893	2	Catumaxomab	EpCAM xCD3	Gastric cancer	Completed	Not reported	
NCT00352833	2	Catumaxomab	EpCAM xCD3	Gastric cancer	Completed	Not reported	
NCT04501744	1	M701	EpCAM xCD3	Malignant ascites	Recruiting		
NCT00635596	1	Solitomab or MT110 or AMG110	EpCAM xCD3	Relapsed/refractory solid tumors	Completed	N = 65 (35 colorectal; 10 ovarian; 8 gastric; 6 NSCLC; 3 SCLC; 3 mCRPC) 95% Grade ≥ 3 AE, mainly diarrhea, elevated liver parameters and lipase	[64]
				CEA			
NCT02324257 NCT02650713	1	RO6958688 or RG7802 + atezolizumab	CEA xCD3	CEA-positive tumors	Completed	N = 36 pts in monotherapy + 10 pts in combination Grade ≥ 3 AE: infusion related reaction (16.3%) and diarrhea (5%)	[65]
NCT01284231	1	AMG211 or MED1-565	CEA xCD3	Gastrointestinal adenocarcinomas	Completed	N = 39 (28 colorectal; 6 pancreatic, 5 other) Grade ≥ 3 AE in 5 pts (hypoxia n = 2, diarrhea, and CRS) Stable disease in 11 pts (28%)	[62]
NCT02291614	1	AMG211 or MED1-565	CEA xCD3	Gastrointestinal adenocarcinomas	Completed	Terminated due to high immunogenicity at high doses of >3.2 mg	[63]
NCT03337698	1/2	RO6958688 + atezolizumab	CEA xCD3	NSCLC	Recruiting		[64]

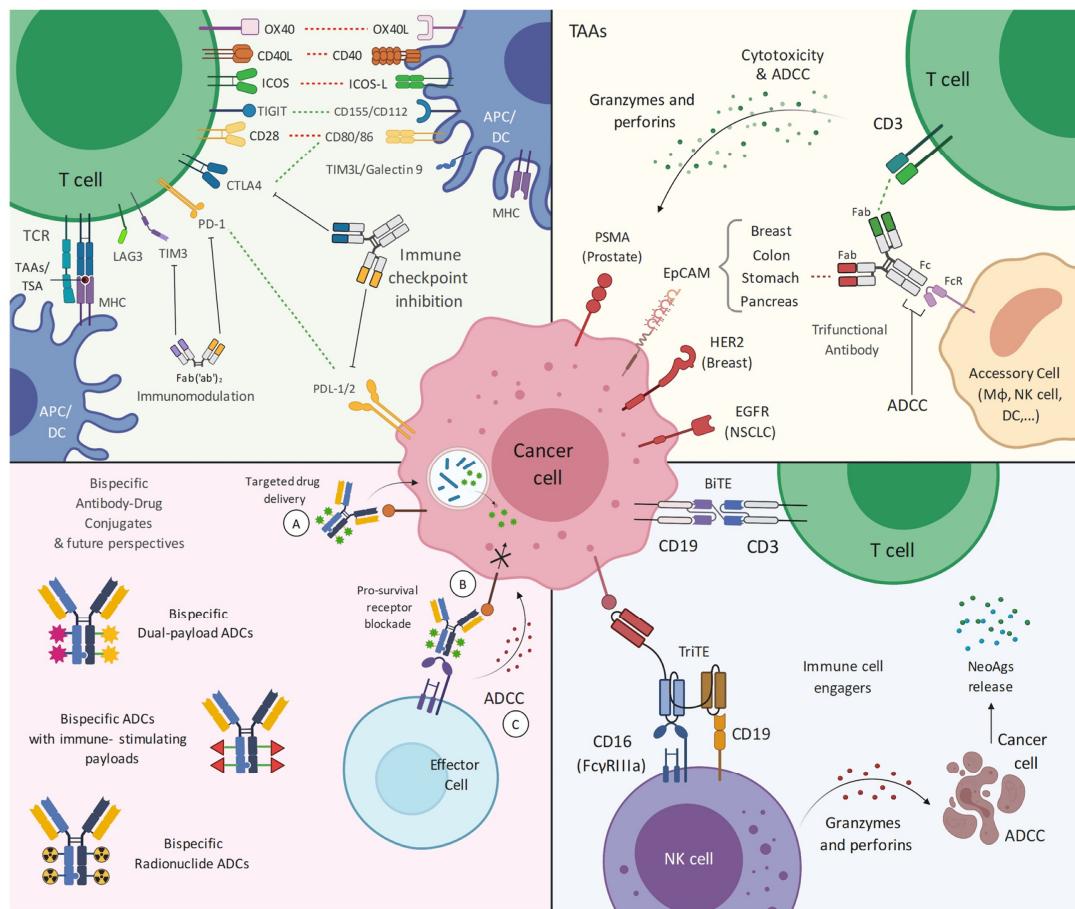
NCT	Phase	Drug (Format)	Target	Indication	Status	Results	Ref.
NCT02620865	1/2	EGFR Bi-armed activated T-cells (BATs)	EGFR xCD3	Advanced pancreatic cancer	Completed	N = 7 No dose-limiting toxicities (DLTs), Median time to progression: 7 months	[65]
NCT03269526	1/2	EGFR BATs	EGFR xCD3	Advanced pancreatic cancer	Recruiting		
NCT03296696	1	AMG596	EGFRvIII xCD3	Glioblastoma	Completed	Not reported	[66]
NCT0344250	1	EGFR BATs + Temozolamide + RT	EGFR xCD3 gpA33	Glioblastoma	Active, not recruiting		
NCT02248805	1	MGD007 (DART®)	gpA33 xCD3	Metastatic CRC	Completed	Not reported	[67]
NCT03531632	1/2	MGD007 + MGA012	gpA33 xCD3	Metastatic CRC	Completed	Not reported	
			HER2				
NCT04501770	1	M802	HER2 xCD3	HER2-positive advanced solid tumors	Not yet recruiting		
NCT03448042	1	Runimotamab + trastuzumab + tocilizumab	HER2 xCD3	Locally advanced or metastatic HER2-expressing solid tumors	Recruiting		
NCT03272334	1/2	HER2 BATs + Pembrolizumab	HER2 xCD3	Metastatic breast cancer	Recruiting		
NCT	Phase	Drug (Format)	Target	Indication	Status	Results	Ref.
			Other				
NCT03411195	1	Tidutamab (XmAb18087)	SSTR2 xCD3	NET and GIST	Completed	Grade ≥ 3 AE: lymphopenia (29.3%); transaminase and CGT increase (19.5%); hypophosphatemia (9.8%) and lipase increase (7.3%)	[56]
NCT04590781	1/2	Tidutamab (XmAb18087) + Pembrolizumab	SSTR2 xCD3	Advanced Merkel cell carcinoma and ES-SCLC	Completed	Not reported	
NCT04424641	1/2	GEN1044 (DuoBody®)	5T4 xCD3	Solid tumors	Completed	Results on submission clinicaltrials.gov (accessed on 1 November 2022)	
NCT05180474	1	GEN1047 (DuoBody®)	8T4H xCD3	Solid tumors	Recruiting		
NCT04083599	1/2	GEN1042	4-1BB xCD40	Solid tumors	Recruiting		
NCT04496674	1	CC-1 + Tocilizumab	PSMA xCD3	NSCLC	Recruiting		
NCT04260191	1	AMG910	CLDN18.2 xCD3	Gastric and gastroesophageal junction adenocarcinoma	Active, not recruiting		
NCT03146637	2	Activated CIK	MUC1/CEA/EpCAM/GPC3 xCD3	Advanced liver cancer	Recruiting		
NCT03319940	1	AMG757 (HLE) + Pembrolizumab	DLL3	SCLC	Recruiting		[68]
NCT	Phase	Drug (Format)	Target	Indication	Status	Results	Ref.
NCT04471727	1/2	HPN328 (TriTAC)	DLL3	SCLC	Recruiting		
NCT04590326	1/2	REGN4018 or REGN5668 + Cemiplimab	MUC16 xCD3 or MUC16 xCD28	Ovarian cancer, fallopian tube cancer, peritoneal cancer	Recruiting		[69]
NCT03564340	1/2	REGN4018 + Cemiplimab	MUC16 xCD3	Ovarian cancer, fallopian tube cancer, peritoneal cancer	Recruiting		
NCT04117958	1	AMG199 (HLE)	MUC17 xCD3	MUC17-positive solid tumors	Recruiting		

PK0 adapted title to multispecific antibodies to be in line with previous and following slides

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MULTISPECIFIC ANTIBODIES

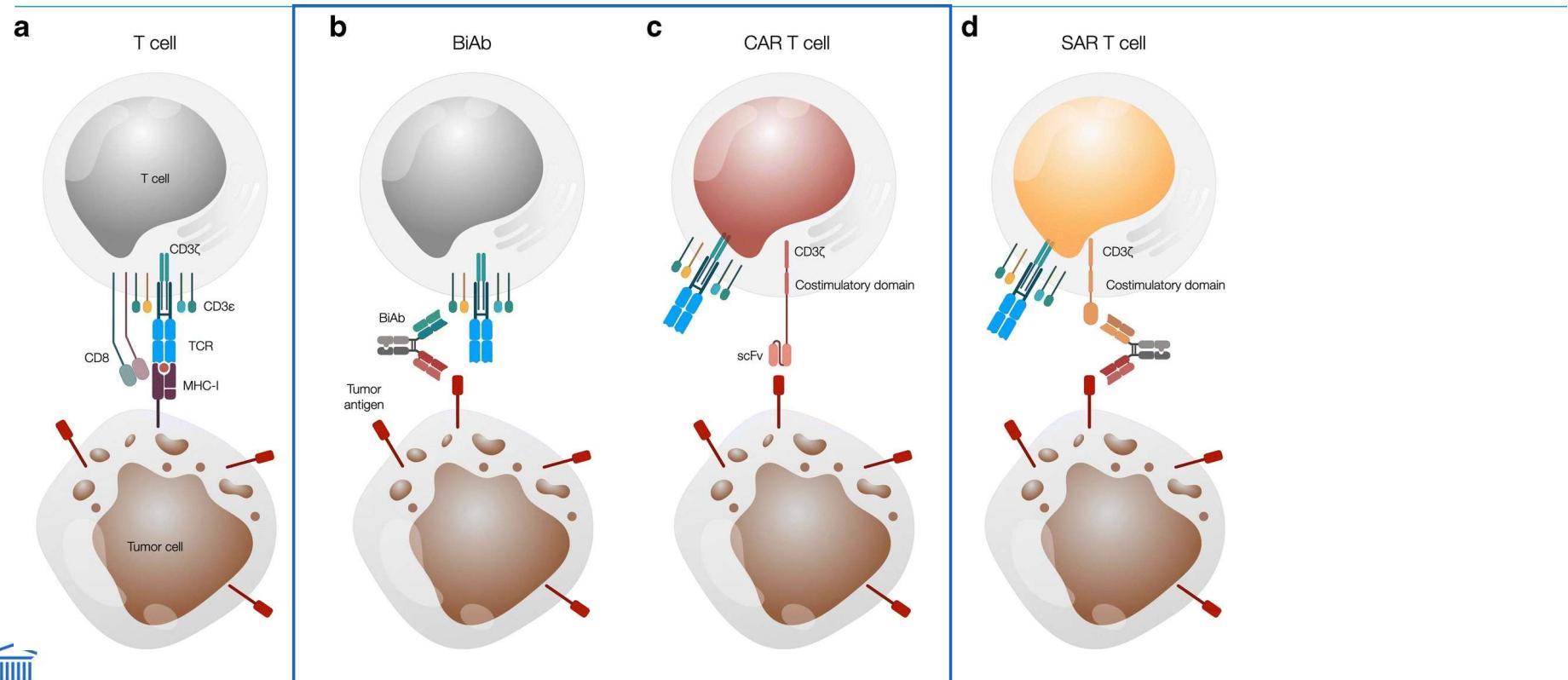
Multispecifics for solid tumors



G Antonarelli et al, Pharmaceuticals, 2021 21

MULTISPECIFIC ANTIBODIES

BiAbs / BiTEs versus CARs

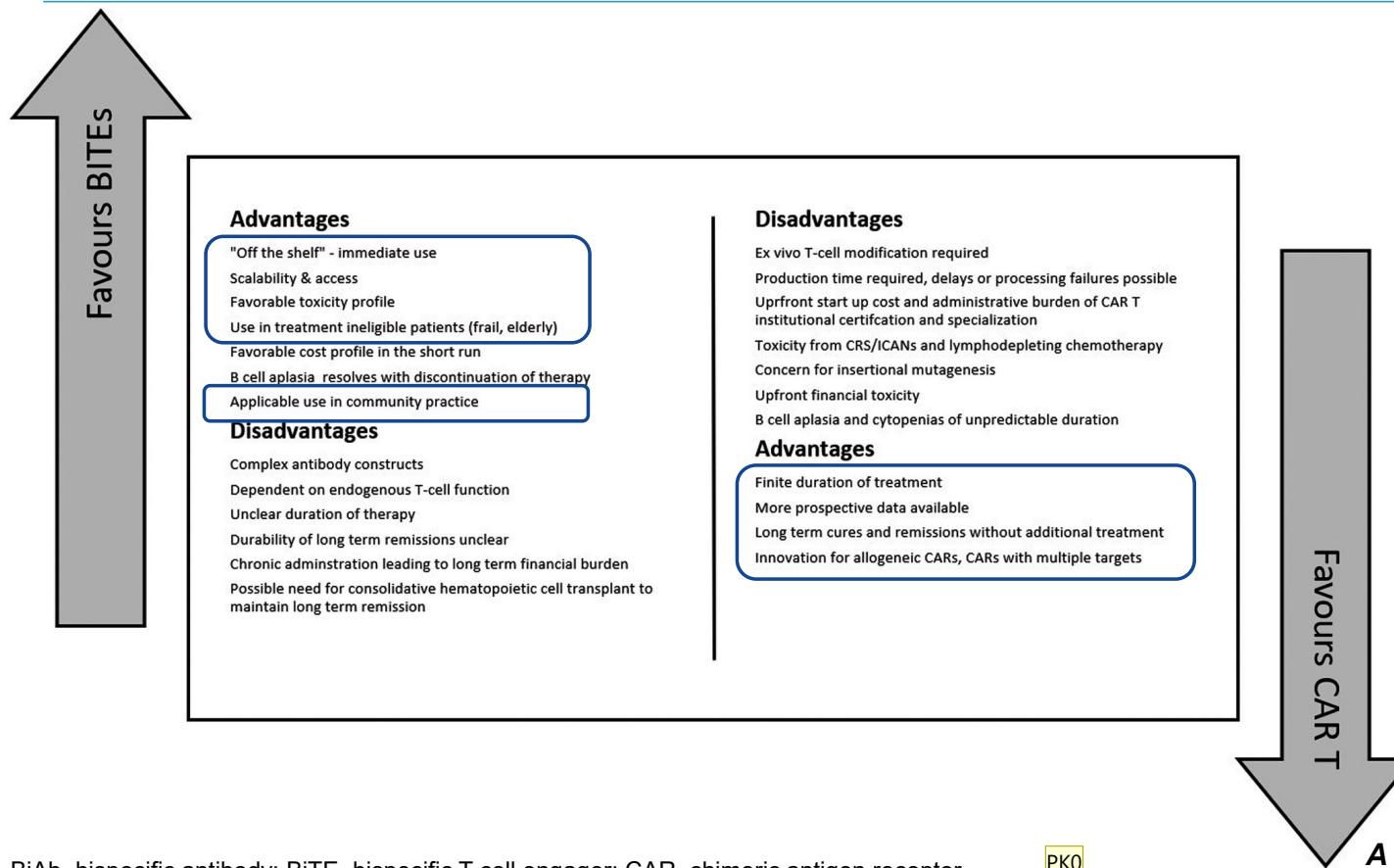


PK0 added abbreviation

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MULTISPECIFIC ANTIBODIES

BiAbs / BiTEs versus CARs



BiAb, bispecific antibody; BiTE, bispecific T cell engager; CAR, chimeric antigen receptor.

PK0

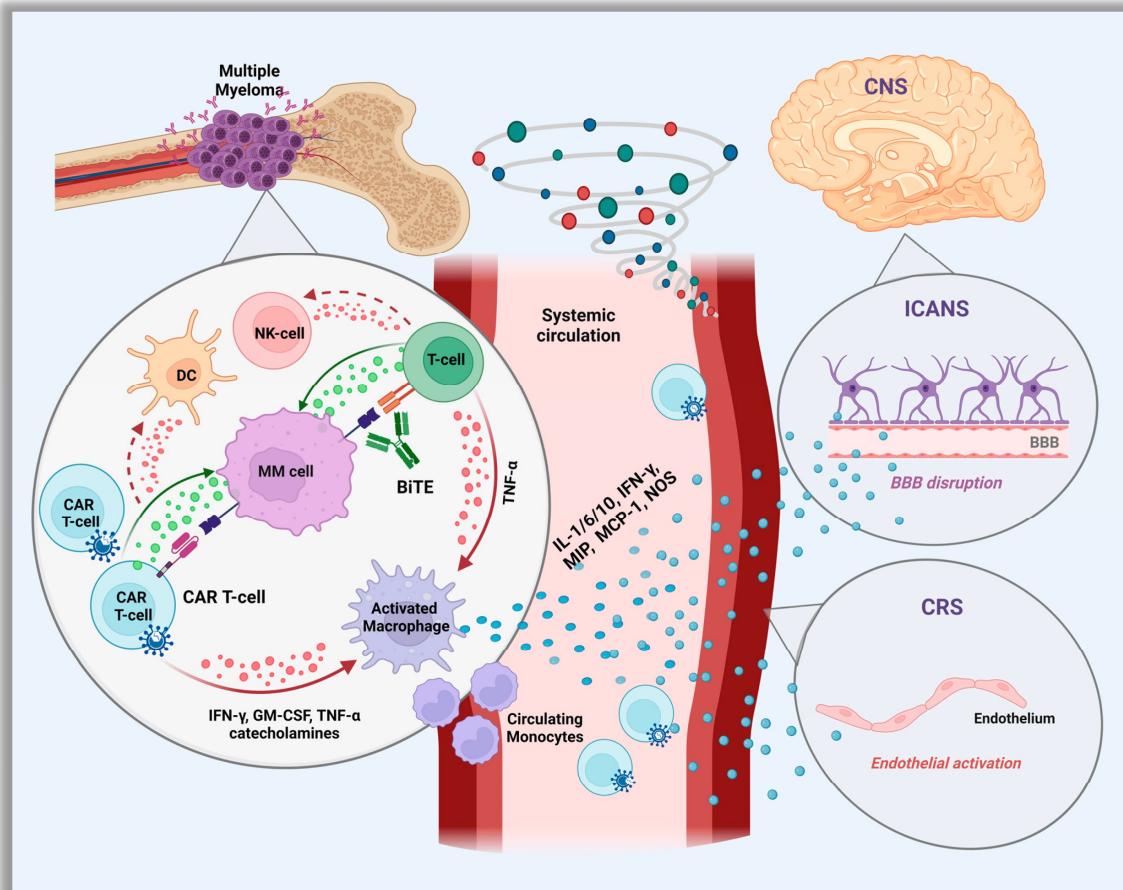
A Patel et al, British J Haemat, 2021 23

PKO added abbreviations

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MULTISPECIFIC ANTIBODIES

Multispecific antibodies: side effects



- CRS
- ICANS
- On-target, off-tumour
(depending on the targeted Ag)

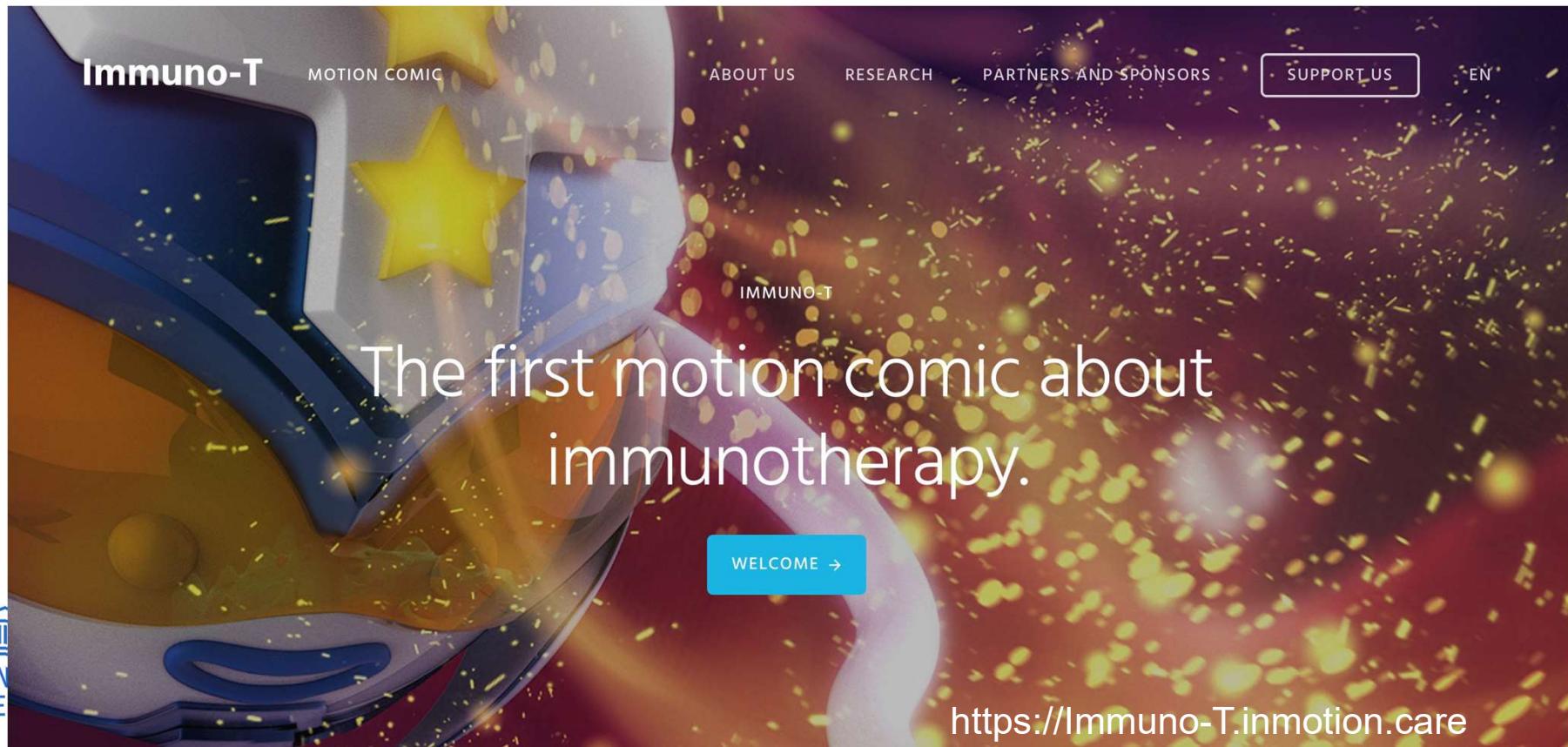
MULTISPECIFIC ANTIBODIES

The future

- Altering the design of BiAbs/BiTEs to increase safety, patient friendly administration, efficacy
- Combination with checkpoint inhibitors? Other molecules?
- CAR-T vs BiAbs/BiTEs, or consecutive, in what order?

PATIENT EDUCATION

<https://Immuno-T.inmotion.care>



PK0 We would suggest to add https:// to the link below to better visualize that this is a web address.

<https://Immuno-T.inmotion.care>

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PKO

immuno-T.inmotion.care



Start journey



Choose your therapy



Partners
& sponsors



Disclaimer



Choose language



<https://Immuno-T.inmotion.care>

PK0 We would suggest to add https:// to the link below to better visualize that this is a web address.

<https://Immuno-T.inmotion.care>

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PK0

Click on the vials to discover the different forms of immunotherapy.



checkpoint inhibitors



CAR T-cell therapy



BiTes

Back to start

<https://Immuno-T.inmotion.care>

PK0 We would suggest to add https:// to the link below to better visualize that this is a web address.

<https://Immuno-T.inmotion.care>

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during



Enjoy your second workshop!

18.05-18.20		BREAK		
18.25	18.25 => 19.05 PLENARY 2 Novel concepts in cancer Immunotherapy B ROUTY T KERRE S RAUH (Mod)	METEOR ROOM FLOOR 1	COMET ROOM FLOOR 2	SATIN ROOM FLOOR 3
19.10		19.10=>19.50 Patient education: Examples from academics centers T KERRE S STREEL M VANDEVELDE J VANSTEENKISTE (Mod)	19.10=>19.50 CAR T vs Bispecifics : Toxicity and sequencing P VANDENBERGHE J CAERS R SCHOTS (Mod)	19.10=>19.50 Drug Interference during Immunotherapy M ILZKOVITZ B ROUTY A AWADA (Mod)
19.50	19.50 => 20.05 CLOSING P LACANTE & P COULIE			
20.00 - 22.00		WALKING DINNER		



Micros & question
cards available
during workshops