Artificial T Cell Adaptor Molecule-Transduced TCR-T Cells Demonstrated Improved Proliferation Only When Transduced in a Higher Intensity

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INTRODUCTION

Endogenous or gene-modified T cells with antigen-specific T cell receptors (TCRs) demonstrated certain clinical benefits, and they represent one of the major approaches for cytotoxic T lymphocyte (CTL) therapies.1–4 Because of the difficulties of endogenous tumor-specific CTL generation, the introduction of tumor-specific TCRs to polyclonal T cells has become a mainstay to generate CTLs with tumor-specific TCR (TCR-CTLs).5,6 However, gene-modified TCR-CTL therapies targeting malignant tumors have been generally unsuccessful in previous clinical trials.5,7,8 One of the major reasons for this was considered to be poor expansion and short persistence of the transferred CTLs.9 To overcome these problems, we have previously developed an artificial T cell adaptor molecule (ATAM), which is a gene-engineered CD3ζ (CD247) containing either a CD28 or 4-1BB intracellular domain (ICD).10 It was developed to mimic the ICD of chimeric antigen receptor (CAR) T cells.11,12 After TCR and peptide-human leukocyte antigen (HLA) ligation, CD3ζ is recruited to the TCR complex via its ionized transmembrane residues, forms a supramolecular activation cluster, and downstream activation signals are delivered to the CTLs by several endogenous adaptor molecules, such as CD3ζ, Lck, ZAP70, and others.13–15 Thus, we focused on enhancing the downstream activation signals after TCR epitope ligation, and demonstrated improved intracellular signaling by modifying the adaptor molecule component of the complex, particularly with an adaptor molecule including the 4-1BB ICD.

The idea of ICD modification originated from CAR gene-modified T cells and their great success. During the development of CAR-T cell therapy, after the introduction of ICDs for co-stimulatory molecules, such as CD28 or 4-1BB, the second-generation CARs have shown improved proliferation and persistence, and subsequent clinical efficacy.12,14 Thus, we obtained a similar approach in TCR-CTLs by incorporating an ICD in the middle of the CD3ζ molecule. Upon conducting the present study to a make simpler method to introduce the TCR and ATAM into T cells, we designed TCR-T cells and their great success. During the development of CAR-T cell therapy, after the introduction of ICDs for co-stimulatory molecules, such as CD28 or 4-1BB, the second-generation CARs have shown improved proliferation and persistence, and subsequent clinical efficacy.12,14 Thus, we obtained a similar approach in TCR-CTLs by incorporating an ICD in the middle of the CD3ζ molecule. Upon conducting the present study to a make simpler method to introduce the TCR and ATAM into T cells, we designed TCR-T cells.
preceeding study, we designed a novel adaptor molecule based on CD3ζ, which is inserted with either the CD28 or 4-1BB ICD, to enhance signaling after TCR ligation to specific epitopes. We transduced these novel adaptor molecules into endogenous and TCR genetically modified T cells and examined various T cell functions, including proliferation upon stimulation in vitro and in vivo. We successfully demonstrated the potential for increasing proliferation capacity of TCR-CTL therapy using novel adaptor molecules consisting of CD3ζ and 4-1BB ICDs.10

Herein, we attempted to further develop an all-in-one virus vector that can transduce a tumor-specific TCR and the artificial T cell adaptor molecule (ATAM) in a single transduction. We aimed to develop feasible and useful methods to transduce the TCR and ATAM to the patients’ peripheral blood-derived T cells. Indeed, we could not reproduce the boosting effect of an ATAM using the single virus vector. However, we found that it is important to realize a higher ATAM intensity as well as TCR to convey the boosting effect of an ATAM.

RESULTS

Generation of TCR and ATAMs and Their Expression in Transduced Cells

In the previous study, we chose NY-ESO-1 TCR as a TCR-T model, and transduced the ATAM simultaneously by two separated virus vectors (two virus vector method [2vv method]).10 To transduce the TCR and ATAMs in a further simplified method, we attempted to develop a single virus vector, by which we can transduce the TCR and ATAM in one gene transduction into T cells (one virus vector method [1vv method]). We designed cDNAs that encode TCR-ATAMs and co-expressing a truncated version of the epidermal growth factor receptor (tEGFR) (Figures 1A and 1B). To confirm whether we could successfully transduce the TCR-ATAMs into target cells, we transduced SUP-T1 cells by using retrovirus vectors (Figures 1C and 1D). We observed that SUP-T1 cells transduced with TCR-ATAM-tEGFR could build the conformationally correct TCR component, were recognized by the HLA-A2-NY-ESO-1 tetramer, and co-expressed EGFR as a transduction marker. Expression of NY-ESO-1 TCR and EGFR was almost equivalent, and was similar among various constructs.

Establishment of the ATAM+NY-ESO-1 TCR-CTL Model

To investigate the effect of ATAM transduction in the context of the antitumor effect of TCR-CTL therapy, we transduced TCR-ATAM-tEGFR into primary human CD8+ T cells by the 1vv method. ATAMs were transduced on days 3 and 4 of CD3/CD28 beads stimulation, and then tEGFR selection was performed on day 7. Transduction efficiencies were approximately 20% (range, 8%–55%) before tEGFR selection. After immunomagnetic selection, the tEGFR+ cells were purified up to 73%–99% (Figures 1E and 1F). Purified TCR-CTLs were NY-ESO-1 tetramer positive at slightly lower percentages compared with tEGFR positivity. This phenomenon was probably because of the TCR mispairing between the endogenous TCR and exogenously inserted TCR.17–19

The percentages of NY-ESO-1 tetramer+ cells were slightly varied by individual donor, whereas the percentages of tetramer+ cells were similar among various constructs. Purified TCR-CTLs were cryopreserved on day 11. Upon usage, CTLs were thawed, restimulated, and expanded to apply for the downstream experiments.

Cytokine Production, Cell Proliferation, and Cytotoxicity of ATAM+NY-ESO-1 TCR-CTLs

To evaluate the anti-tumor recognition capacity of ATAM+TCR-CTLs, we performed intracellular cytokine assay against K562-HLA-A2 cells pulsed with NY-ESO-1 peptide. Proportions of positive responders were similar for interferon (IFN)-γ and interleukin (IL)-2 among CTLs transduced with a TCR only and ATAM+TCR-CTLs (Figures 2A and 2B). IFN-γ and IL-2 secreted by CTLs transduced TCR only, and ATAM+TCR-CTLs were further determined in the supernatant using ELISA. ATAM+TCR-CTLs were cocultured with K562-HLA-A2 cells pulsed with or without NY-ESO-1 peptide. No additional increase in cytokine production was observed with the transduction of ATAMs (Figure 2C).

Next, we investigated in vitro expansion of ATAM+NY-ESO-1 TCR-CTLs after a single course of antigen stimulation at a 1:1 ratio with gamma-irradiated K562-HLA-A2 cells pulsed with NY-ESO-1 peptide. No significant difference of cell proliferation was observed (Figure 2D). To evaluate the integrated response including specific cytotoxicity and proliferation to NY-ESO-1+ targets, we performed a coculture assay. MM.1S-HLA-A2 cells were used as the target cells, and the effector cells were mock or CTL-transduced TCR only and ATAM+TCR-CTLs. Effector and stimulator cells were cocultured at various effector-to-target (E:T) ratios and incubated for a total of 120 h, assessing the percentage of CTLs and MM.1S cells by flow cytometry every 24 h. Both under short-term incubation up to 48 h and long-term incubation up to 120 h, TCR only and ATAM+TCR-CTLs showed similar E:T cell proportions under both E:T ratio conditions (1:1 and 1:8) (Figures 2E and 2F). In the lower target cell ratio (E:T ratio of 1:1), we observed a relatively higher T cell proportion even...
Figure 2. Cytokine Production, Antitumor Effect, and Cell Proliferation of ATAM+ TCR-CTLs

(A and B) Intracellular IFN-γ and IL-2 production after stimulation with KS62-HLA-A2 cells pulsed with or without NY-ESO-1 peptide. Representative flow plots are shown in (A), and a summary from five different donors is shown in (B). Data represent means ± SEM (one-way ANOVA: n.s., not significant). (C) The secretion of IFN-γ into the culture supernatant. The stimulators were irradiated HLA-A2+ KS62 cells pulsed with NY-ESO-1 peptide. Data represent means ± SEM (one-way ANOVA: n.s.). (D) Proliferation after single antigen stimulation. Data are from the analysis of five different donors. Data represent means ± SEM, and no significant differences were observed (two-way ANOVA: n.s.). (E) Coculture assay between ATAM+ CTLs and EGFP+ MM.1S cells. ATAM+ CTLs were cocultured with nonirradiated MM.1S (originally, an HLA-A2+ and NY-ESO-1+ myeloma cell line) to assess effects on both cytotoxicity and proliferation, at E:T (effector-to-target) ratios of 1:1 or 1:8, and then the percentages of CTLs and

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in the mock T cell group possibly due to natural killer cell activity. In brief, ATAM+TCR-CTLs generated by the 1vv method did not show any advantageous effect with regard to cytokine secretion, cell proliferation, and cytotoxicity to NY-ESO-1+ target cells compared with TCR-CTLs without ATAM.

**Expression of ATAM after Different Transduction Methods**

In the previous study, we demonstrated that the ATAM with 4-1BB-ICD could exhibit an advantageous effect on the proliferation of TCR-CTLs, whereas the ATAM with CD28-ICD did not have the same effect on cell proliferation as was seen with ATAM with 4-IBB-ICD. However, we could not reproduce the effect in the present study. To investigate the reason why we could not detect the proliferation superiority in the present study, we focused on the transduction methods and compared the TCR-T cells of the 1vv method and those of the 2vv method (Figure 3A). In the previous study, we adopted the 2vv method, which included a simultaneous transduction of TCR-enhanced green fluorescent protein (EGFP) and ATAM-2A-tEGFR (2vv method, Figure 3A). Because the ATAM with CD28-ICD did not enhance the proliferation of transduced cells, we focused onto the ATAM with 4-IBB-ICD in the subsequent experiments. We transduced the TCR and ATAMs into Jurkat cells with either the 1vv or 2vv method. After transduction, tEGFR+ fractions were purified with immunomagnetic beads (Figure 3B). Mean fluorescence intensity (MFI) of tEGFR after 1vv method transduction was lower in CD28/CD3+ and 4-IBB/CD3+ ATAMs, whereas the EGFR or CD3+ transduction group showed similar levels of tEGFR expression between the 1vv and 2vv method (Figure 3B). In terms of protein expression, we observed consistently lower protein expression after 1vv method transduction, which was particularly lower in the 4-1BB/CD3+ ATAM (Figure 3C). From these data, the 2vv method was able to transduce ATAMs in a higher intensity than with the 1vv method. Because the ATAM and tEGFR were directly connected with the 2A sequence, the expression of ATAM and tEGFR should be equimolar.

To further investigate the effect of higher ATAM expression on intracellular signaling, we adopted an experimental system using Jurkat reporter cells. These reporter cells are characterized by the stable cellular signaling, we adopted an experimental system using Jurkat reporter cells. To further investigate the effect of higher ATAM expression on intracellular signaling, we adopted an experimental system using Jurkat reporter cells. To further investigate the effect of higher ATAM expression on intracellular signaling, we adopted an experimental system using Jurkat reporter cells.
2v method to elucidate the underlying mechanism of why we could not see the expected effect by the 1v method.

In comparison between the 1v method and 2v method, a higher intensity of ATAM after the 2v method than that after the 1v method was observed in both of the Jurkat cell lines and primary T cells. Furthermore, signal intensity after antigen stimulation was associated with ATAM expression in Jurkat reporter cell experiments. In the 1v method, the TCR and ATAM were linked with the T2A sequence, and single transduction was attempted. Alternatively, in the 2v method, the TCR and ATAM were separately transduced with each promoter sequence, respectively. Furthermore, the total packaged gene length was also different between the 1v method and 2v method, such as 3.6 kb in the 1v method, and 2.6 and 1.7 kb in the 2v method. The gene transduction efficiency and copy number (intensity) are known to be largely dependent on the length of the gene of interest (GOI).21 In terms of both the gene transduction efficiency and intensity, separate transduction with the 2v method was advantageous. Nonetheless, the 2v method is too complicated of a method when we think about practical cell production for future clinical applications. Because the gene transduction efficiency with a transposon is considered unlikely to associate with the length of the GOI,22-24 non-viral transduction methods including the transposon method may become a solution. Alternatively, we may consider utilizing the vector system that has two separated promoter sequences to drive two individual transgenes.25

One of the possible reasons to explain why we could not demonstrate a 4-1BB/CD3ζ ATAM effect in the single virus vector may be due to the existence of endogenous CD3ζ. Because there was a huge amount of endogenous CD3ζ in the primary T cells, we would need to express a significant amount of ATAM to exhibit the visible effect. Otherwise, the effect of ATAM would be diluted and interference with endogenous CD3ζ would be difficult to see, even if ATAM had a good potential to boost the intracellular signals. Based on the observations in the experiments using Jurkat reporter cells, we thought that the effect of ATAM would not be linearly elevated, but it may be observed when ATAM expression would be higher than a certain threshold. Accordingly, because ATAM expression was higher in the cells produced with the 2v method, we considered that the inhibitory effect of endogenous CD3ζ would not be seen in the 2v method. To exclude the possibility of interference by endogenous CD3ζ, we may try to knock out the CD3ζ gene by genome-editing technology such as the CRISPR-Cas9 system or others.26-28 However, the genome editing in primary T cells may bring further difficulty to make practical TCR-T cells in the clinical grade.29

In the present study, we demonstrated the advantage of the 2v method in terms of transduction efficiency and intensity to exhibit the potency of ATAM. ATAM-transduced TCR-T cells demonstrated improved proliferation when ATAM was transduced in a higher intensity to TCR-T cells.

MATERIALS AND METHODS

Cell Lines

The SUP-T1 and MM.1S tumor cell lines were obtained from the American Type Culture Collection. K562, Jurkat tumor cell line, and LCL cells were maintained in our laboratory. All cell
lines were routinely validated for authenticity by examining their immunophenotype by flow cytometry, and culture was limited to a maximum of 2 months prior to use. K562 and MM.1S cells were tested for HLA-A2 expression by flow cytometry and NY-ESO-1 expression by RT-PCR. K562 cells were HLA-A2/C0/NY-ESO-1/C0, and MM.1S cells were HLA-A2/C0/NY-ESO-1+. All cell lines were cultured in RPMI 1640 medium containing 10% FBS, 0.8 mmol/L L-glutamine, and 1% penicillin-streptomycin. Dr. Michael C. Jensen (Seattle Children’s Research Institute, Seattle, WA, USA) kindly provided the lentivirus vector encoding GFP-firefly luciferase (fluc). MM.1S-fluc was derived by lentiviral transduction with the GFP-fluc gene and was then sorted for expression of GFP.

Human Subjects
The research protocols of this study were approved by the Institutional Review Board of Nagoya University Graduate School of Medicine (reference nos. 2014-0081 and 2017-0445). Peripheral blood mononuclear cells (PBMCs) were obtained from healthy donors after written informed consent and were obtained in accordance with the Declaration of Helsinki.

ATAM Generation and Retroviral Vector Construction
We generated two ATAMs, CD28/CD3ζ and 4-1BB/CD3ζ, and prepared unmodified CD3ζ as a control in the previous study. The CD28 or 4-1BB ICDs were inserted in the middle of the CD3ζ ICD such that they could assemble with the TCR complex when stimulated with the corresponding antigen. We combined the NY-ESO-1 TCR and ATAMs, and they were fused to a tEGFR lacking the epidermal growth factor-binding and intracellular signaling domains. A P2A sequence is located between the TCRζ and η chains. We inserted the self-cleaving T2A sequence between the TCR, ATAM, and tEGFR. By inserting the T2A sequence, each protein was coexpressed at equimolar levels from a single transcript in a bicistronic construct. Cell surface tEGFR was detected using the biotinylated Erbitux (cetuximab) monoclonal antibody (mAb) for EGFR (Bristol Myers Squibb, New York, NY, USA). The ATAM transgenes were assembled by overlap extension PCR. TCR-T2A-ATAM-T2A-tEGFR was packaged into LZRS-pBMN-Z using the EcoRI and NotI sites, and ATAM-encoding retrovirus was produced using the Phoenix-Ampho system (Orbigen, San Diego, CA, USA).

In the 1vv method, TCR-T2A-ATAM-T2A-tEGFR was packaged into one virus vector, and single transduction was attempted, whereas in the 2vv method, two independent virus vectors packaged as TCR-T2A-EGFP or ATAM-T2A-tEGFR were transduced simultaneously as described previously. Except for the gene insert, vector backbone, promoter, and multiplicity of infection (MOI of 3) are identical between the 1vv method and 2vv method.
Generation, Expansion, and Selection of ATAM-Transduced CTLs

We adopted the NY-ESO-1-specific TCR as a model of tumor-specific TCR gene insertion. The construct was developed based on the 1G4 TCR that targets the NY-ESO-1 peptide 157–165 (SLLMWITQC) bound to HLA-A02:01.33 In addition, the TCR α and β chains were sterically stabilized by the additional interchain disulfide bonding.34 CD8+ T cells were purified with immunomagnetic beads (Miltenyi Biotec, Bergisch Gladbach, Germany) from healthy donor PBMCs, activated with anti-CD3/CD28 beads at the ratio of 1:1 (Invitrogen, Carlsbad, CA, USA) and cultured in RPMI 1640 medium containing 10% human serum, 0.8 mmol/L l-glutamine, 1% penicillin-streptomycin, and 0.5 μM 2-mercaptoethanol, and supplemented with recombinant human IL-2 to a final concentration of 50 IU/mL. On days 3 and 4, in the 1vv method, NY-ESO-1 TCR-ATAM-tEGFR was transduced to expanded CD8+ T cells with the recombinant human fibronectin fragment (RetroNectin, Takara Bio) by centrifugation at 2,100 rpm for 120 min at 32°C with the retroviral supernatant from NY-ESO-1 TCR-ATAM-tEGFR-packaged Phoenix-Ampho cells. At 4 days after transduction, EGFR+ cells were purified by biotinylated Erbitux mAb for EGFR and anti-biotin microbeads (Miltenyi Biotec). In the 2vv method, on days 3 and 4, NY-ESO-1 TCR-EGFP and ATAM-tEGFR were transduced simultaneously, using the same methods for the 1vv method. The retroviral supernatant from NY-ESO-1 TCR-EGFP and ATAM-tEGFR-packaged Phoenix-Ampho cells were mixed at a 1:1 ratio. After 4 days from transduction, NY-ESO-1 TCR+ and ATAM+ cells were sorted by FACSAria II, targeting the EGFP+/tEGFR+ fraction. Four days after selection or cell sorting, purified ATAM+NYSO-1 TCR-CTLs were cryopreserved. Then, we thawed CTLs and re-stimulated CTLs with gamma-irradiated LCL cells (75 Gy) pulsed with 5 μg/mL of NY-ESO-1 peptide. Thereafter, the expanded TCR-CTLs were applied for all subsequent experiments.

Flow Cytometry Analysis

All samples were analyzed by flow cytometry on the FACSAria II and FACSCanto II (BD Biosciences, San Jose, CA, USA) and analyzed using FlowJo (Tree Star, Ashland, OR, USA). The following fluorescent dye-conjugated antibodies were purchased from BD Biosciences (streptavidin-phycoerythrin [PE], CD8-PE [clone HIT8a], CD8-allophycocyanin [APC] [RPA-T8], CD3-APC [UCHT1], IL-2-APC [5344.111]), BioLegend (San Diego, CA, USA) (IFN-γ-Brilliant Violet 421 [BV421] [clone 4S.B3], HLA-A2-PE [BB7.2]), and MEDICAL & BIOLOGICAL LABORATORIES (Nagoya, Japan) (NY-ESO-1 tetramer-PE). The following antibodies were purchased from Cell Signaling Technology (Danvers, MA, USA) (phospho-p38 mitogen-activated protein kinase [MAPK] rabbit Ab [#9212], phospho-p44/p42 MAPK rabbit Ab [#9101]) and BioLegend (Alexa Fluor 647 donkey anti-rabbit IgG antibody).

Intracellular Cytokine Staining and Cytokine Secretion Assay

ATAM+CTLs and K562-HLA-A2 cells pulsed with or without NY-ESO-1 peptide were mixed at a 1:1 ratio in the presence of brefeldin A (Sigma-Aldrich, St. Louis, MO, USA) and then fixed and permeabilized with cell fixation/permeabilization kits (BD Biosciences) for the intracellular cytokine assay. After fixation, CTLs were stained with CD8 mAb to separate them from stimulator cells. Anti-IFN-γ...
or anti-IL-2 was used to detect intracellular cytokines. For the cytokine secretion assay, ATAM+CTLs and K562-HLA-A2 cells pulsed with or without NY-ESO-1 peptide and then mixed at a 1:1 ratio and incubated for 16 h. Culture supernatants were collected and IFN-γ or IL-2 was measured by ELISA according to the manufacturer’s instructions (BD Biosciences).

**CTL Proliferation Assay**

ATAM+CTLs were stimulated with 100 Gy gamma-irradiated K562-HLA-A2 cells pulsed with NY-ESO-1 peptide at a 1:1 ratio and incubated at 37°C. The live cell number was assessed using standard trypan blue dye exclusion. For this assay, CTLs were cultured with 10 ng/mL IL-7 and 5 ng/mL IL-15 twice weekly.

**Coculture Assay**

MM.1S cells transduced with HLA-A2-EGFP were washed and plated with mock or NY-ESO-1 TCR CTLs or 1-1BB/CD3-transduced NY-ESO-1 TCR CTLs at various E:T ratios, without IL-2 supplementation. From 24 to 120 h of incubation, effector cells were stained with anti-CD8 and analyzed by flow cytometry every 24 h, assessing the percentage of CTLs and MM.1S cells within the live cell gates.

**Analysis of Transcription Factor and Intracellular Phosphoprotein**

To generate ATAM-transduced Jurkat cells by the 2vv method, NY-ESO-1 TCR-EGFP and ATAM-tEGFR were transduced into Jurkat reporter cells simultaneously, and these cell lines were sorted as the EGFP+/tEGFP+ fraction. For ATAM-transduced Jurkat cells by the 1vv method, Jurkat cells were transduced with a single virus containing TCR-ATAM-tEGFR and sorted as the tEGFR+ fraction. The reporter cells were gene modified to generate enhanced CFP (ECFP) when NF-κB was activated. ATAM+Jurkat reporter cells were stimulated with LCL cells pulsed with NY-ESO-1 peptide at a 2:1 ratio, and Jurkat cells were stained with anti-CD3 and analyzed by flow cytometry at 12, 24, 48, and 72 h.

For the intracellular phosphoprotein assay, sorted Jurkat reporter cells and LCL cells pulsed with NY-ESO-1 peptide were mixed at a 1:5 ratio for 1 h, then fixed and permeabilized per the manufacturer’s recommended protocol. After fixation, Jurkat cells were stained with anti-CD3 mAb to separate them from stimulator cells. Anti-phospho-p38 or anti-phospho-Erk Ab and anti-rabbit-IgG antibody were used to detect phosphorylated protein as described previously.

**Statistical Analysis**

All experimental data are presented as mean ± SEM. Data were analyzed using paired Student’s t tests to evaluate two-tailed statistical differences when comparing two groups. Differences among three or more groups were evaluated with one-way ANOVA followed by Bonferroni test. Two-way ANOVA followed by Bonferroni multiple comparison test was used to assess differences between multiple treatment groups over different time points. Statistical analysis was performed on GraphPad Prism 8 software (GraphPad, San Diego, CA, USA).

**AUTHOR CONTRIBUTIONS**

Conception and design: T.S. and S.T. Development of methodology: T.S. and S.T. Acquisition of data (e.g., provided animals, acquired and managed patients, provided facilities): T.S., K.M., S.T., S.O., Y.A., K.U., J.J., K.W., H.H., and H. Kishi. Analysis and interpretation of data (e.g., statistical analysis, biostatistics, computational analysis): T.S., K.M., S.T., S.O., Y.A., K.U., J.J., K.W., and T.N. Writing, review, and/or revision of the manuscript: T.S., S.T., M.M., and H. Kiyoi. Administrative, technical, or material support (i.e., reporting or organizing data, constructing databases): H.H., H. Kishi, J.L., and P.S. Study supervision: S.T., M.M., and H. Kiyoi

**CONFLICTS OF INTEREST**

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