

Induction of Tertiary Lymphoid Structures, a new strategy of the immune system to fight against tumor

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Laboratory « Cancer, Immune Control and Escape »

UMRS 1138 INSERM

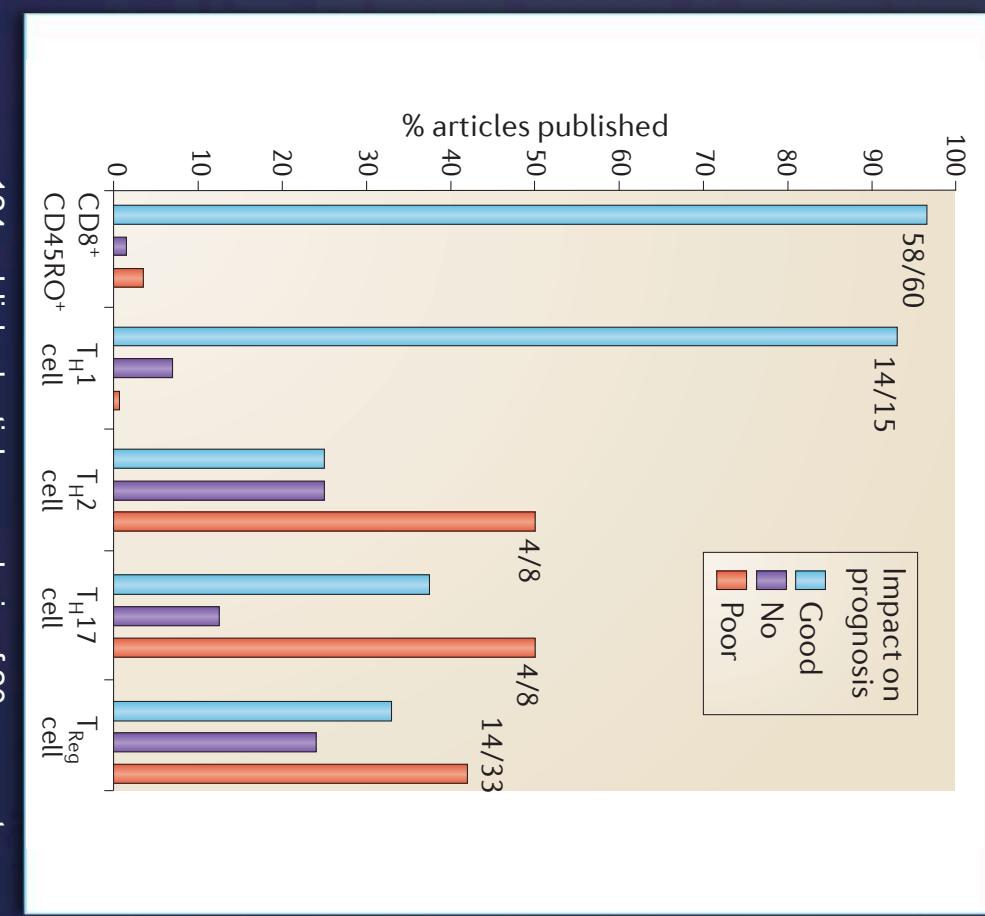
Cordeliers Research Center

Paris, France



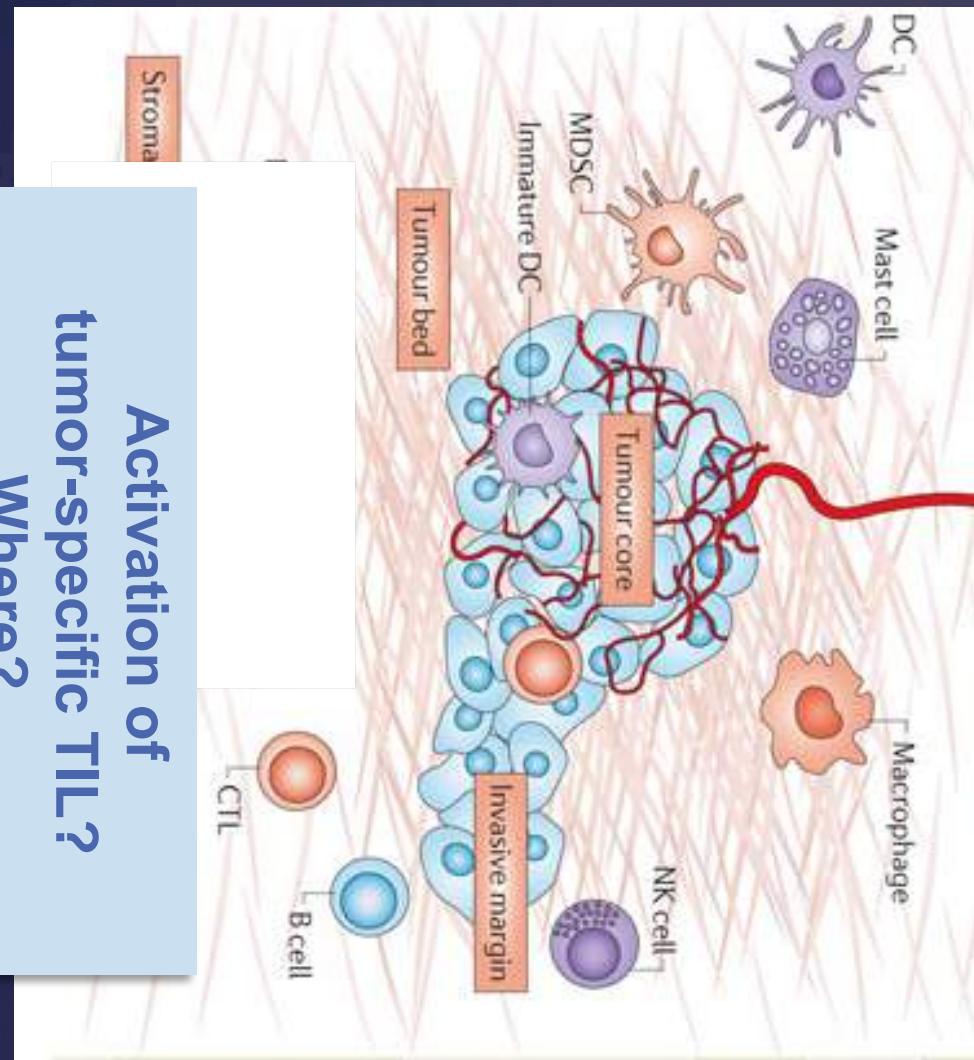
Complexity of the tumor microenvironment and heterogeneity between patients

Activation of
tumor-specific TIL?
Where?



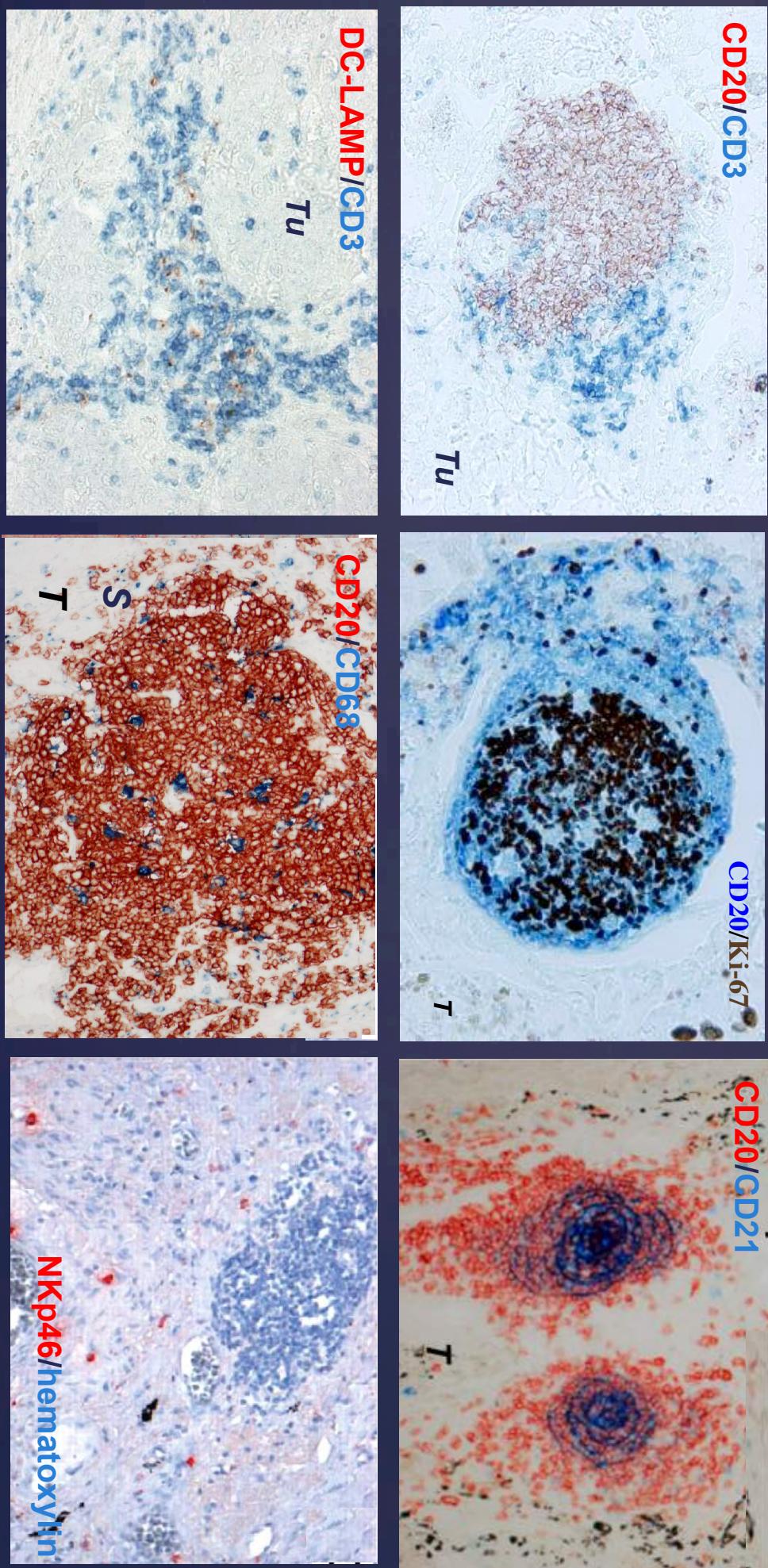
124 published articles, analysis of 20 cancer types

Molecules



Presence of Tertiary Lymphoid Structures (TLS) in some tumors of NSCLC patients

➤ Hallmark of TLS = mature DC (DC-Lamp)



Tu: tumor nest, S: stroma

Dieu-Nosjean *et al.*, J Clin Oncol, 2008
Platonova *et al.*, Cancer Res., 2011
De Chaisemartin *et al.*, Cancer Res., 2011

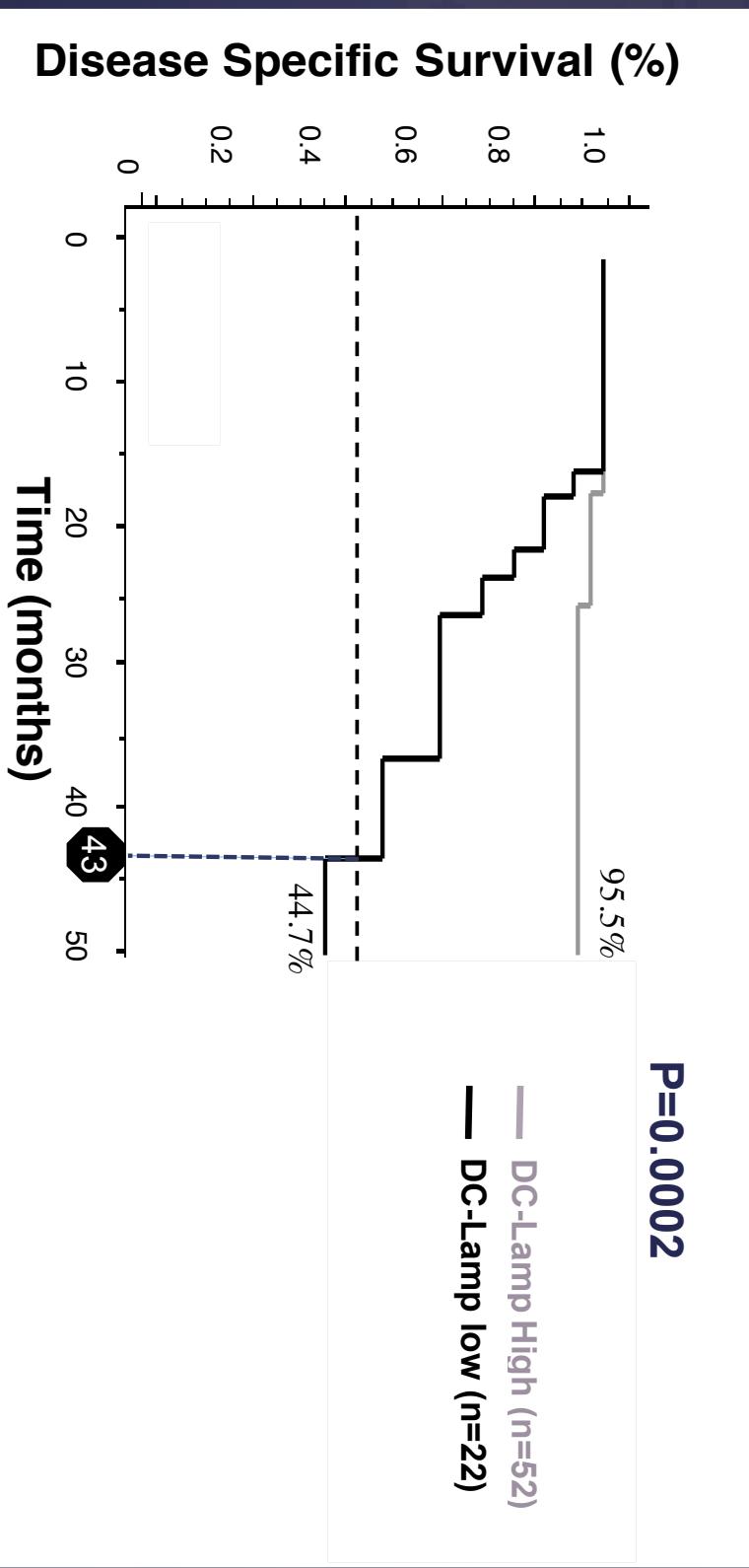
Definition of TLS

- Structural analogy with secondary lymphoid organs
(*spleen, lymph nodes, MALTs*)
- Detected in non-lymphoid organs
(*lung, pancreas, liver, articulations, thyroid, kidney, ...*)
- Induced in response to chronic inflammation
(*auto-immunity, chronic allograft rejection, infection, ...*)
- Disappear after removal of the inflammation
(*lung, pancreas, liver, articulations, thyroid, kidney, ...*)
- Dual role:
deleterious (*autoimmunity, transplantation, ...*) *versus protective role* (*microbial infections*)

Cancer patients?

High density of mature DC is associated with a favorable clinical outcome in early-stage lung cancer patients

N=74 patients with primary early-stage NSCLC

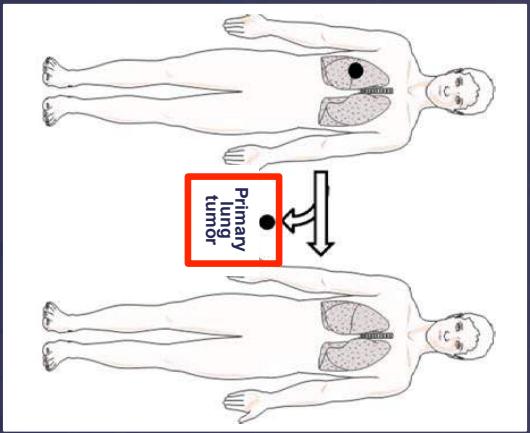


Kaplan-Meier method, Log-Rank test

Fridman et al., Cancer Met. Rev., 2011

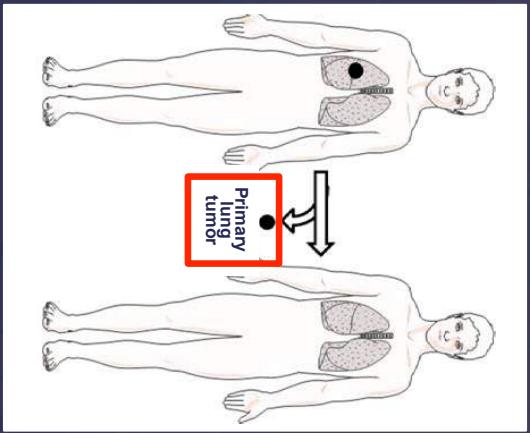
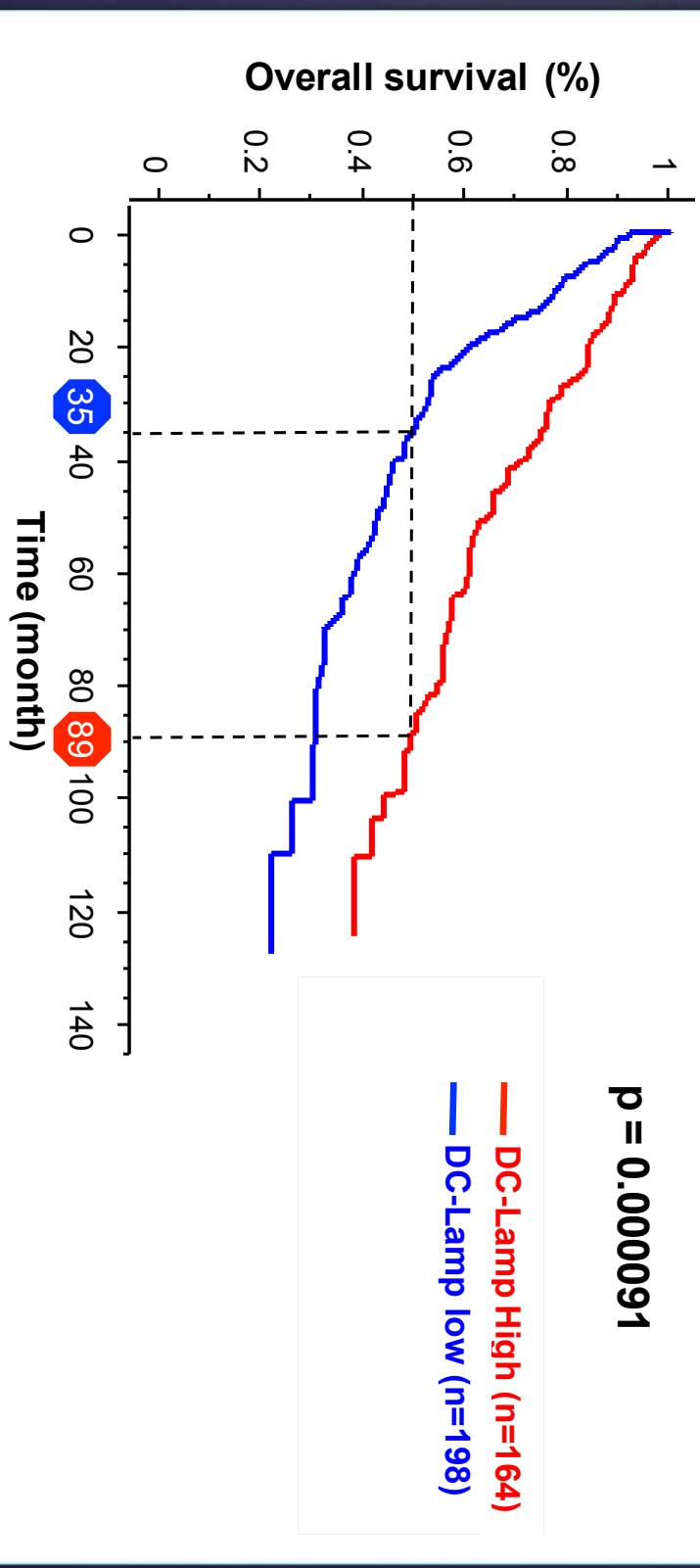
Same result with OS, DFS

Dieu-Nosjean et al., J. Clin. Oncol., 2008



High density of mature DC is associated with a favorable clinical outcome in patients with all stage lung cancer

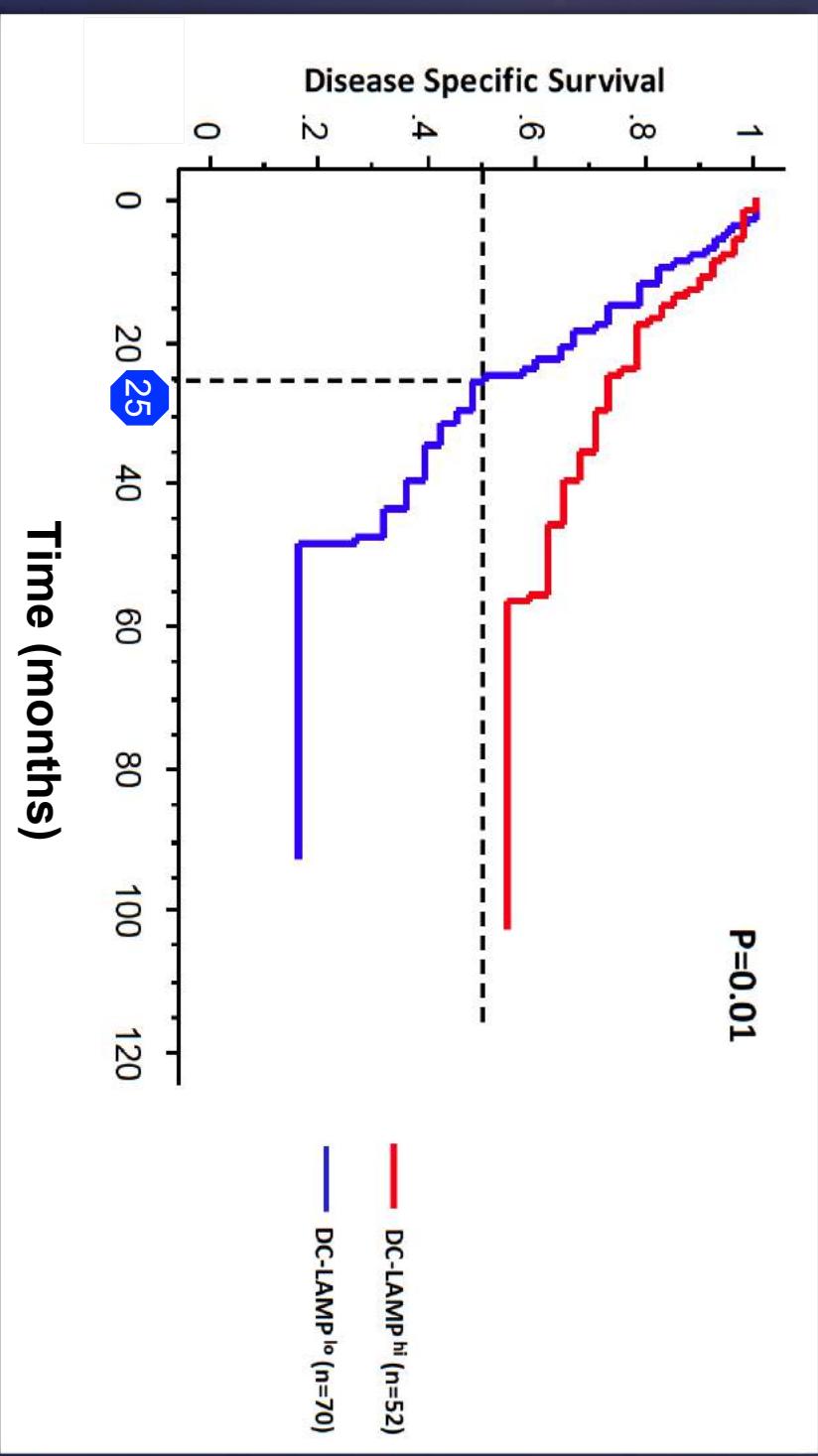
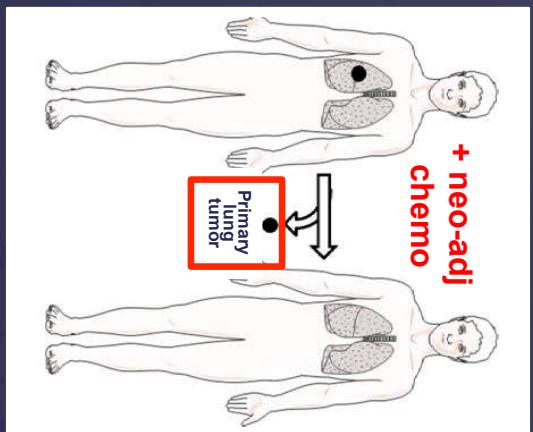
N=372 patients with primary NSCLC (stages I to IIIa, wo neo-adj chemotherapy)



Kaplan-Meier method, Log-Rank test

High density of mature DC is associated with a good outcome in advanced NSCLC + neo-adj chemotherapy

N=122 NSCLC patients treated by neo-adjuvant chemotherapy (stage IIIB)

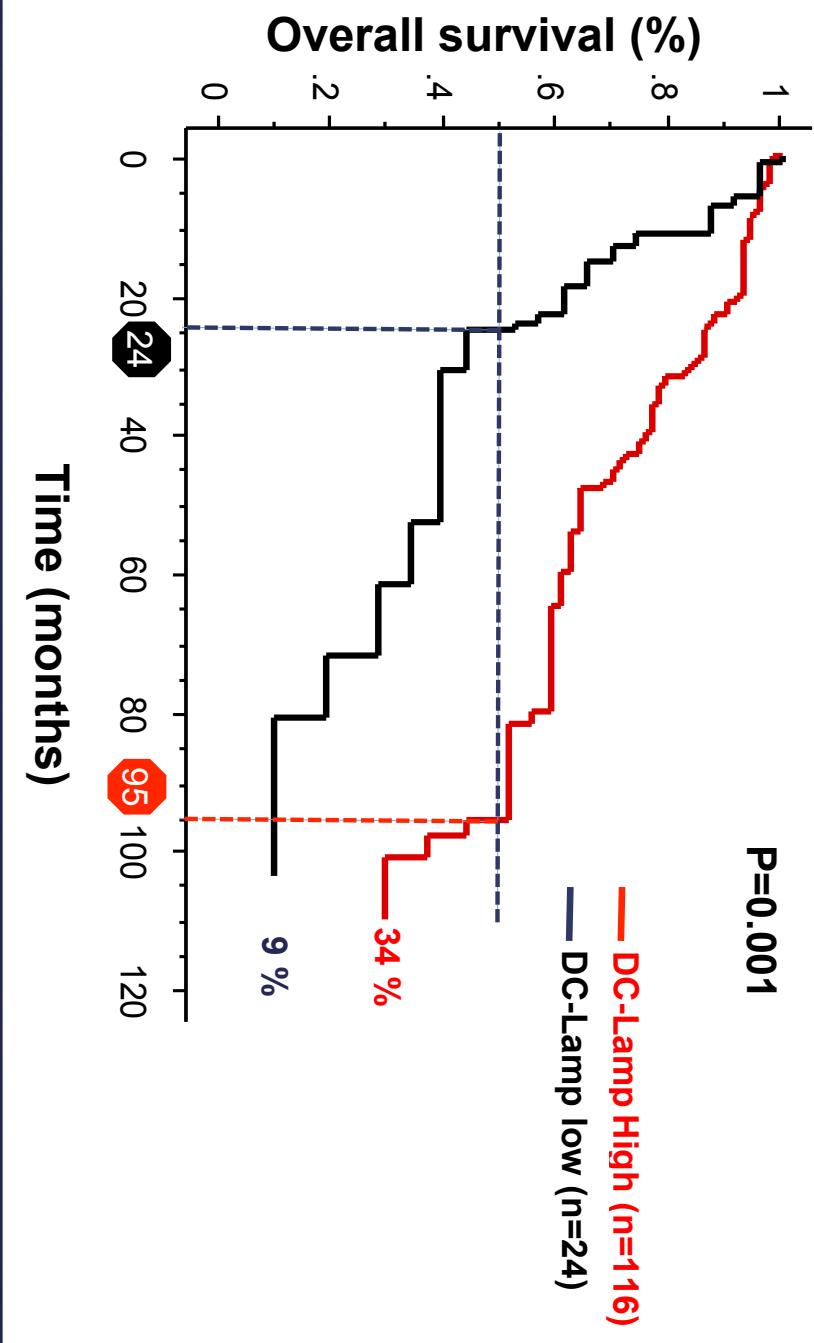
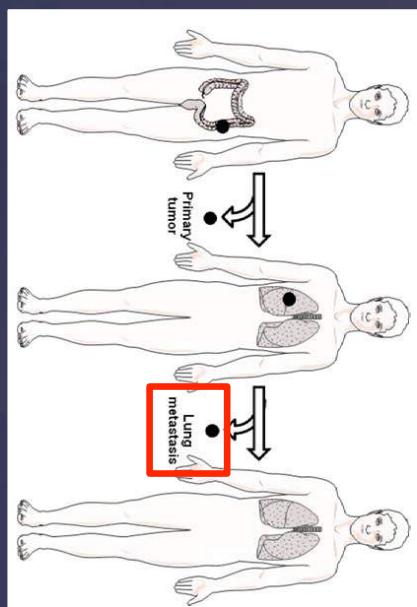


Kaplan-Meier method, Log-Rank test

Remark et al., unpublished data

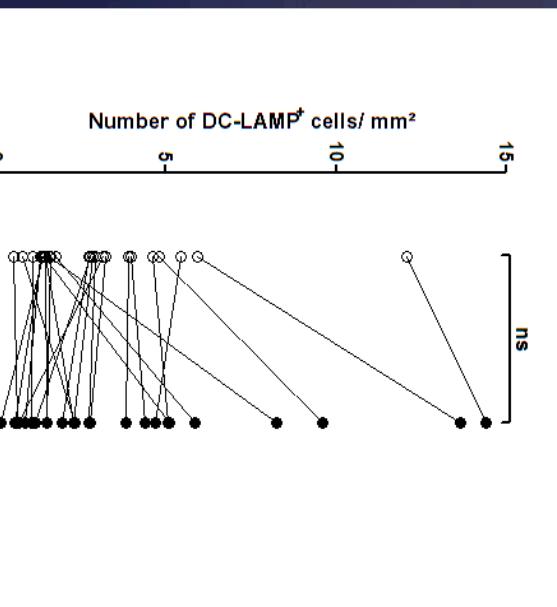
High density of mature DC is associated with a favorable clinical outcome even in metastatic patients

N=140 patients with colorectal carcinoma lung metastasis



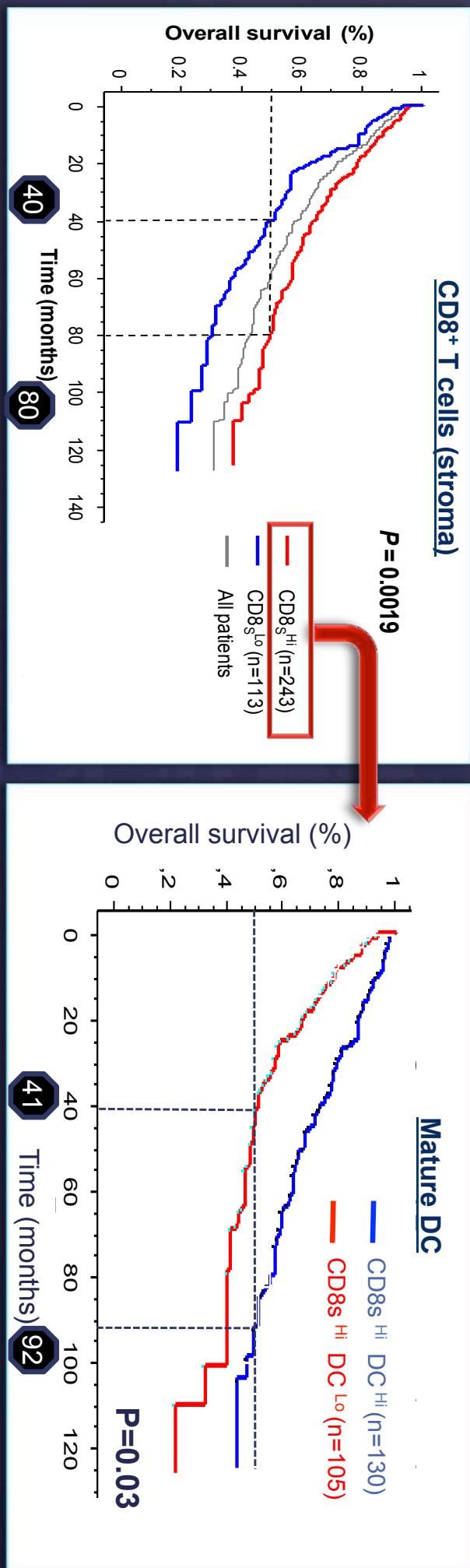
Kaplan-Meier method, Log-Rank test

Remark et al., Clin. Cancer Res., 2013



Presence of mature DC is required to license the positive prognostic value of infiltrating CD8⁺ T cells

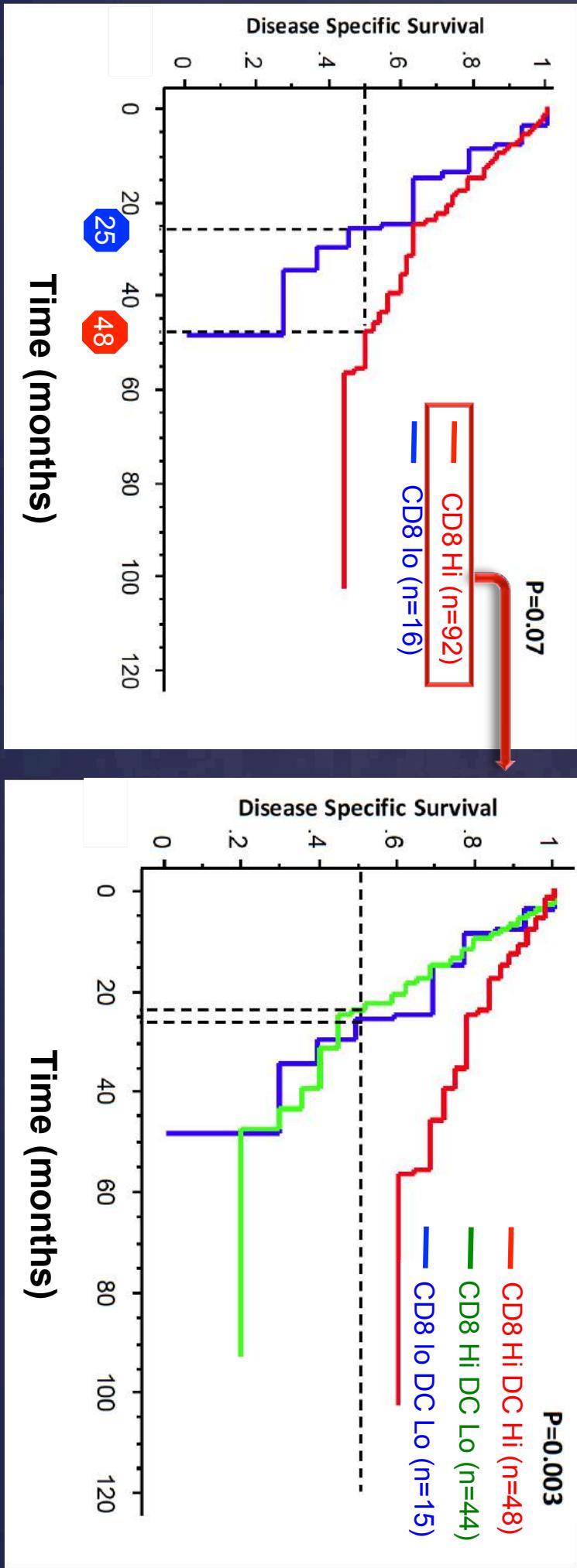
N=356 patients with primary NSCLC (stages I to IIIa, wo neo-adj chemotherapy)



Kaplan-Meier method, Log-Rank test

Presence of mature DC is required to license the positive prognostic value of infiltrating CD8⁺ T cells

N=108 patients with advanced NSCLC (stage IIIB, + neo-adj chemotherapy)



Kaplan-Meier method, Log-Rank test

Remark et al., unpublished data

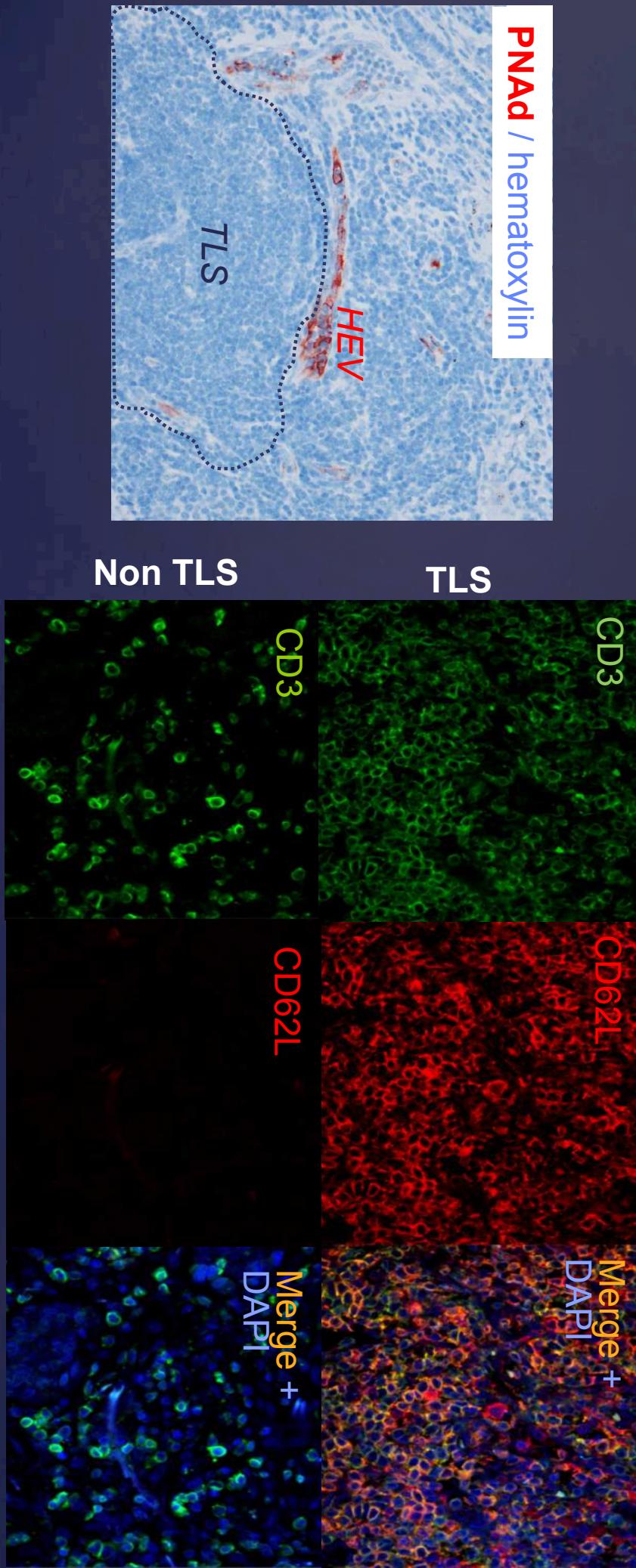


No local education of specific T cells
Priming in lymph node only

Local education of specific T cells (TLS)
± priming in lymph node

TLS demonstrate vascular features specialized in lymphocyte recruitment

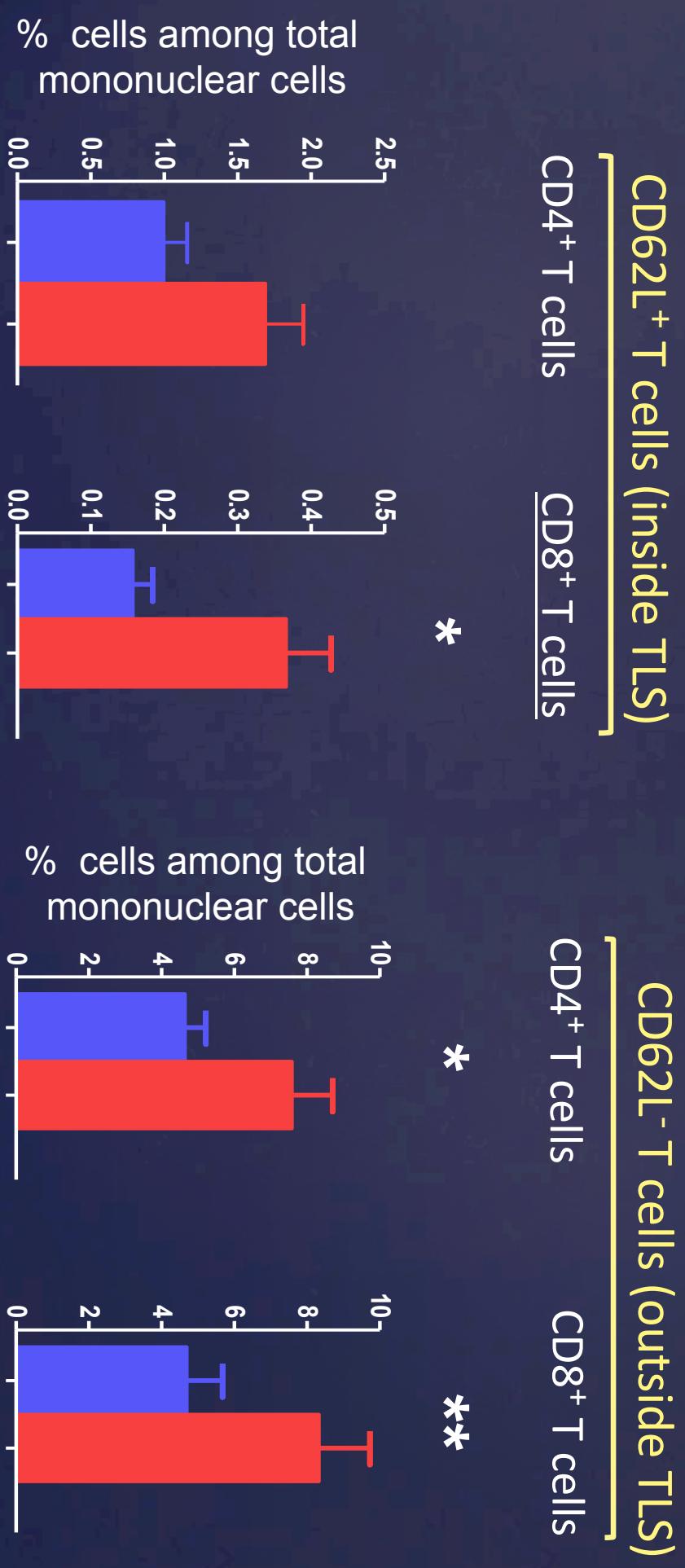
➤ CD62L is a specific marker of TLS T cells



More CD4⁺ and CD8⁺ T cells in both TLS and non-TLS areas in DC-Lamp^{Hi} versus DC-Lamp^{Lo} tumors

Flow cytometry (n=54 fresh tumors)

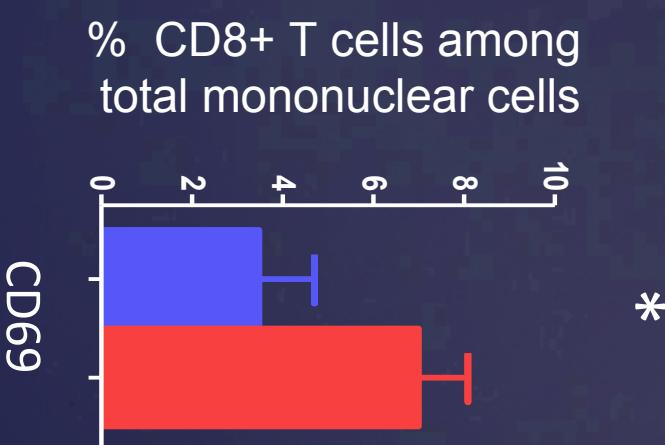
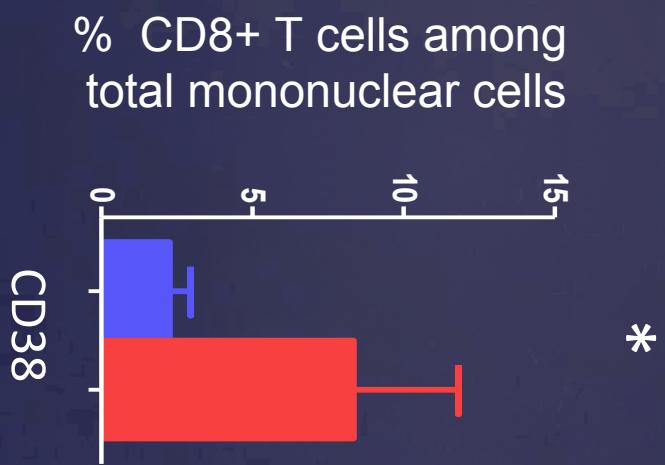
DC-Lamp Low DC-Lamp High



Increased proportion of activated CD8⁺ T cells among DC Lamp^{Hi} versus DC Lamp^{Lo} tumors

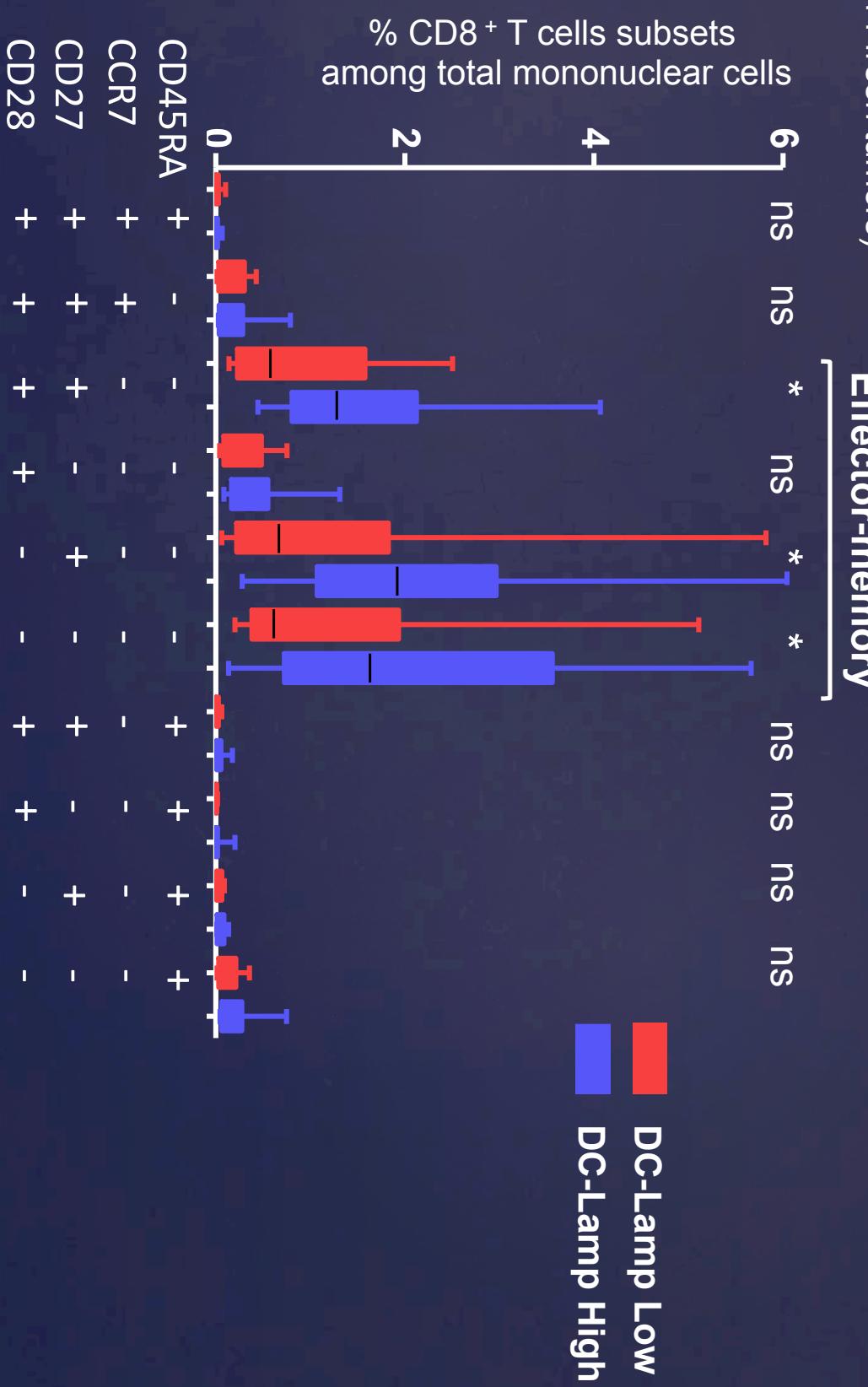
Flow cytometry (n=54 fresh tumors)

DC-Lamp Low
DC-Lamp High



More effector-memory CD8⁺ T cells in DC-Lamp^{Hi} versus DC-Lamp^{Lo} tumors

Flow cytometry (n=44 fresh tumors)

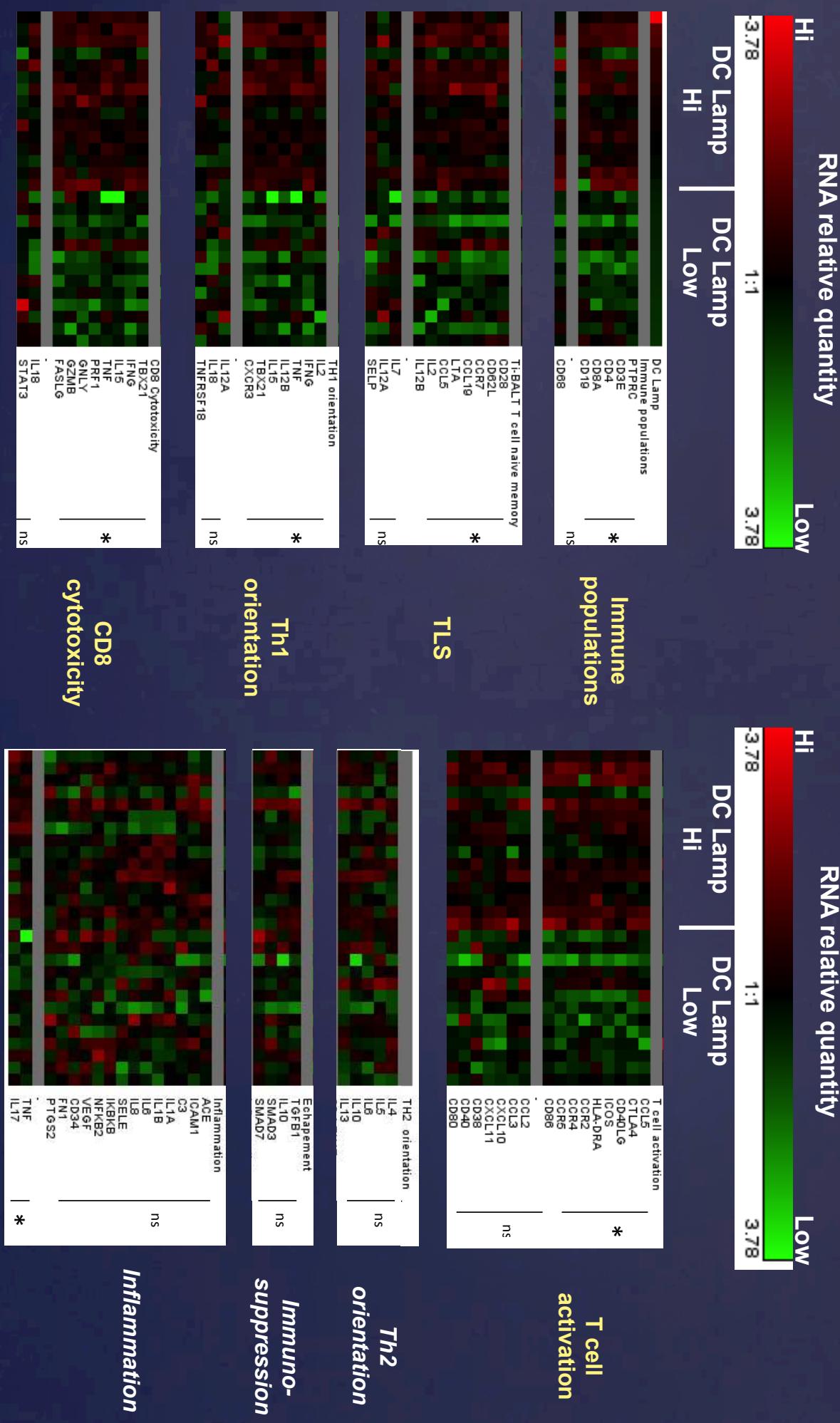


proliferation

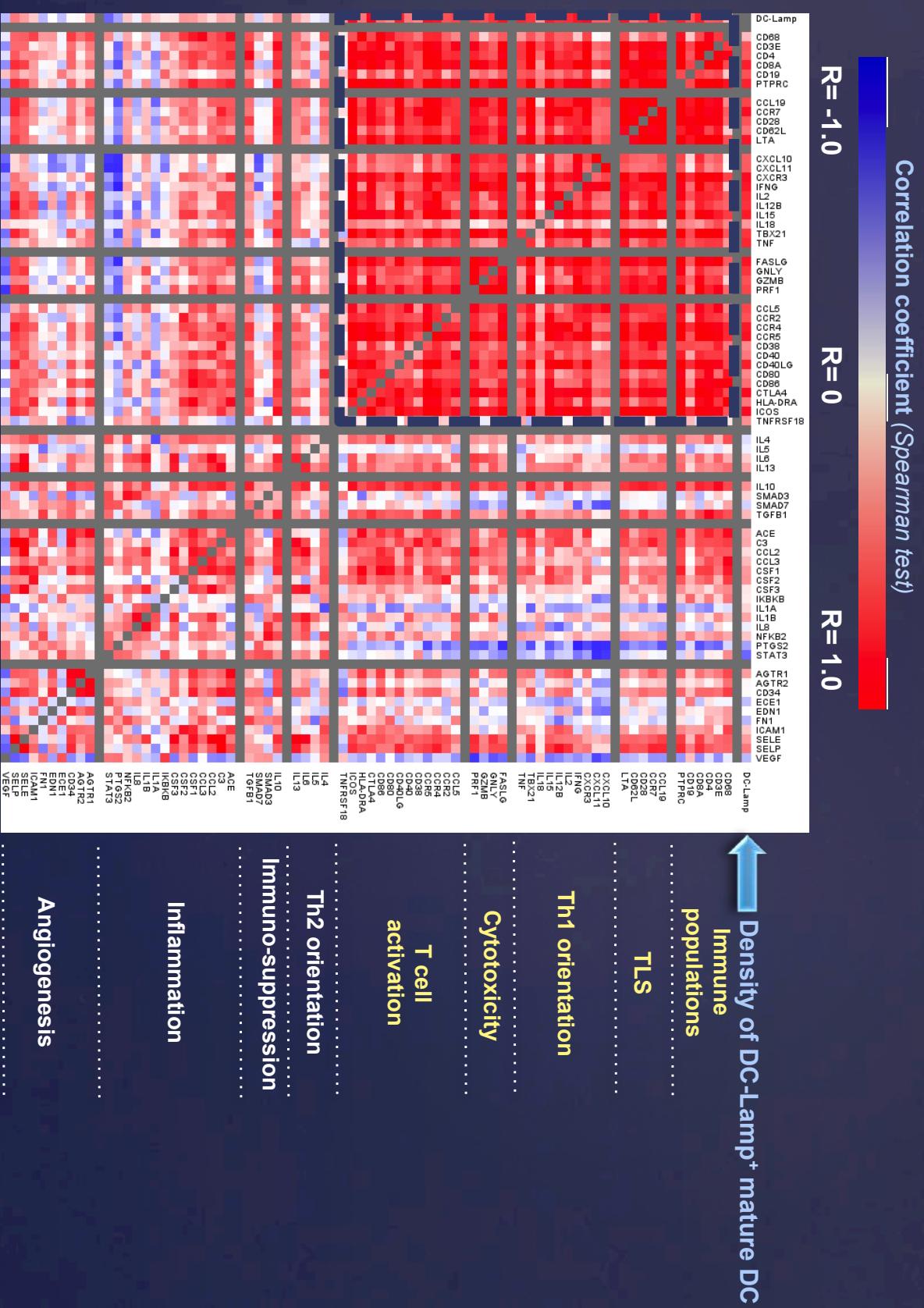
Effector/cytotoxic function

Th1, cytotoxic and activation genes are overexpressed in DC-Lamp^{Hi} versus DC-lamp^{Lo} tumors

n = 28 tumors (LDA analysis)



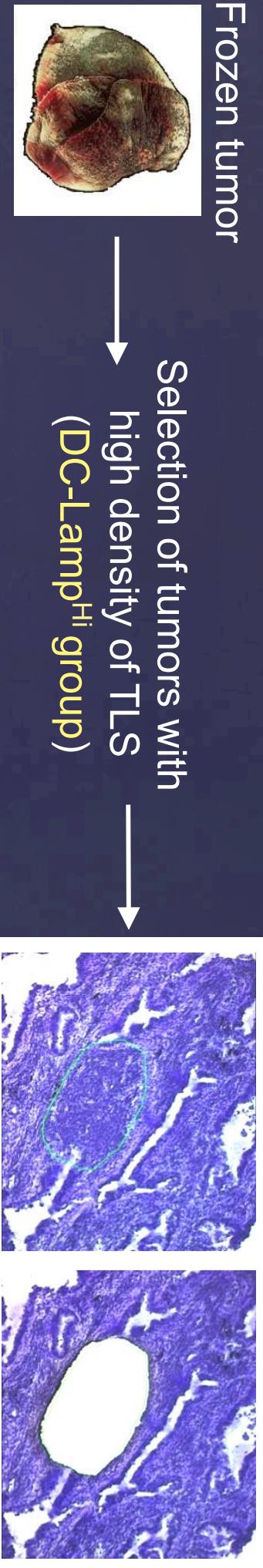
Th1, cytotoxicity and activation genes are co-regulated, and associated with high density of mature DC



Correlation matrix using hierarchical clustering

Gene signature in TLS versus tumor nests

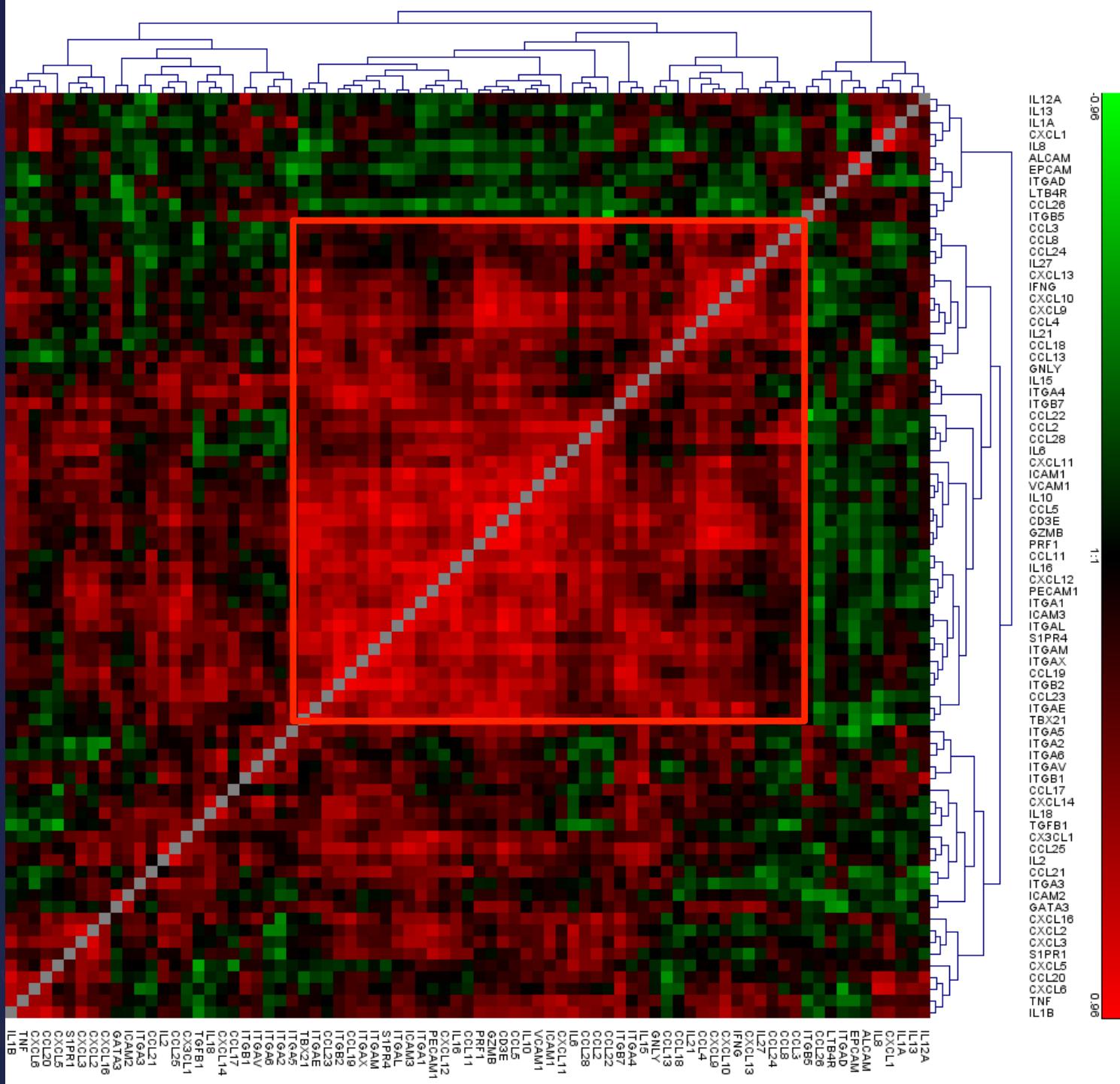
ex. TLS



Gene expression (TaqMan LDA)



Correlation matrix using hierarchical clustering



Th1 + EM T cells +
cytotoxicity

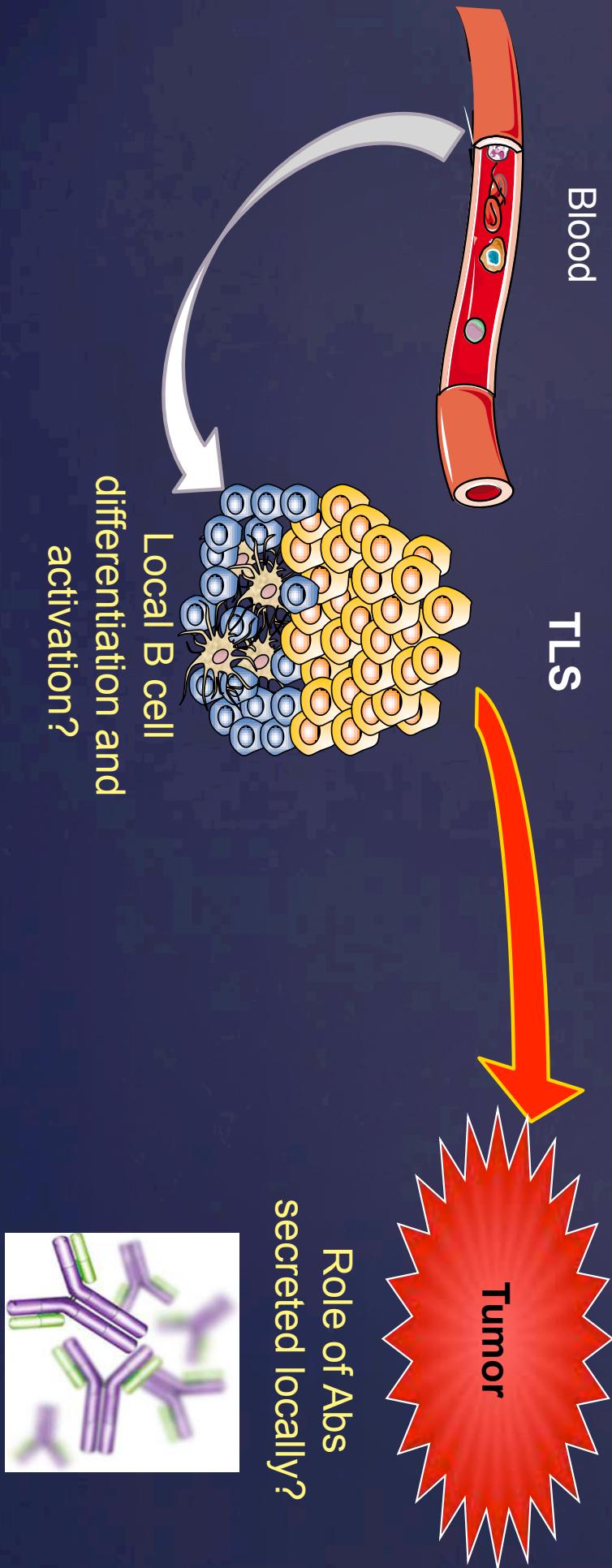
Immune signature
in tumor nests of
DC-Lamp^{High}
tumors

n = 13 tumors

Conclusion

- ✓ TLS in lung cancer
 - ✓ induced by the tumor microenvironment
 - ✓ same organization as canonical lymphoid organs
- ✓ TLS-DC can orchestrate the local immune contexture
 - ✓ effector-memory phenotype
 - ✓ Th1 polarization, activation & cytotoxic markers
 - ✓ Coordination of the local immune reaction
 - ✓ Imprinting of the behaviour of tumor-infiltrating CD8+ T cells
- ✓ An important benefit for lung cancer patients
 - ✓ from early to late-stage of disease
 - ✓ identification of patients with high risk of relapse

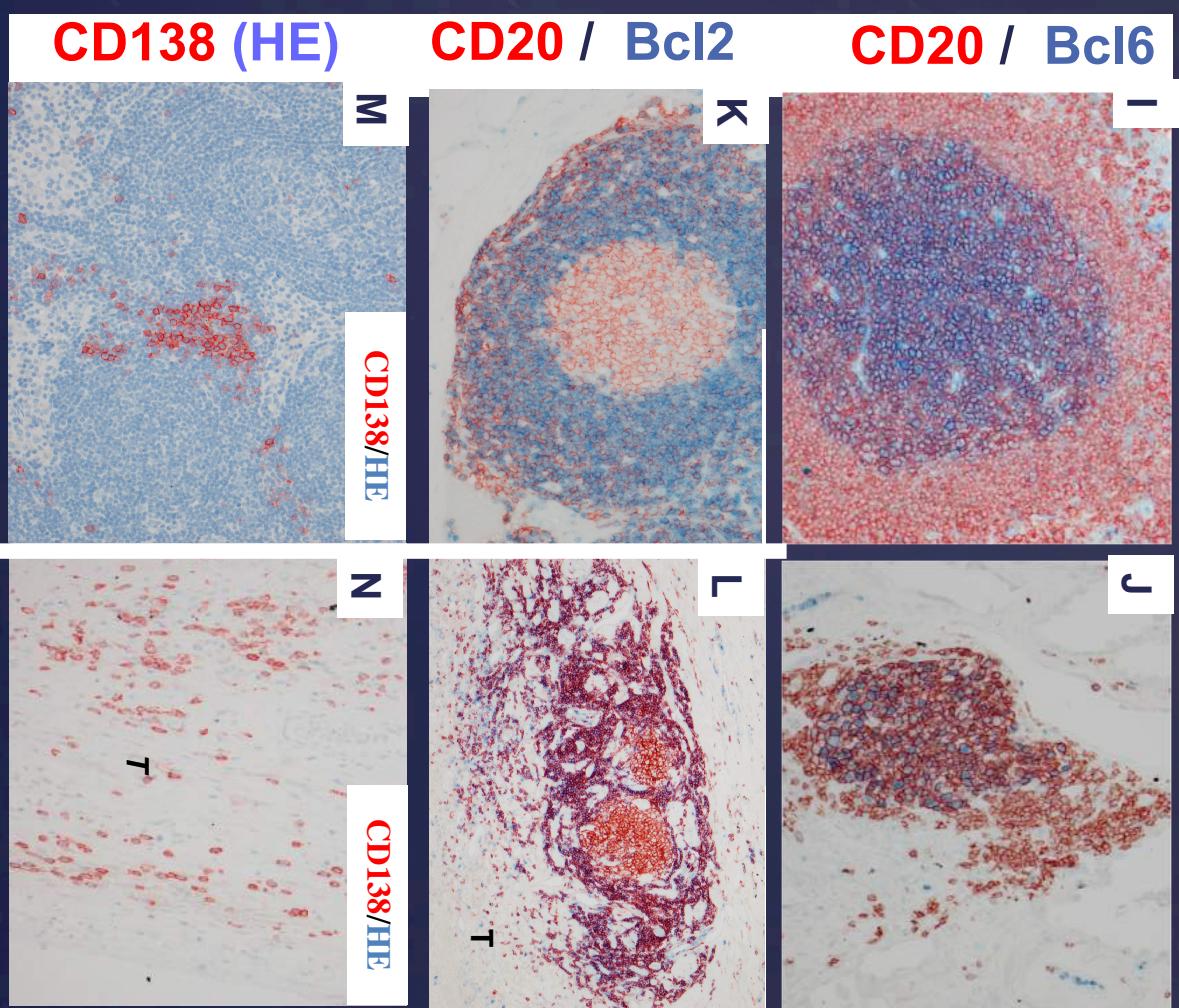
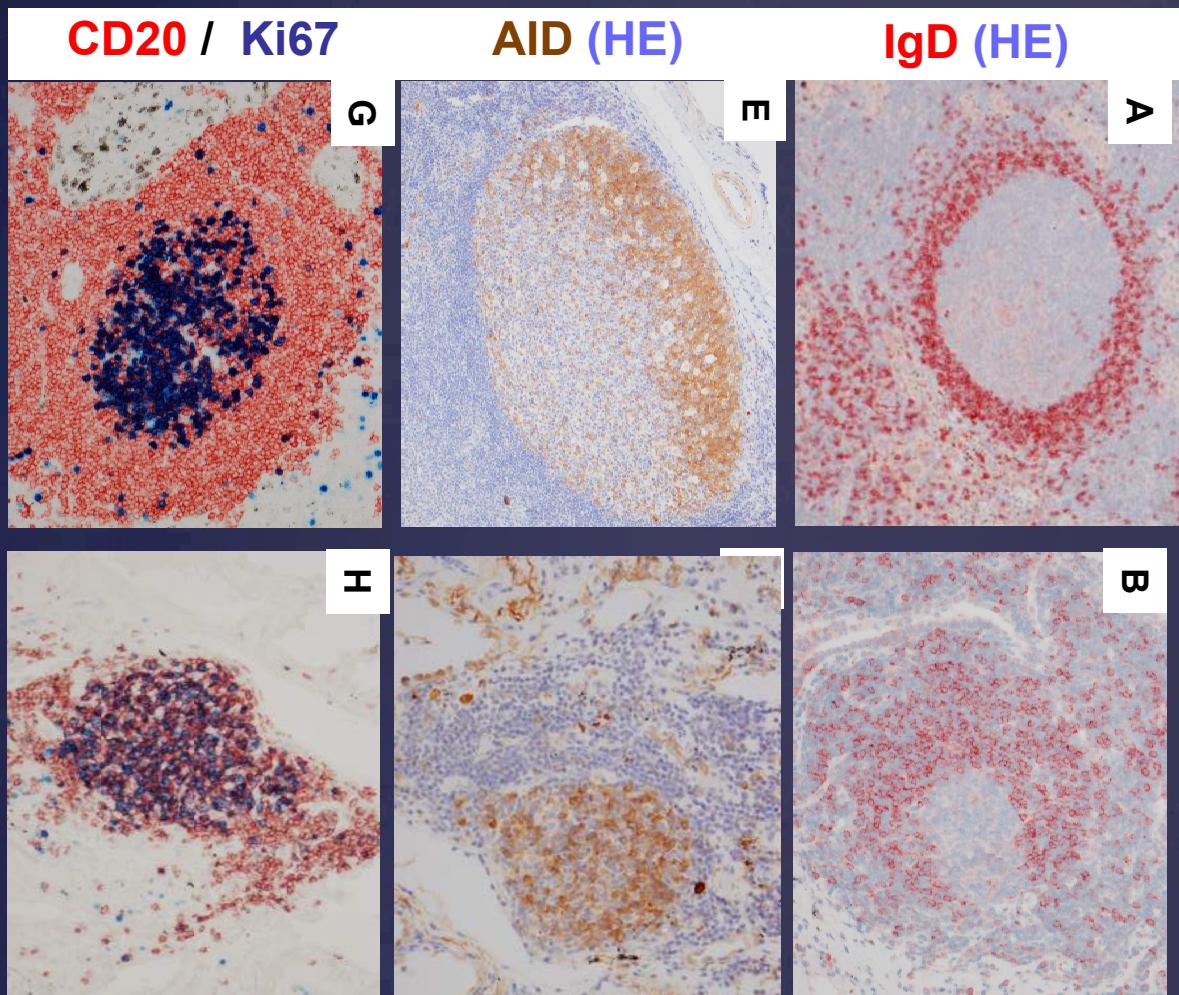
TLS is also composed of a B-cell rich area
Role of TIL-B cells? Are they effector cells (Abs) and/or APC?



Presence of fully reactive germinal centers in TLS as observed in canonical secondary lymphoid organ

Lymph node
TLS (NSCLC)

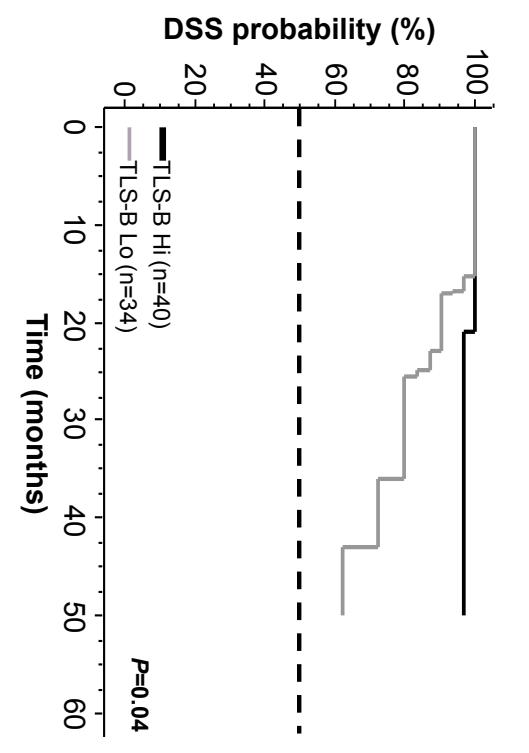
Lymph node
TLS (NSCLC)



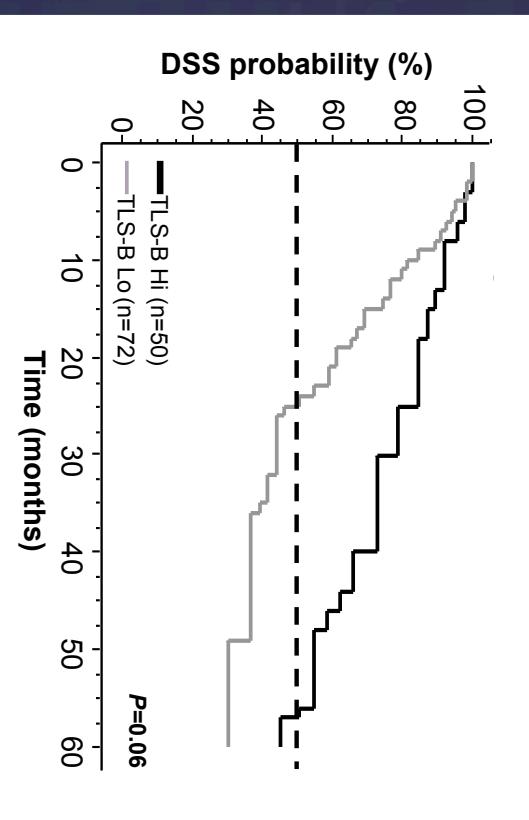
HE: hematoxylin; T: tumor nest
AID: class switch recombination + somatic hypermutation

High density of TLS-B cells is associated with a favorable clinical outcome

(74 early-stage NSCLC)

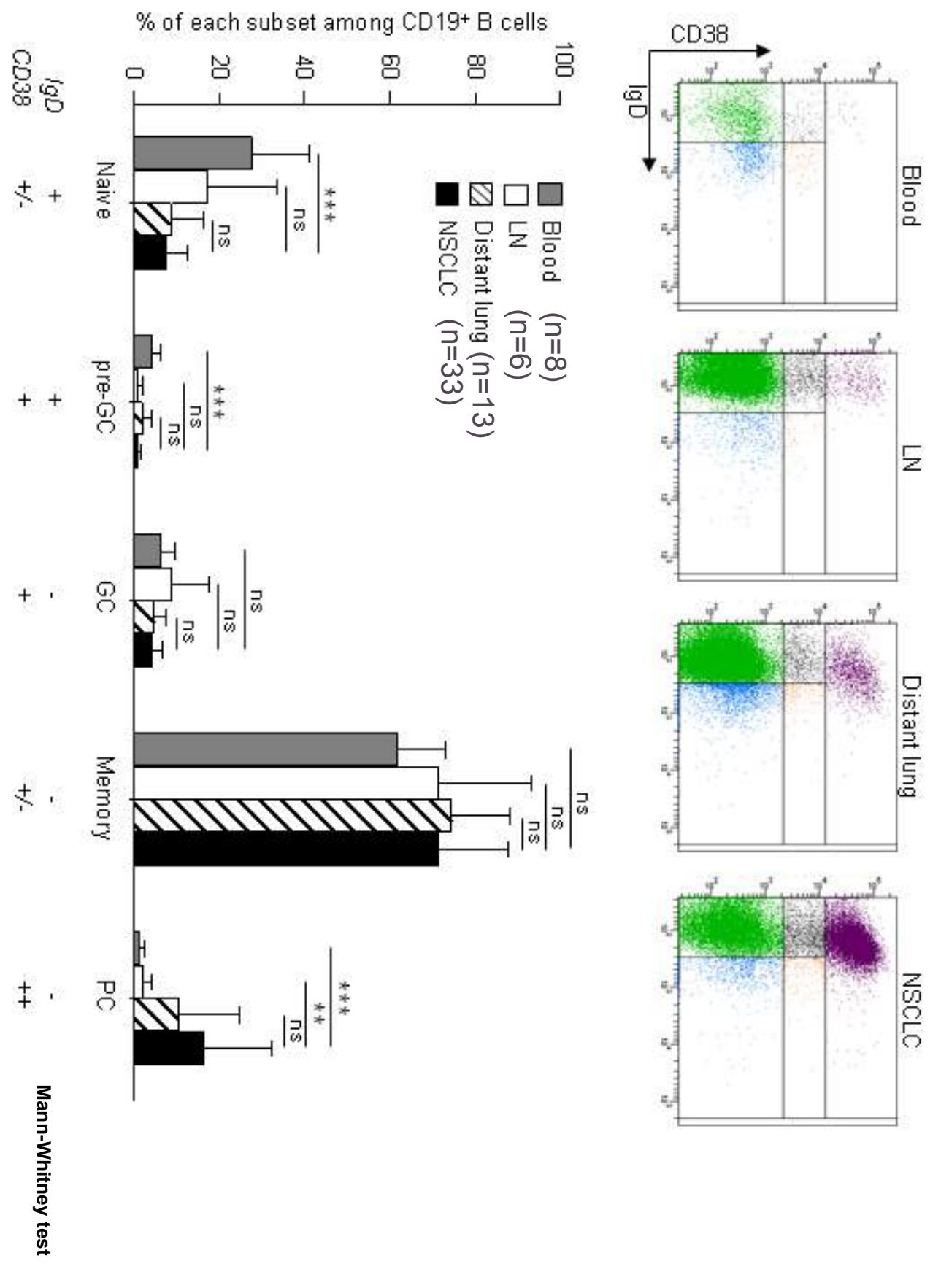


(122 advanced-stage NSCLC)

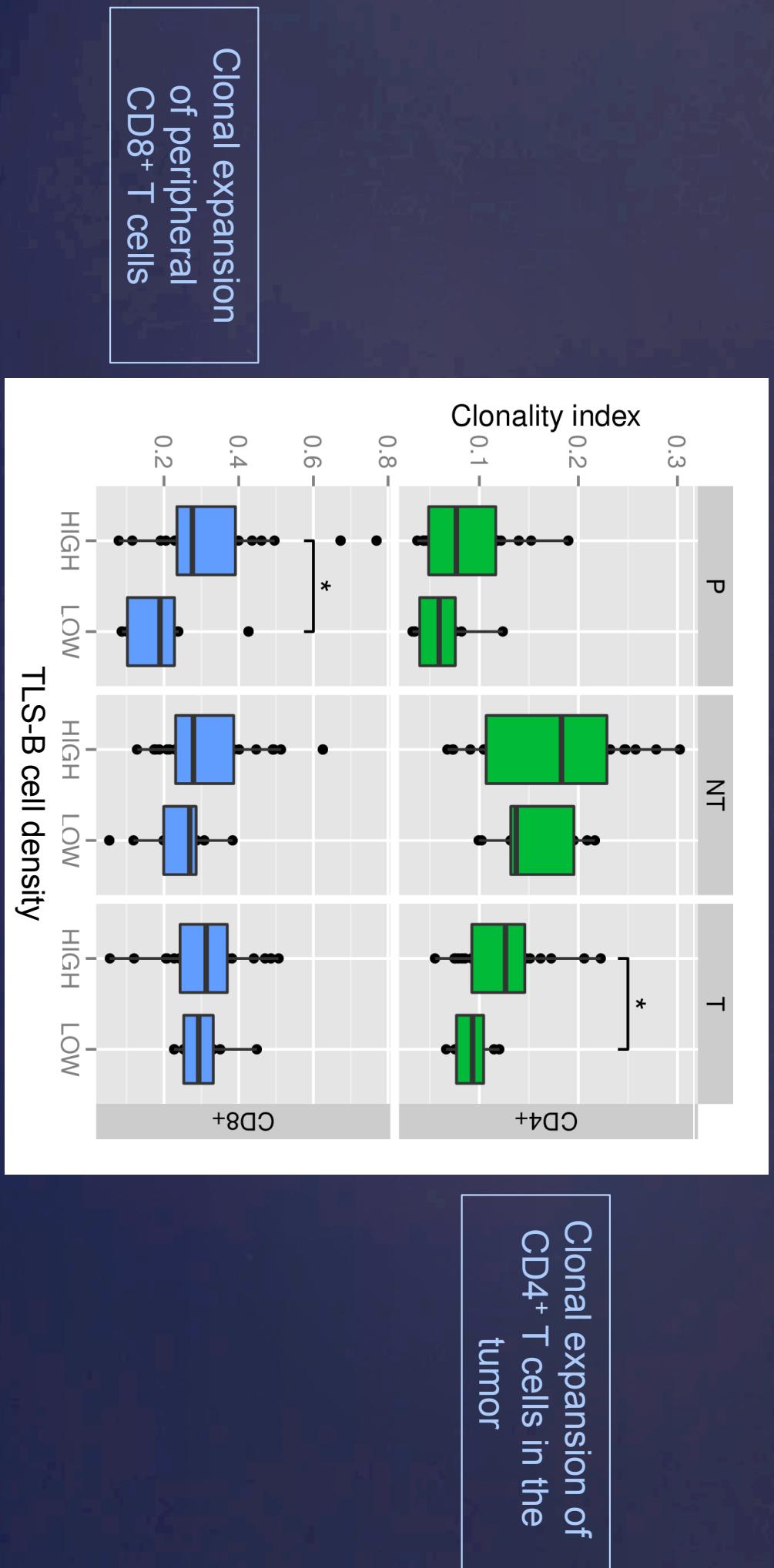


TNM stage and TLS-B are an independent prognostic factor for survival
(both cohorts of NSCLC patients)

Memory B cells and PC are the major B-cell subsets in NSCLC as opposed to LN and blood



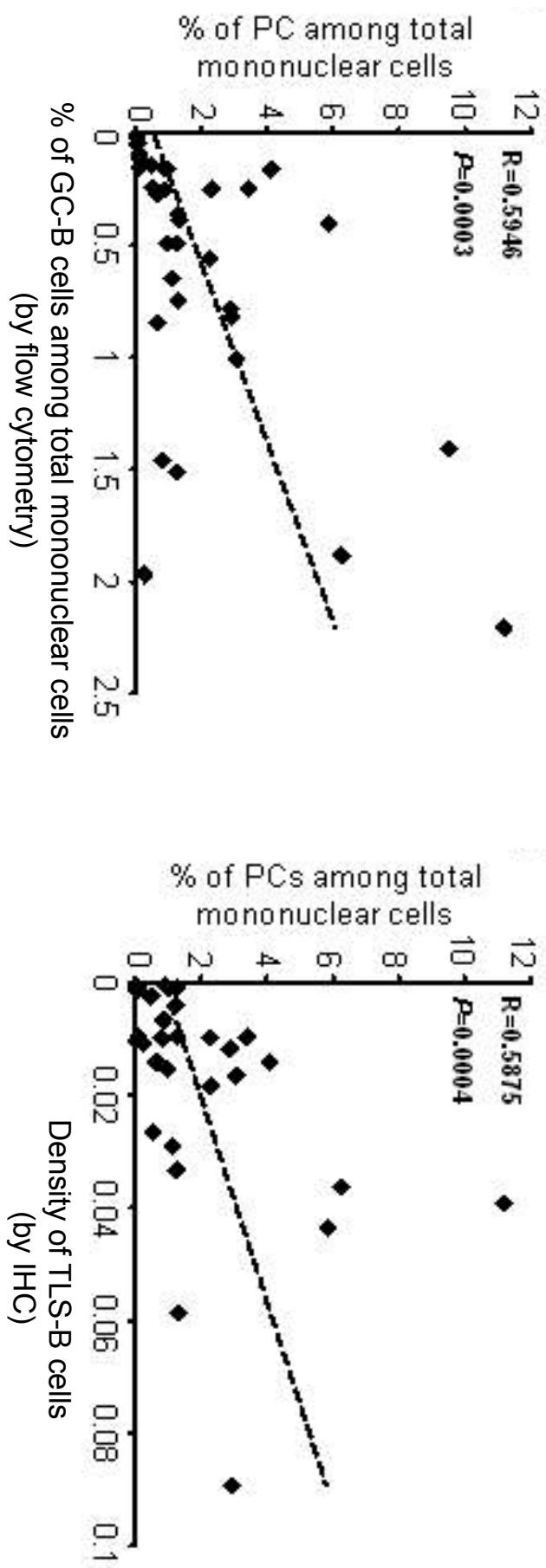
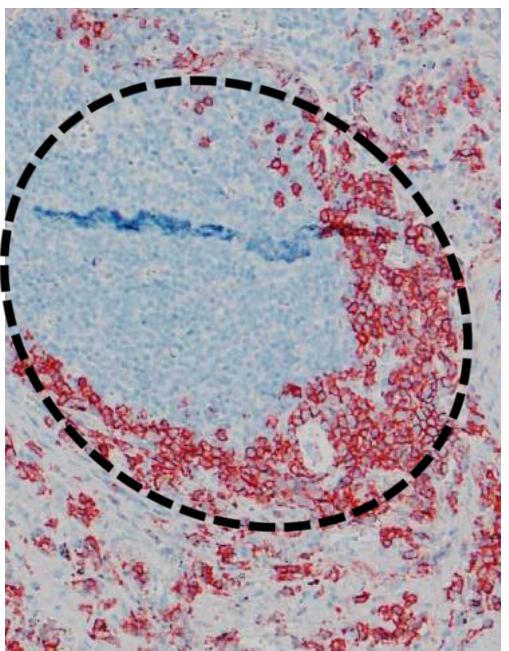
Higher clonality of peripheral CD8⁺ and intratumoral CD4⁺ T cells in TLS-B^{high} vs TLS-B^{low} tumors suggesting an APC function of B cells in TLS



Presence of newly differentiated plasma cells in TLS

n=32 tumors

TLS



Half of the tumors tested are infiltrated by B cells which secrete Abs specific to at least 1 tumor antigen

(collaboration : Dr. S. Gnjatic, Mount Sinai)

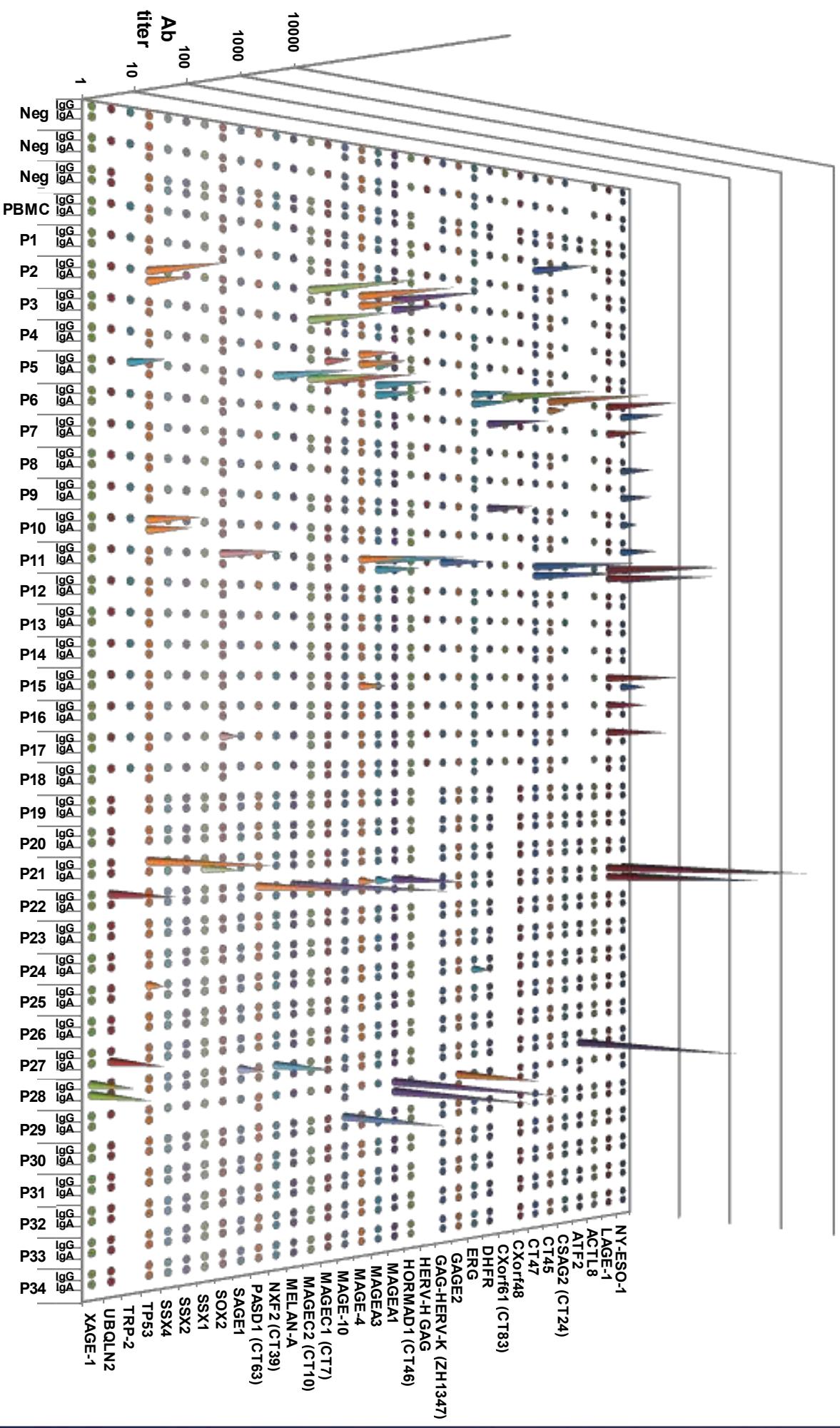
Culture of B cells sorted from tumors (n=34 patients)
IgG detection in cultured B-cell supernatant of TAAs (36 TAAs tested by ELISA)

<i>Ag/Patients</i>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	out of 15
LAGE-1				++	+		+++	++	+	++		++++			7	
CT10	+++	++		++											3	
P53	++						+				+++				3	
MAGEA1	++										++	++++			3	
MAGE-4	+++									+					2	
MAGEA3							+			++					2	
DHFR							+	+							2	
NY-ESO-1									+++						2	
NXF2 (CT39)							++						(+)		2	
CT47									+++						1	
CT45										++					1	
ACTL8										++					1	
CT7										++					1	
CXorf61 (CT83)										++					1	
SOX2										++					1	
ERG										+					1	
ZH1347										+					1	
TRP-2										+					1	
GAGE2											+				1	
MELAN-A											++++				1	
XAGE-1												(+)			1	
PASD1 (CT63)											++(+)				1	
SAGE1											(+)				1	

IgG and IgA secreted by intra-tumoral B cells recognize TAA

Negative controls

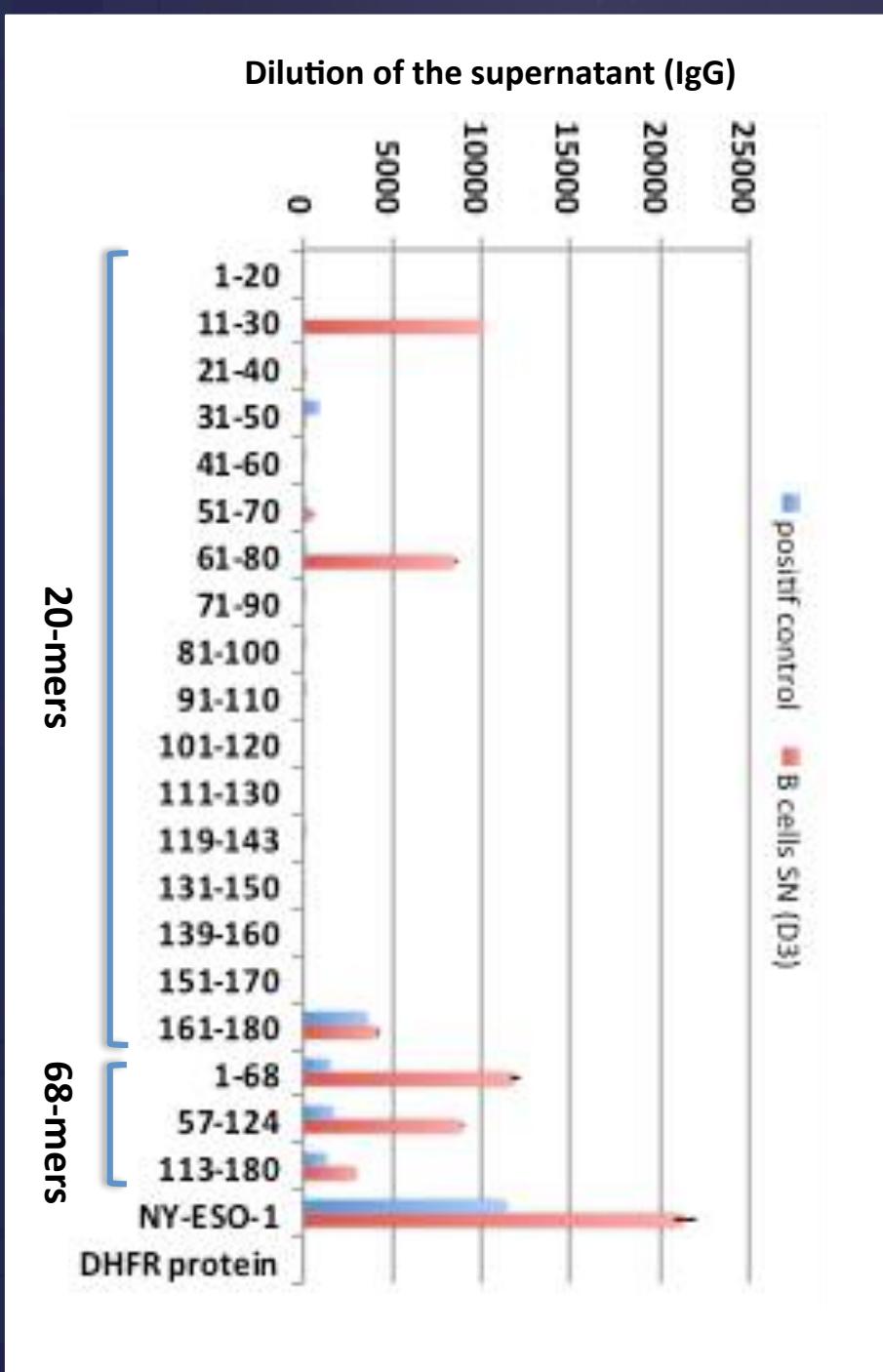
Supernatants of B-cell cultures from NSCLC patients (tested for IgG and IgA)



Polyclonal IgG response to NY-ESO-1 which targets 3 main regions of the protein

(collaboration : Dr. S. Gnjatic, USA)

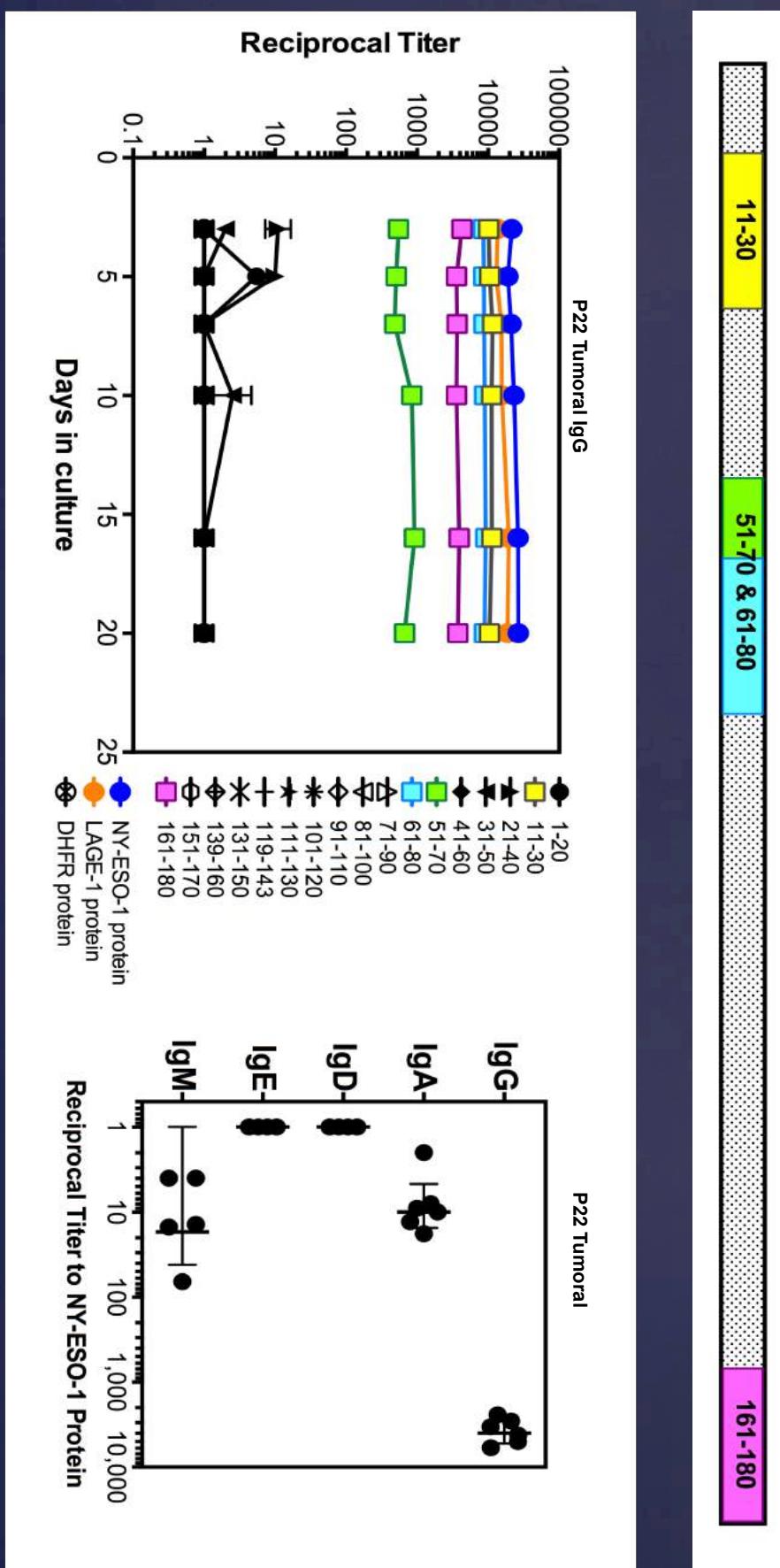
Epitope mapping using overlapping 20-mers, 68-mers and full length NY-ESO-1 on patient P22



- Same results for p53 in P21 (polyclonal response)

Polyclonal IgG response to NY-ESO-1 which targets 3 main regions of the protein

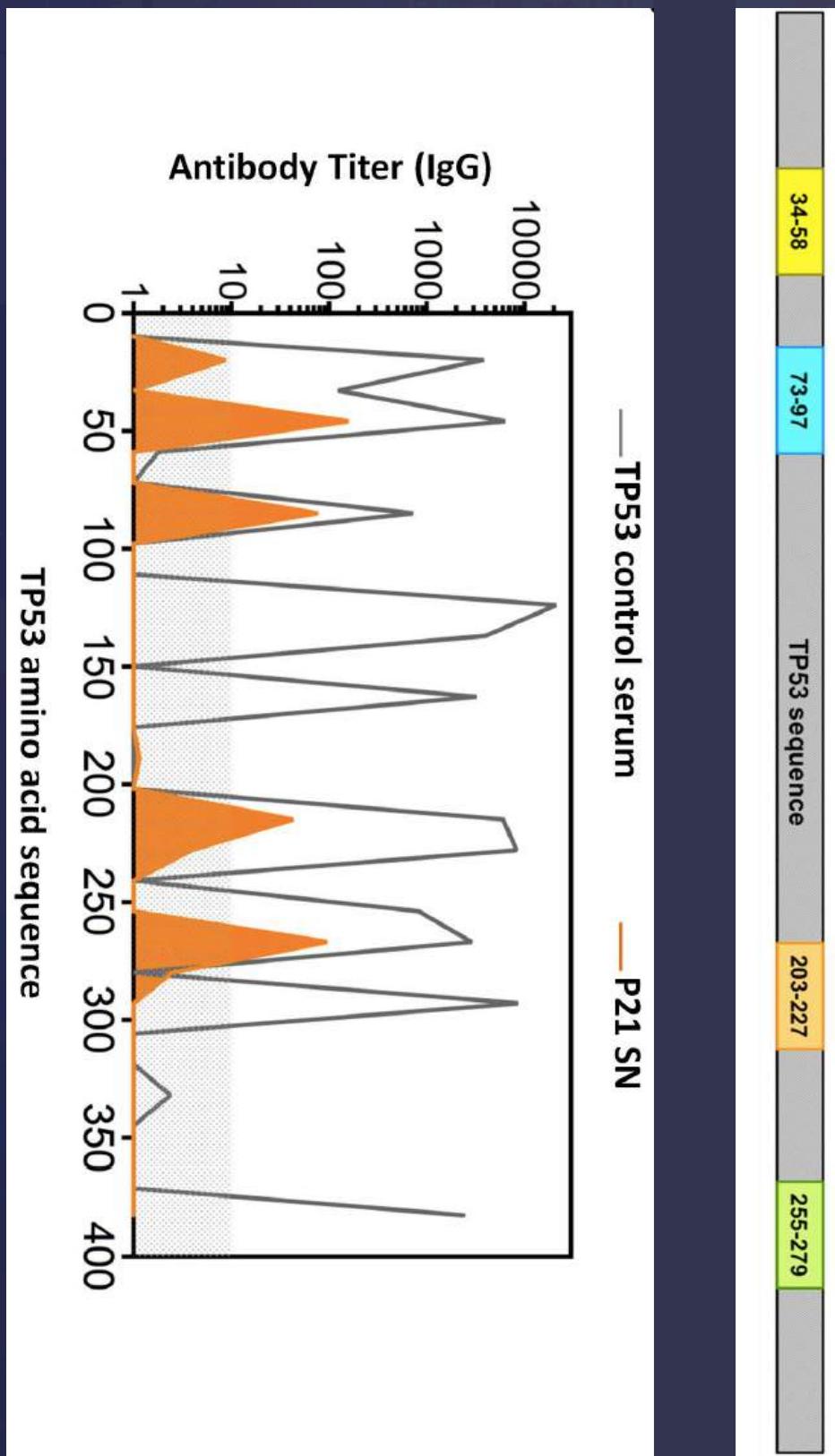
(collaboration : Dr. S. Gnjatic, USA)



Polyclonal IgG response to p53

which targets 4 main regions of the protein

(collaboration : Dr. S. Gnjatic, USA)



Conclusion

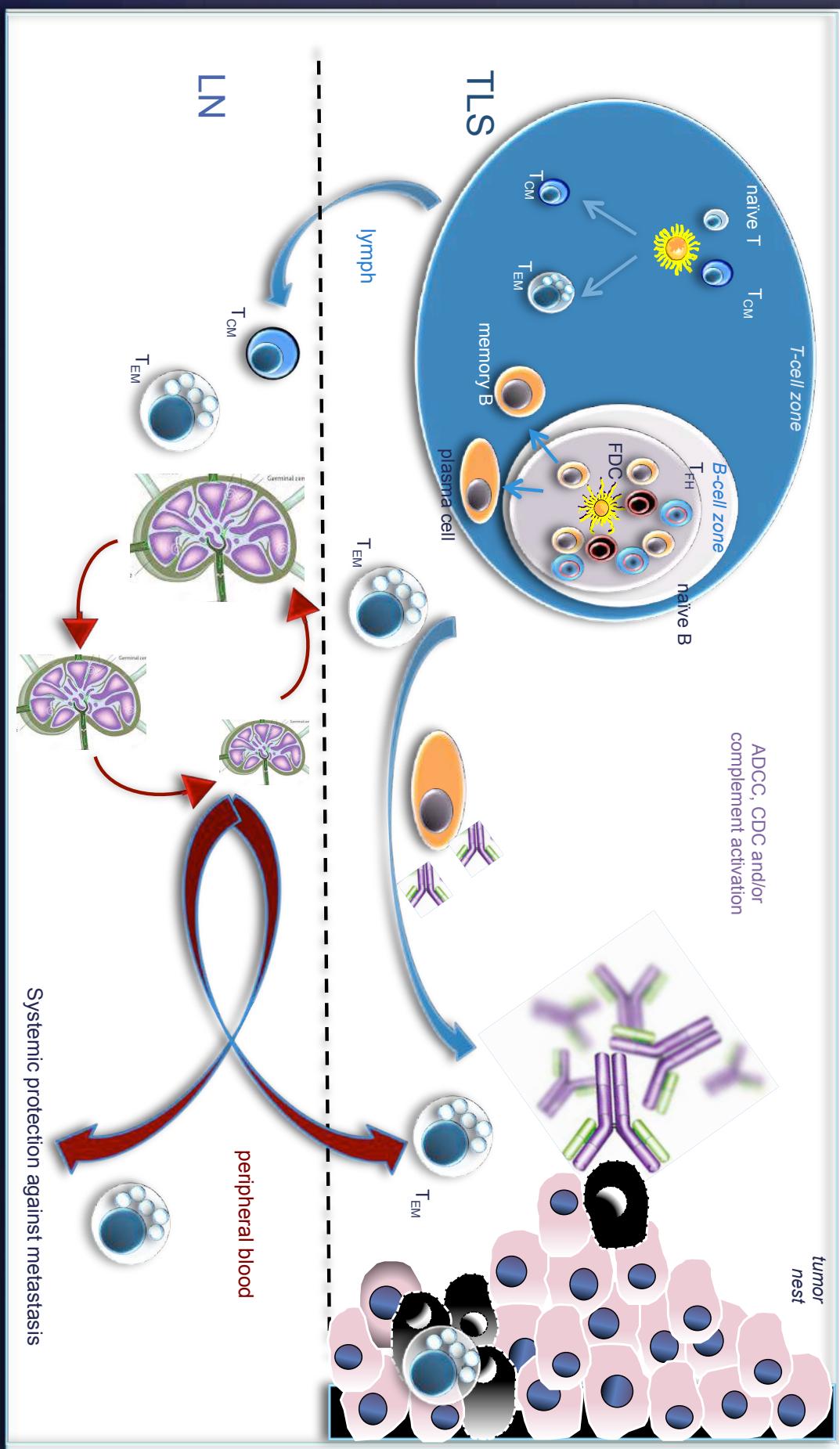
- ✓ TLS-B cells display the same organization as in SLO
- ✓ Density of TLS-B cells is highly predictive of survival
 - ✓ To allow the identification of patients with high risk of relapse
- ✓ B cell follicle is correlated with the development of humoral response against tumor-associated antigens
- ✓ Clonal expansion of peripheral CD8⁺ and intratumoral CD4⁺ T cells is associated with increased TLS-B cell density

TLS as a powerful biomarker in human cancers

	Criteria	Cancer type	Stages of the disease	No. of patients	TLS detection by IHC	TLS detection by gene expression	Prognostic value
		Breast carcinoma	I to III I to III I to III	146 146 794	PNAAd DC-Lamp	- - T_{FH} , Th1, CXCL13	Positive Positive Positive
		Breast carcinoma (triple negative)	I to III	769	HEs (+TIL)	-	Positive
		Colorectal cancer	I to IV ND I to IV II III	350 25 40 185 166	HEs DC-Lamp CD3, CD83 CD3 CD3	- - -	Positive Positive Positive No value Positive
Naïve cancer patients	Primary tumors	Gastric cancer	0 to IV-A I to IV	21 125	-	12-chemokine genes CXCL13 and CD20	Positive Positive
		Gastric cancer	all without chemo I to III	82 365	CD20	both Th1 and B	Positive Positive
	NSCLC	NSCLC	III with neo-adj. chemo III with neo-adj. chemo III with neo-adj. chemo	74 362 122	DC-Lamp DC-Lamp DC-Lamp DC-Lamp, CD20 CD20	- - -	Positive Positive Positive Positive
		Melanoma	I-A to III-A IV	82 21	DC-Lamp	-	Positive Positive
	Merkel cell carcinoma	Merkel cell carcinoma	I to IV	21	CD4, CD8, CD20, S100	-	Positive
		Oral SCC	all	80	CD3, CD20, CD21, BCL6, PNAAd	-	Positive
	Pancreatic cancer	Pancreatic cancer	all	308+226	HE	-	Positive
		RCC	all	135	DC-Lamp	-	Positive
	Metastatic tumors	Colorectal cancer (liver)	all	14+51	CD20	-	Positive
		Colorectal cancer (lung)	ND	140	DC-Lamp	-	Positive
Vaccinated cancer patients	HPV DNA vaccine	CIN	CIN2/3	12	CD3, CD20, PNAAd	-	TLS neogenesis
	G-VAX	PDAC	ND	54	CD3, CD20, CD21, CD68, CD83, CD163, DC-Lamp, CCL21, FoxP3, Podoplanin	-	TLS neogenesis

Model:

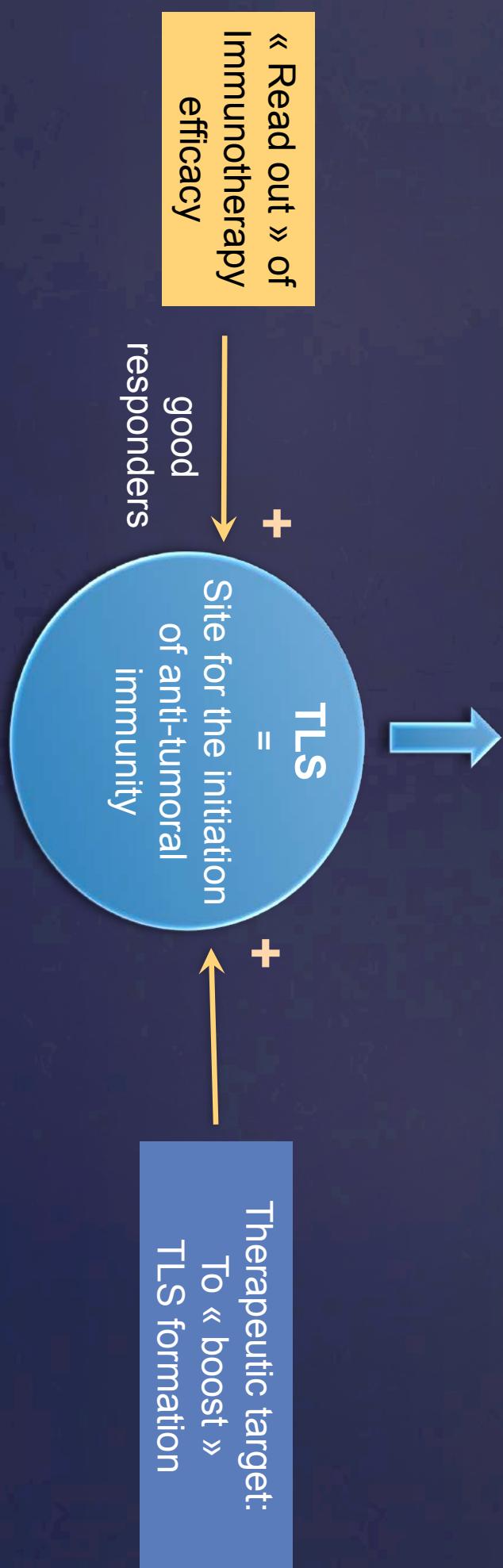
role of TLS in the initiation of protective immune responses against tumor and metastasis



=> Efficient immune response is shaped in tumor-associated TLS

TLS and Immunotherapy

To identify
new therapeutic
targets in NSCLC



Many thanks to:

- UMR S1138 INSERM (Paris)*

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