

Cancer vaccines: from concept to reality

Jo A. Van Ginderachter

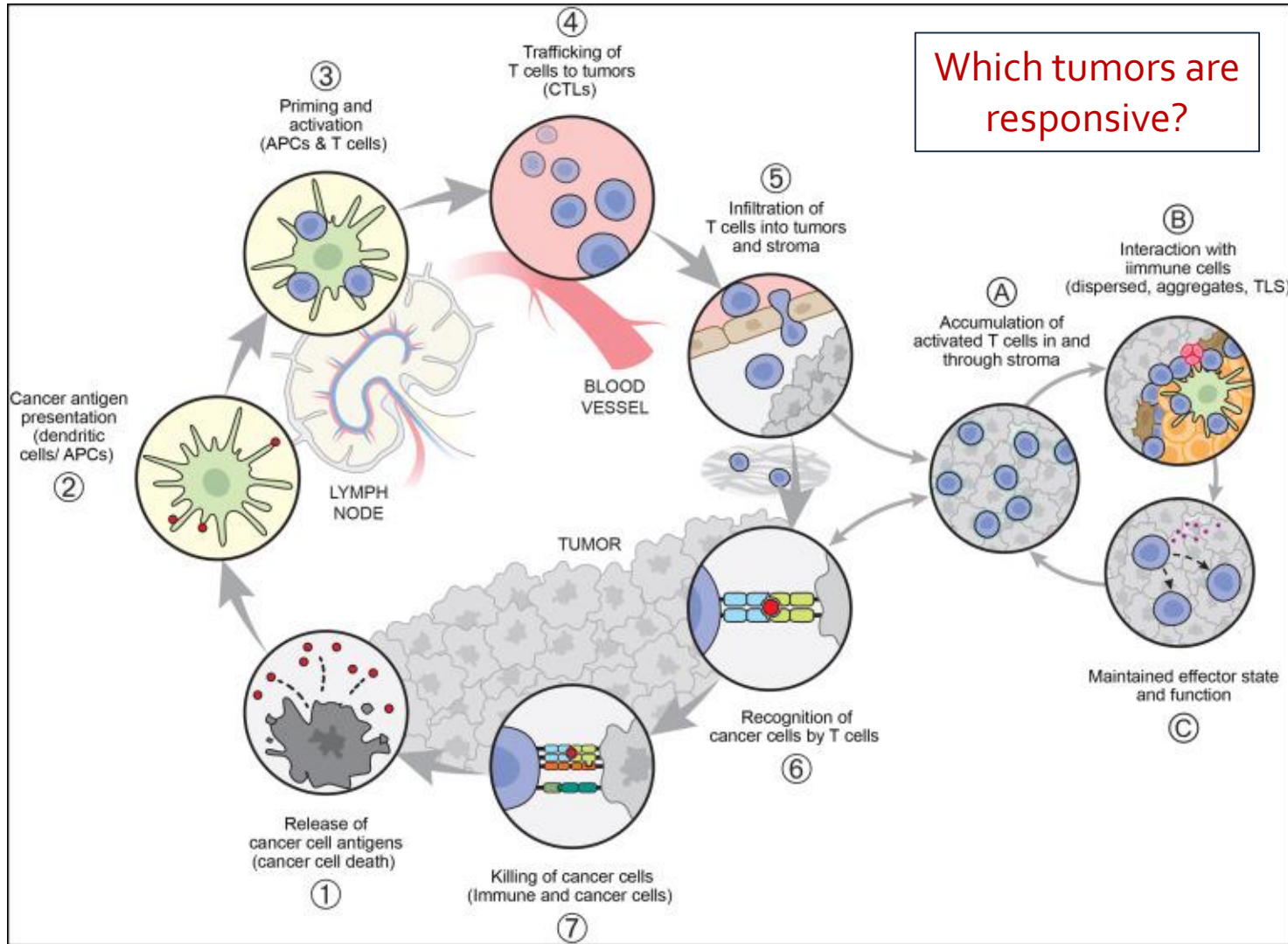
Brussels Center for Immunology, Vrije Universiteit Brussel

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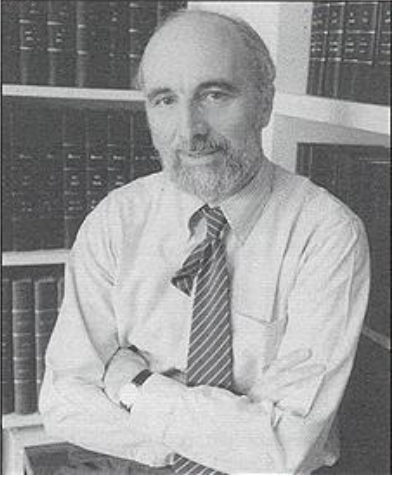
At the basis of it all: the cancer-immunity cycle

How to present
tumor antigens
to T cells?

Which tumor
antigens?



Which tumor antigens?



Thierry Boon



Pierre van der Bruggen

Tumor characterizing antigens

- **1977 - Thierry Boon (Belgium - Ludwig Institute):** 'Boon T, Kellermann O., Rejection by syngeneic mice of cell variants obtained by mutagenesis of a malignant teratocarcinoma cell line, Proc Natl Acad Sci U S A. 1977 Jan;74(1):272-5.'
- **van der Bruggen P.,** Traversari C., Chomez P., Lurquin C., De Plaen E., Van den Eynde B., Knuth A., **Boon T.** A gene encoding an antigen recognized by cytolytic T lymphocytes on a human melanoma. Science. 1991 Dec 13;254(5038):1643-1647

Which tumor antigens?

Tumor-associated antigens

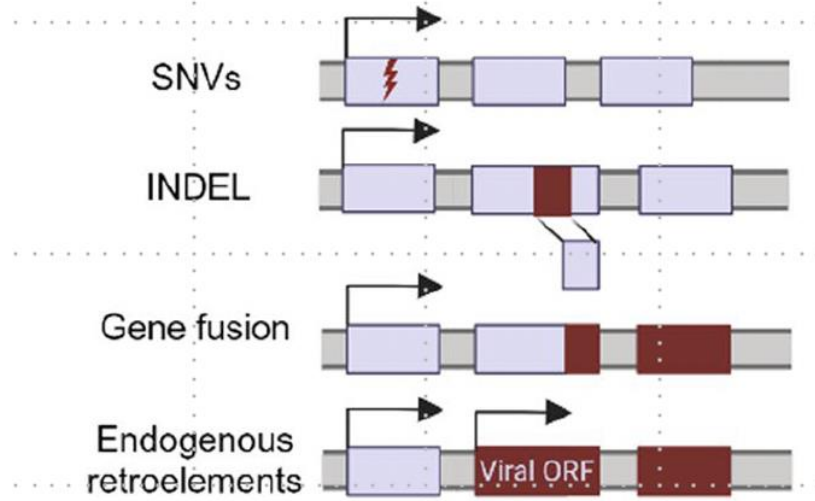
- Not unique to tumors
- **Overexpressed proteins** (e.g. survivin, MUC-1/2), **cancer germline proteins** (oncofetal, cancer-testis: e.g. MAGE, GAGE, BAGE, NY-ESO-1), **tissue-differentiation proteins** (e.g. tyrosinase, Melan-A/MART-1, gp100, TRP-1/2)

Tumor-specific antigens

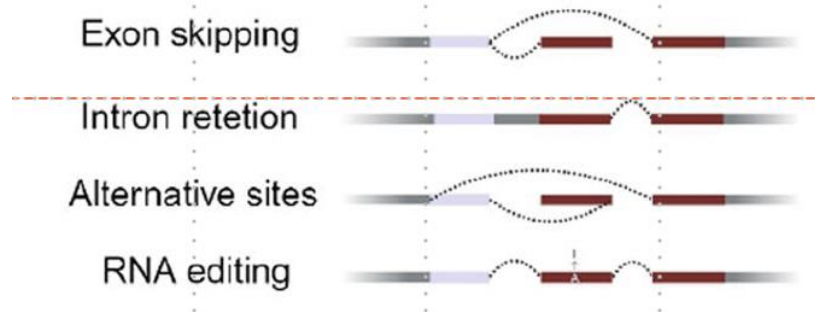
- Unique to tumors
- **Neo-epitopes** (e.g. EGFRvIII, KRAS^{G12C}, BRAF^{V600E} vs patient-specific)
- **Viral antigens** (e.g. HPV E6/E7 => responsible for nearly all cervical cancers, but also throat, anus, penis,...)

Which tumor antigens: neo-epitopes

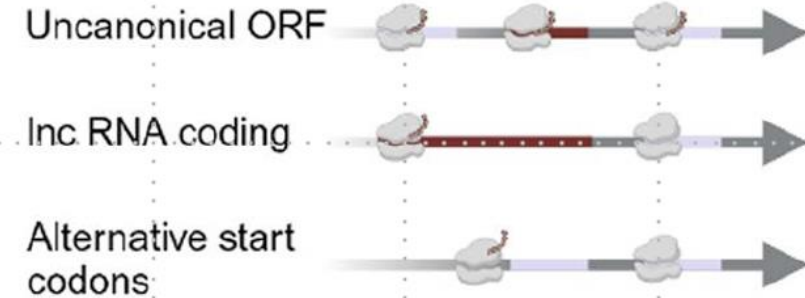
Genomic mutations



Transcriptional variants



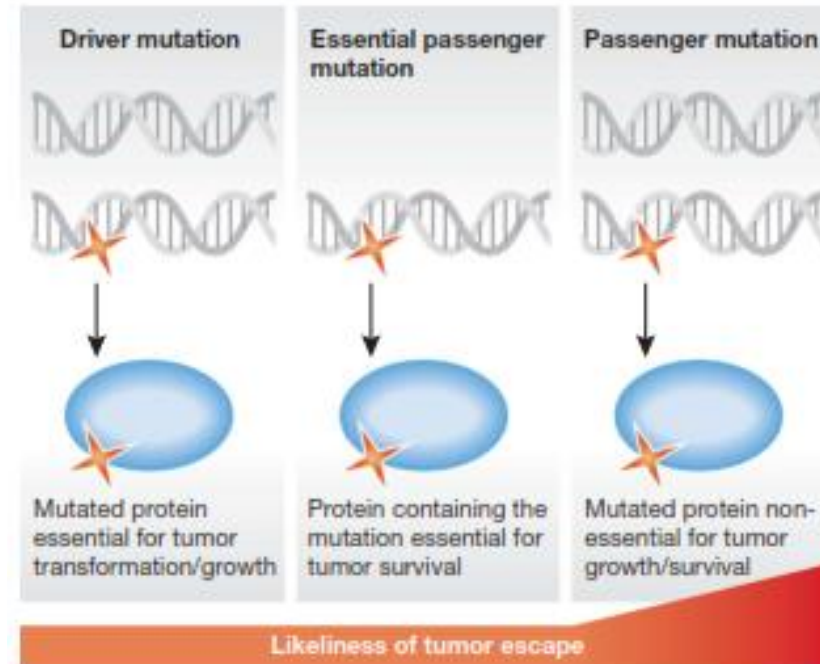
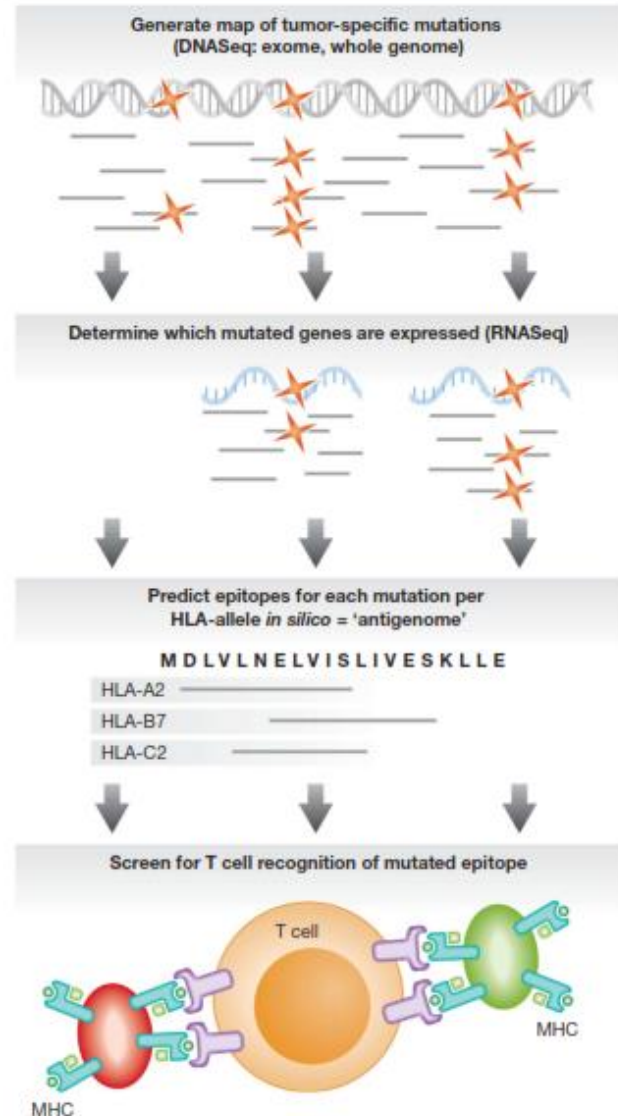
Alternative translation



Post-translation modifications

Phosphorylation, glycosylation, methylation.....

Which tumor antigens: the cancer antigenome



Which tumor antigens: neo-epitopes derived from the dark genome

COMMENT | 24 January 2013

The dark matter of genome

It has three billion base pairs but only about two per cent of the human genome codes for proteins. In a two part series, Pawan Dhar tries to understand what the remaining bulk of the human genome is doing? Is it a genetic graveyard or a cryptic instruction manual that ensures survival of the species?



The recent ENCODE (Encyclopedia of DNA Elements) project has thrown new light on the dark matter of genome – traditionally labelled junk. It turns out that more than 80% of the human 'non-protein coding' genome is biologically active and impacts the expression of genes in the neighbourhood.

Which tumor antigens: neo-epitopes derived from the dark genome

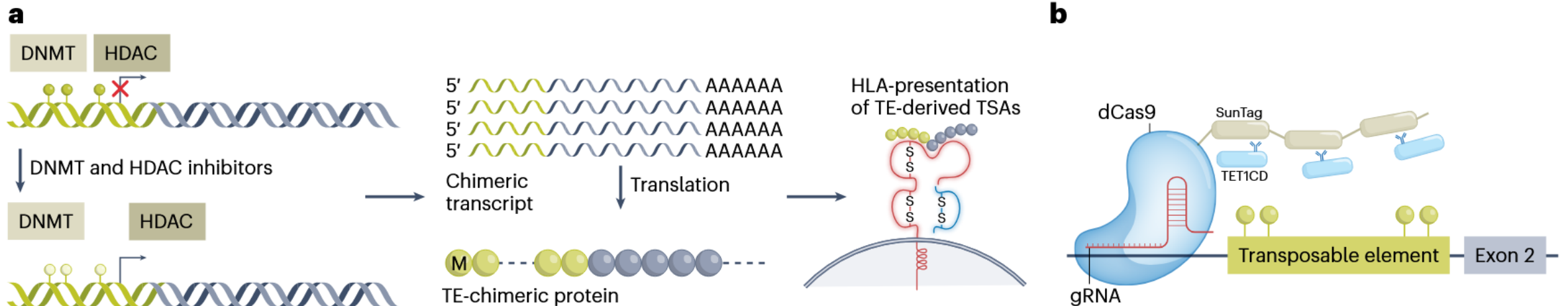
nature genetics

Volume 56 | September 2024 | 1770–1771 |

Glioblastoma therapy

<https://doi.org/10.1038/s41588-024-01850-3>

Activating the dark genome to illuminate cancer vaccine targets



Which tumor antigens: neo-epitopes derived from the dark genome



Dark Genome Target Discovery & Development Summit

Illuminating a New Realm of Targets in Non-Coding DNA & RNA

June 16-18, 2025 | Boston, MA

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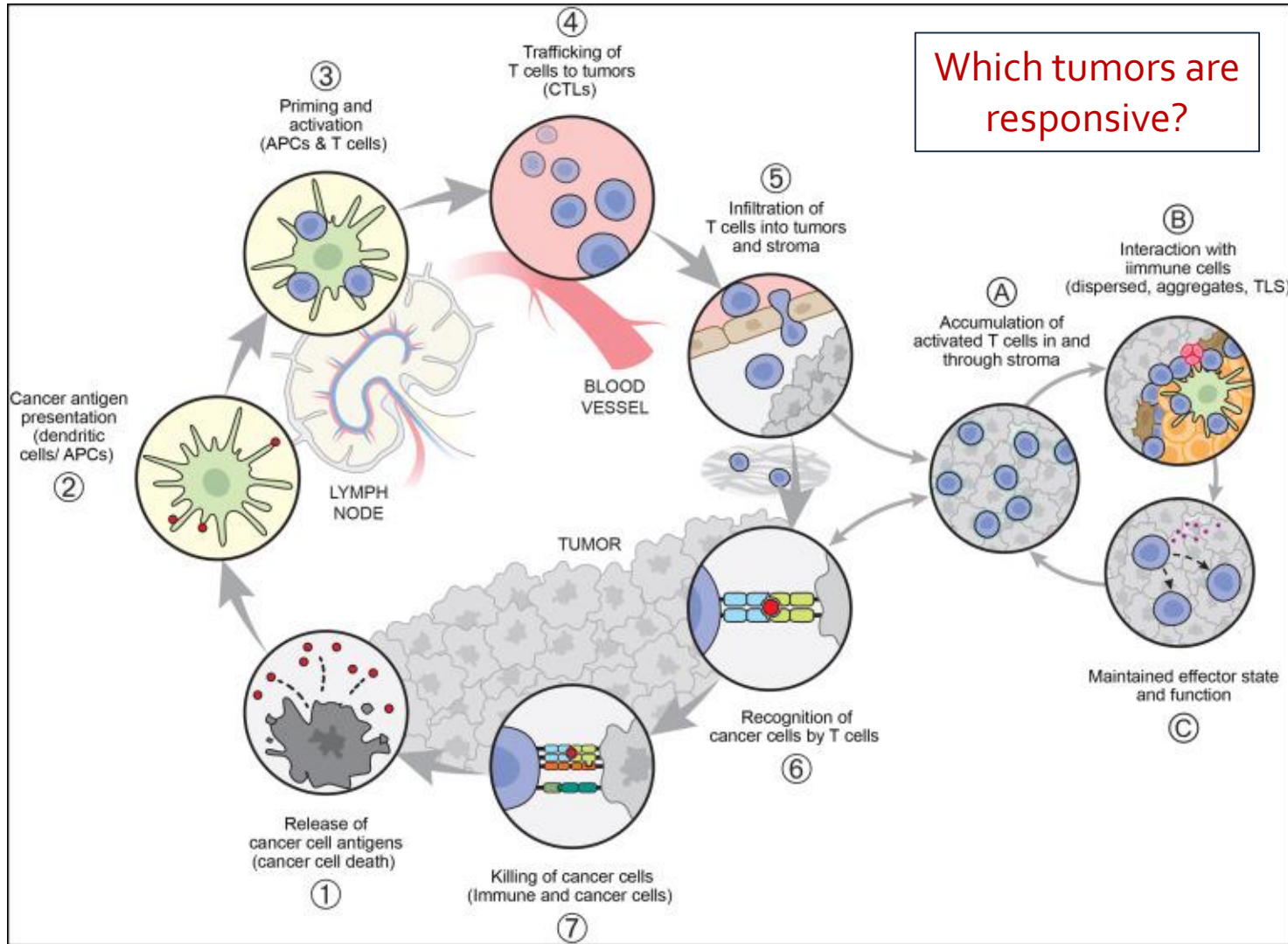
**Leveraging Next-Gen Sequencing, Bioinformatics & -Omics Technologies to
Identify & Validate Novel Targets & Regulatory Elements in the Dark Genome**

SCIENCE MEETS LIFE

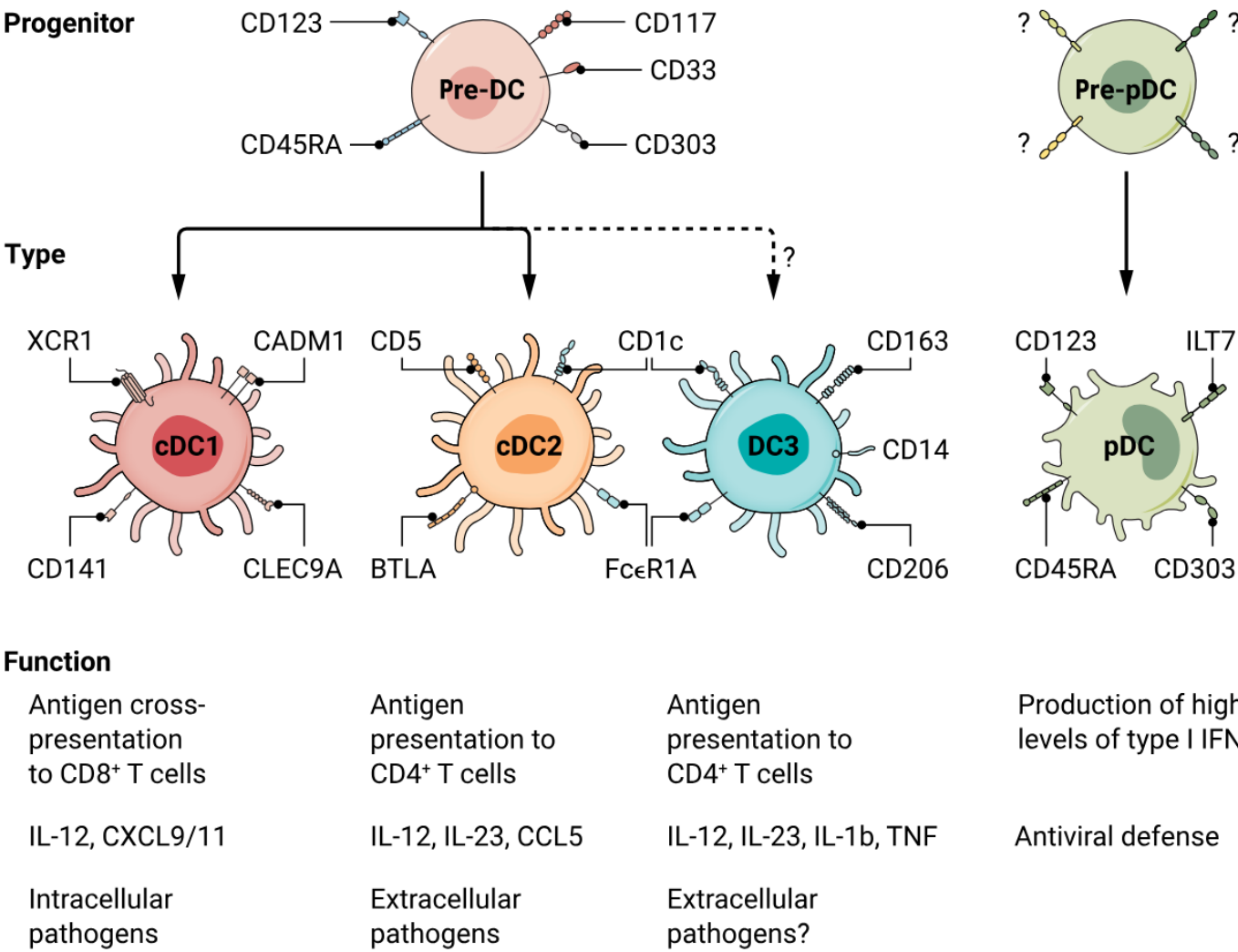
At the basis of it all: the cancer-immunity cycle

How to present tumor antigens to T cells?

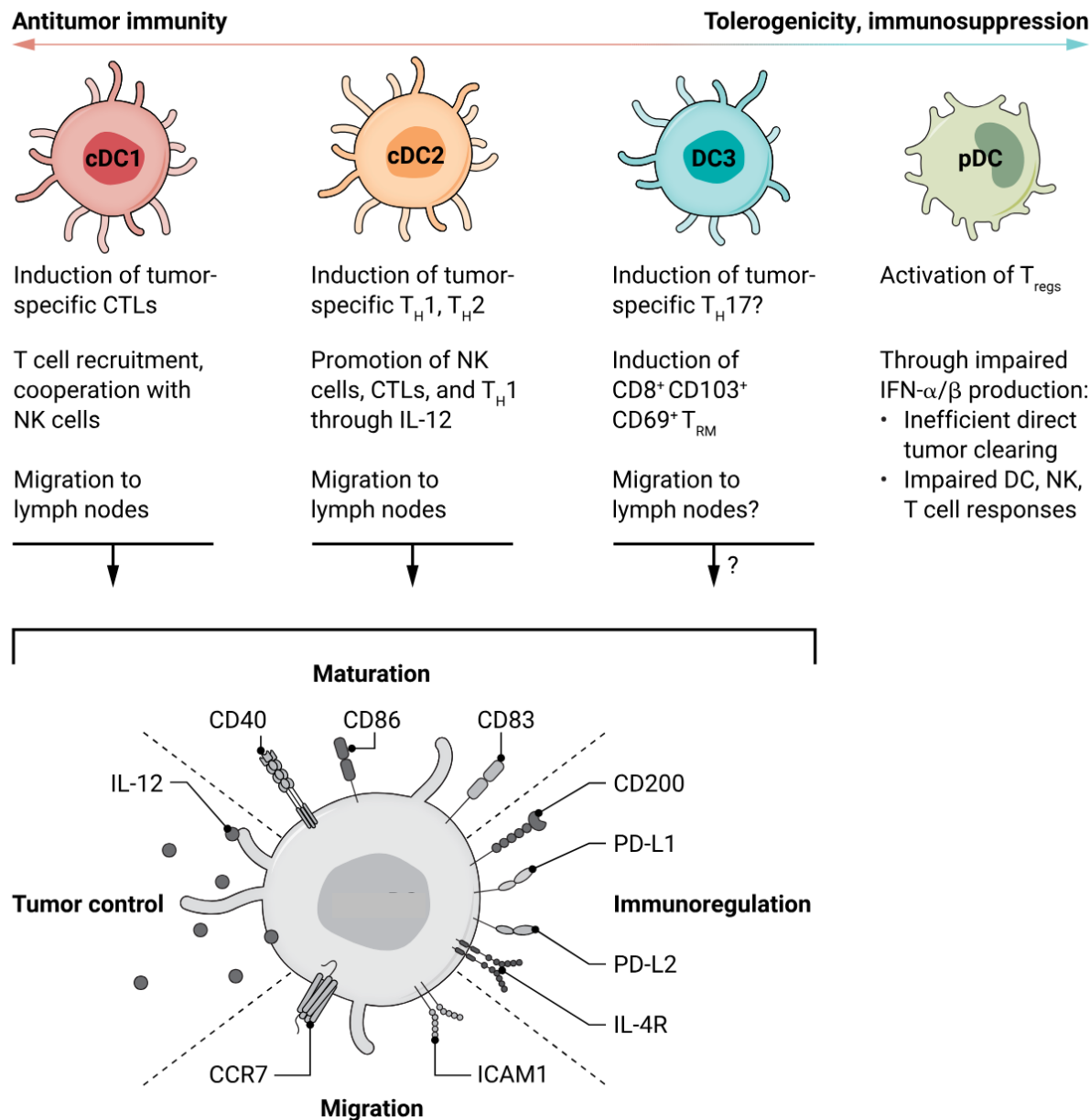
Which tumor antigens?



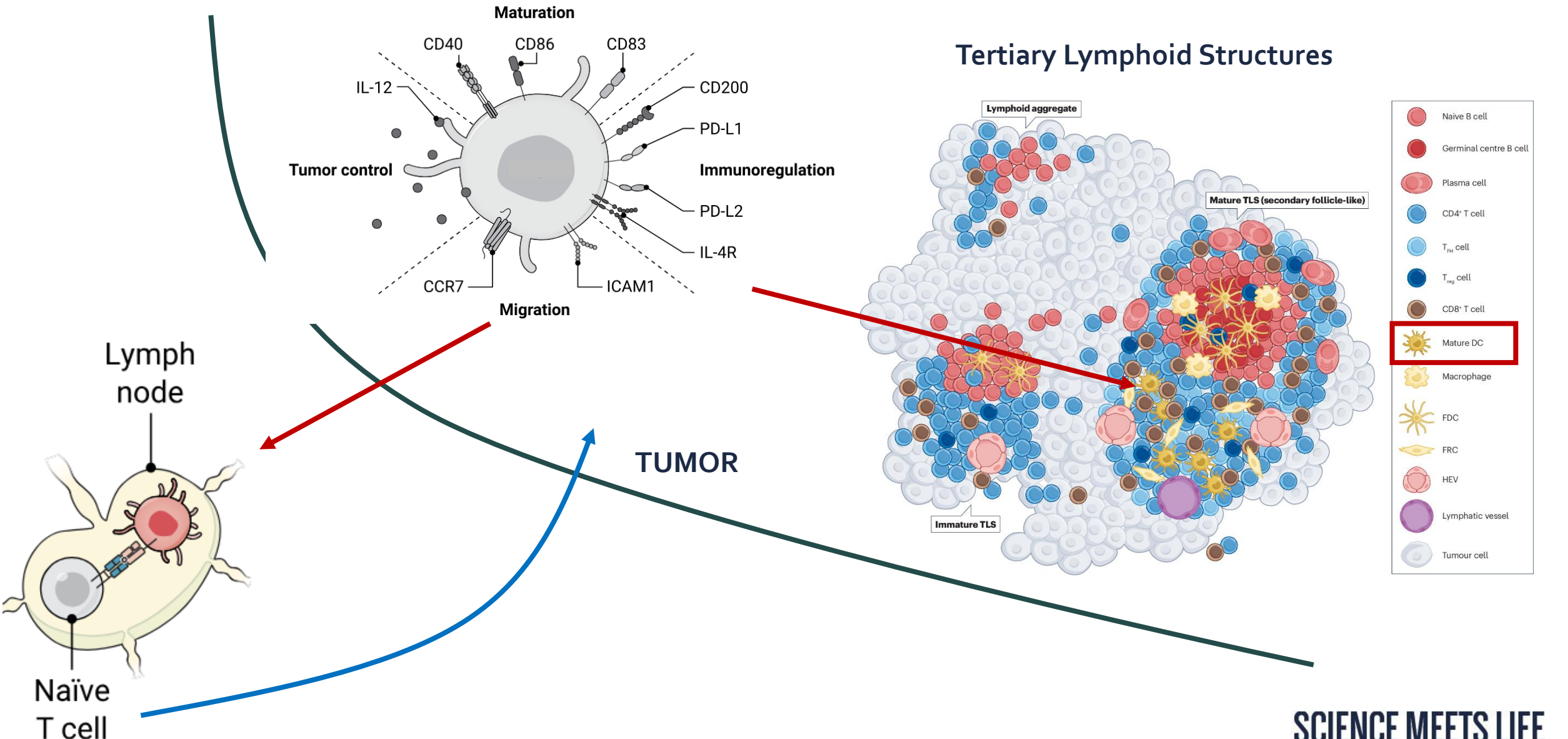
How to present tumor antigen to T cells: current knowledge on human DCs



How to present tumor antigen to T cells: human DCs in cancer

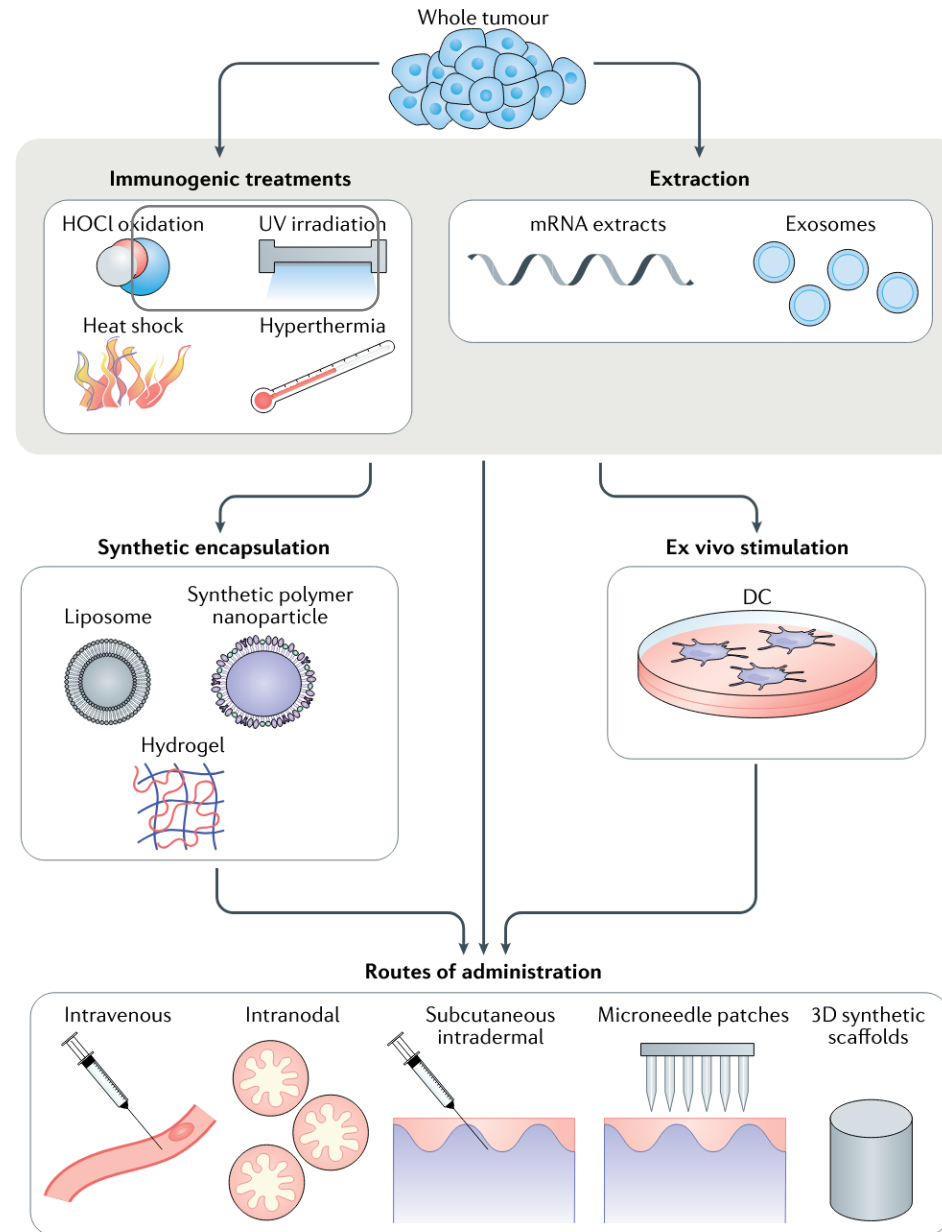


DCs present tumor antigens in tertiary lymphoid organs or lymph nodes



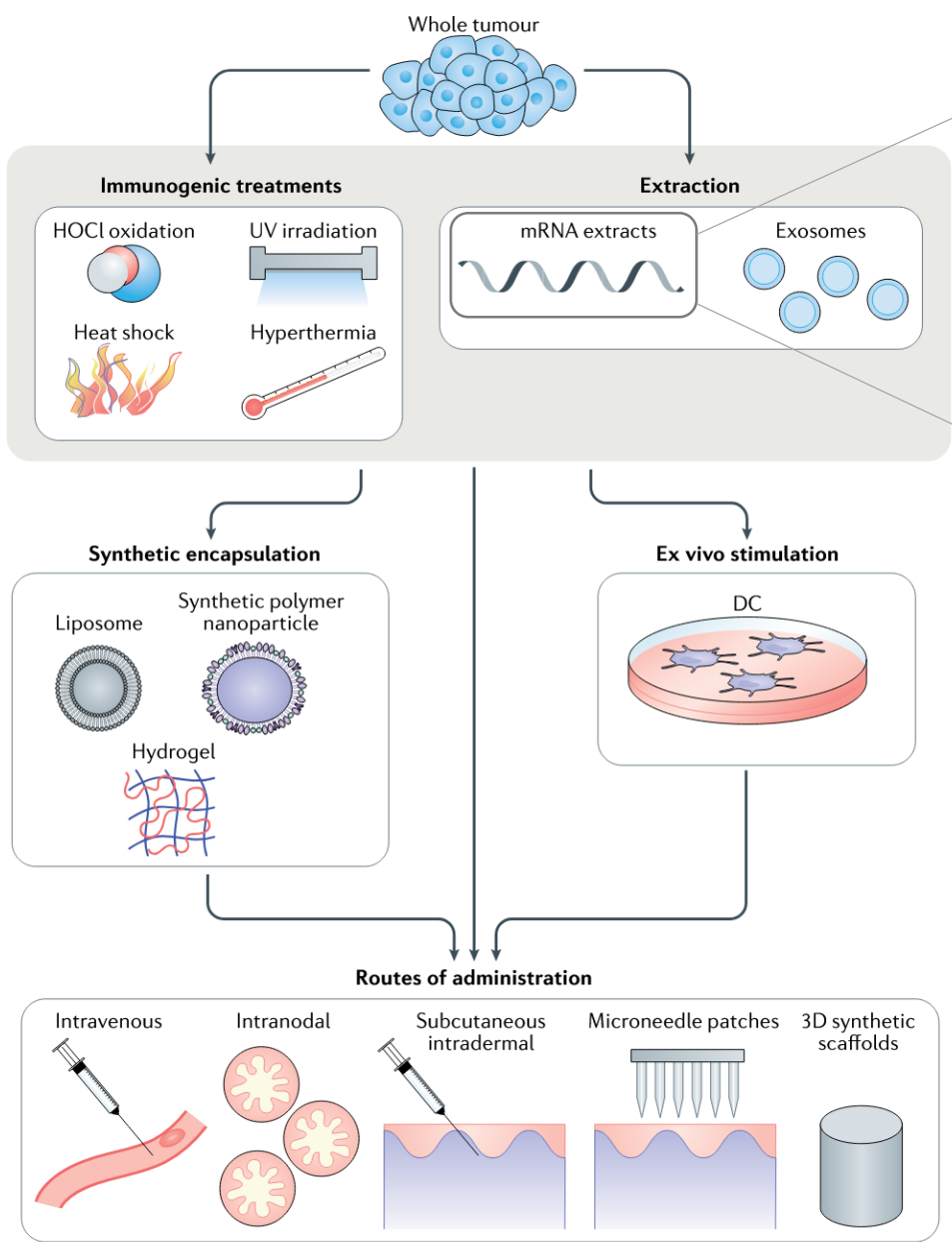
Employment of DCs as cancer vaccines

Immunogenic
cell death
inducers
⇒ Chemo
⇒ Radiation



Employment of DCs as cancer vaccines

Immunogenic cell death inducers
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Article

RNA neoantigen vaccines prime long-lived CD8⁺ T cells in pancreatic cancer

<https://doi.org/10.1038/s41586-024-08508-4>

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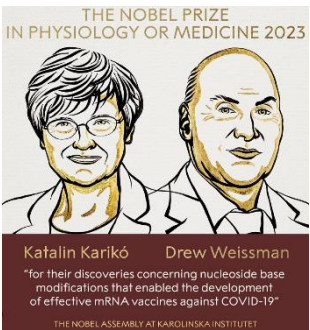
Zachary Sethna^{1,2,3,4,14}, Pablo Guasp^{1,2,14}, Charlotte Reiche^{1,2}, Martina Milighetti^{1,2,4}, Nicholas Ceglia⁴, Erin Patterson⁵, Jayon Lihm^{3,4}, George Payne^{1,2}, Olga Lyudovyyk⁴, Luis A. Rojas^{1,2}, Nan Pang⁷, Akihiro Ohmoto^{1,2}, Masataka Amisaki^{1,2}, Abderezak Zebboudj^{1,2}, Zagaa Odgerel^{1,2}, Emmanuel M. Bruno^{1,2}, Siqi Linsey Zhang^{1,2}, Charlotte Cheng^{1,2}, Yuval Elhanati⁶, Evelyn Derhovanessian⁸, Luisa Manning⁹, Felicitas Müller⁹, Ina Rhee⁶, Mahesh Yadav⁶, Taha Merghoub⁷, Jedd D. Wolchok⁷, Olca Basturk⁶, Mithat Gönen⁶, Andrew S. Epstein¹⁰, Parisa Momtaz¹⁰, Wungki Park^{10,11}, Ryan Sugarman¹⁰, Anna M. Varghese¹⁰, Elizabeth Won¹⁰, Avni Desai¹⁰, Alice C. Wei^{2,11}, Michael I. D'Angelica^{2,11}, T. Peter Kingham^{2,11}, Kevin C. Soares^{2,11}, William R. Jarnagin^{2,11}, Jeffrey Drebin^{2,11}, Eileen M. O'Reilly^{10,11}, Ira Mellman⁶, Ugur Sahin^{8,12}, Özlem Türeci¹², Benjamin D. Greenbaum^{1,4,13,15} & Vinod P. Balachandran^{1,2,4,13,15,16}

LETTER

doi:10.1038/nature23003

Personalized RNA mutanome vaccines mobilize poly-specific therapeutic immunity against cancer

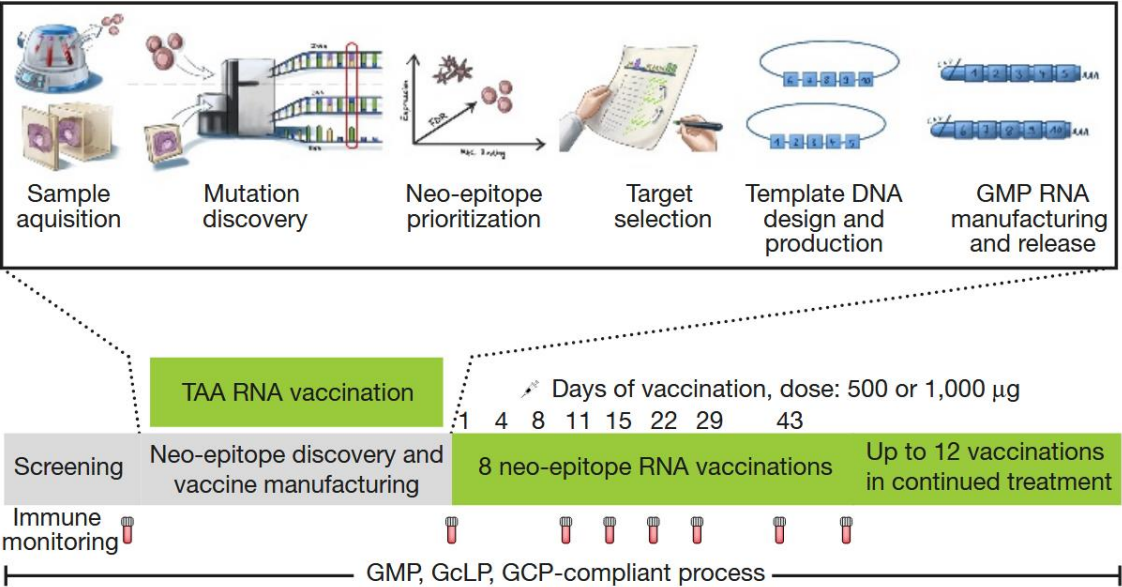
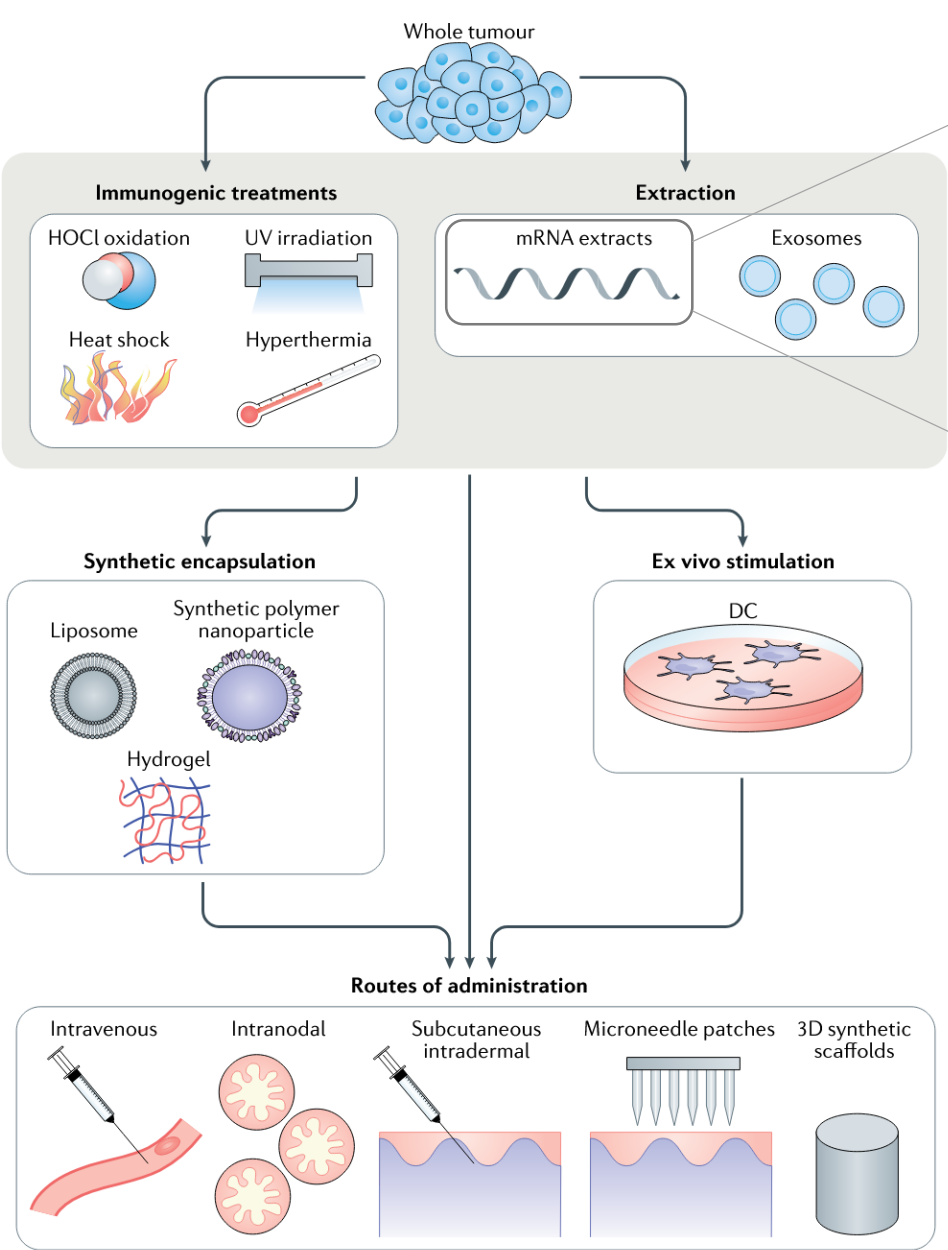
Ugur Sahin^{1,2,3}, Evelyn Derhovanessian¹, Matthias Miller¹, Björn-Philipp Klope¹, Petra Simon¹, Martin Löwer², Valesca Bukur^{1,2}, Arbel D. Tadmor², Ulrich Luxemburger¹, Barbara Schrörs², Tana Omokoko¹, Matthias Vormehr^{1,3}, Christian Albrecht², Anna Paruzynski¹, Andreas N. Kuhn¹, Janina Buck¹, Sandra Heesch¹, Katharina H. Schreeb¹, Felicitas Müller¹, Inga Ortseifer¹, Isabel Vogler¹, Eva Godehardt¹, Sebastian Attig^{2,3}, Richard Rae², Andrea Breitzkreuz¹, Claudia Tolliver¹, Martin Suchan², Goran Martić², Alexander Hohberger³, Patrick Sorn², Jan Diekmann¹, Janko Ciesla⁴, Olga Waksman⁴, Alexandra-Kemmer Brück¹, Meike Witt¹, Martina Zillgen¹, Andree Rothermel², Barbara Kasemann², David Langer¹, Stefanie Bolte¹, Mustafa Diken^{1,2}, Sebastian Kreiter^{1,2}, Romina Nemecek⁵, Christoffer Gebhardt^{6,7}, Stephan Grabbe³, Christoph Höller⁵, Jochen Utikal^{6,7}, Christoph Huber^{1,2,3}, Carmen Loquat^{3*} & Özlem Türeci^{8*}



Katalin Karikó, Nobel Laureate, Consultant, BioNTech
Prof. Ugur Sahin, MD, CEO BioNTech
Prof. Özlem Türeci, MD, Chief Medical Officer of BioNTech

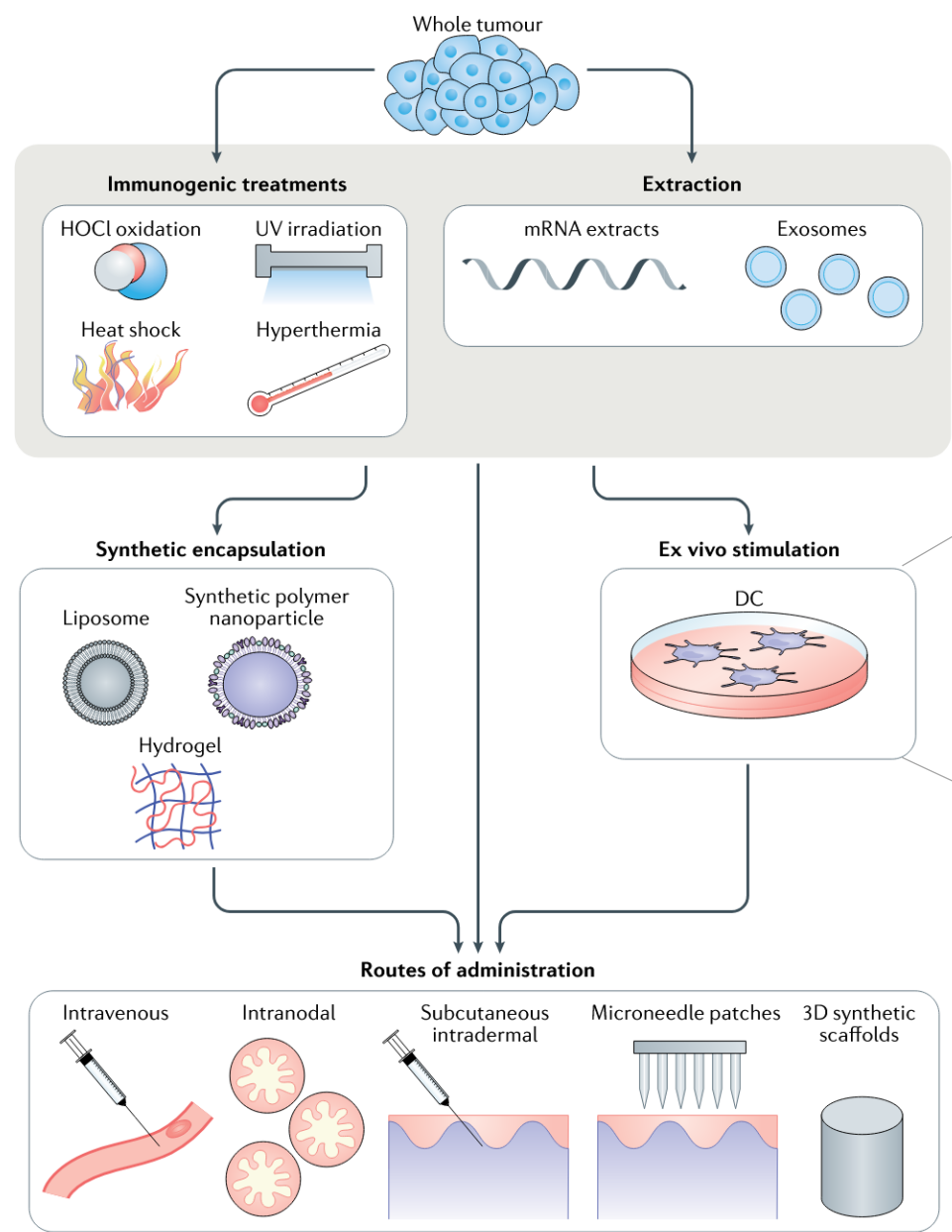
Employment of DCs as cancer vaccines

Immunogenic cell death inducers
⇒ Chemo
⇒ Radiation

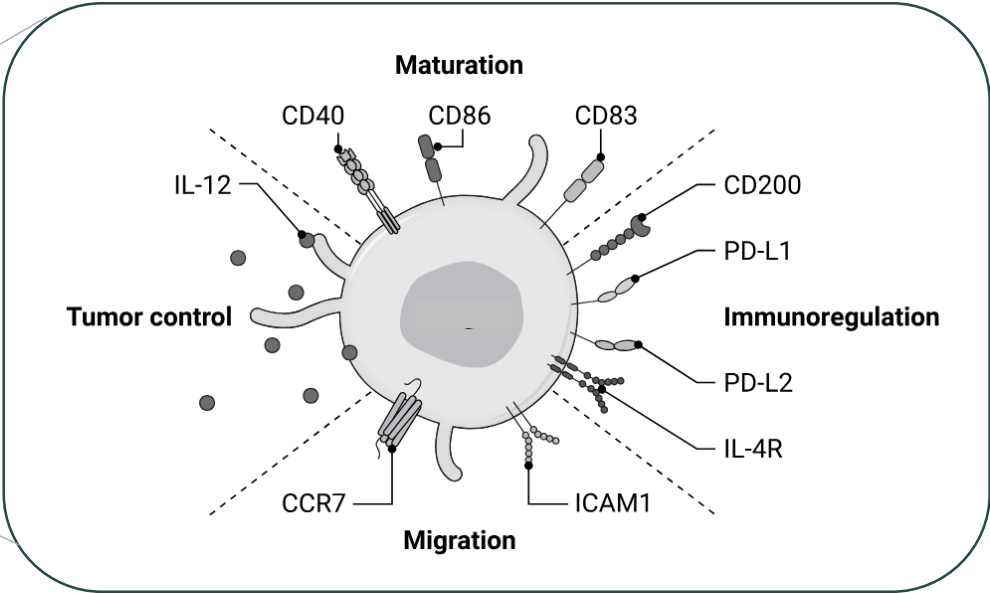


Employment of DCs as cancer vaccines

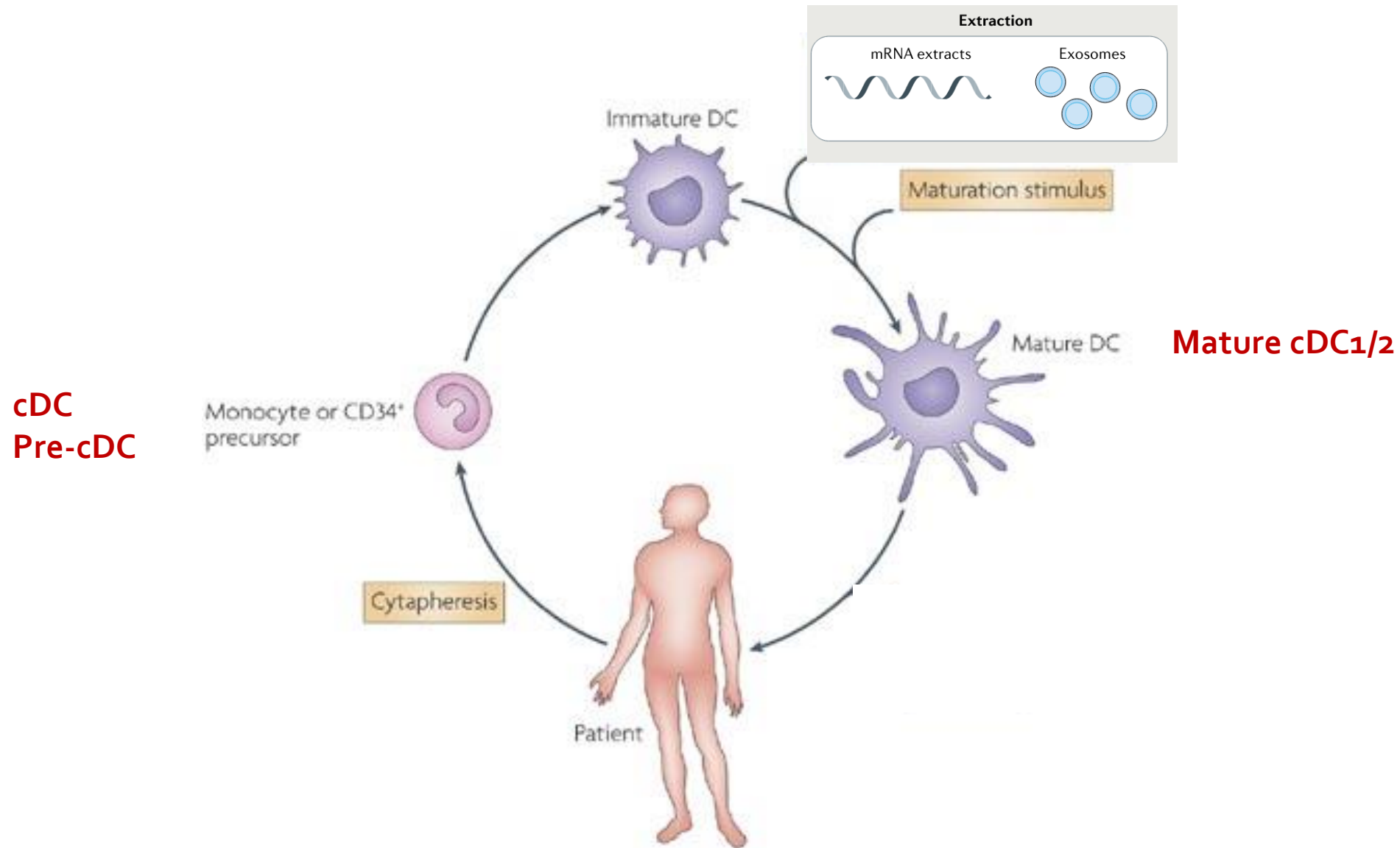
Immunogenic
cell death
inducers
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Which DC type?



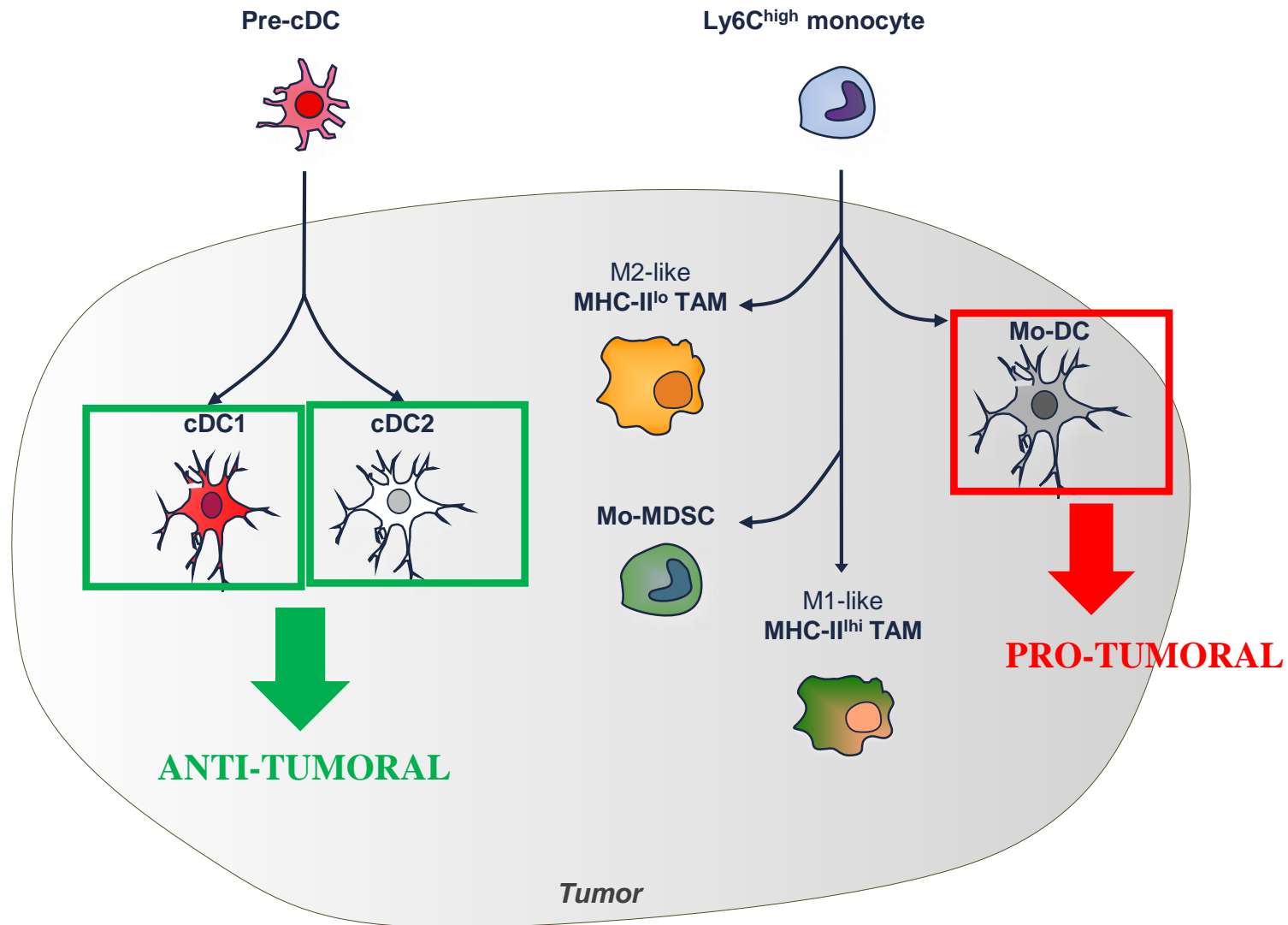
Employment of DCs as cancer vaccines



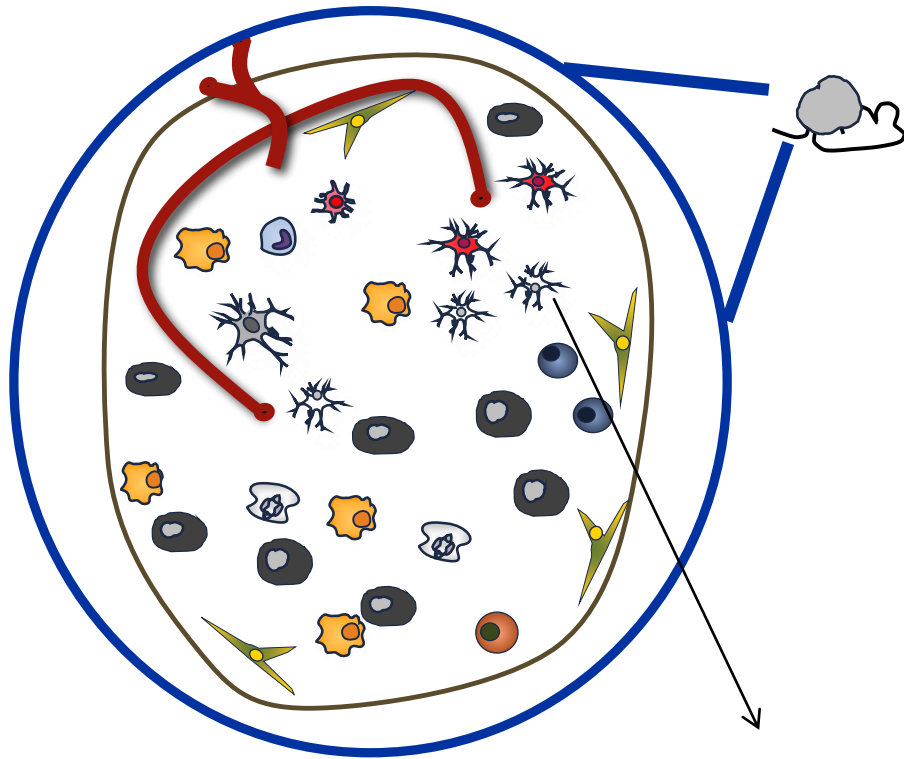
Employment of tumor-infiltrating DCs as cancer vaccines



Damya Laoui

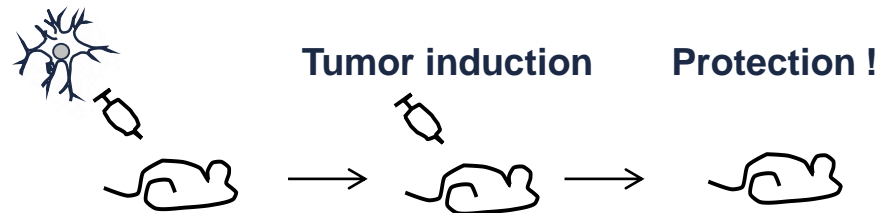


Employment of tumor-infiltrating DCs as cancer vaccines

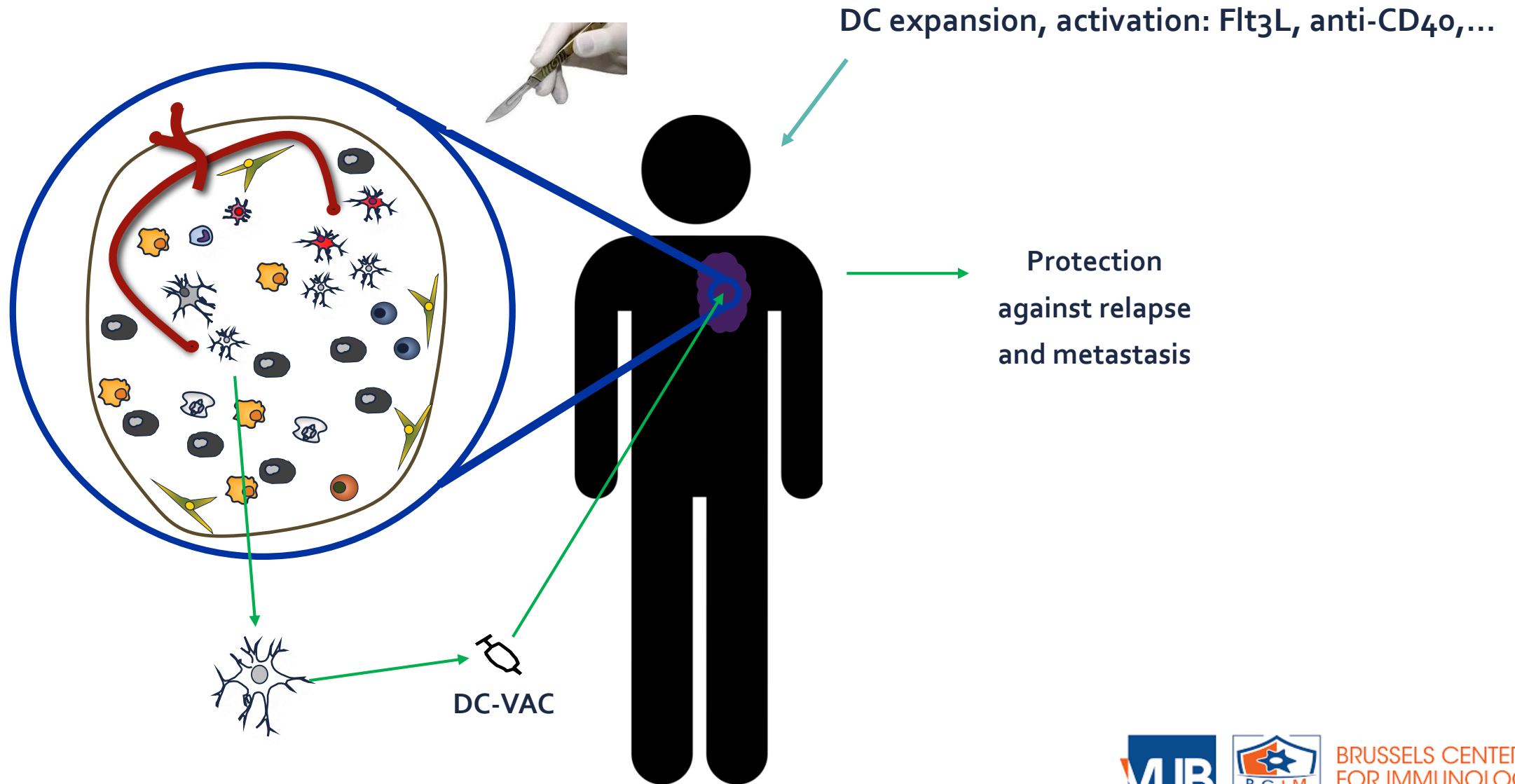


DC-VAC
cDC1 of cDC2

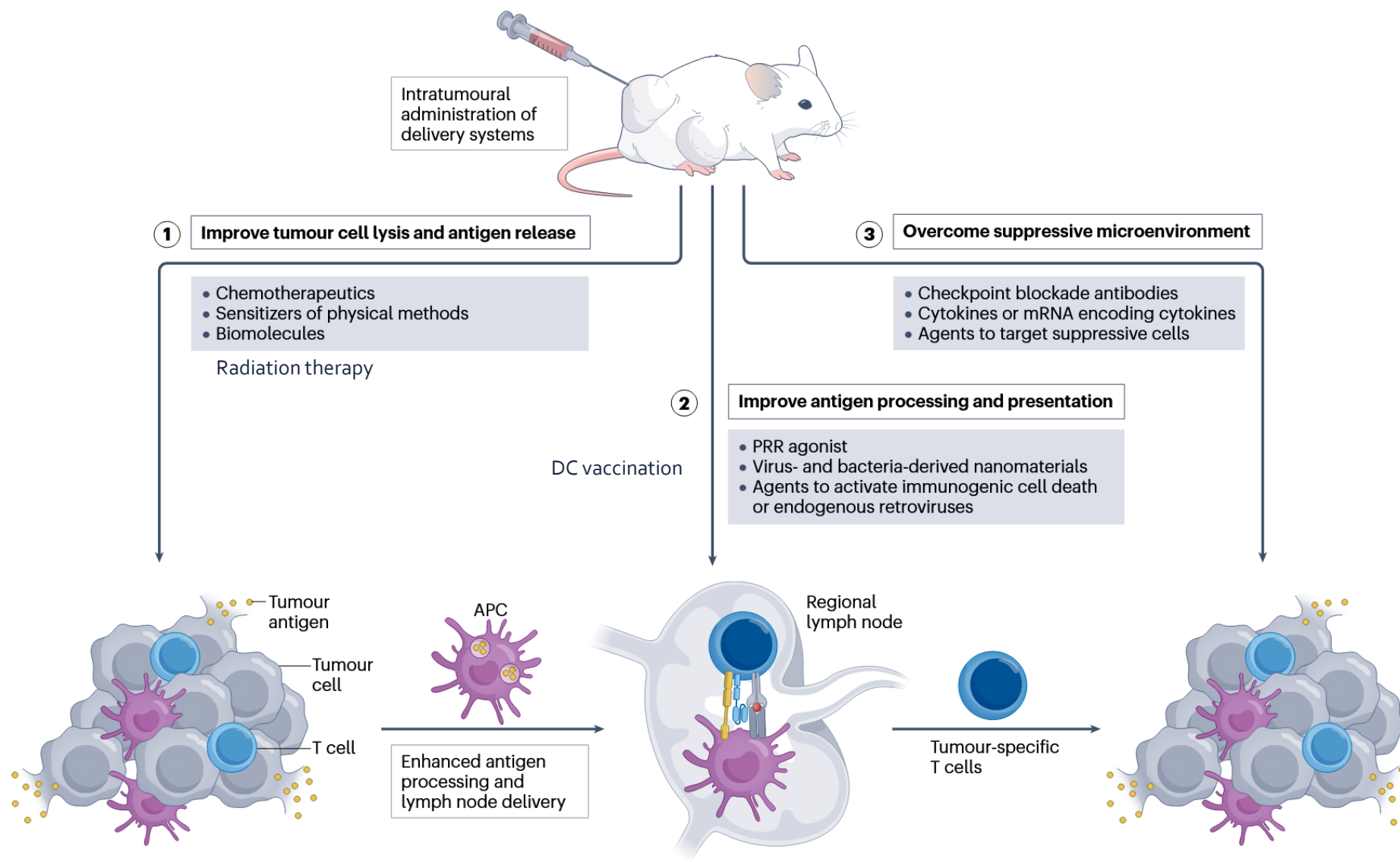
Placebo Tumor induction Tumor growth



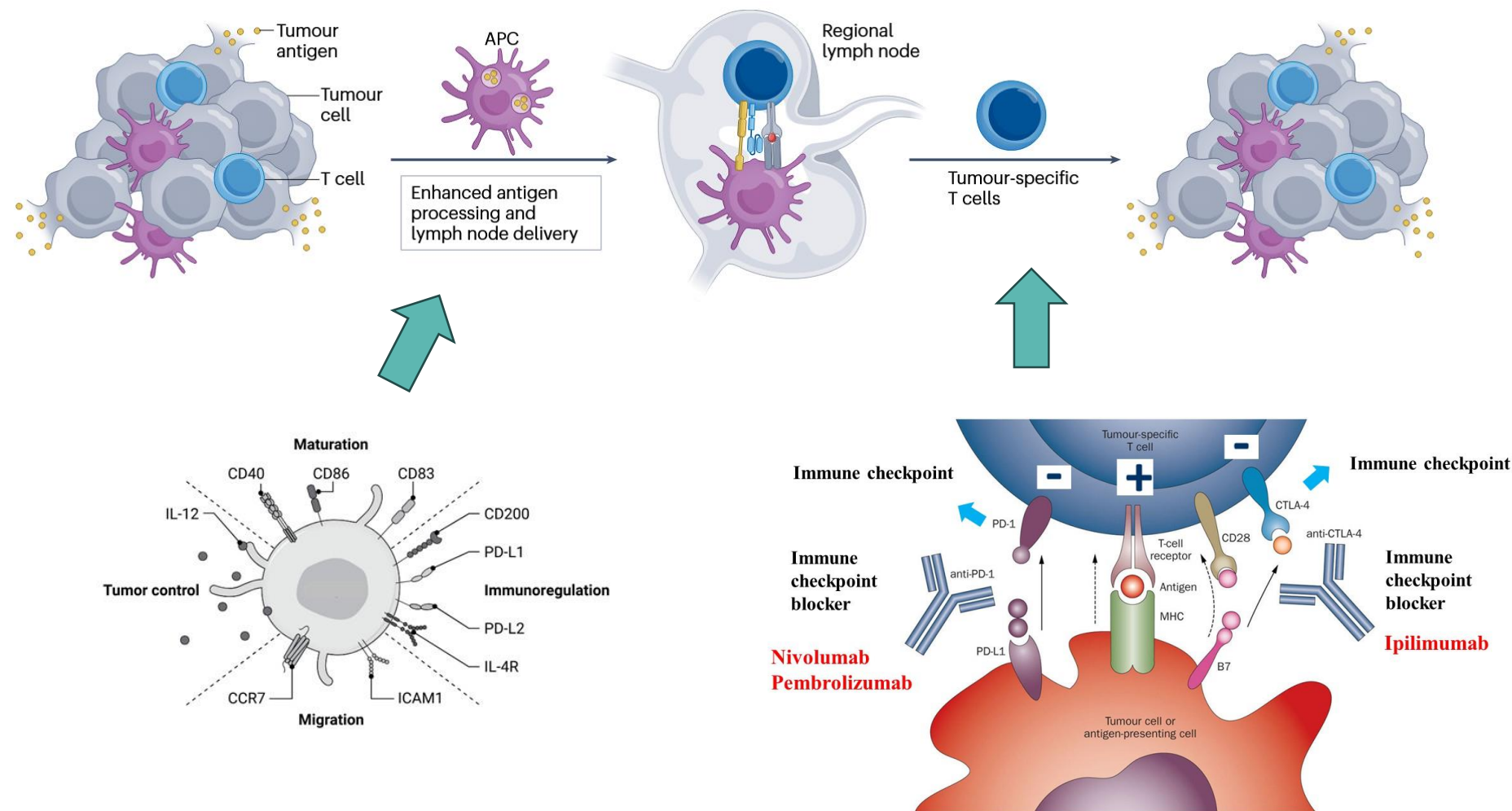
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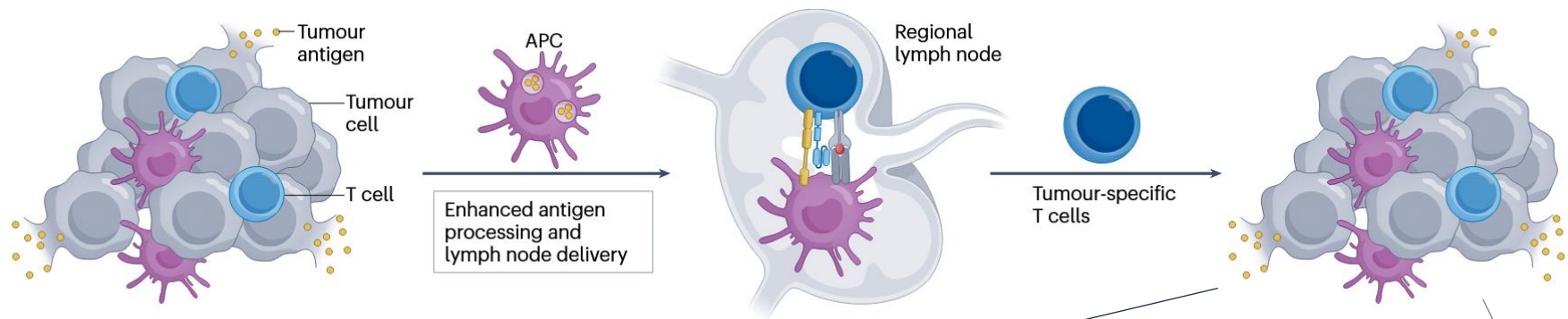
Combination therapies



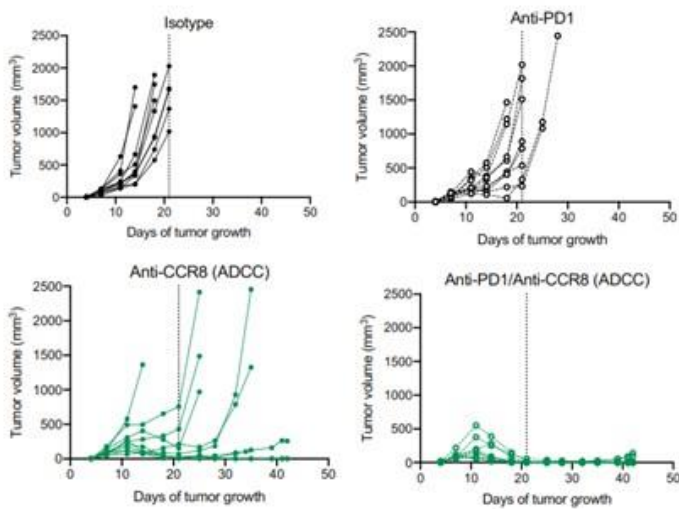
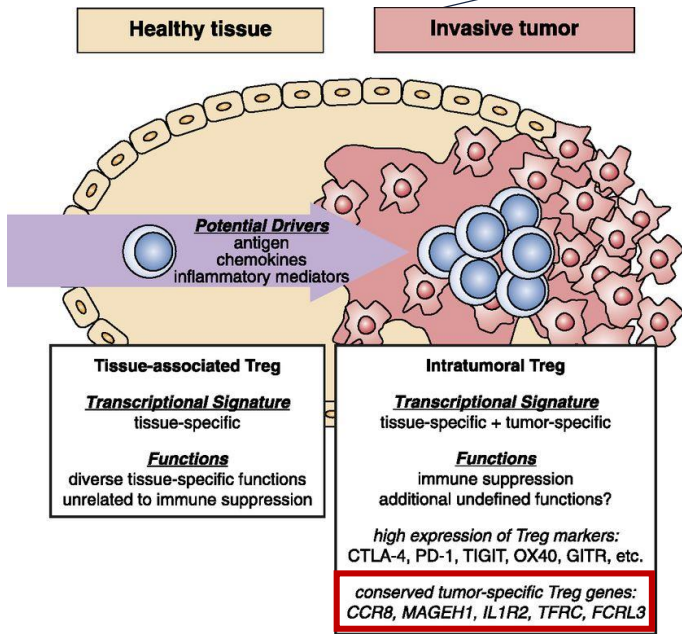
Combination therapies: DC vaccination + Immune checkpoint blockade



Combination therapies: Removal of immune suppressive tumor microenvironment

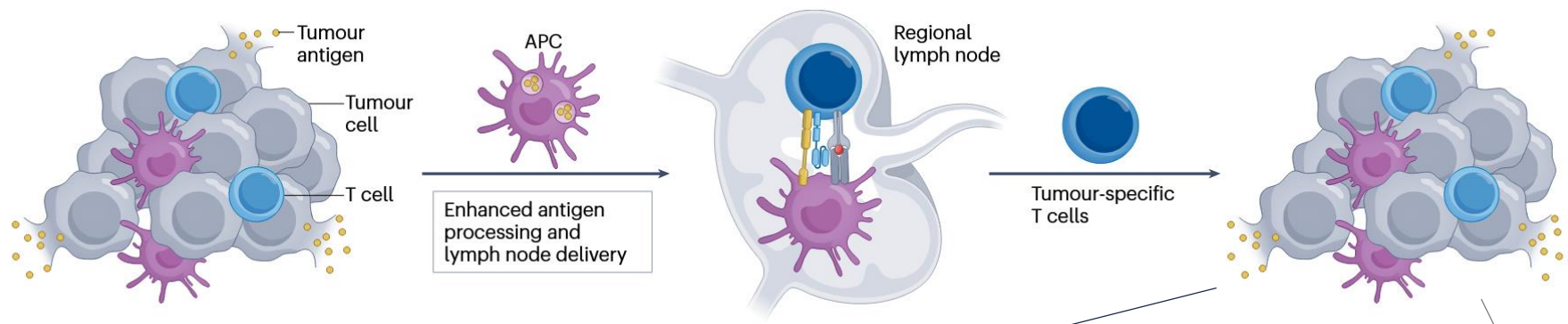


Removal of
Tumor-infiltrating Treg

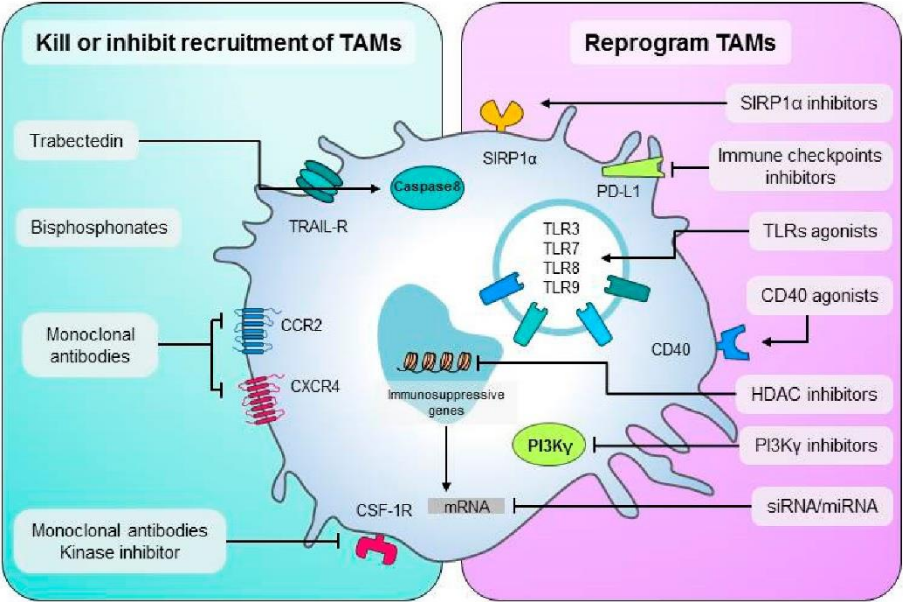


Anti-PD₁ + anti-CCR8

Combination therapies: Removal of immune suppressive tumor microenvironment



Removal or repolarization of tumor-infiltrating macrophages



Acknowledgements



How to present tumor antigen to T cells?

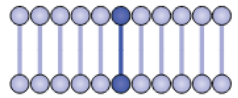


| | Conventional cDC1 | Conventional cDC2 | Plasmacytoid pDC | LC | Monocyte derived DC |
|---|--|--|---|--|---|
| Ontogeny | HSC + Flt3-L, BATF3, BATF3, ZFP366, NFIL3 and Id2 | HSC + Flt3-L, RelB, NOTCH2, RBP-J, IRF2 and IRF4 T-bet OR RORyt | HSC + Flt3-L and E2-2 | Blood residing monocytes + inflammation | Fetal liver monocytes + CSF1R |
| Mouse Other markers | CD8α⁺/CD103⁺ cDC DEC205 ⁺ | CD4⁺ CD11b⁺ cDC | SiglecH⁺ BST2⁺ pDC B220 ⁺ | Langerin⁺ LC | CD11b⁺ moDCs CD64, Fc γ R ϵ , Ly6c |
| Human Other markers | CD141⁺ (BDCA-3) cDC CD162 ^{hi} DEC205 ^{hi} | CD1c⁺ (BDCA-1) cDC CD11b ^{lo/+} | CD123⁺ pDC BDCA-2 ⁺ , BDCA-4 ⁺ | Langerin⁺ LC DEC205, CD1a ^{hi} | CD11b⁺ CD1a⁺ moDCs CD24 ⁺ , CD206 ⁺ , CD16 ⁺ and DC-SIGN |
| Conserved (besides CD11c and MHC class II) | TLR3⁺ CADM1⁺ XCR1⁺ CLEC9A⁺ | MHCII^{hi} SIRPα⁺ (CD172a) | TLR7^{hi} TLR9^{hi} | E-cadherin⁺, EpCAM⁺, and Langerin⁺ | CD11b⁺ |
| Functions | T_H1 Cross-presentation | T_H2 and T_H17 Cross-presentation | IFN-α/β and IFNλ Humoral | Adaptable MOUSE: Treg or T_H17 HUMAN: IL-15 promoting CTLs + Cross-presentation | Highly adaptable (IL-12, IL-23, TNFα, iNOS) |

How to present tumor antigen to T cells?

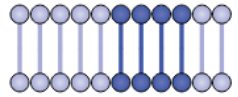
a Genomic alterations

Missense point mutation



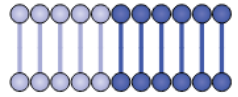
Missense mutation

Insertion or deletion



Frameshift

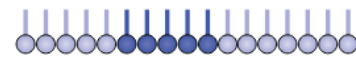
Gene fusion



Gene A Gene B Protein A Protein B

b Altered transcription

Tumour-specific alternative splicing
(exon or intron retention)

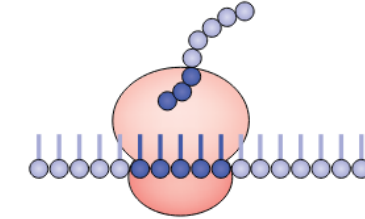


Insertion

Frameshift

c Altered proteome

Altered translation (novel ORFs and reading through stop codons)



Novel polypeptides

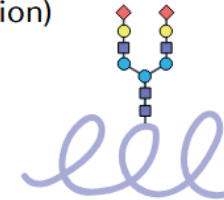
Carboxy-terminal extension

Expression of oncoviruses and ERVs



Tumour-specific proteins

Altered post-translational modifications
(e.g. glycosylation)



Tumour-specific protein modifications