

TCR repertoire divergence reflects the microenvironmental immune phenotype in glioma



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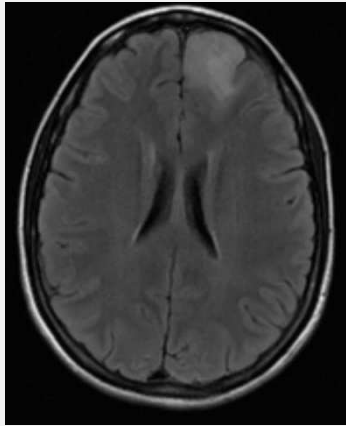


**SOCIETY FOR IMMUNOTHERAPY OF CANCER 2014
NOV. 7, 2014**

PRESENTER DISCLOSURE INFORMATION

Jennifer Sims: No Relationships to Disclose!

All other authors: No Relationships to Disclose!



Low-grade glioma


- Long prognosis (>10yr)
- Progresses to GBM

GBM

- Short prognosis
- Cx, Rx refractory
- Diffusely infiltrating
- Heterogeneous



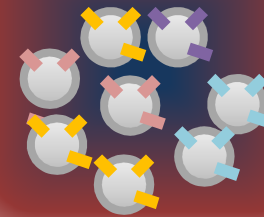
- MDSC, T_{reg}
- Suppressive cytokines
- Tissue damage, necrosis, hypoxia


ANTI-TUMOR REACTIVITY

IMMUNOSUPPRESSION

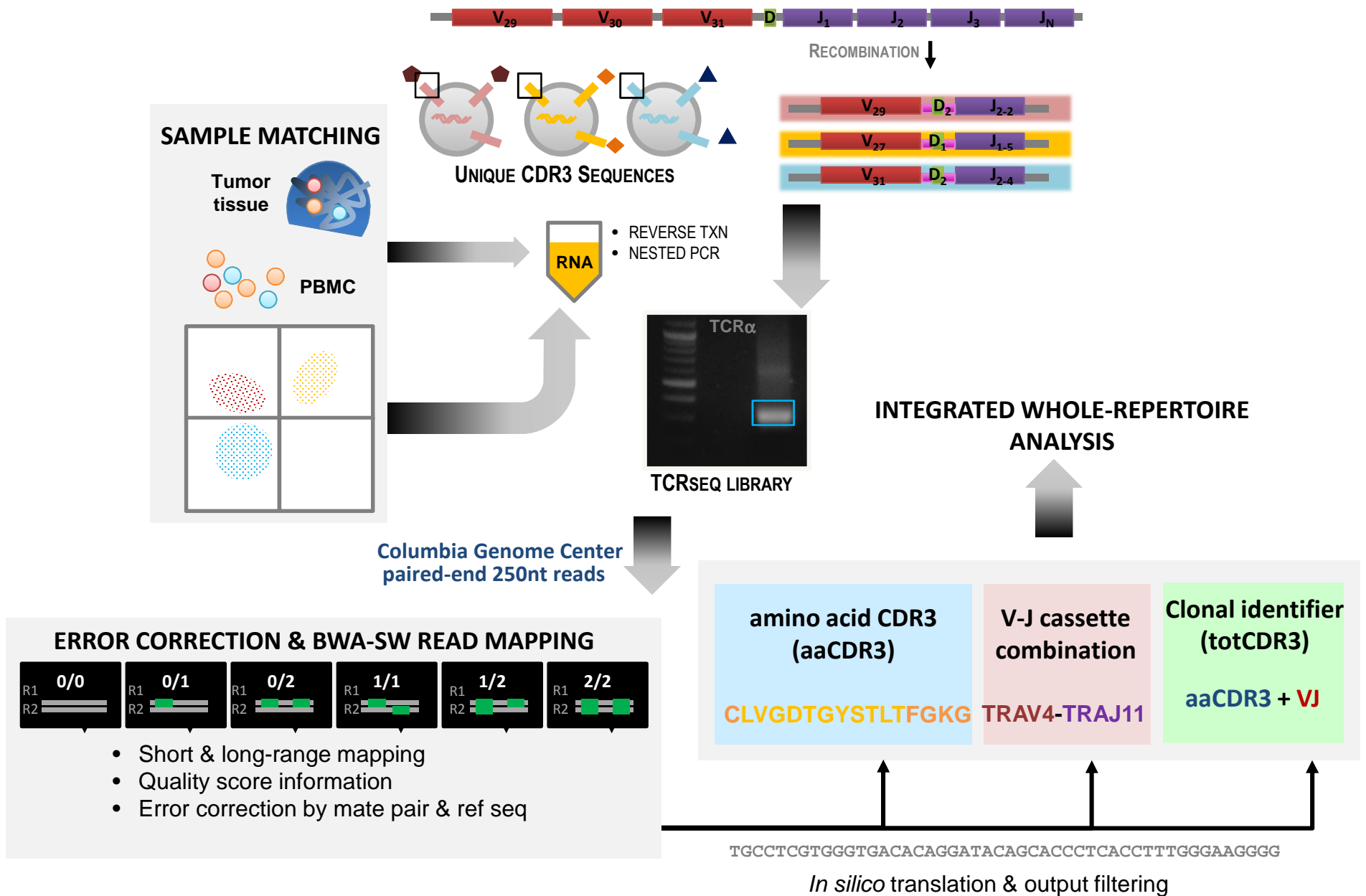


Peripheral T cells



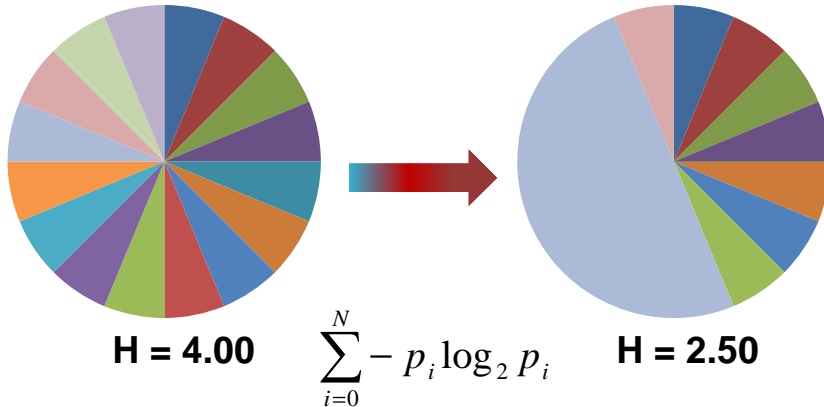
- Leukopenia
- NKT, T_{reg}, CD8/CD4
- Exhaustion markers

ACCESSING T CELL REPERTOIRES BY TCRseq

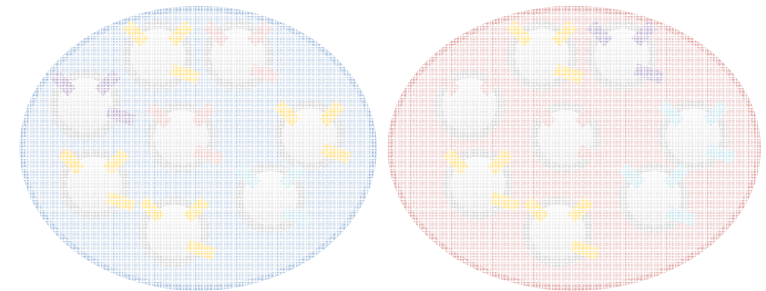


MEASURING DIVERSITY & DIVERGENCE

SHANNON ENTROPY (H)



JENSEN-SHANNON DIVERGENCE METRIC (JSM)



TGT . GTG . GTG . AAC . ATG . CCT . CTG . TGG . AGC . TAT . GGA . AAG . TTT . GGA . CAA . GGG

amino acid CDR3 (aaCDR3)

CVVNMPPLWSYGKFGQG

V-J cassette combination

TRAV12-1.TRAJ52

Clonal identifier (totCDR3)

aaCDR3 + VJ

TRAV12-1.TRAJ52 CVVSMPPPLWAGGTSYGKLTFGQG

CVVNMPPLWACGTSYGKLTFGQG

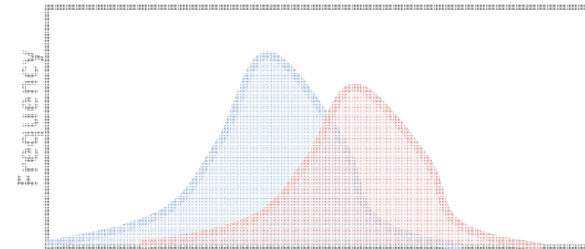
CVVNPLAGGTSYGKLTFGQG

CLONALITY

$$1 - \frac{H}{H_{\max}}$$

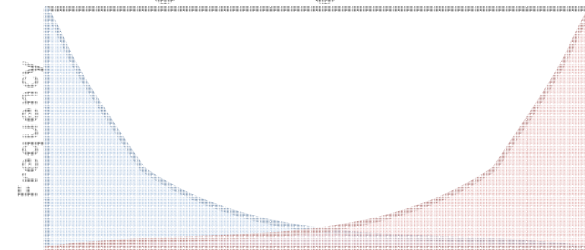
$$CL = 1 - \frac{2.50}{4.00} = 0.375$$

Low divergence $\rightarrow 0$



TCR

High divergence $\rightarrow 1$



TCR

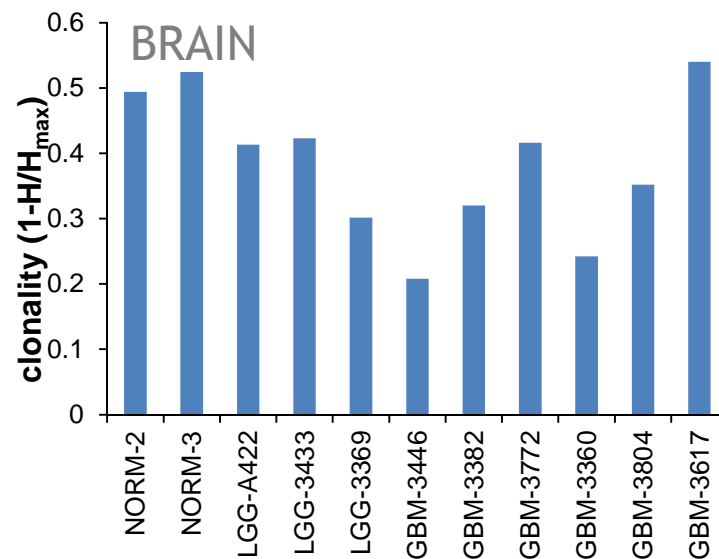
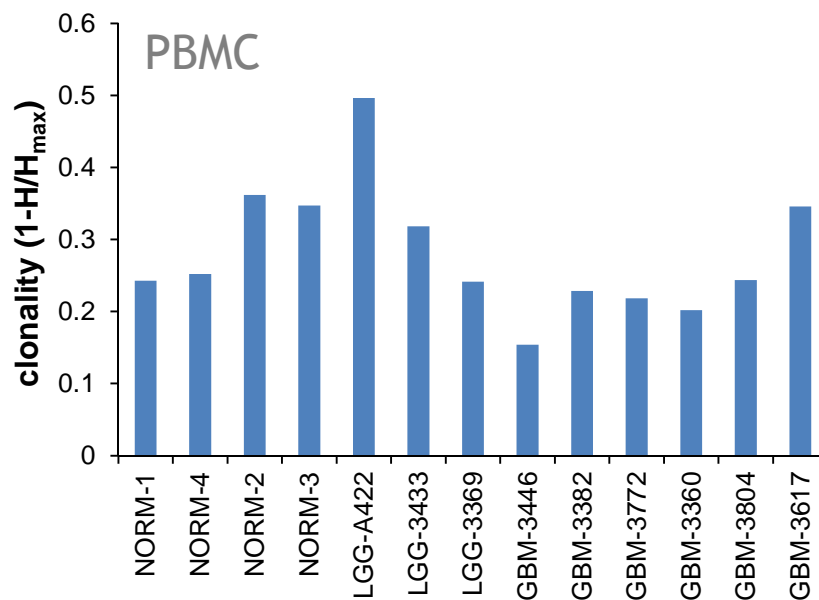
What features of the tumor microenvironment predict the state of the TCR repertoire?

Can we use the TCR repertoire as a functional assay for perturbations to the tumor microenvironment?

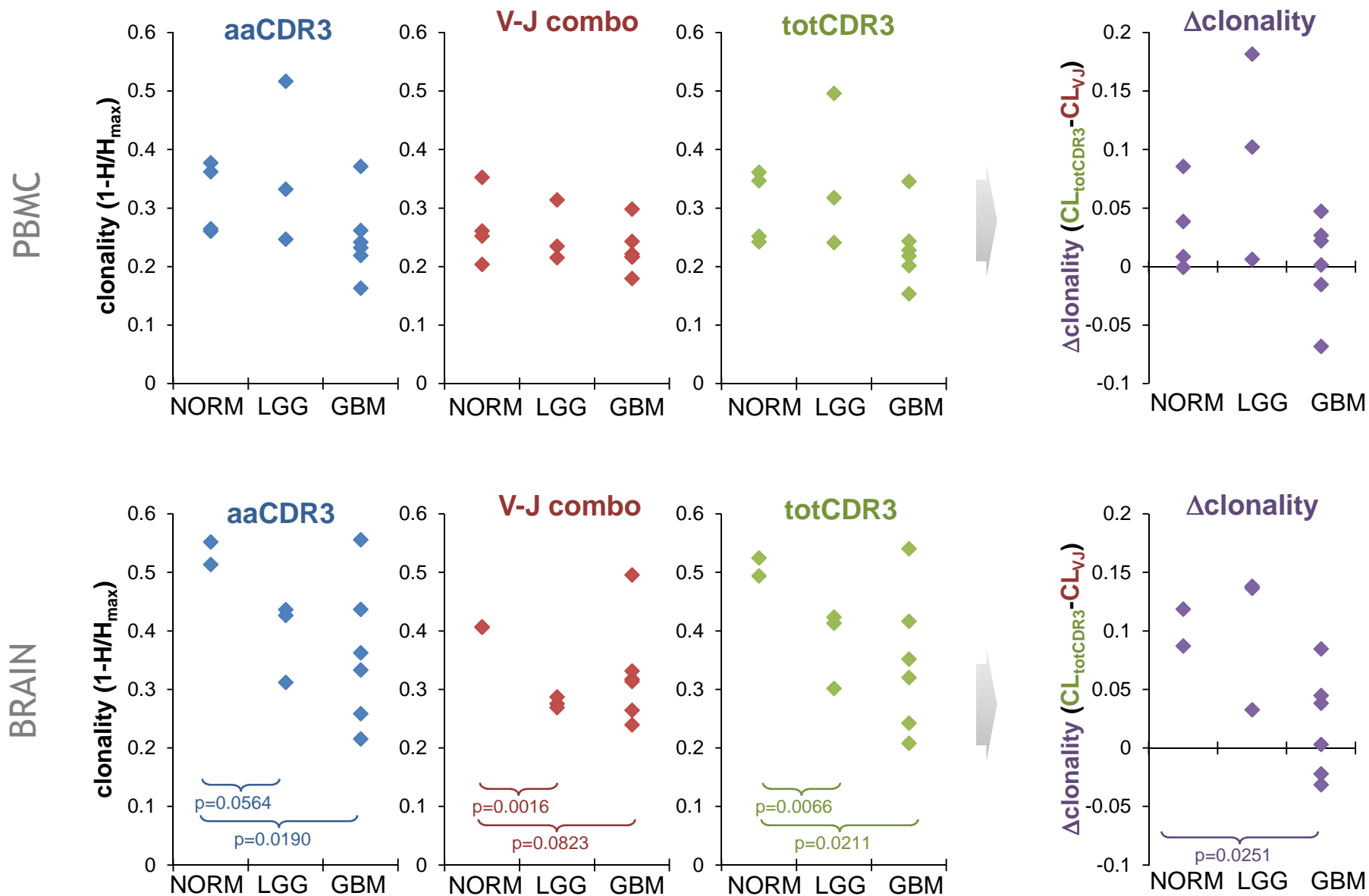
CLONALITY OF TIL & PBMC TCR REPERTOIRES

DIAGNOSIS	AGE	M/ F
Astrocytoma, Grade II	33	F
Oligodendroglioma, Grade II	59	F
Oligodendroglioma, Grade II	25	M
GBM, Grade IV	53	M
GBM, Grade IV	57	M
GBM, Grade IV	60	F
GBM, Grade IV	55	M
GBM, Grade IV	68	M
GBM, Grade IV	36	F
Normal cortex	79	M
Normal cortex	45	M

aaCDR3

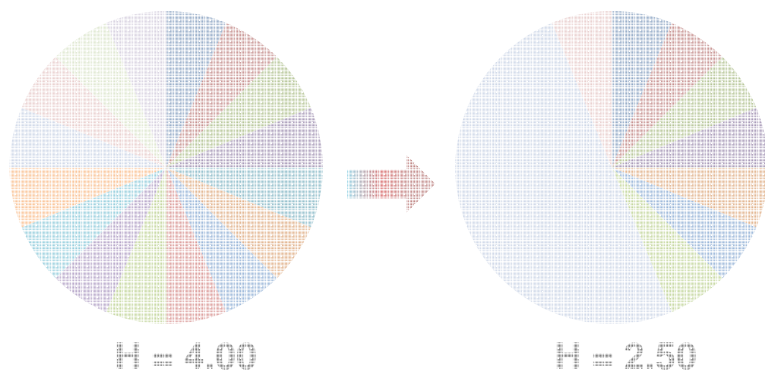


CLONALITY OF TIL & PBMC TCR REPERTOIRES



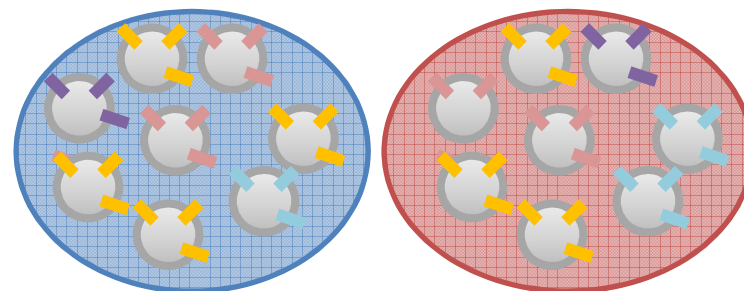
MEASURING DIVERSITY & DIVERGENCE

SHANNON ENTROPY (H)

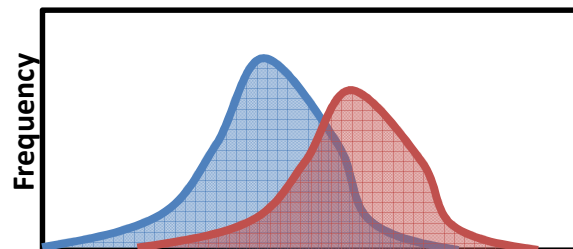


$$\sum_{i=0}^N -p_i \log_2 p_i$$

JENSEN-SHANNON DIVERGENCE METRIC (JSM)

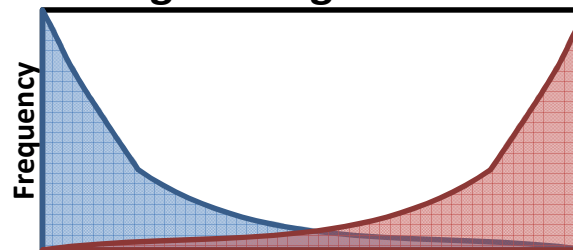


Low divergence → 0



TCR

High divergence → 1



TCR

amino acid CDR3 (aaCDR3) CVVNMPLWSYGKFGQG

TGT . GTG . GTG . AAC . ATG . CCT . CTG . TGG . AGC . TAT . GGA . AAG . TTT . GGA . CAA . GGG

V-J cassette combination TRAV12-1 . TRAJ52

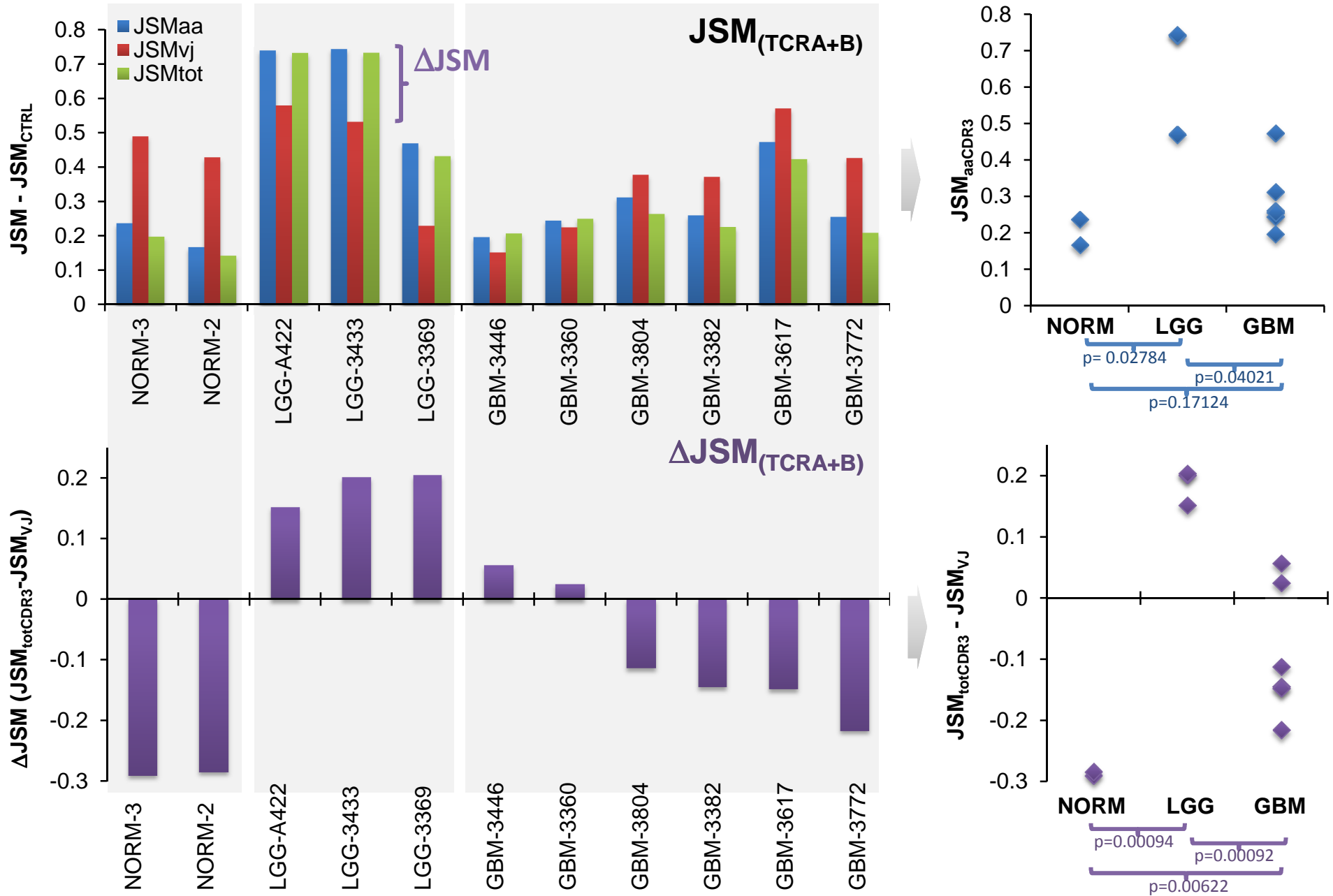
Clonal Identifier (totCDR3) aaCDR3 + VJ

TRAV12-1 . TRAJ52 CVVSMPPPLWAGGTSYGKLTFGQG

CVVNMPPPLWACGTSYGKLTFGQG

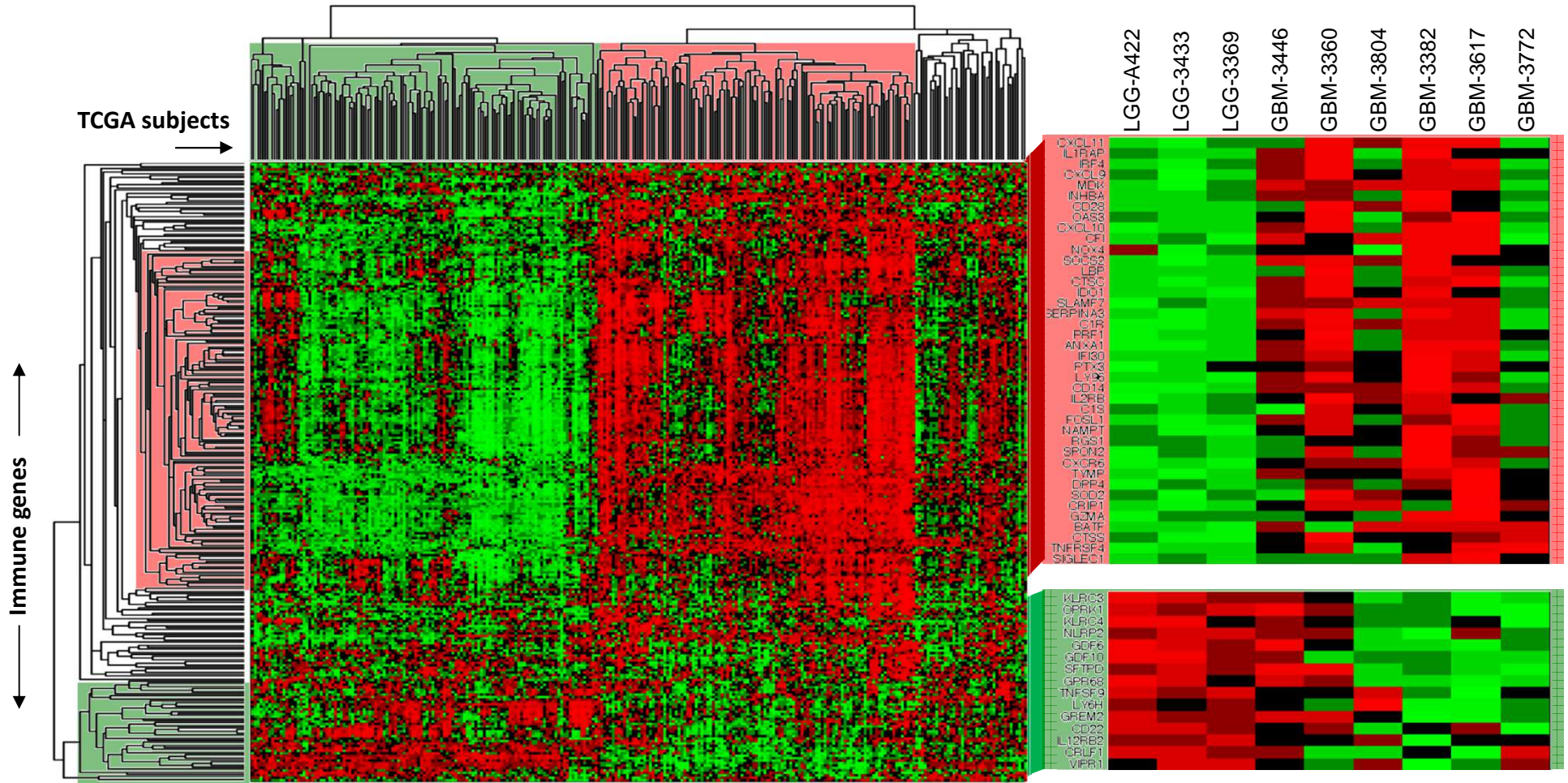
CVVNPLAGGTSYGKLTFGQG

DIVERGENCE OF GLIOMA-INFILTRATING TCRs



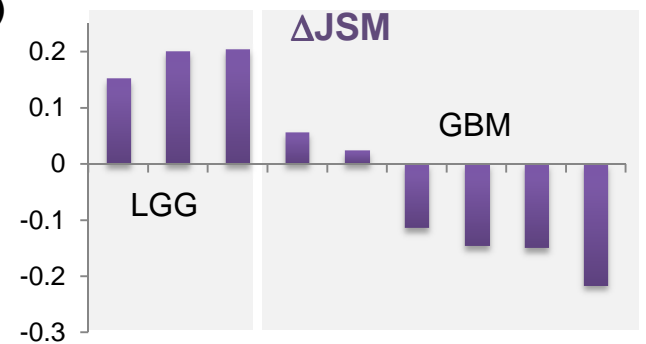
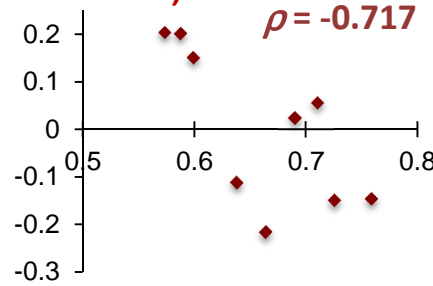
**Do features of the glioma microenvironment
correspond to the TCR divergence
phenotype?**

ΔJSM vs. IMMUNE GENE EXPRESSION

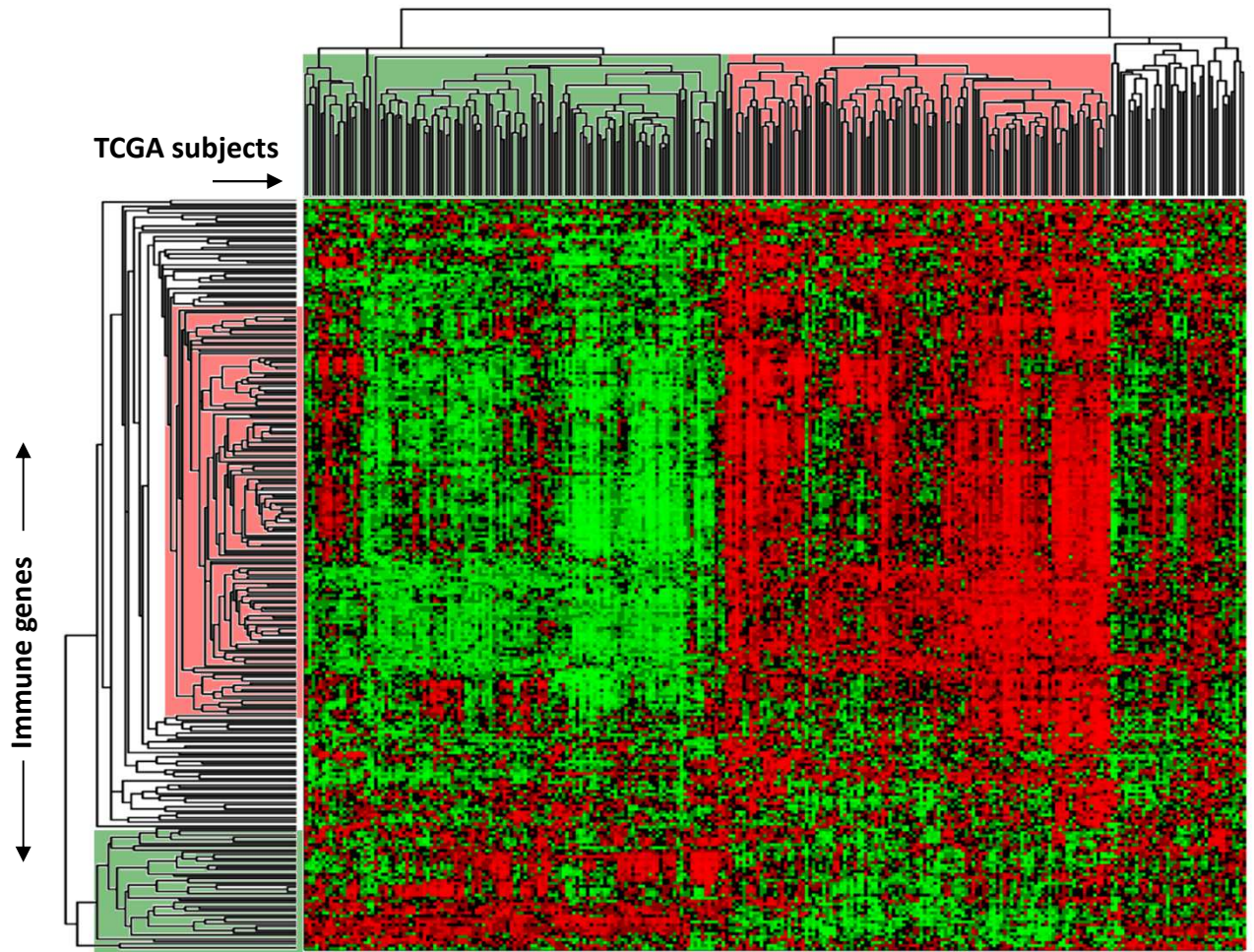


LGG ($p = 4.91 \times 10^{-45}$)
 $\rho = 0.317$
 CL ($p = 1.85 \times 10^{-16}$)
 MS ($p = 4.03 \times 10^{-15}$)
 PN ($p = 6.41 \times 10^{-12}$)
 $\rho = -0.717$

- TCGA expression profiles (271 total)
- 253 immune ontology genes

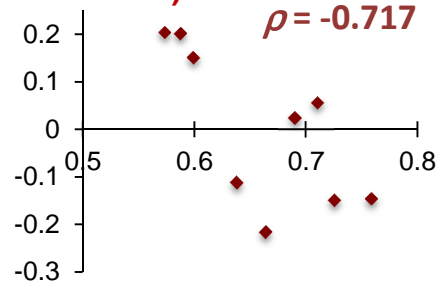


ΔJSM vs. IMMUNE GENE EXPRESSION

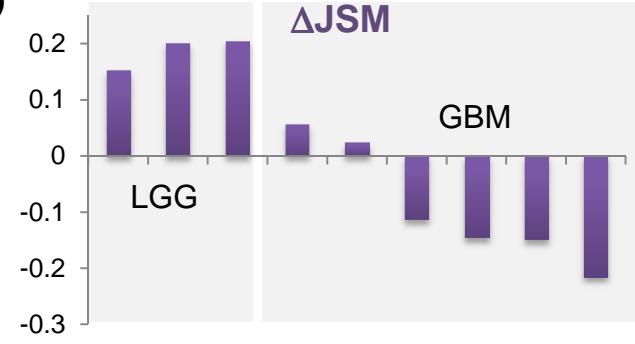


LGG ($p = 4.91 \times 10^{-45}$) $\rho = 0.317$
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 MS ($p = 4.03 \times 10^{-15}$) $\rho = -0.717$

- TCGA expression profiles (271 total)
- 253 immune ontology genes



		Correl. vs ΔJSM (spear.)
Inflammation & stress-induced	MDK	-0.767
	IL1RAP	-0.867
	SERPINA3	-0.633
	OAS3	-0.683
Complement pathway	CFI	-0.667
	C1R	-0.633
IFN-g induced T cell recruitment & activation markers	CXCL9	-0.817
	CXCL10	-0.683
	CXCL11	-0.883
	PRF1	-0.617
	CD28	-0.683
Monocyte markers, activation & survival	CTSC,IDO1, LBP,HLAs	
Lymphocyte recruitment & Th1 maturation	VIPR1	0.900
	IL12RB2	0.800
	TNFSF9	0.700
Inflammation suppression & neuron survival	SFTPD	0.633
	GREM2	0.750
	CD22	0.783
	CRLF1	0.850
Modulation of cell stress responses	OPRK1	0.517
	GPR68	0.683
	NLRP2	0.568
TGFβ superfamily	GDF6	0.600
	GDF10	0.617



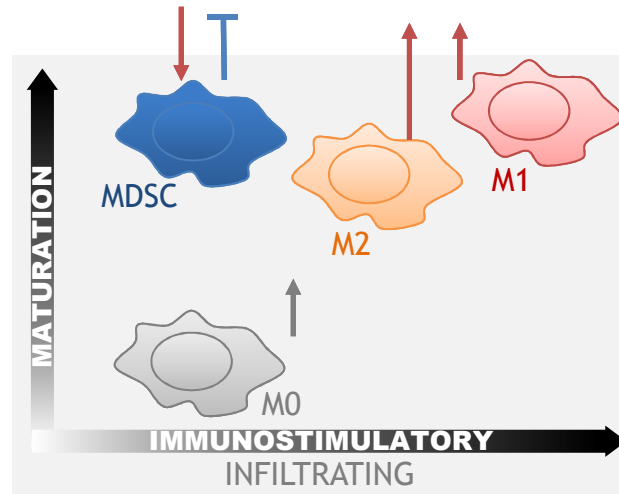
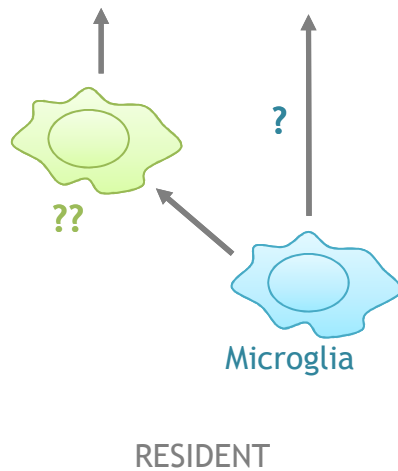
Δ JSM

- **LYMPHOCYTE** recruitment & activation
- Inflammation **SUPPRESSION**
- **MODULATION** of cell stress
- **TGF β & GROWTH FACTOR** signaling

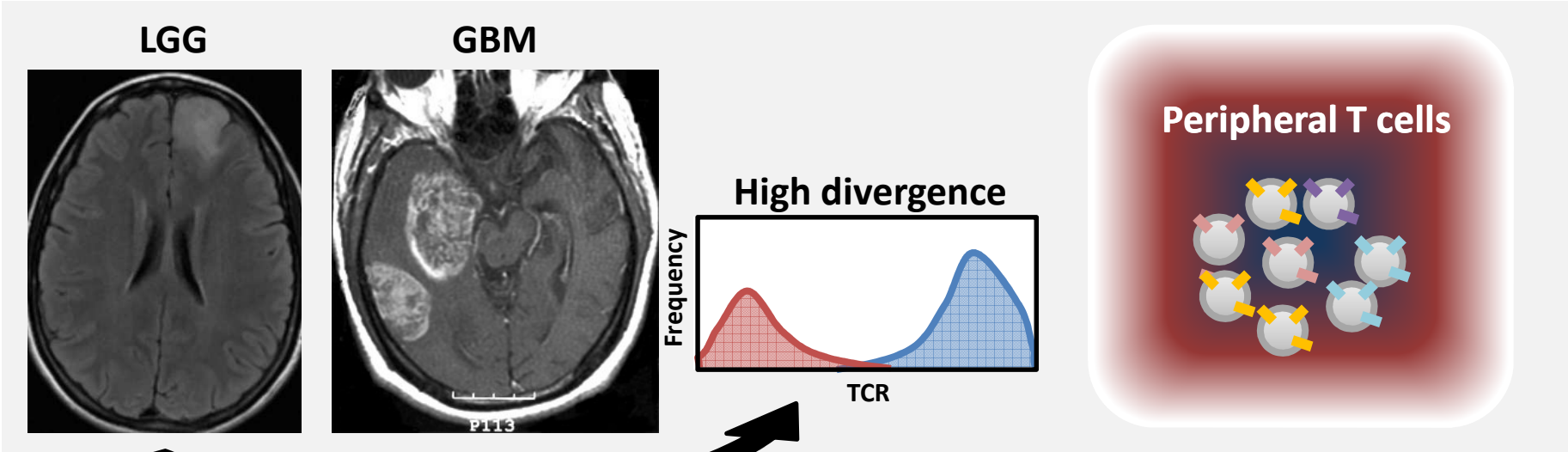
- **MONOCYTE** recruitment, variable activation, survival
- **IFN γ -INDUCED** LYMPHOCYTE recruitment
- Inflammation **INDUCTION**
- **RESPONSE** to cell stress
- **COMPLEMENT** activation

\downarrow CL_{VJ}
 \downarrow $CL_{totCDR3}$

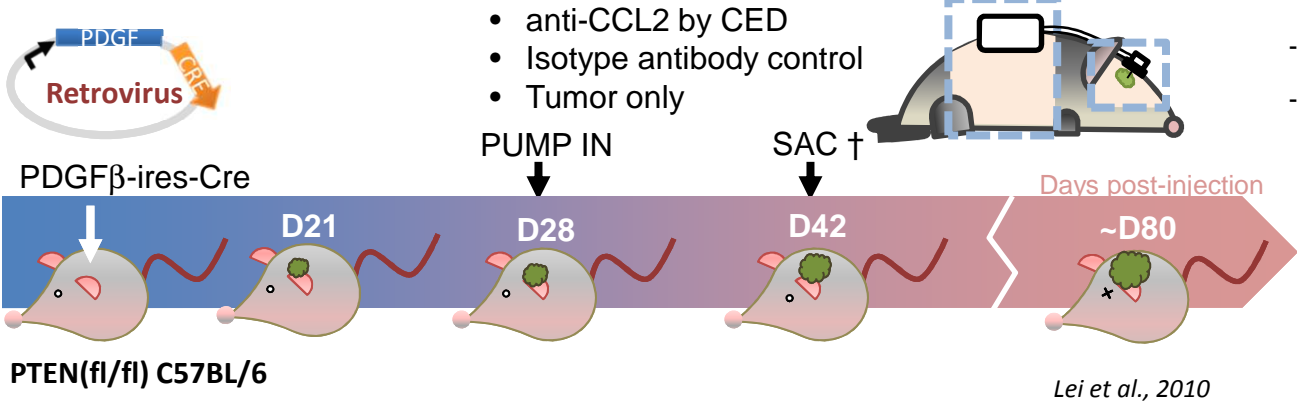
$\downarrow \sim CL$



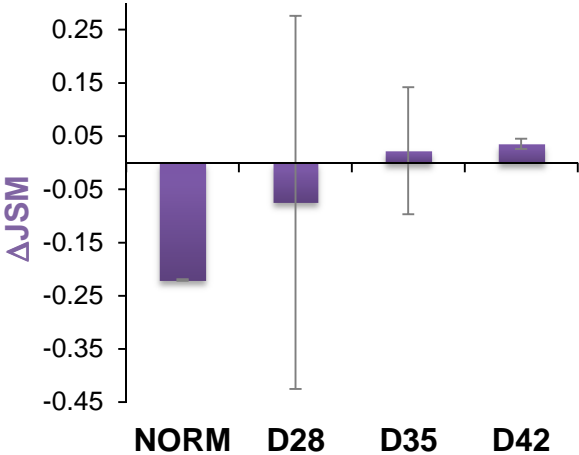
Can we manipulate TCR divergence?



Dependent on monocyte activation?



- anti-CCL2 by CED
- Isotype antibody control
- Tumor only



- PDGF-driven
- *de novo* (retroviral)
- Reproducible timing with “low grade” window

Lei et al., 2010

SUMMARY

Integrating **aaCDR3** and **V-J cassette** information from paired-end long-read TCRseq:

- entropy, clonality, divergence of populations
- gives rise to metrics which implicate modes of population selection, such as

$$\Delta\text{JSM} = (\text{JSM}_{\text{totCDR3}} - \text{JSM}_{\text{VJ}})$$

LGG: - High brain-blood ΔJSM **GBM:** - variable brain-blood $\text{JSM}_{\text{totCDR3}}$
- variable brain-blood ΔJSM

Brain-blood ΔJSM in our glioma patients is anti-correlated with the expression of genes involved in the **inflammatory response**, but correlated with the expression of other **monocyte and microglial genes** involved in microenvironmental immune functions

Local, long-term CED of **anti-CCL2** to glioma gave rise to lower brain-blood ΔJSM than controls, suggesting dependency on CCL2-mediated activation of antigen presenting cells

TIL vs. peripheral TCR divergence as a functional readout:

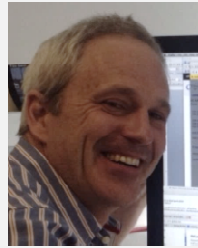
- can distinguish **immune states** of the tumor microenvironment
- **variable** between human subjects
- **dynamic** over time in the mouse model
- potential metric for **personalized** immunotherapy

THANK YOU

BARTOLI TUMOR LABORATORY



DR. JEFF BRUCE



DR. PETER CANOLL

JORGE SAMANAMUD

JUSTIN NEIRA

TIMOTHY UNG

BEN AMENDOLARA

ANGELINA MELA



DEPT. OF SYSTEMS BIOLOGY



PROF. YUFENG SHEN



BORIS GRINSHPUN



YAPING FENG

HICCC SHARED RESOURCES

**STEVE SASTRA
& OLIVE LAB**

TAO SU

J.P. SULZBERGER COLUMBIA GENOME CENTER



ERIN BUSH

XIAOJUN FENG

XIAOYUN SUN

**INSTITUTE FOR
COMPARATIVE MEDICINE
(MOUSE FACILITIES)**

**Patients,
clinical staff
& generous
donors**

