

POSTER PRESENTATION

Open Access

# Innate resistance of PD-1 blockade through loss of function mutations in JAK resulting in inability to express PD-L1 upon interferon exposure

Daniel Shin<sup>1\*</sup>, Angel Garcia-Diaz<sup>1</sup>, Jesse Zaretsky<sup>2</sup>, Helena Escuin-Ordinas<sup>1</sup>, Siwen Hu-Lieskovan<sup>3</sup>, Nicolaos J Palaskas<sup>1</sup>, Willy Hugo<sup>1</sup>, Marie Sara Komenan<sup>1</sup>, Bartosz Chmielowski<sup>4</sup>, Grace Cherry<sup>1</sup>, Beata Berent-Maoz<sup>1</sup>, Thomas G Graeber<sup>1</sup>, Roger Lo<sup>1</sup>, Begonya Comin-Anduix<sup>5</sup>, Antoni Ribas<sup>6</sup>

From 30th Annual Meeting and Associated Programs of the Society for Immunotherapy of Cancer (SITC 2015) National Harbor, MD, USA. 4-8 November 2015

## Introduction

PD-L1-negative tumors assessed by immunohistochemistry often still respond to PD-1 blockade. PD-L1 is inducible by interferon, therefore, absolute negative tumors are the ones unable to up-regulate PD-L1 in response to interferons. Genetic mutations in the interferon receptor signaling pathway leading to loss of PD-L1 up-regulation were hypothesized to exhibit innate resistance to PD-1 blockade.

## Experimental procedures

After optimization, 50 primary human melanoma cell lines were exposed to interferons (alpha, beta and gamma) and PD-L1 expression was measured. Interferon signaling was assessed by single cell phospho-proteomics, pSTAT1 (Y701), pSTAT3, pSTAT5, pSTAT6 expression level by flow cytometry (FACS LSRII). Western blot assessed JAK1/JAK2/IRF1 as well as STAT/pSTAT expression and Whole exome sequencing was performed by next generation sequencing for three selected melanoma cell lines and on biopsies from 25 patients with advanced melanoma treated with anti-PD-1 therapy.

## Results

Three out of 50 melanoma cell lines were unable to up-regulate PD-L1 in response to interferon gamma; two of them had disruptive mutations in JAK1 or JAK2, and a third one had a defect in expression of IRF1 in response to interferons. Western blot analysis confirmed loss of function for the JAK1/JAK2 mutations and loss of

downstream IRF1/STAT1/3/5 phosphorylation events. Whole exome sequencing of biopsies from 15 patients with metastatic melanoma who had objective response to PD-1 blockade (pembrolizumab) showed no homozygous inactivating mutations in interferon signaling pathway genes. Interestingly, one patient with the highest mutational load out of 10 patients without clinical response to PD-1 blockade had an amplified allele of JAK1 with a P429S mutation in the src-homology (SH2) domain. A cell line derived from this patient showed lack of sustained up-regulating of PD-L1 expression in response to interferon gamma by, and Western blot confirmed loss of JAK1 expression. Immunohistochemistry of tumor biopsy for this patient showed few CD8+ T cells.

## Conclusions

This study has defined genetic mechanisms of innate resistance to PD-1 blockade which lead to inhibition of adaptive PD-L1 expression in patients with advanced melanoma. This work suggests lack of interferon-gamma induced PD-L1 upregulation has the potential to be a negative selective marker for PD-1 blockade therapy.

## Authors' details

<sup>1</sup>UCLA, Los Angeles, CA, USA. <sup>2</sup>UCLA Molecular and Medical Pharmacology, Los Angeles, CA, USA. <sup>3</sup>David Geffen School of Medicine at UCLA, Los Angeles, CA, USA. <sup>4</sup>Division of Hematology - Medical Oncology, UCLA Jonsson Comprehensive Cancer Center, Los Angeles, CA, USA. <sup>5</sup>UCLA, School of Medicine, LA, CA, USA. <sup>6</sup>University of California at Los Angeles Medical Center, Los Angeles, CA, USA.

Published: 4 November 2015

<sup>1</sup>UCLA, Los Angeles, CA, USA

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

doi:10.1186/2051-1426-3-S2-P311

**Cite this article as:** Shin *et al.*: Innate resistance of PD-1 blockade through loss of function mutations in JAK resulting in inability to express PD-L1 upon interferon exposure. *Journal for ImmunoTherapy of Cancer* 2015 **3**(Suppl 2):P311.

**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)

