

# Introduction to Cellular Therapy: Stem Cell Transplantation

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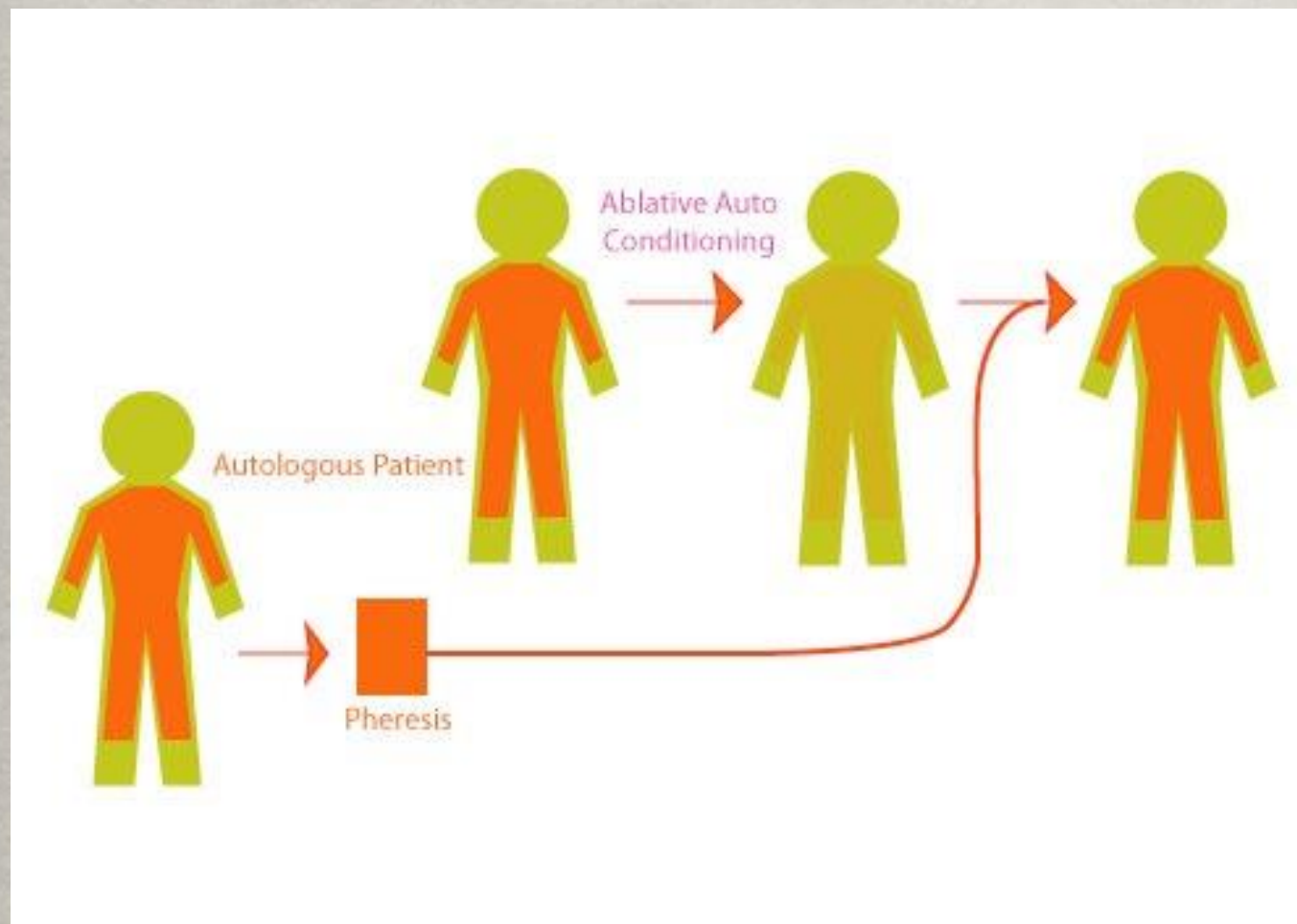


# “Autologous” Transplant

- ✱ Certain cancers can respond to chemotherapy with a decrease in the number of cancerous cells with every cycle of chemotherapy.
- ✱ However, there is sometimes a point reached where a small number of residual cancer cells remain that do not respond as well to the standard repeated doses of chemotherapy.



# Autologous Transplant



- ✱ Residual cancer cells may be cleared by higher doses of chemotherapy to cure at the price of killing other healthy marrow cells.
- ✱ Collecting stem cells ahead of time and returning them to the patient after high dose therapy saves them from other side effects of such therapy.

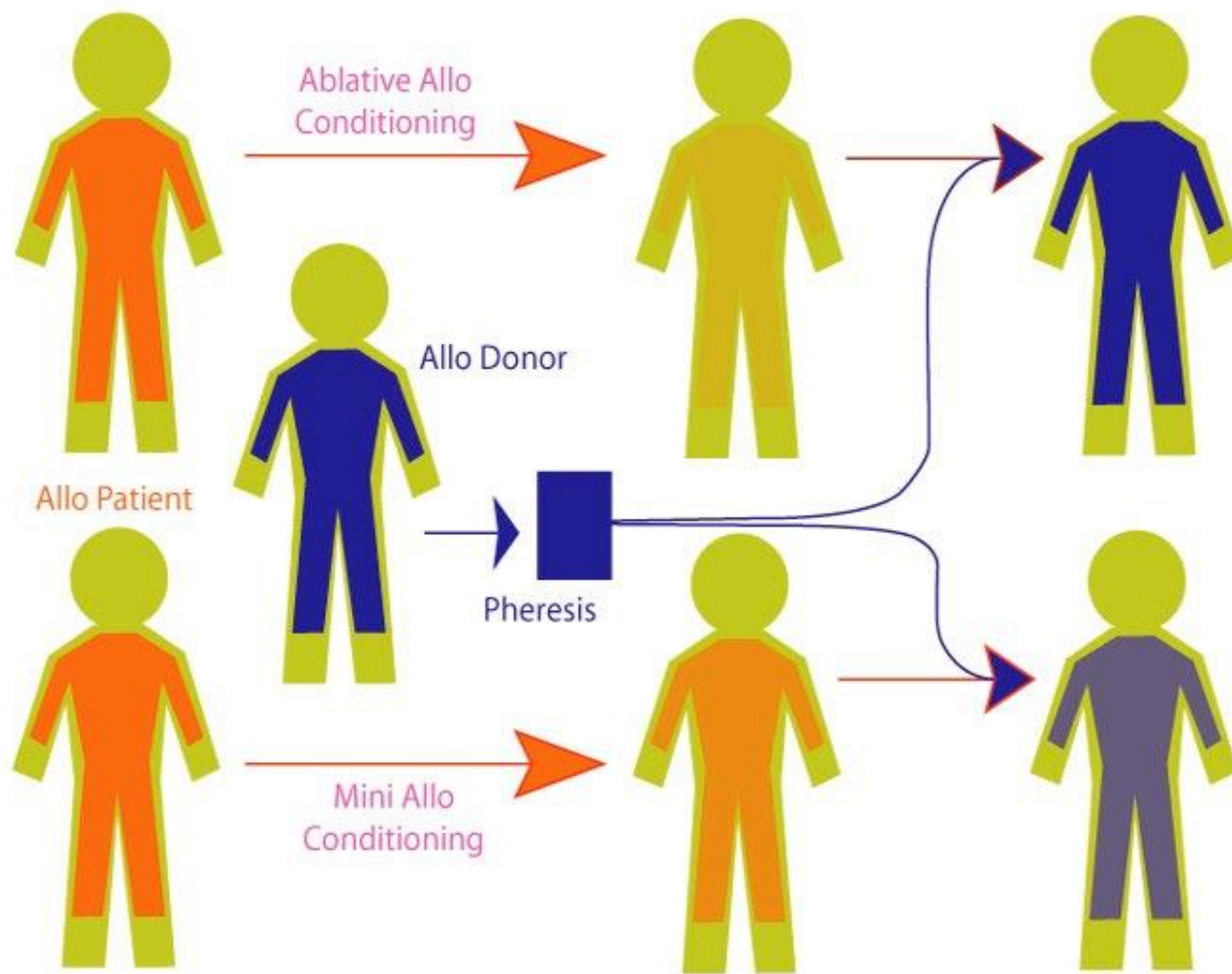


# “Allogeneic” Transplant

- ✿ Some cancers cannot be eliminated even with the highest doses of chemotherapy
- ✿ In such cases it is sometimes possible to harness the power of a new immune system to recognize and destroy the cancer cells
- ✿ The process of identifying an appropriate donor and transplanting their cells into the recipient is called an allogeneic stem cell transplant



# “Allogeneic” Transplant



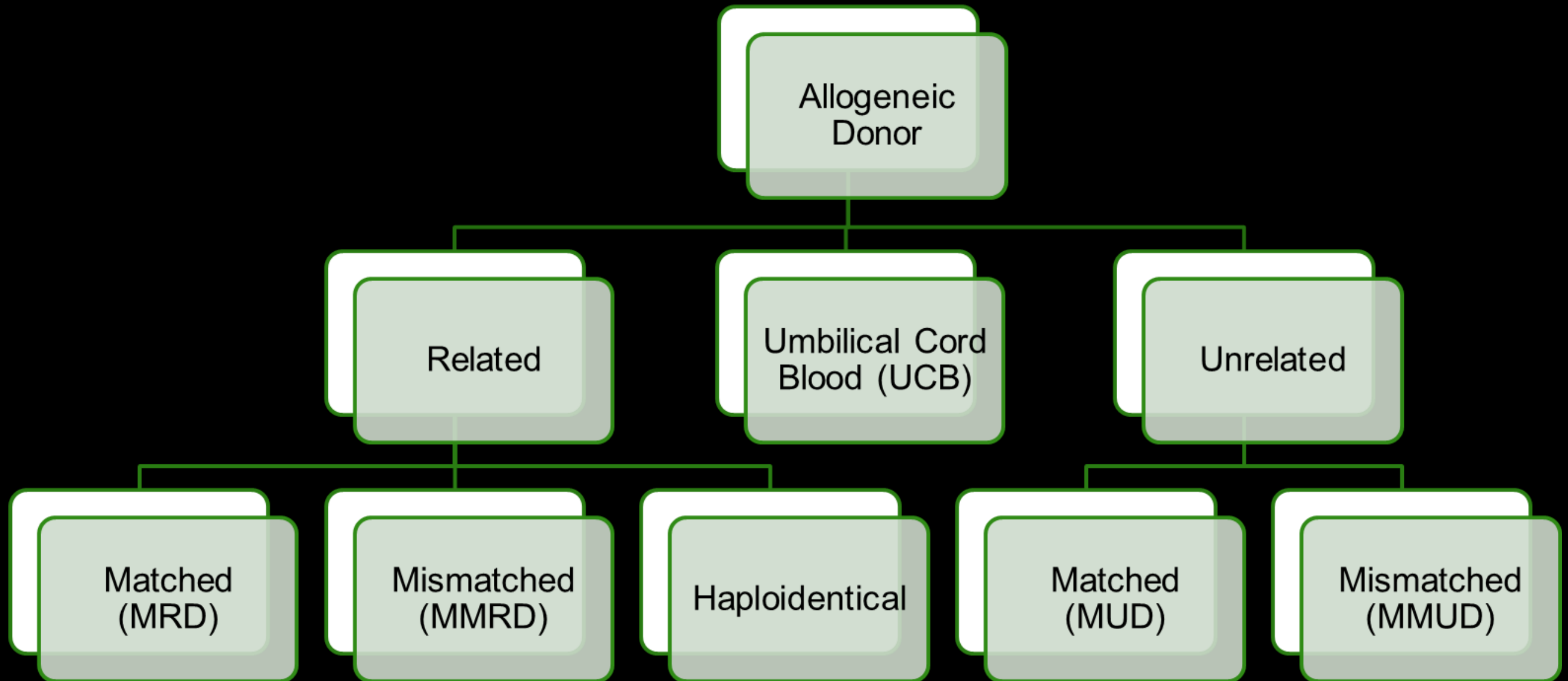
- ✿ In this procedure a donor's HLA matched stem cells are collected and transplanted into the patient.
- ✿ HLA matching is the process of determining if the donor and the patient share certain critical genes that educate the immune system.



# Allogeneic Transplant

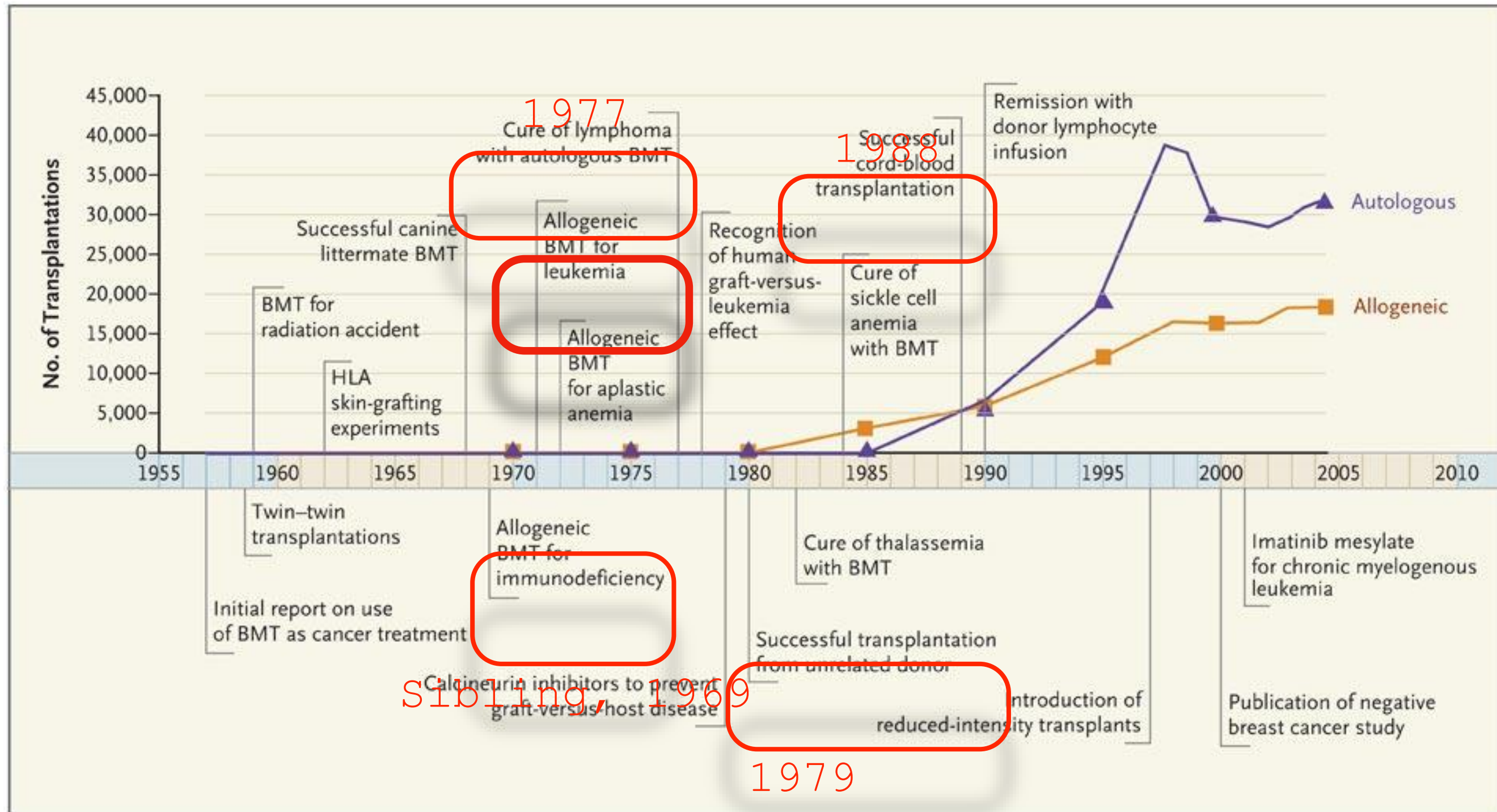
- ✱ The safest allogeneic transplants occur when donors and patients share the same HLA genes.
- ✱ The goal of allogeneic transplants is provide the patient with a NEW IMMUNE SYSTEM that can potentially ATTACK ANY REMAINING TUMOR CELLS.
- ✱ All cancers differ in their sensitivity to the allogeneic attack or “Graft vs Tumor Effect”.
- ✱ However, sometimes the new cells can attack the normal cells of the host “Graft vs Host Disease”.

# Immunologic Stem Cell Sources



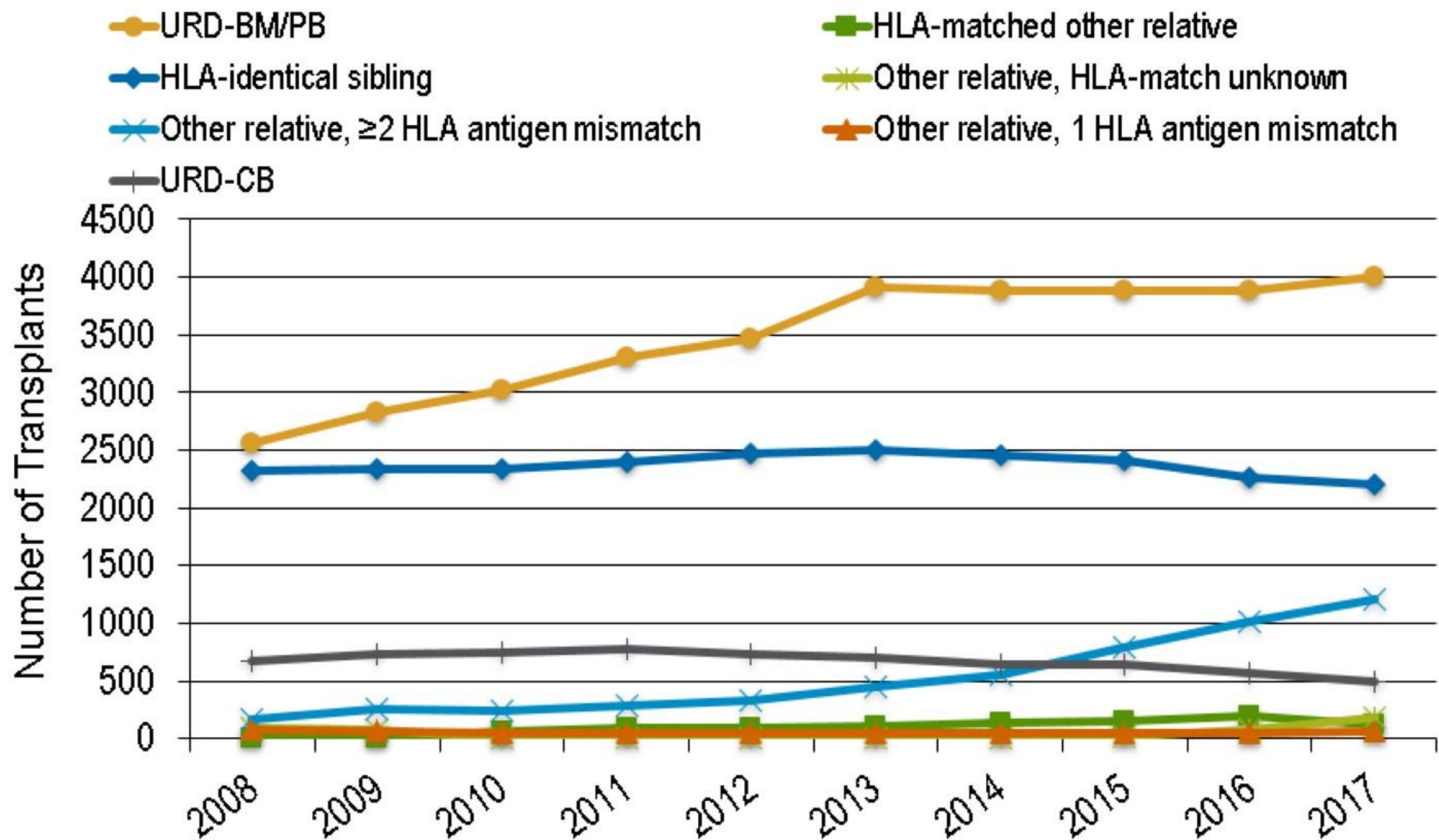


# History of Transplant





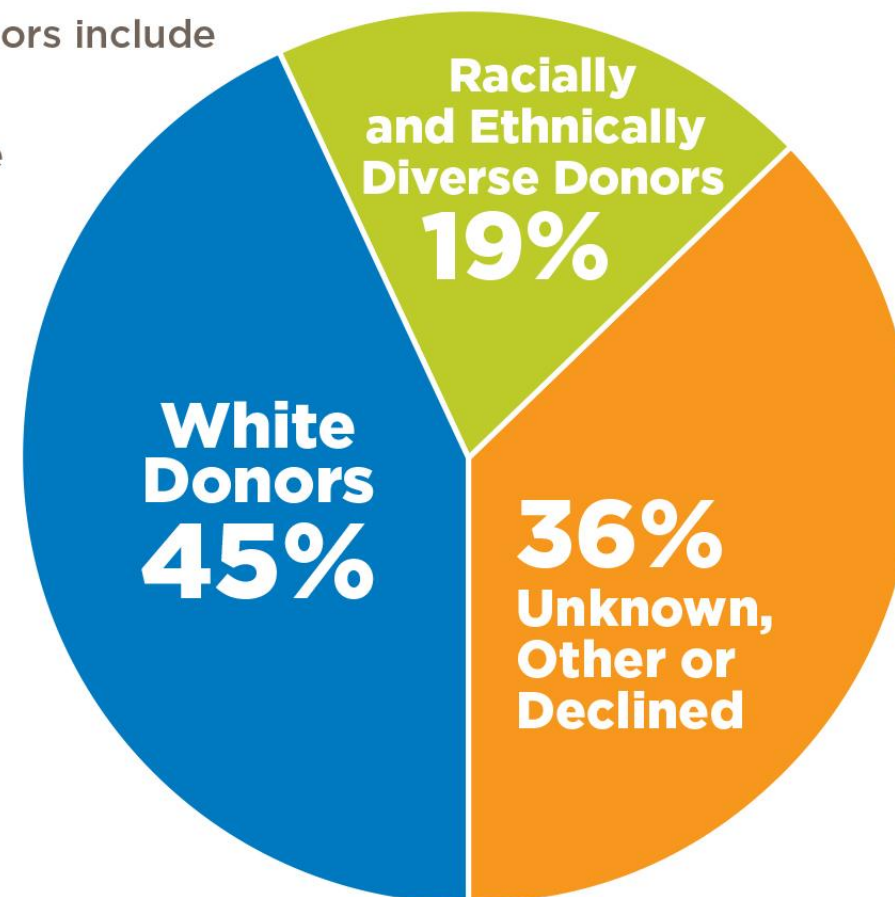
# Allogeneic HCT Recipients in the US, by Donor Type



# Diversity of Adult Donors on the Be The Match Registry® 2017

Racially and ethnically diverse donors include those who identify as:

- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander

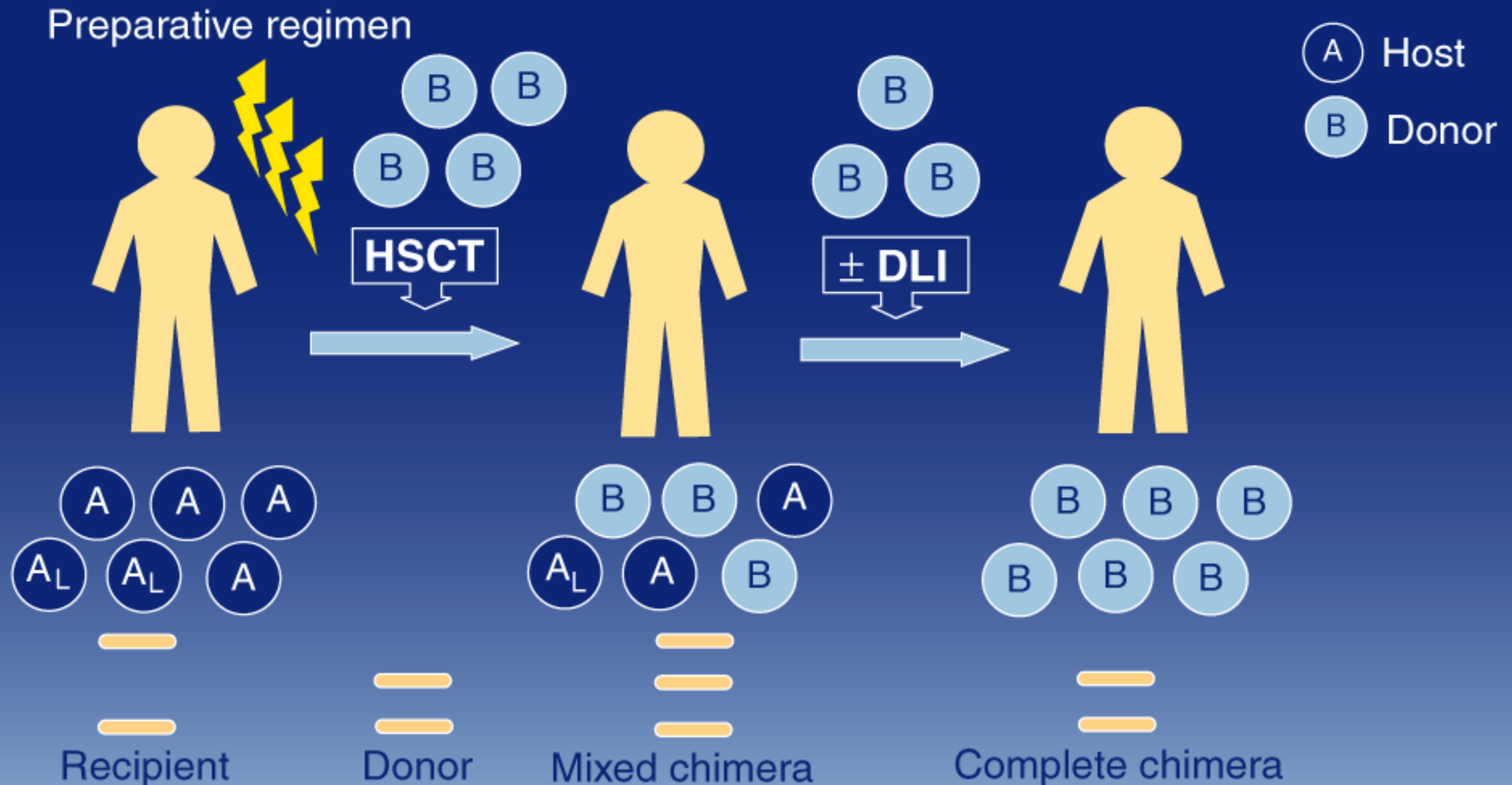




# Location of Centers Participating in the CIBMTR 2017\*

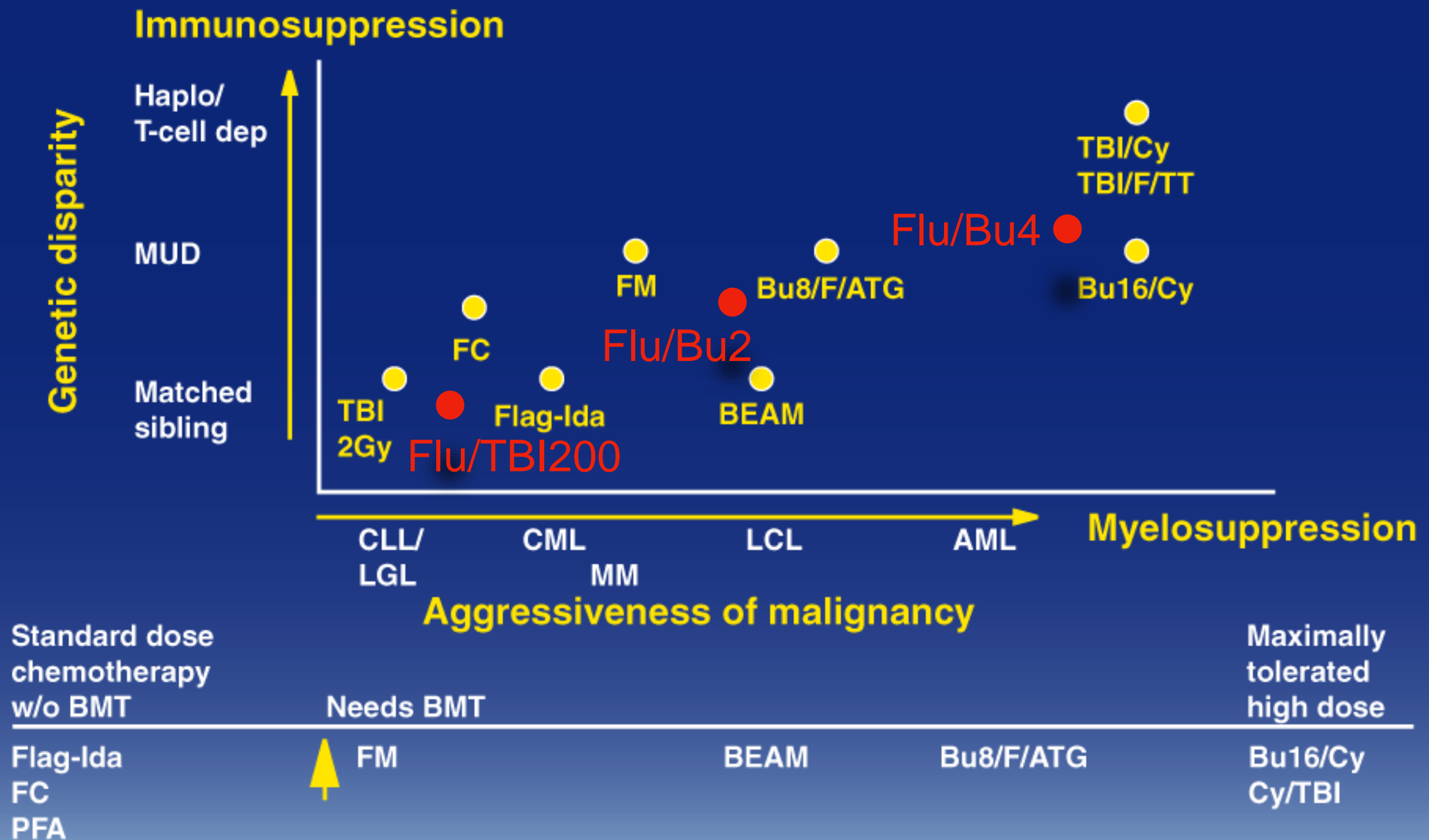


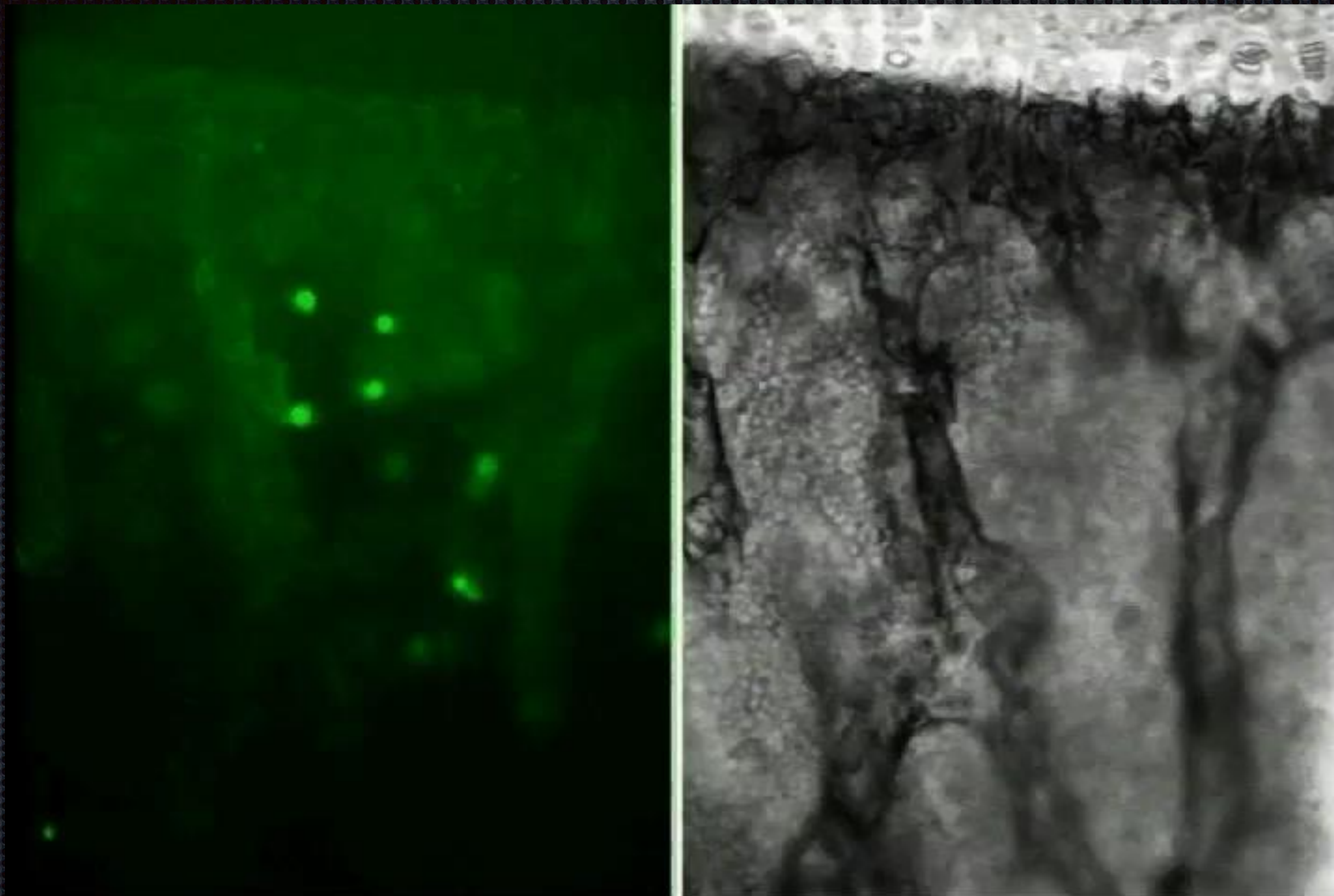
# Non-myeloablative hematopoietic cell transplant





# Intensity of preparative regimens





PNAS 1/06



Major problems with  
stem cell transplant:

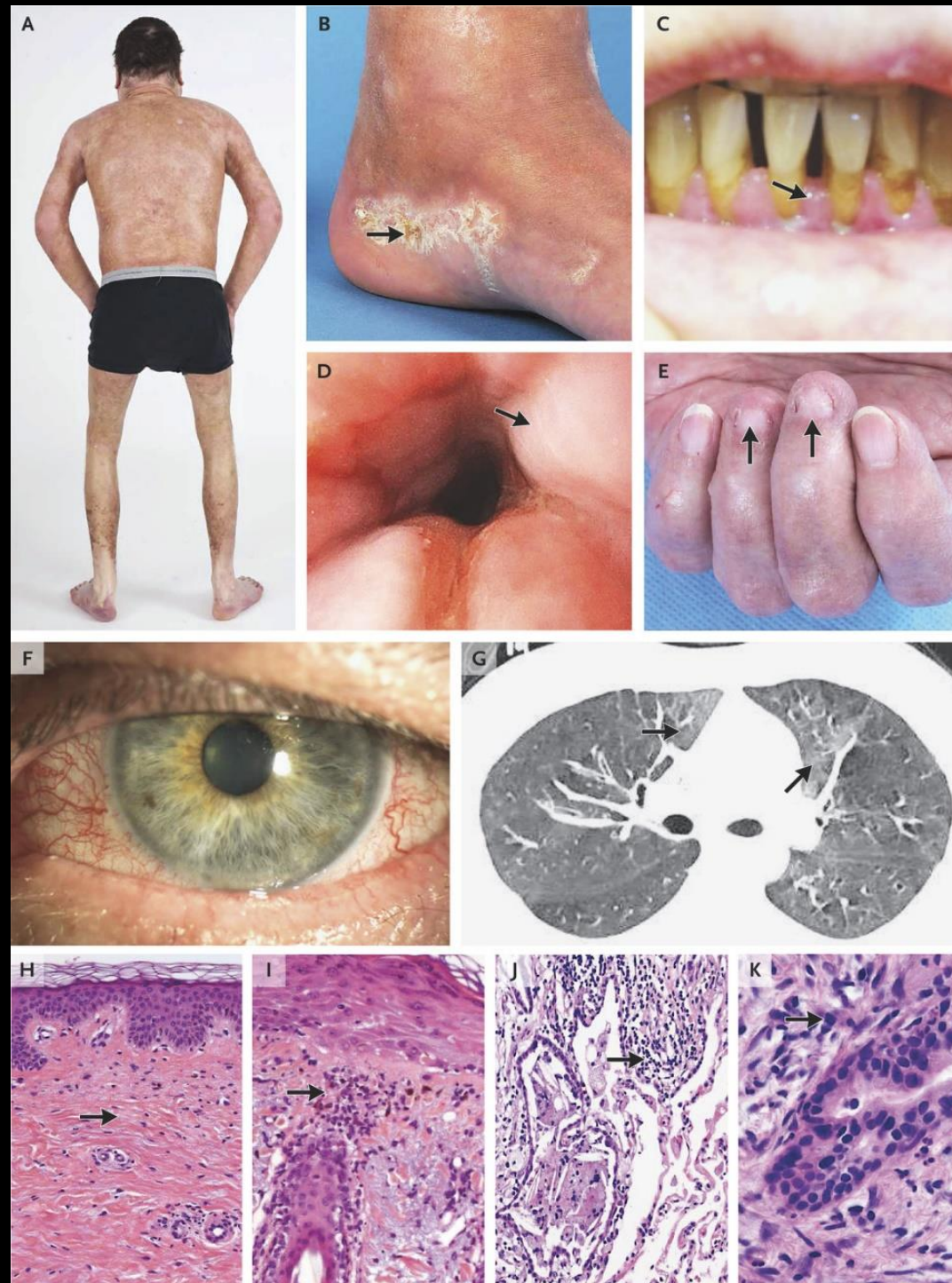
Infections

And for allogeneic  
transplant: Graft vs

Host Disease

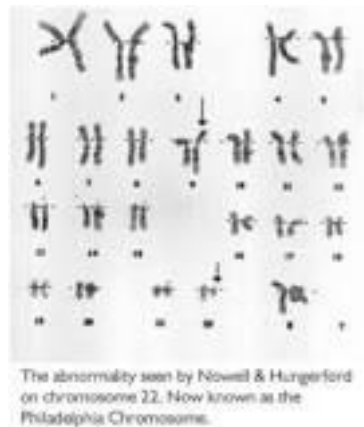


# Clinical and Histopathological Findings in Chronic Graft-versus-Host Disease (GVHD).





# Genomics: Cancer Etiology (Therapy)



**Philadelphia Chromosome  
Discovered (bcr-abl):  
Mutation: Cancer (CML)**

**First Cancer  
Causing DNA Change:  
HRAS in Bladder Cancer**

**DNA Structure  
Discovered**

**Sanger Method for  
DNA Sequencing**

**Abl inhibitor  
Discovered  
(Imatinib)**

1953

1960

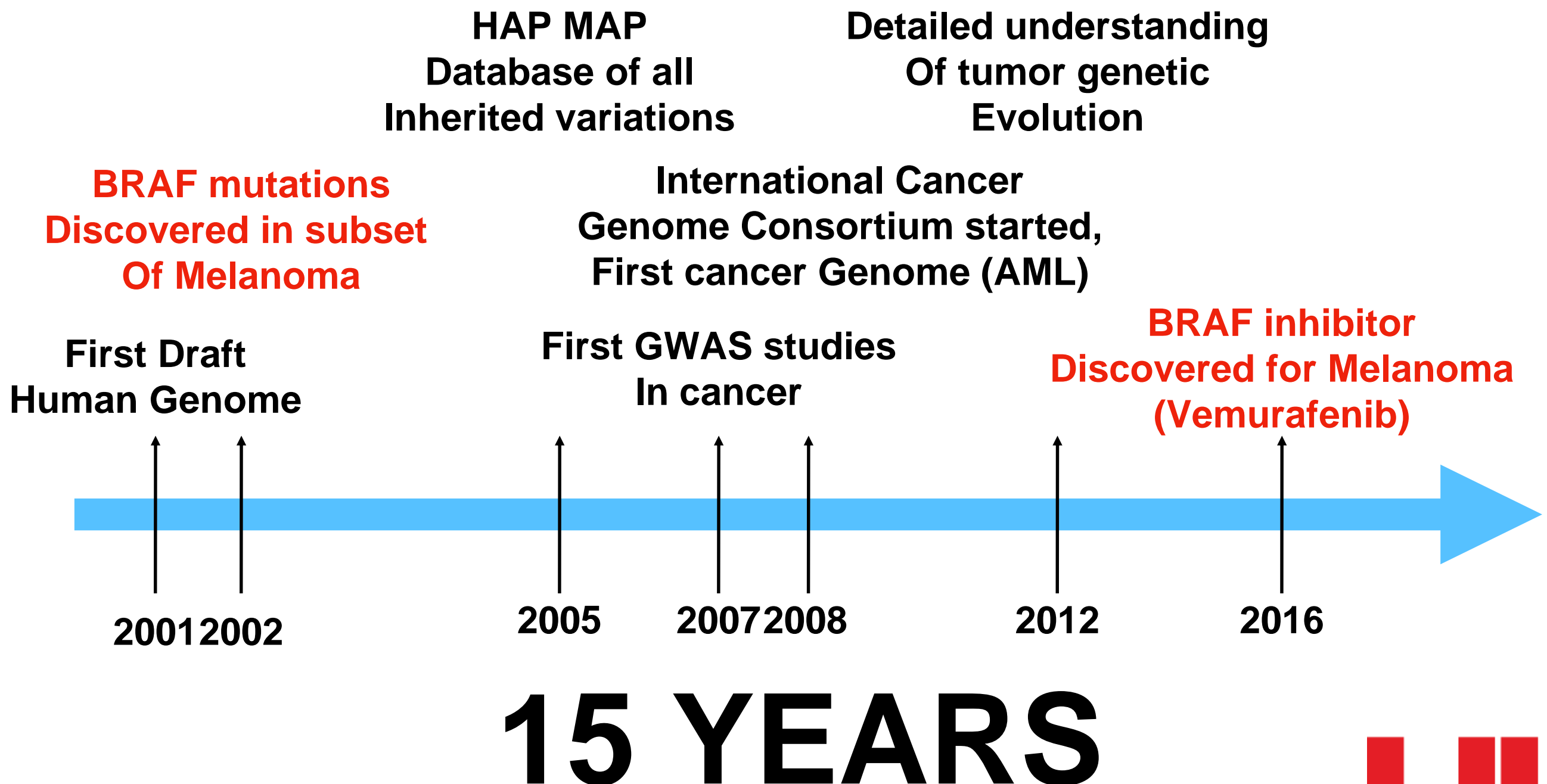
1977

1982

1998

**50 YEARS**

# Genomics: Cancer Etiology (Therapy)





# Cancer Immunity Poorly Understood for a LONG time

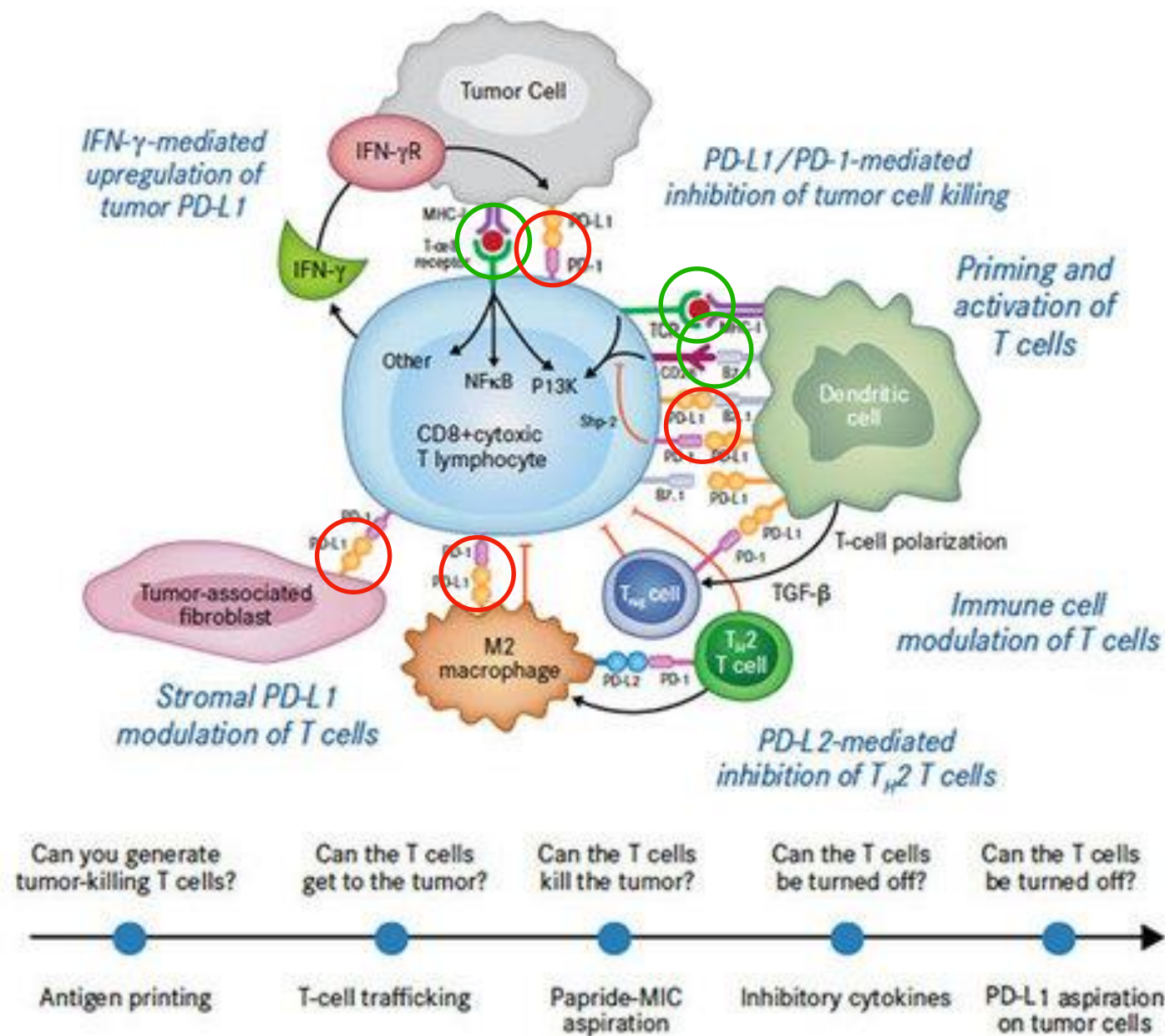
- 100 years of evolution
- T cells in cancer patients detect tumor-associated epitopes (Thierry Boon, Brussels)
- Peptide vaccines to boost T cell responses: few clinical responses
- Cytokines to boost T cell responses (IL-2, interferon): few clinical responses and toxicity

# Views of immunity

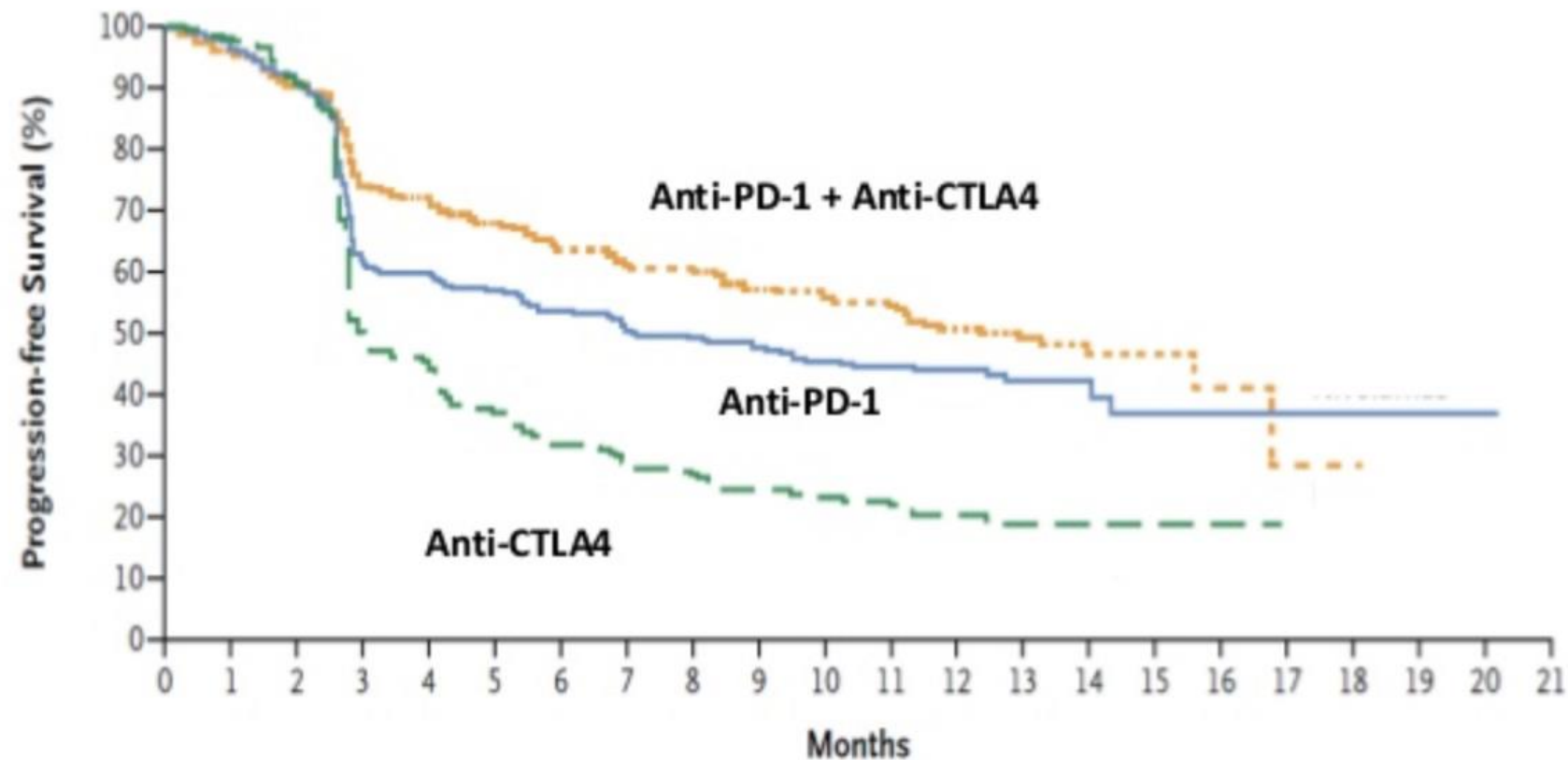
- Discoveries in mice led to understanding of the immune system and associations with cancer
- Self vs Non-self dominated thought in immunology arguing against an important role for the immune system in cancer surveillance (a “self” tissue)
- This changed with the realization that the immune system evolved to recognize “danger” and with mouse system defective in various aspects of immunity with increased susceptibility to cancer



# Cytotoxic T cell



# Anti-CTLA4 and Anti-PD1 in Melanoma

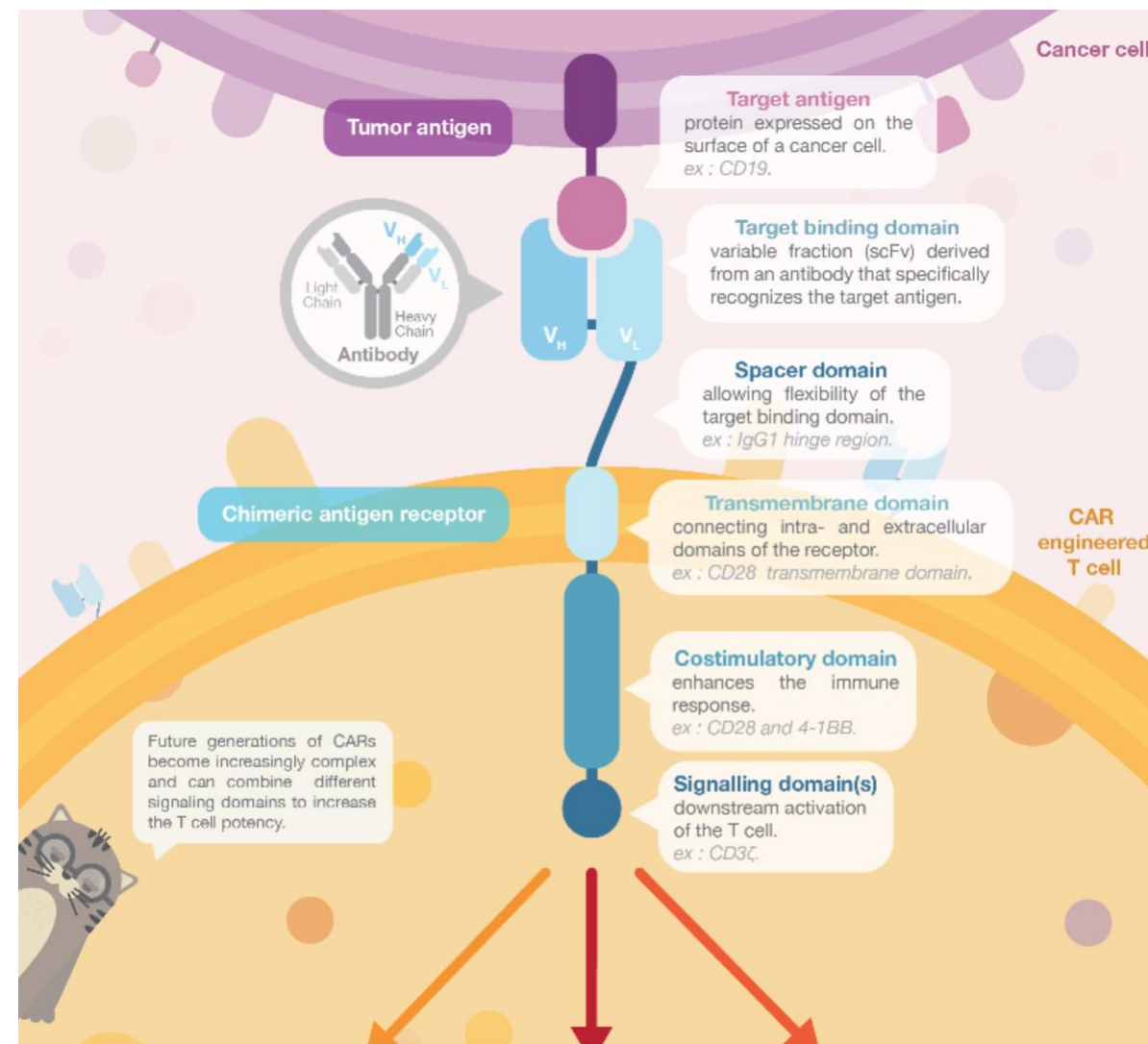


NEJM 363:8, 2010  
NEJM 372:2521, 2015  
NEJM 373:23, 2015

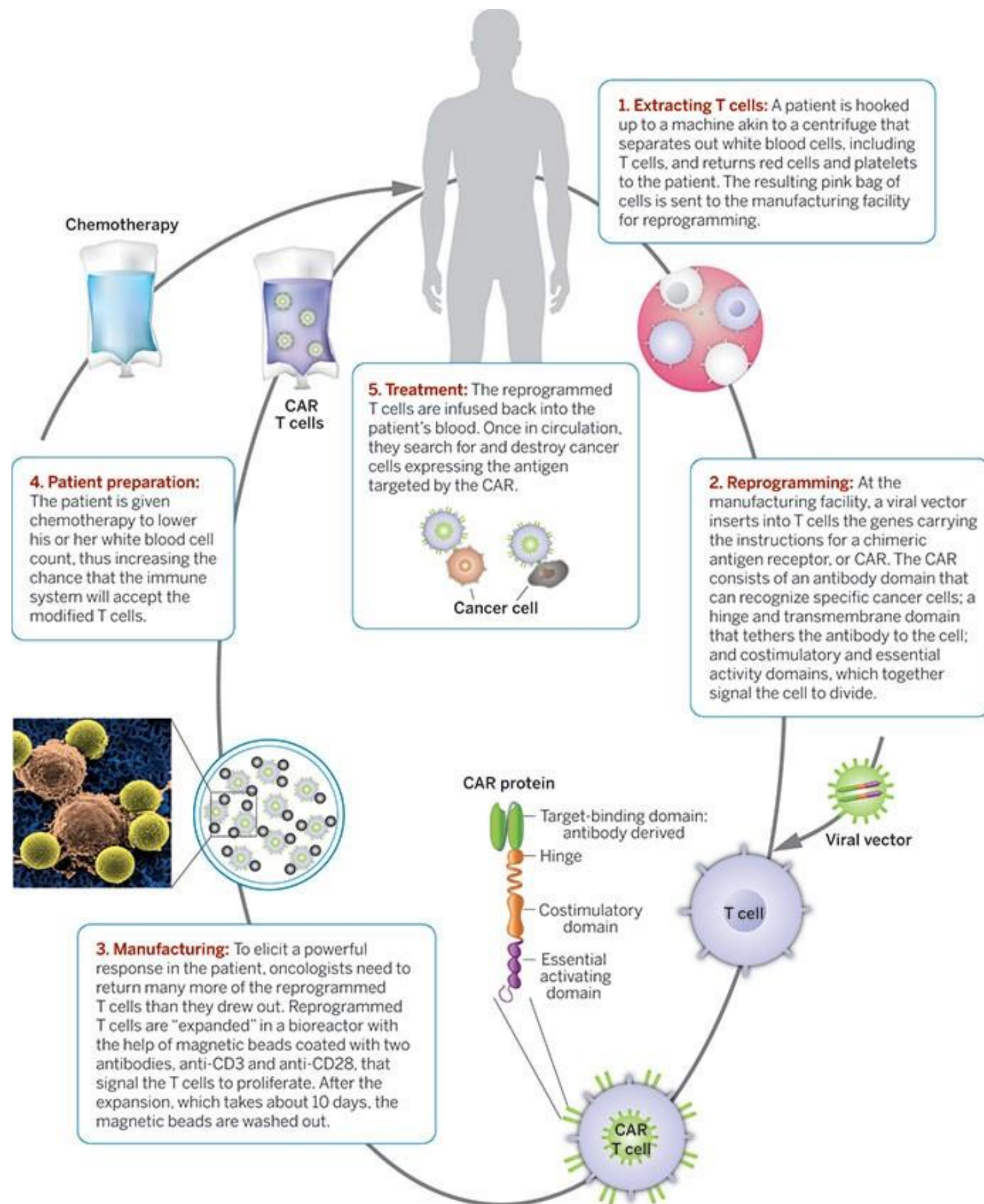


What about:  
Cancers not sensitive to the allo  
effect?  
Cancers growing too fast for allo  
effect to work?  
Cancers not responsive to NK  
attack or TIL therapy?

# Chimeric Antigen Receptor (CAR) T cells



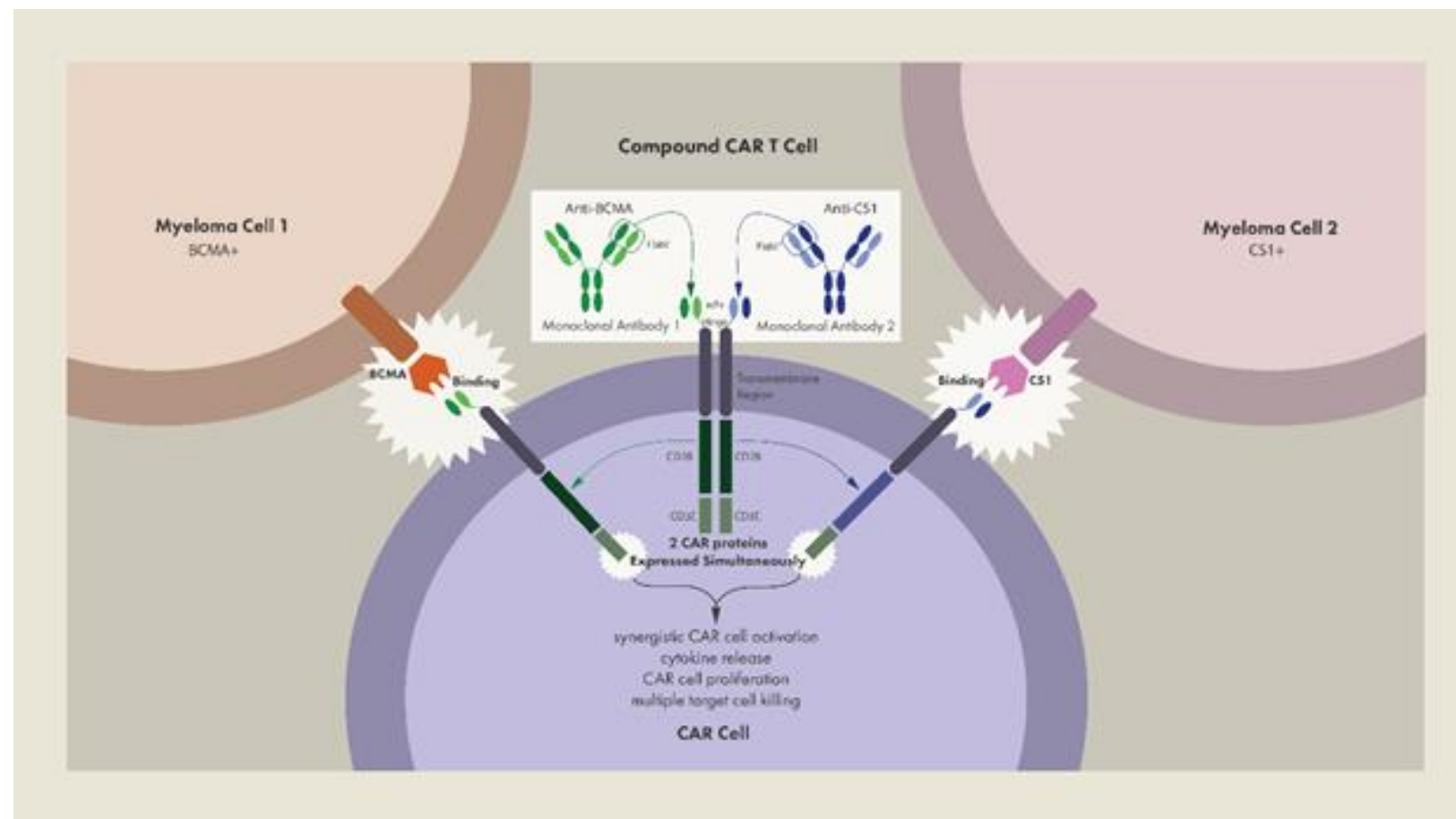




## Car-T Therapy: Clinical Protocol

# Myeloma Compound Car-T

## PI: Robert Emmons





# Questions?

