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Experimental 'loss-of function' annotation of STK11 mutations with prognostic and therapeutic implications

Abstract #5584

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Introduction

Loss of function (LOF) mutations in Serine Threonine Kinase 11 (STK11) occur in 15% of lung adenocarcinoma and have been shown to drive resistance to immune checkpoint blockade clinically, as well as in preclinical models. Though STK11 is commonly inactivated in human cancer with strong implications for treatment outcomes, few STK11 mutations identified from tumor samples have been functionally characterized.

TNG260 is an inhibitor of CoREST that is currently being investigated in combination with pembrolizumab for the treatment of STK11-mutant cancer (NCT05887492). Patients are eligible for enrollment in the TNG260 phase 1/2 trial if their tumor contains a deleterious STK11 mutation. To begin classifying non-annotated variants, over 2,000 distinct mutations in the STK11 gene were identified from STK11 literature or public repositories of tumor sequencing data such as AACR Project GENIE and ClinVar. Where possible, loss-of-function annotations were captured from literature or predictive tools such as PolyPhen-2. However, many STK11 variants, particularly missense mutations, have never been functionally characterized.

We developed a functional screening approach to characterize STK11 alterations using the lung adenocarcinoma cell line A549. A549 cells contain homozygous loss of STK11 via a truncation mutation at Q37, and re-expression of wild-type STK11 in these cells strongly impairs their growth in vitro and in vivo. We created a library of STK11 variant cDNAs, each containing a unique barcode. This library was expressed in A549, and cells were maintained in vitro or in vivo to allow for positive selection of STK11 loss-of-function variants and depletion of variants that behave like wild-type STK11. At the end of the screen, variants were quantified by NGS using each mutant cDNA's unique barcode and compared to well-annotated controls.

These data were assembled to generate TNG260mutationfinder.com -- the first website to curate STK11 variants with functional annotations.

STK11 deficiency causes resistance to immune checkpoint blockade



STK11-mutated lung adenocarcinoma patients do not respond as well to immune checkpoint blockade as STK11 wild-type

TNG260 is a CoREST complex inhibitor that reverses α -PD1 resistance caused by loss of STK11



Verifying STK11 loss-of-function status is critical for determining the preferred approach for patient treatment





Design of a functional enrichment screen to annotate patientderived STK11 mutations for TNG260 clinical trial



Pathogenic computational score, but no supporting data 252

A549 3D Culture Cells expressing STK11 LOF mutations will enrich





STK11 Enrichment Screen Cells with LOF variants will

outcompete and enrich compared to benign variants



STK11 functional screen performed in 3D culture and xenografts



3D in vitro samples were collected at day 0, day 7 and day 14 of growth in 3D culture. In vivo xenograft samples were collected at 150mm³ and 1000mm³, representing "early" and "late" timepoints, respectively. Samples were prepared for NGS and sequenced for a unique barcode representing each STK11 variant.

Functional screen enriches true loss-of-function STK11 mutations over benign variants

Functional screen enriches positive control loss of function variants compared to benign variants or wild-type STK11



Negative control A Positive control X STK11 wild-type

Each STK11 variant was compared to day 0 to determine the log2 fold change (log2FC) of each variant. Log2FC values that exceed the WT and benign controls indicate pathogenic variants. Pathogenicity scores from each missense mutation were determined by AlphaMissense and plotted against log2FC.



Group O experimental \square negative_control \triangle positive_control X WT

Each STK11 variant was compared to day 0 to determine the log2 fold change (log2FC) of each variant. Pathogenic variants are those with log2FC values that exceed wild-type STK11 and negative controls. Pathogenicity scores from each missense mutation were determined by AlphaMissense and plotted against log2FC.



Log2 fold change in representative STK11 variants between "early" and "late" timepoints. Early tumors were collected at 150mm³, and late timepoint tumors were collected at 1000mm³. Positive controls enriched during the screen, while negative controls were static or depleted. Experimental mutations were pathogenic if log2FC values increased over time, while experimental mutations were benign if they stayed static or depleted over time.





Each STK11 variant was compared to day 0 to determine its log2 fold change (log2FC). Each variant's log2FC was plotted by amino acid sequence of STK11, shown with corresponding domains. Variants that fall above the red dotted line are pathogenic.

Benign Mutations		Pathogenic Mutations	
R405W	E376K	L290P	C132R
K81N	R409P	T244P	1300N
K122R	K175R	L285P	F148S
R415L	V34F	C132W	K235T
199T	A205P	A153D	L182R
L252M	L105S	G242E	G61S
Y340H	G346S	P281R	
D5H	E65D	L184P	
P280L	C418Y	T244N	
D53N	G346V	W308R	
R425H		G288V	

TNG260mutationfinder.com, a searchable database of 2600 STK11 loss-of-function variants identified from patient tumors







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Summary

- Tumors with STK11 loss of function are resistant to immune checkpoint blockade
- STK11 is altered in 15% of NSCLC, but STK11 missense mutations are poorly annotated
- The functional screen identified LOF mutations that had low pathogenicity scores, and vice versa – indicating that functional validation of in silico analyses are necessary for STK11 missense variants
- Data was assembled to generate TNG260mutationfinder.com, a repository of patient-derived STK11 alterations with pathogenic or benign calls
- Annotation of STK11 is critical for identifying patients with true STK11 LOF mutations which can help inform treatment options
- STK11 mutation is one criterion used to inform patient eligibility for NCT05887492, a clinical trial studying TNG260 + pembrolizumab in patients with STK11-mutated solid tumors

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