New Perspectives on HBV Immunology

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Study mechanisms responsible for viral control and pathogenesis in chronic hepatitis B patients.

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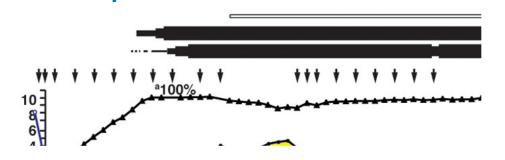
Vast majority of published patient-oriented research compares the immune response between resolved and chronic patients or features of exhaustion

Mechanisms of HBV pathogenesis and liver damage derived from acute models

T cell Responsible for Immune Control of HBV in Infected Chimpanzees

> CD4 T cell response is required to prime functional CD8 T cells

- Depletion prior to CD8 priming impaired HBV-specific CD8 Response
- Led to persistent infection

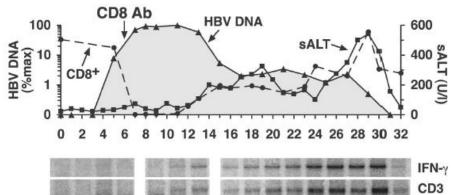


CD8 T cell eliminate infected hepatocytes and drive non-specific hepatocyte damage

 depletion prior to peak HBV DNA leads to persistent viremia & blunted inflammatory response

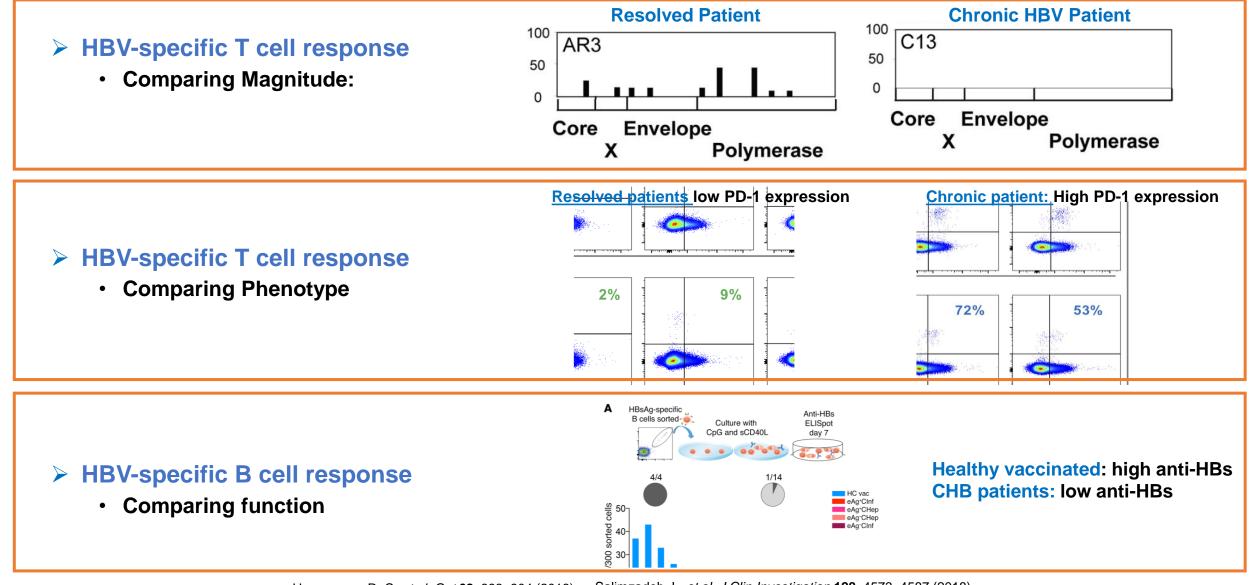
CD8 Depletion

CD4 Depletion



Asabe, S. *J Virol* **83**, 9652–9662 (2009). Thimme et. al. J. Virol, 2003

Comparing Acute vs. Chronic Immune Response

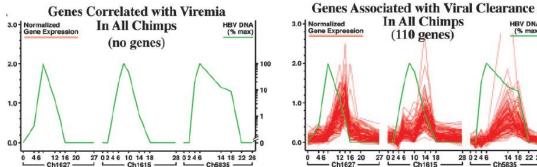


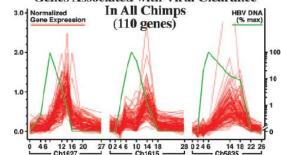
Tan, A. T. et al. J Virol 82, 10986–10997 (2008). Hoogeveen, R. C. et al. Gut 68, 893–904 (2018). Salimzadeh, L. et al. J Clin Investigation 128, 4573–4587 (2018).

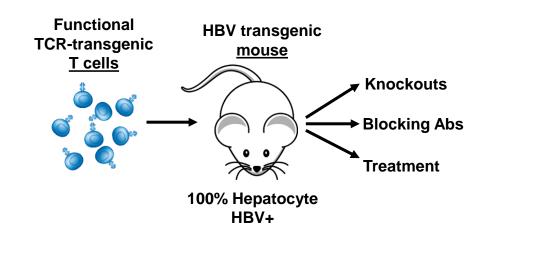
Mechanisms of Liver Damage - Derived from acute models -

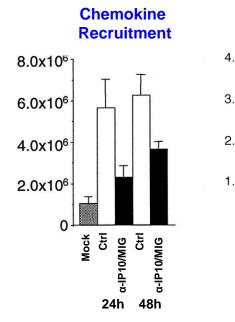
> Transcriptional response to HBV infection in Chimps (microarray: total RNA from biopsy)

- No genes associated with viral replication
 - 100% of hepatocytes infected
- Immune gene expression at the time of ALT increase 0

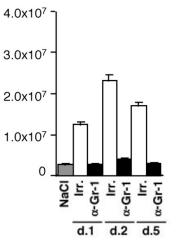


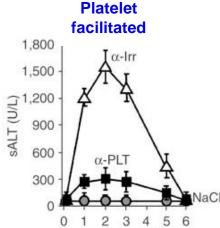






Neutrophil facilitated





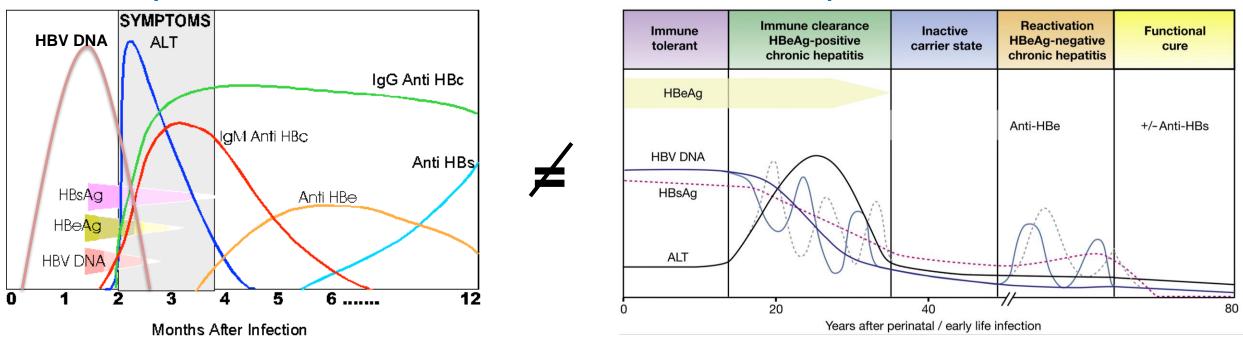
Days after CTL

Kakimi et al. J Exp Med 2001;194:1755-1766 Sitia et al. PNAS 2002;99:13717-13722 lannacone et al., Nat Med. 2005 Oct 30;11(11):1167-9

Wieland et. al. PNAS, 2004

Comparing Acute vs. Chronic Immune Response

Chronic HepB = Decades of infection



Acute HepB = Months of infection

Should we assume that the same mechanisms responsible for viral control and pathogenesis in acute infection will operate in chronic infection?

Should the goal of immunotherapy be to reach an immunological phenotype similar to a patient that resolved acute HepB? Is that even possible?

What do we need?

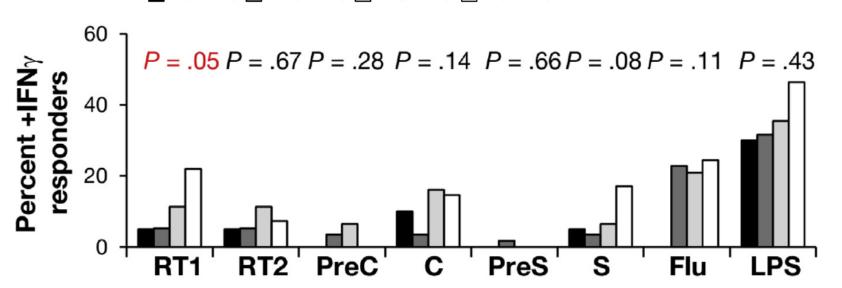
Immunological correlate of viral control in chronic hepatitis B patients.

How do we find it....is the challenge.

What CHB Patient Cohorts to Study?

> Across different stage of chronic hepatitis B that display different viral biomakers

• Specifically high viral load vs. low viral load (+/- liver damage)

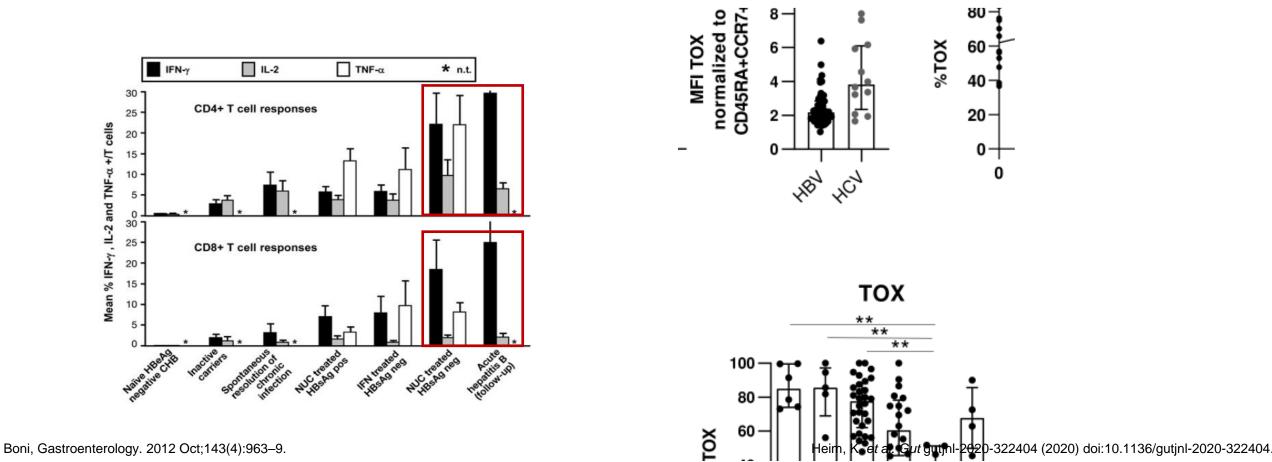


IT (n = 21) IA+ (n = 58) IA- (n = 66) IC (n = 45)

What CHB Patient Cohorts to Study?

> CHB patients that have achieved functional cure: HBsAg-, HBV DNA-, anti-HBs+/-

- spontaneous or treatment induced
- Hard to find but achieve the end goal of cure after decades of infection



Incorporating Immunology in Phase 1/2 Clinical Trials

HBV Forum Immune Monitoring Working Group has just submitted a white paper on incorporating immunological studies into clinical trials.

> Novel drugs in development are

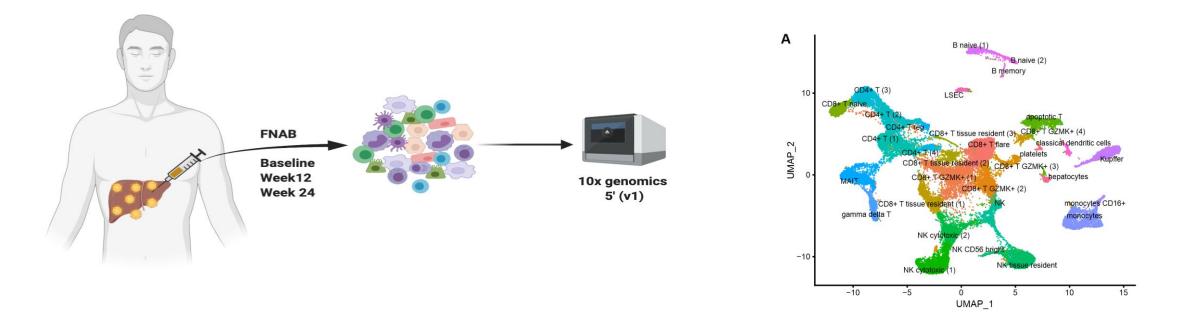
- 1. Robust activators of immunity: vaccines, innate immunomodulators, checkpoint inhibitors
- 2. Effectively alter virus and antigen distribution: siRNA, antisense oligos, CpAMs secretion inhibitors

This likely represents the best opportunity to identify immunological mechanisms responsible for viral control in chronic hepatitis B patients

Capitalize on the Growing Use of Liver Fine-needle Aspirates

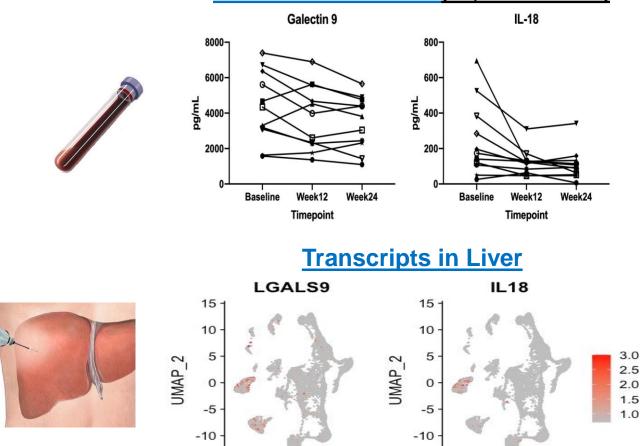
> Liver fine-needle aspirates (FNAs) allow for frequent, longitudinal sampling

- Adaptable to different clinical trial designs
- Deployed in focused ancillary studies to take a deep dive into mechanistic response to treatment intervention
- Single-cell technologies have revolutionized the amount of data obtained from few cells collected in liver FNAs



Capitalize on the Growing Use of Liver Fine-needle Aspirates

Link intrahepatic gene expression to peripheral biomarkers to identify cell types responsible for a response



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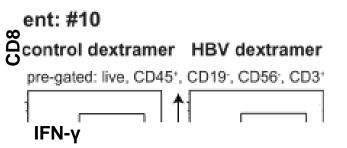
Plasma Proteomics (>1,000 markers)

Capitalize on the Growing Use of Liver Fine-needle Aspirates

Immuno-phenotyping Singlets CD45+ FSC-A FSC-A CD45 Monocytes CD16- CD16+ CD16. CD15 CD3 MAIT cells CD3 CD19 CD161 vδTCR CD8 T cells CR7 **CD19** CD4 CD45RA CD4 T cell CCR7 CD45RA

HBV-specific functional analysis

unstim core/env pep



HBV-specific dextramer analysis

Ctrl Dextramer HBV Dextramer

CD8 T cells unstim.

unstim. core/env OLP

Ce-gated: live,CD45*,CD56*,CD3*, CD4*CD8*



Summary

Increase investigation on chronic patients that have achieved functional cure over comparison to acute/resolved/vaccinated individuals

Defining an immunological biomarker associated with viral control in CHB patient will refine immunotherapy development

> Early-stage clinical trials provide the best opportunity to define immunological biomarkers

- focused substudies to investigate immune response to intervention and mechanism of action
 - clearly gaining traction with sponsors
- Understanding the immune response is informative whether there is an antiviral effect or not.
 - drug targeting to specific cell types
 - inform combination strategies
 - provide "no go" data to preserve resources
- > Simultaneous blood and liver sampling should be considered a priority in sub-studies
 - Liver data provides information regarding the response at site of infection
 - Liver sampling is not feasible for large studies: Link peripheral biomarkers to liver responses.