

SOCS1 and Regnase-1 Inactivation Enhances Functionality and Prevents Exhaustion of Tumor Reactive Clonotypes in KSQ-004EX eTIL

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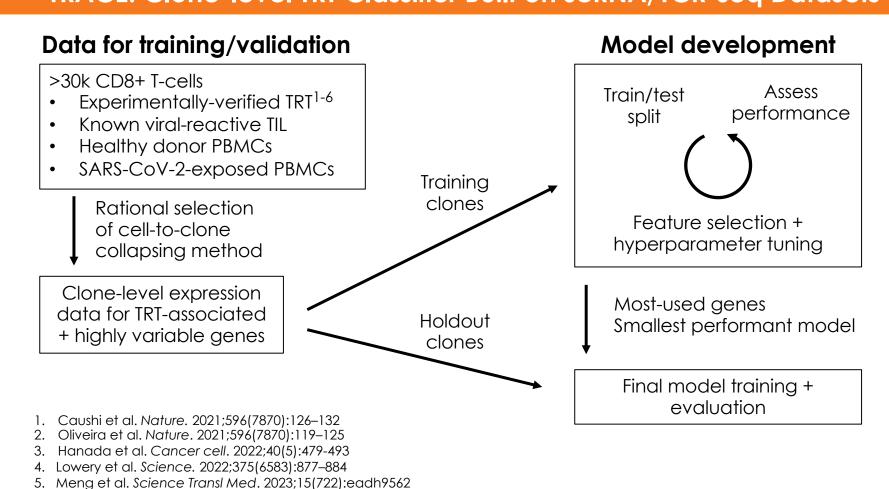
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Background

- Tumor Infiltrating Lymphocyte (TIL) therapy involves the isolation and ex vivo expansion of polyclonal TIL for the treatment of solid tumors
- The T-cell receptor (TCR) repertoires present within TIL drug products (DPs) are highly unique to each patient and include both tumor-reactive and bystander TCR clonotypes. The clinical activity of TIL is thought to be mediated both by the intrinsic functionality of T-cells and the frequency of tumor reactive T-cells (TRT) within DP
- Seeking to improve the clinical activity of TIL therapy, we developed KSQ-001EX and KSQ-004EX, two CRISPR/Cas9-engineered TIL (eTIL®) therapies wherein the genes encoding SOCS1 or SOCS1 in combination with Regnase-1 are inactivated, respectively. We have shown in preclinical models that inactivation of SOCS1 and SOCS1/Regnase-1 enhance the anti-tumor functionality of TIL
- In this study, we identified TRT in eTIL DP using two distinct but complementary methods and characterized the impact of dual SOCS1/ Regnase-1 inactivation on their functionality and resistance to exhaustion in acute and chronic stimulation contexts

Autologous Coculture ② eTIL Generation and Tumor Digestion ③ T Cell Sort, scRNA/TCR Sequencing Melanoma n=6 4 patients were treatment naive 2 patients with prior treatment (one α-PD-1) ④ Autologous Co-Culture In silico prediction of tumor-reactive TCR clonotypes In vitro estimation of tumor-reactive T cells in DP Created with BioRender.com

TRACE: Clone-level TRT Classifier Built on scRNA/TCR-seq Datasets



6. Pétremand et al. Nat Biotechnol. 2025;43(1):134-142

Figure 1: Clones exhibiting functional reactivity against autologous melanoma cell lines were also identified as TRT using our clone-level TRT classifier

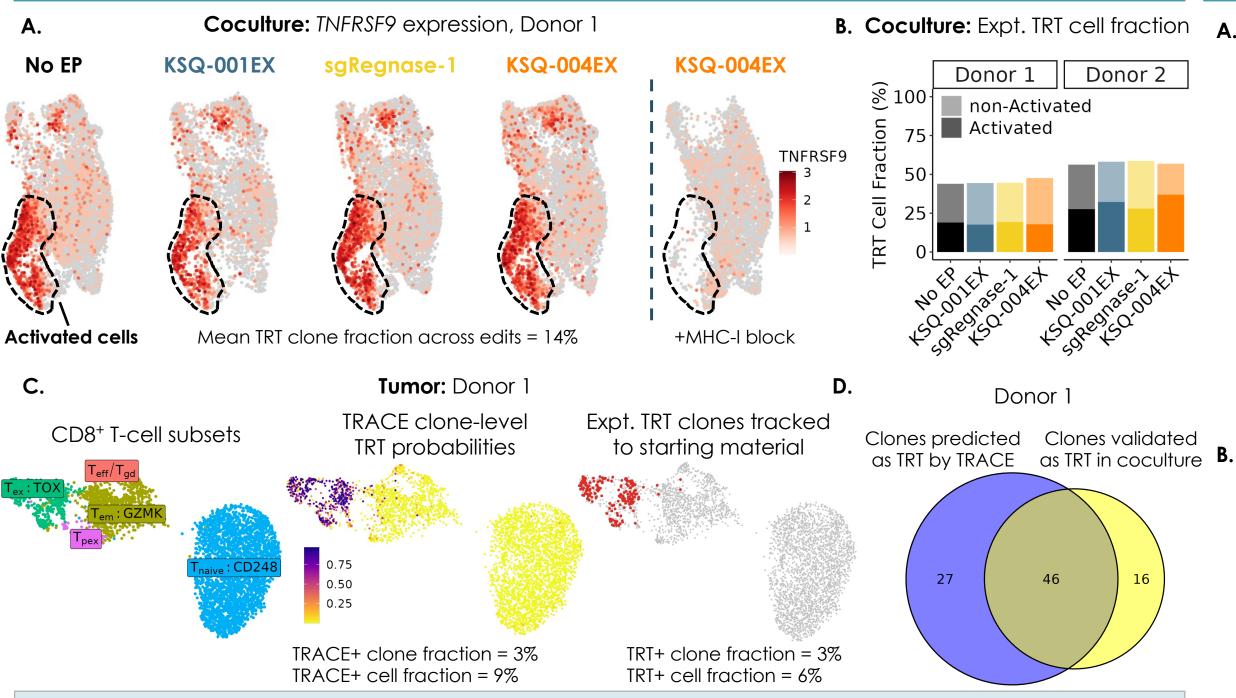


Figure 1. Predicted tumor-reactive (TRACE+) clones were confirmed by coculture of eTIL DP with autologous melanoma cell lines. (A) eTIL DPs were cocultured with an autologous tumor cell line with/without MHC-I blockade to confirm TCR-mediated reactivity to tumor. Experimentally-verified TRT clones were defined as those containing 1) ≥ 3 cells and 2) ≥ 10% of cells in a TNFRSF9-expressing activated state. (B) Bar plot showing the cumulative cell fraction of TRT clones and the subset of functionally activated cells in these clones across edits. (C) CD8+ T-cells in tumor starting material were identified using computational gating and used for TRACE predictions. Clone-level gene expression was used to predict clone-level reactivity. Experimentally-validated TRT clones were tracked back to starting material using alpha + beta TCR sequences. (D) Overlap between the set of experimentally validated TRT clones and those predicted as TRACE+, considering only clones detected in both samples.

Figure 2: KSQ-001EX and KSQ-004EX exhibit increased functionality during autologous tumor coculture compared to unedited TIL

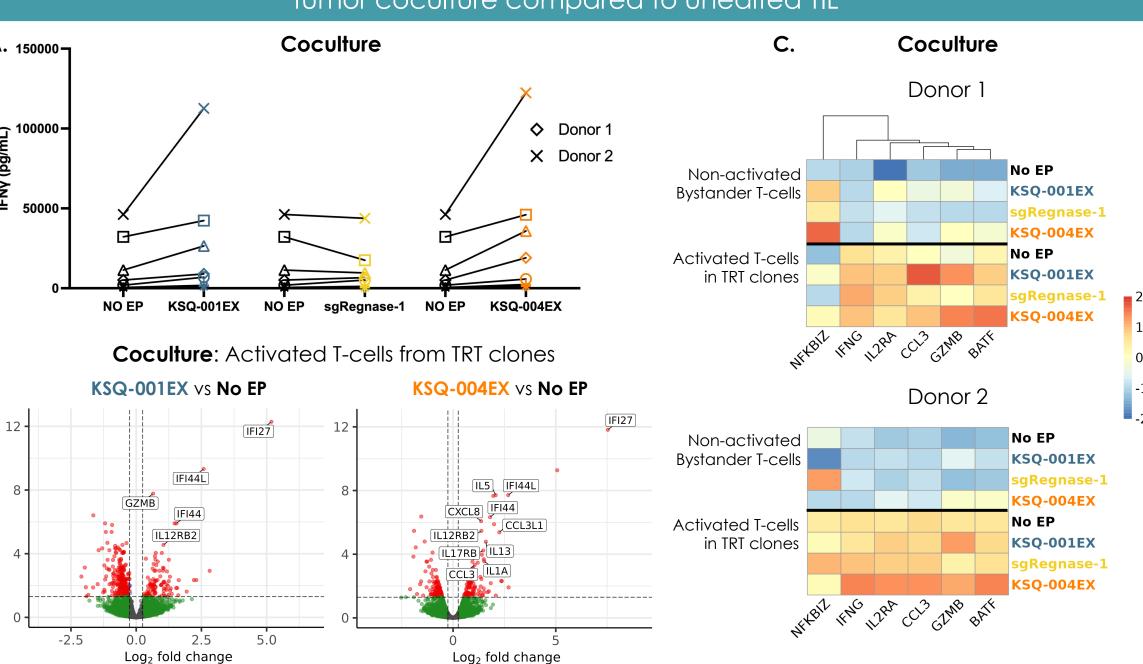
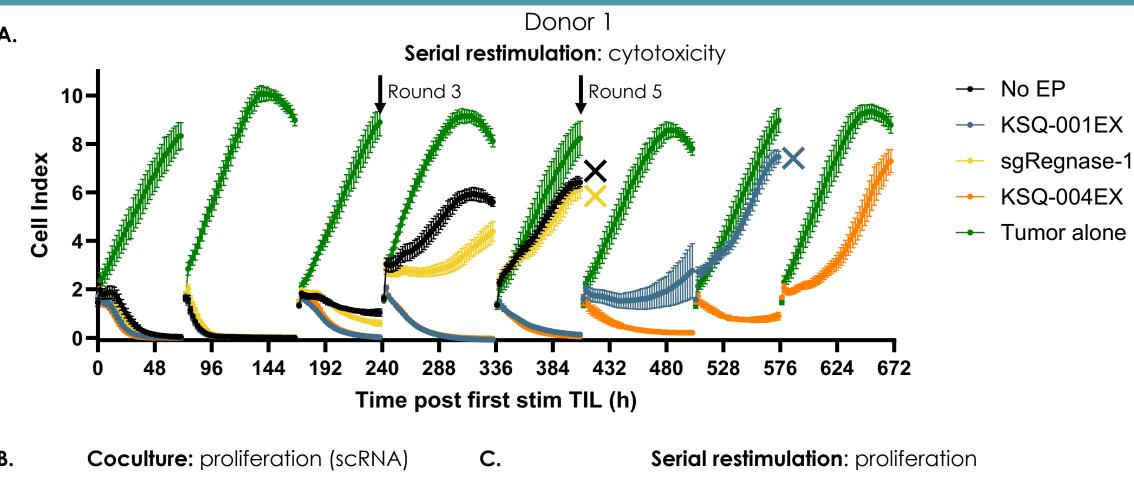
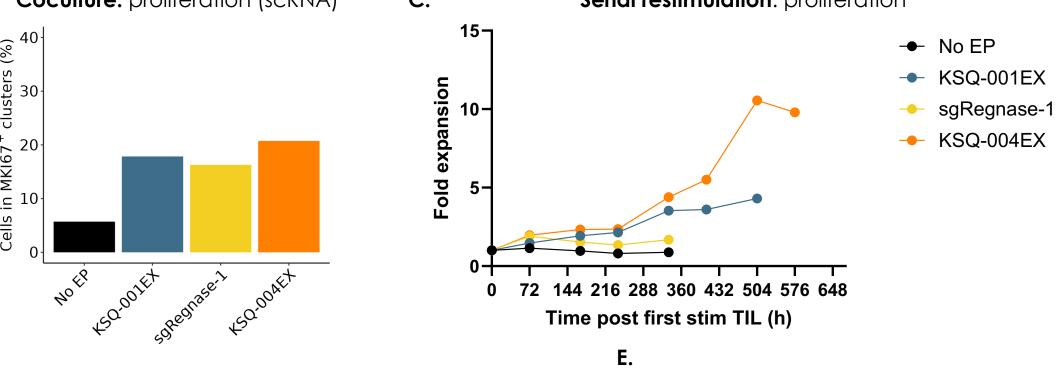


Figure 2. Inactivation of SOCS1 and/or Regnase-1 improves the anti-tumor function of TRT clones. **(A)** KSQ-001EX and KSQ-004EX exhibited increased IFN-γ levels in response to antigen stimulation, as measured by MSD of supernatant from overnight autologous co-cultures (n=7). **(B)** Volcano plot showing differential gene expression identified using edgeR on pseudobulked scRNA-seq data. In activated T-cells from TRT clones, interferon-stimulated genes are among some of the most upregulated in KSQ-001EX and KSQ-004EX compared to unedited controls. **(C)** Heatmap showing the impacts of SOCS1 and/or Regnase-1 inactivation on the expression levels of genes of interest in bystander T-cells and activated T-cells from TRT clones.

Figure 3: KSQ-004EX exhibits increased resistance to exhaustion during serial restimulation with autologous tumor via increased cytotoxicity, proliferation, and cytokine production





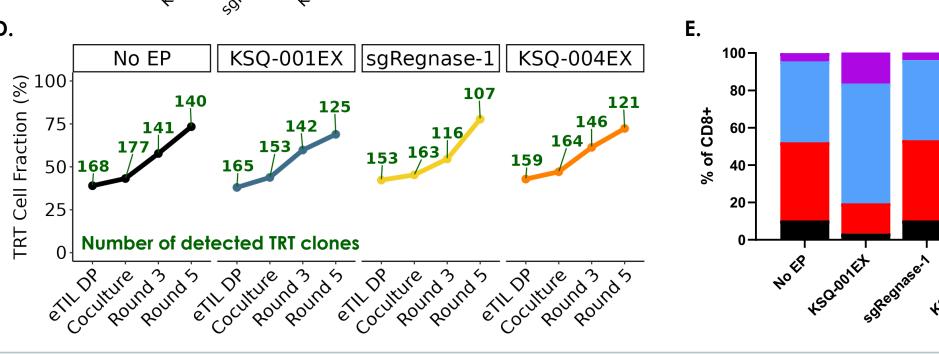


Figure 3. eTIL DPs were chronically restimulated with autologous tumor cells over 8 rounds. (A) Tumor cell growth was assessed by xCelligence to derive eTIL cytotoxicity. X's indicate where respective conditions were removed due to loss of tumor control. (B) Fraction of cells in MKI67+ clusters by scRNA-seq after 20h coculture. (C) Cumulative fold expansion of eTIL over the course of the serial restimulation assay. (D) The frequency of cells belonging to TRT clones during serial restimulation in all edit groups. (E) Intracellular cytokine staining was performed on serially restimulated TIL after Round 5 (~400h). Legend indicates how many of the three cytokines IFNγ, IL-2, and TNFa were produced in each cell.

Conclusions

- We built TRACE, a clone-level ML classifier, to predict tumor-reactive T-cell clones in tumor starting material; a majority of predicted TRT clones were confirmed to be TRT by coculturing eTIL DP with an autologous melanoma cell line
- We observed the following impacts of SOCS1 and Regnase-1 inactivation in eTIL DP during autologous tumor coculture:
 - Upregulation of interferon-stimulated genes
 - Elevated expression of GZMB, IFNG, CCL3, and BATF in eTIL DP relative to unedited controls
- During chronic restimulation, the TRT cell fraction of eTIL DPs increased and KSQ-004EX demonstrated resistance to exhaustion relative to single-edited and unedited TIL via:
 - ✓ Sustained control of tumor growth
 - ✓ Enhanced proliferation
- ✓ Retained polyfunctionality