Engineered Stem Cell Antibody Paired Evasion 1 (ESCAPE-1): Paired HSC epitope engineering and upregulation of fetal hemoglobin for antibody-mediated autologous hematopoietic stem cell therapy conditioning for the potential treatment of hemoglobinopathies

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A major hurdle to the successful application of autologous hematopoietic stem cell transplant (HSCT) gene therapy, a potential treatment for a HSCs to selectively ESCAPE antibody binding variety of hemoglobinopathies including sickle cell disease (SCD), is risk of severe adverse chemotherapeutic drug busulfan for pretransplant myeloablative conditioning. Aiming to overcome this hurdle, we are developing a noninvestigational therapy hemoglobinopathies that combines multi-plex base edited engineered HSCs (eHSCs) with antibody-based conditioning.

Our engineered stem cell antibody paired evasion (ESCAPE) strategy (Figure 1) consists of a multiplex base-edited eHSC that includes, a therapeutic edit at the promoter region of HBG1/2. and a missense mutation in the extracellular domain of CD117 (cKIT), a receptor tyrosine kinase expressed by hematopoietic stem and progenitor cells (HSPCs) that regulates **Figure 1.** ESCAPE strategy HSPC survival, proliferation, and differentiation.

Introduction

Base edited CD117 epitope enables engineered



Here we report the use of multi-plex editing of CD34+ cells to generate eHSCs that contain mutations within the HBG1/2 and CD117 genes. While HBG1/2 mutation leads to upregulation of fetal globin; CD117 edit causes amino acid substitutions within CD117 ectodomain, which in turn, lead to loss of binding by our conditioning monoclonal antibody (mAb). Our conditioning mAb is designed to orthogonally bind and eliminate endogenous, unedited HSCs, but not recognize, and thereby spare, our ESCAPE eHSCs with CD117 mutations.

Our lead anti-CD117 mAb, mAb-7, bound with high affinity to unedited HSPCs but not to CD117-edited cells (Figure 4). mAb-7 binding to CD117 blocked SCF-CD117 interaction (Figure 4) thereby selectively suppressing survival of unedited HSPCs (Figure 5, 6). Treatment of HSPCs with mAb-7 in vitro resulted in >85% reduction in viability of unedited HSPCs, while CD117-edited cells remained unaffected (Figure 5, 6). Since CD117 signaling has been linked with mast cell degranulation, we evaluated effects of native and Fc-engineered versions of mAb-7 on in vitro culture-differentiated mast cells. The Fc-engineered versions of mAb-7 did not lead to any level of mast cell degranulation in vitro (Figure 6). We compared phosphorylation of our modified CD117 to wild type CD117 (Figure 7) in vitro. Our CD117 variant protein bound normally to SCF and underwent similar levels of phosphorylation (compared to WT protein) after SCF binding. We achieved ~80% bi-allelic CD117 editing and near complete editing of the HBG1/2 locus in HSPCs (Figure 8). In xenotransplantation studies, we observed that CD117edited HSPCs were capable of long-term multi-lineage hematopoietic engraftment in immunocompromised mice (Figure 9). Importantly, mAb-7 treatment led to significant reduction of human chimerism as well as bone marrow CD34+ cell frequency in mice humanized with only unedited human CD34+ cells. Interestingly, in mice receiving edited:unedited mixture, mAb-7 led to enrichment of CD117-edited cells both in whole bone marrow and in the CD34+ cell compartment, as indicated by high editing levels in these compartments (Figure 10).

Together, our ESCAPE strategy may enable less toxic pre-transplant conditioning for autologous HSC-based SCD therapies, while minimizing treatment-related toxicities that arise from current busulfan-based conditioning.



Figure 2. A. ABE is a fusion protein comprising an evolved TadA* deaminase (teal) connected to a CRISPR-Cas9 nickase (grey). The base editor binds to a target sequence that is complementary to the guide-RNA (magenta) and exposes a stretch of single-stranded DNA. The deaminase converts the target adenine into inosine (which is read as guanine by DNA polymerases) and the Cas enzyme nicks the opposite strand. Following DNA replication and repair, an A:T to G:C conversion is made permanent (1-2).

B. Naturally-occurring single nucleotide variation within the HBG1/2 gene are known to result in the hereditary persistence of fetal hemoglobin (HPFH) and is an effective mechanism to ameliorate the effects of sickle cell disease and beta thalassemia (3). Using base editors, we can install mutations in the promoter region of the HBG1/2 gene, resulting in high and persistent levels of fetal hemoglobin



WT and lack of

binding to variant

corresponding CD117 variant





