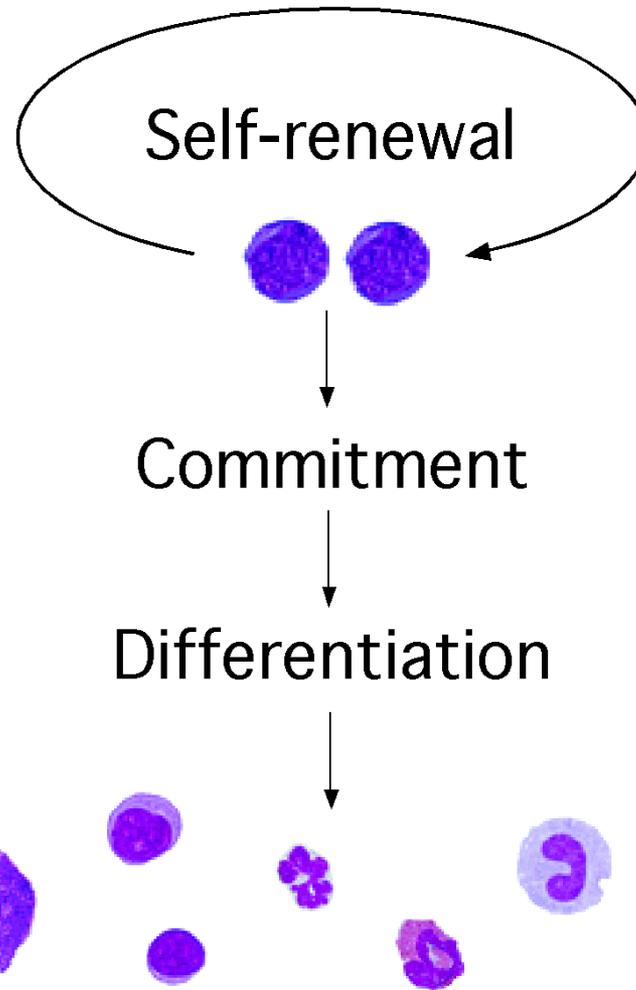




Blood-Forming Stem Cells



1. **Development**

2. **Maintenance**

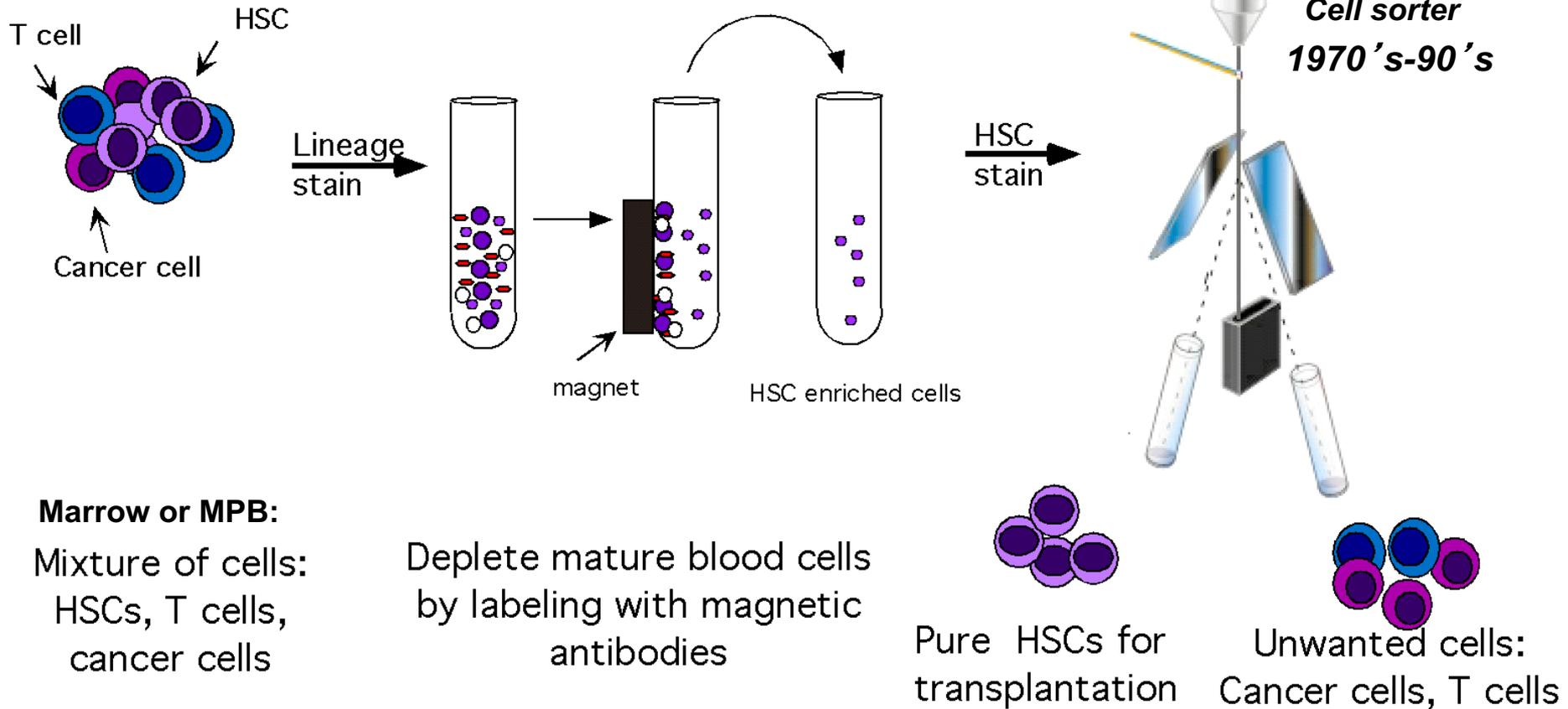
3. **Malignant transformation and blood diseases**

**IN VIVO
VERITAS**

Blood forming stem cells make blood, and only blood



Removal of Contaminating Cancer Cells and T cells from Stem Cell Grafts



Mouse HSC: ckit+sca1+150+34-flk2-48-Lin-

Human HSC: CD34+90+38loLin-45RA-

Both ~ 1 in 100,000 bone marrow cells

**250,000 fold depletion
Cancer cells or T cells**



Using self cancer-free blood stem cell transplantation to treat women with metastatic breast cancer

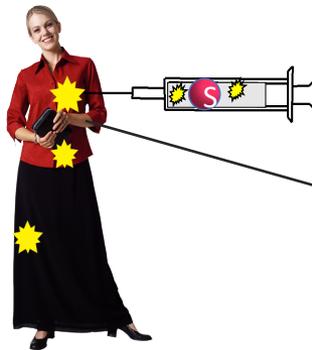
Muller, Kohrt, Shizuru, Negrin, Blume Weissman, et al. 1996-98, published *BBMT* 2012

ALL PATIENTS GIVEN VERY HIGH DOSE COMBINATION CHEMOTHERAPY TO KILL MORE CANCER

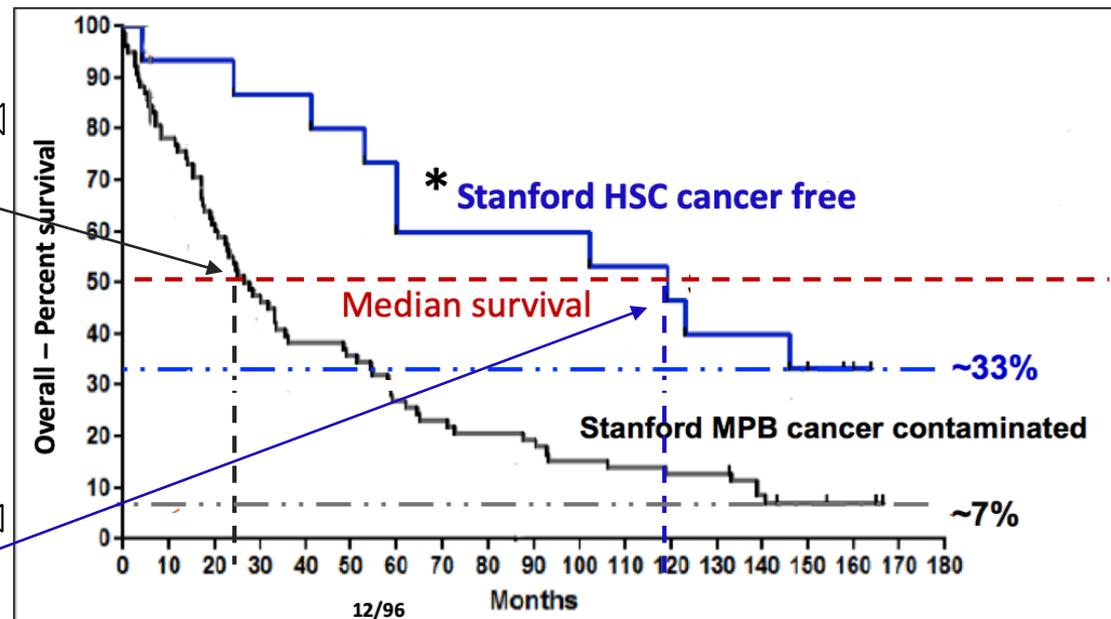
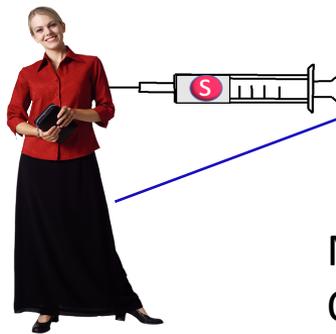
~160,000 women in US with metastatic breast cancer

Cisplatin, cytoxan, carmustine

THE PROBLEM
Rescue blood system with unpurified graft; giving **cancer back**



THE SOLUTION
Rescue with **purified cancer free stem cells**



Median survival: ~2 yrs vs. **10 yrs** with purified stem cells
Overall survival: **7%** vs **33%** with purified stem cells

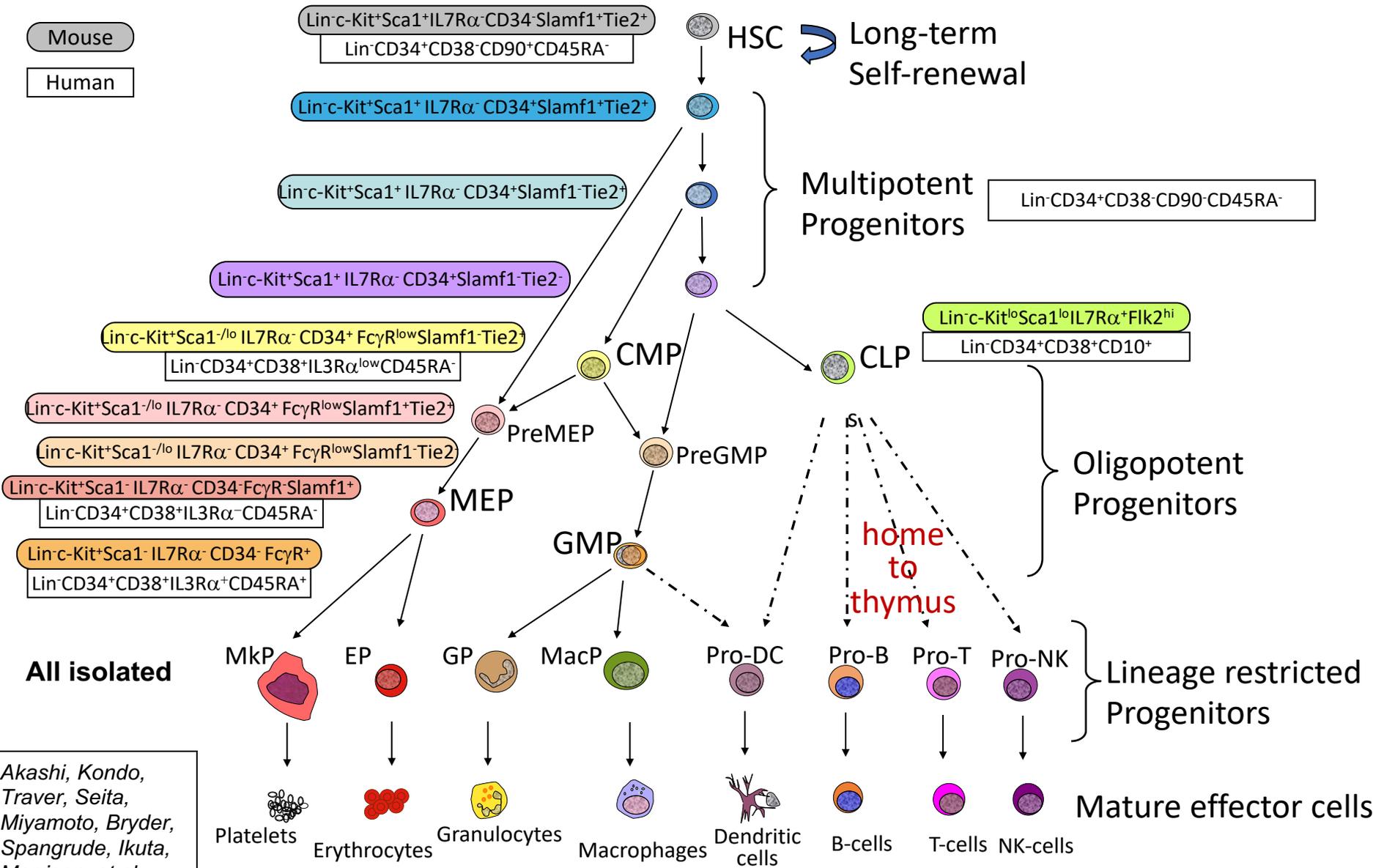
Estimated MBC remaining after chemo ~ 100K; in models anti-CD47 clears these.

**SyStemix and all of its HSC therapies shut down by purchasing company*



Hematopoietic Hierarchy

Gene Expression Commons: Seita, Sahoo et al. <http://gexc.riken.jp>

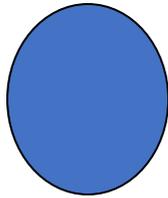




Leukemic cells in AML patients

LT STEM CELLS

CD34⁺CD38⁻Thy⁺Lin⁻



**5-40%
AML-1/ETO⁺**

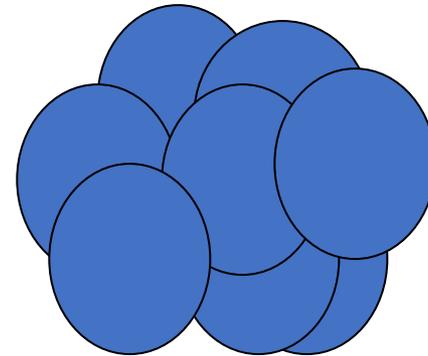


Normal colonies in vitro,
Normal blood
formation in vivo

STHSC:MPP=LSC

CD34⁺CD38⁻Thy⁻Lin⁻

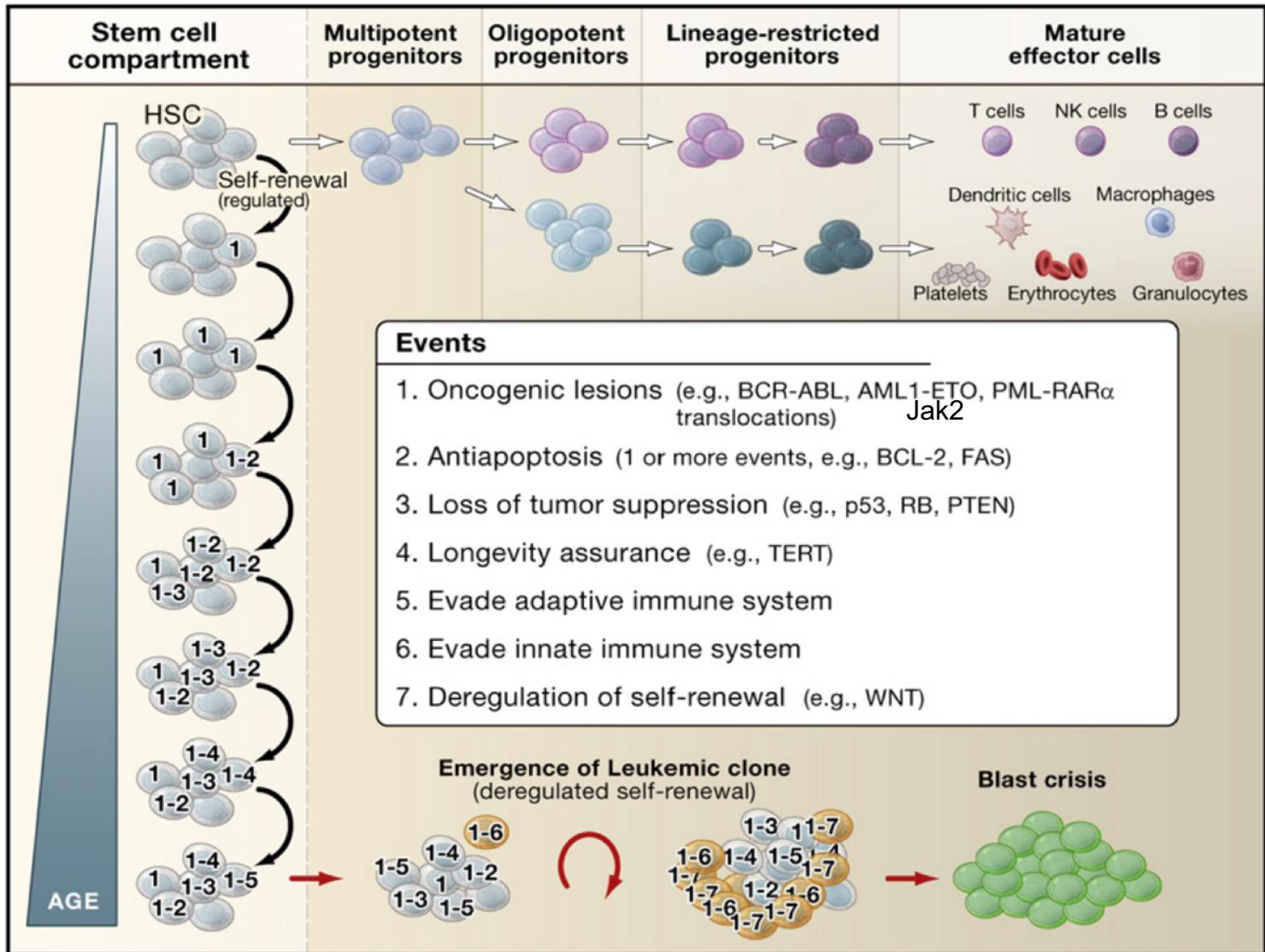
Leukemia Stem Cells [LSC ~5%]



Leukemic blast colonies in vitro.
Leukemia in vivo: blasts cells not
leukemia-initiating.



Cell of origin – progression to leukemia



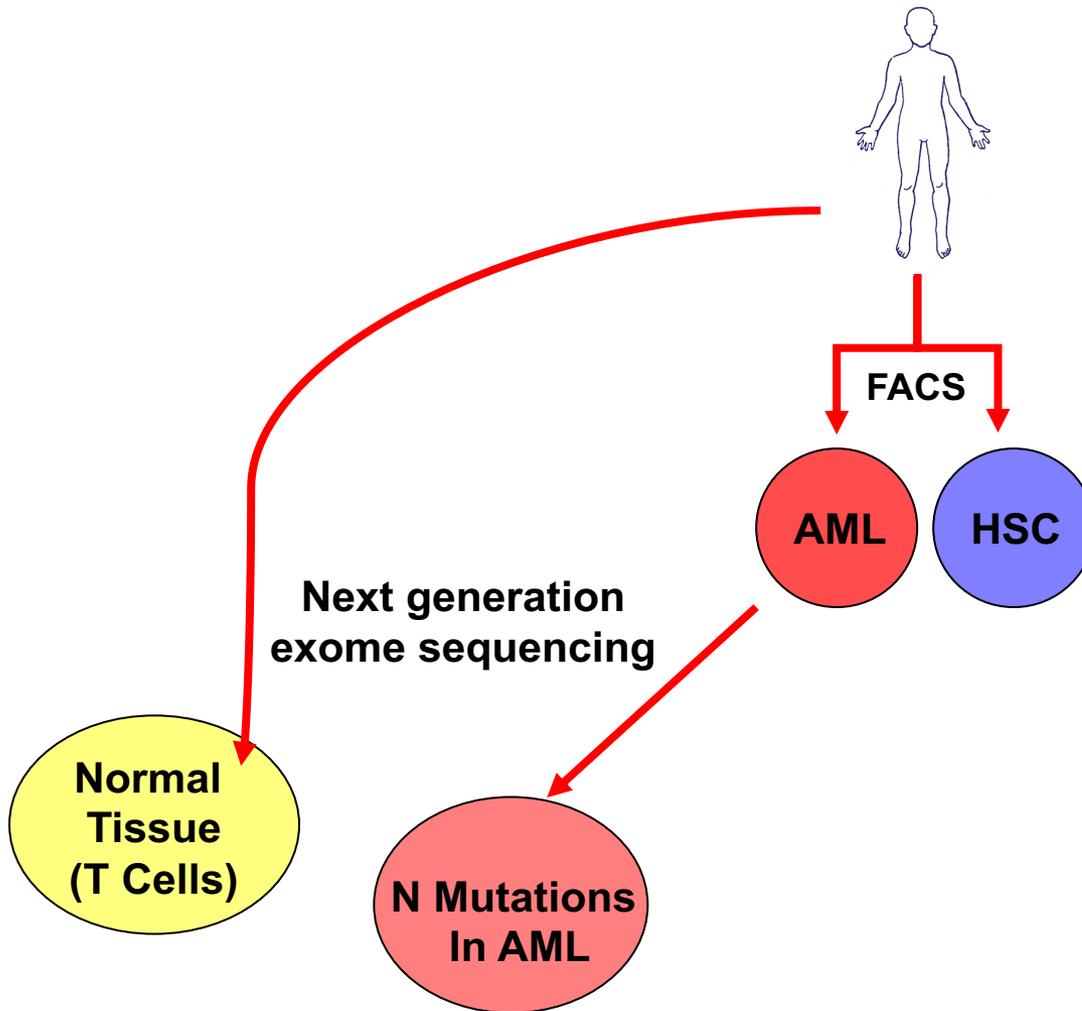
LSC: **MPP**
IN AML &
GMP IN
CML Myeloid
BLAST
CRISIS

Competition!

Traver and IW, 1998, Reya, Morrison, Clarke, and IW, 2001



Identification of Somatic Mutations by Exome Sequencing



AML	Gene	Annotation
SU070	PXDN	V616I
	KALRN	S44P
	TET2	Y1649stop
	TET2	T1884A
	TMEM8B	nt G471A
	NCRNA00200	nt G354A
	TMEM20	A143T
	ZRANB1	nt G4659A
	SCN4B	H227N
	GABARAPL1	nt C1583T
	DOCK9	A1475V
	PLAG2G4D	P246A
	CACNA1H	R1069stop
	CTCF	R339Q
	GZF1	nt G3835C
	PRPF6	R527H
	CXorf36	I225L
	CXorf66	G321S
	FLT3	599-610 ITD

Max Jan

Thomas Snyder

Ryan Corces-Zimmerman

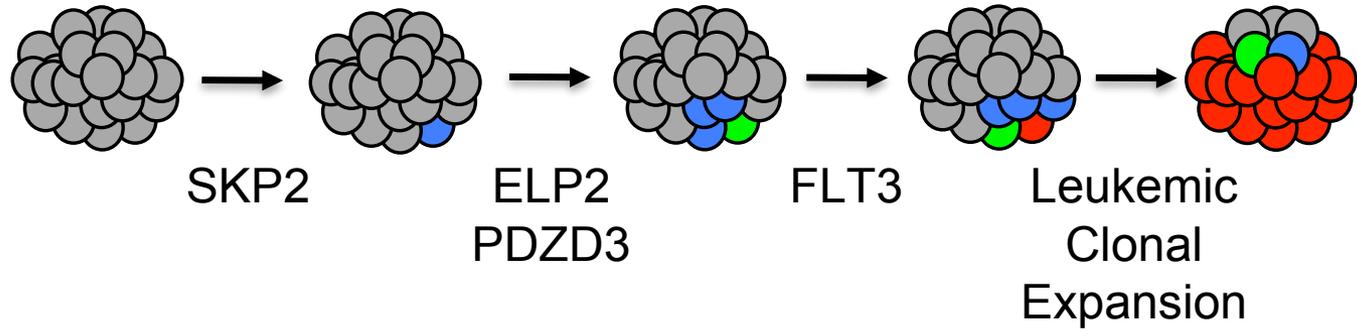
Steve Quake

Ravi Majeti

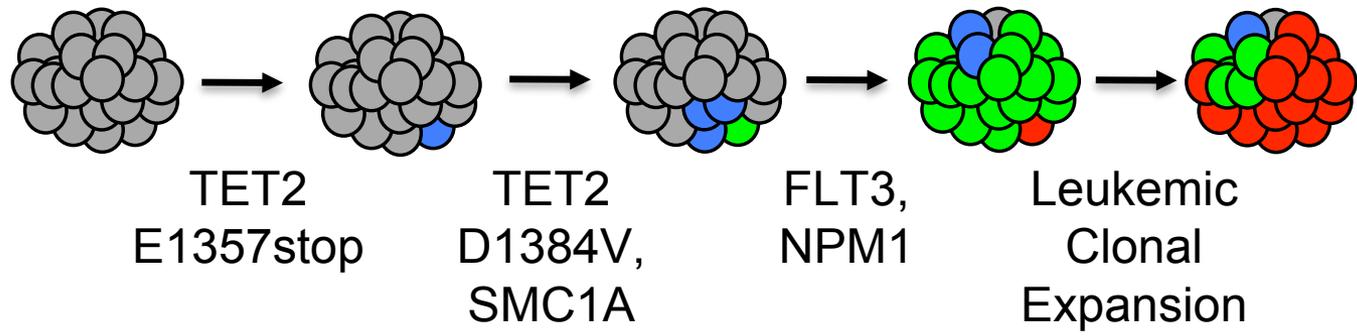
Irv Weissman *Science Translational Medicine* 2012 4(149): 149ra18.



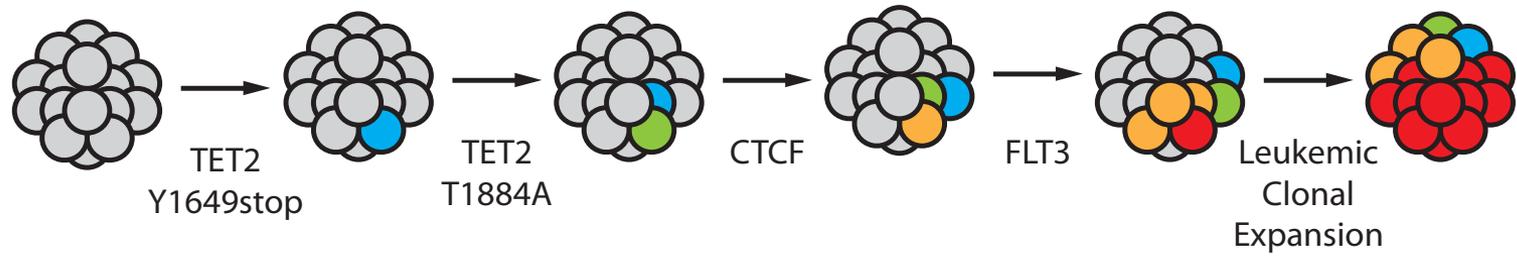
Analysis of Single HSC to Identify Pre-Leukemic Clones



Max Jan
 Thomas Snyder
 Ryan Corces-Zimmerman
 Steve Quake
 Ravi Majeti
 IW



Tet2 LOF, DNMT3a LOF
 IDH1/2 change of fxn,
 CTCF change of DNAb
 Are early HSC events that
 Drive clonal expansion

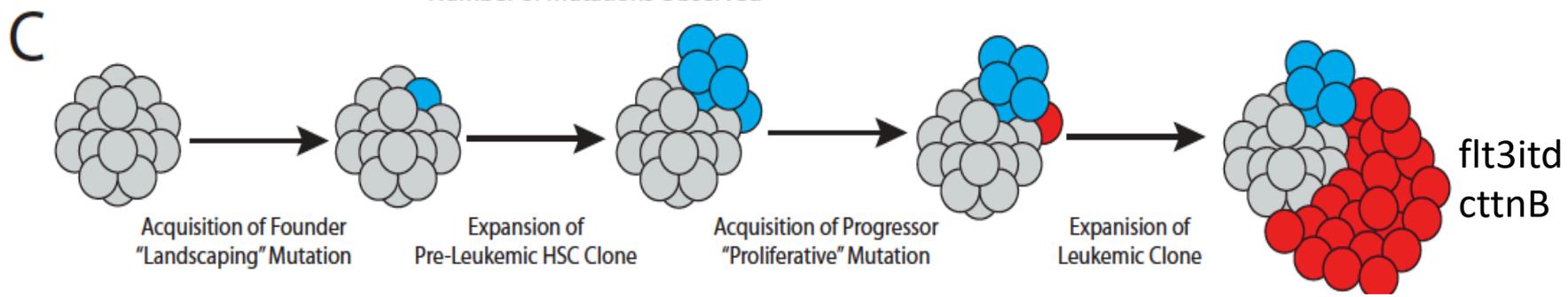
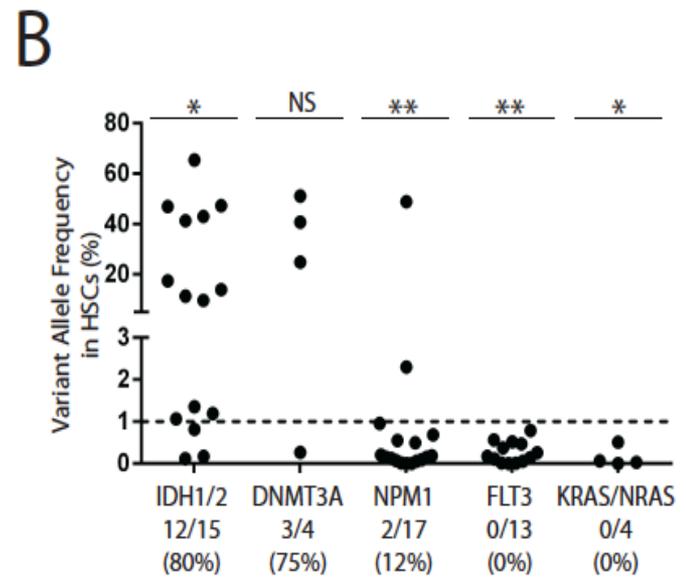
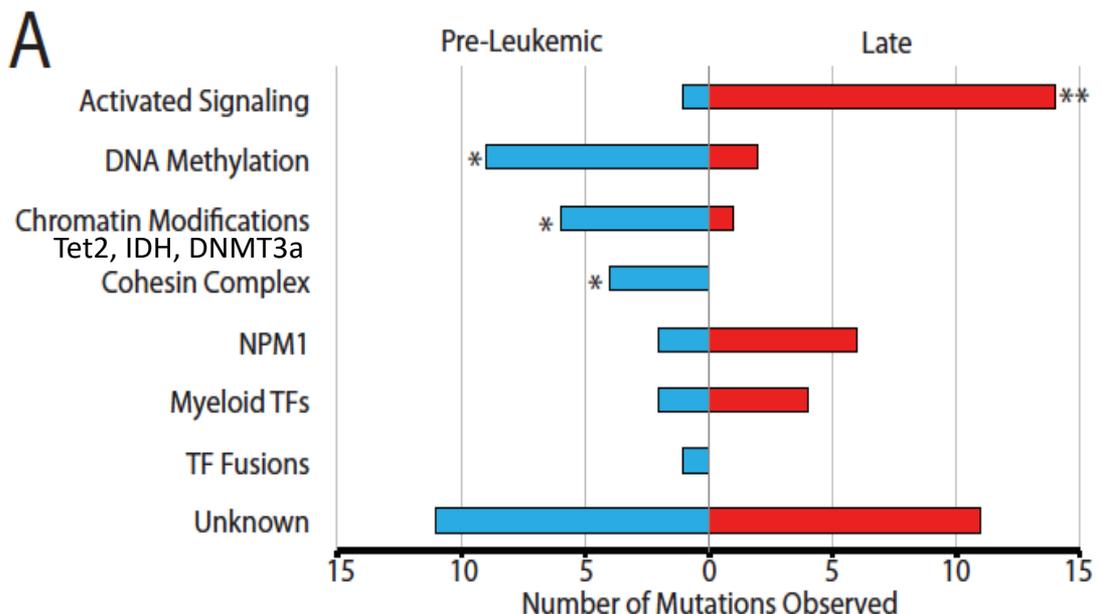


Flt3itd, Ctnnb, or
 leuk ras
 mutations are
 at the MPP or
 GMP stage to
 give LSC





If you want to know which genes are likely oncogenes, ask the cancer.



Now data for 21 AMLs



Lessons for leukemia and perhaps all cancers

1. In AML, progression is in a blood stem cell clone, while the leukemia stem cells is at the progenitor stage: preleukemic clones of HSC **compete** with nl HS
2. There are no leukemias we have found that are leukemias of HSC
3. If this is true for leukemia, it is **probably true for all cancers in tissues that regenerate from tissue stem cells**
4. ***Clonal competition by precancerous stem cells can lead to diseases caused by the mutations/epigenetic changes in the dominant clone;***

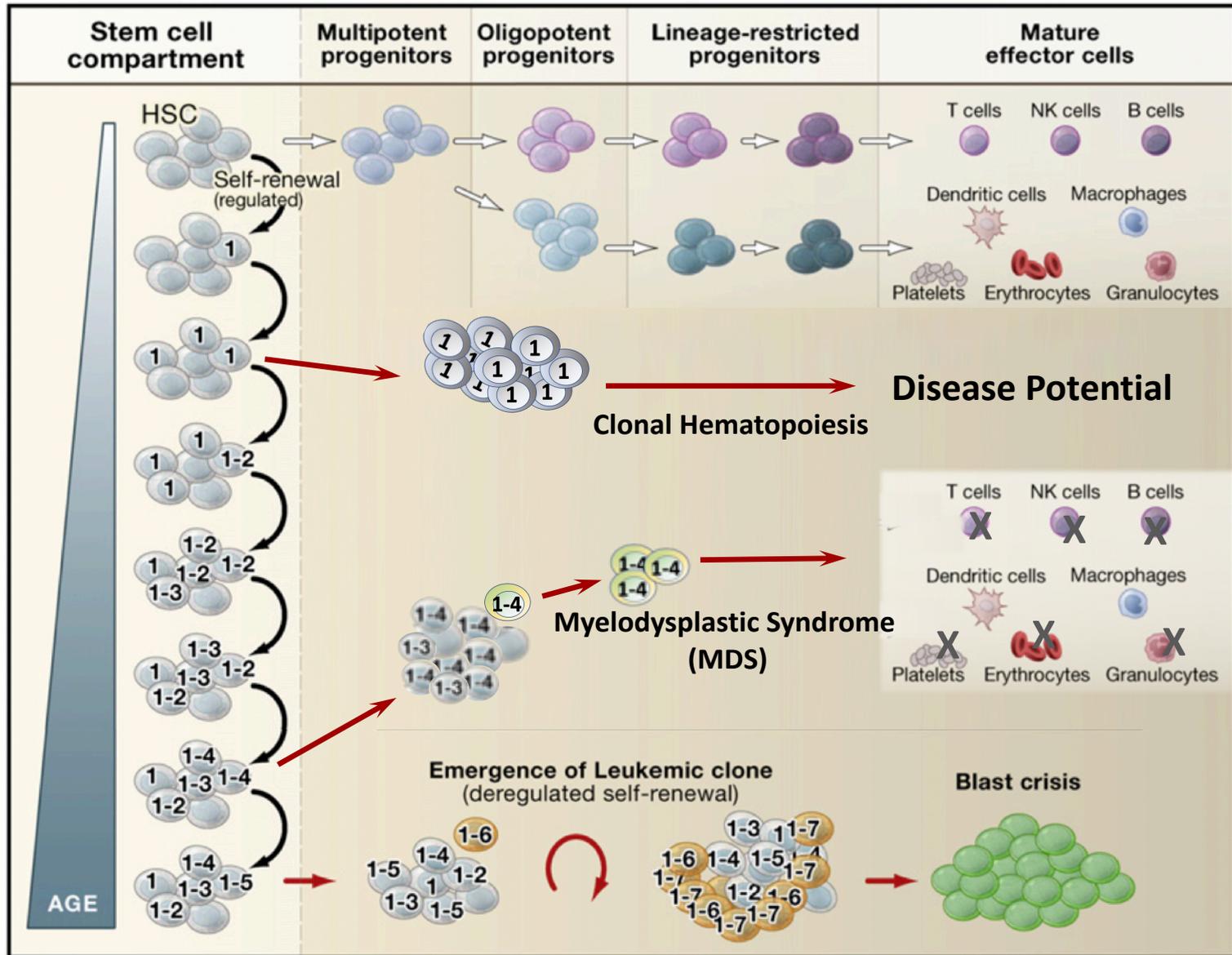
e.g., Pang, Pluvinage, Park IW: MDS;

Jaiswal and Ebert-clonal hematopoiesis of indeterminate potential.

?? Other tissue stem cells and adult onset diseases??



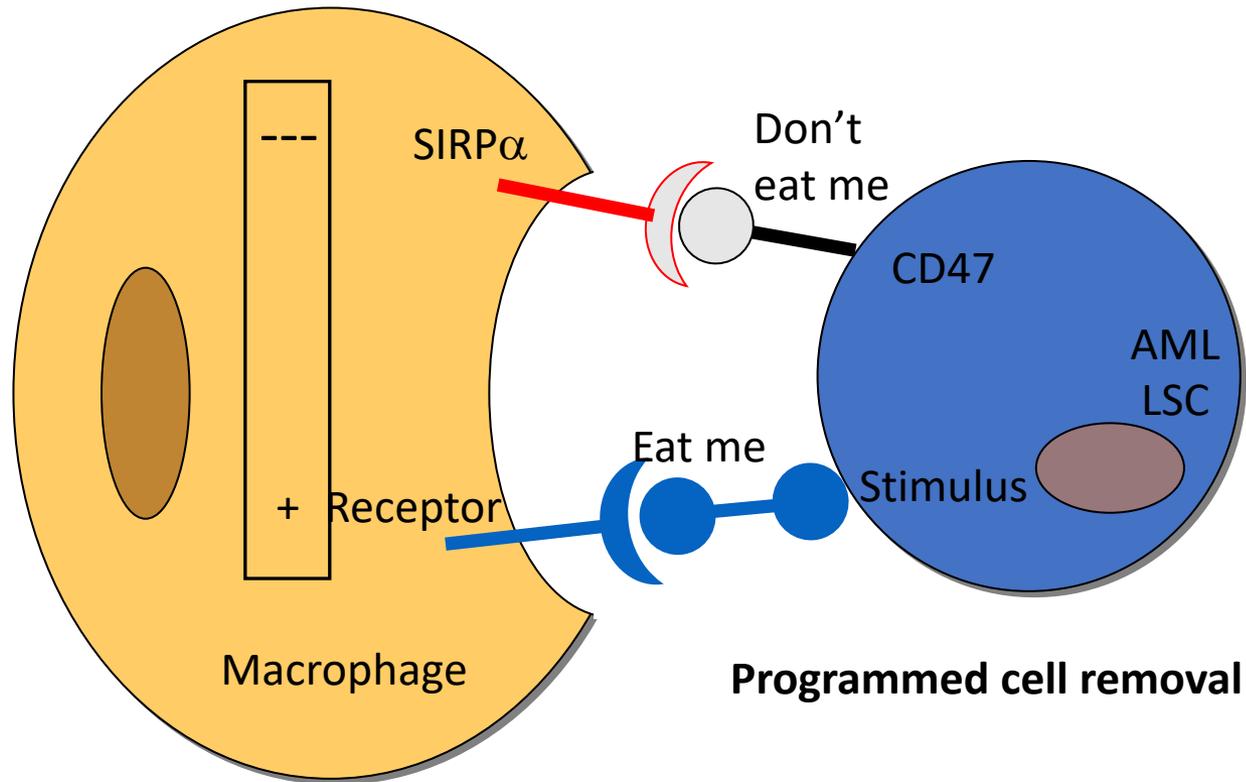
Acute Leukemia Progression Occurs in HSC to make a clone and to generate leukemic stem cells and blood diseases





CD47 was discovered as a marker of aging RBC by Oldenborg. We found it on mouse & human AML LSC

Hypothesis: Increased expression of CD47 on myeloid leukemia cells contributes to pathogenesis by facilitating evasion of phagocytosis



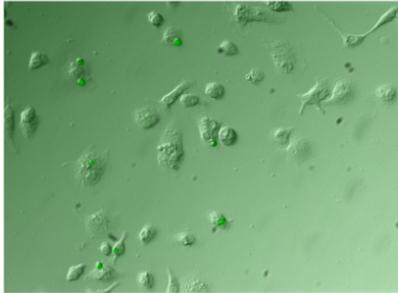
Net Result: No Phagocytosis



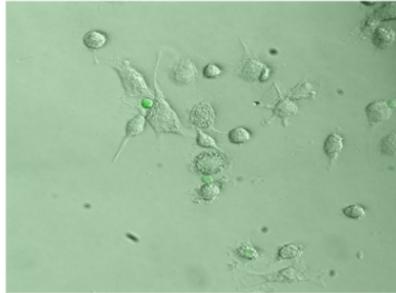
Anti-CD47 Antibodies Enable Phagocytosis of AML LSC

Human Macrophages

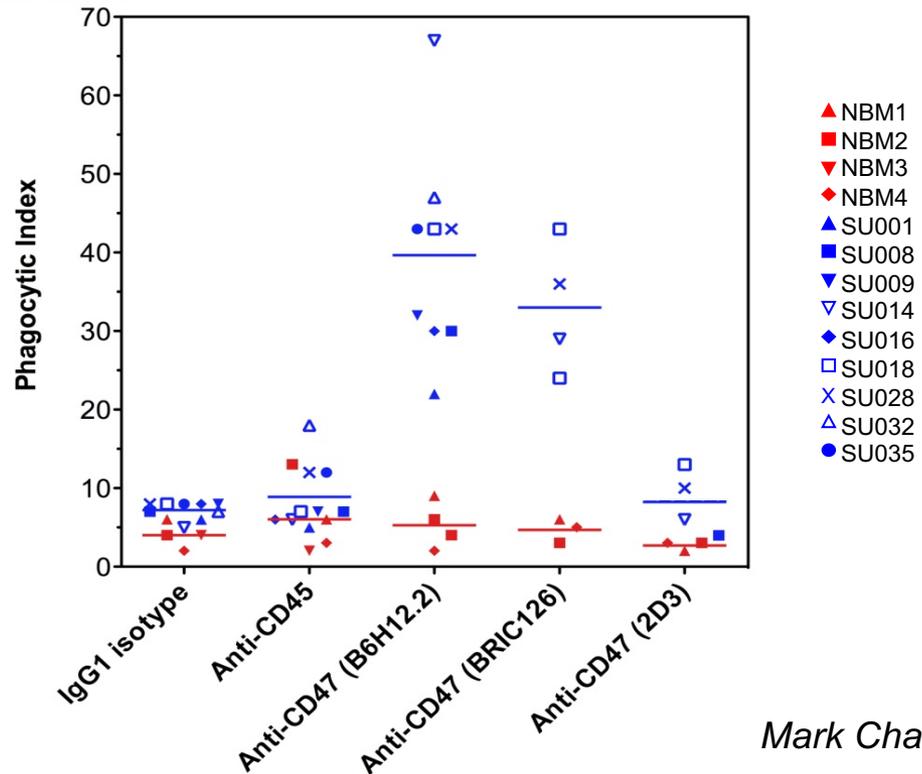
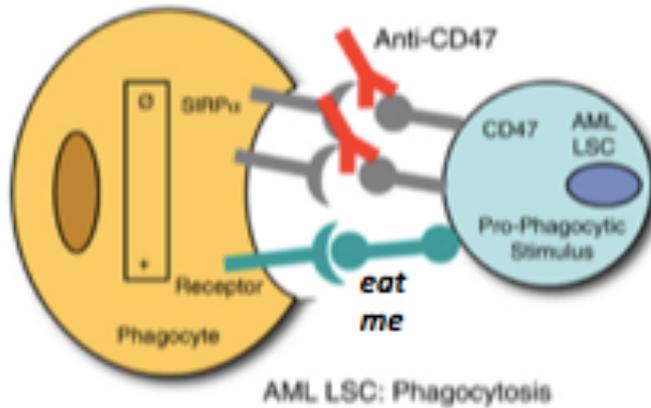
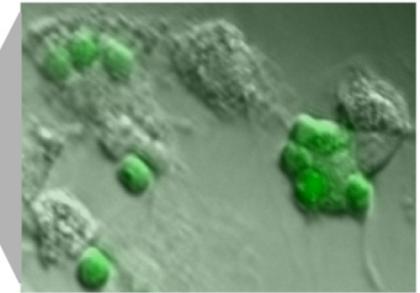
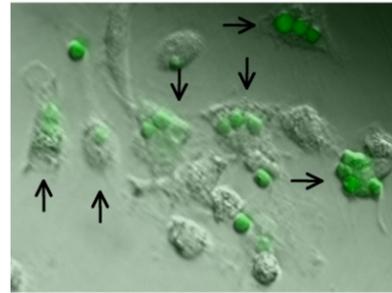
IgG1 Isotype



Anti-CD45



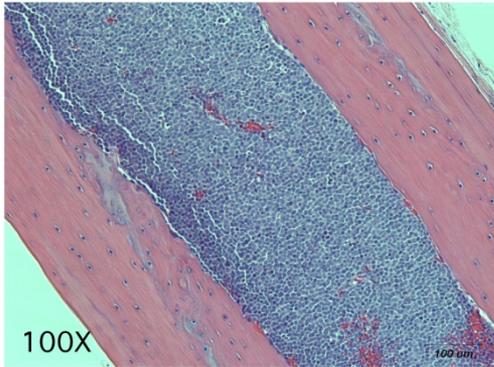
Anti-CD47 (B6H12.2)



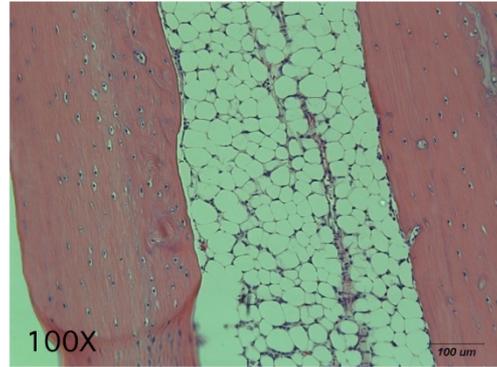


Anti-CD47 Antibody Depletes AML in the Bone Marrow

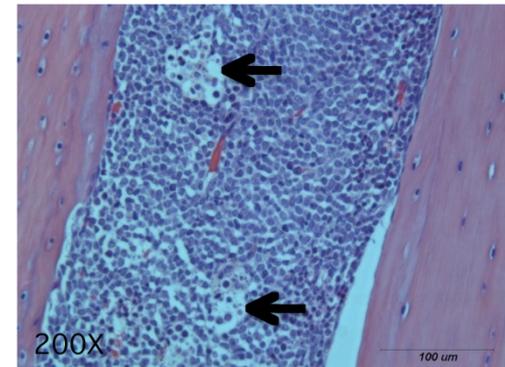
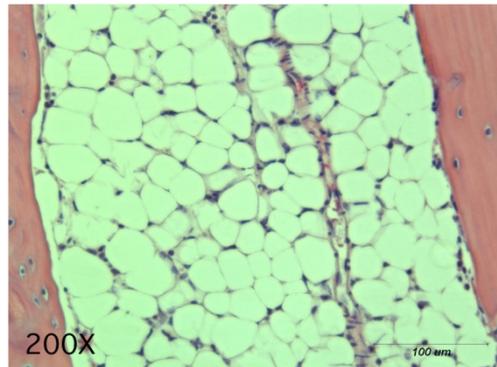
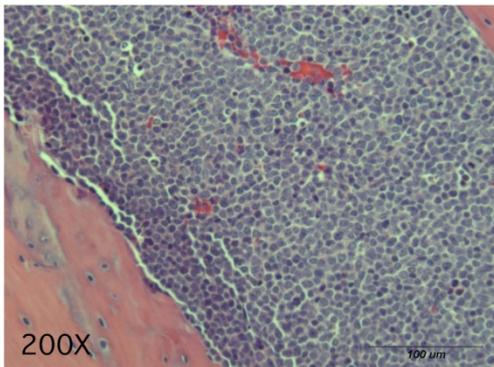
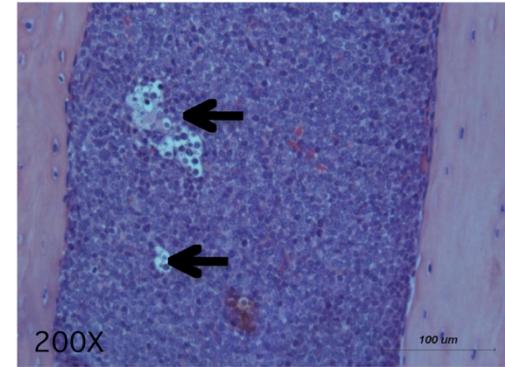
IgG Control



Anti-CD47



Anti-CD47

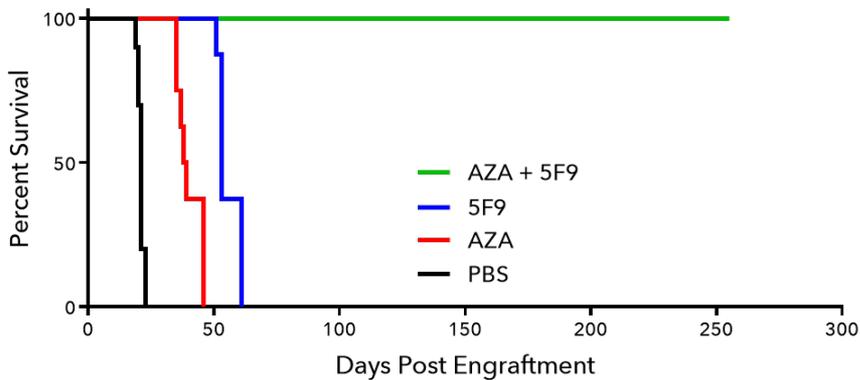


AML clinical trial with humanized anti-CD47 h5F9G4 led by Paresh Vyas at Oxford with the UK AML clinical trials group



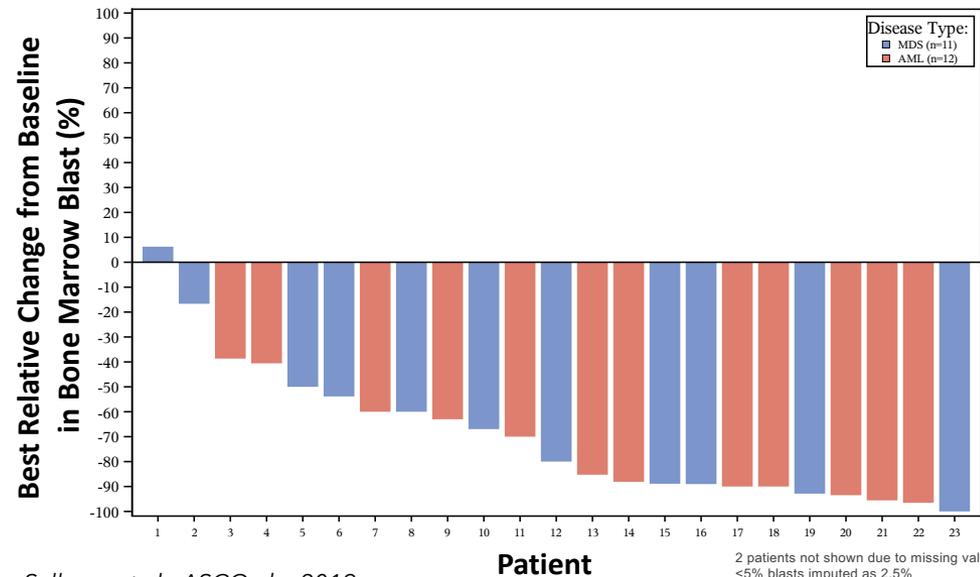
- Anti-Leukemic Activity is Observed with 5F9 Monotherapy and in Combination with Azacitidine in AML and MDS

5F9+Azacitidine in a Leukemic Xenograft Model



Feng et al., ASH abs 2018

5F9+Azacitidine in AML/MDS Patients



Sallman et al., ASCO abs 2019

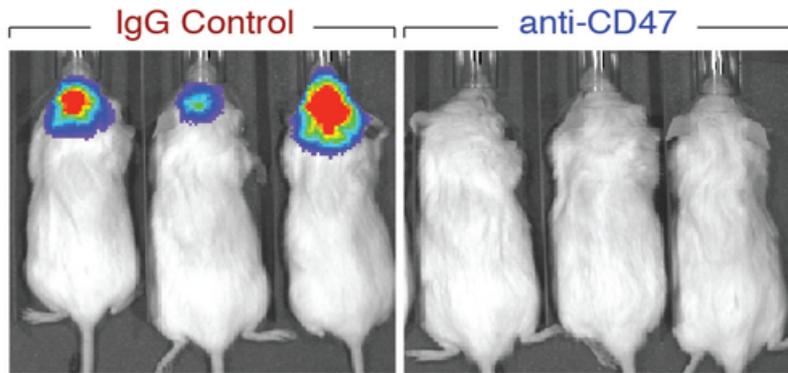
2 patients not shown due to missing values
<5% blasts imputed as 2.5%

- 5F9 synergizes with azacitidine to eliminate leukemic disease in pre-clinical models
- In a Phase 1b clinical trial, 5F9 + azacitidine has a response rate of 64% in untreated AML and 100% response rate in untreated MDS
- A registrational study of 5F9 + azacitidine in untreated MDS for FDA approval is in progress

Anti CD47 Antibody Treats Human Brain Cancers, *and all other patient xenograft cancers in NSG mice*

We have tested these human cancers and have similar results

Glioblastoma



Breast
Ovarian
Bladder
Pancreatic
Colon
Prostate
Lung
Kidney
Leiomyosarcoma
Head & Neck
Melanoma

Glioblastoma
Medulloblastoma
Oligodendroglioma
Hepatocellular Carcinoma
Gastric Cancer
Multiple Myeloma
Chronic Myeloid Leukemia
Acute Myeloid Leukemia
Non-Hodgkin's Lymphoma
T-Acute Lymphoblastic Leukemia
B-Acute Lymphoblastic Leukemia

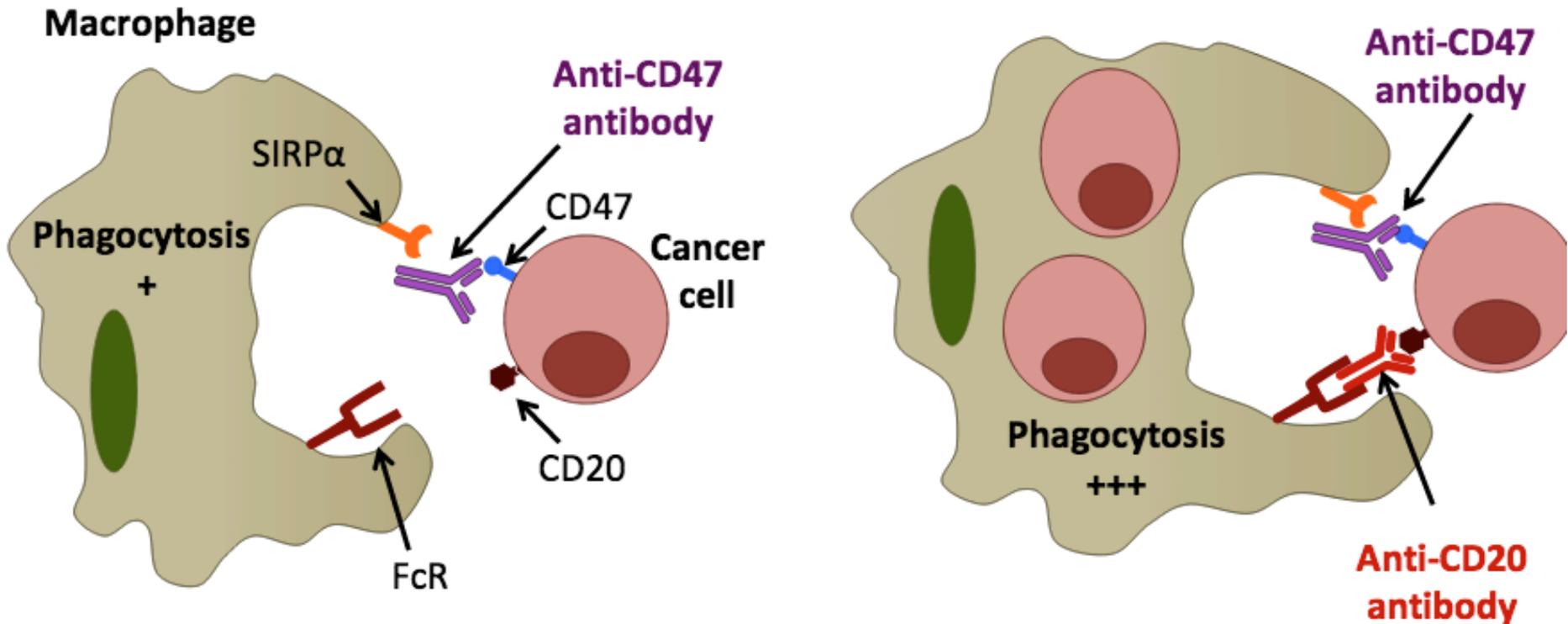
- For all tumors, small tumors and metastases are more easily cleared than large tumors.
- CD47 is the dominant don't eat me signal, but others exist

DISCLAIMER: November 30, 2015, Stanford licenses anti-CD47 IP to Forty Seven Inc; cofounders include I Weissman, R Majeti, J Volkmer, MP Chao



Anti-CD47 Antibody Combination Therapy with Cancer-Targeting Monoclonal Antibodies

Improving the 'eat me' signal

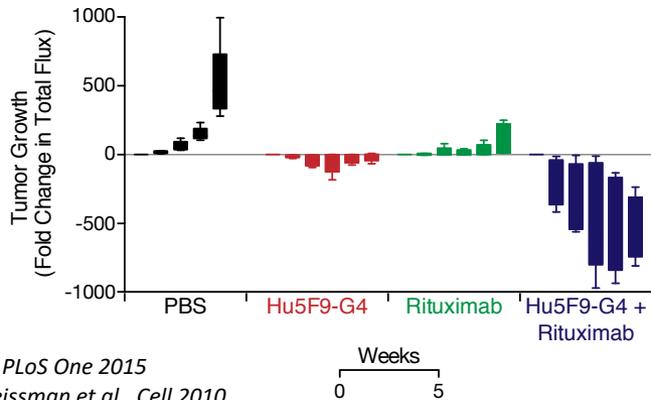


- **Combination with other cancer-targeting antibodies enhances phagocytosis of cancer cells and provide treatment to patients that are currently non eligible (e.g. rituximab - anti-CD20; cetuximab - anti-EGFR; trastuzumab - anti-HER2)**



Clinical Evidence of 5F9 + Rituximab Efficacy in Patients with Non-Hodgkin's Lymphoma

5F9+Rituximab in a Lymphoma Xenograft Model



Liu et al., *PLoS One* 2015
Chao, Weissman et al., *Cell* 2010

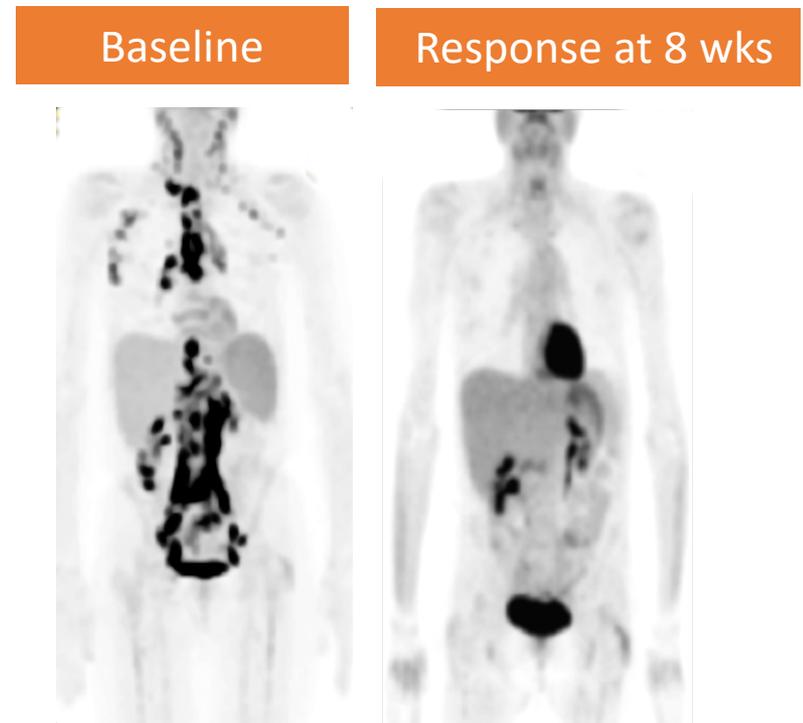
The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

CD47 Blockade by Hu5F9-G4 and Rituximab in Non-Hodgkin's Lymphoma

Ranjana Advani, M.D., Ian Flinn, M.D., Ph.D., Leslie Popplewell, M.D., Andres Forero, M.D., Nancy L. Bartlett, M.D., Nilanjan Ghosh, M.D., Ph.D., Justin Kline, M.D., Mark Roschewski, M.D., Ann LaCasce, M.D., Graham P. Collins, M.D., Thu Tran, B.S., Judith Lynn, M.B.A., James Y. Chen, M.D., Ph.D., Jens-Peter Volkmer, M.D., Balaji Agoram, Ph.D., Jie Huang, Sc.D., Ravindra Majeti, M.D., Ph.D., Irving L. Weissman, M.D., Chris H. Takimoto, M.D., Ph.D., Mark P. Chao, M.D., Ph.D., and Sonali M. Smith, M.D.

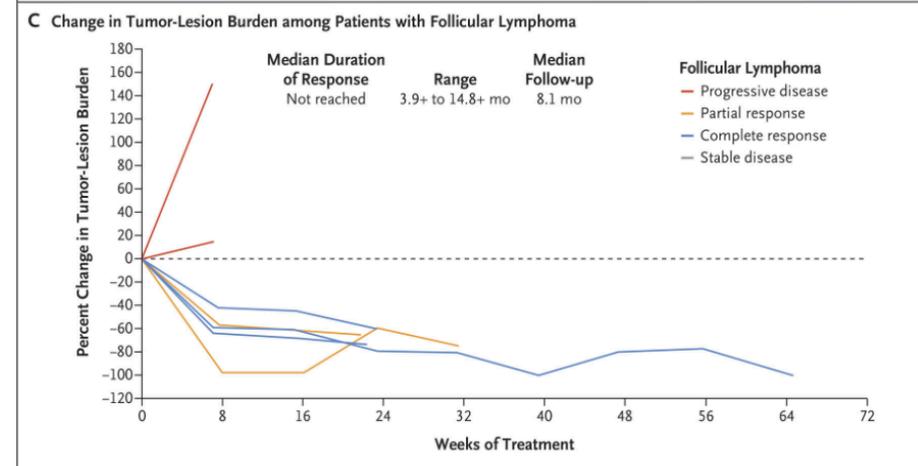
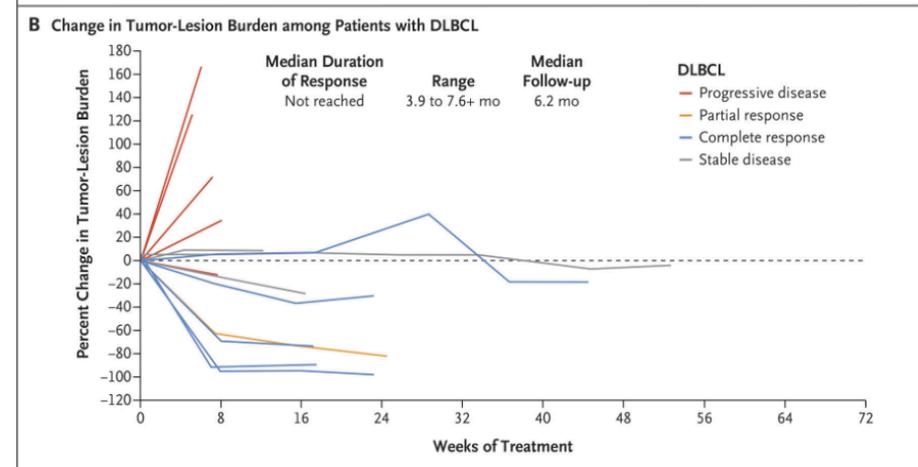
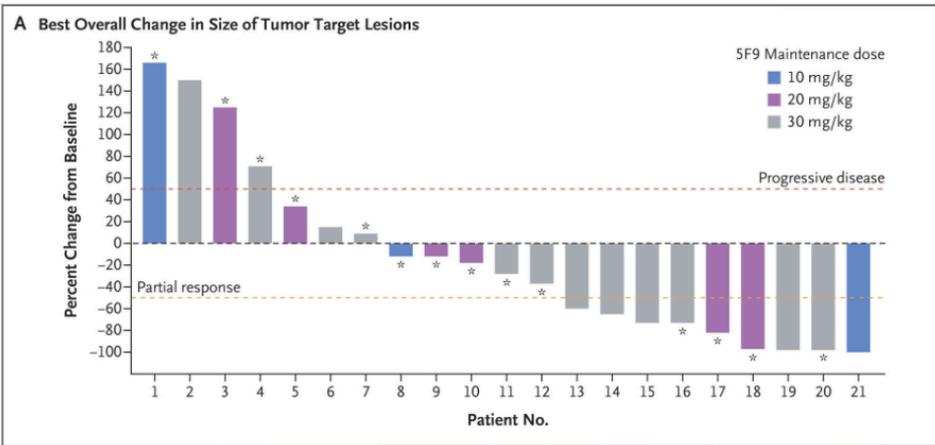
Follicular Lymphoma Patient (Complete Remission)



- 66F with follicular lymphoma
- Ten prior therapies, bulky disease
- Complete response at 8 weeks



Anti-CD47 synergy with Rituximab in refractory NHL:



Now 3 more 'don't eat me
Surface molecules and
Macrophage receptors:

❖ PDL1:PD1 *Gordon/Maute/IW*

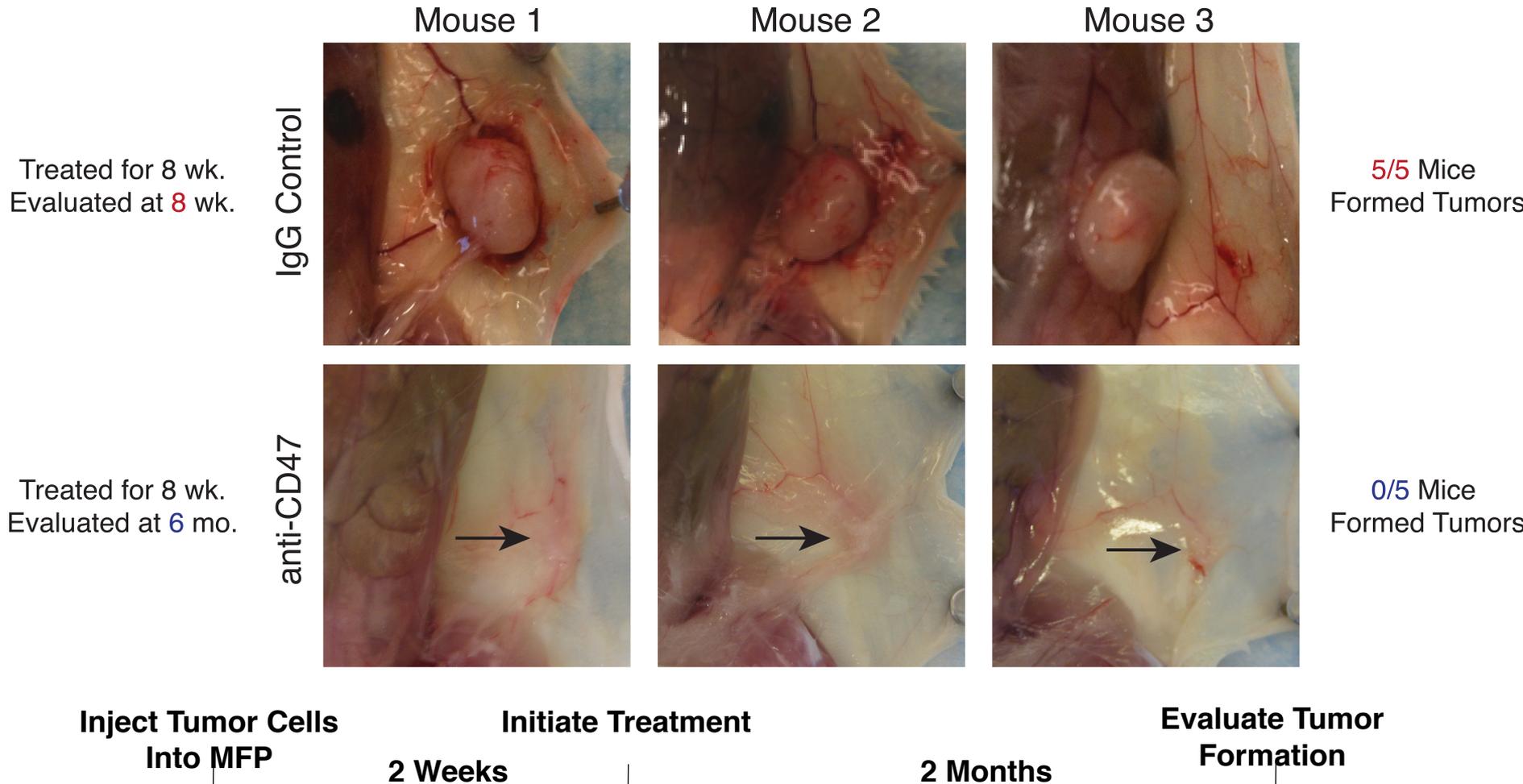
❖ MHC-b2m: LILRB1
Barkal/Maute/IW

❖ CD24: siglec 10; *Barkal/IW*



Anti-CD47 Antibodies Inhibit Growth of Xenotransplanted Patient Tumors

Breast Cancer

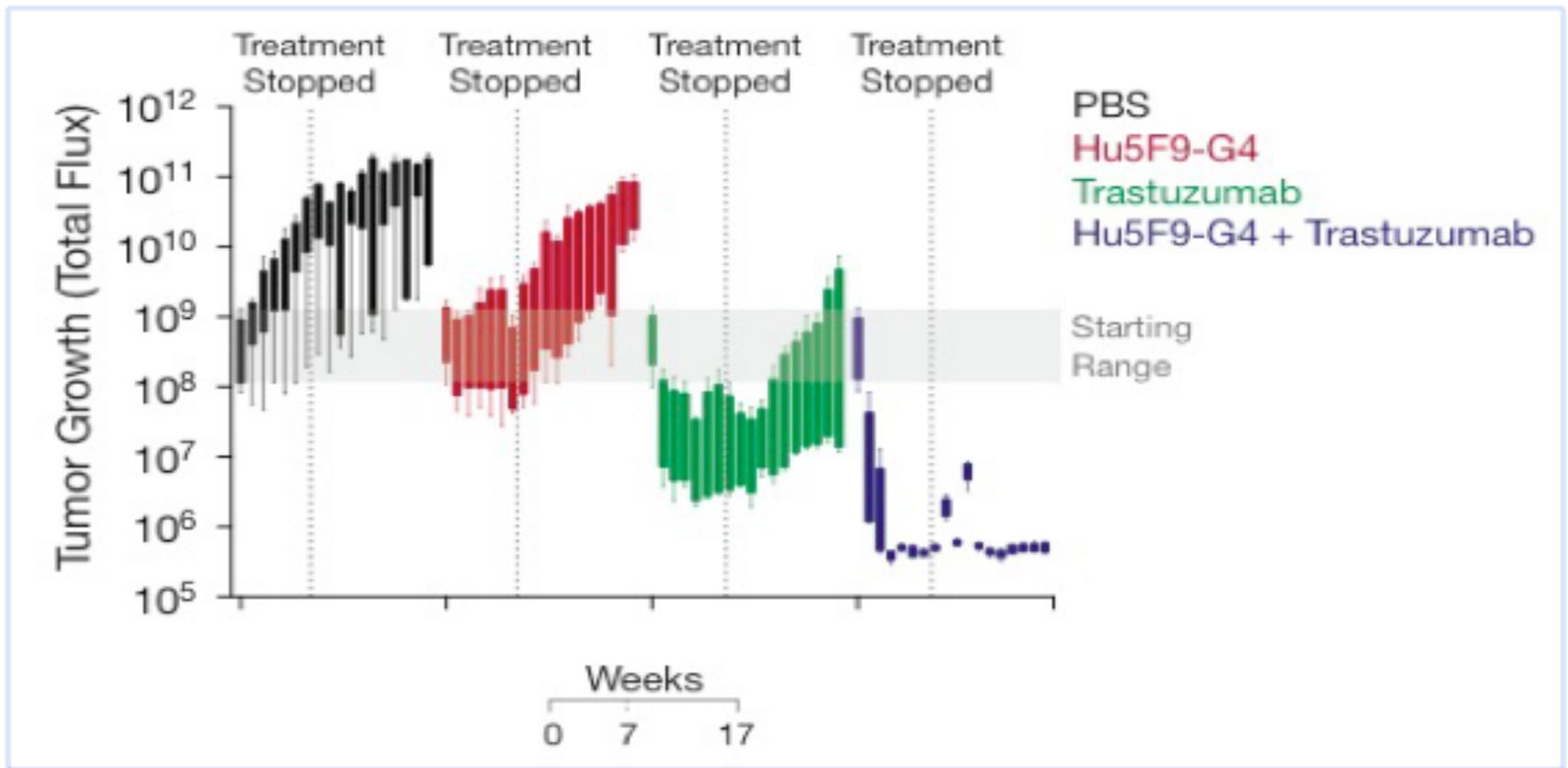


Think about cancer-free HSC: ?postransplant anti-CD47??

Willingham, Volkmer, Clarke, Scheeren, IW



Synergy between 5F9g4 and Trastuzimab for breast cancer



Can metastatic breast cancer be cured in most patients?

The bulk of breast cancer cells are removed by chemo+pure HSC;

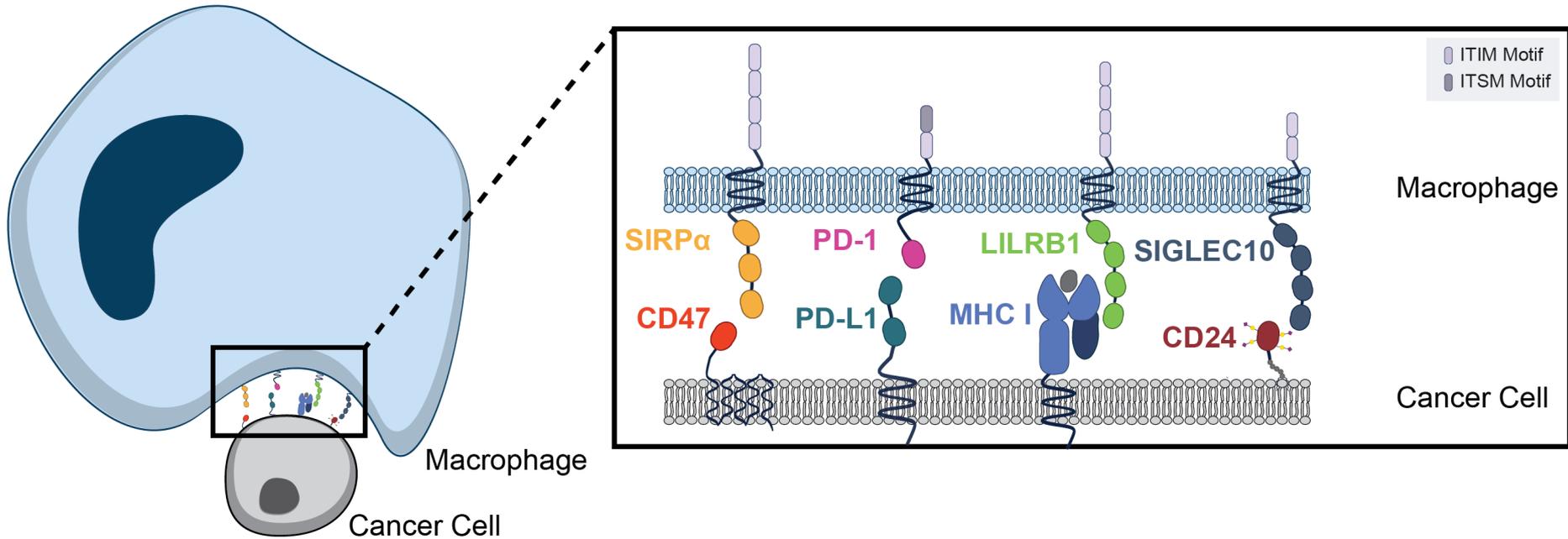
Can this antibody alone or in combination change metastatic breast cancer outcomes?



There are four innate immune checkpoints



Amira Barkal
MD/PhD Student





Other diseases in which CD47 and Calreticulin are involved

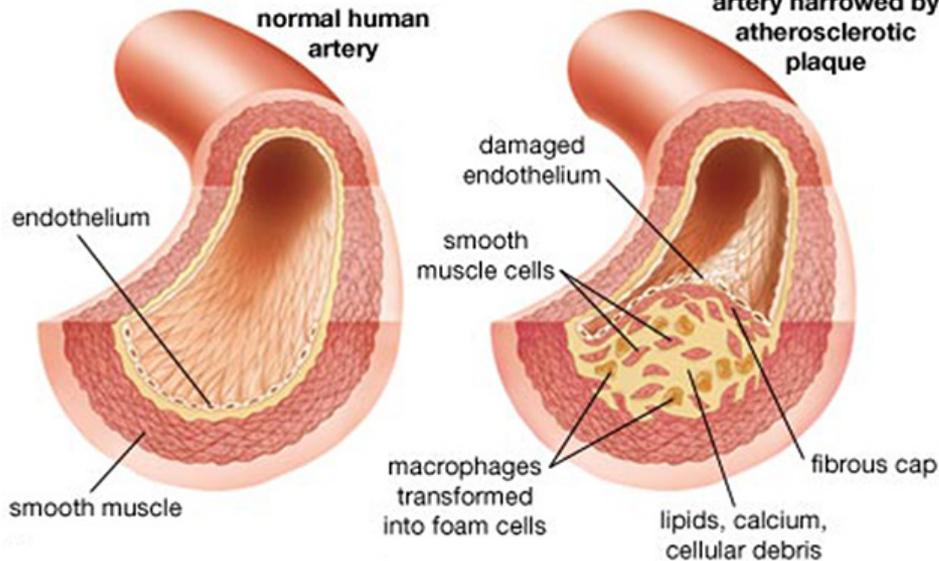
- *G Wernig and IW*: Mouse and human **fibrotic diseases** that include idiopathic pulmonary fibrosis, scleroderma, NASH, and renal fibrosis. Anti-CD47 is therapeutic in mouse model. PNAS 2017.
- *N Leeper, Y Kojima, and IW*: Mouse and human **atherosclerosis**, in which the oxidated LDL damages arterial smooth muscle cells, a subclone of which proliferates to narrow the blood vessel lumen, signal macrophage entry, but express CD47 to block the CalR eat me pathway. Anti CD47 is therapeutic. Nature 2016
- *J Tsai, Y Rinkevich, and IW*: Pathological surgery induced **peritoneal adhesions**. Anti-CD47 + anti MSLN is therapeutic. Science Trans Med. 2018
- *LB Torrez-Dulgoff, S. Kumar [FDA]*: **Cerebral Malaria**; submitted
- *K. Hasenkrug, M. Tal, C. Stoddart, LB Torrez, M. McCune*: Cells **persistently infected** with pathogenic viruses induce CD47 expression
- *M. Tal, LB Torrez, P. Ying Yu*: Aspergillus, **Borrelia Bergdorffii**, and **Mycobacterium Tuberculosis** all make CD47 mimics



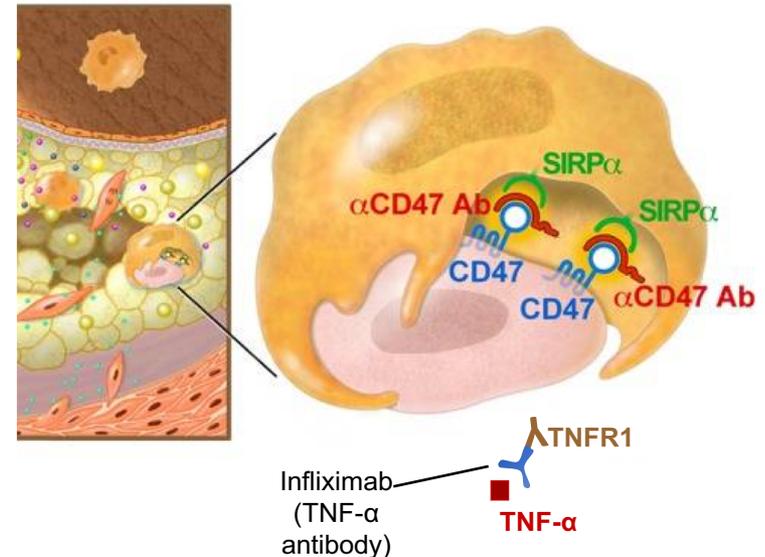
Clonal Expansion of Smooth Muscle Cells During Atherosclerosis Uses CD47 to Avoid Phagocytosis

<http://anatomyandphysiology.com/atherosclerosis/>

Atherosclerosis



With anti-CD47 therapy

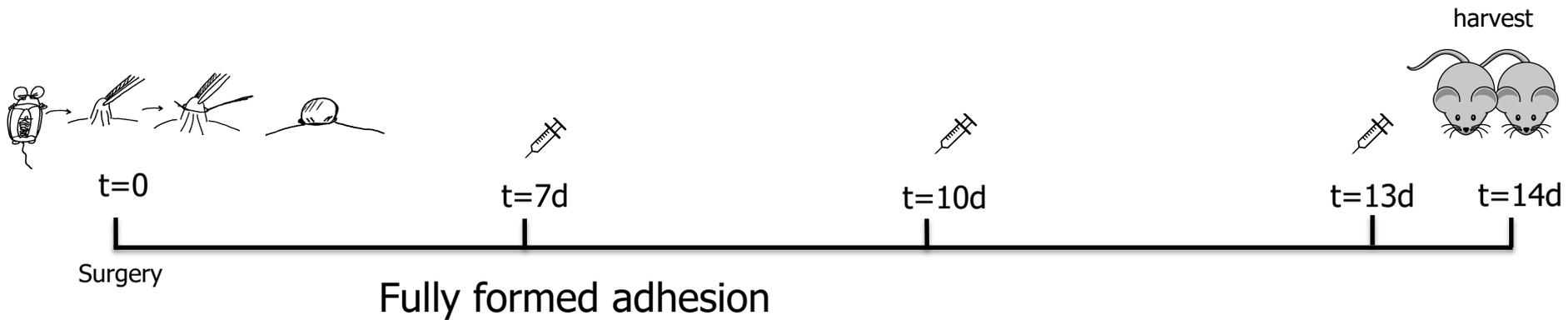


CD47-blocking antibodies restore phagocytosis and prevent atherosclerosis

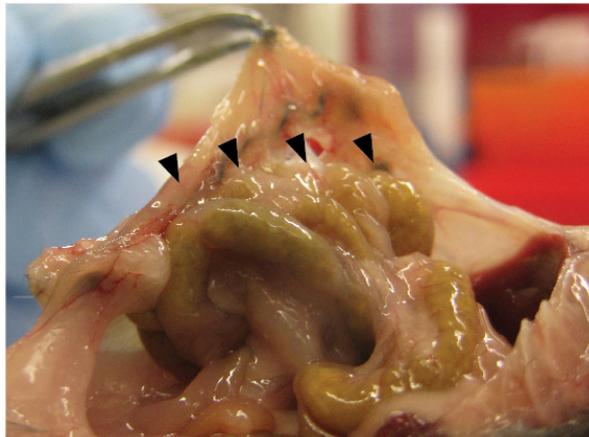
Yoko Kojima¹, Jens-Peter Volkmer², Kelly McKenna², Mete Civelek³, Aldons Jake Lusis³, Clint L. Miller⁴, Daniel Dizenzo¹, Vivek Nanda¹, Jianqin Ye¹, Andrew J. Connolly⁵, Eric E. Schadt⁶, Thomas Quertermous⁴, Paola Betancur², Lars Maegdefessel⁷, Ljubica Perisic Matic⁸, Ulf Hedin⁸, Irving L. Weissman² & Nicholas J. Leeper^{1,4}



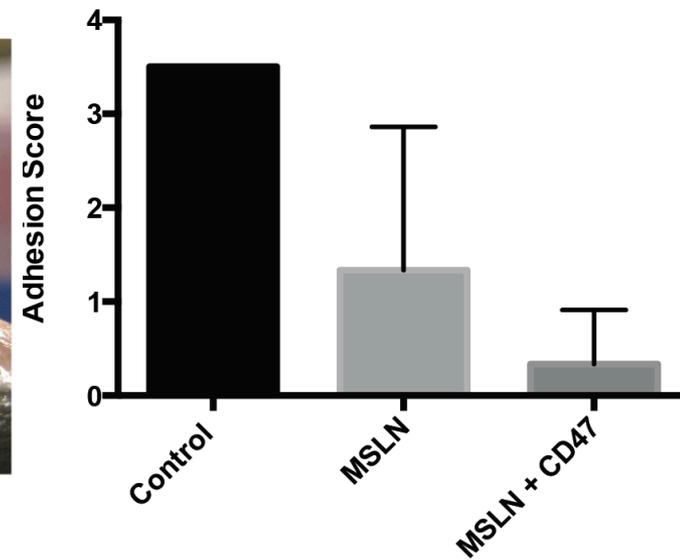
Anti-MSLN and anti-CD47 therapy diminishes preformed adhesions



Control



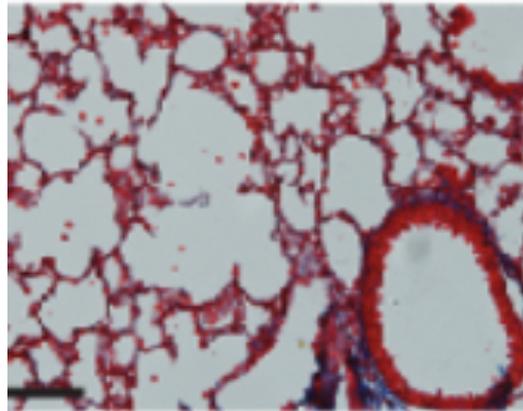
MSLN antibody





Pulmonary Fibrosis: Incurable ?

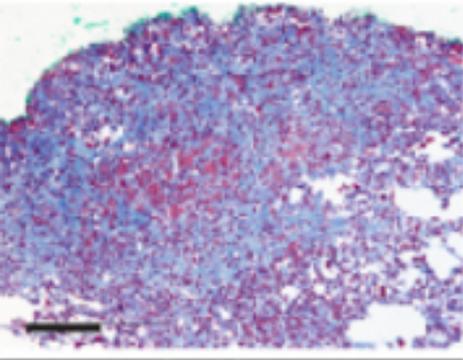
Normal lung



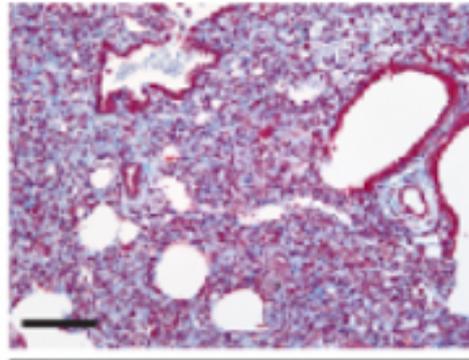
Idiopathic Pulmonary Fibrosis

fibrosis therapeutic

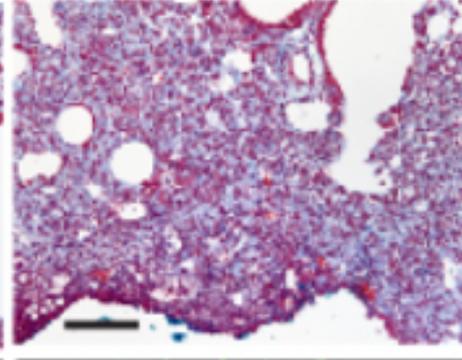
NoTx



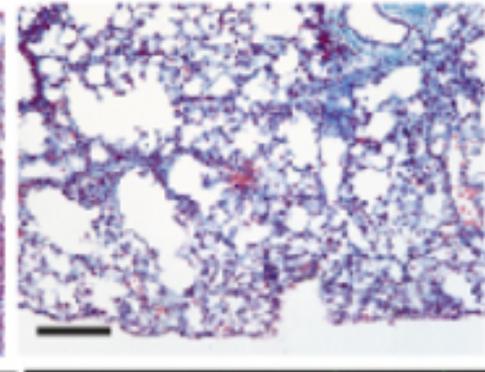
Nintedanib



Nintedanib-aCD47



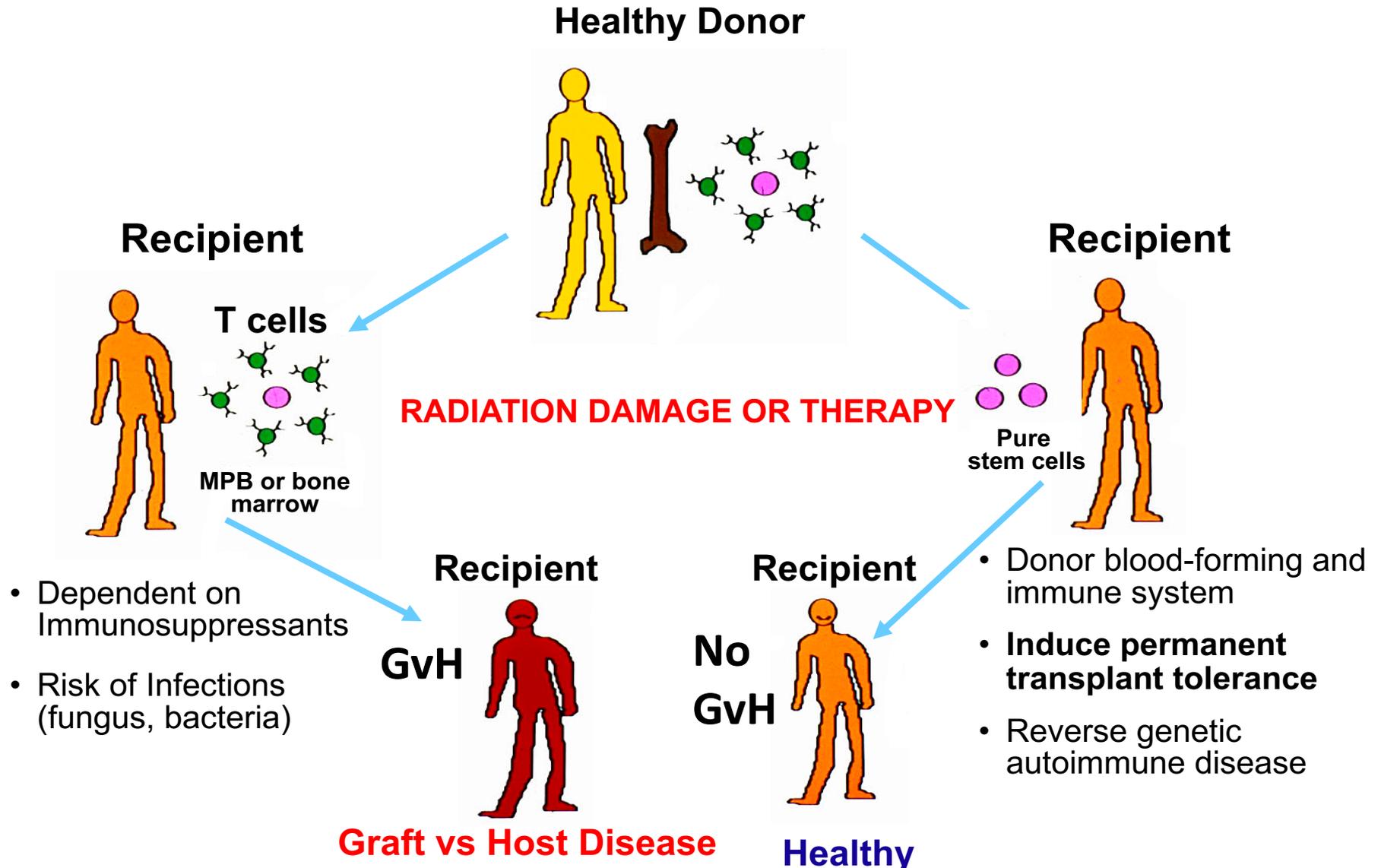
aCD47 + aIL6



Gerlinde Wernig and team + IW



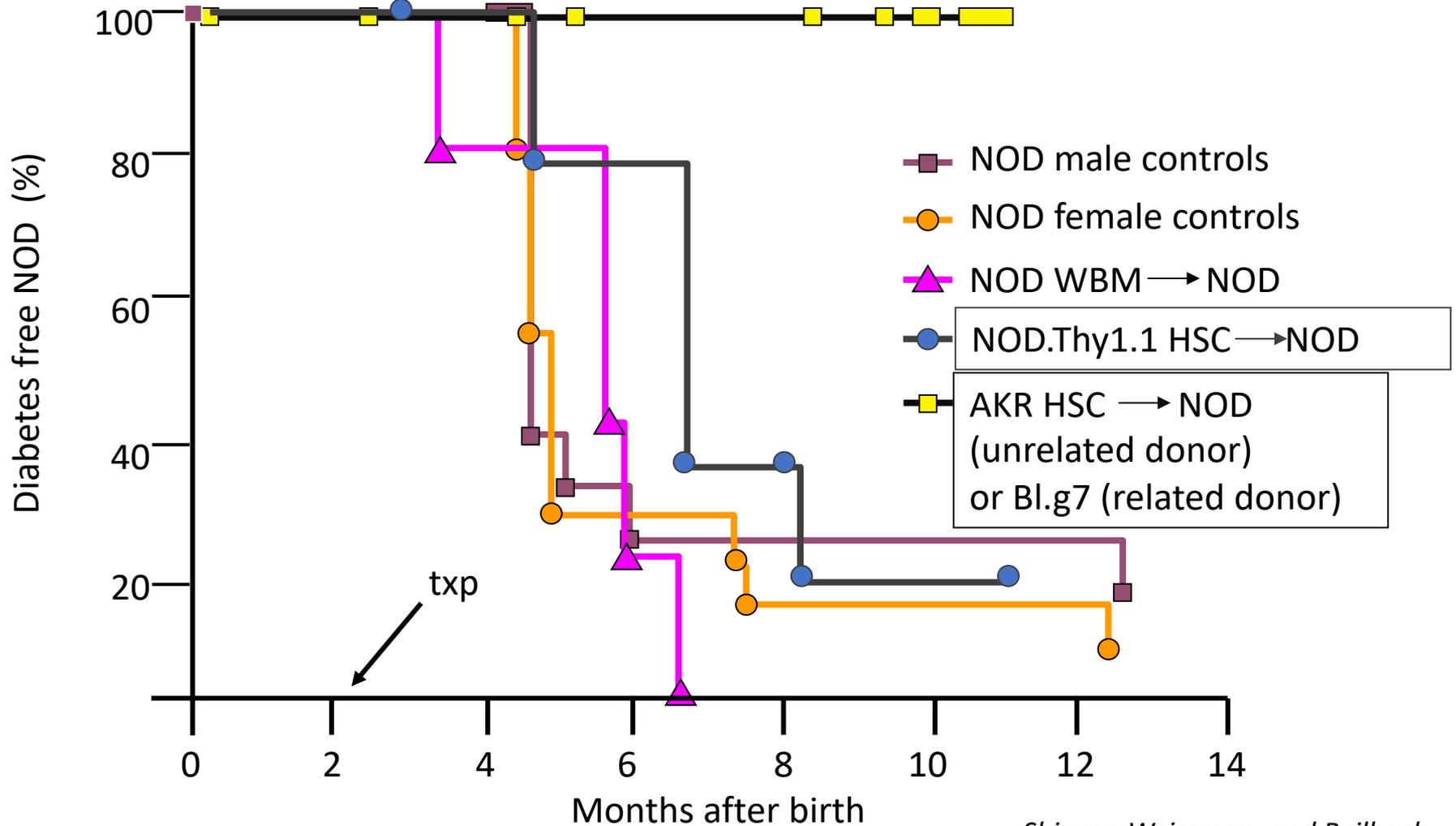
Healthy Donor Transplant: HSC are the platform for regenerative medicine





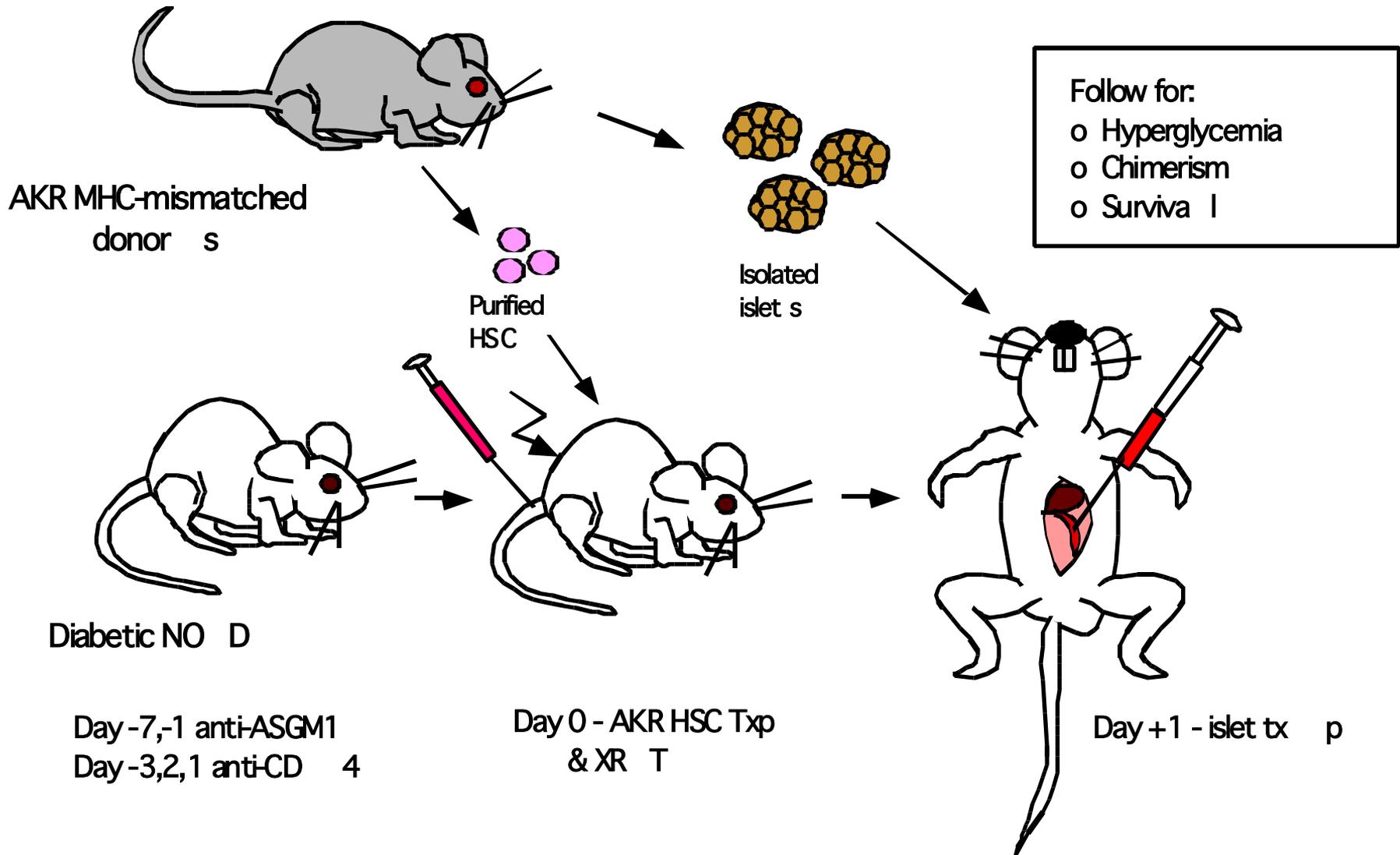
Rescue of Diabetic Mice with HSCs

CO-TRANSPLANT OF PURE HSC AND ISLETS CURATIVE AT ALL STAGES





Combined HSC & islet transplantation



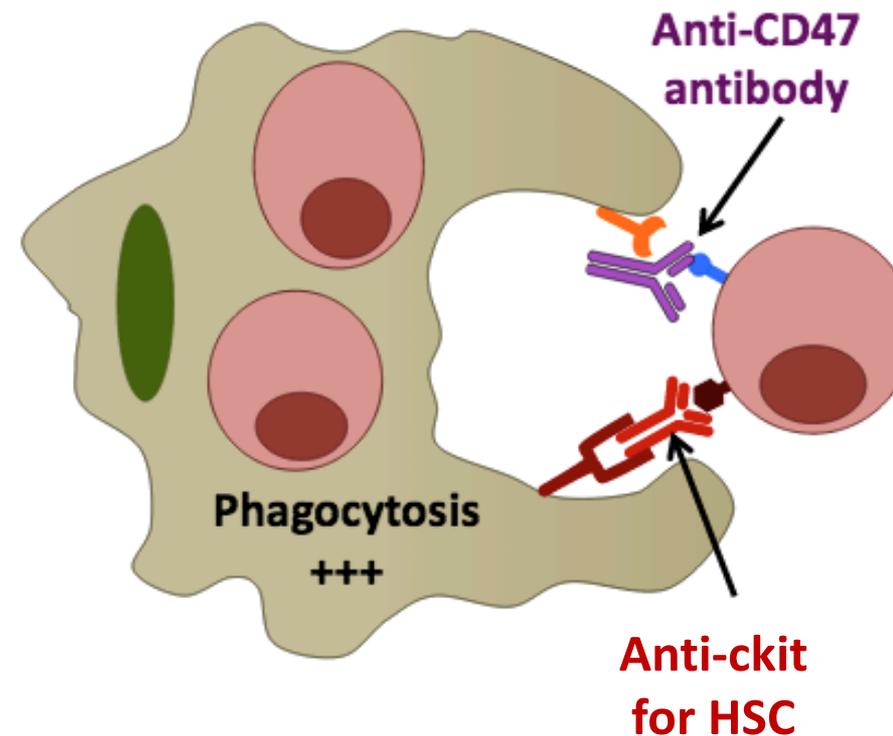
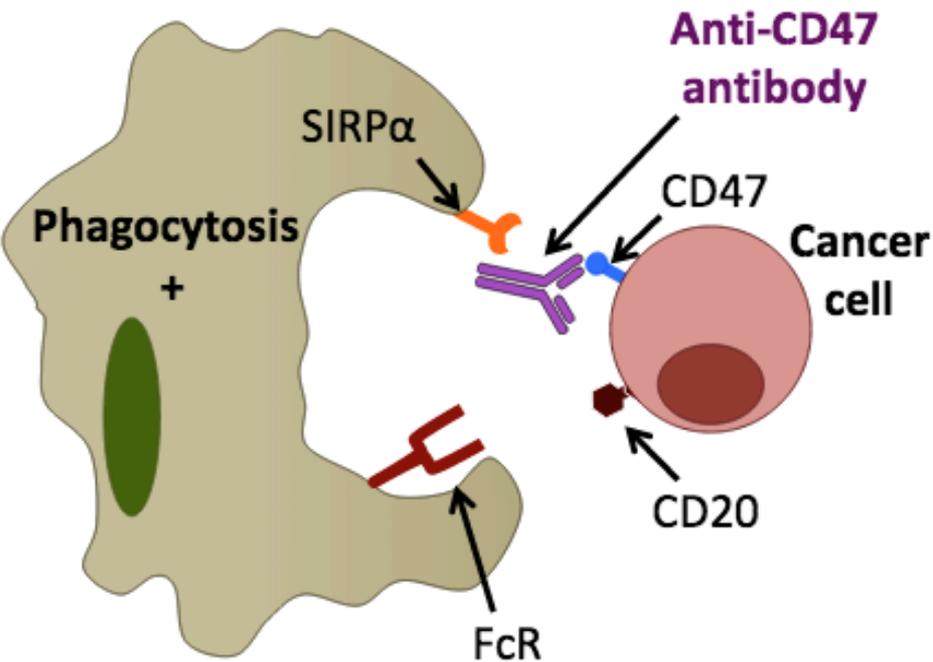
But radiation or chemotherapy is life-threatening and causes morbidity

SHIZURU



Anti-CD47 Antibody Combination-Therapy With Cancer-Targeting Monoclonal Antibodies

Macrophage

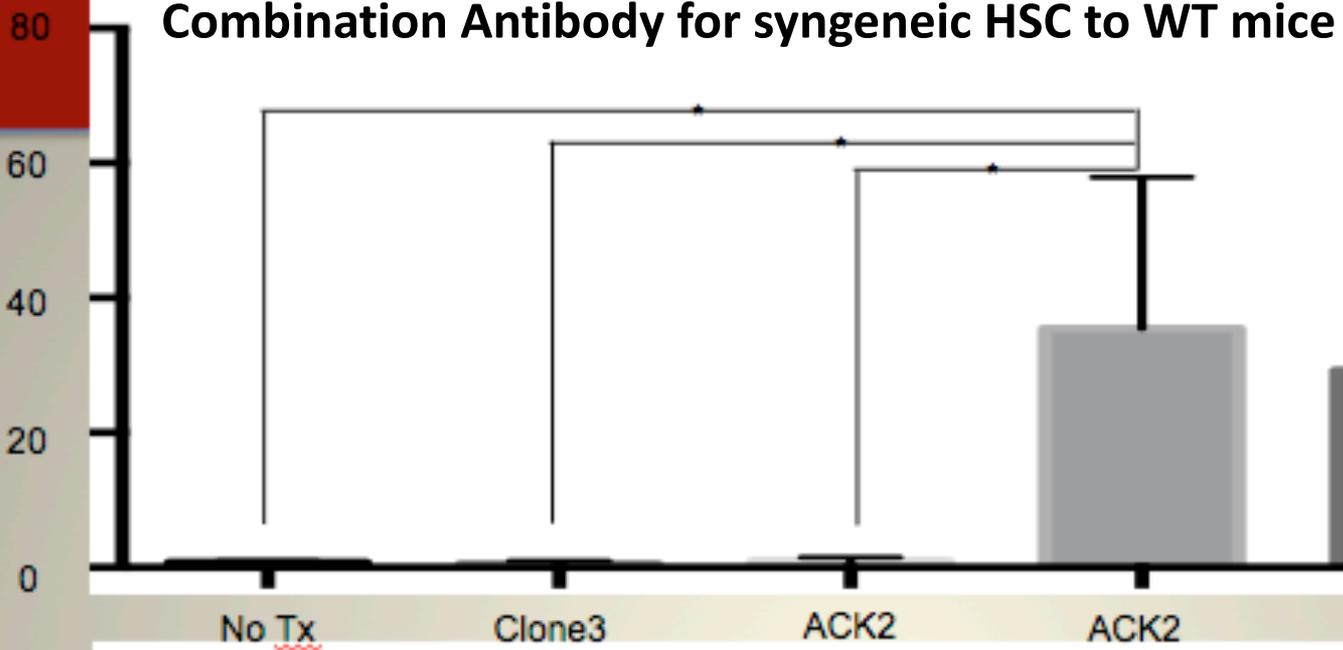


- **Combination with other cancer-targeting antibodies enhances phagocytosis of cancer cells and provide treatment to patients that are currently non eligible (e.g. rituximab - anti-CD20; cetuximab - anti-EGFR; trastuzumab - anti-HER2)**



Combination Antibody for syngeneic HSC to WT mice

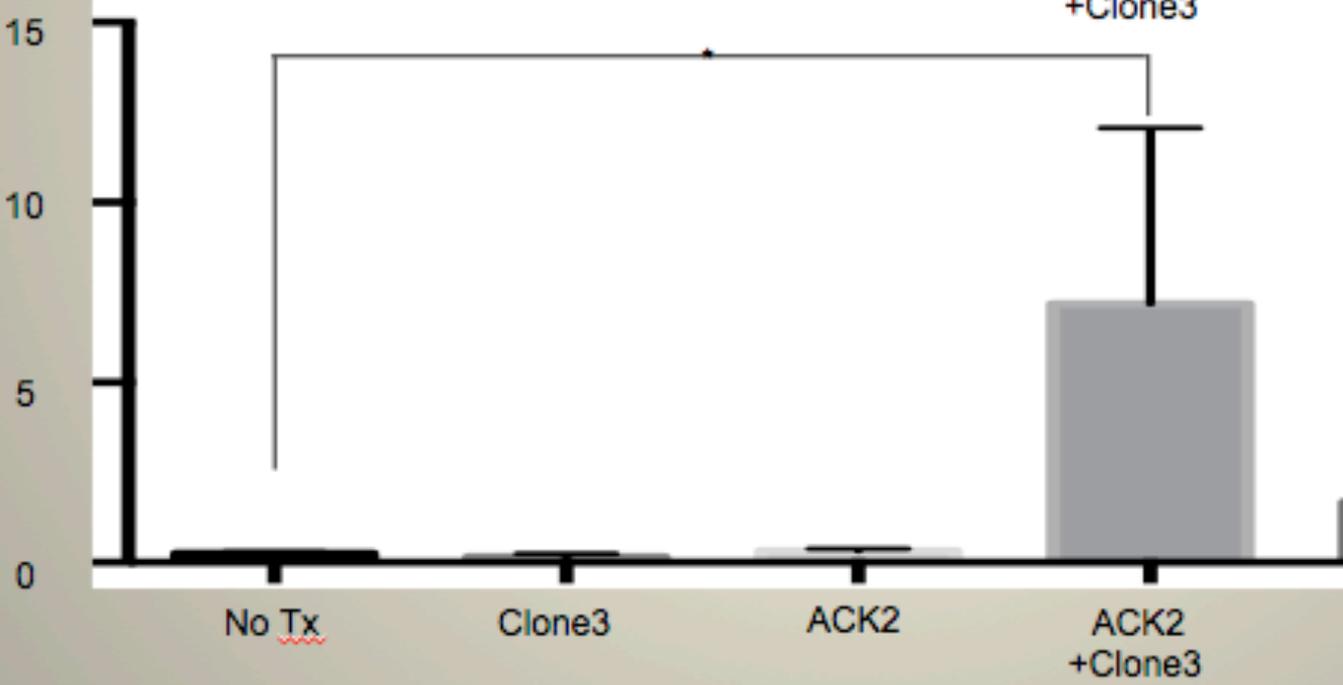
Donor granulocytes (%)



A.Chhabra
A.Ring
J. Volkmer
K.Weiskopf
I. Weissman
J. Shizuru

b

Donor b cells (%)



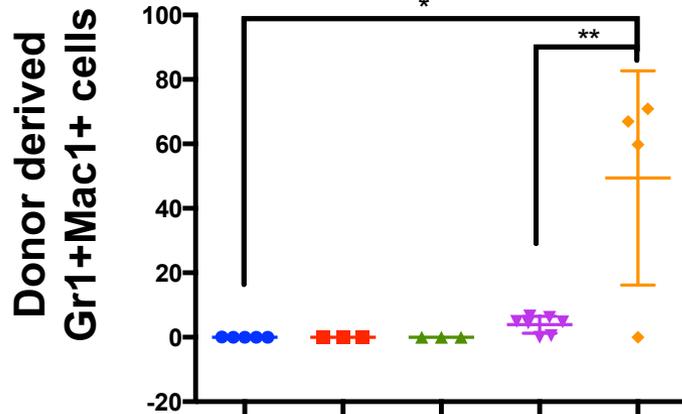
Clone 3=anti CD47



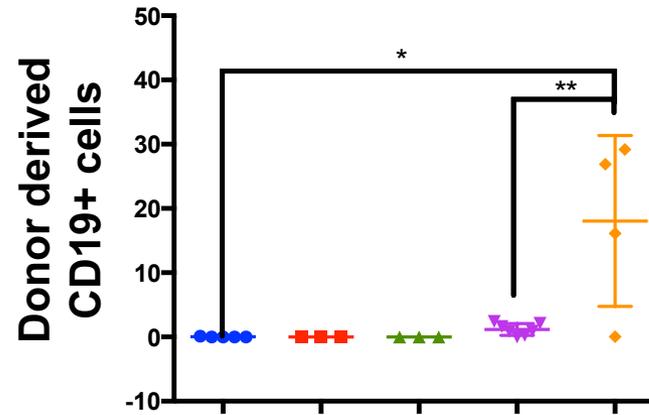
Successful multi-lineage chimerism in a MHC match/minor mismatch transplant model using ACK2 and Clone 3 Combo Therapy

ALL ANTIBODY CONDITIONING FOR MUD HSC TRANSPLANTS

Myeloid cells (Blood)

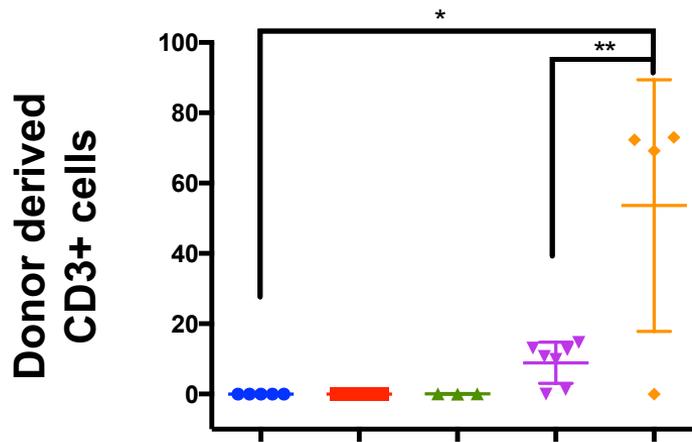


B cells (Blood)



T cells (Blood)

B10.D2 to Balb/c



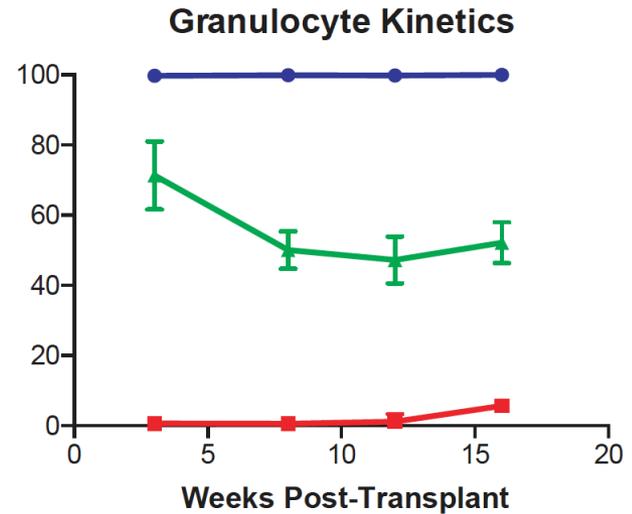
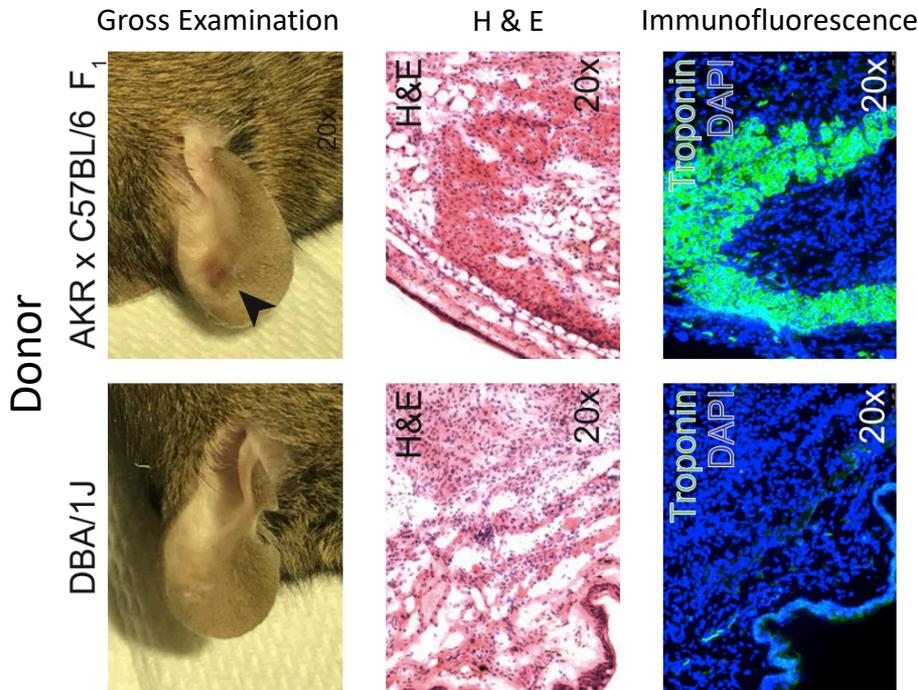
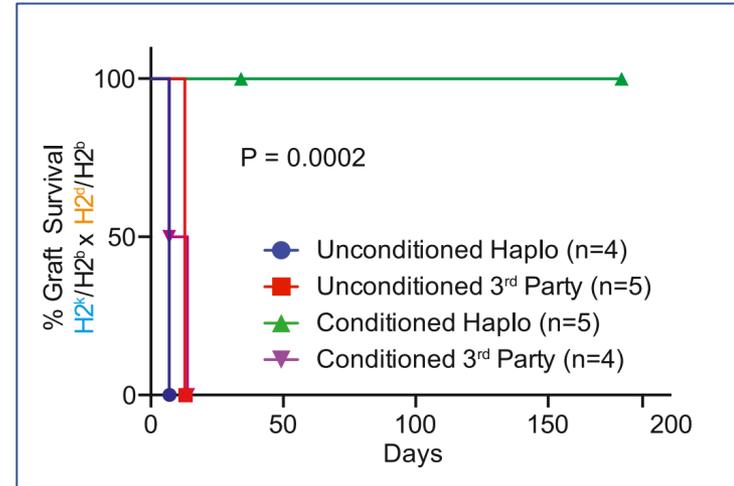
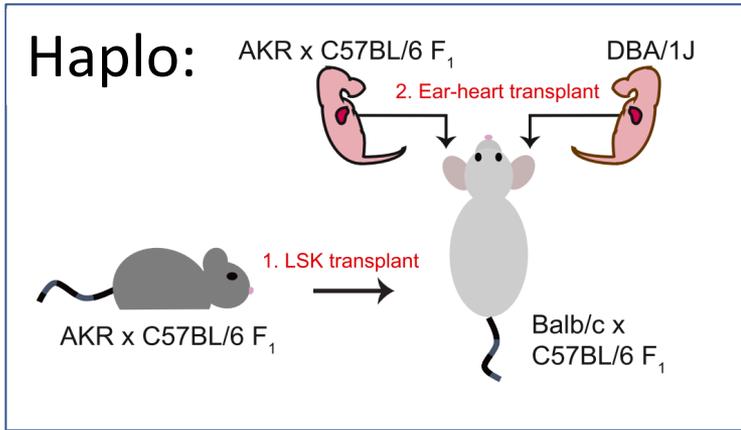
- UN
- anti-CD4/CD8
- ACK2
- ACK2+anti-CD4/CD8
- ACK2+Clone3 [anti CD47] +anti-CD4/CD8

Chabra, Ring, Weiskopf, Volkmer, Weissman, and Shizuru. *Science Translational Medicine*, 2016

But now few families have HLA matched sibs



Haplotransplants of HSC in Ab conditioned hosts induces cardiotransplant tolerance



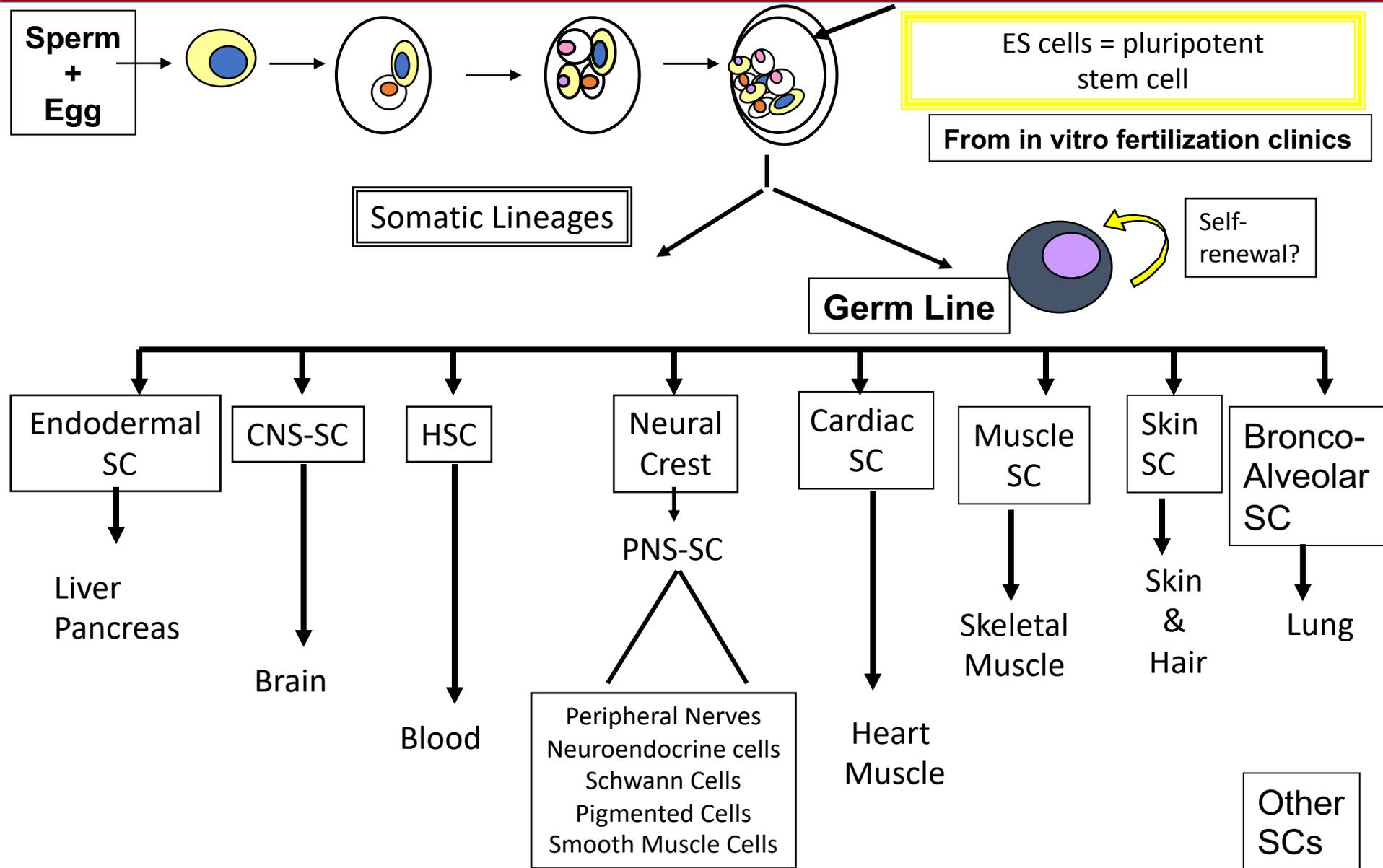


Blood forming stem cell (HSC) Transplants In The Future

- Limited or no use of radiation or cytotoxic drugs
- Targeted removal of host HSC, T cells, and NK cells with antibodies; All antibody conditioning!*
- Cotransplantation of tissue stem cell [CNS SC] and HSC from same donor or cell line
- In the far future [$>5-10$ years], ES or iPS derived HSC will be cotransplanted with other tissue stem cells from the same donor line.



Pluripotent Embryonic Stem Cells





SUMMARY

- **STEM CELL BIOLOGY IS A WAY OF THINKING: THE CELL IS THE UNIT OF ORGANIZATION, NOT ANY SINGLE GENE, AND ONLY STEM CELLS SELF-RENEW.**
- **STEM CELLS ARE THEREFORE THE UNITS OF REGENERATIVE MEDICINE AS WELL, IF WE CAN FIND HOW TO ISOLATE AND TRANSPLANT THEM**
- **BLOOD FORMING STEM CELLS REPLACE THE BLOOD AND IMMUNE SYSTEM OF THE RECIPIENT, INDUCE TOLERANCE, AND BLOCK AUTOIMMUNE DISEASE**
- **CANCER STEM CELLS ARE THE UNITS OF CANCER SPREAD AND THEREFORE CANCER LETHALITY**
- **CANCER STEM CELLS ARE DERIVED FROM CLONES OF TISSUE STEM CELLS THAT UNDERGO CLONAL EXPANSION WITH EACH ADDED DRIVER MUTATION; THESE PRECANCER CLONES CAN TAKE OVER STEM CELL NICHE AND CAUSE DISEASE**
- **CANCER STEM CELLS HAVE UPREGULATED 'DON'T EAT ME' SIGNALS THAT PREVENT SCAVENGER MACROPHAGES FROM ELIMINATING THEM OR KEEPING THEM LOCAL**
- **BLOCKING THE DON'T EAT ME SIGNAL IS A NEW MACROPHAGE CHECKPOINT IMMUNOTHERAPY FOR CANCER**
- **OTHER PATHOGENIC CELLS IN ATHEROSCLEROSIS, FIBROSIS, AND OTHER SITUATIONS ALSO USE DON'T EAT ME SIGNALS TO AVOID ELIMINATION**
- **THIS IS A MAJOR OPENING TO UNDERSTAND AND TREAT COMMON INCURABLE DISEASES; THIS IS NOT PHARMACEUTICAL SMALL MOLECULE THERAPY**



In honor of Maurice Hilleman

- Hilleman proved that it was possible to make vaccines to protect people lifelong against the most deadly infections
- He led Merck to become the world leader; following his principles Merck made HPV vaccines that protect against a devastating venereal disease, and the cervical cancer it causes. No small molecules work.

Every year millions of people are protected against these diseases because of him, and the great university that brought his to his career [and mine]/



Lokey Stem Cell Institute at Stanford Ludwig Center at Stanford;



Institute for Stem Cell Biology and Regenerative
Medicine

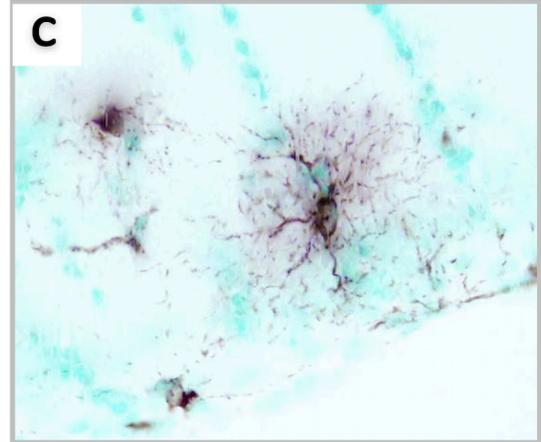
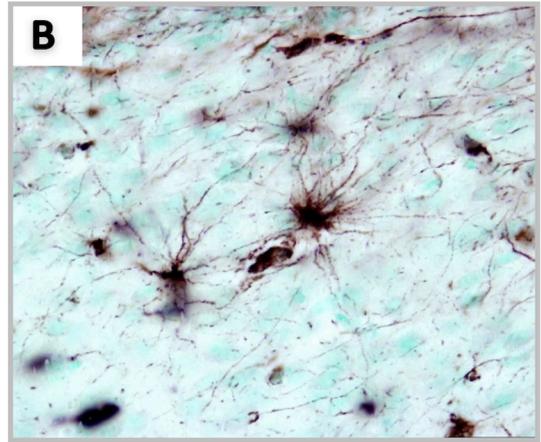
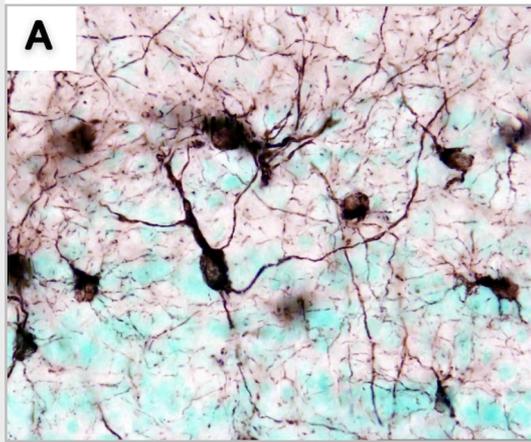
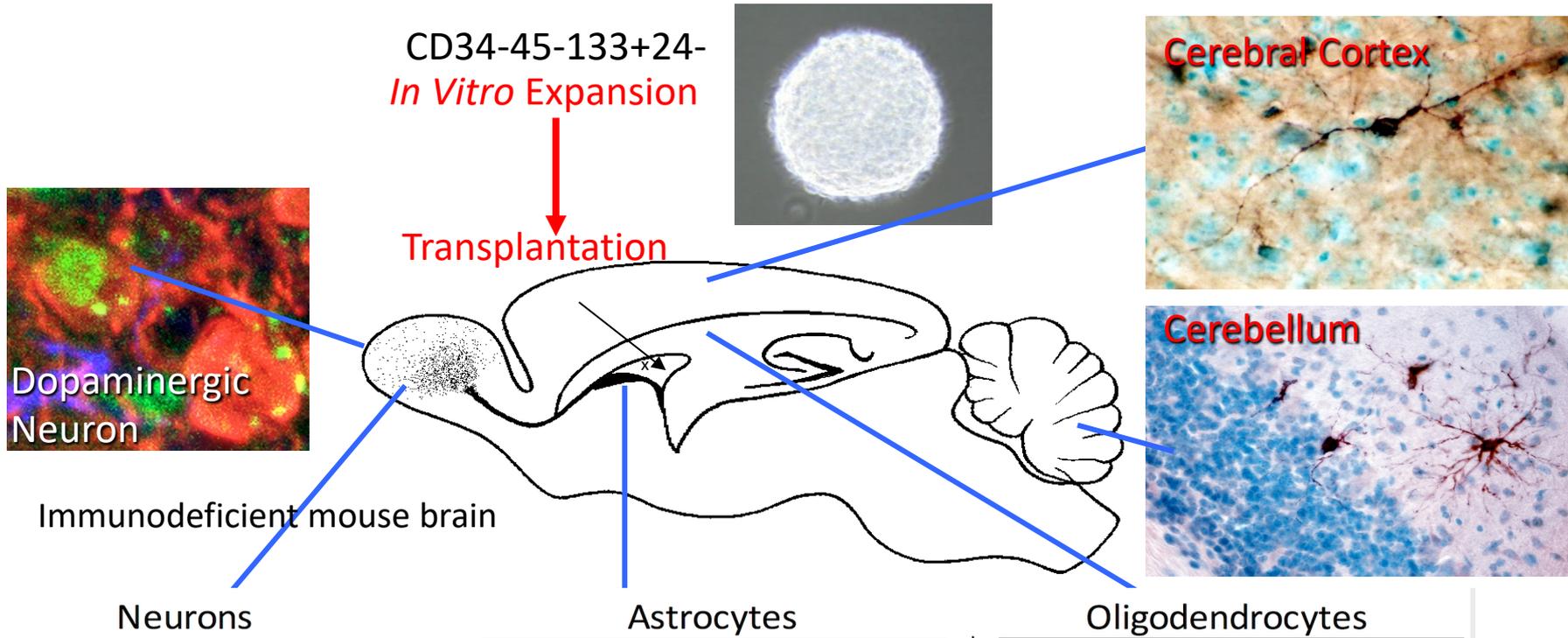


Siebel Stem Cell Institute of Stanford/UCB

**Supported grants from Ludwig Cancer, NCI, NHLBI, Calif Inst Reg Medicine, Lacob
Foundation, Siebel SCI, SU2C**



Human CNS-SC Neurosphere Cells Engrafted, Migrated & Differentiated Into Neurons, Astrocytes and Oligodendrocytes

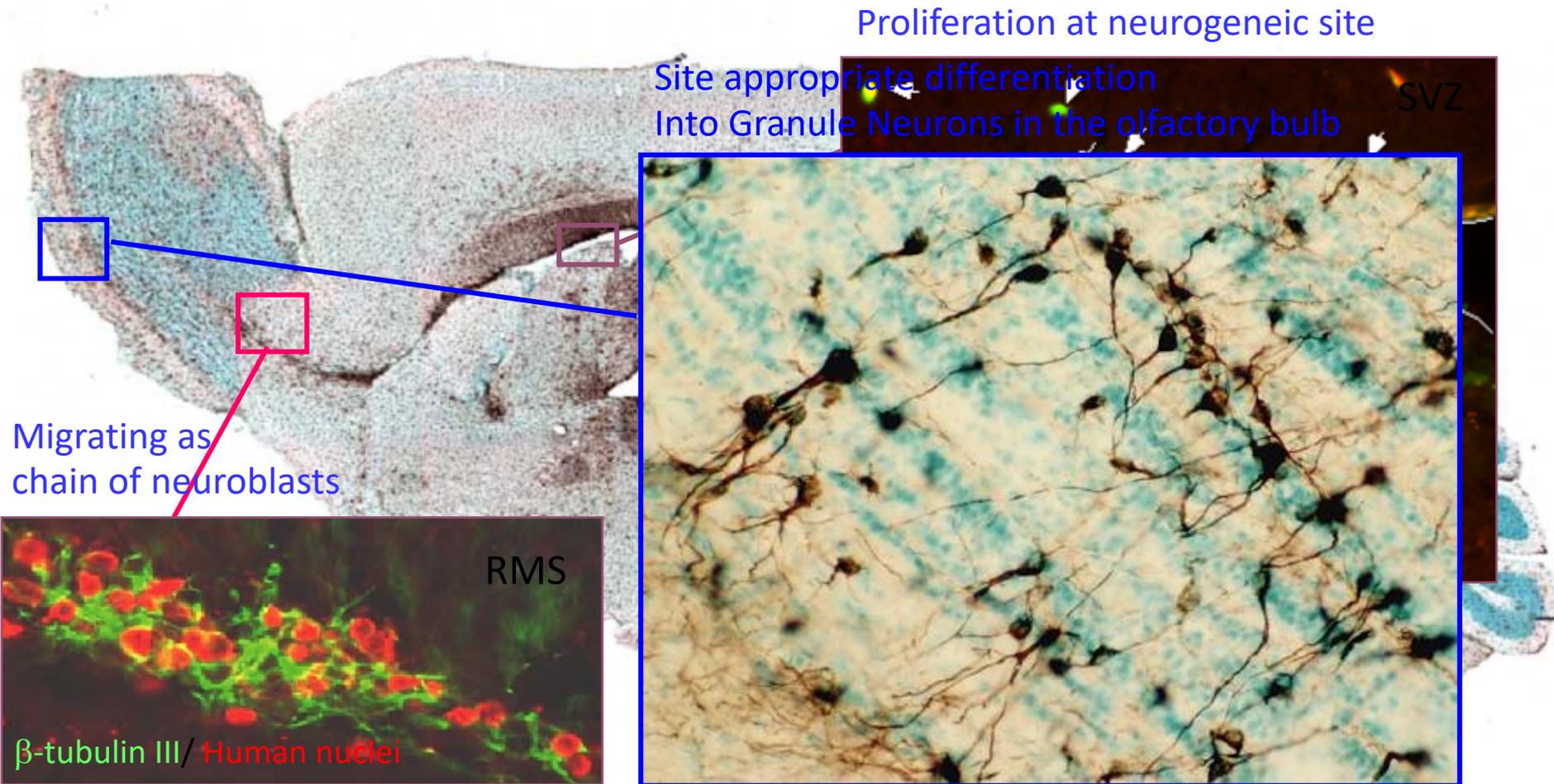


Uchida, Tsukamoto, Gage, Weissman 2000; Uchida and Porteus 2016, CrisPR modification



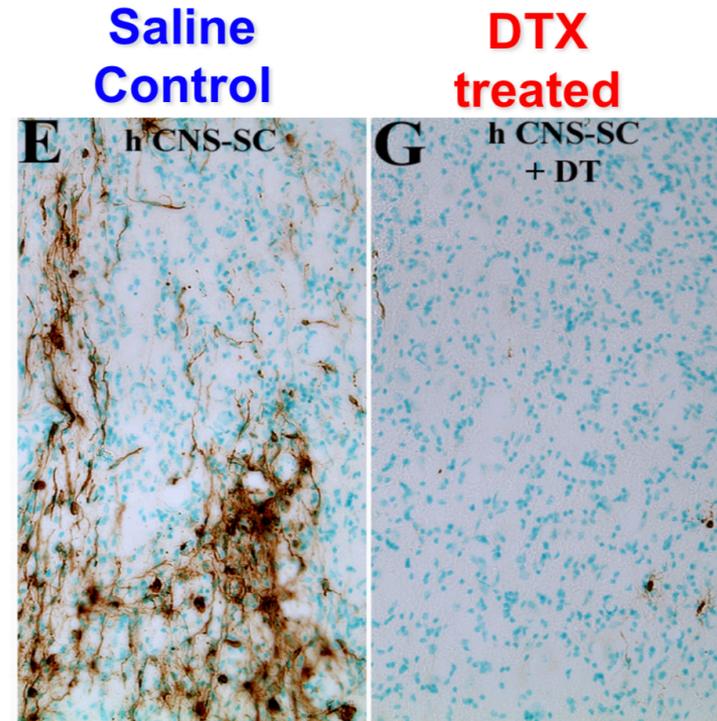
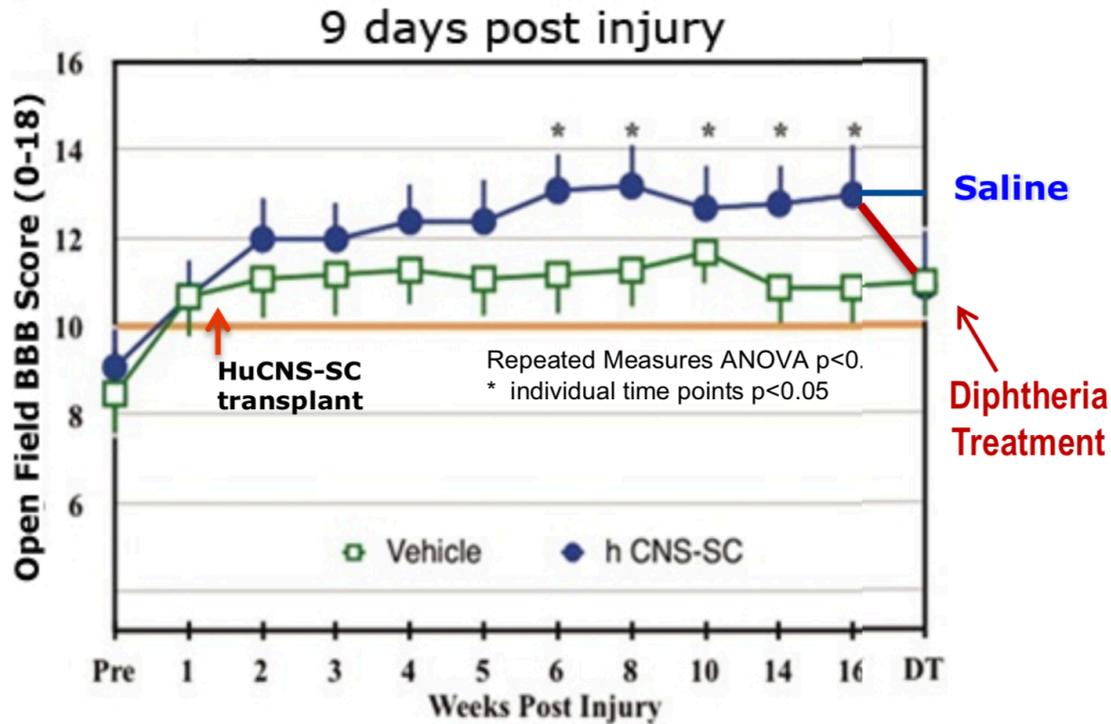
HuCNS-SC Engraft, Migrate & Mature

Human cells derived from HuCNS-SC transplant (brown)





HuCNS-SC Restores Motor Function in Spinal Cord Injured Mice

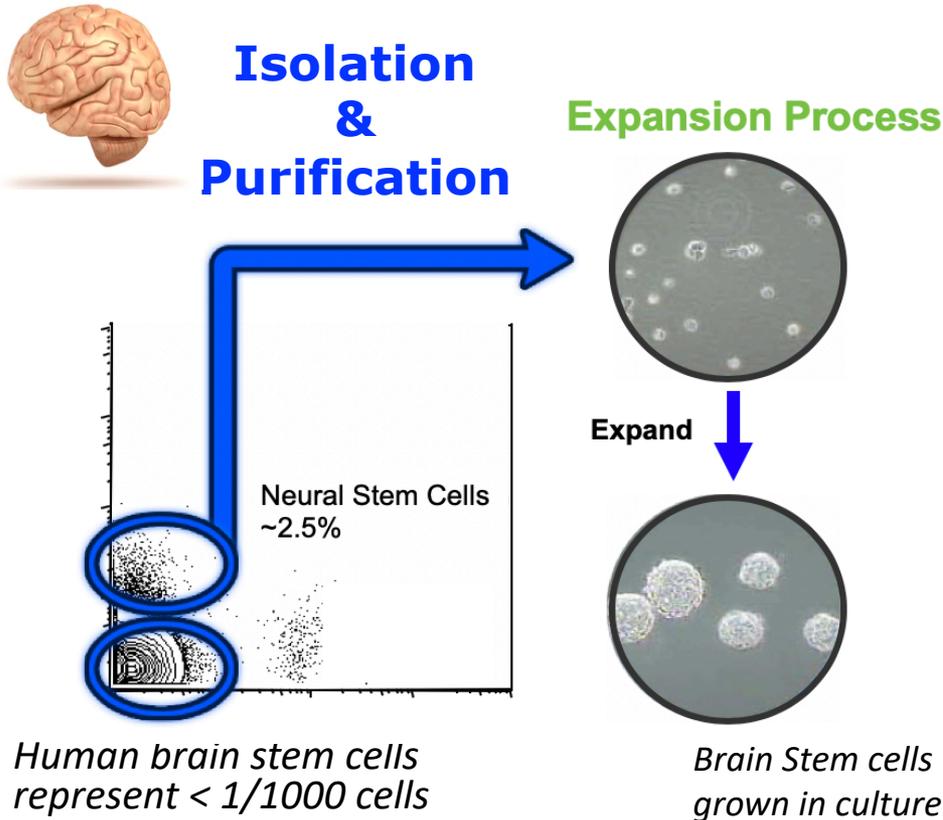


Cummings B J et al. PNAS 2005;102

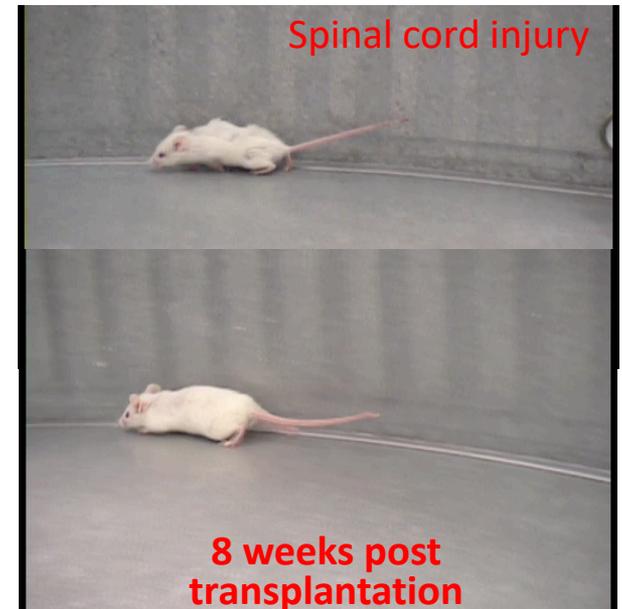
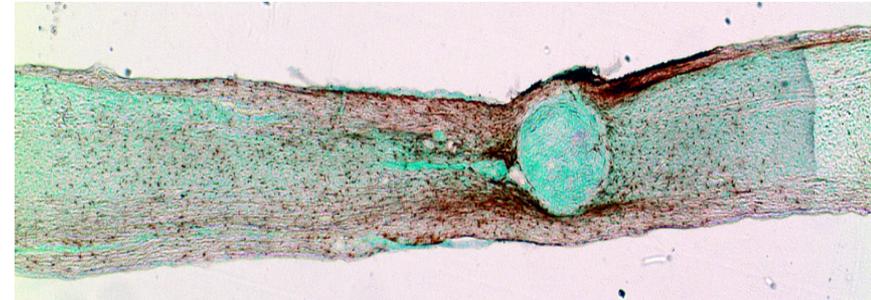
- Hind-limb motor function restored; lost when human cells ablated
- Continued presence of human cells required for maintenance of motor function
- What is the fate and potential mechanism of action of human cells?
- *Post-traumatic demyelination and neuronal loss*

Anderson, Cummings, Uchida, et al.

Human CNS SC repair mouse and human spinal cord injuries



Human stem cells transplanted into an injured mouse spinal cord



Human clinical trials:

Thoracic: 7/12 (58%) pts sensory gains

Cervical: 4/6 (67%) pts motor improvements

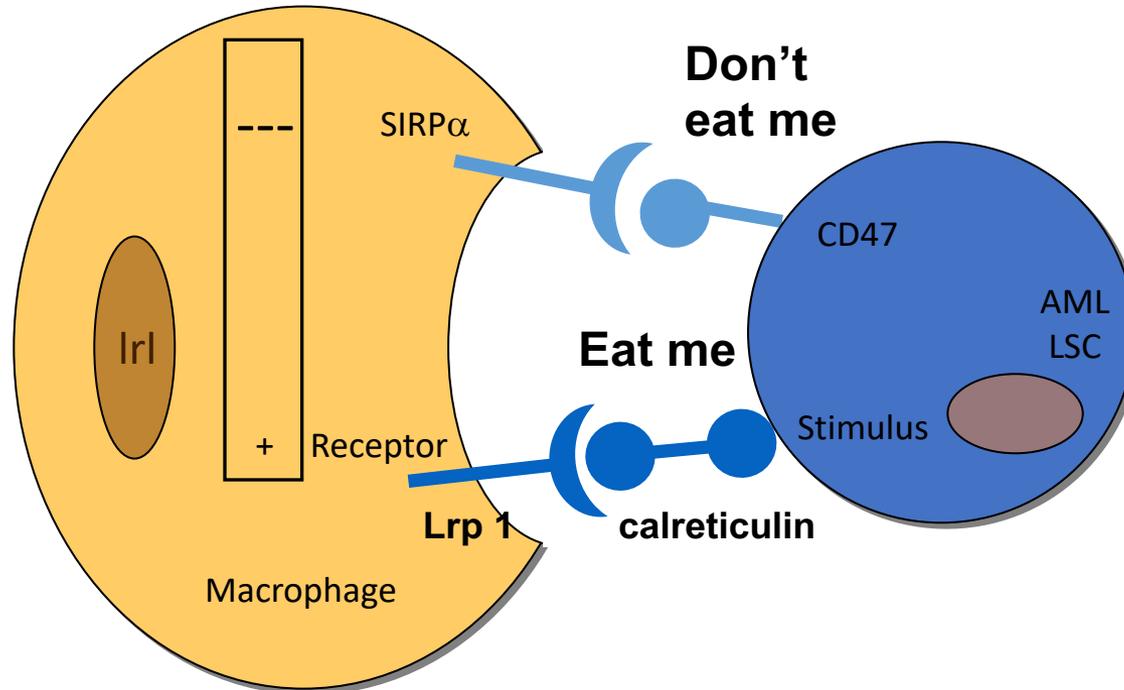
**Requires lifelong immune suppression*

Uchida, Cummings, Anderson, Tsukamoto-Weissman, IW



Pre-cancer cells express calreticulin for PrCR, and emergent cancer clones overcome this with CD47

Increased expression of CD47 on myeloid leukemia cells contributes to pathogenesis by facilitating evasion of phagocytosis



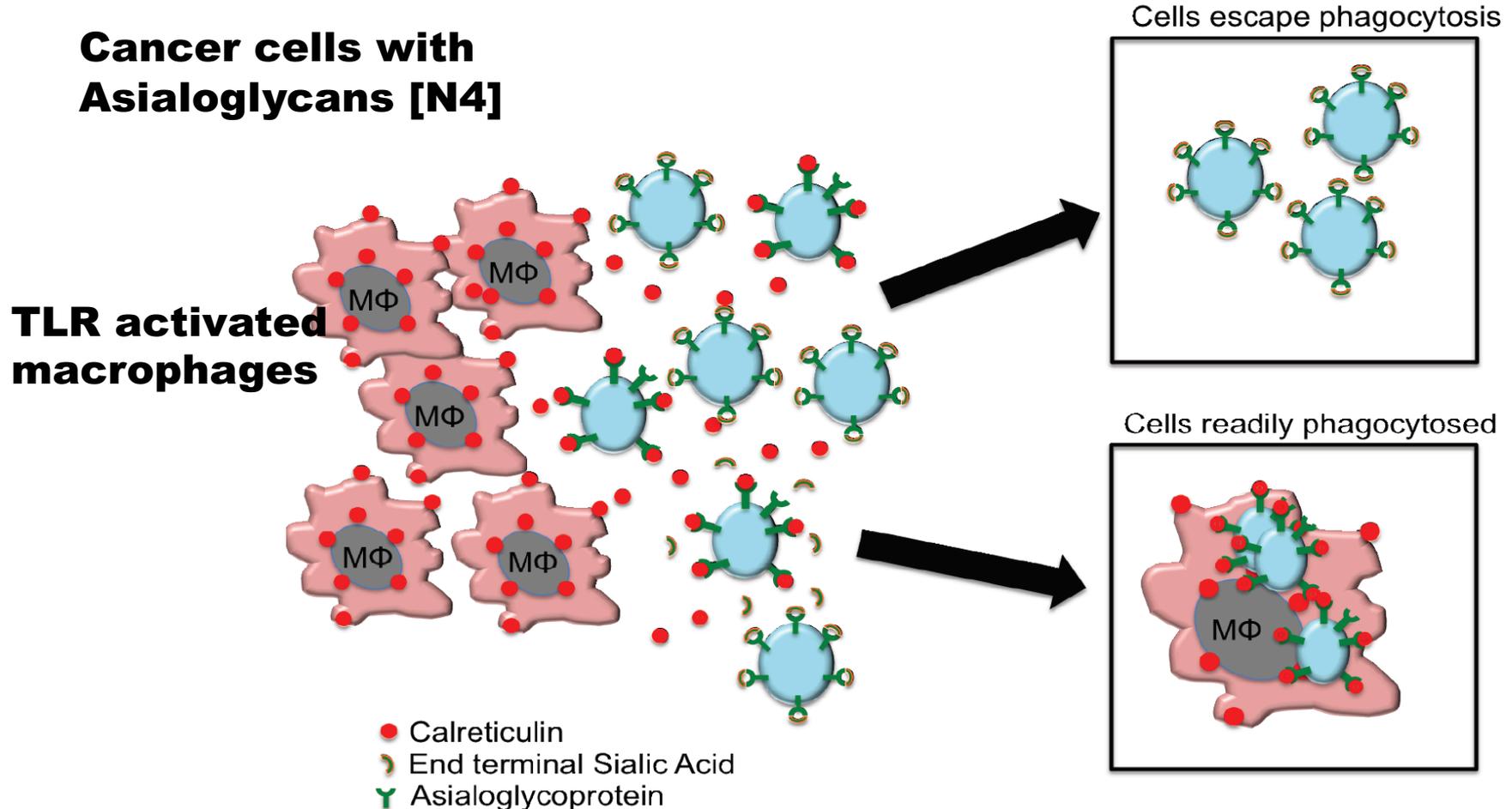
Calreticulin, an ER protein without a TM seq, is the dominant cell surface 'eat me' signal

What are the mechanisms of 'don't eat me' and 'eat me' signals?



PrCR involves activation and secretion of calR by macrophages

binding of calR on target cell asialoglycan, and phagocytic removal of target cancer and dying and pathogenic cells





Clonal HSC expansion in MDS: a single aberrant HSC can cause a blood disease

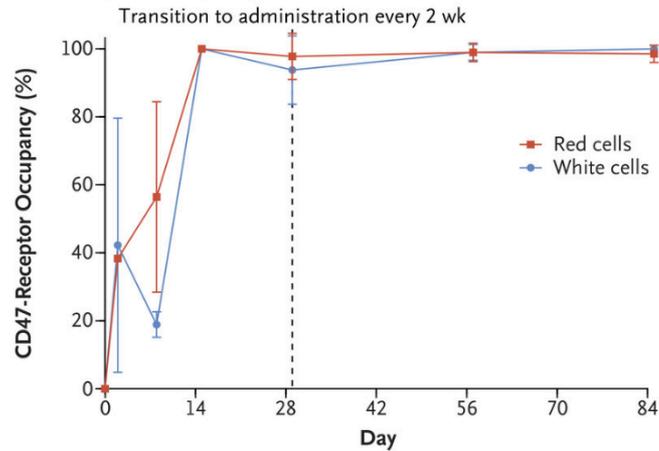
- MDS HSC *outcompete* normal HSC in patient and xenotransplants: >98% of pHSC are MDS; m7,5q-, *rbp* mutant HSC in the body outcompeted almost all normal HSC
- High **caIR** predisposes MDS myeloid [GMP, MkP, EP] progenitors for programmed cell removal
- MDS HSC dominate niches but can't make blood
- Increased CD47 expression is a crucial step in the progression from MDS to AML
- Can single CNS SC cause a brain disease? A single fibroblast SC cause fibrotic disease? A single smooth muscle cause atherosclerosis?

*Wendy Pang, John Pluvinage, Chris Park, IW, et al PNAS 2013 MDS
Wernig and IW PNAS 2017 Fibrotic disease
Kojima, IW, Leeper Nature 2016 Atherosclerosis*

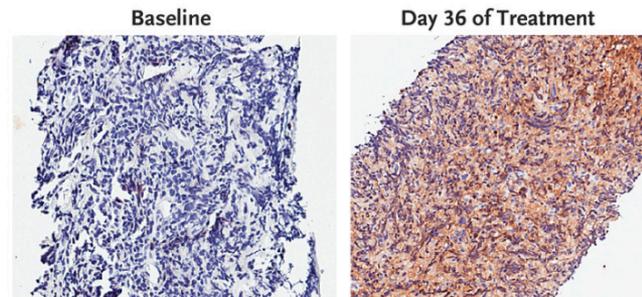


Anti-CD47 synergy with Rituximab in refractory NHL

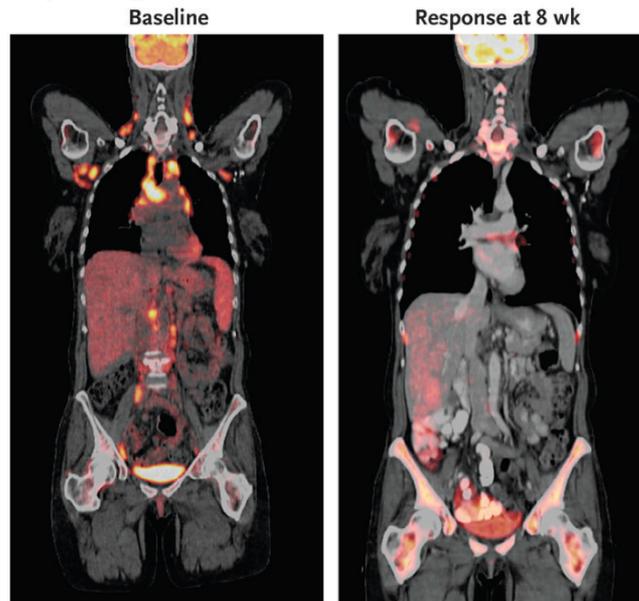
A CD47-Receptor Occupancy on White Cells and Red Cells



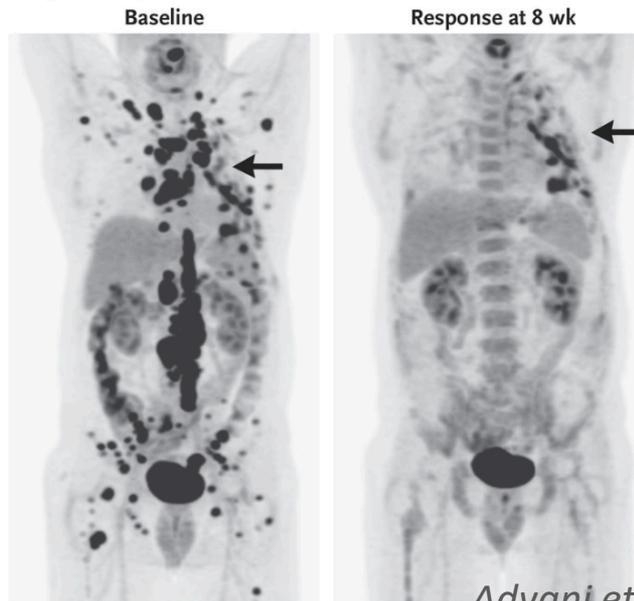
B 5F9 Antibody Tumor Penetration



C Complete Response in Female Patient with DLBCL



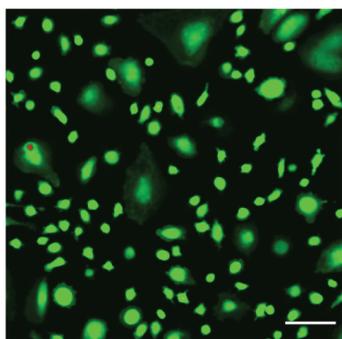
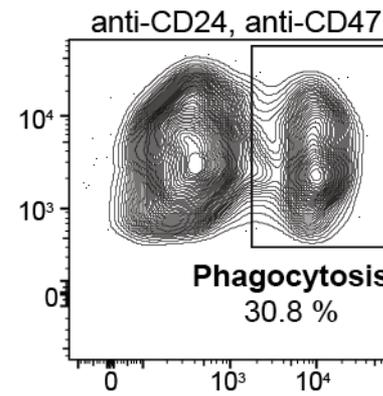
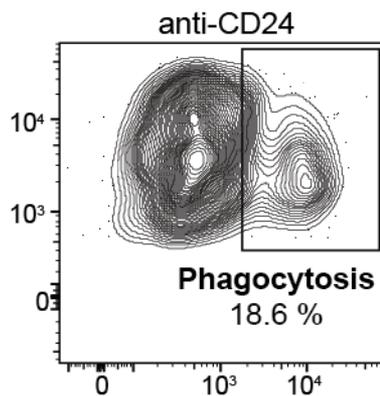
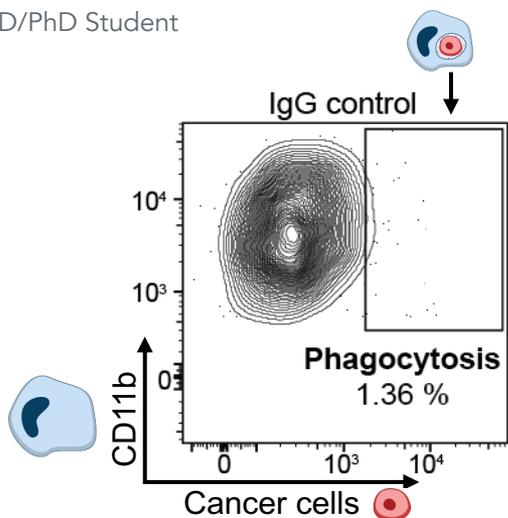
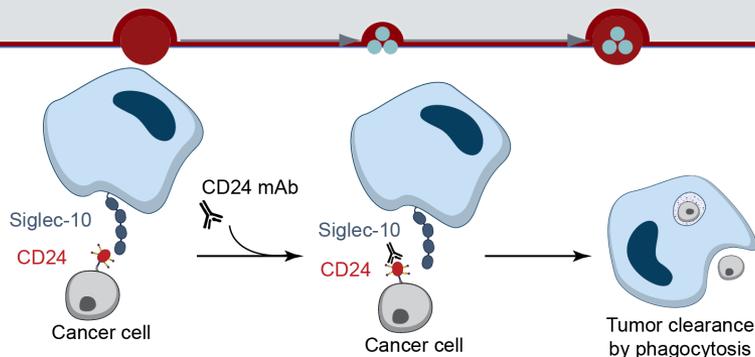
D Complete Response in Male Patient with DLBCL



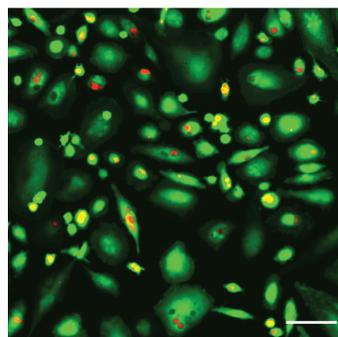
Treatment with anti-CD24 mAb promotes phagocytic clearance of human breast cancer



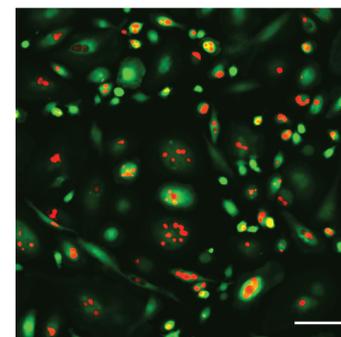
Amira Barkal
MD/PhD Student



IgG Control
Macrophages
MCF-7



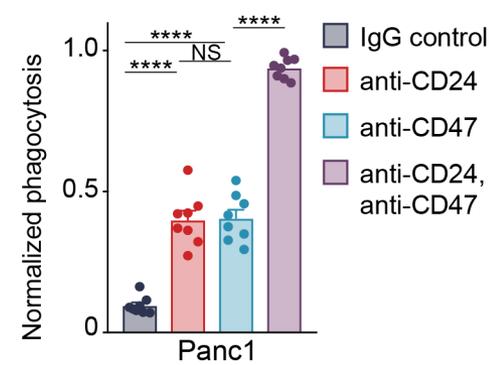
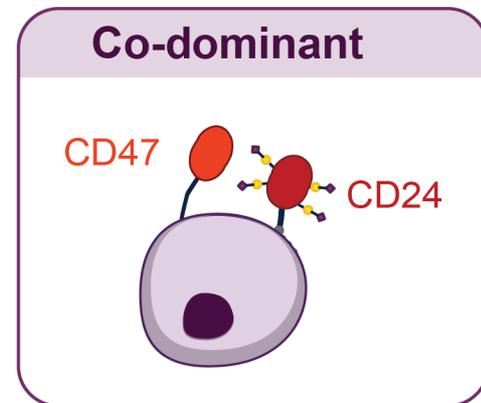
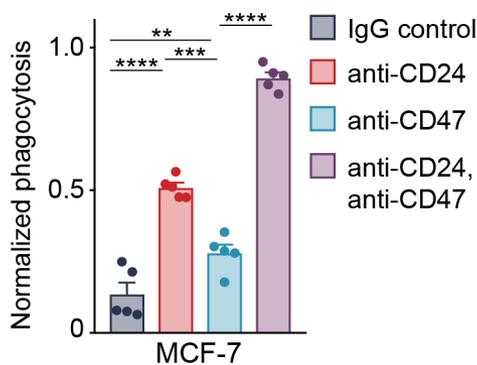
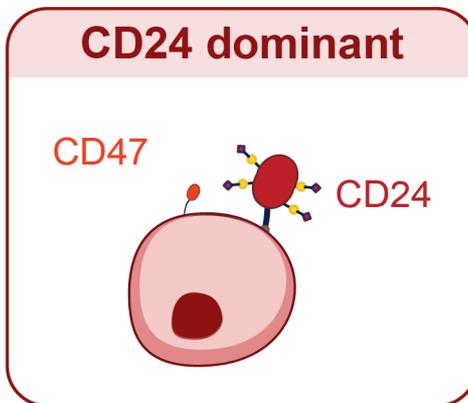
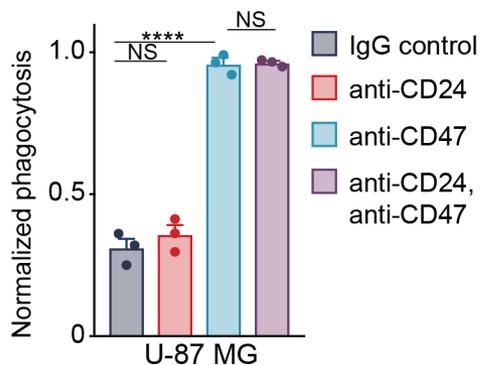
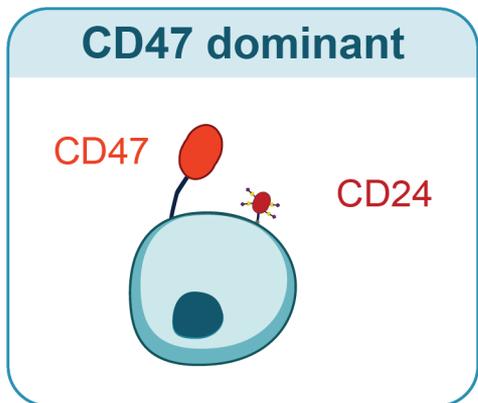
anti-CD24 mAb



anti-CD24, anti-CD47

Scale bar is 100 μ m

There are tumor-specific, dominant “don’t eat me” signals



Amira Barkal
MD/PhD Student

Goal: To profile expression of all known “don’t eat me” signals on patient samples to guide therapy