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Teiko.bio

## Why measure the immune state in blood in solid tumors?

Focus on colorectal cancer

**High-parameter cytometry for clinical trials made simple**

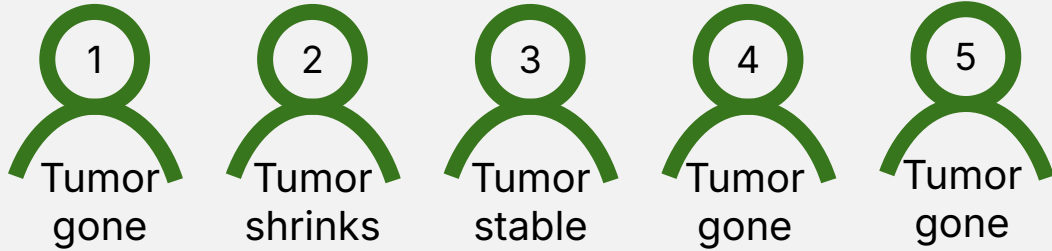


**Ramji Srinivasan**  
**Teiko CEO**

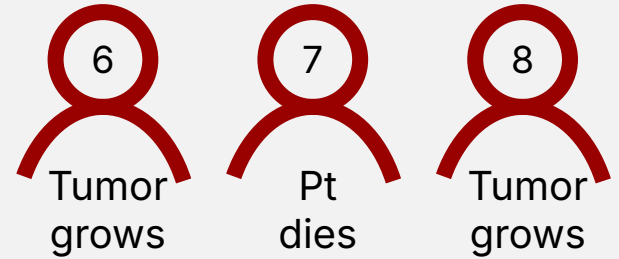
**Who cares about this  
question?**

**Drug developers who  
want to reproducibly  
cure cancer.**

**Assume \$5M spent on a 12 month drug program with 8 enrolled patients...**



**Some of my patients did not respond**

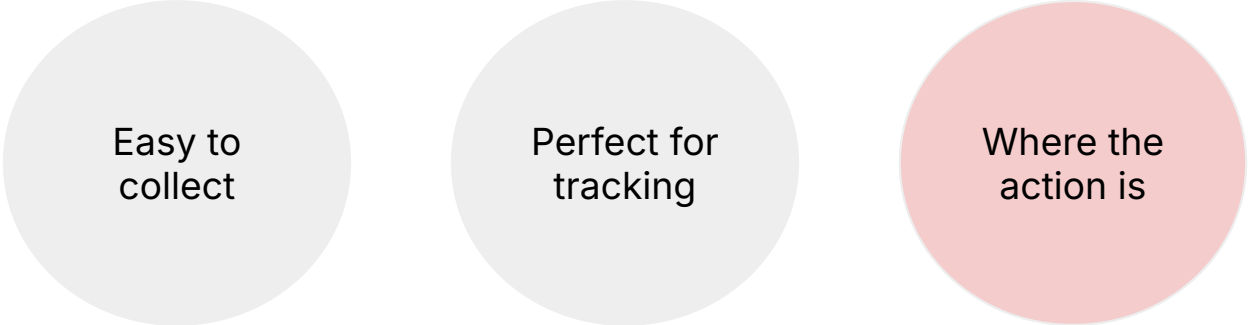


Do you roll the dice again for a Phase 2 for \$20M?

**Claim:**

**Measuring the immune  
cells in blood can lead  
to reproducible cures.**

**Why blood?**



Easy to  
collect

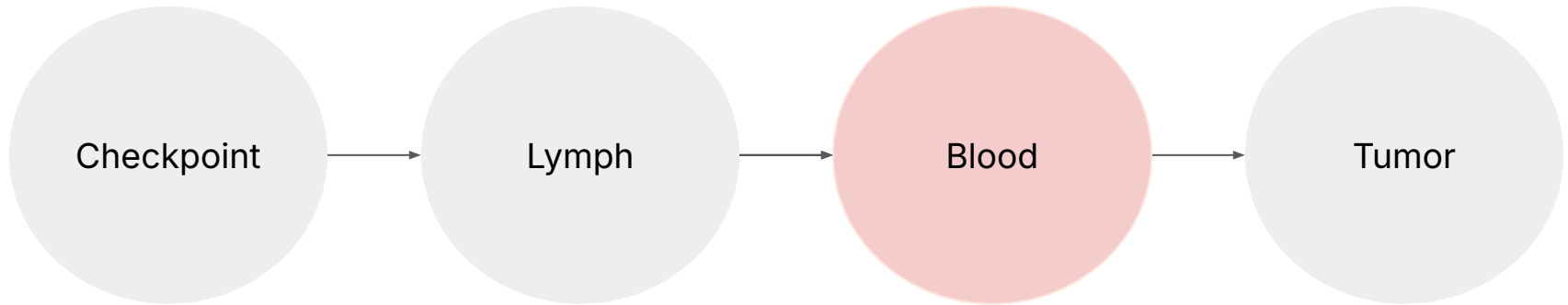
Perfect for  
tracking

Where the  
action is

**Are you sure there is  
action in the blood?**



# Pretty sure: emerging view of how immunotherapy works



Immune cells broadly follow this flow: [Spitzer et al, Cell 2023.](#)



Mouse



Human

# Mouse: [Spitzer](#) et al. showed that peripheral immune cells are required for immunotherapy in mouse models



Other studies have replicated these findings in different mouse models

[Chamoto et al.](#)  
[PNAS 2017](#)

**PNAS**

[Fransen et al.](#) [JCI](#)  
[Insight 2018](#)

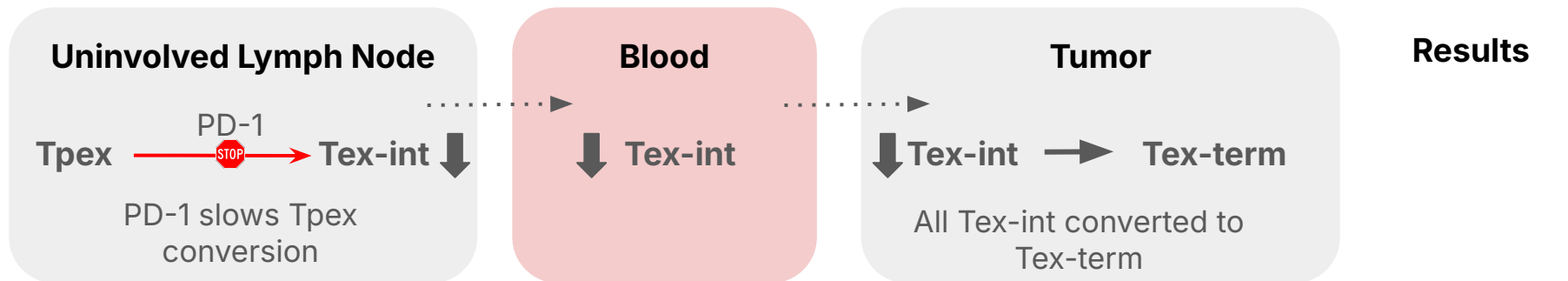
**JCI** insight

[Dammeijer et al.](#)  
[Cancer Cell 2020](#)

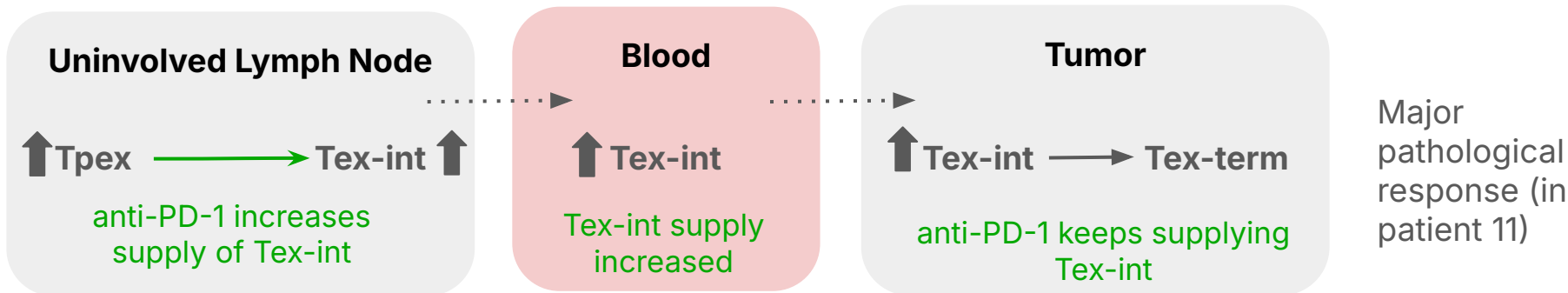
**Cancer Cell**

# Immune cell traffic through blood allows for sustained tumor response

Before therapy



After therapy



T<sub>pex</sub>: Progenitor Exhausted T Cell (PD-1<sup>+</sup> TCF-1<sup>+</sup>)  
T<sub>ex-int</sub>: Exhausted Intermediate T Cell (PD-1<sup>+</sup> TCF-1<sup>-</sup> CD69<sup>-</sup>)  
T<sub>ex-term</sub>: Terminally Exhausted T Cell (PD-1<sup>+</sup> TCF-1<sup>-</sup> CD69<sup>+</sup>)

**OK, blood it is, but  
how to measure?**

# Cytometry: a tool to measure hundreds of immune populations



Attribute	Before Treatment	After Treatment
T cells proportion of live cells	9%	96%
B cells proportion of live cells	83%	55%
NK cells proportion of live cells	57%	68%
Number of T cells	73,322	782,101
Number of B cells	676,192	448,079
Number of NK cells	464,373	553,989
Live Cells	814,689	901,259

# Paper tour

# Blood-based markers of immune response for colorectal cancer found via cytometry

Study	Title	Population Studied	Key Peripheral Blood Findings	Techniques Used
<a href="#">Krijgsman et al. (2019)</a>	Characterization of Circulating T-, NK-, and NKT Cell Subsets in Patients with Colorectal Cancer: The Peripheral Blood Immune Cell Profile	71 CRC patients and 19 healthy donors	Reduced natural cytotoxicity receptors (NKp44, NKp46) on NK and NKT-like cells; high % of CD16 <sup>+</sup> NKT-like cells correlated with worse survival.	Flow Cytometry
<a href="#">Zhang et al. (2024)</a>	Changes in subset distribution and impaired function of circulating natural killer cells in patients with colorectal cancer	107 CRC patients and 182 healthy controls	"This is shown by the decreased frequency and absolute count of CD56 <sup>dim</sup> CD16 <sup>+</sup> NK cells with antitumor effects, contrary to the increased frequency of CD56 <sup>bright</sup> NK and CD56 <sup>dim</sup> CD16 <sup>-</sup> NK cells with poor or ineffective antitumor effects."	Flow Cytometry
<a href="#">Shinko et al. (2019)</a>	Mass Cytometry Reveals a Sustained Reduction in CD16 <sup>+</sup> Natural Killer Cells Following Chemotherapy in Colorectal Cancer Patients	10 patients	Decrease in CD56 <sup>dim</sup> CD16 <sup>+</sup> NK cells; increase in CD56 <sup>bright</sup> NK cells and CD56 <sup>dim</sup> CD16 <sup>-</sup> NK cells.	Mass Cytometry



# Characterization of Circulating T-, NK-, and NKT Cell Subsets in Patients with Colorectal Cancer: The Peripheral Blood Immune Cell Profile

Number of Patients	71 CRC patients; 19 healthy donors
Tissue Type	PBMC
Number of timepoints	Single pretreatment time point
Number of markers	9

Healthy

Normal levels of **regulatory T cells (Tregs)**, helps maintain immune balance.

NK cells and NKT-like cells had **↑ of natural cytotoxicity receptors** (NKp44, NKp46) → efficiently detect and attack abnormal cells.

CRC

**↑** Higher Tregs (CD127<sup>low</sup> CD25<sup>+</sup>).

**↓** NK cells and NKT-like cells (low NKp44 and NKp46) limiting their ability to kill cancer cells effectively.

For CRC patients, immune system had an increased number of “bad” suppressive cells and a reduced ability of “good” NK and NKT-like cells to kill cancer cells.

# Changes in subset distribution and impaired function of circulating natural killer cells in patients with colorectal cancer

Number of Patients	Tissue Type	Method of Analysis	Number of Markers	Number of Timepoints
289	Peripheral Blood	Flow Cytometry	10 + 13	1

## Before

Overall frequency of NK cells in CRC patients were reduced compared to healthy controls.

## After

↓ in secretion of IFN- $\gamma$  by NK cells.  
Worse NK cell functionality correlates with disease getting worse.

## Impact

As the tumor gets worse, there is a corresponding change in NK cell expression.

# Mass Cytometry Reveals a Sustained Reduction in CD16+ Natural Killer Cells Following Chemotherapy in Colorectal Cancer Patients

Number of Patients	Tissue Type	Method of Analysis	Number of Markers	Number of Timepoints
10	PBMCs	Mass Cytometry	35	3

## Before

↑ levels of CD16<sup>+</sup>NK cells.  
↑ in frequency of CD56<sup>dim</sup> CD16<sup>-</sup> NK cells.

## After

↓ in CD16<sup>+</sup> NK cells.  
↑ in less mature NK cell subsets.

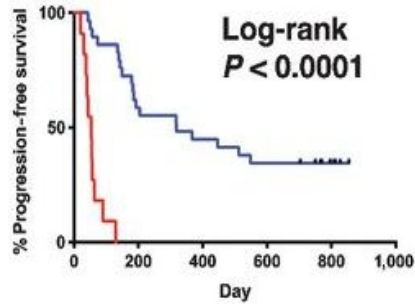
## Impact

Drug gets NK cells in the "right" subtype to attack tumor.

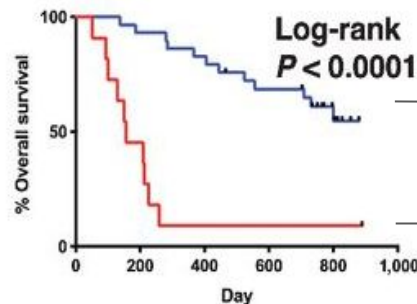
**Outside CRC**

# Baseline blood can stratify response to anti-PD-1 checkpoint inhibitor therapy

## Non-Small Cell Lung Cancer



+45%  
Progression Free  
Survival



+ 50%  
Overall  
Survival

↑ CD62L<sup>low</sup> in  
total populations  
of CD4<sup>+</sup>, CD8<sup>+</sup> T  
cells

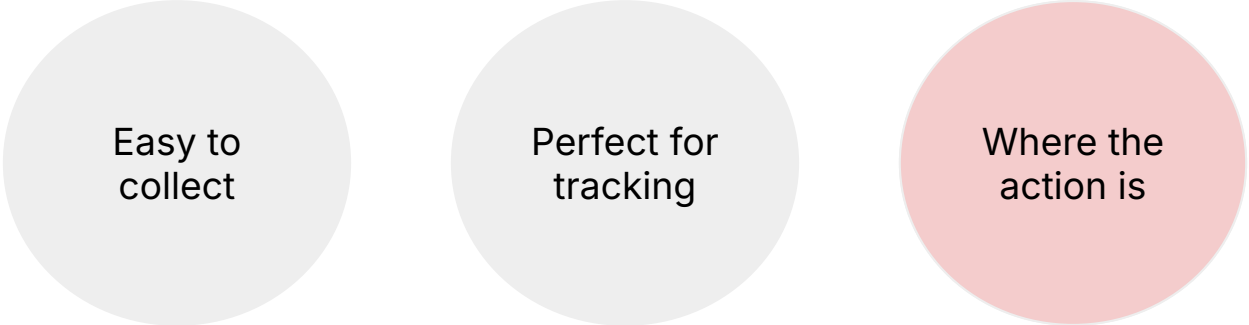
↑ CD25<sup>+</sup>FOXP3<sup>+</sup>  
CD4<sup>+</sup> T cells  
[P = 0.034]

Number of Patients	126
Sensitivity	92.90%
Specificity	72.10%
Patient Prediction Cohort	40
Patient validation Cohort	86

**Wrapping up**

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Where the  
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**Learn more about  
immune measurement  
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# Appendix