

## **AUTOLOGOUS CELLULAR THERAPY OPEN LABEL PHASE I STUDY IN CROHN'S DISEASE WITH TYPE 1 REGULATORY (TR1) LYMPHOCYTES (CATS1)**

N. Clerget-Chossat<sup>1</sup>, P. Desreumaux<sup>2</sup>, V. Neveu<sup>1</sup>, A. Foussat<sup>1</sup>, M. Lemann<sup>3</sup>, M. Forte<sup>1</sup>

<sup>1</sup>TXCELL, Valbonne, <sup>2</sup>Gastroenterology, Claude Huriez Hospital, Lille, <sup>3</sup>Gastroenterology, Saint-Louis Hospital, Paris, France

Tr1 lymphocytes are IL-10 producing cells known to inhibit inflammatory colitis in mice. *Ovasave* is the first human systemic autologous Tr1 lymphocyte immunomodulating cell therapy for patients with chronic active Crohn's Disease (CACD).

*Ovasave* was produced from patient PBMC exposed to ovalbumin with subsequent cloning and expansion in presence of S2 feeder cells. The activated, IL-10 and TGF $\beta$  producing, antigen-specific Tr1 clones, were used in a phase I open label study (CATS1), to assess safety and explore efficacy of *Ovasave* in patients with CACD refractory to existing therapy. Patients were distributed in 4 cohorts with doses between  $10^6$  and  $10^9$  cells. After a pre-study washout, concomitant use of immunosuppressors and anti-TNF was not allowed. Mean patient age was 34 with disease duration of 13 years. All had previous failure to immunosuppressors and anti-TNF and 9 previous surgery. *Ovasave* was well tolerated with 40 adverse events (15 possibly related) and 10 serious adverse events (2 possibly related). At weeks 5 and 8 response (CDAI decrease  $\geq 100$ ) was observed in 40% (6/15) of patients with 66% (4/6) in the  $10^6$  cells dose. Remission (CDAI < 150) was seen in 33% (2/6) and 17% (1/6) at weeks 5 and 8 respectively. Overall, 47% (7/15) and 27% (4/15) had IBDQ response (increase  $\geq 16$ ) at weeks 5 and 8 respectively. In the  $10^6$  cells dose IBDQ response was seen in 66% (4/6) and 50% (3/6) patients also at weeks 5 and 8. Six had IBDQ remission ( $>170$ ), 4 of them in the  $10^6$  cells dose. In these preliminary results Tr1 autologous cells show good tolerability and suggest a dose related efficacy signal, supporting further work and an opportunity to patients with Crohn's Disease.