

Semaphorin7a expression in breast cancers promotes susceptibility to immune checkpoint blockade

Cancer Biology Training Program

Alan Elder¹, Alexander Stoller¹, Kelsey Kines¹, and Traci Lyons¹

¹University of Colorado Anschutz Medical Campus, Department of Medicine, Division of Medical Oncology

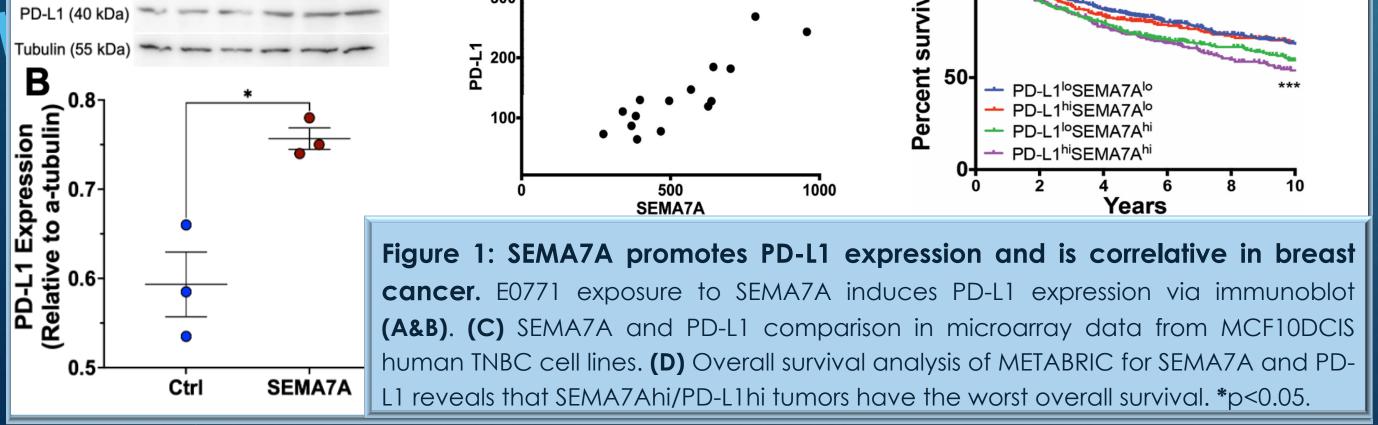
Abstract

Five-year survival rates for women diagnosed with stage II breast cancer are >85% on average; however, in women diagnosed with stage II breast cancer (BC) within 10 years of last childbirth, we observe a 5-fold increase in risk for developing distant metastasis when compared with nulliparous women¹. Major driving factors for stage II diagnosis include increased tumor-associated lymphatic vessel density (LVD), lymphovascular invasion (LVI), and lymph node positivity (LN+); all are associated with poor prognosis for BC patients. The mechanisms underlying development of LN metastasis and how LN metastasis seed distant metastases has remained elusive. LVD, LVI, and LN+ can be driven by tumor-associated macrophages (TAMs), which have been implicated in creating a pro-tumor tumor microenvironment (TME) in many types of cancer. Additionally, podoplanin (PDPN)-expressing macrophages (PoEMs), are a newly characterized type of TAM that specifically contribute to tumorassociated lymphatic vessel formation^{2,3}. Our lab identified that semaphorin7A (SEMA7A)—a neuroimmune molecule—is significantly associated with increased metastasis in LN+, but not LN-, BC patients, as well as increased recurrence in cases of BCs diagnosed within 10 years of childbirth, designated postpartum breast cancers (PPBCs). In mouse models, SEMA7A expression is associated with increased LVD and TAM presence, including PoEMs³. Furthermore, we and others have shown that PoEMs intercalate into lymphatic vessels to form PoEM-LEC chimeric vessels, where tumor cells can often be found at the PoEM-LEC junctions². We have observed that BC cells, lymphatics, macrophages, and PoEMs exhibit SEMA7A-dependent expression of PD-L1 in vitro, which may make SEMA7A+ tumors sensitive to α PD-1/ α PD-L1 therapies. Therefore, we utilized multiple orthotopic, immunocompetent mouse models with E0771 SEMA7A overexpressing (OE) and empty vector (Ctrl) tumors and flow cytometry on harvested tumors to produce the following results.

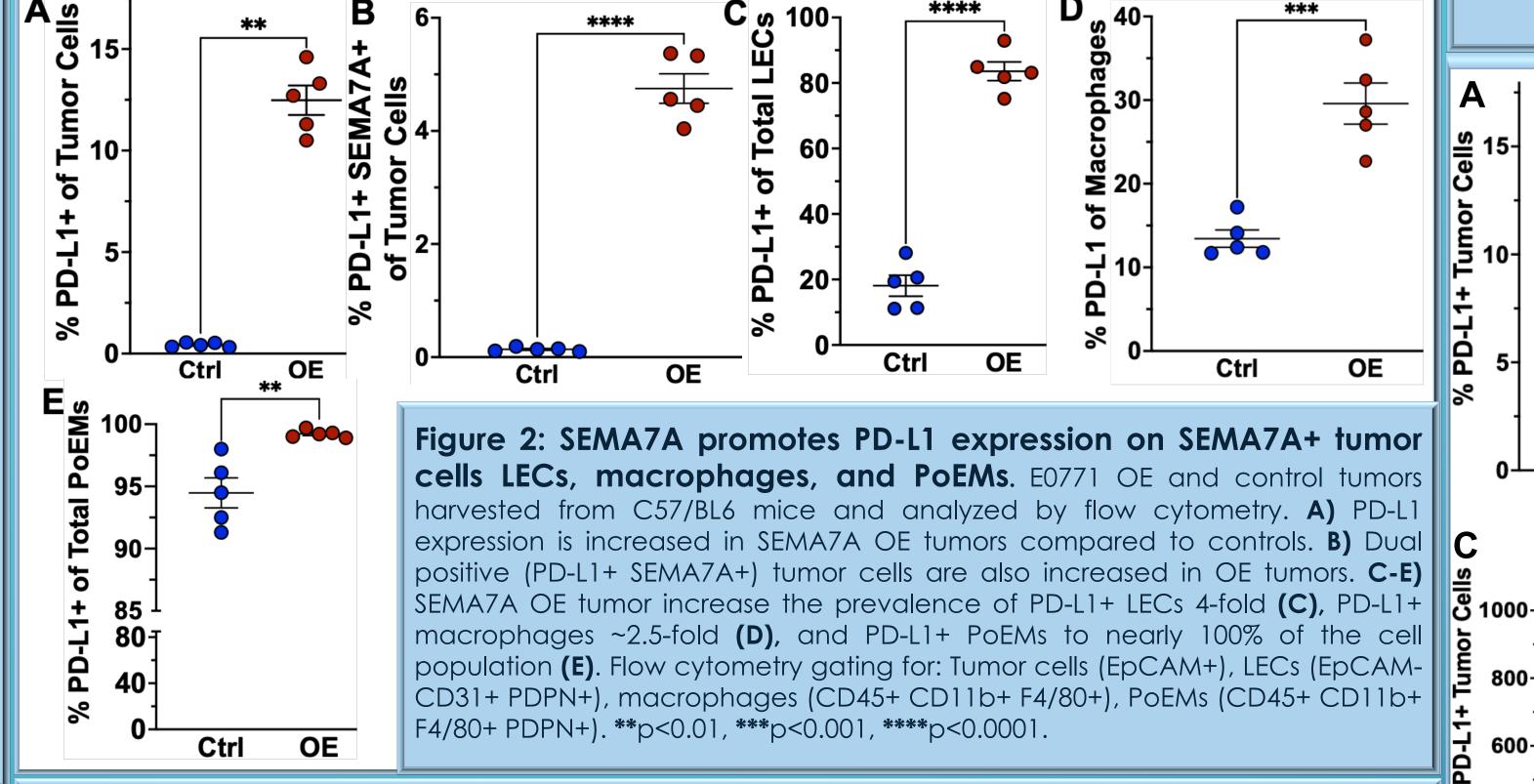
Objectives

- Establish a link between SEMA7A and immune-suppressive TME.
- Investigate the link between SEMA7A and susceptibility to immune checkpoint inhibition.
- Identify the immune checkpoint blockade-induced alterations to the TME in SEMA7A+ tumors.

SEMA7A exposure induces tumor cell expression of PD-L1



SEMA7A promotes PD-L1 expression on tumor cells and LECs



α -PD-1 and α -PD-L1 therapy inhibit growth of SEMA7A+ tumors

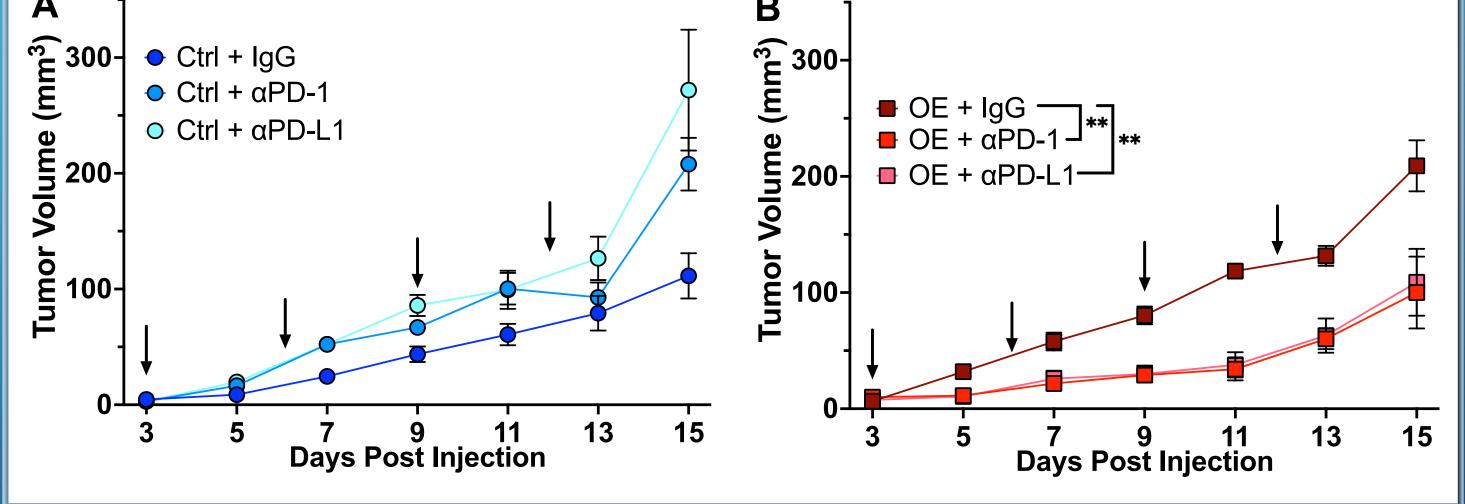


Figure 3: SEMA7A+ tumors are sensitive to both α -PD-1 and α -PD-L1. E0771 OE and control tumors were treated with IgG (vehicle), α -PD-1, or α -PD-L1. 250ug administered IP every third day once tumors were palpable. Control tumor growth was not affected by α -PD-1 or α -PD-L1 (A) but SEMA7A+ tumor growth was significantly inhibited (B). **p<0.01.

Contact Information Funding Information Alan Elder:alan.elder@cuanschutz.edu

Funding provided by: ACS RSG-16-171-010CSM, CCTSI KL2 TR001080, NIH NCI 1R01CA211696-01A1, Cancer League of Traci Lyons: traci.lyons@cuanschutz.edu Colorado (CLC) AWD#173586-TL, and CCTSI 5TL1TR002533-04.

α -PD-1 and α -PD-L1 treatment decrease PD-L1+ cells, but increase SEMA7A expression

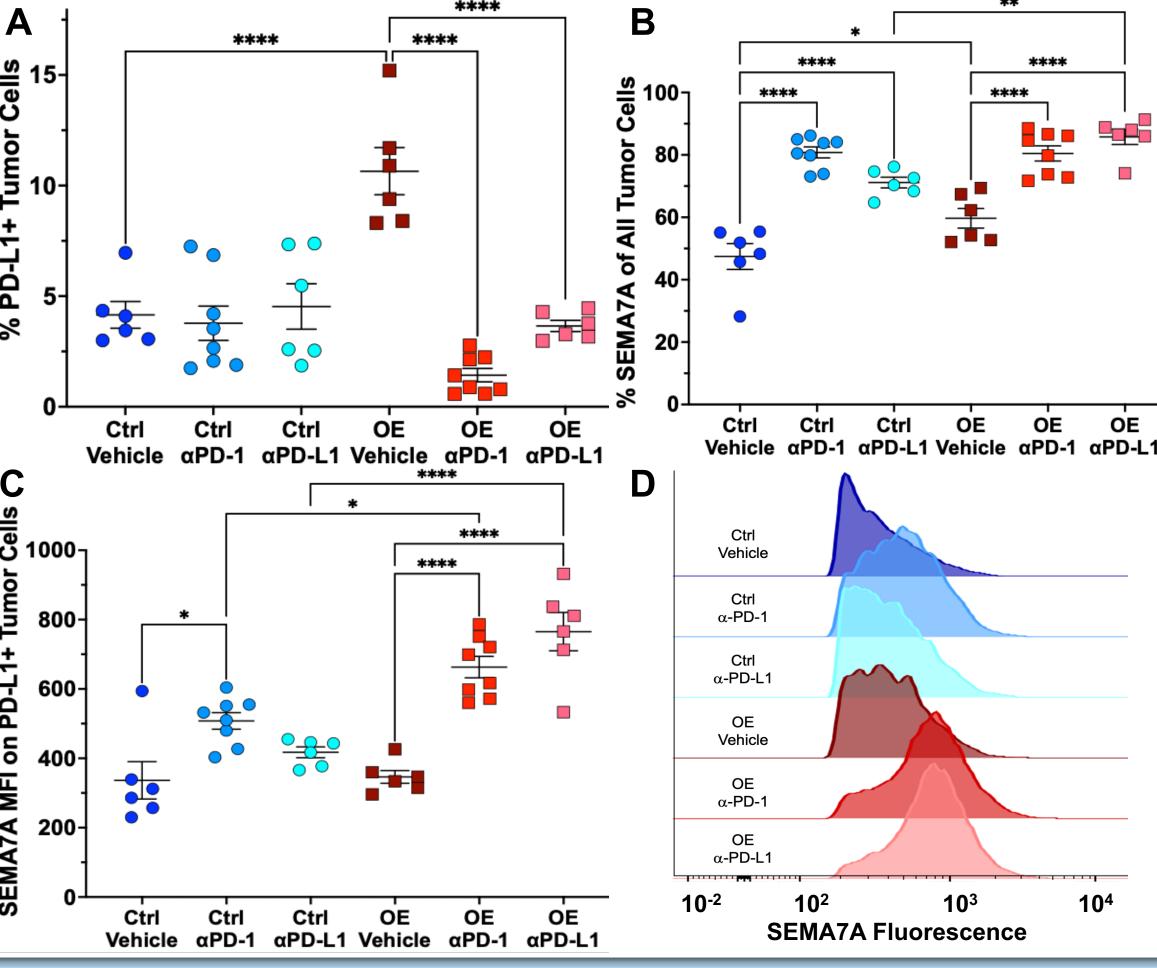


Figure 4: α -PD-1 and α -PD-L1 treatment causes upregulation of SEMA7A expression on control and SEMA7A OE tumor cells. E0771 OE and control tumors were treated (Figure 3) with IgG (vehicle), α -PD-1, or α -PD-L1 and analyzed by FC. α -PD-1 and α -PD-L1 eliminated PD-L1+ tumors in SEMA7A OE tumors (A) but increased the presence of SEMA7A+ tumor cells (B). Expression of SEMA7A on the remaining tumor cells increased in both control and SEMA7A OE tumors with α -PD-1 and α -PD-L1 treatment (**C and D**). *p<0.05, **p<0.01, ***p<0.001, ****p<0.0001.

Conclusions

- **SEMA7A upregulates PD-L1** expression on tumor cells, LECs, macrophages, and PoEMs.
 - **SEMA7A+ tumor** cells are susceptible to both α -PD-1 and α -PD-L1 immunotherapy.
- α -PD-1 and α -PD-L1 treatment increases the presence of **SEMA7A+** tumor cells in control and OE tumors.
- α -PD-1 and α -PD-L1 treatment upregulate expression of SEMA7A on control and OE tumor cells