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### Introduction

LTX-315 is a synthetic 9-mer cationic oncolytic peptide developed as an analogue of bovine lactoferricin<sup>1,2</sup> and was selected from a series of chemically modified lactoferricin-derived lytic peptides because it displayed superior anticancer activity and lower toxicity on normal cells<sup>2</sup>. LTX-315 induces tumor cell death by rapidly damaging cell membrane integrity<sup>1,3</sup> and permeabilizing mitochondrial membrane<sup>4,5</sup>. Intra-tumoral administration of LTX-315 stimulates the generation of systemic tumor-specific immune responses<sup>6,7</sup>, resulting in increased infiltration of cytotoxic CD8<sup>+</sup> cells and decreased regulatory T cell (Treg) infiltration in primary treated tumors<sup>7-10</sup> and in re-challenged secondary tumors<sup>6</sup>. Delivery of LTX-315 into one tumor causes the regression of distal non-treated lesions<sup>6</sup> and the cured mice are protected against a re-challenge with the same tumors<sup>6,7</sup>. A phase I clinical trial showed that LTX-315 converts immunogenically "cold" tumors to "hot" in patients with advanced or metastatic tumors (melanoma, sarcoma, or breast cancer), with increases in CD8+ tumor-infiltrating lymphocytes (TILs) in more than 80% of the patients and regression of distant tumor in some patients<sup>11</sup>. Beside inducing an immunogenic cell death, the mechanism by which LTX-315 treatment stimulates systemic tumor-specific immune responses is not fully elucidated. In tumor-bearing hosts, the generation of tumor-specific immune responses requires effective presentation of tumor antigen(s) to T cells in the draining lymph nodes (dLNs) by antigen-presenting cells (APCs) migrating from the tumor tissue. Dendritic cells (DCs) are the main type of APCs that initiate and control the induction of adaptive (including antitumor) immune responses<sup>12</sup>. For tumor-infiltrating DC (TiDCs) to traffic to dLNs for the induction of antitumor immune responses, they must undergo a process of maturation to acquire the necessary features capable of sufficiently triggering the activation of specific T cells. Given the release of multiple damage-associated molecular patterns (DAMPs) and alarmins (ATP, HMGB1, etc) by tumor cells treated with LTX-315 in vitro<sup>5-7</sup> and the known capacities of DAMPs/alarmins to induce DC maturation<sup>13,14</sup>, it has been proposed that the DAMPs/alarmins released by LTX-315-treated tumor cells are responsible for triggering the maturation of TiDCs and subsequent tumor-specific immune response<sup>1</sup>. We therefore sought to investigate whether and how LTX-315 induces DC maturation in the context of the generation of anti-melanoma immunity. The results revealed that LTX-315 induced DC maturation *in vivo* and *in vitro*. We also identified two additional pathways by which LTX-315 treatment triggered DC maturation: one involving direct activation of DCs by activating NF-kB, MAPKs, and inflammasome, and the other involving the formation of DC-maturing complexes between LTX-315 and DNA/RNA fragments released by LTX-315-treated melanoma cells. Importantly, LTX-315-induced TiDC maturation and the generation of anti-melanoma immunity relied on the presence of the signal transducer MyD88. Thus, LTX-315 triggers the generation of anti-melanoma immunity by inducing MyD88dependent maturation of TiDCs.







### References

## **Molecular mechanisms of DC activation** by melanoma cells responding to LTX-315

1. Sveinbjornsson B, et al. LTX-315: a first-in-class oncolytic peptide that reprograms the tumor microenvironment. Future Med Chem 2017; 9:1339-44. 2. Haug BE, et al. Discovery of a 9-mer Cationic Peptide (LTX-315) as a Potential First in Class Oncolytic Peptide. J Med Chem 2016; 59:2918-27. **3.** Forveille S, et al. The oncolytic peptide LTX-315 triggers necrotic cell death. Cell Cycle 2015; 14:3506-12.

4. Zhou H, et al. The oncolytic peptide LTX-315 kills cancer cells through Bax/Bak-regulated mitochondrial membrane permeabilization. Oncotarget 2015; 6:26599-614. 5. Eike LM, et al. The oncolytic peptide LTX-315 induces cell death and DAMP release by mitochondria distortion in human melanoma cells. Oncotarget 2015; 6:34910-23. 6. Nestvold J, et al. Oncolytic peptide LTX-315 induces an immune-mediated abscopal effect in a rat sarcoma model. Oncoimmunology 2017; 6:e1338236. 7. Camilio KA, et al. Complete regression and systemic protective immune responses obtained in B16 melanomas after treatment with LTX-315. Cancer Immunol Immunother 2014; 63:601-1

8. Yamazaki T, et al. The oncolytic peptide LTX-315 overcomes resistance of cancers to immunotherapy with CTLA4 checkpoint blockade. Cell Death Differ 2016; 23:1004-15. 9. Zhou H, et al. The oncolytic peptide LTX-315 triggers immunogenic cell death. Cell Death Dis 2016; 7:e2134. **10.** Liao HW, et al. LTX-315 sequentially promotes lymphocyte-independent and lymphocyte-dependent antitumor effects. Cell Stress 2019; 3:348-60. 11. Spicer J, et al. Safety, anti-tumor activity and T-cell responses in a dose-ranging phase 1 trial of the oncolytic peptide LTX-315 in patients with solid tumors. Clin Cancer Res 2021 **12.** Palucka K, Banchereau J. Dendritic-cell-based therapeutic cancer vaccines. Immunity 2013; 39:38-48. 13. Bianchi ME. DAMPs, PAMPs and alarmins: all we need to know about danger. J Leukoc Biol 2007; 81:1-5. 14. Yang, Han Z, Oppenheim JJ. Alarmins and immunity. Immunol Rev 2017; 280:41-56.

