A first-in-human study of MT026, an off-the-shelf IL13Rα2-specific allogeneic universal CAR-T cells, in patients with recurrent high-grade glioma: an interim analysis

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BACKGROUND

- T cell immunotherapy is becoming a powerful therapeutic strategy for hematological and solid malignancies
- Use of autologous T cell immunotherapy for treatment of high-grade glioma, a CNS tumor with rapid progression and poor prognosis, is limited
- Off-the-shelf allogeneic universal CAR-T cells has unique advantages and clinical potential for those tumors which tissues are hard to collect and progress rapidly
- ChiCTR2000028801 is a first-in-human study of MT026, an off-the-shelf IL13Rα2-specific allogeneic universal CAR-T cells (IL13Rα2 UCAR-T cells). In this single-center, open-label, IIT study, safety, PK and preliminary efficacy of MT026 administered via intra-lumbar and intra-tumoral

STUDY DESIGN

Dosage and administration

• 2.5×10⁷ cells, intra-lumbar or intra-tumoral injection, every four weeks

Primary objectives

Safety

Secondary Objectives

- efficacy (ORR, DCR, OS, PFS)
- PK

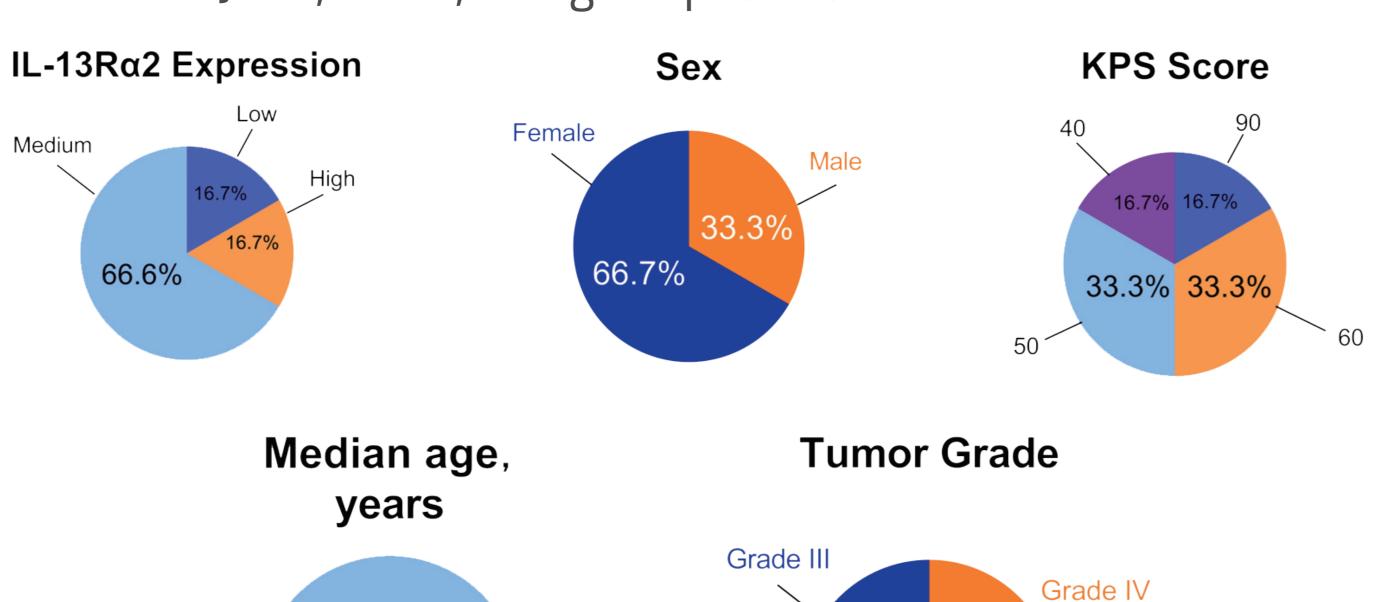
Patient population

- 18-70 years
- Life expectancy ≥ 3 months
- KPS ≥40
- Histologically- or cytologically-confirmed recurrent or refractory high-grade glioma
- Had been treated with SoC
- IL13-Ra2 IHC positive score >50%

RESULTS (interim)

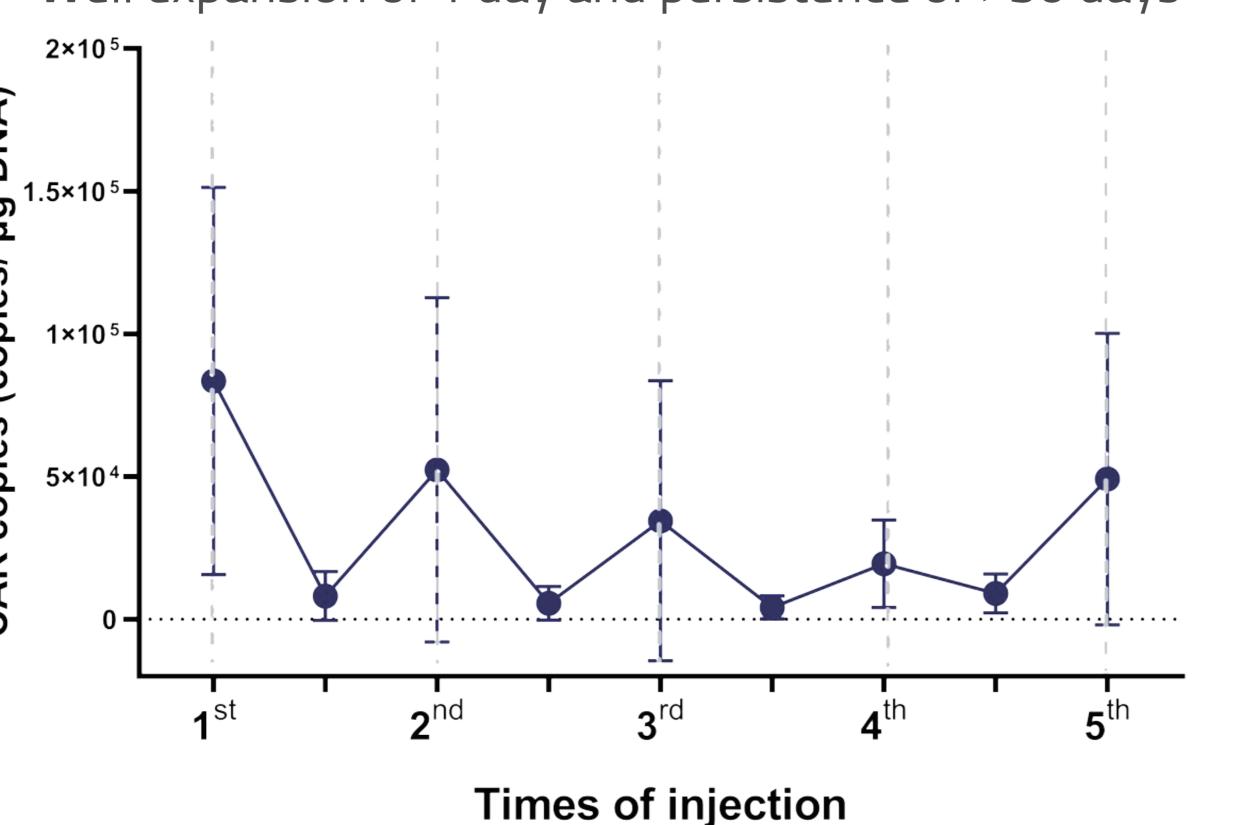
Patient Characteristics

As of June, 2022, 6 eligible patients received MT026



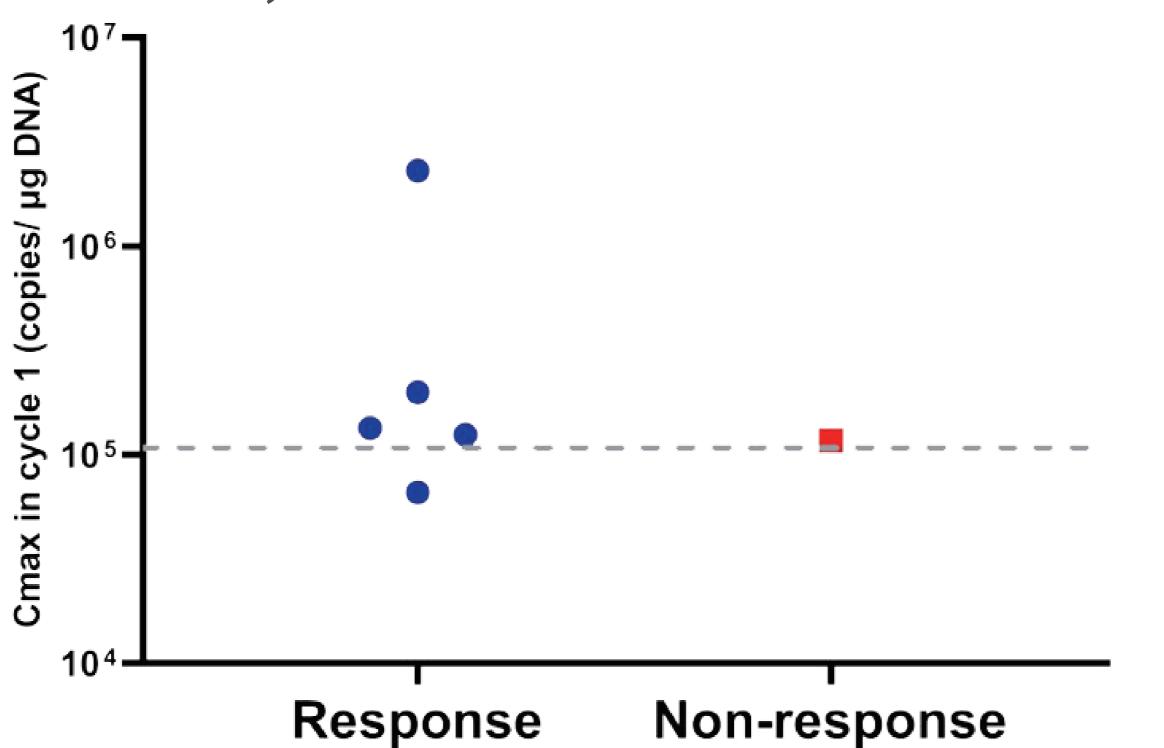
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Well expansion of 1 day and persistence of >30 days



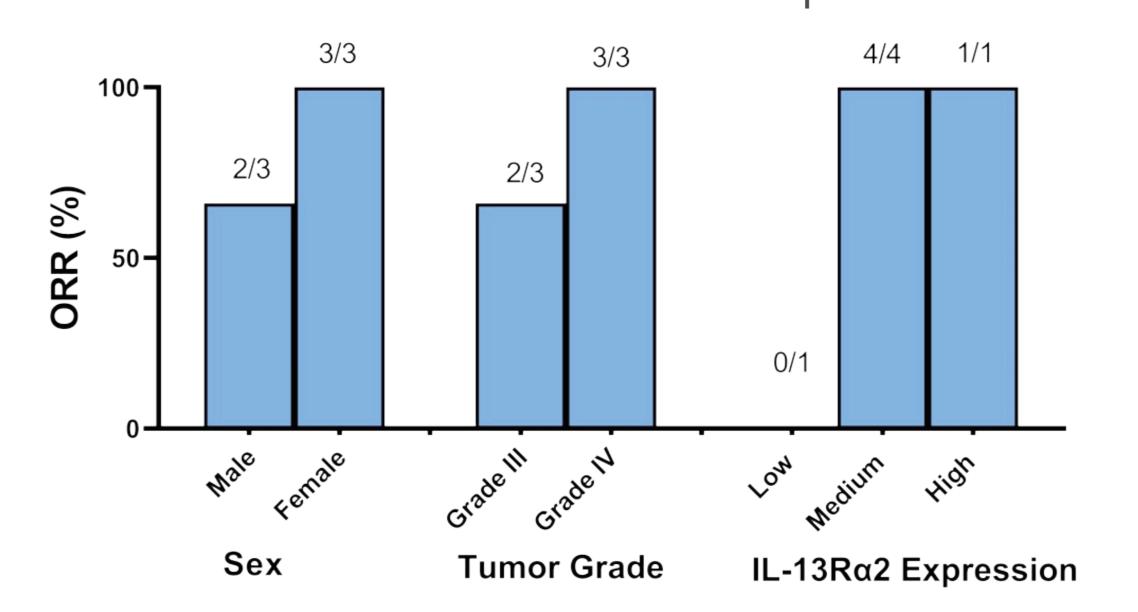
Exposure-response

 Response seems correlated with Cmax of CAR copies after 1st injection



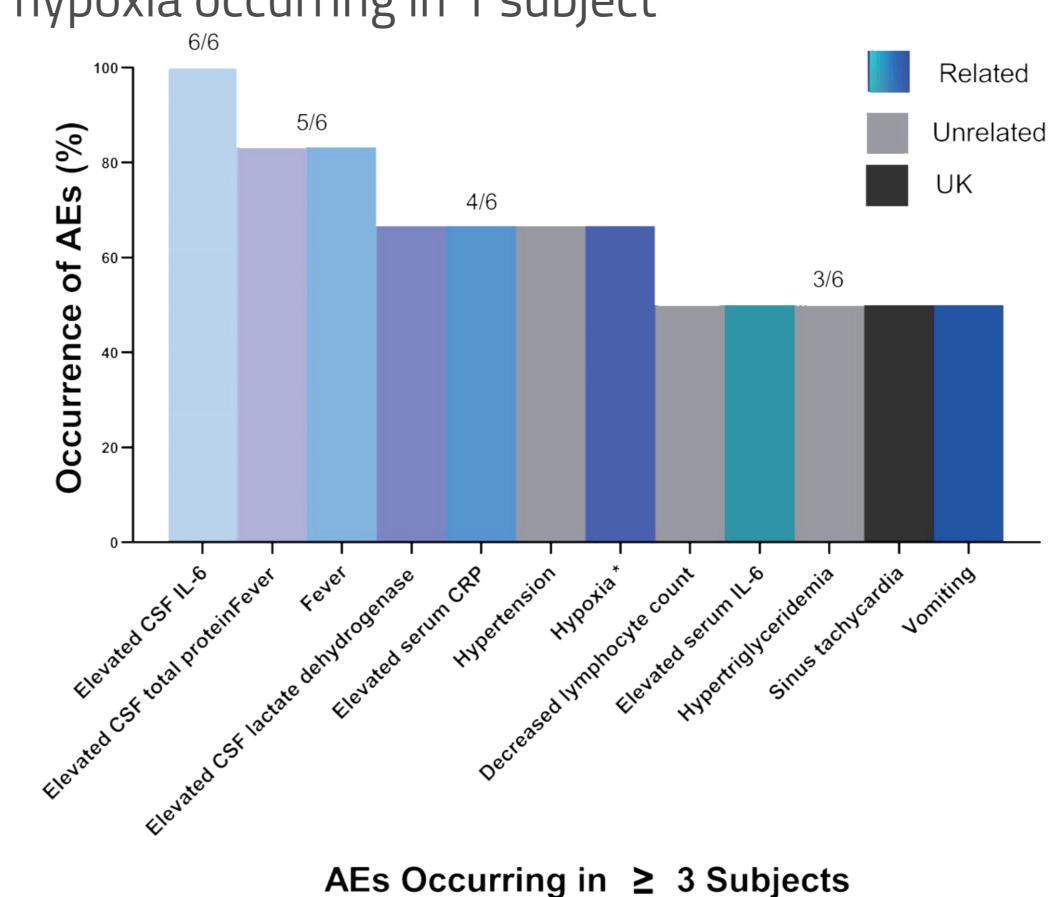
Stratification

Response seems correlated with IL13Rα2 expressionlevel in tumor tissue



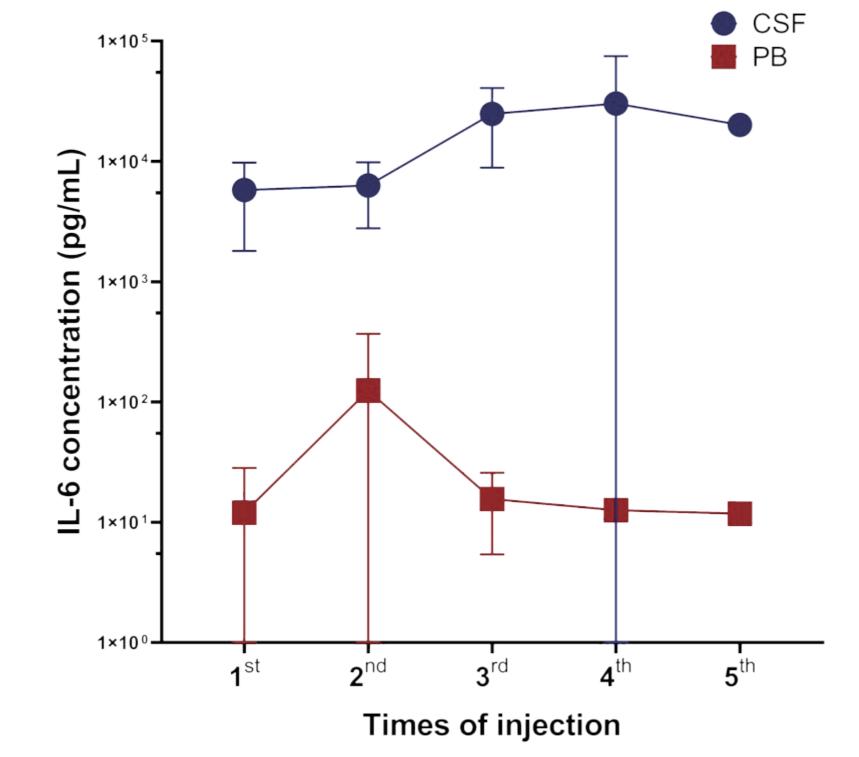
Safety

- Fever and hypoxia were the most common symptoms
- Elevated CSF IL-6 were the most common abnormal laboratory test
- No severe CRS or ICANS
- Of those AEs occurring in ≥2 subjects, most were Grade 1 or 2 except for a grade 3 hypoxia occurring in 1 subject



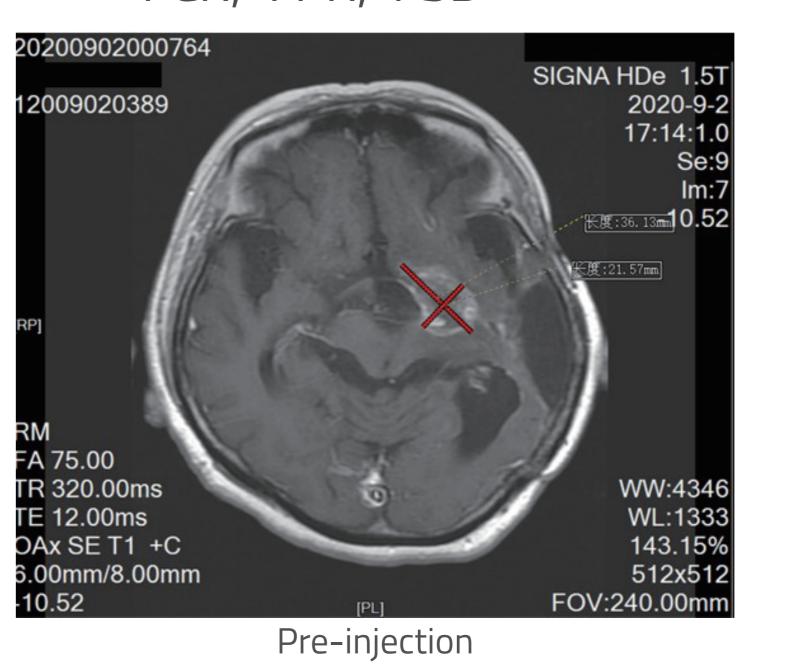
*: The only grade 3 AE is hypoxia, occurring in 1 subject

Blood IL-6 concentration is low after administration

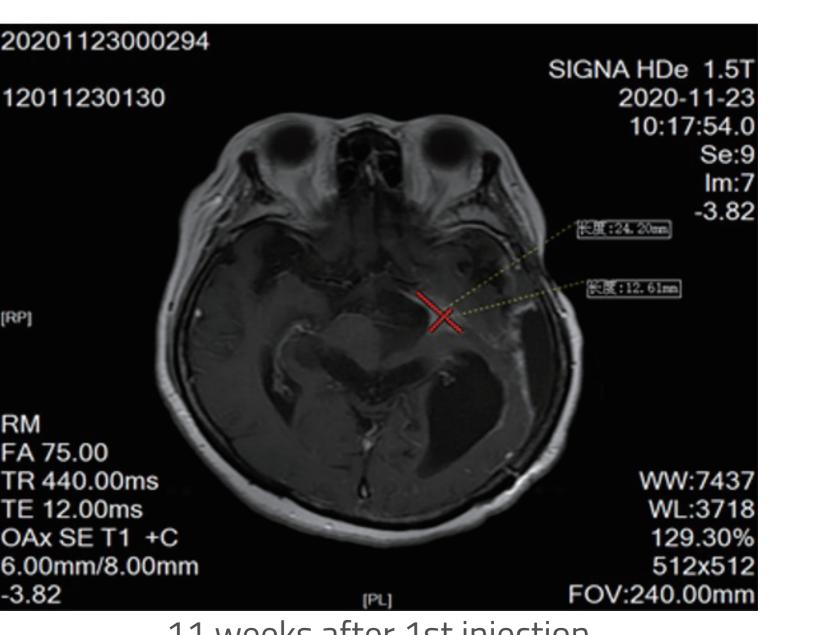


Efficacy (As of June, 2022)

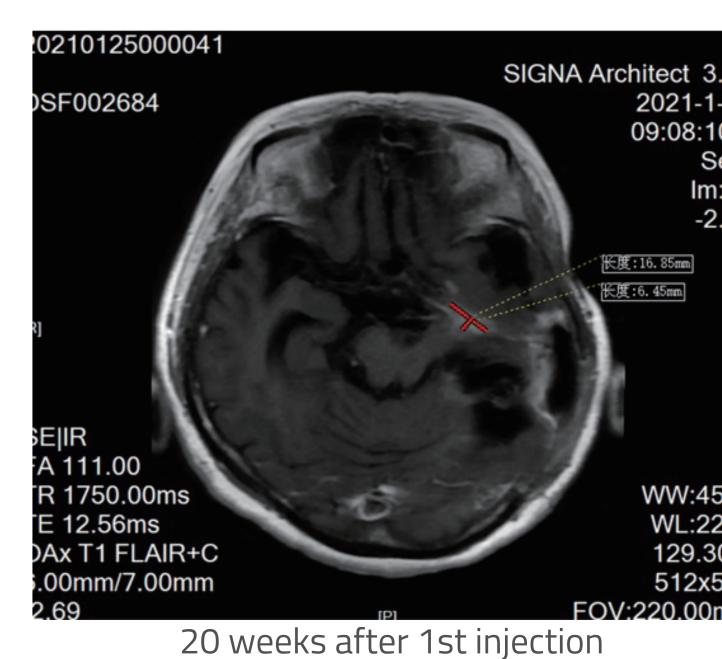
1 CR, 4 PR, 1 SD



(Tumor size: 792mm²)



11 weeks after 1st injection (Tumor size: 305mm²)



(Tumor size: NA)

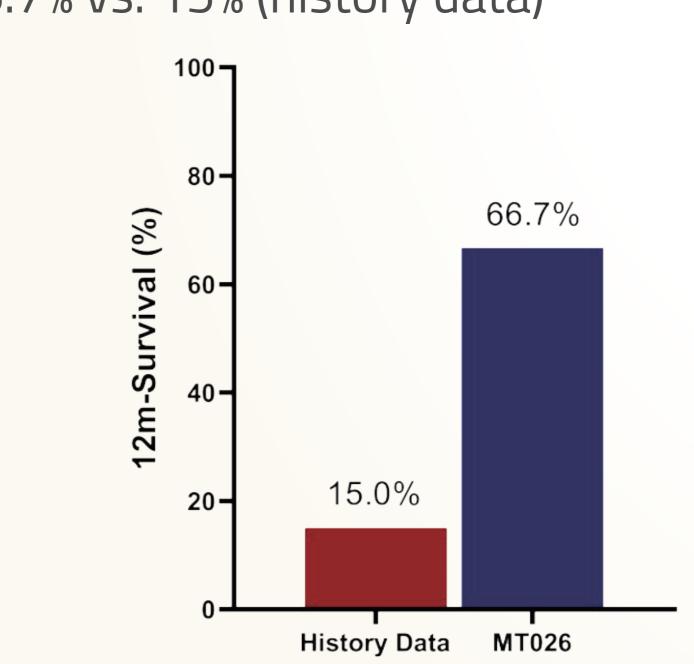
ORR 83.3% (5/6), DCR 100% (6/6)

Grade IV Grade III MT026-003 -MT026-001 **-**

12m-survival rate after recurrence: 66.7% vs. 15% (history data)

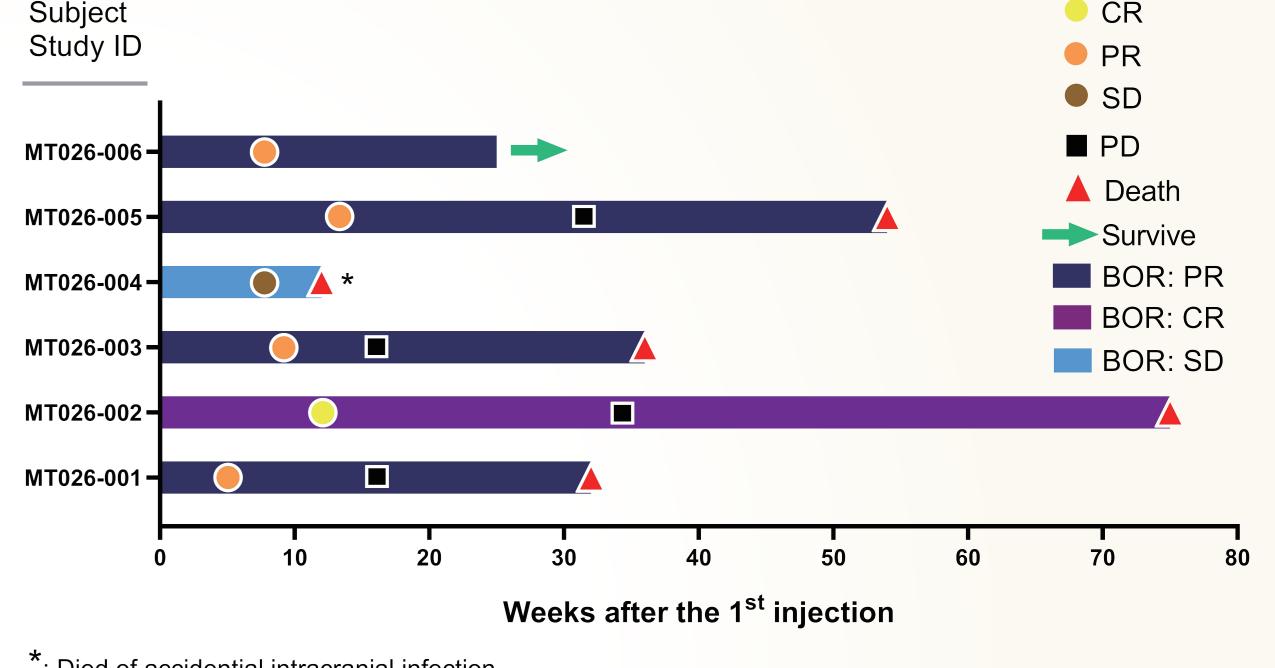
MT026-004 MT026-001 MT026-003 MT026-005 MT026-006 MT026-002

Subject Study ID

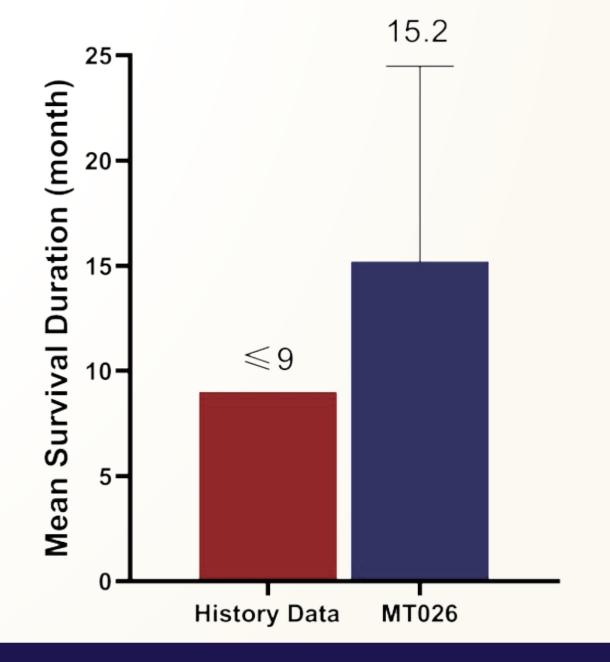


OS after 1st injection (month): Max 17.5, Mean 9.8

PFS (month): Max 7.9, Median 5.0



Survival duration after recurrence (month): Max 21.0, Mean 15.2 vs. ≤9 (history data)



CONCLUSION

Intra-lumbar injection of IL13Rα2 UCAR-T cells is safe and well tolerated in human, and IL13Rα2 UCAR T cells has potent anti-tumor activity for recurrent high-grade glioma. Off-the-shelf allogeneic universal CAR-T therapy is a potential option for treatment of solid malignancies with rapid progression and difficultly collected tissues.