



Evaluation of new immunotherapeutic targets for multiple myeloma

Mégane Jassin¹, Murat Cem Köse¹, Guillaume Marcion¹, Margaux Lejeune¹, Marie-Jia Gou², Jacques Fogueune², Tomoko Ise³, Emmanuel Di Valentin⁵, Satoshi Nagata³, Frédéric Baron^{1,4}, Yves Beguin^{1,4}, Marianna Fillet², and Jo Caers^{1,4}

¹ Laboratory of Hematology, GIGA-B, University of Liège, Liège, Belgium
² Laboratory for the Analysis of Medicines, Center of Interdisciplinary Research on Medicines (CIRM), University of Liège, Liège, Belgium
³ National Institutes of Biomedical Innovation, Health and Nutrition, Osaka University, Osaka, Japan
⁴ Department of Hematology, CHU de Liège, Liège, Belgium
⁵ Viral Vectors, GIGA, University of Liège, Liège, Belgium

Introduction

- Multiple myeloma (MM) is an incurable hematologic cancer characterized by uncontrolled proliferation and accumulation of monoclonal plasmocytes in the bone marrow.
- Within the last decade, chimeric antigen receptor (CAR) immunotherapy has become a promising treatment option for MM and B-cell maturation antigen (BCMA) is the main antigen of the currently available CAR-T treatment.

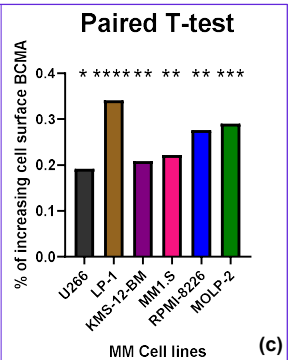
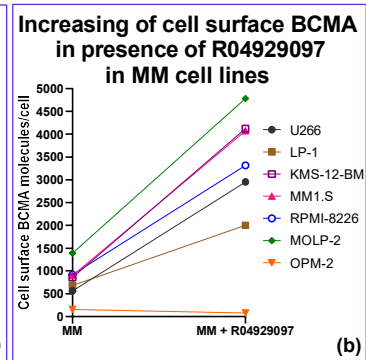
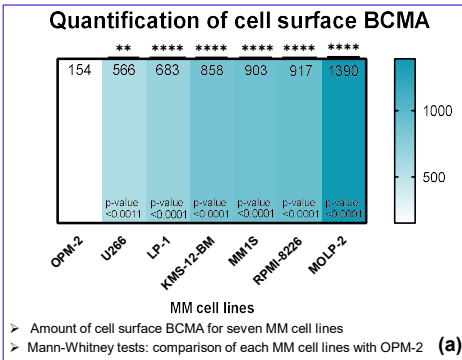
Objective

This project aims to validate the presence of different surface antigens on MM cells; BCMA, Fc receptor-like 5 (FCRL5), and a novel tumor-specific antigen endothelin receptor B (ETRB).

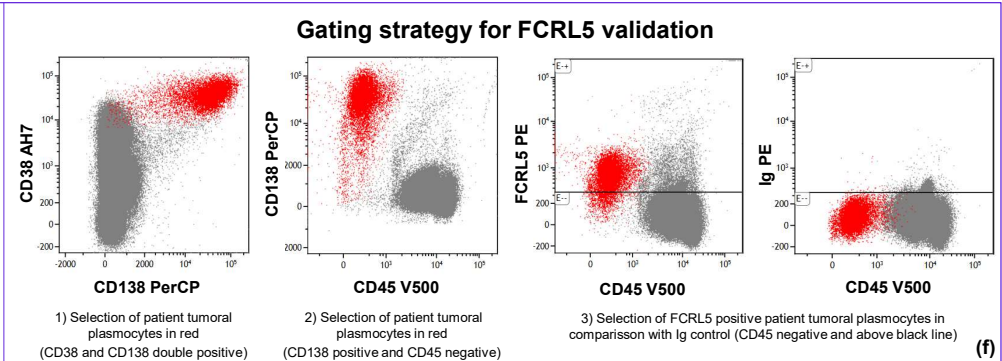
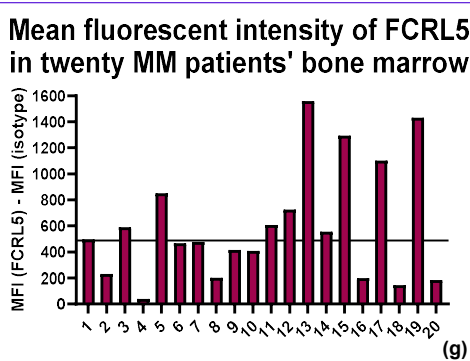
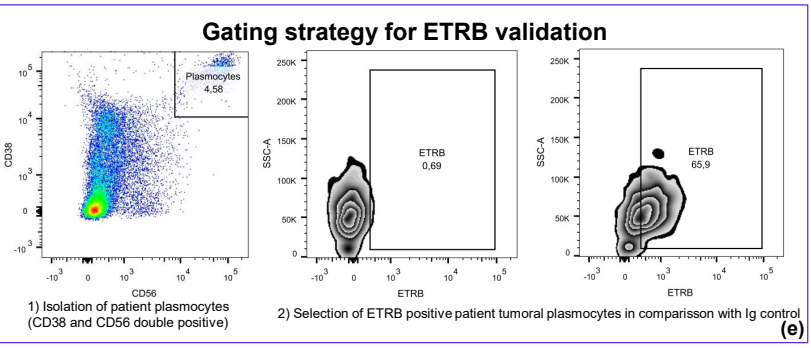
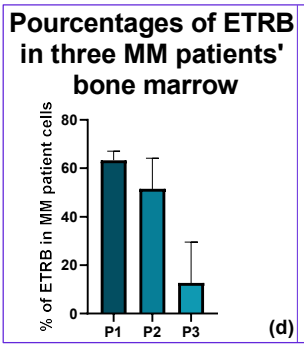
Methods and Results

1) BCMA was quantified in seven MM cell lines using the BD Quantibrite™ Beads-PE kit (a). The MM cell line OPM-2 was used as a negative control (154). MOLP-2 expresses the highest cell surface BCMA (1390), followed by RPMI-8226 (917), MM1.S (903), KMS-12-BM (858), LP-1 (683) and U266 (566).

2) As a positive control, MM cell lines were incubated with a γ -secretase inhibitor (R04929097), which prevents natural cleavage of cell surface BCMA (b). It resulted in a higher cell surface BCMA expression in tested cell lines (c).



3) A proteomic analysis was performed on six different MM cell lines to uncover a new tumoral target (ETRB). ETRB was successfully validated on three MM patients' bone marrow samples (d) using flow cytometry and randomomab49 (e). Lastly, the presence of FCRL5 was also validated (f) on twenty MM patient's bone marrow samples with almost 100% expression frequency (g).



Conclusion

In conclusion, this data validates that BCMA, ETRB and FCRL5 are localized to the tumoral plasmocytes' cell surface. Thus, these antigens constitute the development of new CAR-T immunotherapies.

Acknowledgments and contact

Acknowledgments : hematology lab members of University of Liège, department of hematology of CHU of Liège, Osaka University, Viral Vectors platform of University of Liège
 Contact : Mégane Jassin, PhD student at University of Liège (Belgium) – GIGA, mail address : megane.jassin@uliege.be