

Nuevas dianas biológicas en el trasplante renal

Oriol Bestard

Servicio de Nefrología, Dialisis y Trasplante Renal
Hospital Universitari Vall d'Hebron
Barcelona

MAT-ES-2401498-1.0-05/2024

sanofi

Disclosures

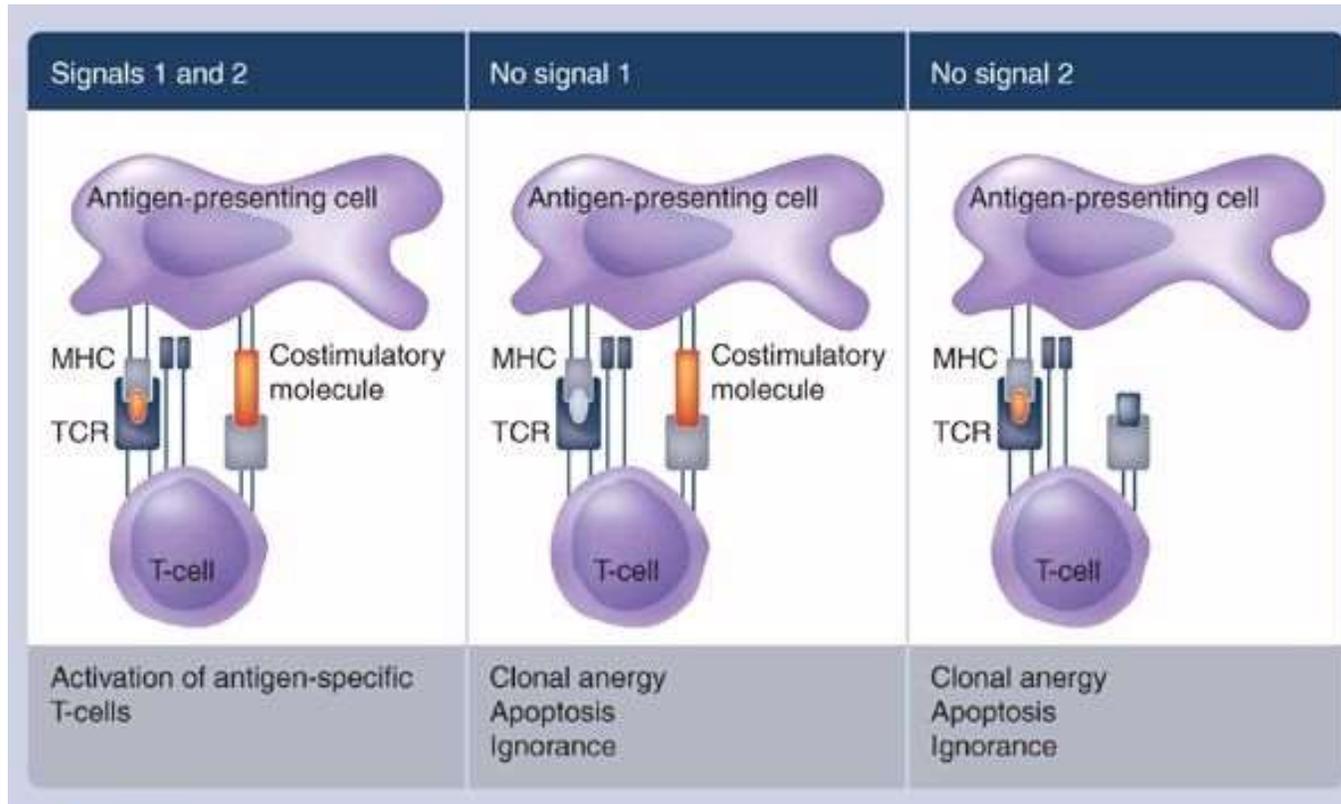
- Fees for this presentation and travel grants
- Research grant from Sanofi
- Participated in Advisory boards from Sanofi

Outline

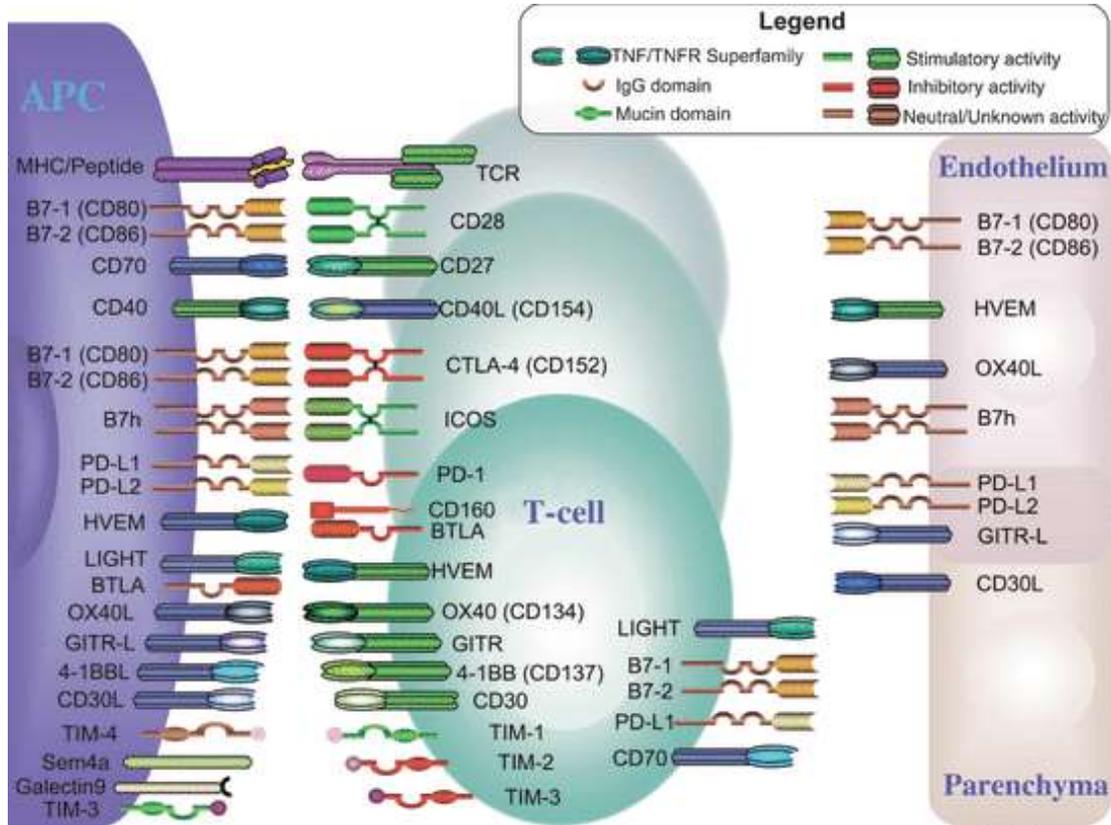
- **New costimulation blockade-targeting Immunosuppressants**
 - CTLA4Ig (abatacept / belatacept)
 - Anti-CD154 (CD40L)
 - Anti-CD28

- **New selective anti-Plasma Cell desensitization therapy**
 - Anti-C1s
 - Anti-CD38

T-cell activation signaling



Costimulation pathways: New known interactions



Negative signals:

- CTLA4-CD80/CD86 (B7)
- PD1-PD-L1/PD-L2
- BTLA/LIGHT-HVEM
- B7-H4



T-cell inhibition

Positive signals:

- CD28-CD80/86 (B7)
- CD40-CD154 (CD40L)
- ICOS-B7h (ICOSL)
- OX40-OX40L
- CD134-CD134L
- CD27-CD70
- CD137-CD137L



T-cell activation

Aims, Rationale and Agents targeting costimulatory pathways

Aims of costimulatory targeting:

- Antagonize positive costimulatory pathways
- Agonize negative costimulatory pathways
- Both ?

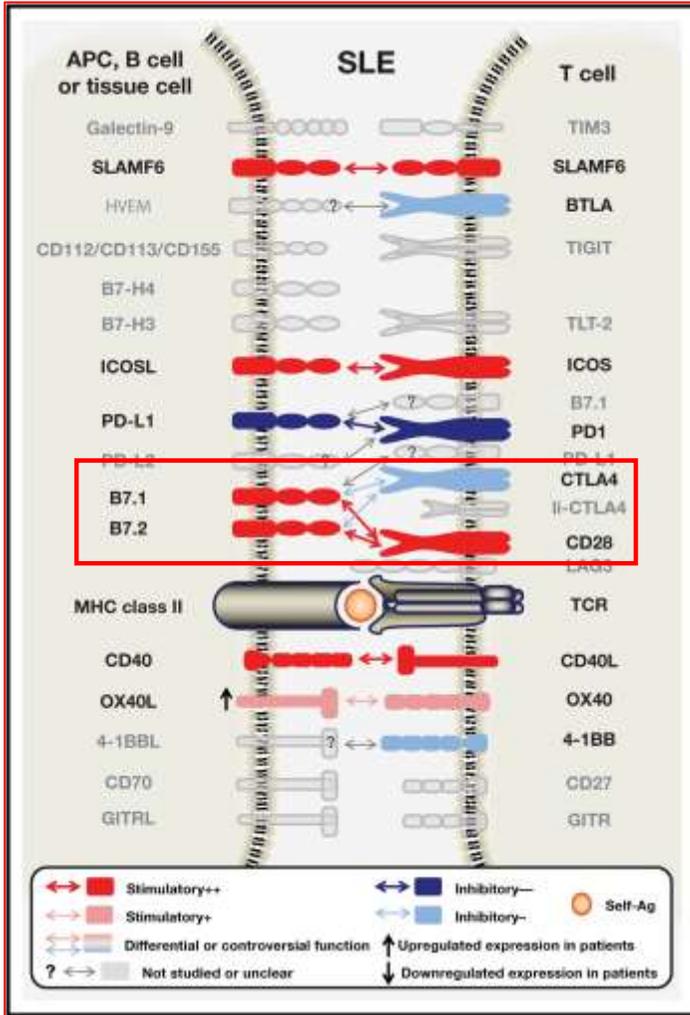
Agents

- Antibodies
- Fusion proteins
- siRNA ?

Rationale to select a costimulatory target

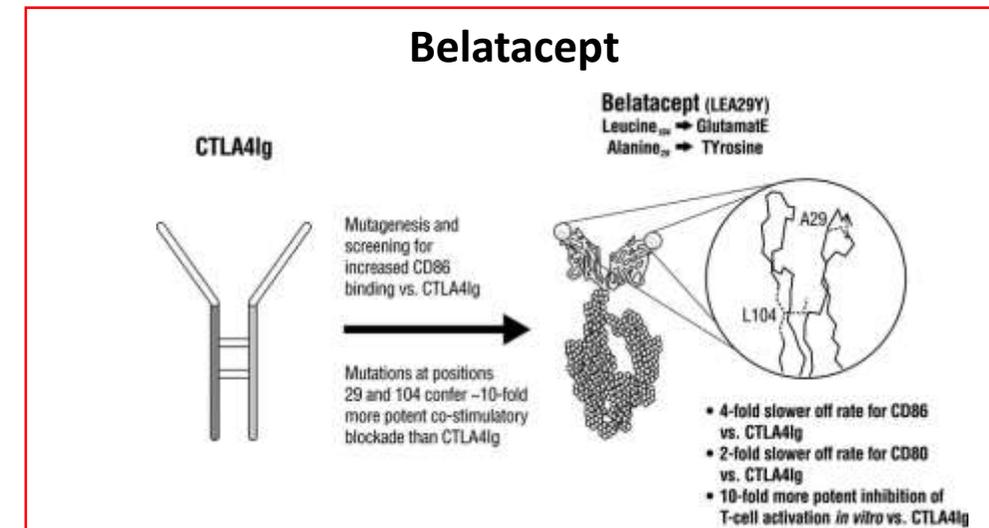
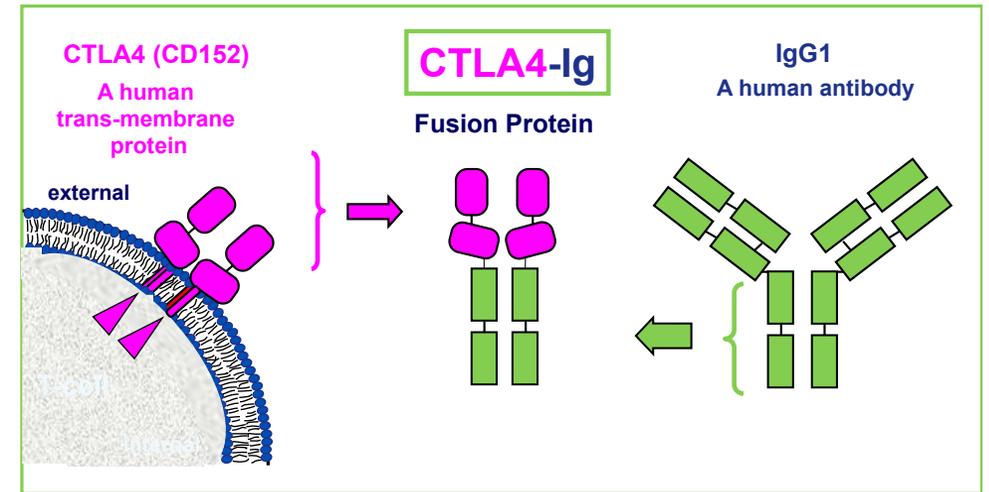
- Hierarchy?
- Timing?
- Combined blockades? (CD40 and CD28?)
 - Redundancies/Synergisms?
- Concomitant therapy (immunosuppressants, cell therapies?)
- Mechanisms abrogating “tolerance induction” (CNIs, TLR engagement?)
- **Safety**

I. The CD28/CTLA4 and B7 (CD80/CD86). A story of success



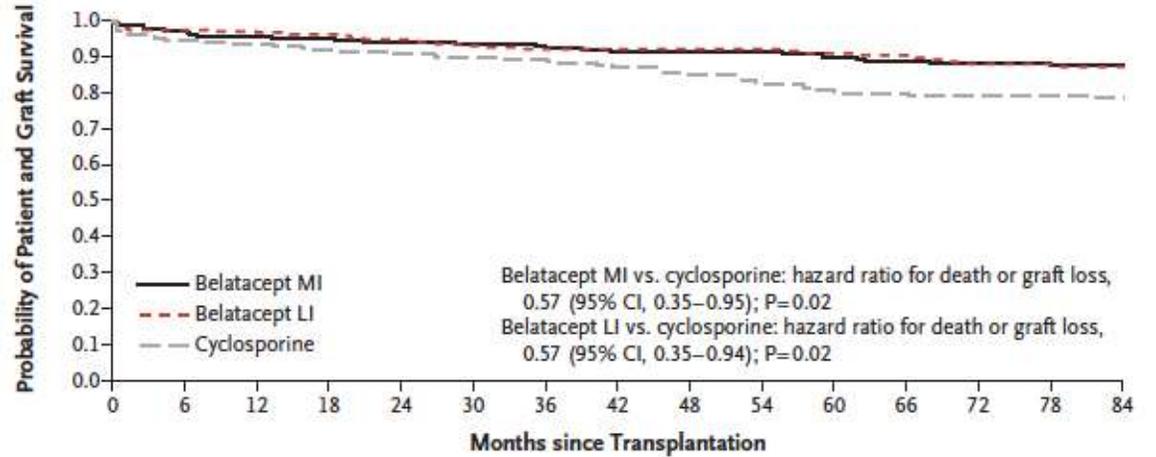
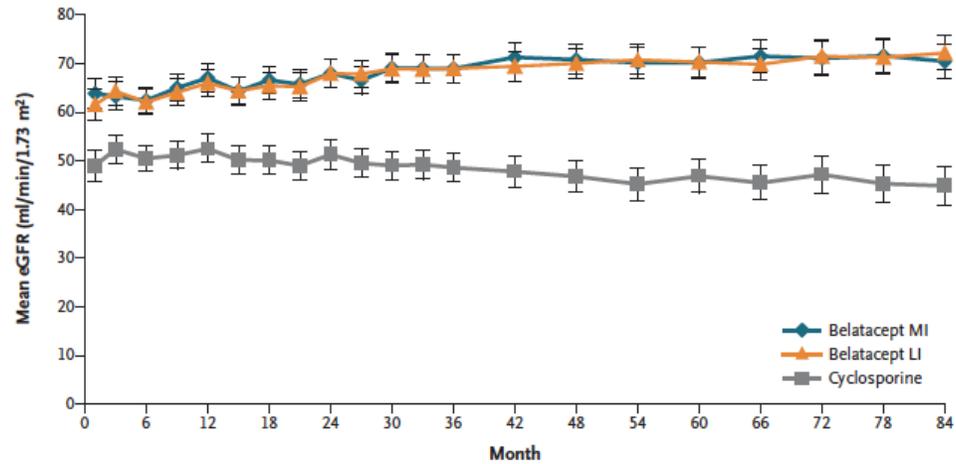
CD28-B7 high avidity → POS

CTLA4-B7 low avidity → NEG



Belatacept and long-term outcomes

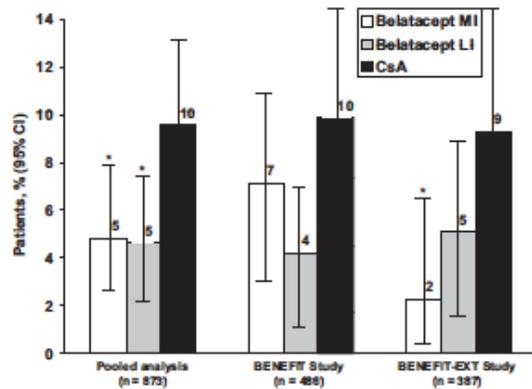
Long-term Graft and Patient survival



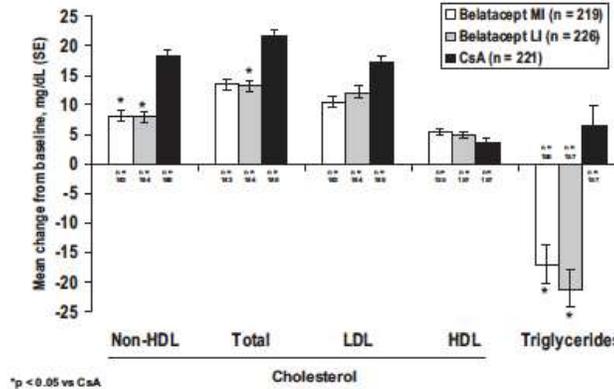
Vincenti F et al N Eng J Med 2016

Improved Cardiovascular profile

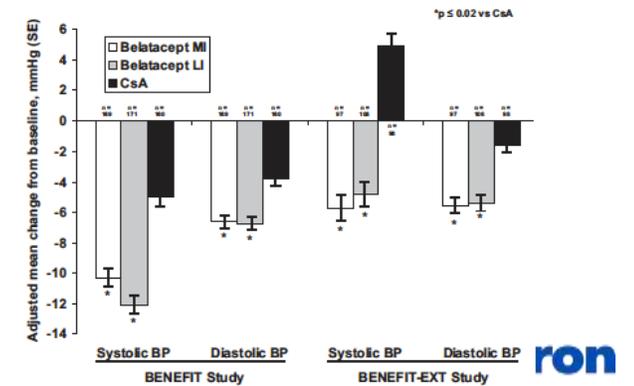
NODAT



DISLIPIDEMIA



BLOOD PRESSURE



Vanrenterghem Y et al Transplant 2011

But...higher rates of acute TCMR (*de novo*) and production shortage

De novo BPAR rates

Belatacept MI	Belatacept LI	CsA
n = 219	n = 226	n = 221

Baseline → Month 24

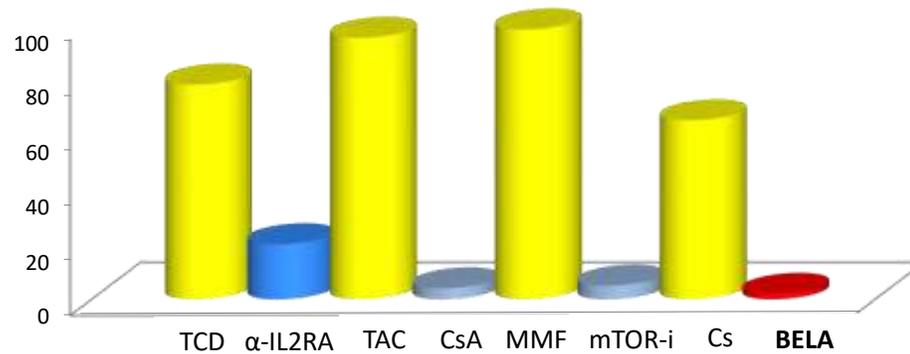
Number of cases,
Month 24 → Month 36

Baseline → Month 36

24

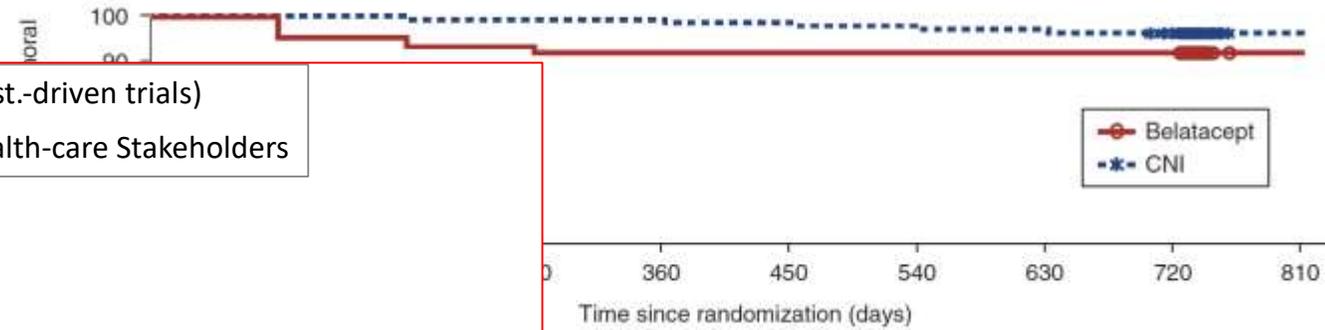
24

Very Low use (Invest.-driven trials)
No reimbursement by health-care Stakeholders



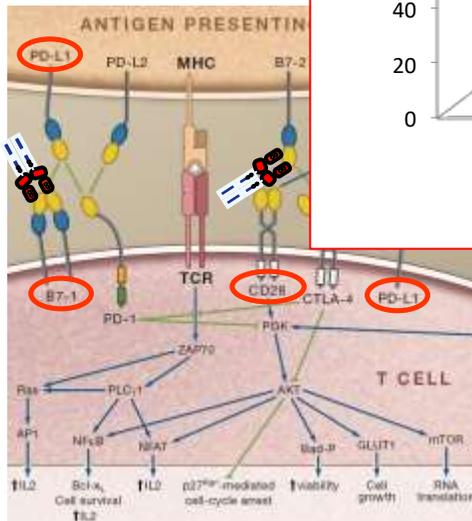
OPTN/SRTR Annual Report 2021

Conversion BPAR rates



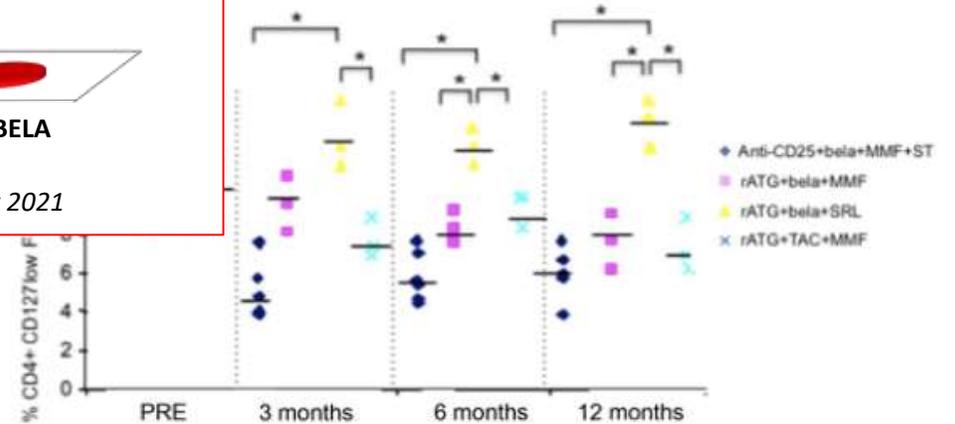
Budde K et al J Am Soc Nephrol 2021

Redundant costimulatory



Sharpe et al Cell 2009
Extracted by T. Wekerle

Down-regulation of Treg function



Bluestone J Am J Transplant 2011
Cassis L et al Transpl Int. 2011


belatacept

CTLA4Ig; alternative to belatacept ?

ESOT | Transplant International

ORIGINAL RESEARCH
 Published: 29 July 2022
 DOI: 10.1093/ajt/15.7.1128

Conversion From Intravenous In-Hospital Belatacept Injection to Subcutaneous Abatacept Injection in Kidney Transplant Recipients During the First COVID-19 Stay-at-Home Order in France

Dominique Bertrand^{1,†}, Mélanie Brunel^{2†}, Ludivine Lebourg¹, Anne Scemla², Mathilde Lemoine¹, Lucile Amrouche², Charlotte Laurent¹, Christophe Legendre², Dominique Guerrot^{1,3}, Dany Anglicheau² and Rebecca Sberro-Soussan²

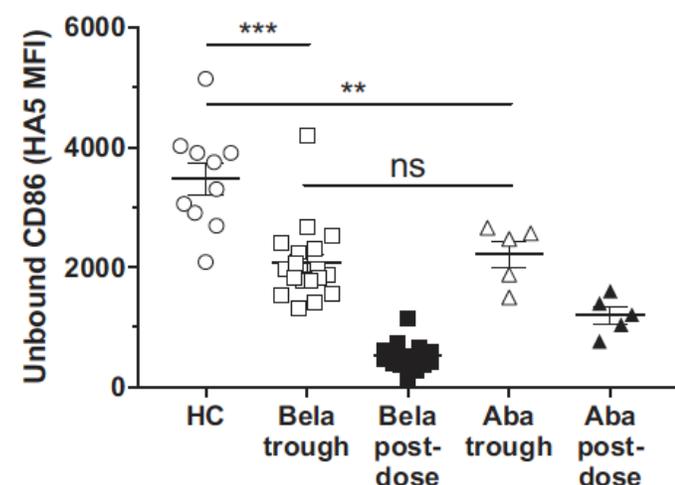
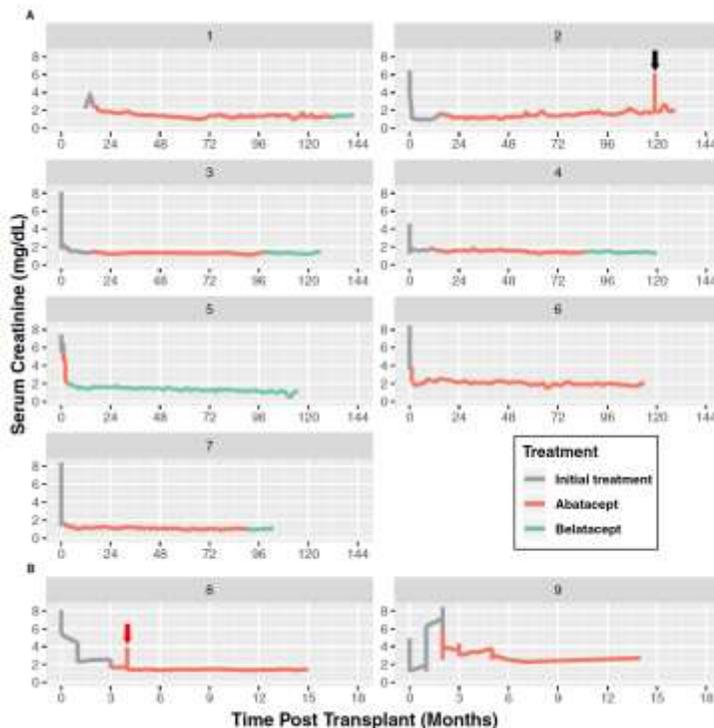
Received: 9 October 2018 | Revised: 23 January 2019 | Accepted: 11 February 2019
 DOI: 10.1111/ajt.15319

BRIEF COMMUNICATION

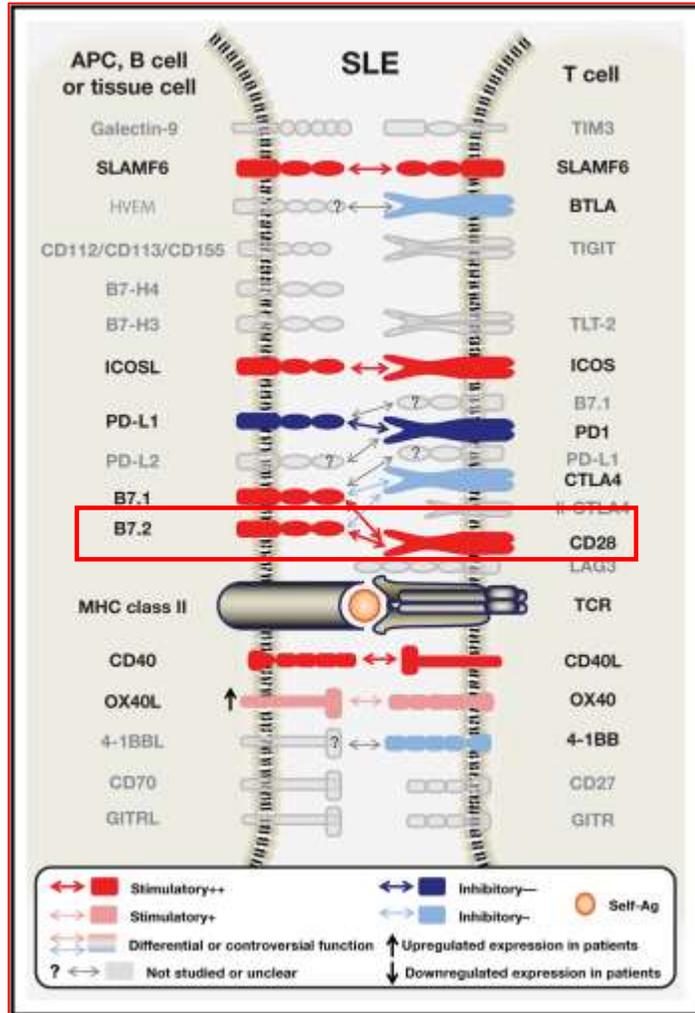
AJT

Abatacept as rescue immunosuppression after calcineurin inhibitor treatment failure in renal transplantation

Idelberto Raul Badell¹ | Geeta M. Karadkhele¹ | Payaswini Vasanth¹ | Alton Brad Farris III² | Jennifer M. Robertson¹ | Christian P. Larsen¹



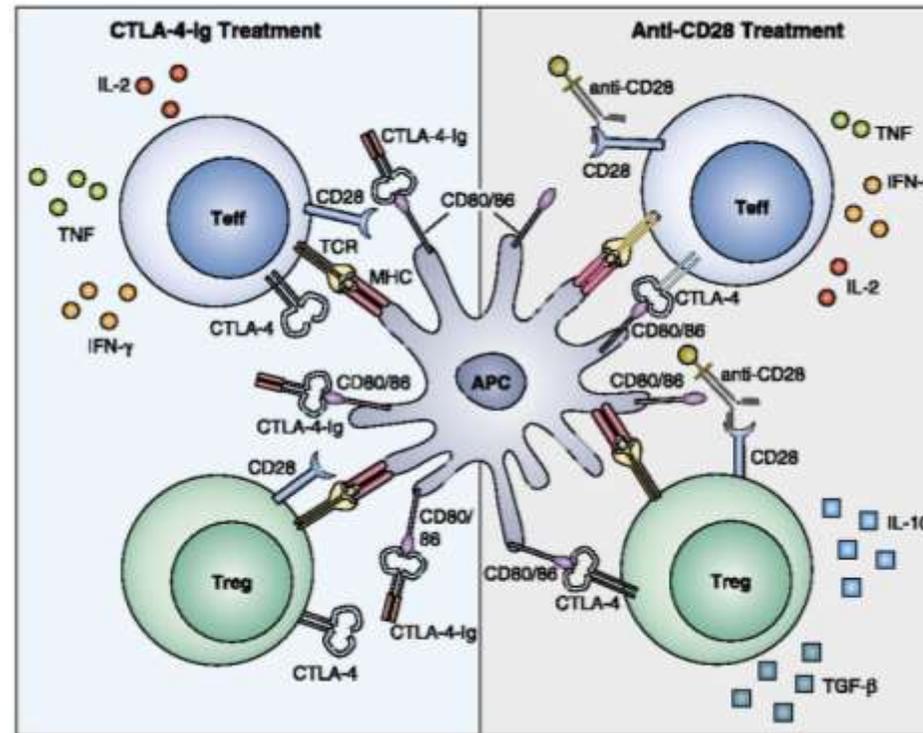
II. Alternative costimulatory signals promoting higher regulation. The CD28/B7 axis



Zhang and Vignali. *Immunity* 2016

Selective blockade of the costimulatory CD28 may overcome CTLA4Ig/B7

- Robust T-cell inhibition (proliferation and cytokine profile)
- Preserves Treg function by maintaining inhibitory signal of intact CTLA-4 ligation



Adams AB et al *J Immunol.* 2016

II. Alternative costimulatory signals. The CD28/B7 axis

The NEW ENGLAND JOURNAL of MEDICINE

BRIEF REPORT

Cytokine Storm in a Phase 1 Trial of the Anti-CD28 Monoclonal Antibody TGN1412

Ganesh Suntharalingam, F.R.C.A., Meghan R. Perry, M.R.C.P.,
Stephen Ward, F.R.C.A., Stephen J. Brett, M.D., Andrew Castello-Cortes, F.R.C.A.,
Michael D. Brunner, F.R.C.A., and Nicki Panoskaltsis, M.D., Ph.D.

Humanized superagonist anti-CD28 mAb that stimulated and expanded T cells independently of TCR ligation

- **Systemic inflammatory response** characterized by a rapid induction of proinflammatory cytokines

Monovalent anti-human CD28 domain antibody antagonist

- Preclinical efficacy and immunological safety
- Safety in a Phase I clinical trial
- On-going Phase II RCT in autoimmunity (SLE, Sjögren)

Suchard S et al J Immunol 2013
Shin R et al J Clin Pharmacol 2017

Selective antagonist anti-CD28 monovalent Fab' PEG antibody (VEL-101)

- Preclinical efficacy and immunological safety
- Safety in a Phase I clinical trial
- On-going Phase I/II RCT (FIRST study; NCT04837092)

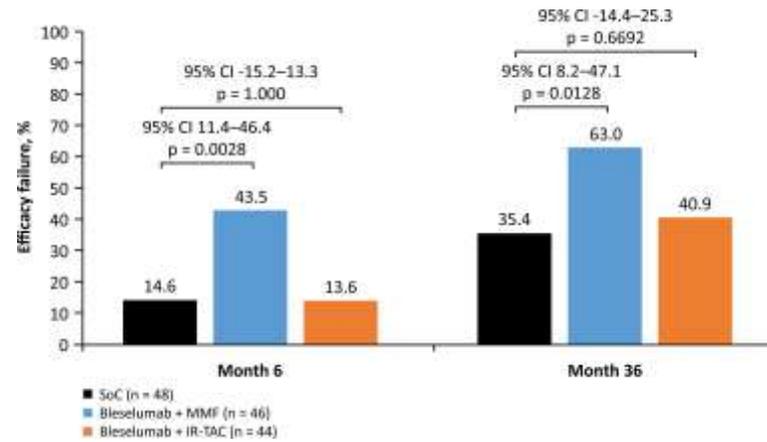
Poirier et al. Am J Transplant 2012

III. Alternative costimulatory signals. The CD40/CD40L axis

Anti-CD40 mAb

- **Success** in Experimental transplantation (NHP),
- **Failed** experience targeting CD40 with anti-CD40 mAbs

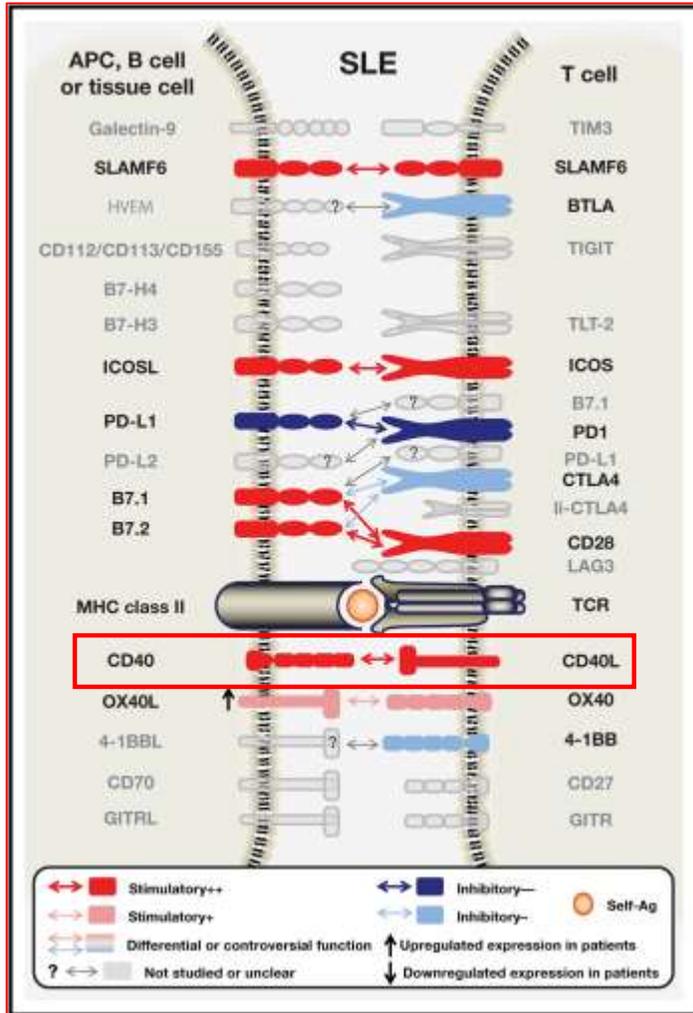
I. Non-depleting IgG₄ mAb KPL-404 (Bieselumab)



Harland et al. Am J Transplant, 2019

II. Non-depleting IgG1 mAb N297A mutation (iscalimab)

Trial halted → Efficacy failure due to high rejection rates



Suboptimal alloimmune control of CD40 blockade due to CD11b / CD40L activation

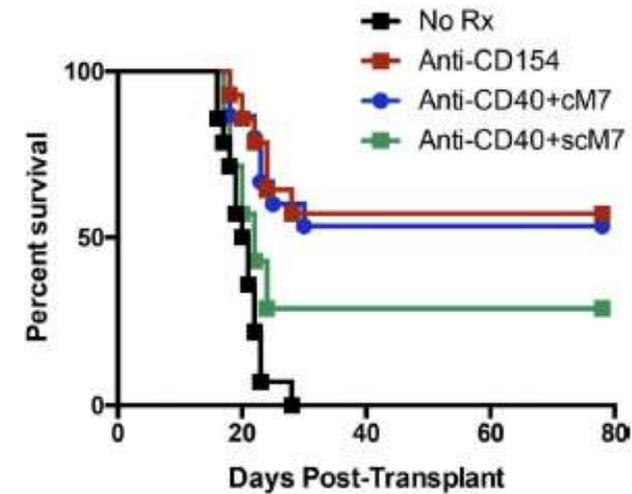
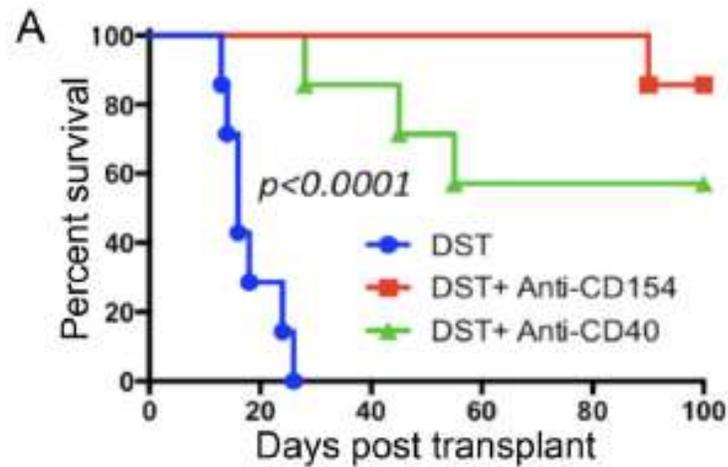
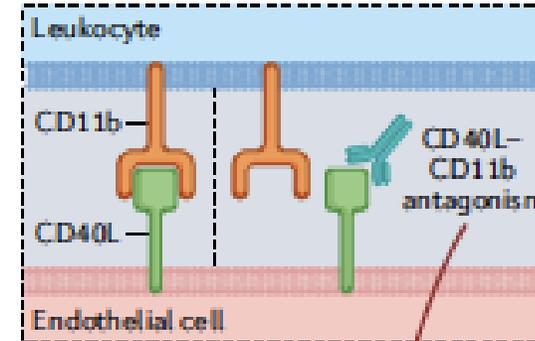
DOI 10.1111/ajt.15635

BRIEF COMMUNICATION

AJT

CD11b is a novel alternate receptor for CD154 during alloimmunity

Danya Liu | Mandy L. Ford



CD40 blockade in autoimmunity. Importance of the biological hierarchy of the immune response

ARTICLES | VOLUME 2, ISSUE 3, E142-E152, MARCH 2020

[Download Full Issue](#)

Assessment of the anti-CD40 antibody iscalimab in patients with primary Sjögren's syndrome: a multicentre, randomised, double-blind, placebo-controlled, proof-of-concept study

Benjamin A Fisher, MD • Antonia Szanto, MD • Prof Wan-Fai Ng, MD • Michele Bombardieri, MD • Maximilian G Posch, MD • Prof Athena S Papas, MD • et al. [Show all authors](#) • [Show footnotes](#)

Clinical Trial > [J Clin Neurosci. 2024 Jan;119:76-84. doi: 10.1016/j.jocn.2023.11.013.](#)

Epub 2023 Nov 20.

Efficacy and safety of iscalimab, a novel anti-CD40 monoclonal antibody, in moderate-to-severe myasthenia gravis: A phase 2 randomized study

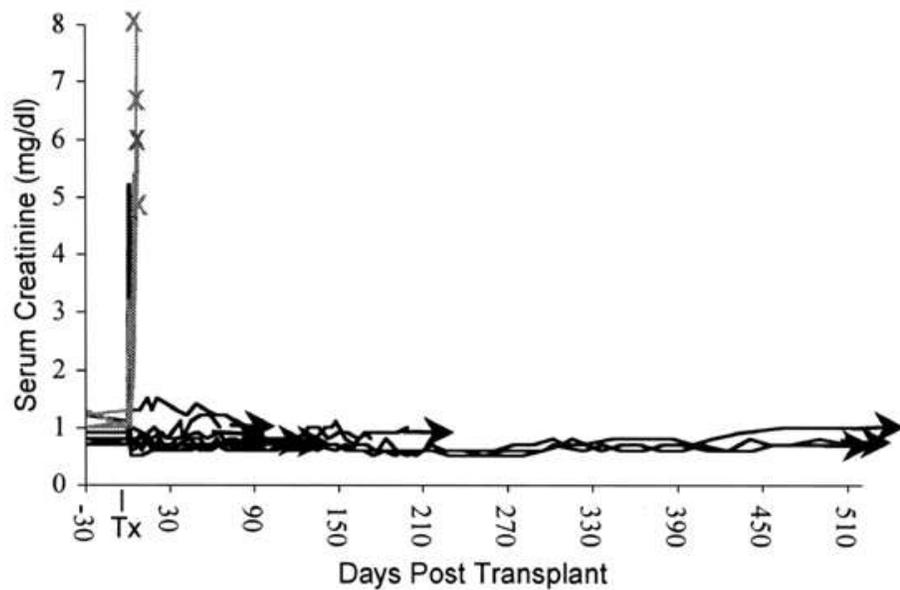
Premium Insights | January 9, 2024

Iscalimab by Novartis for Lupus Nephritis: Likelihood of Approval

II. Alternative costimulatory signals. The CD40/CD40L axis

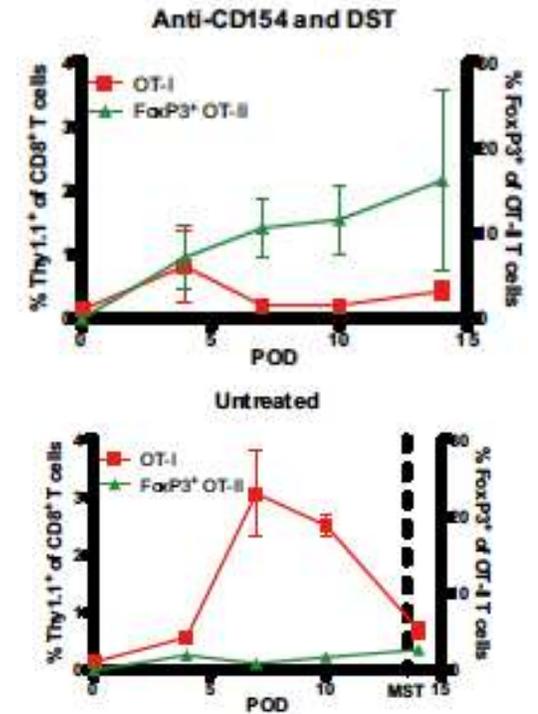
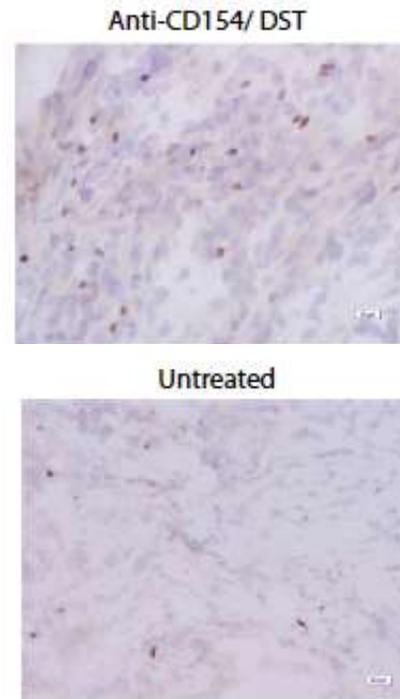
Anti-CD40L (CD154) mAbs

Anti-CD40L mAb (hu5C8)
prevents acute rejection in NHP



Kirk et al. Nat Med 1999; 5: 686-93.

Ag-sp Foxp3+ Treg generation after anti-CD40L



Ferrer IR, et al. PNAS 2012

Alternative costimulatory signals. The CD40/CD40L axis

Anti-CD40L (CD154) mAbs

- hu5c8
- ABI793
- BG9588



Thromboembolic effect
Fc dependent (FcγRs)
(CD154 Platelet expression)

epitope
epitope
epitope



Fc mutation

Pegylation

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LETTERS TO THE EDITOR
Thromboembolic complications after treatment with monoclonal antibody against CD40 ligand

The Journal of Immunology
Engineering of a Novel Anti-CD40L Domain Antibody for Treatment of Autoimmune Diseases
Jenny H. Xie,^{*} Aaron P. Yamniuk,[†] Virna Borowski,^{*} Robert Kuhn,^{*} Vojkan Susulic,^{*} Sandra Rex-Rabe,^{*} Xiaoxia Yang,^{*} Xiadi Zhou,^{*} Yifan Zhang,^{*} Kathleen Gillooly,^{*} Ruth Brosius,^{*} Rathna Ravishankar,^{*} Kimberly Waggle,[‡] Kathy Mink,[‡] Laura Price,^{*} Robert Rehfuss,^{*} James Tamura,[†] Yongmi An,[†] Lin Cheng,[†] Bozena Abramczyk,[†] Olga Ignatovich,[§] Phillip Drew,[§] Steven Grant,[§] James W. Bryson,[†] Suzanne Suchard,^{*} Luisa Salter-Cid,^{*} Steven Nadler,^{*} and Anish Suri^{*,†}

Lupus (2015) 24, 1045-1056
<http://dx.doi.org/10.1093/lupus/nrv008>
PAPER
First-in-human trial of the safety, pharmacokinetics and immunogenicity of a PEGylated anti-CD40L antibody fragment (CDP7657) in healthy individuals and patients with systemic lupus erythematosus
A Tocoian¹, P Buchan¹, H Kirby¹, J Soranson¹, M Zamacona¹, R Walley¹, N Mitchell¹, E Esfandiari¹, F Wagner² and R Oliver¹
¹UCB Pharma, Slough, UK; and ²Charité Research Organisation GmbH, Germany

Xie et al. *J Immunol* 2014;192(9):4083-92

Tocoian et al. *Lupus* 2015; 24(10):1045-56

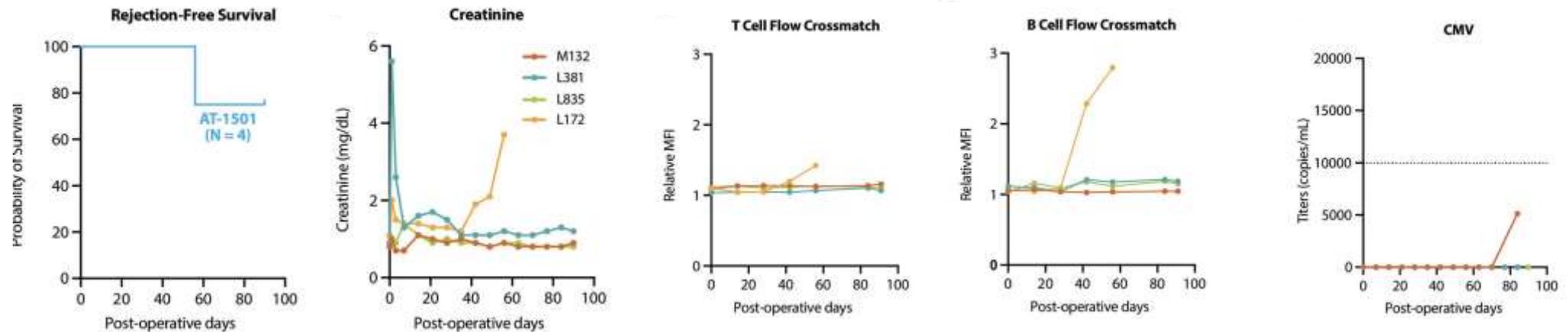


A new anti-CD40L mAb in clinical Transplantation

- Novel humanized IgG1 mAb targeting CD154
- Devoid of FcγRII functions* to avoid binding to Platelets

*(substitutions into the Hu5C8 heavy chain hinge and hinge-proximal CH2)

- Promotes **islets** and **renal allograft** survivals in **Non-Human Primates**



Anwar et al., *Sci. Transl. Med* 2023

A new anti-CD40L mAb in clinical Tx.

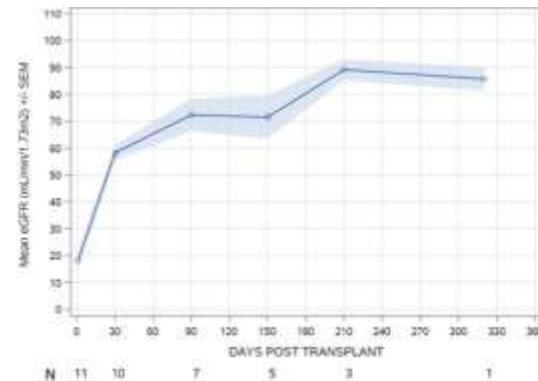
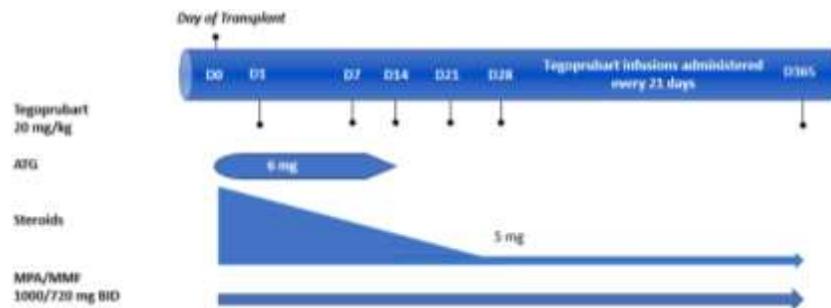
- Novel humanized IgG1 mAb targeting CD154
- Devoid of FcγRII functions* to avoid binding to Platelets

*(substitutions into the Hu5C8 heavy chain hinge and hinge-proximal CH2)

- Promotes islets and renal allograft survivals in Non-Human Primates

Anwar et al., Sci. Transl. Med 2023

- Safety of a **Phase I trial** (n=10) in **kidney transplant recipients** (NCT05983770)
 - ATG-MMF-CS- anti-CD40L



Courtesy from Eledon Pharma, abstract ASN 2023

SAES

- 1 TCMR IA, remains on the study
- No DSA
- 4 BK viremia, No PVAN
- No CMV infection
- No graft loss patients death

A new anti-CD40L mAb in clinical Tx.

- Novel humanized IgG1 mAb targeting CD154
- Devoid of FcγRII functions* to avoid binding to Platelets

*(substitutions into the Hu5C8 heavy chain hinge and hinge-proximal CH2)

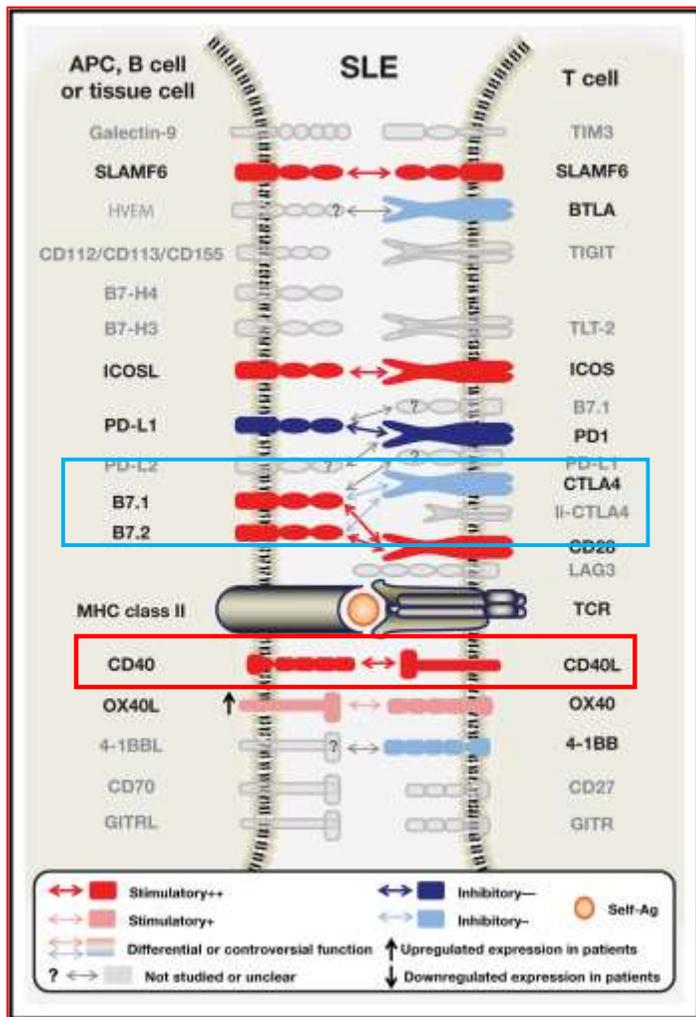
- Promotes islets and renal allograft survivals in Non-Human Primates

Anwar et al., Sci. Transl. Med 2023

- Safety of a Phase I study (n=10) in kidney transplant recipients (NCT05983770)
 - ATG-MMF-CS- anti-CD40L
- **On-going Phase II study (n=120) (NCT05983770)**
 - Safety & Efficacy
 - **ATG+MMF-CS -Tac vs. ATG-MMF-CS- anti-CD40L**

Dual targeting of costimulatory signals

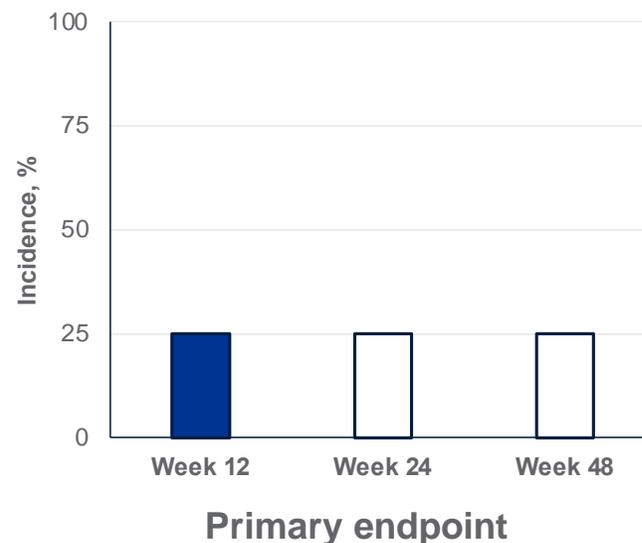
- Pilot study with Belatacept and a CD40L antagonist fusion protein



Zhang and Vignali. Immunity 2016

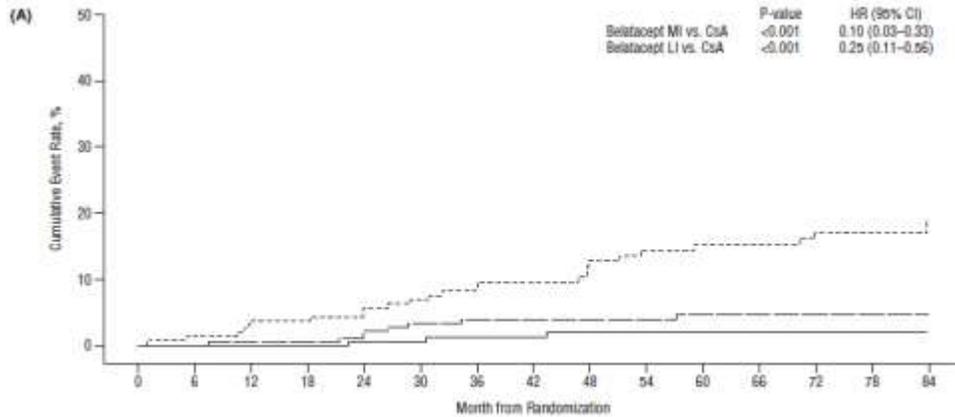
	D0	D1	D2	D3	D4	D5-7	W2	W3	W4 ±2 days	W6 ±2 days	W8 ±2 days	W10 ±2 days
Thym (mg/kg)	1.5 ^a	1.5 ^a	1.5 ^a	1.5 ^a	—	—	—	—	—	—	—	—
MP (mg)	500	250	125	60	30 ^b	30 ^b	20 ^b	10 ^b	5 ^b	—	—	—
DAZ (mg)	—	1500	—	1500 ^c	—	1500	—	1500	1500	1500	1500	1500
Bela (mg/kg)	—	10 ^d	—	10 ^c	—	10	—	10	—	10	—	—

Composite efficacy failure defined as tBPAR of Grade 1A or higher, graft loss, or death (N = 20)



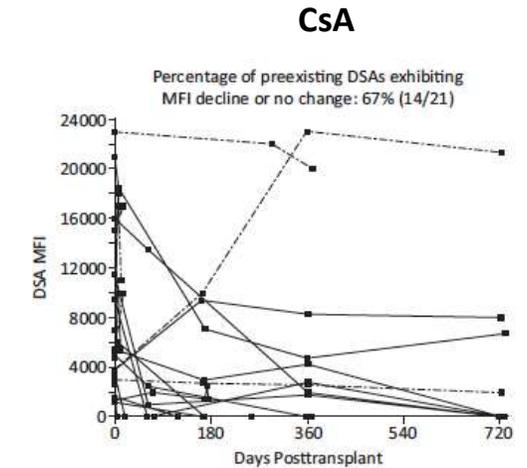
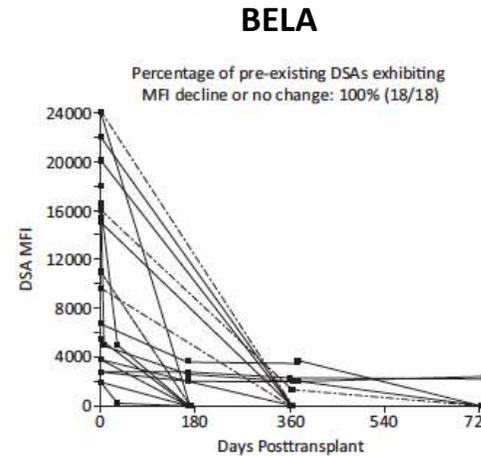
Costimulation blockade-driven B-cell Immune control

De novo DSA inhibition



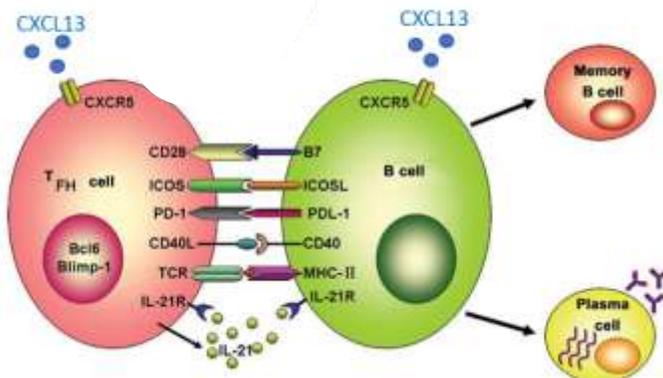
Bray RA et al Am J Transplant 2018

Preformed DSA inhibition



Bray RA et al Am J Transplant 2018

CD28/B7 and CD40/CD154 Costimulation dependent GC B-cell activation



Ongoing trials using Bela combined with other anti-B/PC agents as desensitization therapy

- Bela + anti-CD38 mAb (NCT05145296; NCT04827979)
- Bela + anti-CD40L (NCT04046549)

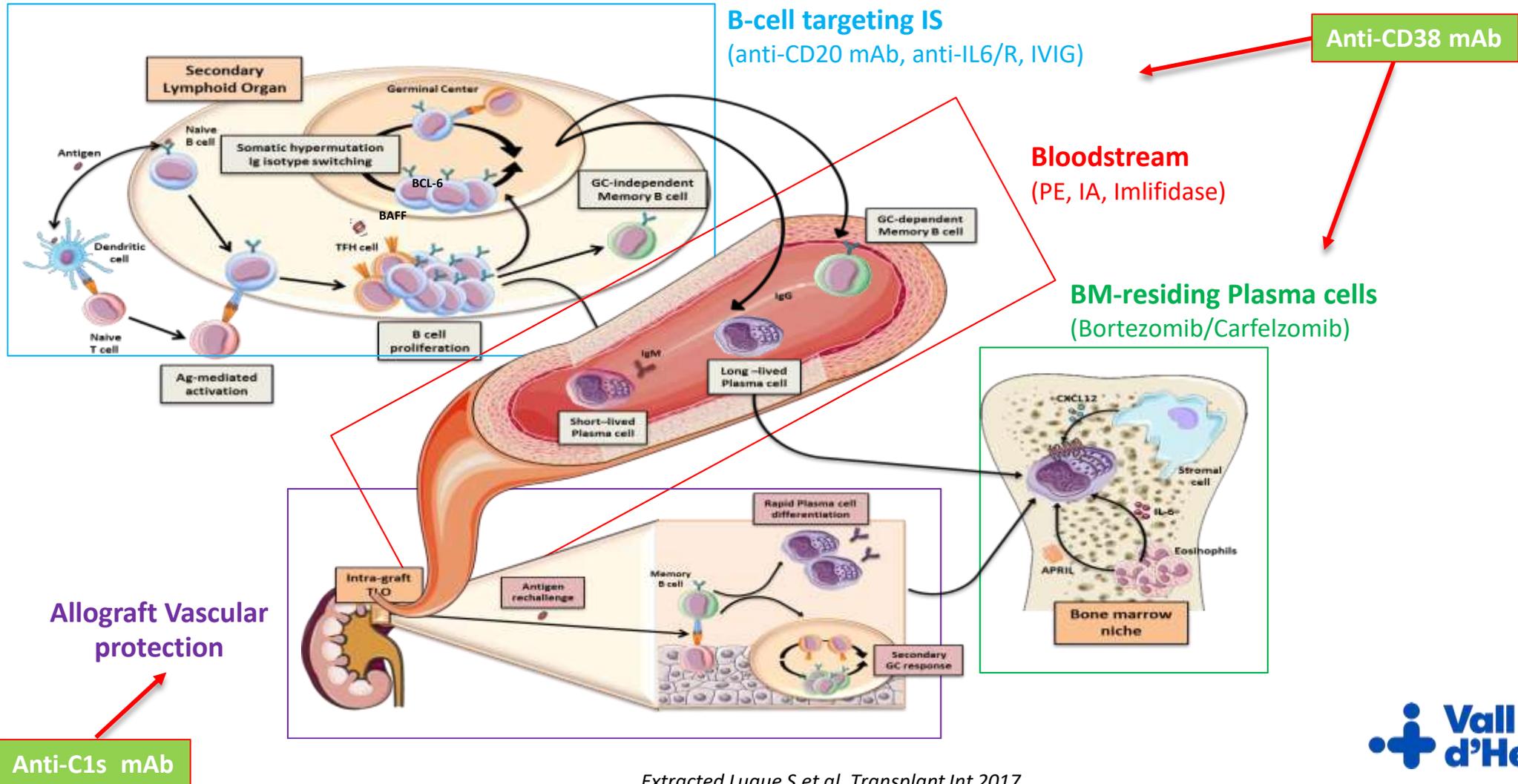
ClinicalTrials.gov. Available at: <https://classic.clinicaltrials.gov/ct2/show/NCT05145296>
 ClinicalTrials.gov. Available at: <https://classic.clinicaltrials.gov/ct2/show/NCT04827979>
 ClinicalTrials.gov. Available at: <https://classic.clinicaltrials.gov/ct2/show/NCT04046549>

Outline

- **New costimulation blockade-targeting Immunosuppressants**
 - CTLA4Ig (Belatacept)
 - Anti-CD154 (CD40L)
 - Anti-CD28

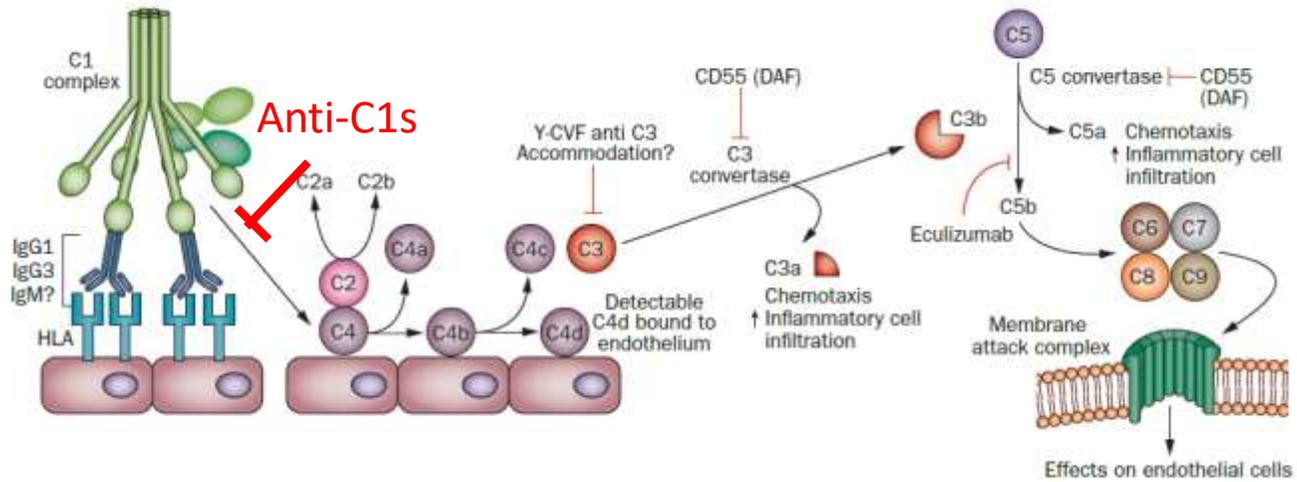
- **New selective Plasma Cell-targeting desensitization therapy**
 - Anti-C1s
 - Anti-CD38

Desensitization therapies to improve access to transplantation



Extracted Luque S et al. Transplant Int 2017

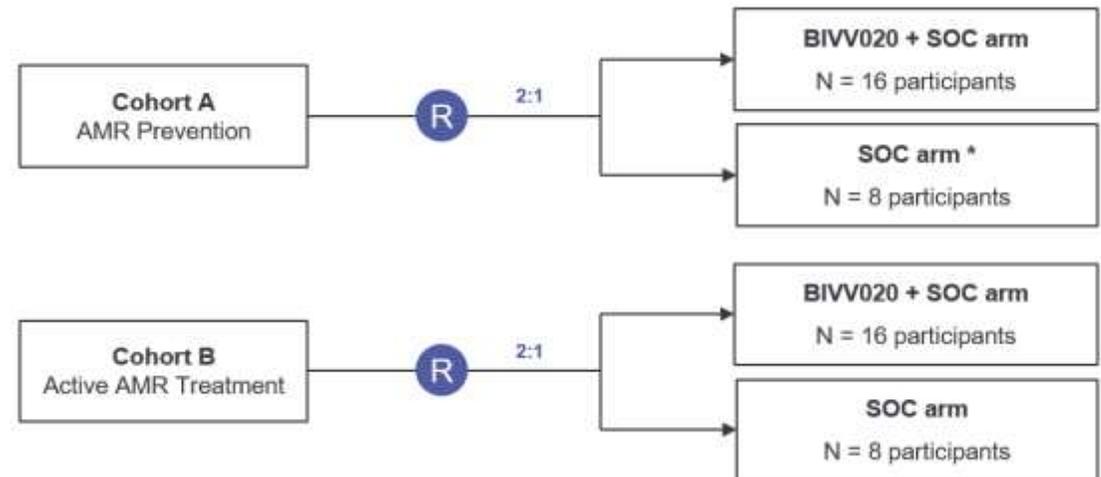
Blocking anti-C1s classical CP (BIVV02)



BIVV020 (Anti-C1s mAb:

- Selective blockade of active C1s CP
- Preserves alternative pathway activation to fight against pathogens
- Improved efficacy than terminal C5 inhibition.
- C1INH lacks specificity against C1
- Sustained and effective CP inhibition at a tolerable dose in healthy adult subjects.

Phase 2 RCT with BIVV020 for prevention and treatment of ABMR in kidney Tx recipients.



CD38-targeting therapy for anti-HLA Ab desensitization

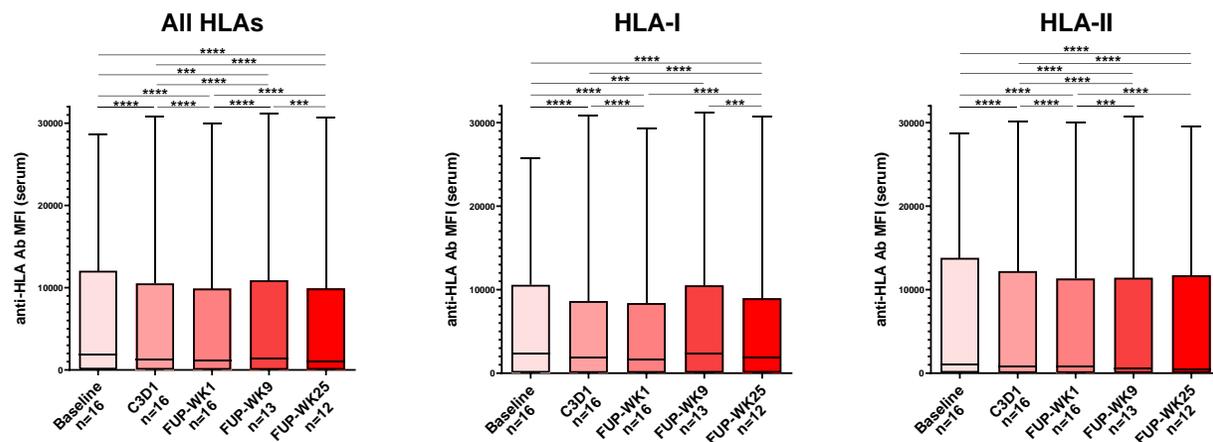
Anti-CD38 Efficacy (NCT04294459): Response Rates

No. (%)	Cohort A (n=12)	Cohort B (n=11)	All (N=23)
No. of participants assessed	12	11	23
RR based on criterion 1	4 (33.3)	5 (45.5)	9 (39.1)
RR based on criterion 2	7 (58.3)	4 (36.4)	11 (47.8)
RR based on criterion 3	10 (83.3)	9 (81.8)	19 (82.6)
Overall RR	10 (83.3)	9 (81.8)	19 (82.6)
95% CI	51.6 to 97.9	48.2 to 97.7	61.2 to 95.0

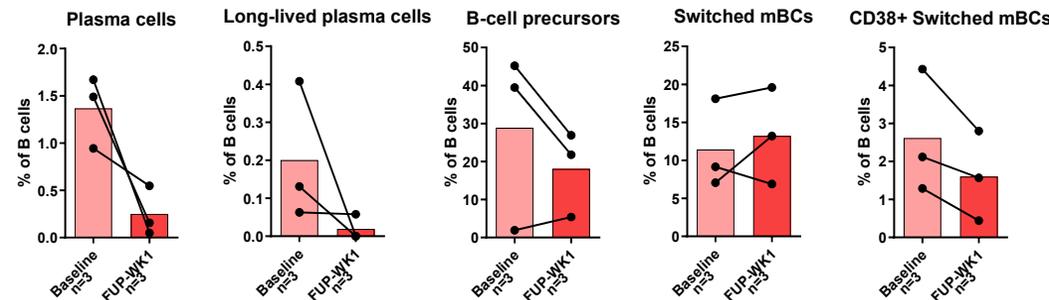
- Criterion 1:** cPRA to target levels (doubling the likelihood of finding a compatible donor).
- Criterion 2:** reduction of >2 Ab titers to reach target cPRA
- Criterion 3:** elimination of anti-HLA Ab as MFI <2000

CI, confidence interval; RR, response rate.

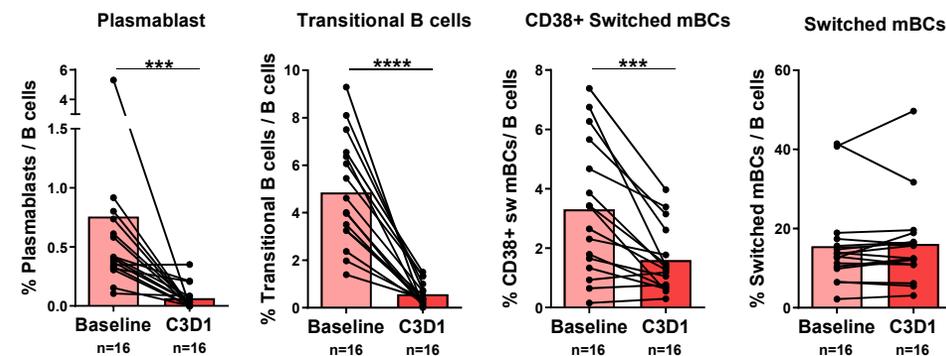
Serum anti-HLA Ab reduction



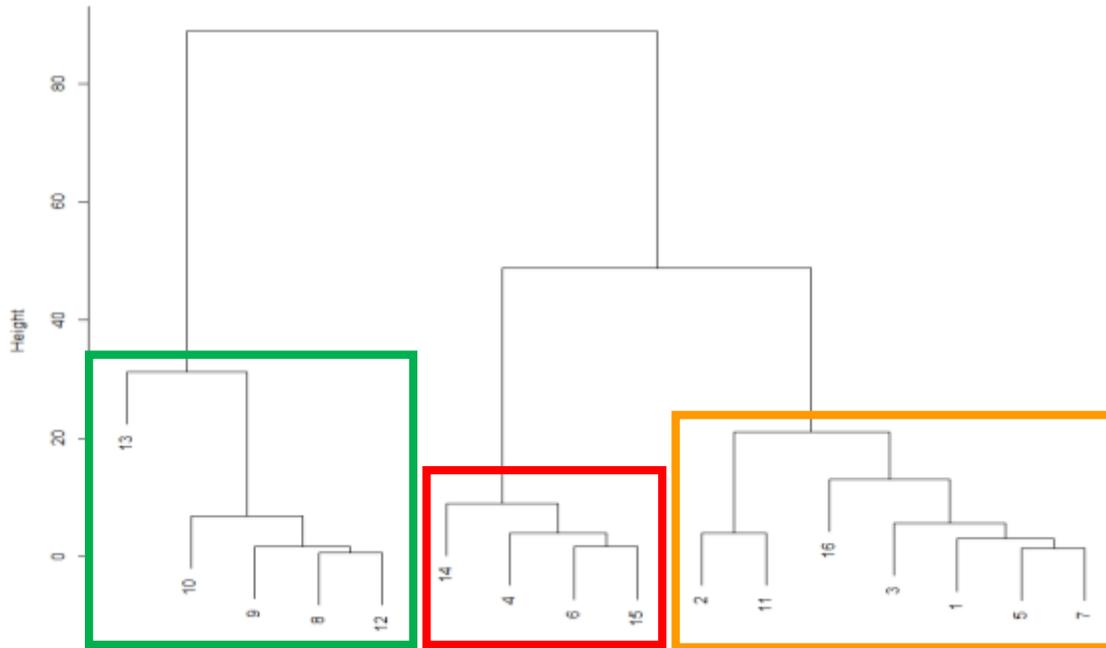
Bone Marrow



Periphery



Clusters of patients regarding reduction of serum anti-HLA Abs (MFI and titers)



High responders (HR)

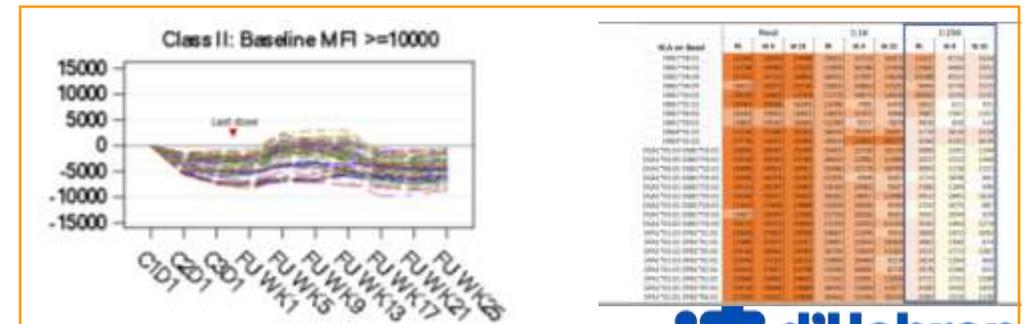
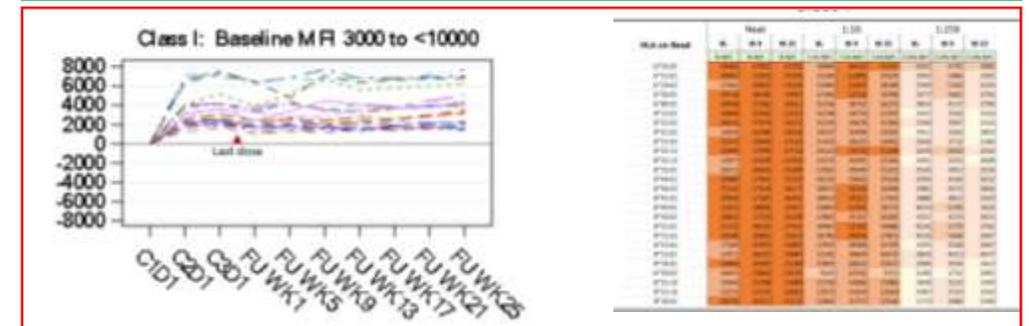
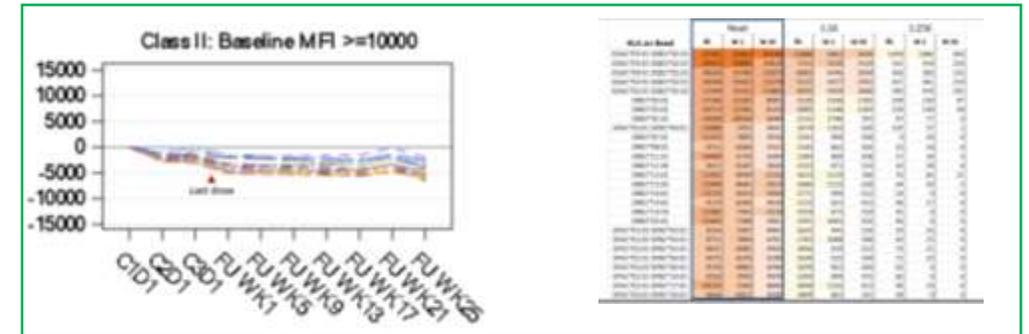
Larger decrease of 35-66% of anti-HLA Ab MFI

Non-responders (NR)

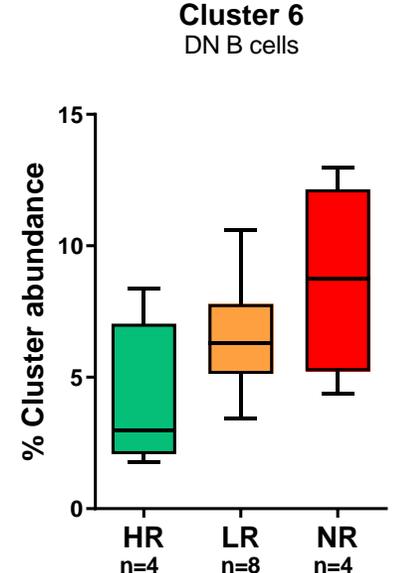
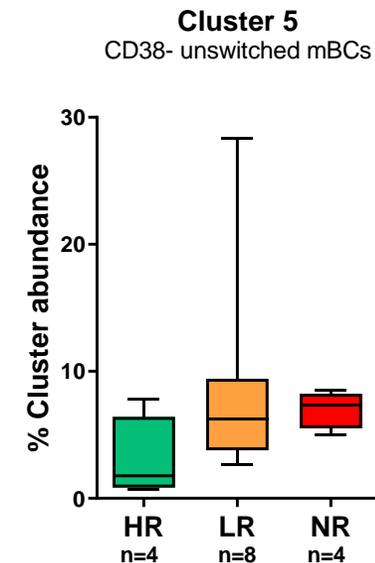
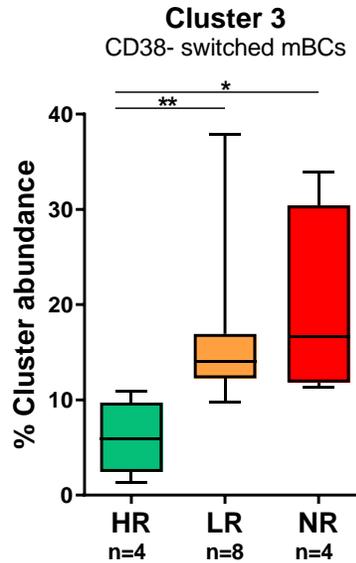
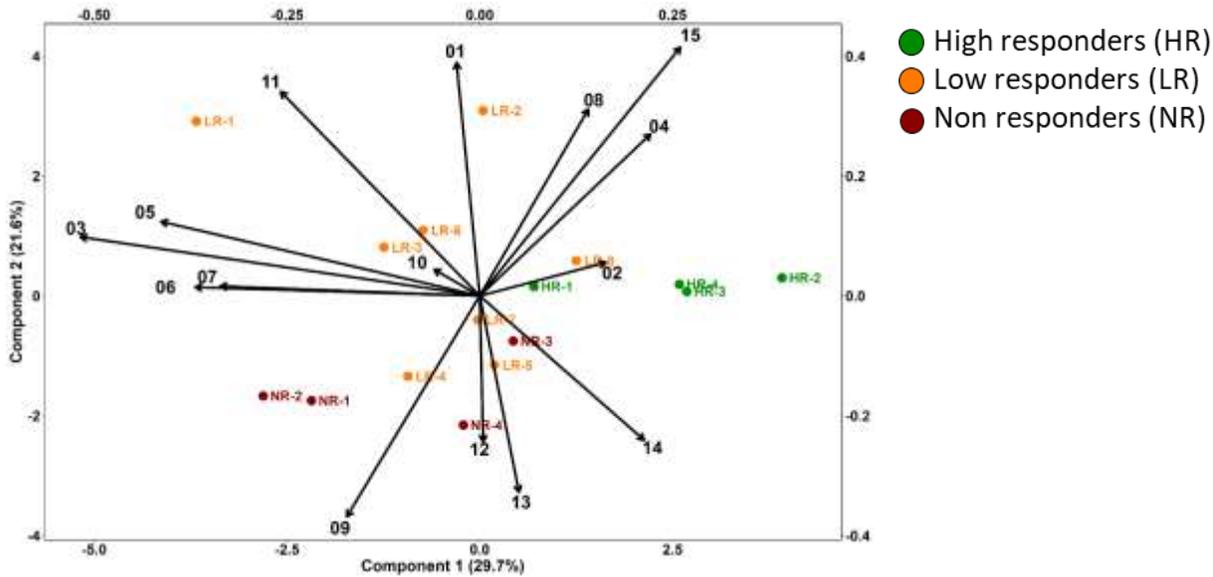
No change or increase of anti-HLA Ab MFI

Intermediate-low responders (LR)

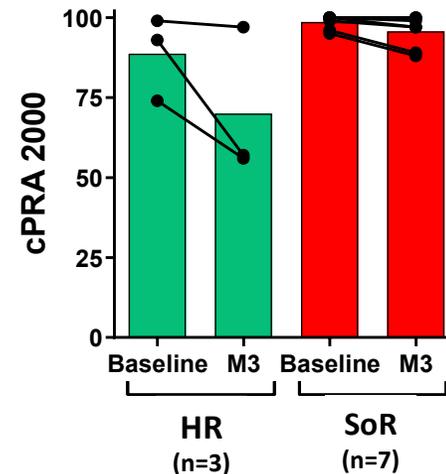
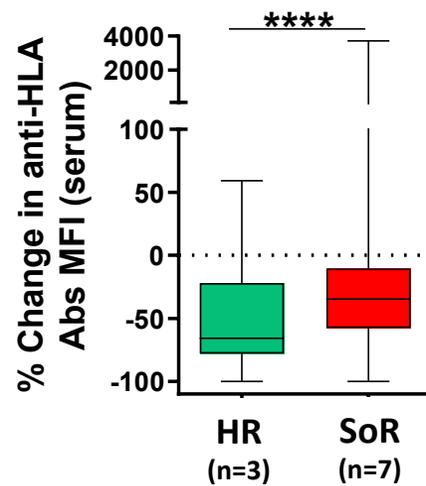
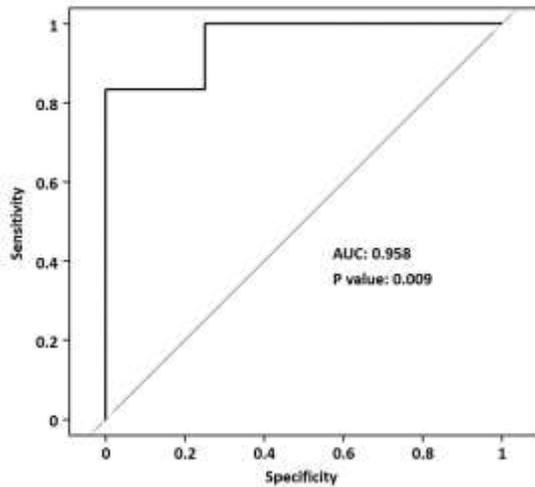
Slight decrease of 36-5% of anti-HLA Ab MFI



Pre-treatment cellular phenotypes of response to anti-CD38 therapy

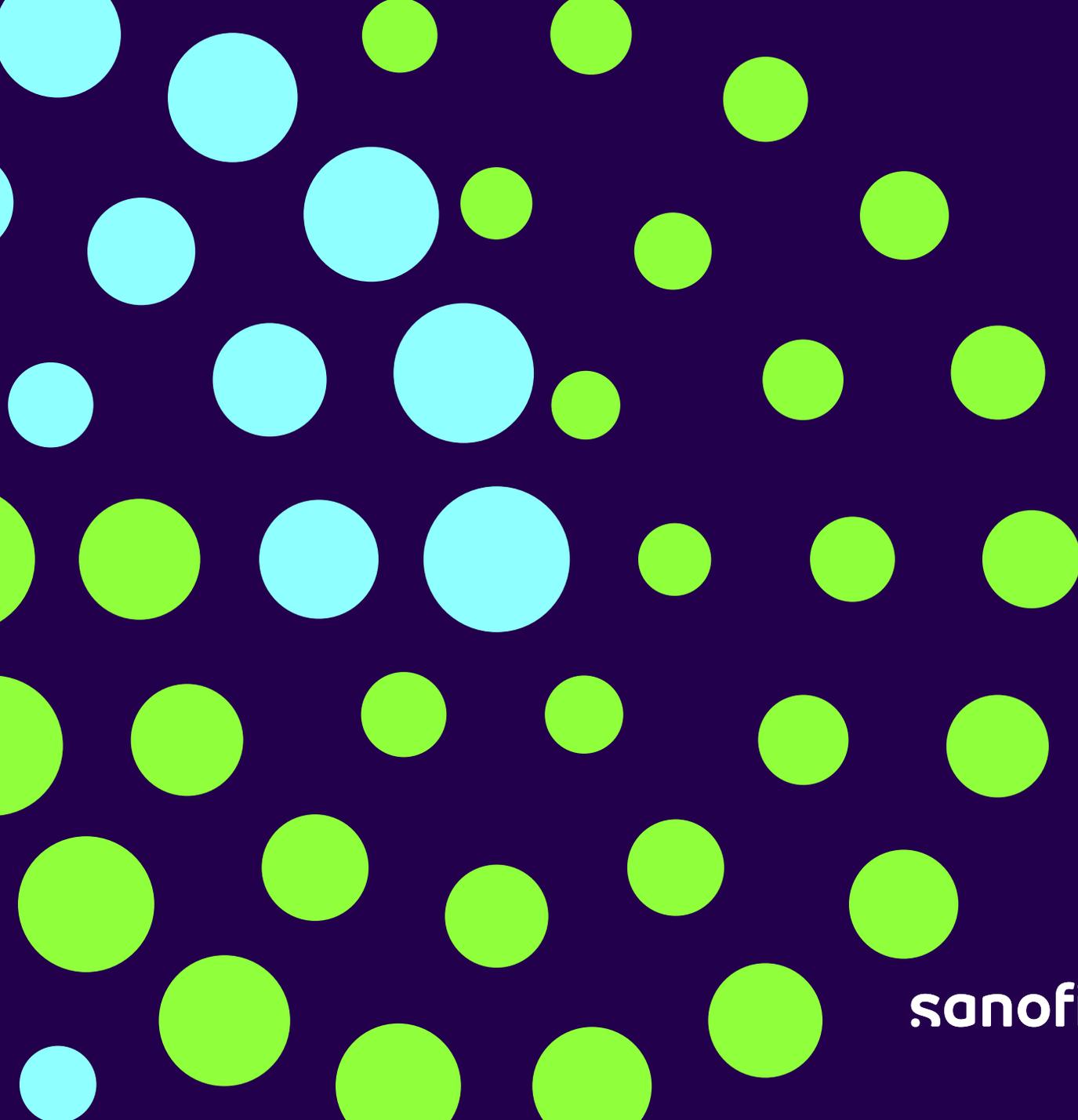


External validation (anti-CD38; NCT04294459)



Summary

- Costimulation-targeting immunomodulation continues to have high interest as IS strategies to prevent Tx rejection while avoiding off-target side effects
- The short-term drawbacks and lack of supply has dramatically impacted a wider implementation of belatacept, hampering its long-term benefits to a broader transplant population
- New costimulation-targeting agents are on their way to the clinic, aiming to improve safety and efficacy
- New CD38-targeting agents for anti-HLA desensitization have showed high inter-patient efficacy variability for depleting anti-HLA antibodies
- A biological cellular signature prior to treatment may stratify responders from non-responder patients to CD38-targeting therapy



Thank you

sanofi