

Development of CTX112: A Next Generation Allogeneic Multiplexed CRISPR-edited CAR T Cell Therapy with Disruptions of the TGFBR2 and Regnase-1 Genes for Improved Manufacturing and Potency

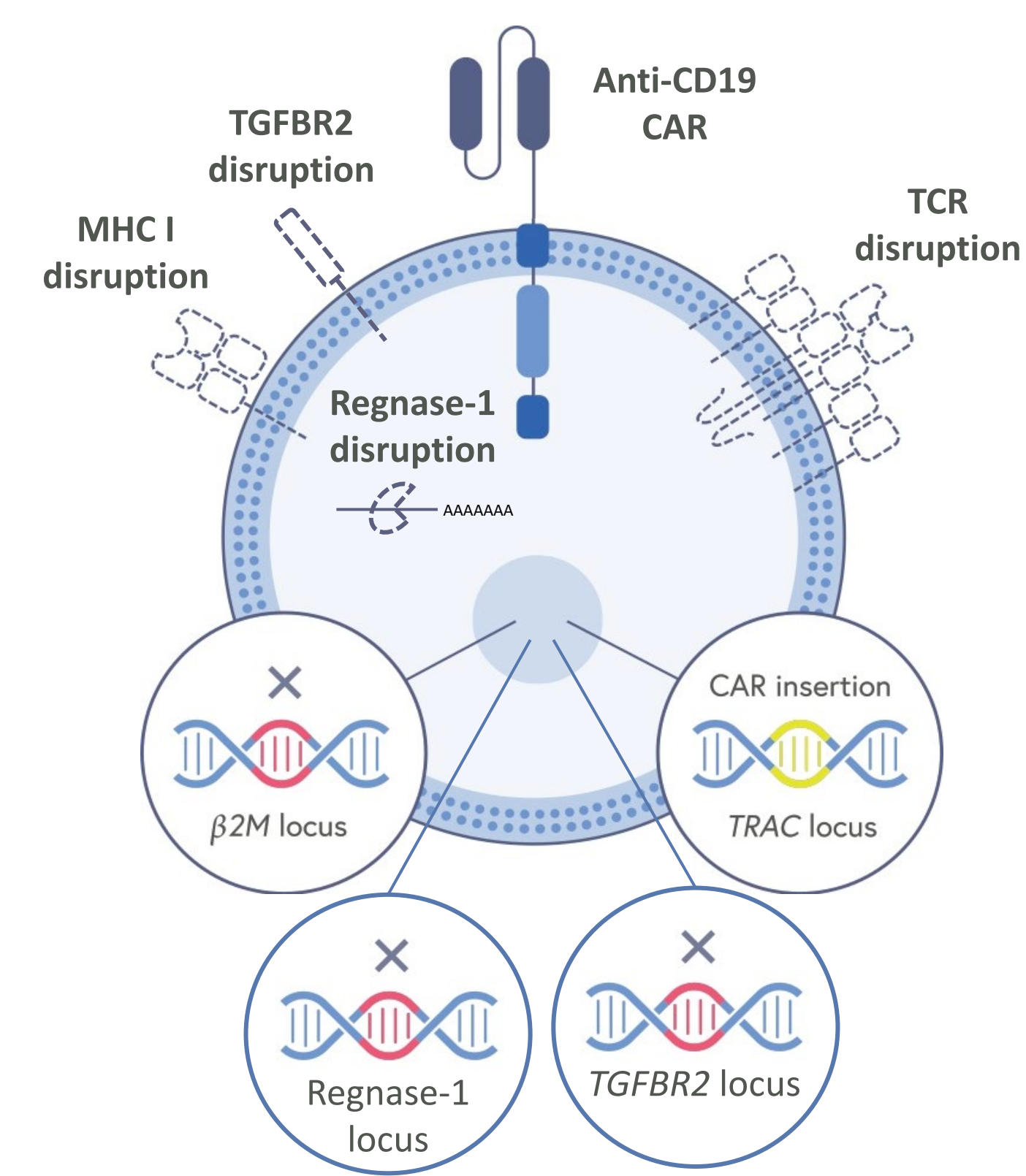
Demetrios Kalaitzidis, Mohammed Ghonime, Robert Chain, Nivedita Jaishankar, Davis Settupane, Zinkal Padalia, Lauren Zakas, Meghna Kuppuraju, Paul Tetteh, Hui Yu, Pauline Huoth, Tiffany Howard, Mary-Lee Dequeant, Sushant Karnik, Chandrasegaran Massilamany, Brigid McEwan, Henia Dar, Melanie Allen, Laura Serwer, Thao Nguyen, Melanie Butler-Gauthier, Parin Sripakdeevong, Shashwat Deepali Nagar, Yin Tang, Hemangi G. Chaudhari, Nicole Flanagan, Elaine Huang, Shashwant Phuyal, Elizabeth N. Koch, Andrew Dunn, Erisa Sula, Jacob Waldman, Cristian Loaiza, Maria Lei Zhang, Erin Thorstensen, Keith Steiger, Katie Schum, Kayla Urbaz, Anna Ma, Annie Yang Weaver, Christopher Finch, Sarah Cohen, Phuong Khanh Morrow, Gary Rea, Mark D. Benton, Jonathan Terrett
 CRISPR Therapeutics, Boston, MA

Introduction

- CTX110, a CD19-directed CRISPR-edited CAR T cell therapeutic candidate for B-cell lymphoma, has induced clinical responses and durable remissions beyond two years in some patients (CARBON trial, NCT04035434)
- CTX112, a next-generation CRISPR-edited CAR T cell therapeutic candidate, contains the edits used to produce CTX110 along with additional edits to the TGFBR2 and Regnase-1 genes
- TGFBR2 KO aims to avoid immune suppression of CAR T cell activity by cells of the tumor environment, and Regnase-1 KO aims to increase functional persistence
- CTX112 controls CD19+ disease in mice at one-tenth the dose of CTX110 and shows additional manufacturing advantages

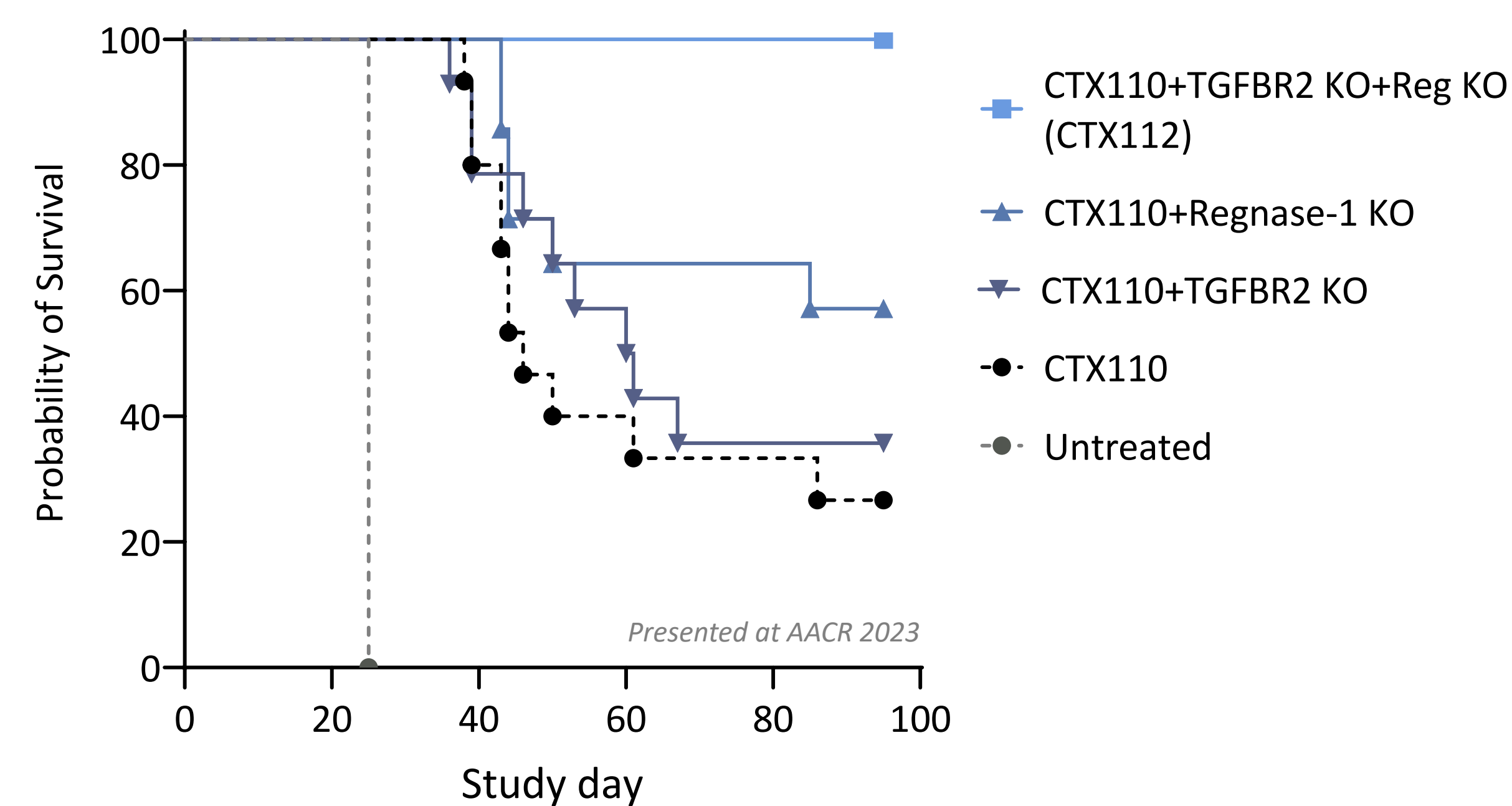
Figure 1: Design of CTX112 – CRISPR/Cas9 gene-edited allogeneic CAR T cells

- The manufacturing process begins with activation of T cells from a healthy donor, followed by electroporation of Cas9 ribonucleoprotein to produce the following modifications:



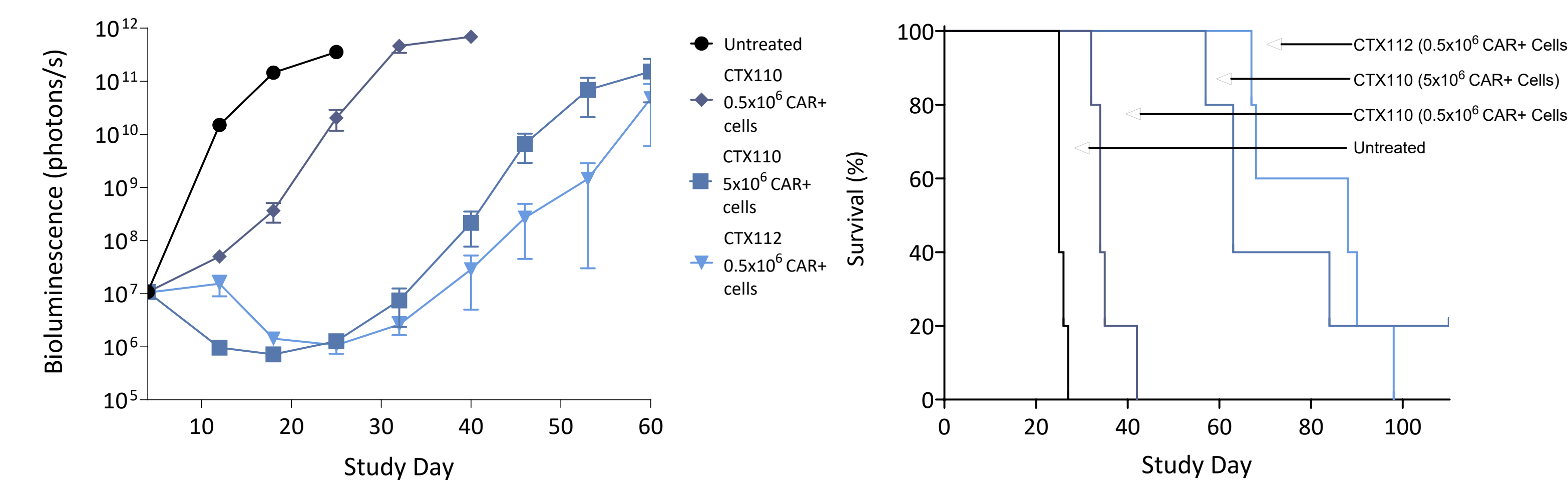
- **TCR KO** to minimize the risk of GvHD
- **β2M KO** to eliminate MHC class I expression and mitigate host T cell-mediated clearance of CAR T cells
- **CAR KI** via precise insertion of CAR transgene into the TRAC locus using an AAV template
- **Regnase-1** to remove an intrinsic “brake” on T cell function
- **TGFBR2 KO** to remove a key extrinsic “brake” on T cell anti-tumor activity

Figure 2: The additional edits in CTX112 extend survival in Nalm6-Luc mice



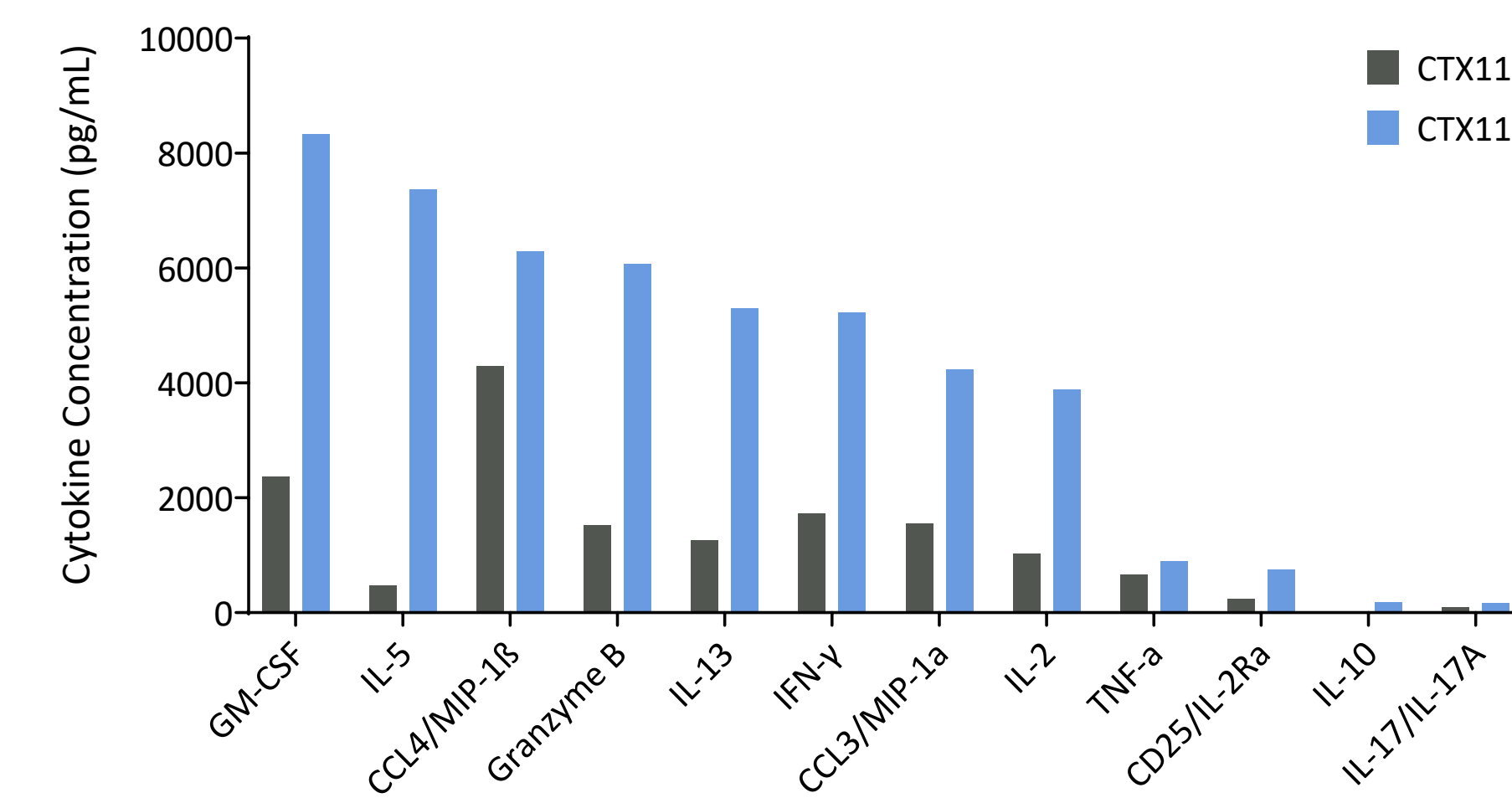
- Mice grafted with Nalm6-Luc leukemia cells were dosed on Day 4 with 4e6 CAR+ cells per mouse per group (N=15 per treated group; N=5 for control group)

Figure 3: CTX112 controls disease at one-tenth the dose of CTX110



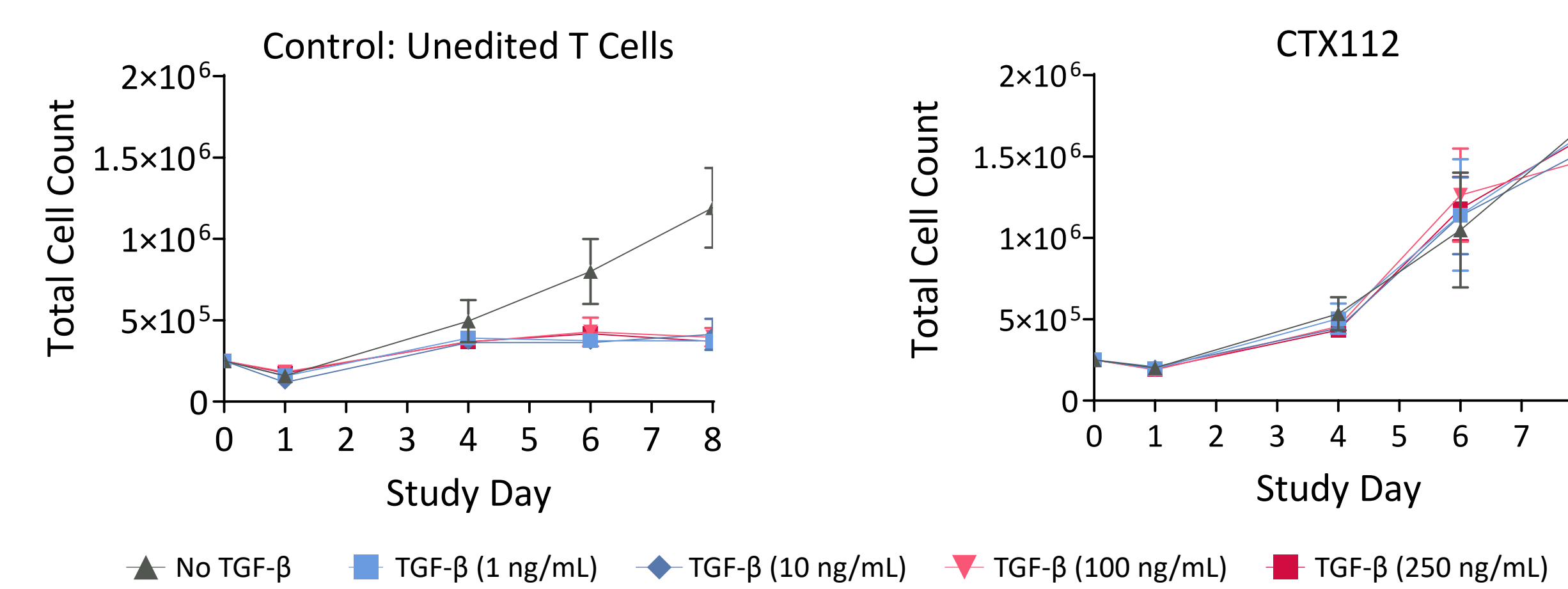
- A 10x lower dose of CTX112 vs. CTX110 (0.5e6 vs. 5e6 CAR+ T cells) shows equivalent efficacy in controlling leukemia burden in Nalm6-Luc mice (n=5 per group dosed at Day 4) (left), resulting in significantly longer survival (right). For these experiments, CTX110 and CTX112 were produced using the same T cell donor

Figure 4: CTX112 secretes higher levels of a broader array of cytokines compared to CTX110



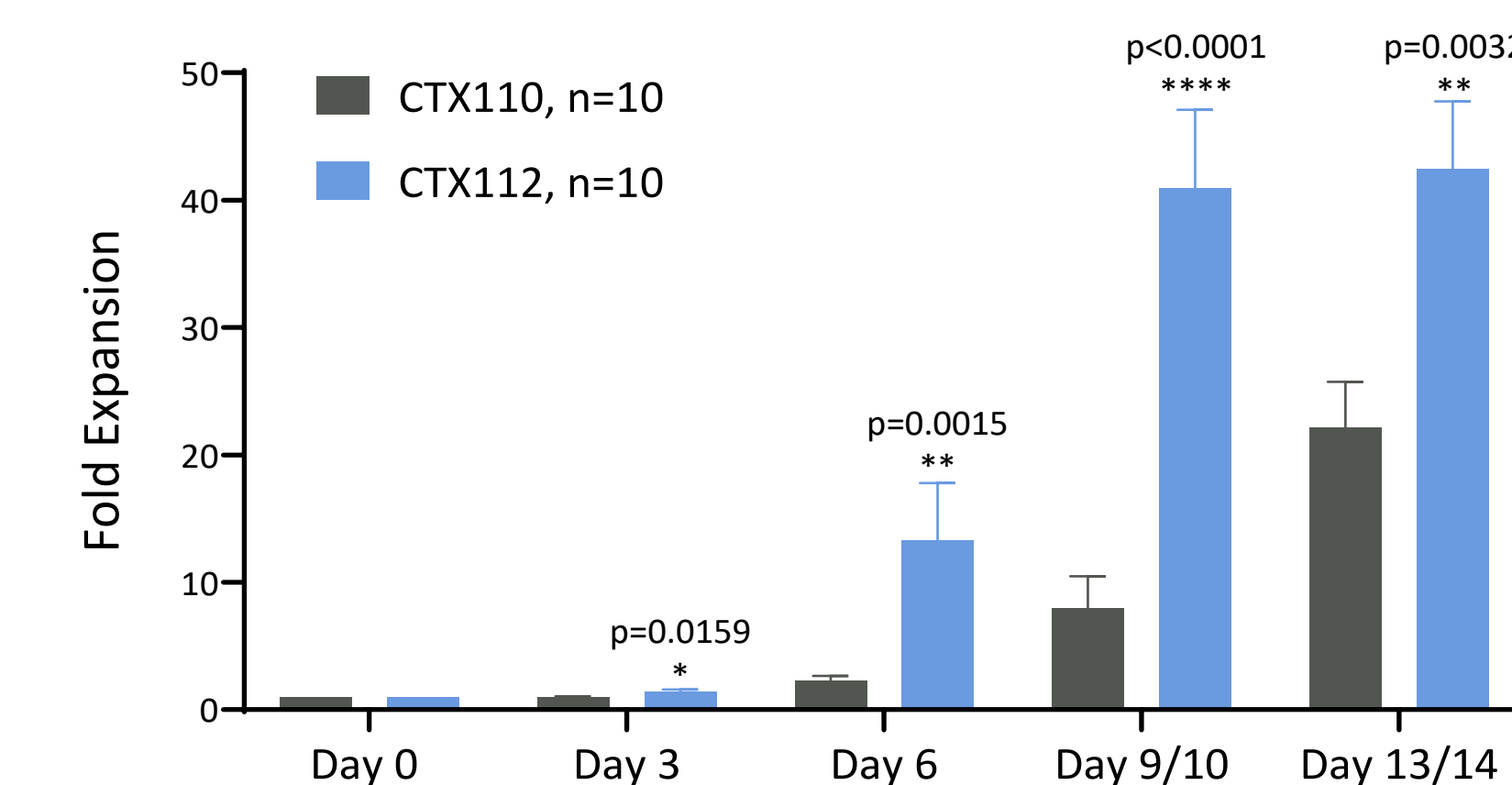
- CTX112 and CTX110 both upregulate multiple cytokines when co-cultured with CD19+ Nalm6 leukemia cells at 1:1 ratio for approximately 24 hours, with CTX112 showing even greater upregulation than CTX110

Figure 5: CTX112 is insensitive to TGF-β-mediated inhibition



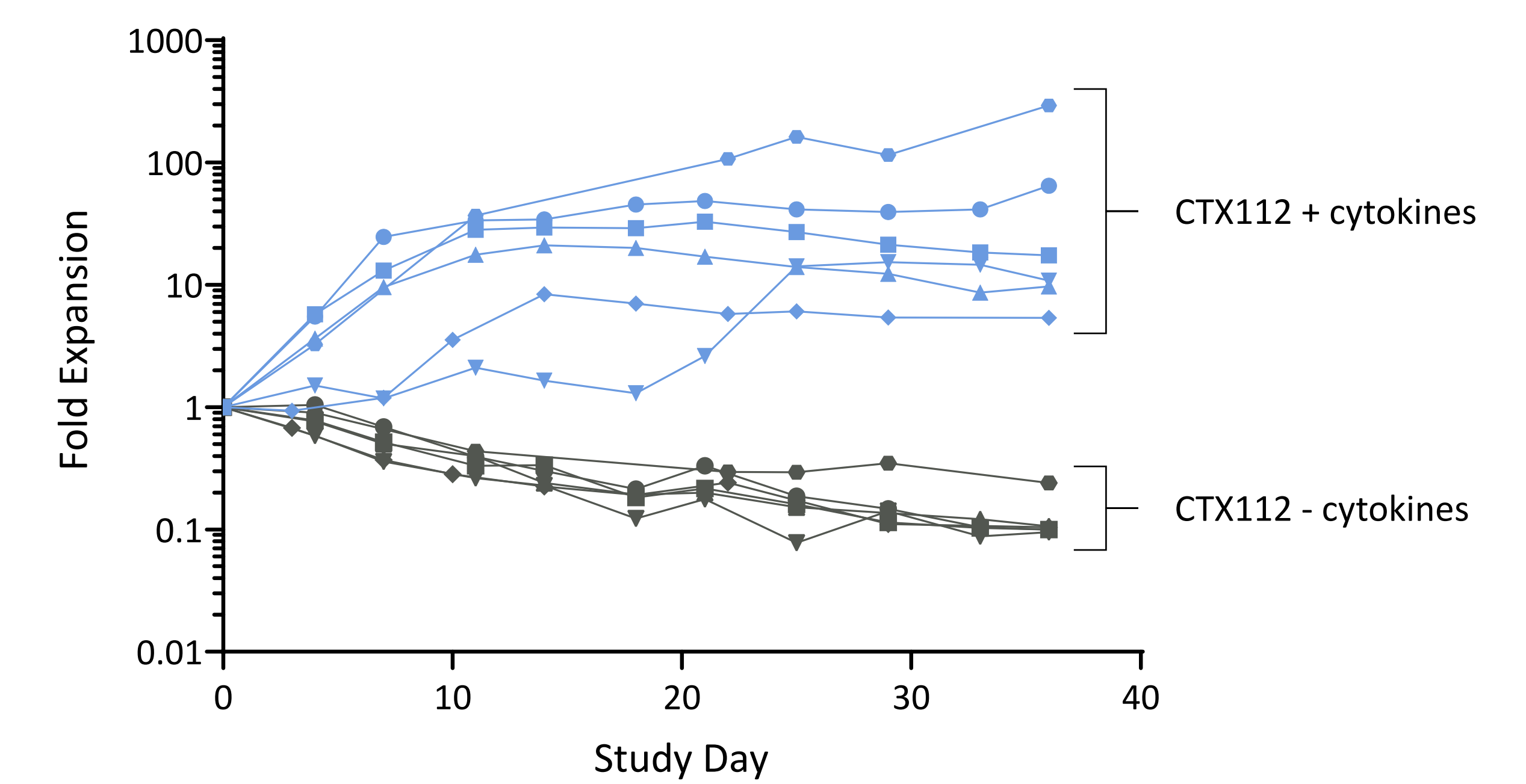
- Knockout of TGFBR2 makes CTX112 resistant to the inhibitory effect of TGF-β, an inhibitory cytokine often expressed in the tumor microenvironment

Figure 6: CTX112 shows even greater expansion in vitro than CTX110



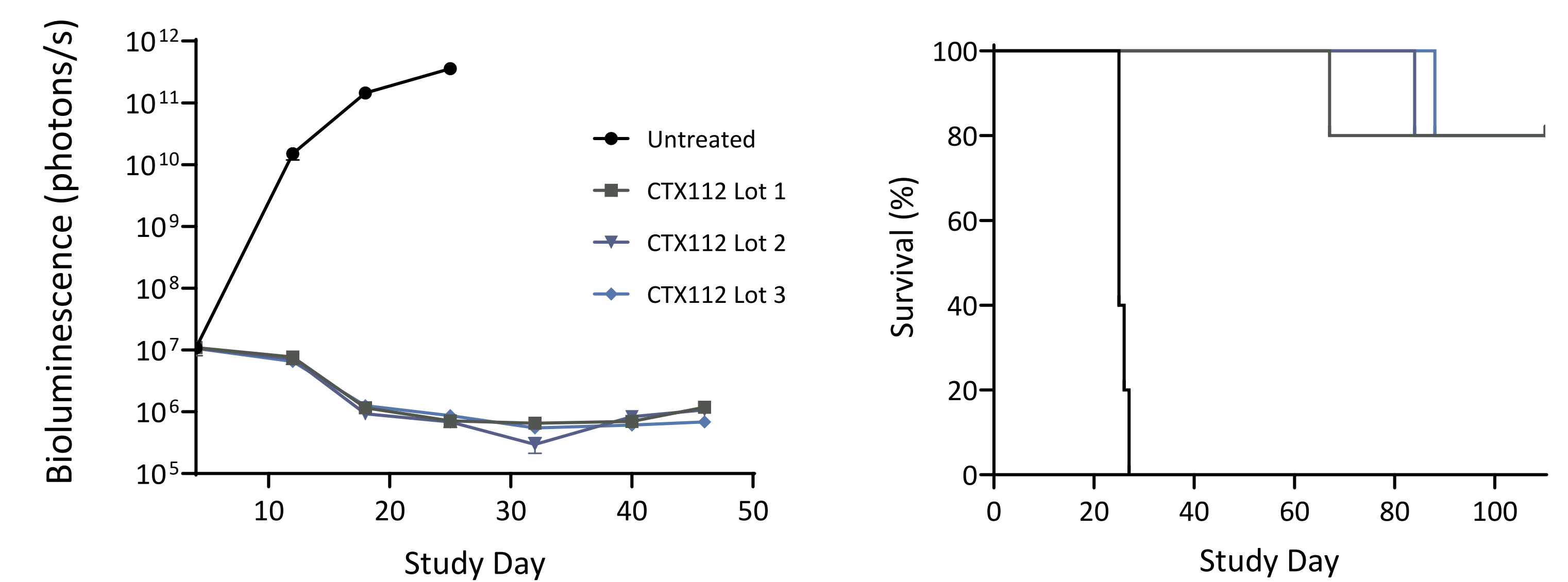
- CTX112 expands significantly more than CTX110 *in vitro* in the presence of 100U/mL human IL-2 and IL-7. The graph depicts the fold expansion of CTX110 and CTX112 manufactured from 10 different donors

Figure 7: CTX112 remains dependent on cytokines for growth



- CTX112 retains expansion properties after a freeze-thaw cycle when cultured with 100U/mL of human IL-2 and IL-7 cytokines, but does not show proliferation or expansion in the absence of human IL-2 and IL-7 cytokines

Figure 8: CTX112 lots produced at our internal manufacturing facility show robust activity in vivo at very low cell doses



- CTX112 cells made at our manufacturing facility were administered to mice grafted with Nalm6-Luc leukemia cells (n=5 per group dosed at Day 4). At a dose of 0.5e6 CAR+ T cells, mice in all lot groups demonstrated lower tumor burden (left) and higher survival (right) than mice in the control group, as well as compared to mice administered research-grade CTX112 dosed at the same cell dose in Figure 3

Conclusions

- CTX112, a potency-enhanced CRISPR-edited allogeneic CAR T cell candidate for the treatment of CD19+ malignancies, incorporates disruption of the TGFBR2 and Regnase-1 genes to increase cytokine secretion and sensitivity, as well as functional persistence, with the aim of improving effector function on tumors
- CTX112 demonstrates even better performance than CTX110 across numerous preclinical assessments, including:
 - Secretion of a broader array of cytokines at higher levels *in vitro*
 - Greater sensitivity to cytokine and antigen stimulation, while maintaining cytokine dependence
 - Greater efficacy in cancer models *in vivo* at lower doses
- CRISPR Therapeutics’ manufacturing site has produced CTX112 lots that have performed even better than research lots in murine models *in vivo*
- CTX112 is being evaluated in a clinical trial for B cell malignancies (NCT05643742)