

Gene Engineering of multi-antigen-sensing SynNotch TGF-ß trap circuit against solid tumor microenvironments applied to CAR-T cell immunotherapy

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B



Results

Introduction

Figure 1 | Schematic of overcoming solid TME by Synnotch signaling.



Effectively targeting tumors and cancers has been the endeavor of many scientists. Of the many attempts to cure tumors, chimeric antigen receptor (CAR) T cell therapy has been a revolutionary pillar in cancer therapy. However, CAR-T cell therapy is only effective in hematological cancers such as lymphomas and leukemias and is rendered ineffective in treating solid tumors due to the characteristic of solid tumors creating a TME (tumor microenvironment). To improve CAR-T cell therapy in targeting solid tumors, we constructed the synNotch (synthetic Notch) receptor and incorporated it with the TGF-Beta trap (a molecule that sequesters TGF-Beta protein, inhibiting TGF-Beta receptors) in effort to nullify the TME. To verify whether the system operates effectively, several experiments (tBFP reporter assay, Luciferase assay) were conducted.



tBFP reporter + Synnotch tBFP reporter Ò No construction x numbé cells

Experimental Methods

Figure 2 | Lentiviral transduction and confirmation of synNotch and tBFP reporter gene expression





В

Figure 2 l

A) Lentiviral transduction of tBFP reporter and synNotch plasmid. Two plasmids were synthesized using a lentivector plasmid, one tBFP reporter (UAS-tBFP-PGK-mCherry) and synNotch (PGK-anti-PDL1-synNotch-Gal4) plasmid. Lenti-X HEK293T was used as host. Lentivirus was harvested and transduced to Jurkat T cell line.

B) Confirmation of tBFP reporter and synNotch transduction via antibody staining. ICC was conducted with anti-myc (primary antibody) and anti-mouse-488 (secondary antibody). Fluorescence data was obtained through Confocal Microscopy and FACS analysis.





Figure 6 I Jurkat T-cell expresses tBFP selectively when co-cultured with PDL1 overexpressing A375 cells.







Figure 4 l

A) SBE-Luc reporter plasmid preparation / lentiviral transduction of luciferase reporter plasmid. SBE-Luc reporter was synthesized by infusion cloning with restriction enzyme (EcoR1 and Not1). SBE-Luc reporter was tranduced and tranfected to quantitively measure TGF-Beta signaling via luciferase assay. Transduction was executed with lentiviral transduction and transfection was executed with lipofectamine.

B TGF-β1 treatment / Luciferase assay. TGF-beta1 protein treatment with A375/HEK293 was conducted to verify luciferase reporter function. Luciferin added upon cell lysate to measure photon emission.

C) Coculture condition table to confirm function of luciferase reporter as a downstream signal of TGF-Beta signaling.

Reference

June, Carl H., and Michel Sadelain. "Chimeric antigen receptor therapy." New England Journal of Medicine, vol. 379, no. 1, 5 July 2018, pp. 64–73. Li, Shun, et al. "Cancer immunotherapy via targeted TGF-β signalling blockade in TH cells." *Nature*, vol. 587, no. 7832, 21 Oct. 2020, pp. 121–125. Rad, Habib Sadeghi, et al. "Understanding the tumor microenvironment in head and neck squamous cell carcinoma." Clinical & amp; Translational Immunology, vol. 11, no. 6, Jan. 2022.

Roybal, Kole T., et al. "Engineering T cells with customized therapeutic response programs using synthetic notch receptors." Cell, vol. 167, no. 2, Oct. 2016. Santibañez, Juan F., et al. "TGF-β/TGF-β receptor system and its role in physiological and pathological conditions." Clinical Science, vol. 121, no. 6, 27 May 2011, pp. 233–251.

Sterner, Robert C., and Rosalie M. Sterner. "Car-T cell therapy: Current limitations and potential strategies." Blood Cancer Journal, vol. 11, no. 4, 6 Apr. 2021. Shi, X., Yang, J., Deng, S. et al. TGF-β signaling in the tumor metabolic microenvironment and targeted therapies. J Hematol Oncol 15, 135 (2022).

Conclusion & Further Study

Firstly, to confirm the transduction and expression of the synNotch receptor, we conducted flowcytometry analysis confirming that fluorescence components were expressed accordingly (Fig 5 A). The confocal microscopy showed Alexa Floura 488 on the cell membrane of our Synnotch+ Jurkat cell, which suggests that the synNotch receptor is well expressed (Fig. 5 B). After confirming the expression, we experimented on the selective binding of our synNotch receptor to cancer cells. FACS analysis after coculture with each cell lines demonstrated that tBFP signal for the "A375 PDL1 O.E. + Synnotch Jurkat" showed a 9-fold increase than the negative control "A375 + Jurkat" (Fig. 6 A-C). This suggests that the anti-PDL1 synNotch is selectively turned on in an environment where PDL1 is overexpressed, a characteristic of tumor cells *in vivo*.

To verify if TGF-Beta1 protein induces TGF-Beta signaling, we conducted a luciferase assay using our transduced/transfected SBE-Luc A375/HEK293 cell line. The transduced/transfected cells showed an increase in luciferase activity as expected (Fig. 7 A-B). The increase was observed in a concentration, gene insertion, and cell line-dependent manner. The difference in fold increase in transfected and transducted cells can be due to the low efficiency of transduction. Difference in fold increase in HEK293 and A375 cells can be attributed to the fact that HEK293 cells naturally express more of TGF-Beta receptors than A375 melanoma cell lines, thus having more TGF-Beta signaling.

To validate if the TGF-Beta trap protein can be incorporated into the synNotch system to nullify the TME, we are planning to incorporate the TGF-Beta trap as a downstream signal for our anti-PDL1 synNotch instead of the tBFP reporter. Currently, the plasmid necessary for this experiment has been synthesized and coculture has been executed. However, optimization is required at the moment. In good hope, we can hypothesize that this system, if viable and functional, can aid the CAR T-cell therapy regarding solid tumors that have TMEs as an obstacle to overcome. To verify this system and hypothesis, more in vivo and in vitro experiments are necessary along with necessary optimization protocols.