

**POSTER PRESENTATION**

**Open Access**

# T cell receptor affinity and avidity defines antitumor response and autoimmunity in T cell immunotherapy

Michelle Krogsgaard<sup>1,3,7\*</sup>, Shi Zhong<sup>1</sup>, Karolina Malecek<sup>1,6</sup>, Laura A Johnson<sup>5</sup>, Zhiya Yu<sup>2</sup>, Eleazar Vega-Saenz de Miera<sup>7,3</sup>, Farbod Darvishian<sup>3</sup>, Katelyn McGary-Shipper<sup>1,6</sup>, Kevin Huang<sup>1</sup>, Joshua Boyer<sup>1</sup>, Emily Corse<sup>4</sup>, Yongzhao Shao<sup>8,7</sup>, Steven A Rosenberg<sup>2</sup>, Nicholas P Restifo<sup>2</sup>, Iman Osman<sup>1,9,7</sup>

From Society for Immunotherapy of Cancer 28th Annual Meeting  
National Harbor, MD, USA. 8-10 November 2013

T-cells have evolved the unique ability to discriminate “self” from “non-self” with high sensitivity and selectivity. However, tissue-specific autoimmunity, tolerance or eradication of cancer does not fit into the self/non-self paradigm because the T-cell responses in these situations are most often directed to non-mutated self-proteins. To determine the TCR affinity threshold defining the optimal balance between effective antitumor activity and autoimmunity in vivo, we used a novel self-antigen system comprised of seven human melanoma gp100<sub>209-217</sub>-specific TCRs spanning physiological affinities (1 to 100  $\mu$ M). We found that in vitro and in vivo T cell responses are determined by TCR affinity. Strikingly, we found that T cell antitumor activity and autoimmunity are closely coupled but plateau at a defined TCR affinity of 10  $\mu$ M, likely due to diminished contribution of TCR affinity to avidity above the threshold. Our results suggest a relatively low affinity threshold is necessary for the immune system to avoid self-damage given the close relationship between antitumor activity and autoimmunity. This, in turn, indicates that treatment strategies focusing on TCRs in the intermediate affinity range (KD  $\sim$ 10  $\mu$ M) or targeting or targeting shared tumor antigens would dampen the potential for autoimmunity during adoptive T cell therapy for the treatment of cancer.

#### Authors' details

<sup>1</sup>NYU Cancer Institute, New York University School of Medicine, New York, NY, USA. <sup>2</sup>Center for Cancer Research, National Cancer Institute, National Cancer Institute, NIH, Bethesda, MD, USA. <sup>3</sup>Department of Pathology, New

<sup>1</sup>NYU Cancer Institute, New York University School of Medicine, New York, NY, USA

Full list of author information is available at the end of the article

York University School of Medicine, New York, NY, USA. <sup>4</sup>Department of Immunology, The University of Texas MD Anderson Cancer Center, Houston, TX, USA. <sup>5</sup>Abramson Family Cancer Research Institute, Perelman School of Medicine, University of Pennsylvania, Philadelphia, PA, USA. <sup>6</sup>Program in Structural Biology, New York University School of Medicine, New York, NY, USA. <sup>7</sup>Interdisciplinary Melanoma Cooperative Group, New York University School of Medicine, New York, NY, USA. <sup>8</sup>Division of Biostatistics, New York University School of Medicine, New York, NY, USA. <sup>9</sup>Ronald O. Perelman Department of Dermatology, New York University School of Medicine, New York, NY, USA.

Published: 7 November 2013

doi:10.1186/2051-1426-1-S1-P242

**Cite this article as:** Krogsgaard et al.: T cell receptor affinity and avidity defines antitumor response and autoimmunity in T cell immunotherapy. *Journal for ImmunoTherapy of Cancer* 2013 **1**(Suppl 1):P242.

**Submit your next manuscript to BioMed Central  
and take full advantage of:**

- Convenient online submission
- Thorough peer review
- No space constraints or color figure charges
- Immediate publication on acceptance
- Inclusion in PubMed, CAS, Scopus and Google Scholar
- Research which is freely available for redistribution

Submit your manuscript at  
[www.biomedcentral.com/submit](http://www.biomedcentral.com/submit)

