

# In vivo CAR-M: Redirecting endogenous myeloid cells with mRNA for cancer immunotherapy

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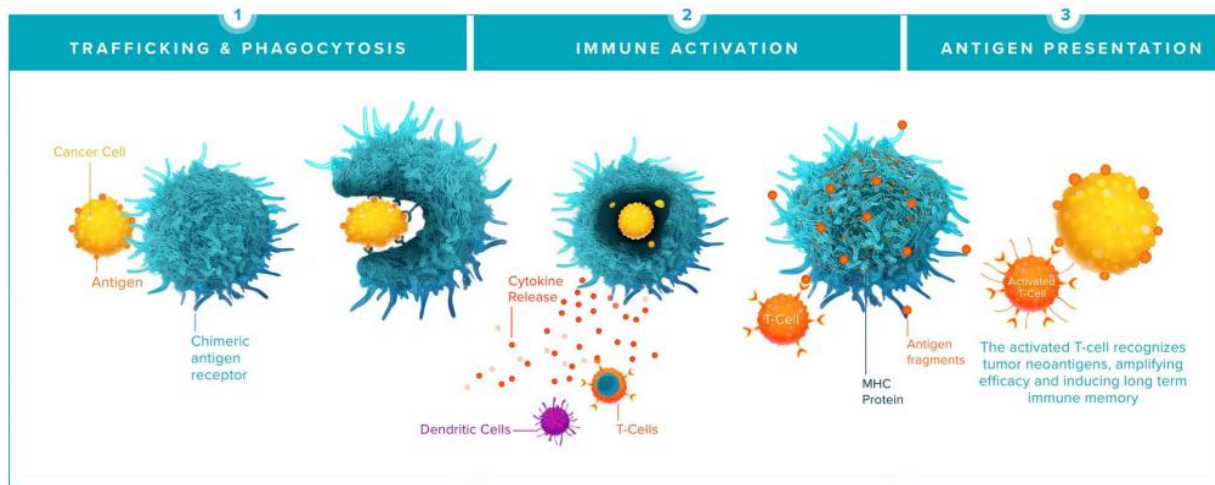


## Introduction

### Engineering myeloid cells for cancer immunotherapy

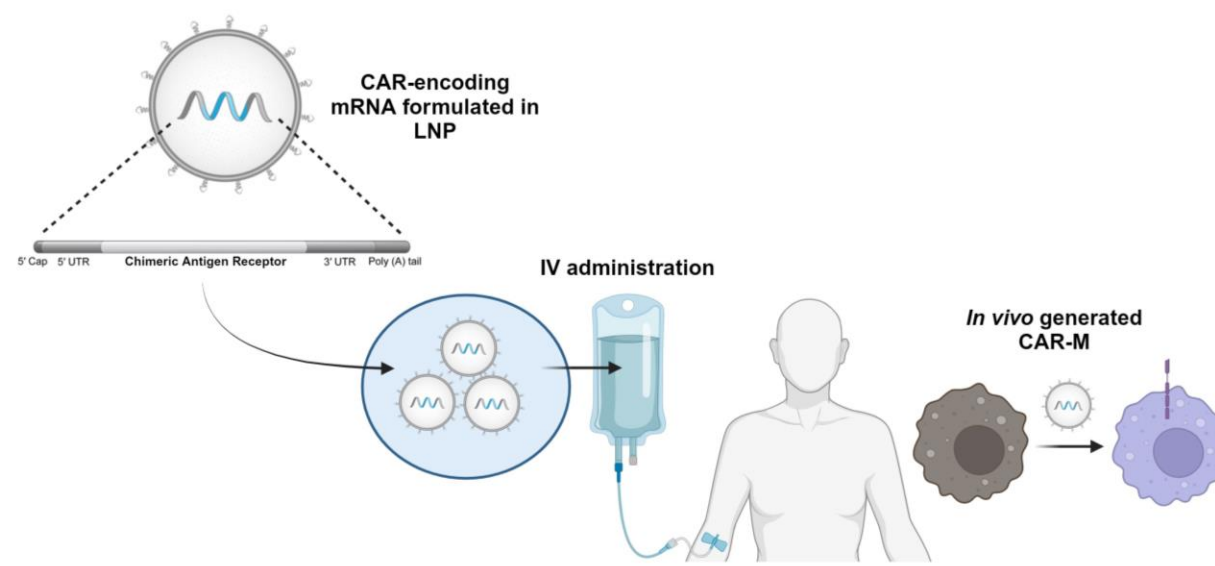
Macrophages, monocytes, and dendritic cells are sentinel cells of the innate immune system that play a central role in phagocytosis, inflammation, immune cell recruitment, and antigen presentation.

Ex vivo chimeric antigen receptor (CAR) macrophage and monocyte cell therapies have demonstrated robust anti-tumor immunity via targeted phagocytosis, cytokine/chemokine release, activation of the tumor microenvironment (TME), T cell recruitment, and epitope spreading in pre-clinical models.



## Objectives

Here, we describe a novel strategy to deliver modified messenger RNA (mRNA) encapsulated in lipid nanoparticles (LNPs) to generate *in vivo* CAR-M (macrophages and monocytes), redirecting endogenous myeloid cells to exert targeted anti-tumor activity.



## Results and conclusions

Human macrophages and monocytes engineered with CAR-encoding mRNA *in vitro* demonstrated high CAR expression and viability.

CAR expression conferred antigen specificity leading to target-specific proinflammatory cytokine secretion and tumor cell killing, with serial killing demonstrated upon tumor rechallenge.

CAR signaling upon antigen binding polarized macrophages toward M1, activating various pro-inflammatory innate immune pathways.

CAR expression following mRNA/LNP administration was predominantly observed in macrophages, monocytes, and dendritic cells compared to immune cells of non-myeloid origin in mice.

*In vivo*, regional and systemic administration of CAR-encoding mRNA led to significant tumor regression in subcutaneous and systemically disseminated metastatic solid tumor models, respectively.

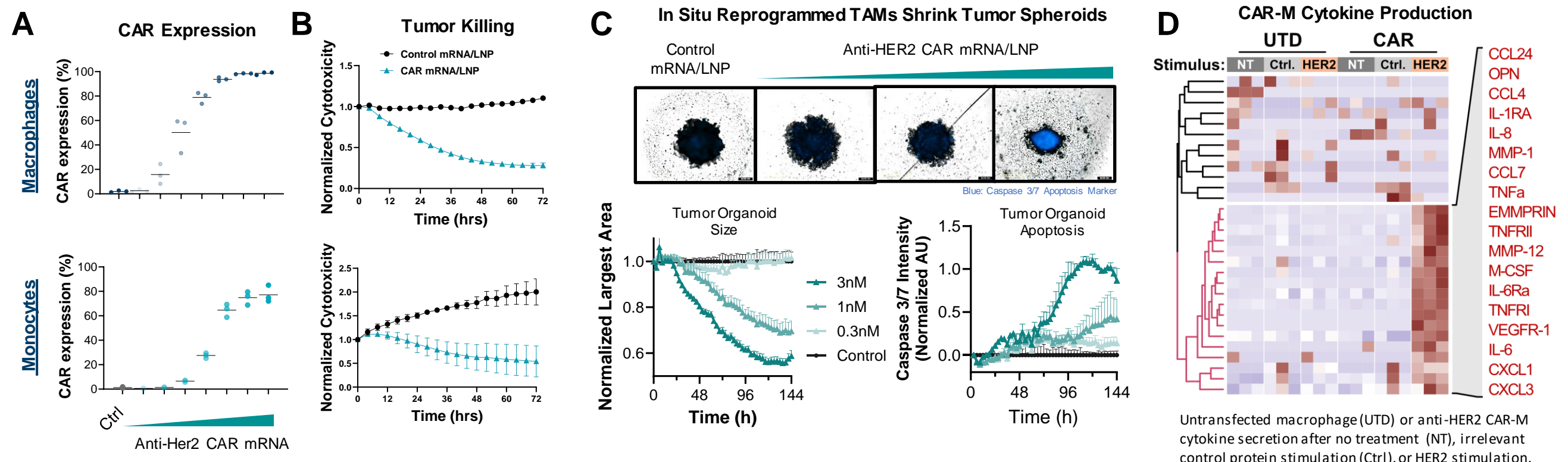
Repeat administration of mRNA/LNP was well tolerated.

✓ CAR-M can be directly produced *in vivo* and directed against tumor associated antigens using mRNA/LNP technology.

✓ This *in vivo* CAR-M platform offers a novel off-the-shelf solution to cancer immunotherapy and has the potential to be applied to numerous target antigens and indications.

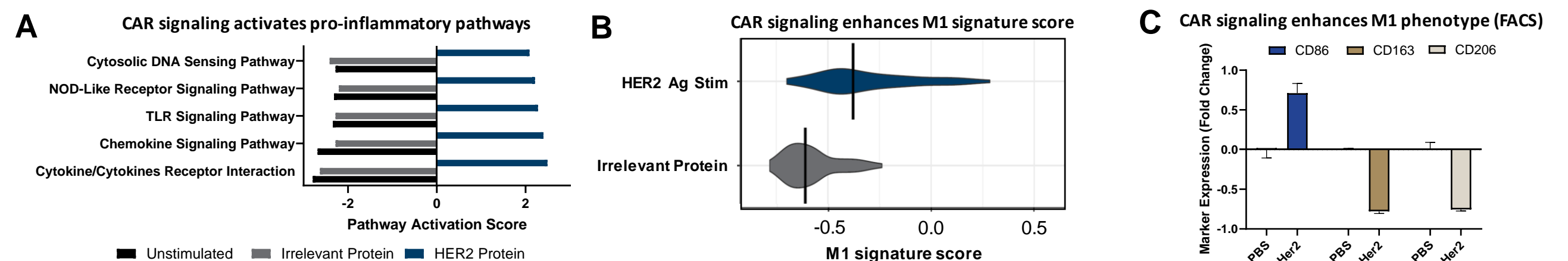
## mRNA/LNP transfection generates highly functional CAR-M

Engineering human macrophages (top) and monocytes (bottom) with anti-HER2 CAR mRNA/LNP leads to titratable CAR expression (A) and target-specific killing against HER2+ tumor cells (B). Direct *in situ* reprogramming of TAMs with anti-HER2 CAR mRNA/LNP in tumor spheroids leads to robust anti-tumor activity (C). mRNA/LNP CAR-M produce a repertoire of pro-inflammatory cytokines and chemokines upon target engagement (D).



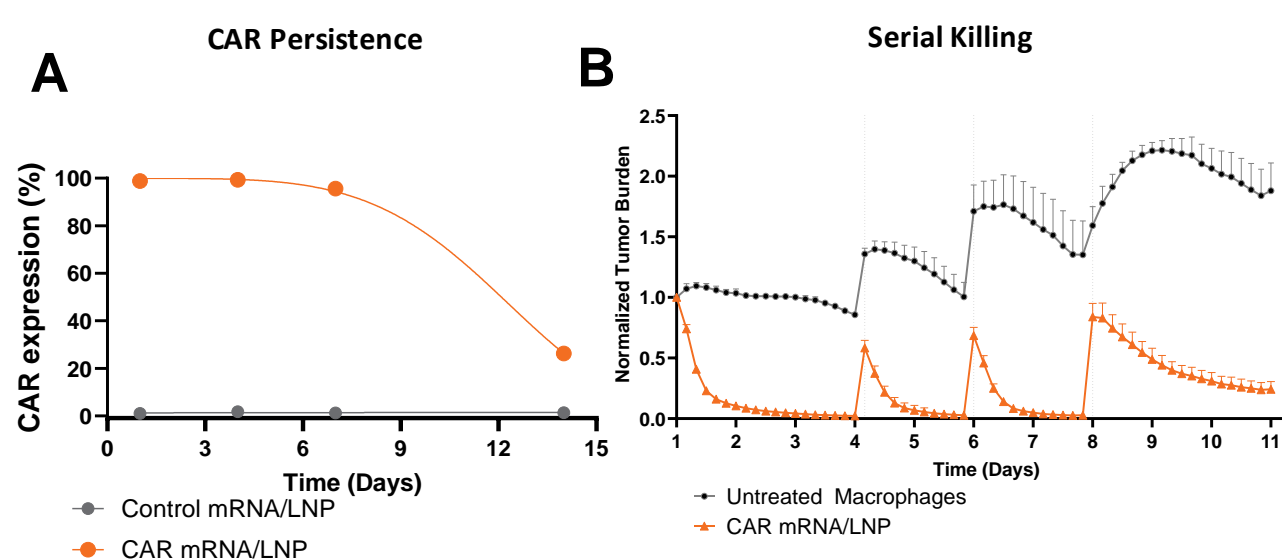
## CAR engagement leads to CAR-M polarization toward M1 phenotype

Target antigen stimulation of human CAR-Macrophages *in vitro* leads to activation of pro-inflammatory transcriptomic pathways (A) and polarization toward the M1 phenotype based on gene expression (B) and flow cytometry (C). Macrophages were transfected with mRNA/LNP CAR then stimulated for 24 hours with an irrelevant protein or the target antigen HER2.



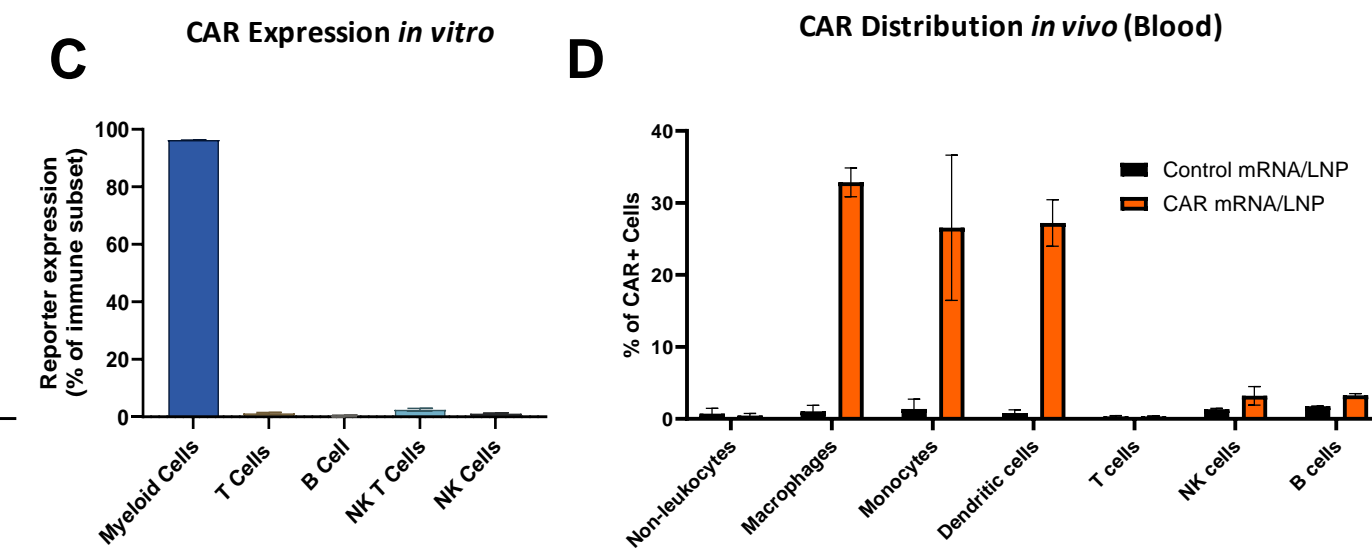
## CAR expression and serial killing capacity following a single mRNA/LNP CAR transfection

Evaluation of CAR expression *in vitro* for 2 weeks (A). HER2+ tumor rechallenge assay shows mRNA/LNP CAR-M serial killing capacity (B).

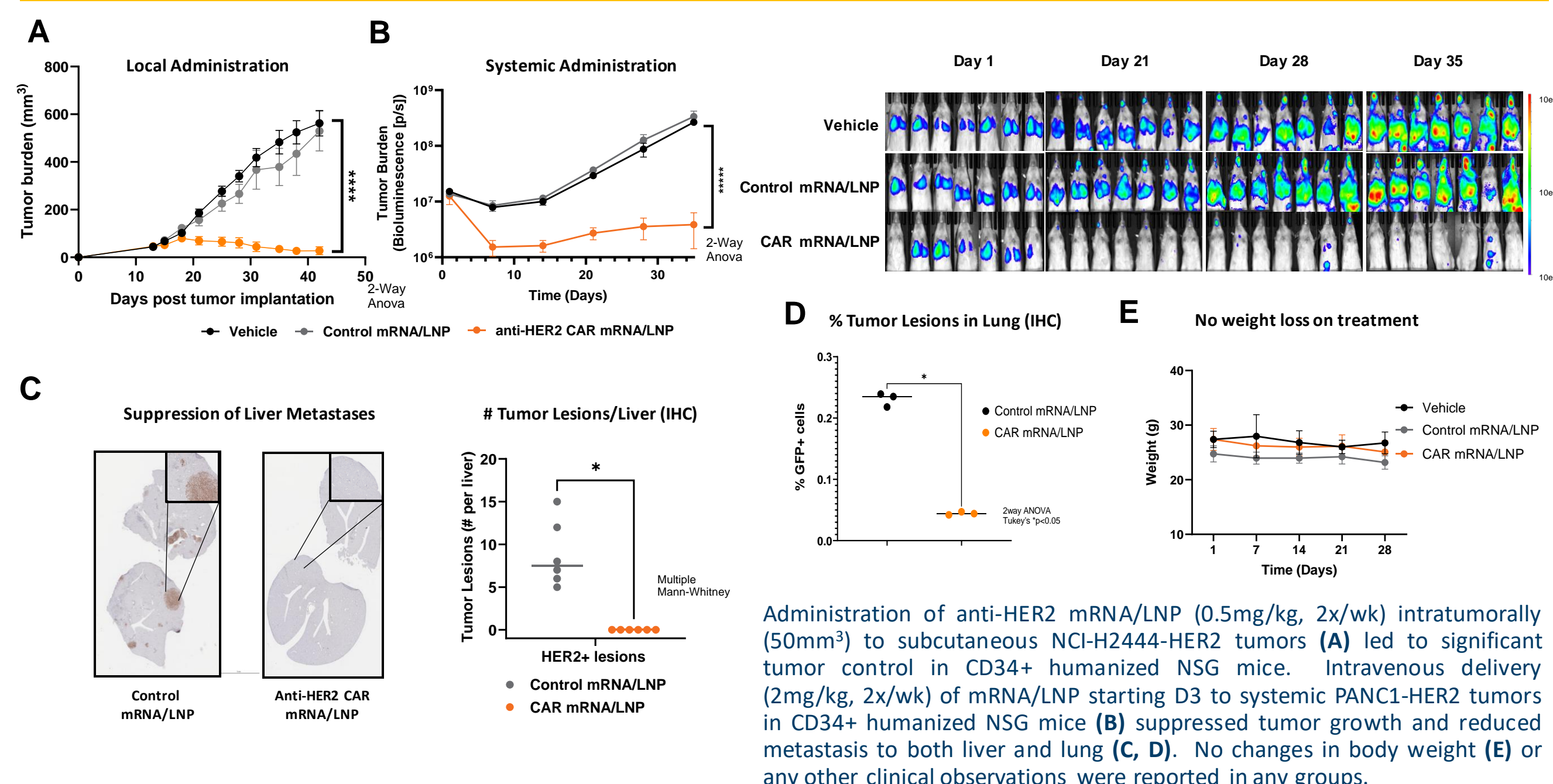


## mRNA/LNP administration preferentially transfects myeloid cells *in vivo*

mRNA/LNP delivery leads to preferential expression of CAR on myeloid cells in human PBMCs *in vitro* (C) or in Balb/c mice *in vivo* (D).



## *In vivo* CAR mRNA/LNP treatment leads to significant tumor control



Administration of anti-HER2 mRNA/LNP (0.5mg/kg, 2x/wk) intratumorally (50mm<sup>3</sup>) to subcutaneous NCI-H2444-HER2 tumors (A) led to significant tumor control in CD34+ humanized NSG mice. Intravenous delivery (2mg/kg, 2x/wk) of mRNA/LNP starting D3 to systemic PANC1-HER2 tumors in CD34+ humanized NSG mice (B) suppressed tumor growth and reduced metastasis to both liver and lung (C, D). No changes in body weight (E) or any other clinical observations were reported in any groups.