Characterization and comparison of NKTR-255, a polymer-conjugated IL-15, and IL-15 superagonists



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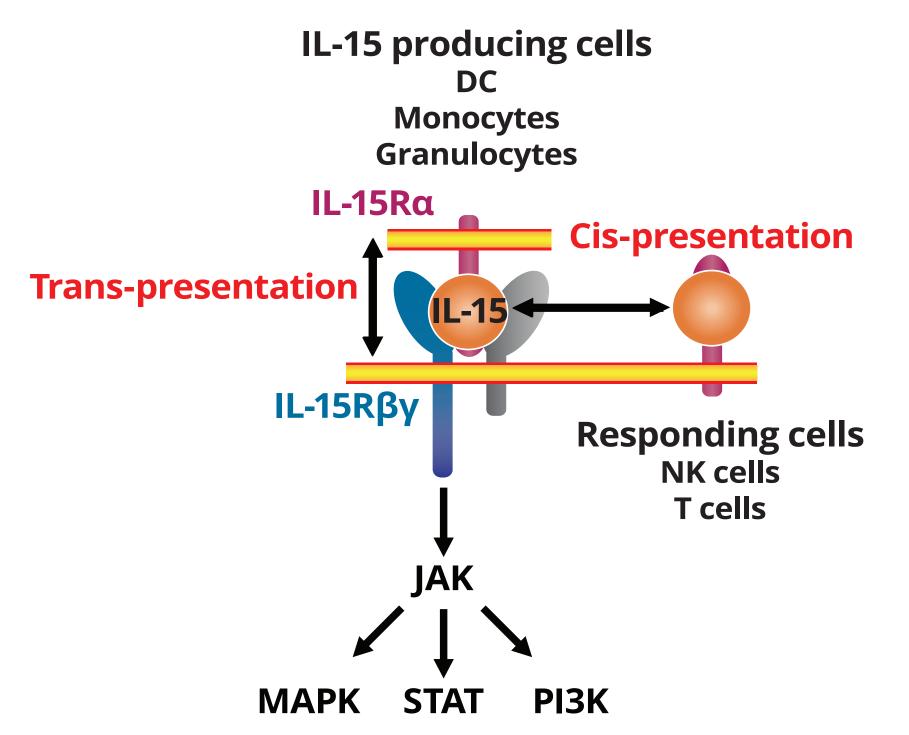
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Introduction

IL-15 is a cytokine that activates and provides survival benefit to NK and CD8 T cells and has great potential for the treatment of cancer. Exploiting the therapeutic value of native IL-15 has been challenging due to its unfavorable pharmacokinetic properties and poor tolerability. Several IL-15-based proteins aimed to overcome these problems are currently in development. NKTR-255 is a polymer-conjugated IL-15 that is designed to retain a binding affinity to IL-15 receptor alpha (IL-15Rα). We investigate the pharmacological properties of NKTR-255 and IL-15 superagonists, IL-15/IL-15Rα complex molecules¹, to explore differentiations between the IL-15Rα dependent and independent cytokines, respectively.

IL-15-Mediated Signaling Through Cis- and Trans-Presentation²



IL-15 binds the unique IL-15Rα chain and presents to the IL-2/IL-15Rβγ complex on the same (cis) or adjacent cells (trans). Engagement of the IL-2/IL-15Rβγ complex can induce JAK-STAT signaling, increasing survival and proliferation. This process is crucial for the proper support of IL-15 biology.³

Results

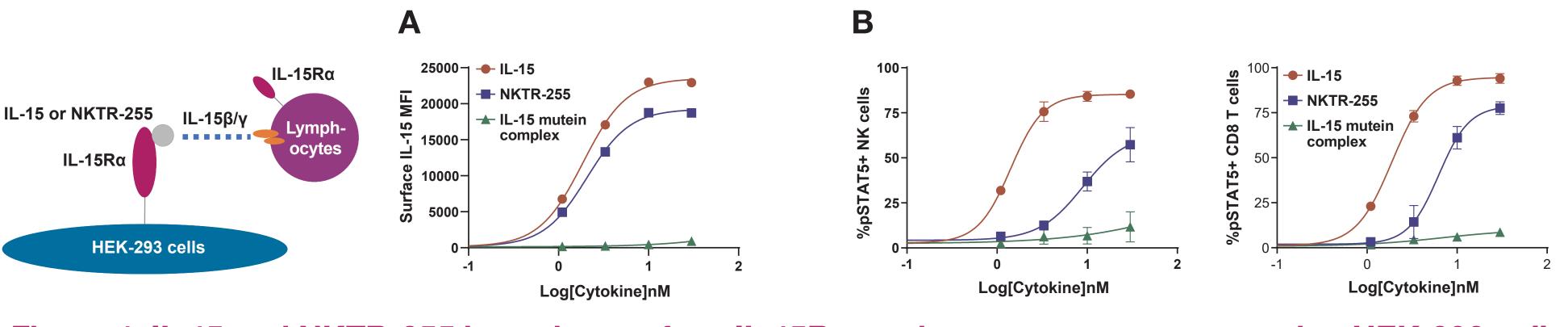


Figure 1. IL-15 and NKTR-255 bound to surface IL-15Rα on the receptor-overexpressing HEK-293 cells and the surface-bound cytokines induced phosphorylation of STAT5 in human NK and CD8 T cells

IL-15Rα overexpressing HEK-293 cells were incubated with rhlL-15, NKTR-255 or IL-15 mutein complex for 30 minutes. Surface binding of the cytokines was measured by flow cytometry (A). HEK-293 cells pre-incubated with rhlL-15, NKTR-255 or IL-15 mutein complex were co-cultured with human PBMC for 20 minutes and the pSTAT5+ population within CD56+ NK and CD8+ T cells was measured by flow cytometry (B).

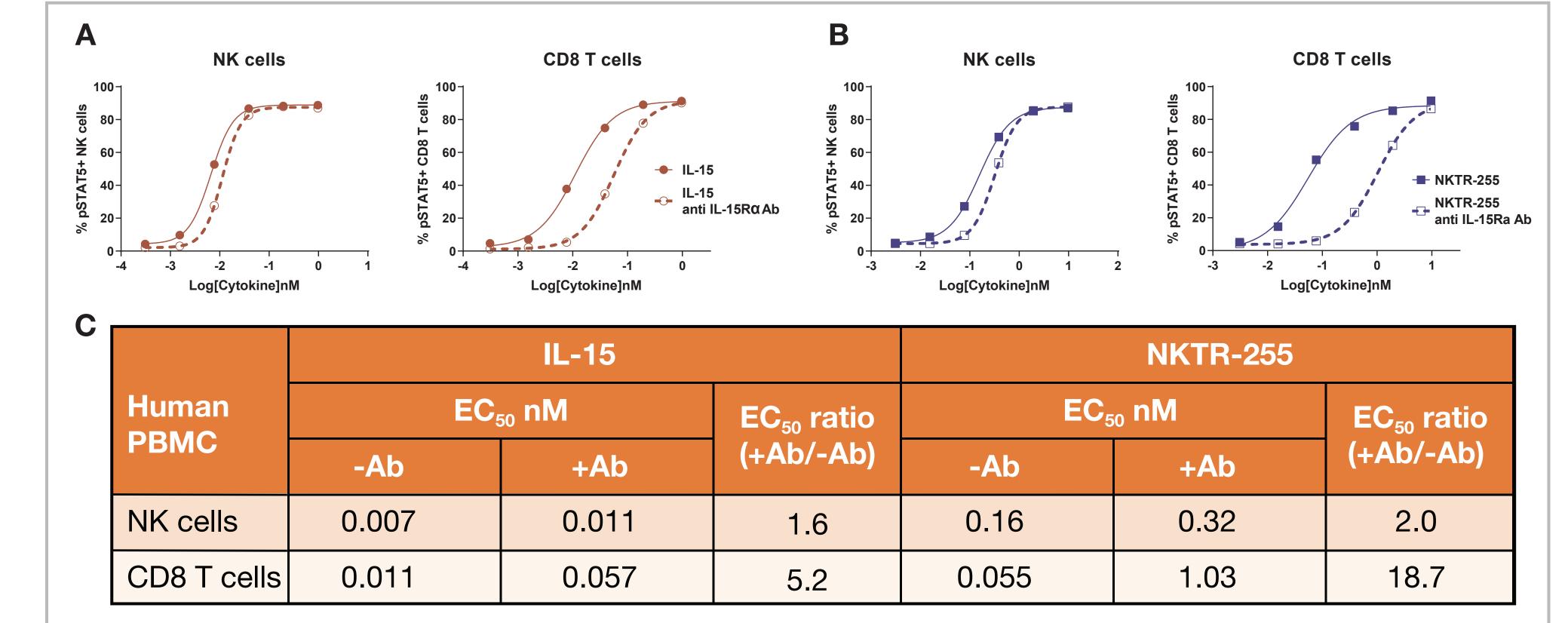


Figure 2. IL-15Rα was necessary for optimal IL-2Rβγ engagement of IL-15 and NKTR-255 on NK and CD8 T cells

Human PBMCs were pre-incubated with a neutralizing antibody against IL-15Rα for 15 minutes and then stimulated with rhIL-15 (A) or NKTR-255 (B) for 20 minutes. The pSTAT5+ population within CD56+ NK and CD8+ T cells was measured by flow cytometry. EC₅₀ values were calculated from concentration-response curves (C).

Results

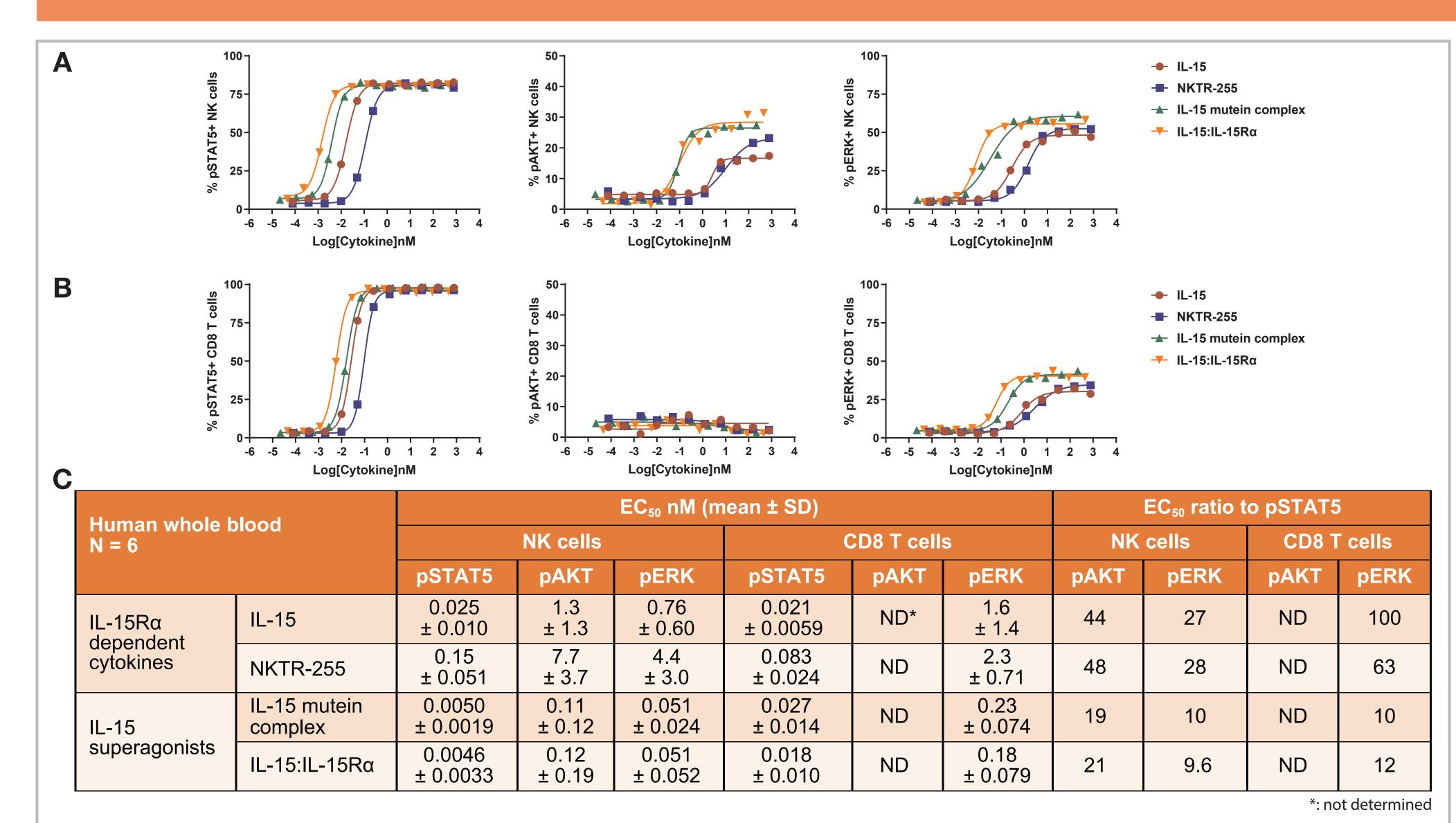


Figure 3. NKTR-255 maintained similar signaling profile as IL-15, in contrast to IL-15 superagonists

Human whole blood was stimulated with rhIL-15, NKTR-255, IL-15 mutein complex or IL-15:IL-15Rα for 20 minutes. Induction of phosphorylated STAT5, AKT and ERK1/2 in CD56+ NK cells (A) or CD8+ T cells (B) was measured by flow cytometry. EC₅₀ values were calculated from concentration-response curves (C).

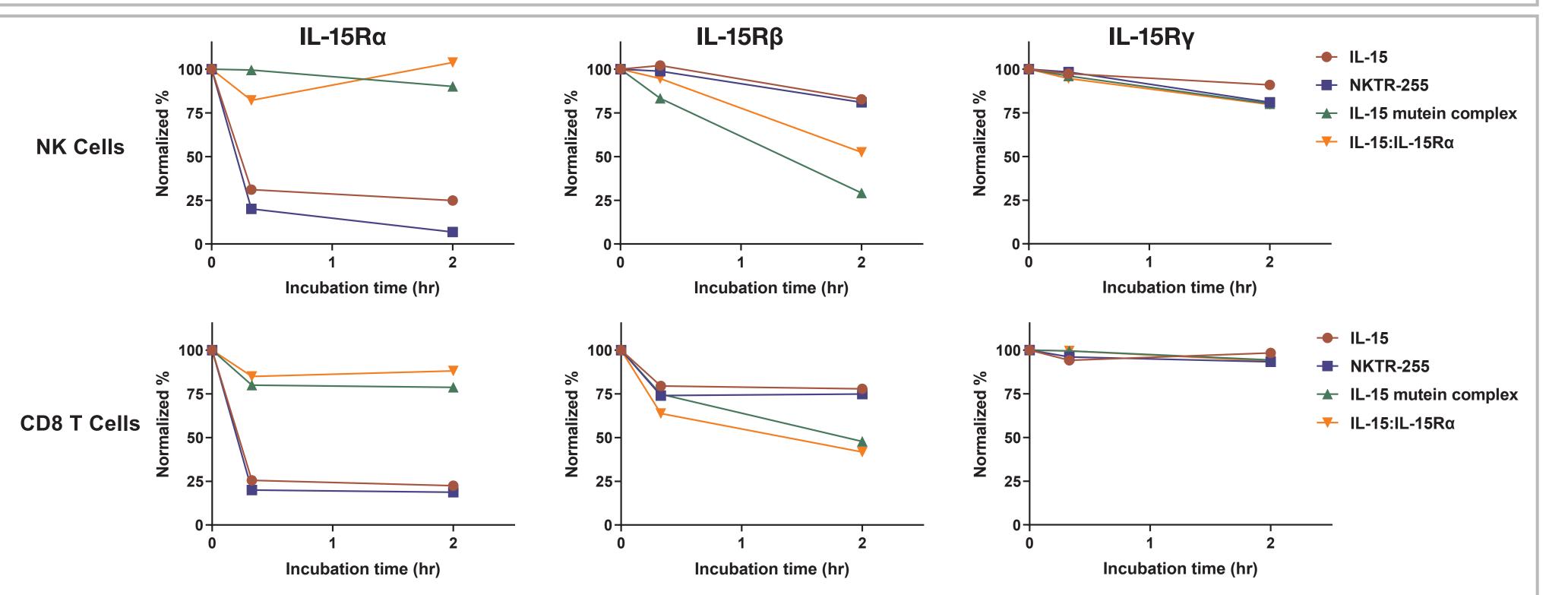


Figure 4. IL-15 and NKTR-255 reduced the surface expression of IL-15Rα on NK and CD8 T cells whereas IL-15 superagonists reduced IL-2Rβ expression

Human whole blood was incubated with rhIL-15 (2.5 nM), NKTR-255 (23 nM), IL-15 mutein complex (0.25 nM) or IL-15:IL-15Rα (0.5 nM) for 20 minutes or 2 hours. Surface expression of IL-15Rα, IL-2Rβ and IL-2Rγ in CD56+ NK and CD8+ T cells was measured by flow cytometry. Each MFI value was normalized with the MFI value of the cytokine-untreated sample.

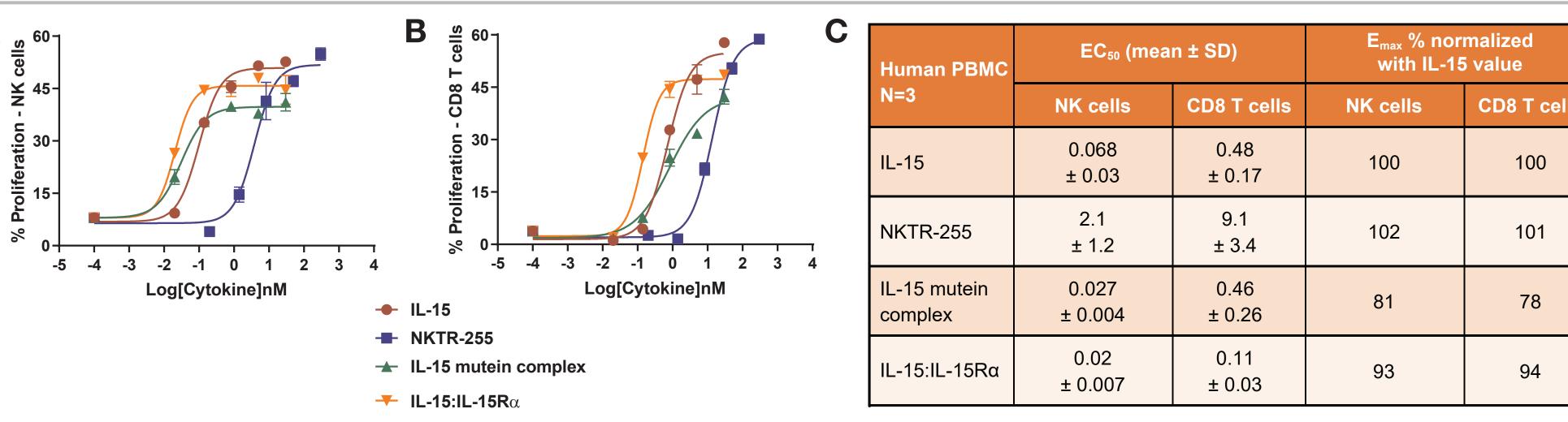


Figure 5. IL-15 and NKTR-255 induced proliferation of human NK and CD8 T cells similarly to IL-15 superagonists

Human PBMCs were labeled with CFSE and cultured for 5 days in the presence of rhlL-15, NKTR-255, IL-15 mutein protein or IL-15:IL-15Rα. Proliferation of CD56+ NK cells (A) or CD8+ T cells (B) was assessed by flow cytometry.

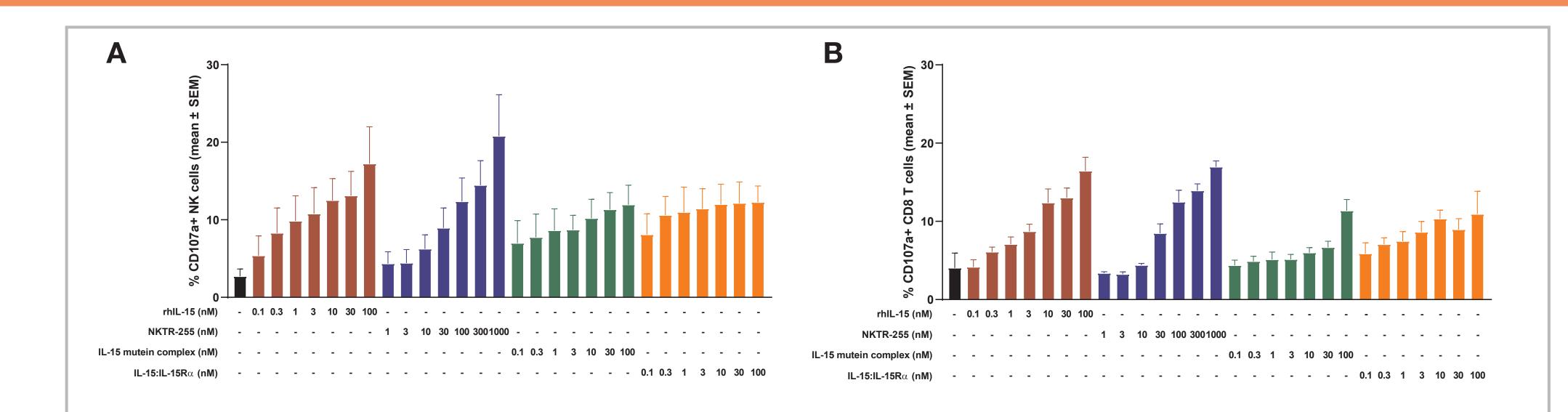


Figure 6. IL-15 and NKTR-255 induced higher CD107a+ (degranulation marker) NK and CD8 T cells as compared to IL-15 superagonists

Human PBMCs from 3 healthy donors were cultured overnight in the presence of rhIL-15, NKTR-255, IL-15 mutein complex or IL-15:IL-15Rα. Surface CD107a on CD56+ NK cells (A) or CD8+ T cells (B) was measured by flow cytometry.

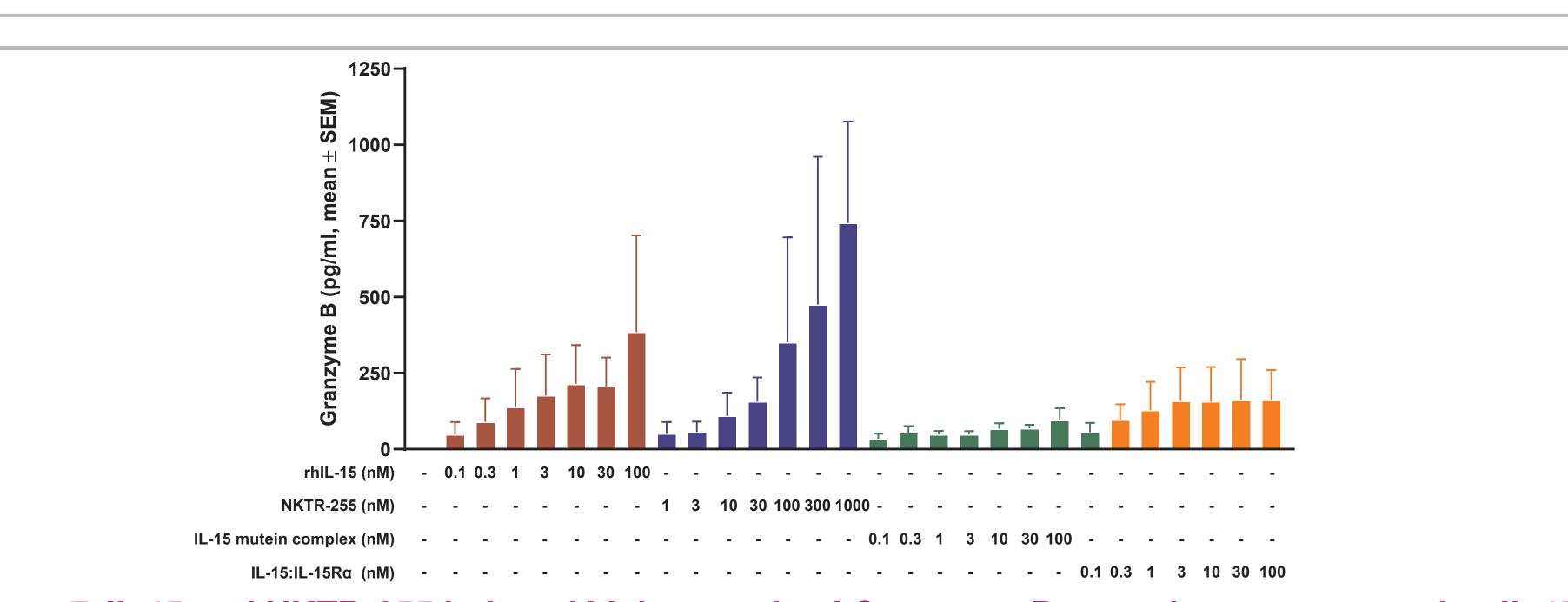


Figure 7. IL-15 and NKTR-255 induced higher maximal Granzyme B secretion as compared to IL-15 superagonists

Human PBMCs from 3 healthy donors were cultured overnight in the presence of rhIL-15, NKTR-255, IL-15 mutein complex or IL-15:IL-15Rα. Secreted Granzyme B protein was quantified in cell-free supernatants by ELISA.

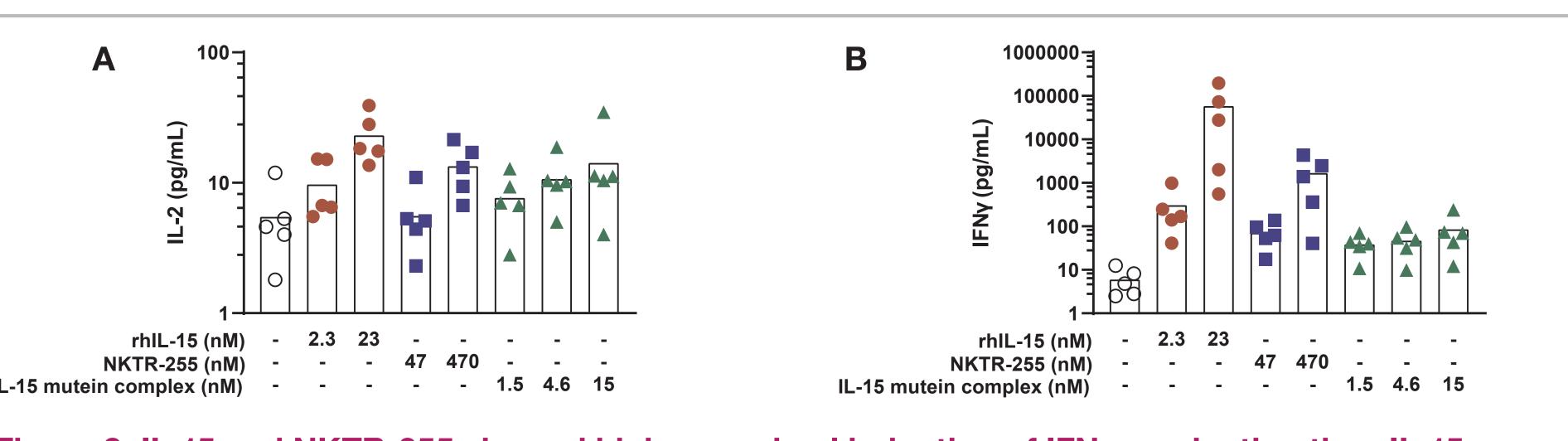


Figure 8. IL-15 and NKTR-255 showed higher maximal induction of IFNγ production than IL-15 superagonist

Human PBMCs from 5 healthy donors were stimulated with rhlL-15, NKTR-255, IL-15 mutein complex. After 48 hours secreted IL-2 (A) or IFNy (B) was quantified in cell-free supernatants by a multiplex MSD assay.

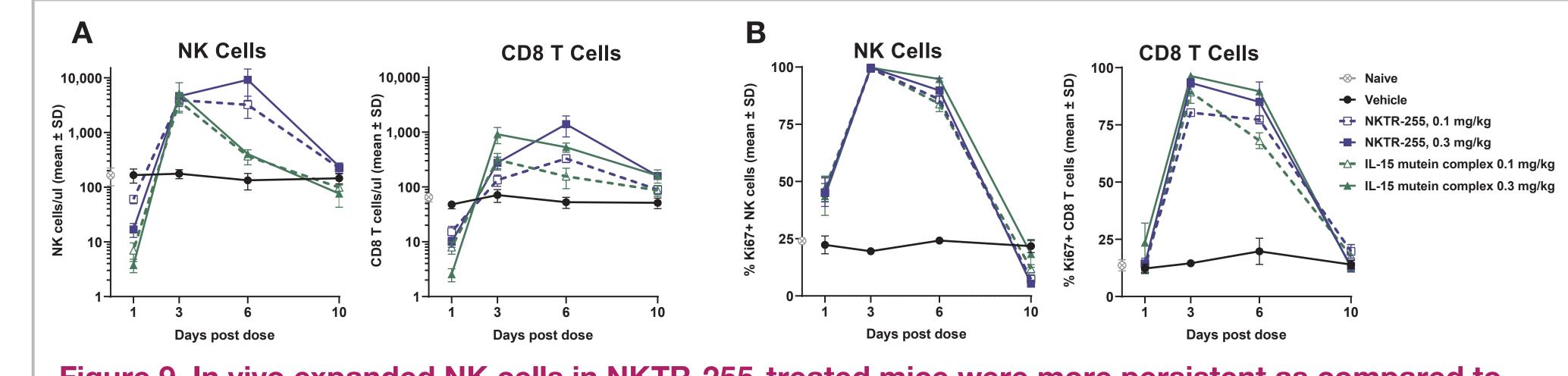


Figure 9. In vivo expanded NK cells in NKTR-255-treated mice were more persistent as compared to IL-15 superagonist

Balb/c mice (N=4/group) received a single IV dose of 0.1 or 0.3 mg/kg of NKTR-255 or IL-15 mutein complex. Blood samples were collected at day 1, 3, 6 and 10 following dosing to assess absolute number (A) or Ki67+ population (B) in NKp46+ NK cells and CD8+ T cells by flow cytometry.

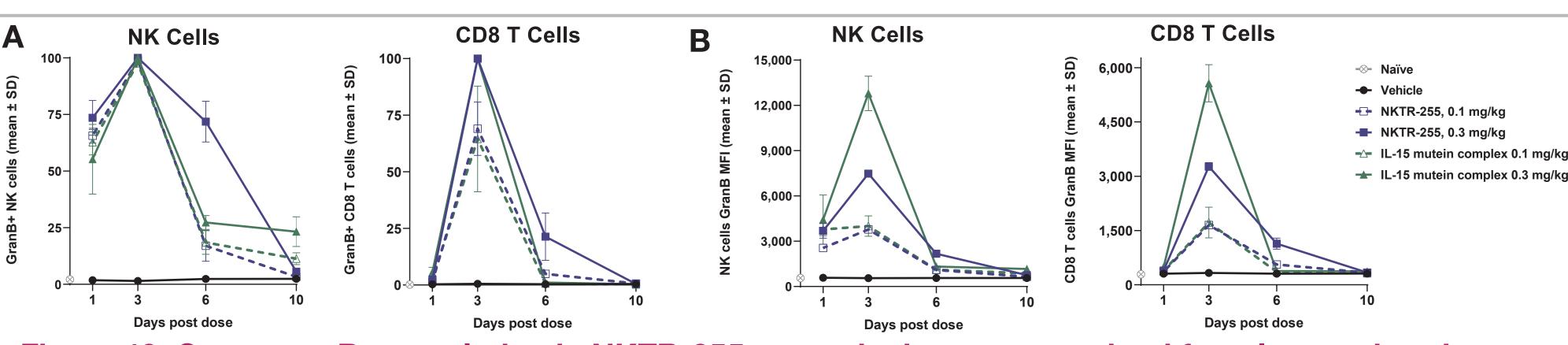


Figure 10. Granzyme B+ population in NKTR-255-treated mice was sustained for a longer duration while the peak expression was lower in peripheral NK cells compared to IL-15 superagonist

Balb/c mice (N=4/group) received a single IV dose of 0.1 or 0.3 mg/kg of NKTR-255 or IL-15 mutein complex. Blood samples were collected at day 1, 3, 6 and 10 following dosing to assess Granzyme B+ population (A) or Granzyme B expression (B) in NKp46+ NK and CD8+ T cells by flow cytometry.

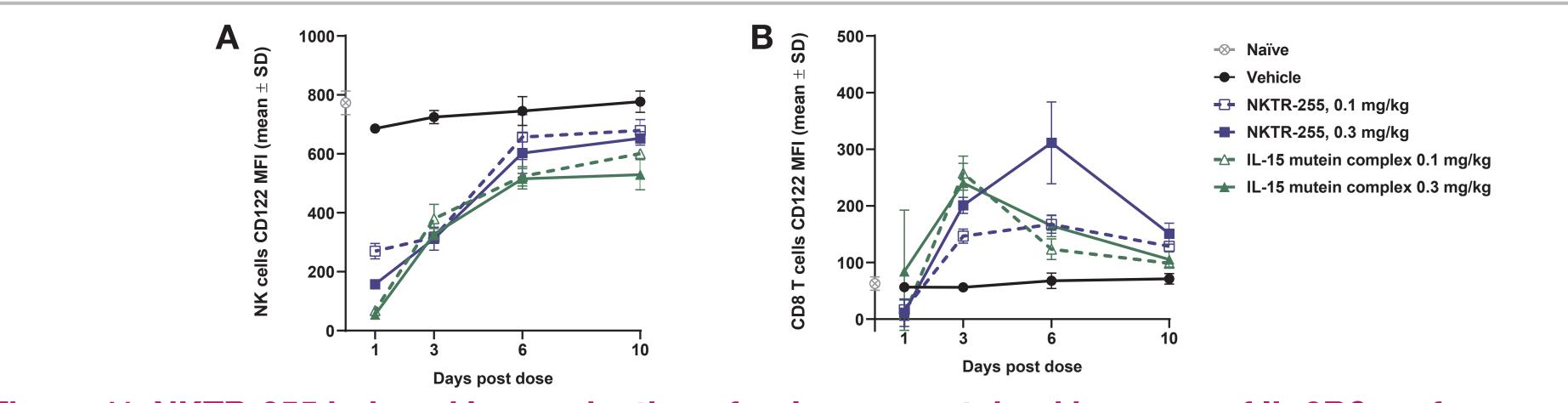


Figure 11. NKTR-255 induced less reduction of or longer sustained increase of IL-2Rβ surface expression relative to IL-15 superagonist on NK cells or CD8+ T cells, respectively

Balb/c mice (N=4/group) received a single IV dose of 0.1 or 0.3 mg/kg of NKTR-255 or IL-15 mutein complex. Blood samples were collected at day 1, 3, 6 and 10 following dosing to assess IL-2Rβ (CD122) expression on peripheral NKp46+ NK (A) or CD8+ T cells (B) by flow cytometry.

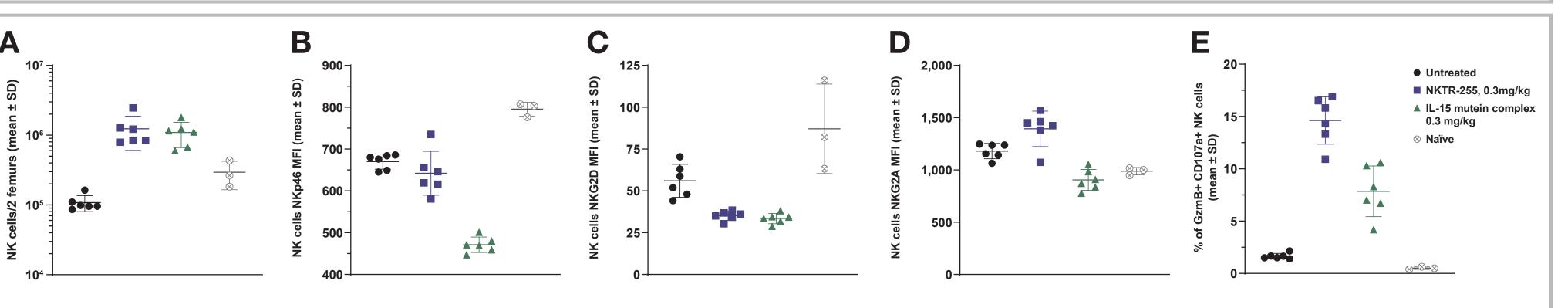


Figure 12. NKTR-255 increased Granzyme B+ CD107a+ intra bone marrow NK cells in a Daudi B lymphoma model as compared to IL-15 superagonist

SCID mice (N=6/group) inoculated with Daudi cells were treated with two doses of NKTR-255 or IL-15 mutein complex (0.3 mg/kg IV, 14 and 21 days after inoculation). The bone marrow from both femurs was collected 3 days after the second treatment to assess absolute number (A), NK receptor expression: NKp46 (B), NKG2D (C), NKG2A (D) or Granzyme B+ CD107a+ population (E) in NKp46+ NK cells.

Conclusions

- NKTR-255 is an IL-15Rα dependent cytokine similar to IL-15
- NKTR-255 binds surface IL-15Rα and the surface-bound NKTR-255 mediates signaling
- IL-15Rα is necessary for optimal IL-2Rβγ engagement of IL-15 and NKTR-255
- NKTR-255 has similar in vitro pharmacological properties to IL-15 and has different properties when compared to IL-15 superagonists
- Signaling profile
- IL-2Rβ internalization
- Degranulation and Granzyme B/IFNγ secretion
- In vivo expanded NK cells in NKTR-255-treated mice may have properties more favorable for anti-tumor
- therapy when compared to expanded NK cells in IL-15 superagonist-treated mice
- Prolonged survival
- Substantial NK cytotoxic function

References

- 1. Rubinstein et al. Proc Natl Acad Sci USA. 2006;103:9166-71.
- Marcais et al. Front Immunol. 2013;4:450.
 Stonier and Schluns. Immunol Lett. 2010;127:85-92.

