# Stromal hypersial ylation within colorectal tumors contributes to immunosuppression of



T cell adaptive immunity in the tumor microenvironment

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## Background

- The tumor microenvironment (TME) is abundant in cancer-associated fibroblasts (CAFs) that can radically influence the cancer disease trajectory, especially in colorectal cancers (CRC).
- Directly targeting cancer-associated fibroblasts may hold great promise in augmenting CRC treatment, however, the limited understanding of the mechanisms mediating stromal immunosuppression remains an obstacle.

The glyco-immune checkpoint (Siglec/Sialoglycan) axis has recently emerged as a new mechanism of cancer immune evasion.

Human CRC tumours are hypersialylated at the tumor-stromal interface





# **CD3+ T cells reside in the stroma** of colorectal tumors













The aim of this study was to evaluate the role of stromal hypersiallylation on the CRC tumor microenvironment.

#### Methods

Tissue microarrays of human CRC tumors were profiled for sialoglycan reactivity by immunohistochemistry (IHC), using the HYDRA-3, -7 and -9.

HYDRA platform developed The Palleon by Pharmaceuticals, is a set of proprietary reagents, consisting of a hexametric fusion of the extracellular domain (containing the carbohydrate recognition domain) of Siglec-3, -7 or -9, a trimerization motif, and a mouse Fc domain.

Colorectal tumors are hypersialylated and show Figure 1. predominantly HYDRA-7 (Siglec 7L) and -9 (Siglec 9L) reactivity. (A) Tumor tissue microarray of commercial source containing colon cancer and normal colon epithelial tissue samples were stained by IHC with HYDRA-3, -7, -9 separately and scored by histoscore (H-score, range 0-300). The sum of all three HYDRA H-scores were plotted to compare tumor vs normal tissue samples. HYDRA H-score was found  $\geq$ 50 (any HYDRA) in 63% (44/64) of tumor samples tested. HYDRA H-score of normal tissue are typically <10. (B) Representative IHC images of colorectal tumors stained with HYDRA-7 or -9. Images were taken at 40x magnification.



Figure 2. Siglec-9 ligand expression (stained by Siglec-9 Fc) colocalizes with stromal cells in the colorectal tumor microenvironment. Immunofluorescence-stained FFPE tissue sections from human CRC patient tumors using recombinant human Siglec-9 Fc and two separate fibroblast characterization markers,  $\alpha$ -smooth muscle actin ( $\alpha$ -SMA) and fibroblast activation protein (FAP).

Figure 4. CRC tumor-associated stroma has higher T cell infiltration.

(A) Representative IHC stained sections of six individual CRC patient tumors. Sections in A are stained with anti-CD3 (DAB-brown); sections in B are stained with anti-CD8 (DAB-brown) (n = 6). Nuclei were counterstained with hematoxylin. (B) Representative section quantifying CD3+ cells using QuPath software for both stroma (top panel) and tumor (bottom panel). Positive cells are detected with a red outline and negative cells are blue. Magnification for A and B = 200X; scale bar, 50  $\mu$ m. (C) Scatter bar graphs showing frequency (%) of CD3+ cells (left) and CD8+ cells (right) per field of view. Data are mean ± SD; \*\*p < 0.01 using nonparametric Mann-Whitney test.

**Sialidase pre-treatment of CAFs** reduced the frequency of **PD-1/Siglec-9-expressing CD8 T cells** 





Human bone marrow derived mesenchymal cells (BM-MSCs) were isolated and conditioned (Figure 3A). Siglec-7 and Siglec-9 ligand expression was evaluated by flow cytometry.

Human normal-associated fibroblasts (NAFs) or CAFs from dissociated CRC tumors were characterized for sialic acid expression using lectins (MAL-II and SNA-1) and using HYDRA reagents (Siglec-7,9 HYDRA) by flow cytometry.

NAFs and CAFs were pre-treated with human Neu-2 engineered sialidase (SIA) or untreated before coculture with CD3-sorted T cells from healthy donors. The effect of sialidase pre-treatment on NAF/CAF immunomodulation was evaluated by measuring as well as NAF/CAF sialyation levels, cell checkpoint proliferation, function, and receptor expression.

### **Tumor-conditioned stromal cells are** more highly sialylated than cancer cells



Figure 3. Tumor-conditioned human MSCs express higher levels of Siglec ligands compared to cancer cells. (A) Schematic overview of human bone marrow-derived MSC-conditioning regime using tumor cell secretome (TCS) from the CRC cell line HCT116. (B) RFI (relative to HCT116 MSCs<sup>TCS</sup>) of Siglec-7 and Siglec-9 ligand expression on HCT116 cancer cells. Data are mean  $\pm$  SD; \*\*p < 0.01 using unpaired t test. n = 3 biological replicates.

# Human CRC patient-derived CAFs are hypersialylated

Figure 5. CAFs induce a sialylation-dependent exhausted phenotype

in CD8+ T cells. (A) Frequency (%) of CD3-sorted CD8+Siglec-9+ T cells after co-culture with NAFs or CAFs. (B) Frequency (%) of CD3sorted CD8+Siglec-9+ T cells expressed as a percentage of the parent (CD8+) population after co-culture with NAFs (left) or CAFs (right) pretreated and cultured directly or not with SIA. (C) Frequency (%) of CD3sorted CD8+PD-1+ T cells after co-culture with NAFs or CAFs. (D) Frequency (%) of CD3-sorted CD8+PD-1+ T cells expressed as a percentage of the parent (CD8+) population after co-culture with NAFs (left) or CAFs (right) pre-treated and cultured directly or not with SIA.

## Conclusion

- Using a proprietary HYDRA platform to measure cellassociated sialoglycans, we showed that both tumor cells and associated stromal cells are hypersiallyated in colorectal cancer.
- Targeting stromal sialylation with an engineered



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Figure 3. CRC tumor-derived CAFs have elevated levels of sialic acid expression. For cell surface characterization, 5x10<sup>4</sup> NAFs or CAFs were incubated specific lectins Maackia (biotinylated Amurensis Lectin II (MAL-II) and biotinylated Sambucus Nigra Lectin (SNA-I)) or Siglec-Fc chimeras (Siglec-7 and Siglec-9) where indicated. \*\*p < 0.01 using nonparametric Mann-Whitney test. n = 5biological replicates.

human sialidase reversed stromal cell-mediated immunosuppression in CAF/T cell co-cultures and may contribute to antitumor immunity by increasing activated and functional CD8+ T cells.

We propose that targeting stromal cell sialylation and/or Siglec-Siglec ligand interactions reactivates T cell activation and may represent an innovative strategy to enhance anti-tumor immunity in immunosuppressive TMEs.

An engineered human sialidase, being evaluated in a Phase 1/2 trial (NCT005259696) for patients of advanced solid tumors, could be potentially applied to target stromal cell desialylation.





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