Inhibiting Ehmt2/Ezh2 histone methyltransferases enhances immune microenvironment in a Trp53^{-/-} murine ovarian cancer model

Pavlina Spiliopoulou^{1,2}, Sarah Spear¹, Suzanne Dowson², Susan Mason³, Karen Blyth³, Matt Fuchter¹, Bob Brown¹, Iain A McNeish¹ ¹Ovarian Cancer Action Research Centre, Department of Surgery and Cancer, Imperial College London, UK ²Institute of Cancer Sciences, University of Glasgow, UK ³CRUK Beatson Institute, Glasgow, UK Corresponding author: p.spiliopoulou@imperial.ac.uk

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Background

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- Ovarian high grade serous carcinoma (HGSC) is a poor prognosis disease with mutations in TP53 found in around c.100% of all cases¹.
- Ovarian cancer prognosis is strongly associated with development of an anti-tumour immune response². However, tumours can employ epigenetic mechanisms to silence immunostimulatory genes, such as chemokines³.
- We investigated whether a novel dual inhibitor of the histone methyltransferases Ehmt2/Ezh2 was able to derepress expression of critical chemokines and augment the immune response in a murine ovarian cancer model.

Methods

- *Trp53^{-/-}* ID8 cells were previously generated by CRISPR-Cas9 technique⁴.
- An 84-chemokine RT-qPCR array was used to analyse in vitro transcript changes following treatment with an Ehmt2/Ezh2 inhibitor.
- C57BL/6 female mice were inoculated with *Trp53*^{-/-} ID8 cells intraperitoneally (IP). Following this, tumours and haemorrhagic ascites develops approximately 40-45 days post-inoculation. Treatments were delivered IP.
- Following tumour dissociation and digestion, cells were stained for flow cytometry and analysed using Cytek Aurora flow cytometer.

Result 1: Chemokine gene upregulation by Ehmt2/Ezh2 inhibition

In vitro, combination Ehmt2/Ezh2 treatment significantly (p<.05) upregulates the expression of lymphocyte-attractant chemokines, such as CXCL10 (3fold), CXCL9 (22-fold) and CCL5 (14-fold), after stimulation with IFNy (fig. 1





Log2(fold change Ehmt2/Ezh2 inhibitor vs IFN_Y)

<u>Figure 1:</u> Trp53^{-/-} ID8 cells a) stimulated with 1ng/ml IFN γ alone or (b) stimulated with FN γ and treated with 6uM of dual Ehmt2/Ezh2 inhibitor. Green colour denotes increase, red colour decrease and black colour no change.

Result 2: Dual Ehmt2/Ezh2 blockade confers a survival advantage

2b).

Figure 2: Female C57BL/6 mice were injected IP with Trp53-/- ID8 cells on day 0 and treated with a dual Ehmt2/Ezh2 inhibitor 20mg/kg BD (n=12) or vehicle (0.9% NaCl,1% Tween and 3.5% DMSO, n=12) for 14 days via IP injection. Subsequently, mice were allowed to reach humane endpoint. At endpoint, weight and ascites volume were measured.

Result 3: Ehmt2/Ezh2 inhibition shapes the immune microenvironment within tumour deposits



Figure 3: a) Quantitative analysis of flow cytometry performed on mouse tumours, gating on (a) CD8⁺ T cells stained with CD44 and CD62L markers for identification of effector (CD44⁺CD62⁻) and naïve (CD44-CD62L⁺) populations, (b) mean fluorescence intensity of CXCR3 receptor on CD8⁺ cells and CD8⁺T cells stained with granzyme B antibody following stimulation with PMA/ionomycin, followed by brefeldin A/monensin treatment.



• *In vivo*, dual Ehmt2/Ezh2 inhibition confers a survival advantage over control (52d vs 45d, p<.0001) (fig 2a). Tumour weight and ascites volume were significantly lower in the group treated with the dual inhibitor (mean 120mg vs 178mg, p=.006; 3.7ml vs 5.6ml, p=.003) compared to control (fig



Ehmt2/Ezh2 inhibition results in an increase in effector CD8⁺ T cells (71.2% vs 54.4% p=.03) with a simultaneous decrease in naïve CD8⁺ T cells (3.44% vs 0.68%, p=.02) in the TME (fig 3a). There are significant increases in both mean fluorescence intensity (MFI) of CXCR3, the receptor involved in CXCL9/CXCL10 axis (MFI 3959 vs 1862, p<.001) and granzyme-B producing CD8⁺ cells (65.1% vs 27.2% p<.0001) following Ehmt2/Ezh2 inhibition (fig 3b)

Treatment with Ezhmt2/Ezh2 inhibitor results in an increase in both Natural Killer (NK) cells ($5.2 \times 10^6 vs 2.8 \times 10^6 cells/g$, p=.007) and their CXCR3 receptor expression (MFI 1507 vs 440, p<.001) (fig 4).

> Figure 4: Quantitative analysis of flow cytometry gating on CD3⁻DX5⁺ for identification of natural killer population (NK cells) and MFI of CXCR3 receptor on NK cells.





Result 4: Ehmt2/Ezh2 inhibition augments activation of splenic CD8⁺ cells

CD8⁺ cells derived from mice after treatment with Ehmt2/Ezh2 inhibitor demonstrate higher level of perforin (10.2% vs 5.9%, p=.004) and IFNy (22% vs 18%, p =.01), compared to control.

Figure 7: Mouse spleenocytes were stimulated with PMA/ionomycin, treated with brefeldin A/monensin and then subjected to flow analysis after stained with intracellular markers against Perforin and IFNy. Plots are showing a representative sample closest to the mean and numbers represent frequencies respective to entire CD8⁺ population.

Inhibition of Ehmt2/Ezh2 stimulates expression of chemokines involved in T cell, NK and DC recruitment. In vivo, Ehmt2/Ezh2 inhibition alters the immune microenvironment and confers a survival benefit. This suggests that Ehmt2/Ezh2 inhibition could augment the anti-tumour immune response in ovarian cancer.

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Ehmt2/Ezh2 inhibition reduces the immunosuppressive population of FoxP3⁺CD4⁺ Treg cells ($0.9x10^6$ vs $2.2x110^6$ cells/g, p=.02).

> Control Ehmt2/Ezh2 inhibitor

Figure 5: Quantitative analysis of flow cytometry gating on CD4⁺ T cells stained with FoxP3 marker.

Treatment with Ehmt2/Ezh2 inhibitor increases the number of dendritic cells (DCs) $(3.3 \times 10^6 \text{ vs} 1.3 \times 10^6 \text{ cells/mg}, \text{ p}=.0003)$. These DCs have higher expression levels of the activating receptor CD86, compared to control (mean fluorescence intensity 22365 vs 16181, p=0.009) (fig 6).



Figure 6: Quantitative analysis of flow cytometry gating on CD11b+Ly6G-SiglecF F4/80-MHCII+CD11c+ cells (DCs) and quantification of CD86 MFI activation marker on DCs.



Conclusion

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