

AFNT-212: A TRAC-knocked-in KRAS G12D-specific TCR-T cell product enhanced with CD8αβ and a chimeric cytokine receptor for treatment of solid cancers

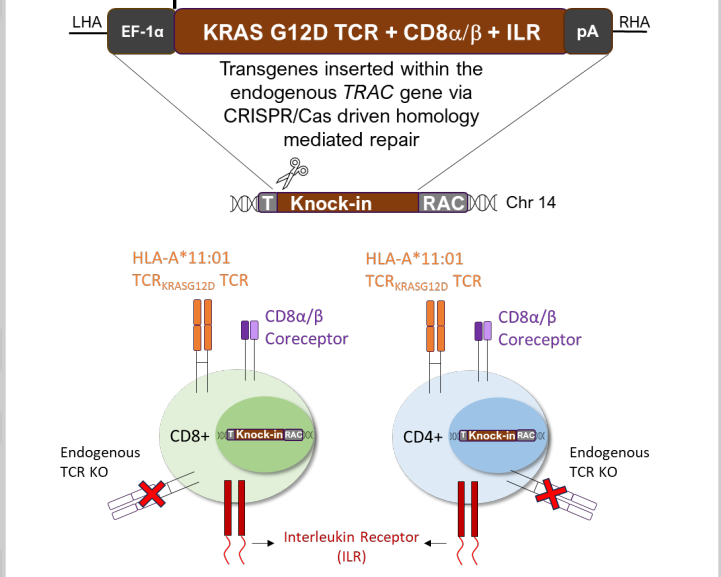


Poster #
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Abstract
 T cells engineered with T cell receptors (TCRs) recognizing epitopes derived from intracellular oncogenic drivers like mutant KRAS, the most frequently altered driver oncogene in human cancers, have the potential to induce durable responses in patients with solid tumors. AFNT-212 is an engineered T cell therapy that uses non-viral targeted knock-in (KI) at the TRAC constant chain (TRAC) locus to express a multi-cistronic cassette that includes 1) a high-affinity TCR specific for the KRAS G12D mutation, 2) a CD8α/β coreceptor, and 3) a chimeric cytokine receptor. AFNT-212 cells demonstrated cytotoxicity against endogenously expressing HLA-A*11:01+/KRAS G12D+ cell lines *in vitro* and mediated robust and durable anti-tumor activity *in vivo*. Engineered cells also demonstrated a favorable safety profile for the KRAS G12D specific TCR and gene editing reagents. Our work supports the planned clinical development of AFNT-212 as a novel non-viral KI TCR-engineered T cell therapy with enhanced activities for KRAS-mutant solid tumors.

Fig. 1: AFNT-212: CRISPR-based non-viral KRAS G12D TCR T cell therapy



AFNT-212 is a cellular therapy consisting of autologous CD4+ and CD8+ TCR-T cells engineered to recognize the HLA-A*11:01-restricted oncogenic driver KRAS G12D mutation. AFNT-212 T cells express:

- A high avidity HLA-A*11:01-restricted TCR specific for the KRAS G12D mutant peptide
- The wildtype CD8 (CD8α/β) coreceptor intended to trigger a coordinated CD4+ and CD8+ T cell immune response against cancer
- An Interleukin Receptor, ILR, that may promote anti-tumor activity through increased T cell proliferation, survival and trafficking

T cells are engineered using MG29-1, a CRISPR-Cas12a system, to knock-in (KI) the transgenes within the TRAC locus where the transgenes are delivered non-virally as a plasmid. The transgene KI simultaneously disrupts the endogenous TRAC locus abrogating the endogenous TRAC chain expression.

Fig. 2: AFNT-212 T cells bind KRAS G12D peptide with high functional avidity and show robust cytotoxicity *in vitro*

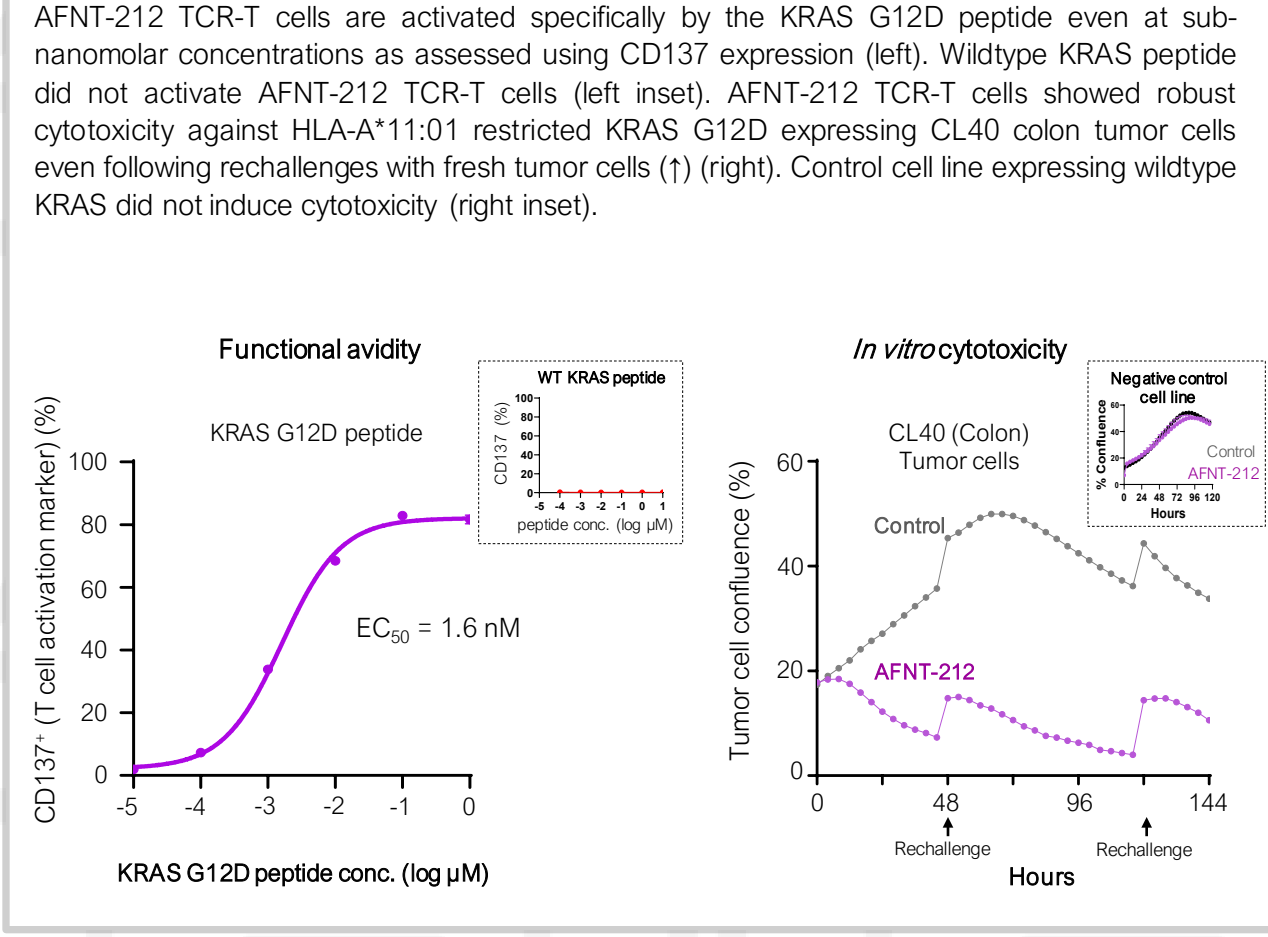


Fig. 5: Gene editing (GE) reagents show high specificity

Target locus amplification (TLA) analysis showed transgene integration within the desired TRAC locus demonstrating specificity of GE reagents^{1,2} (MG29-1 and TRAC gRNA) and the HDR-based knock-in process (left). Further, potential off-target sites for GE reagents identified using *in silico* prediction and oligo-capture method (right) were assayed for insertions and deletions in GE T cells using a targeted sequencing assay. None of the potential off-targets showed significant activity.

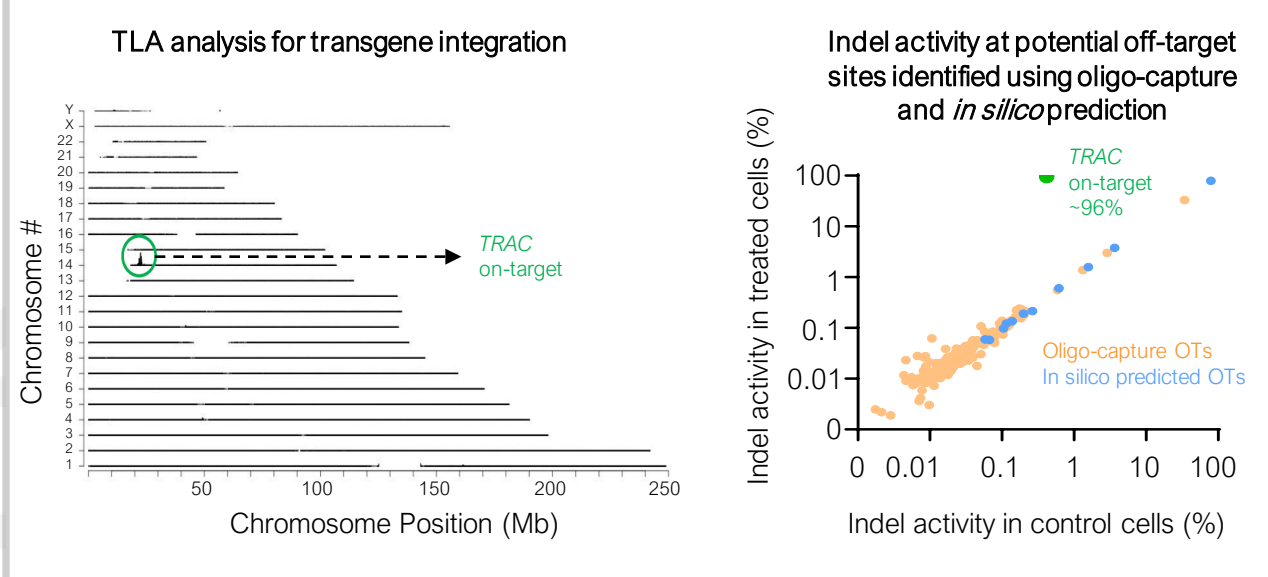


Fig. 3: AFNT-212 T cells exhibit low risk of cross-reactivity

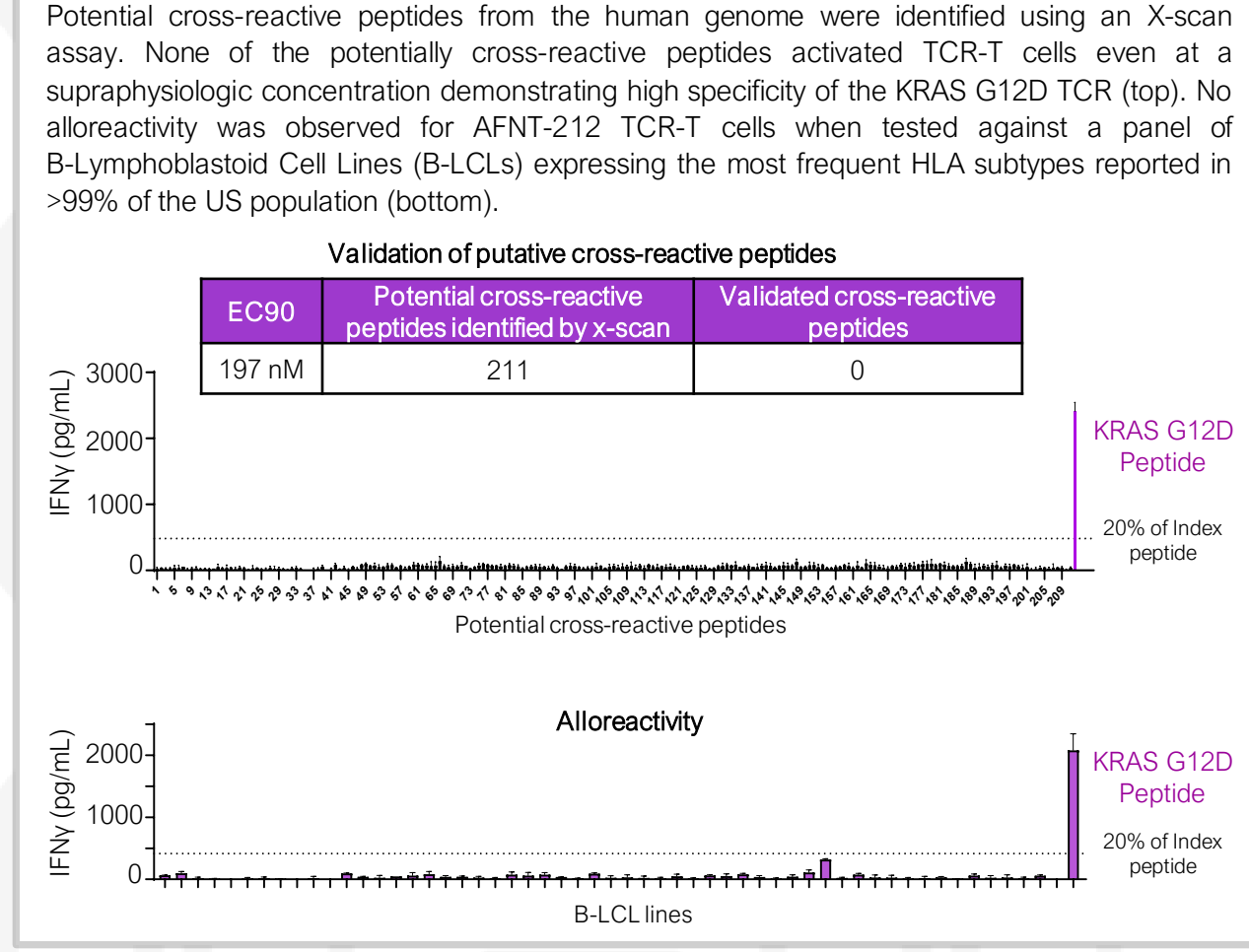


Fig. 6: THRIVE™ platform enables robust and scalable manufacturing of TCR T cells

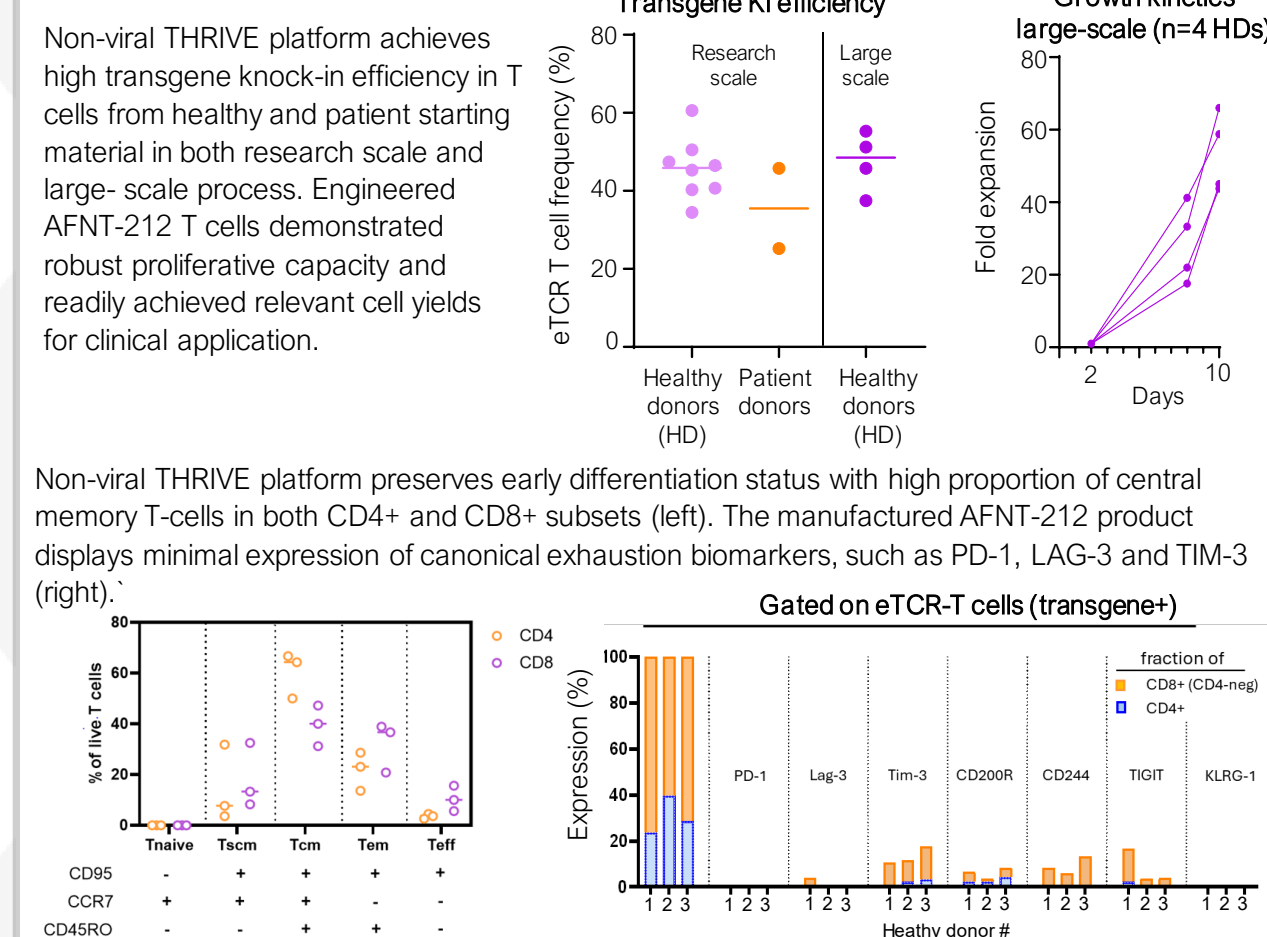
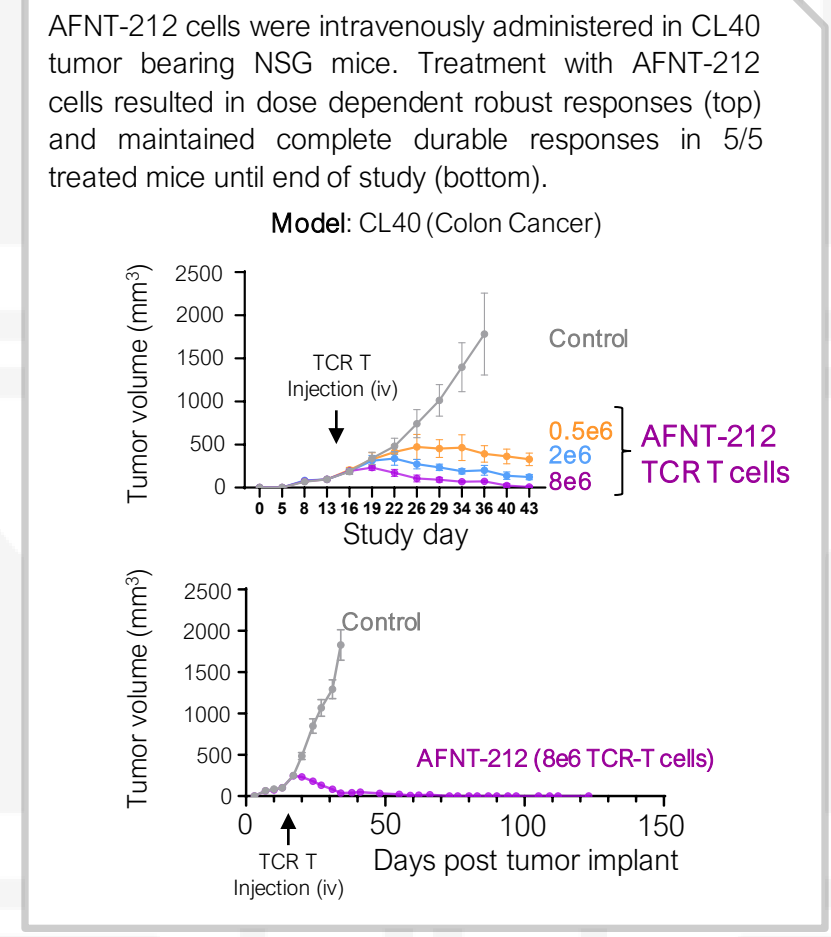


Fig. 4: AFNT-212 T cells shows robust tumor cell control *in vivo*



Summary

- AFNT-212 engineered TCR-T cells show high functional avidity and *in vitro* cytotoxicity against KRAS G12D positive tumor cell lines including CL40 (colon), PANC-1 and HPAF-II (pancreas), SK-LU-1 (lung), HuCCT1 (cholangiocarcinoma) etc.
- Engineered TCR-T cells show robust and durable anti-tumor activity *in vivo*. AFNT-212 showed tumor control even with as few as 500,000 cells/mice suggesting the transferred TCR-T cells exhibit capacity to proliferate.
- AFNT-212 has low risk of off-target/off-tumor toxicity.
- Gene editing reagents used for manufacturing show low risk of genotoxicity.
- THRIVE™, non-viral KI platform can achieve high transgene integration efficiency and cell growth to yield relevant numbers of engineered TCR-T cells for clinical application.
- AFNT-212 program is poised to enter clinical testing in 2024

References

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