

Precision Vaccines: Using Adjuvants to Bring Precision Medicine to Vaccinology

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Many factors impact vaccine responses

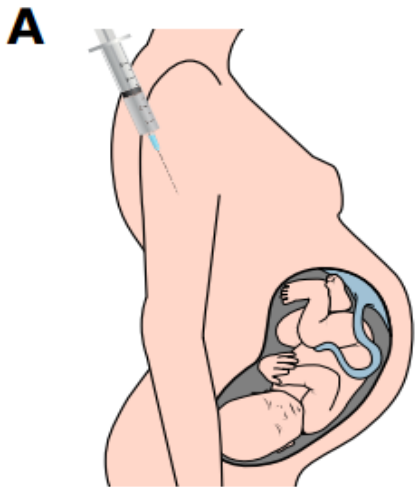


Infectious Causes of Death are Most Common in Early Life

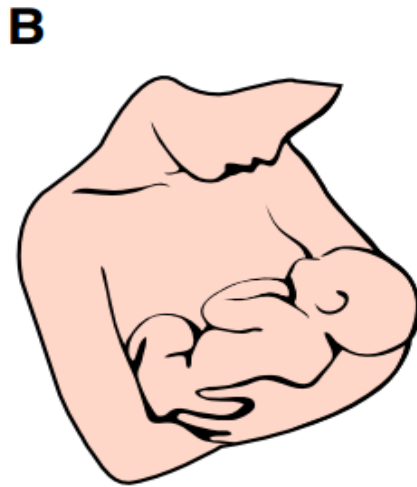


J Sepúlveda, and C Murray *Science* 2014;345:1275-1278

A range of interventions can confer passive and/or active immunity in early life



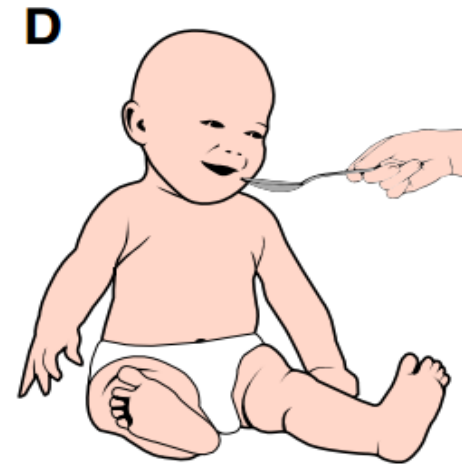
Maternal immunization



Breastfeeding

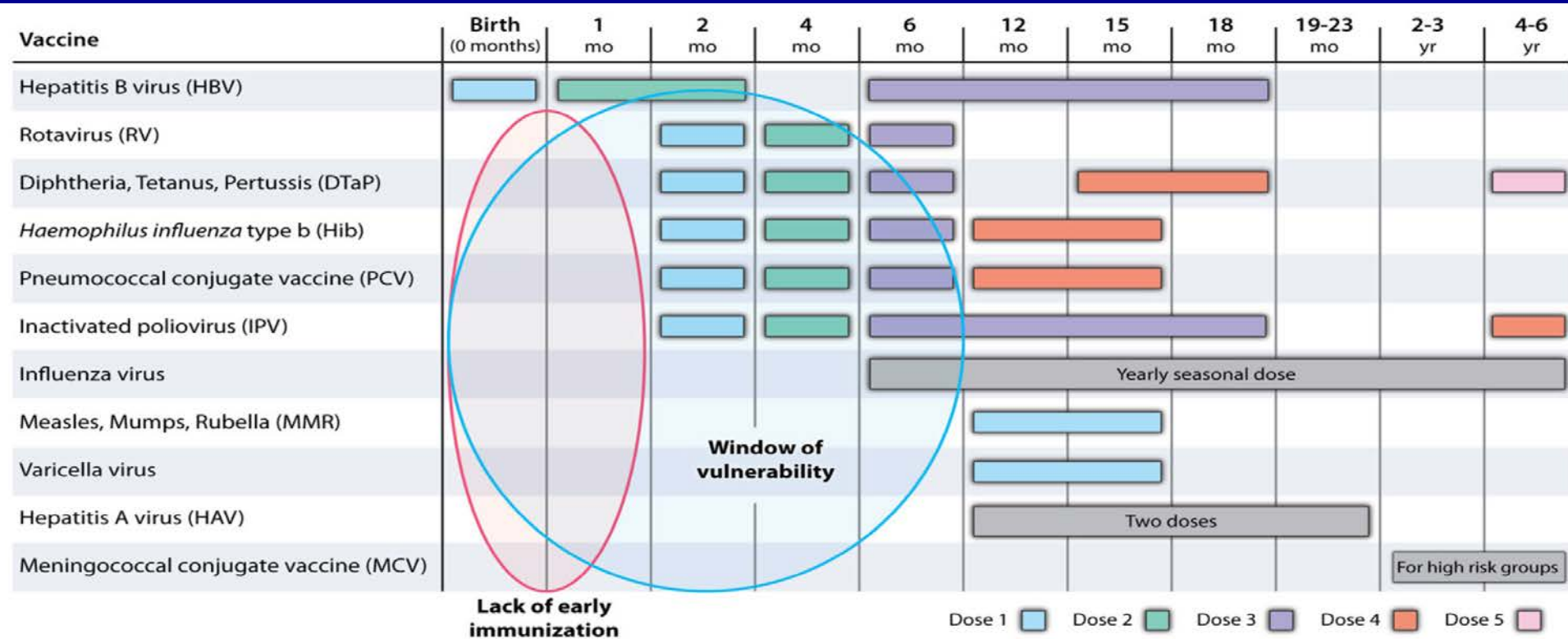


Newborn/infant immunization



Probiotics

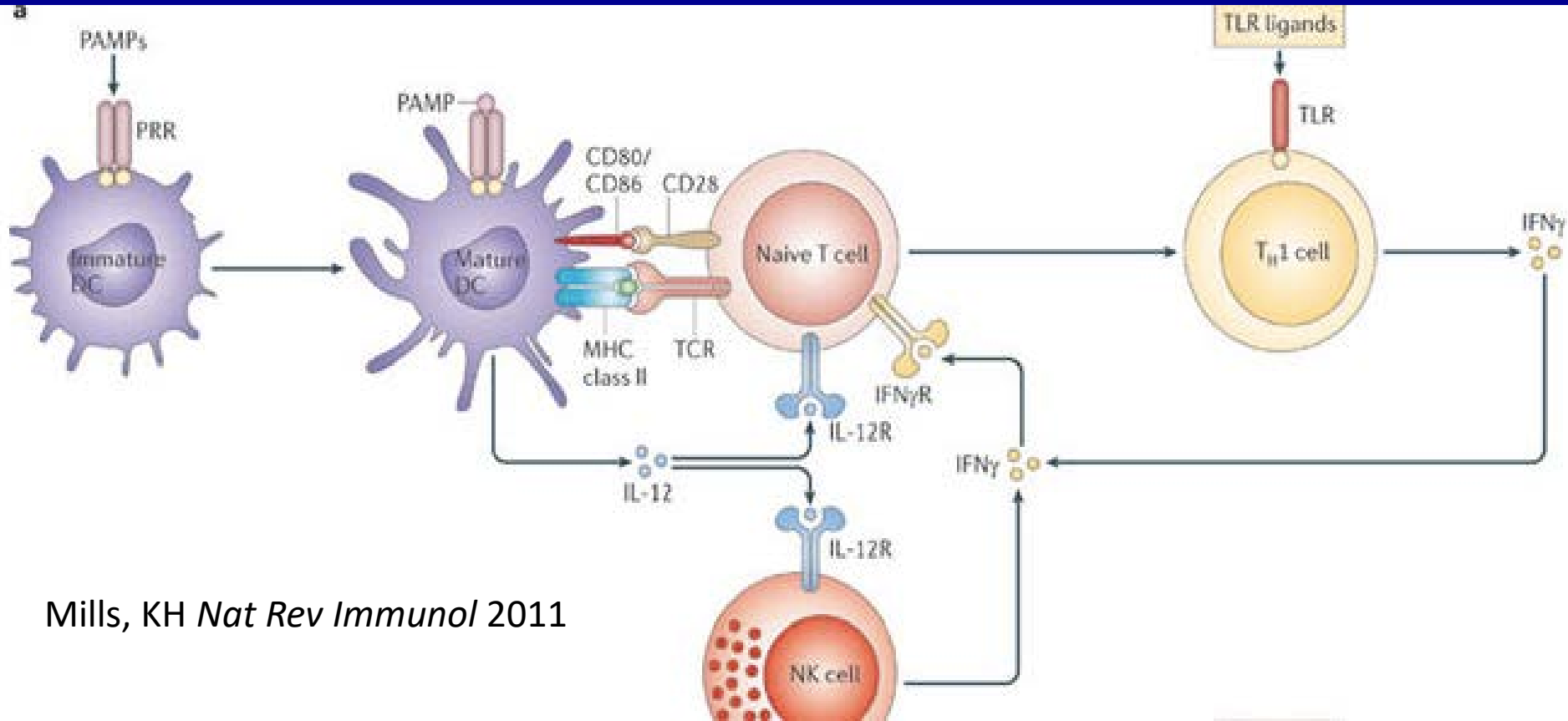
Challenges in Pediatric Vaccinology: Relative Lack of Early Immunization & Need for Multiple Booster Doses



**children all agree
one shot is better than three**



Activation of Pattern Recognition Receptors (eg, TLRs) can enhance vaccine responses



Mills, KH *Nat Rev Immunol* 2011

Recently licensed adjuvanted vaccines

- **Cervarix**

- Human papilloma virus vaccine
- Adjuvant: MPLA (TLR4A)/Alum
- Age: 10- 64 years
- 3 dose series

- **Heplisav**

- Hepatitis B surface Ag
- Adjuvant: TLR9 agonist (CpG)
- Age: 18 years and older
- 2 dose series (dose sparing)

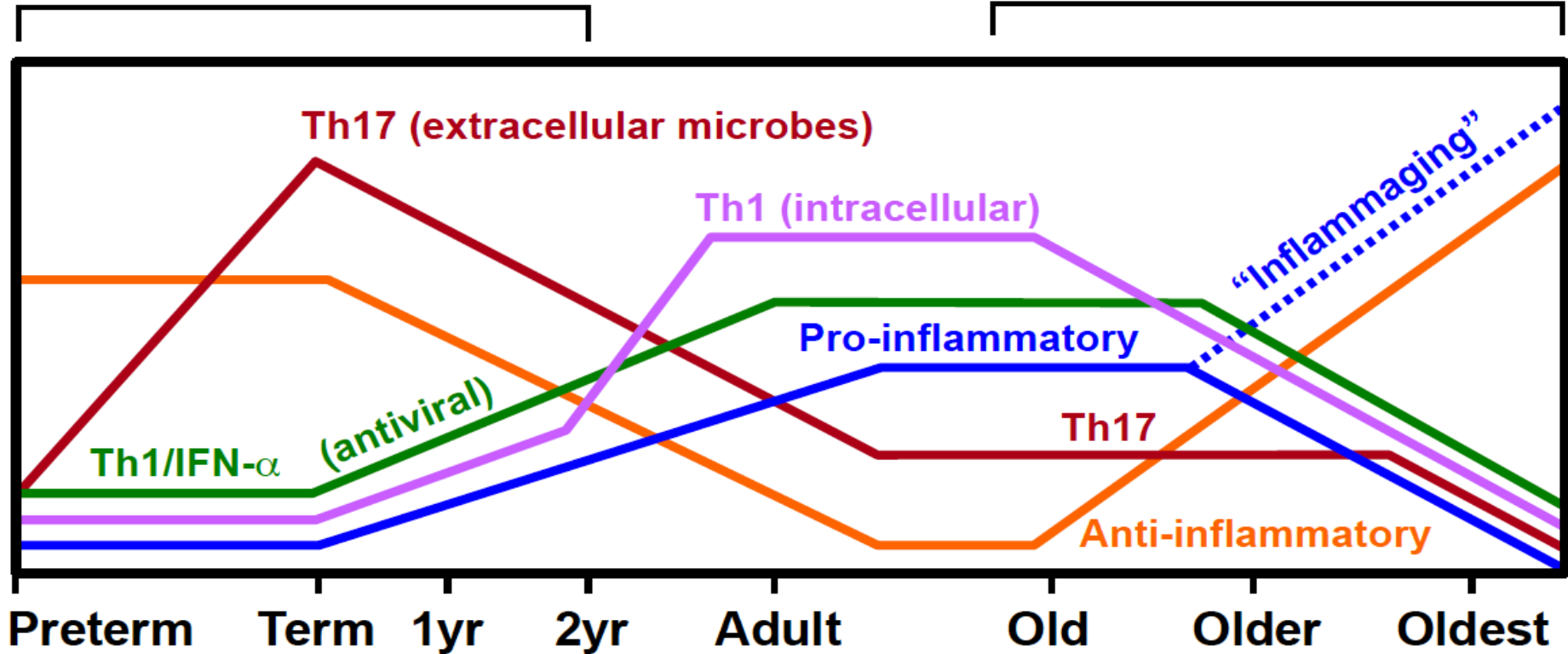


Ontogeny of TLR Function

Newborn/Infants

Kollmann, Levy Immunity 2012

Elderly



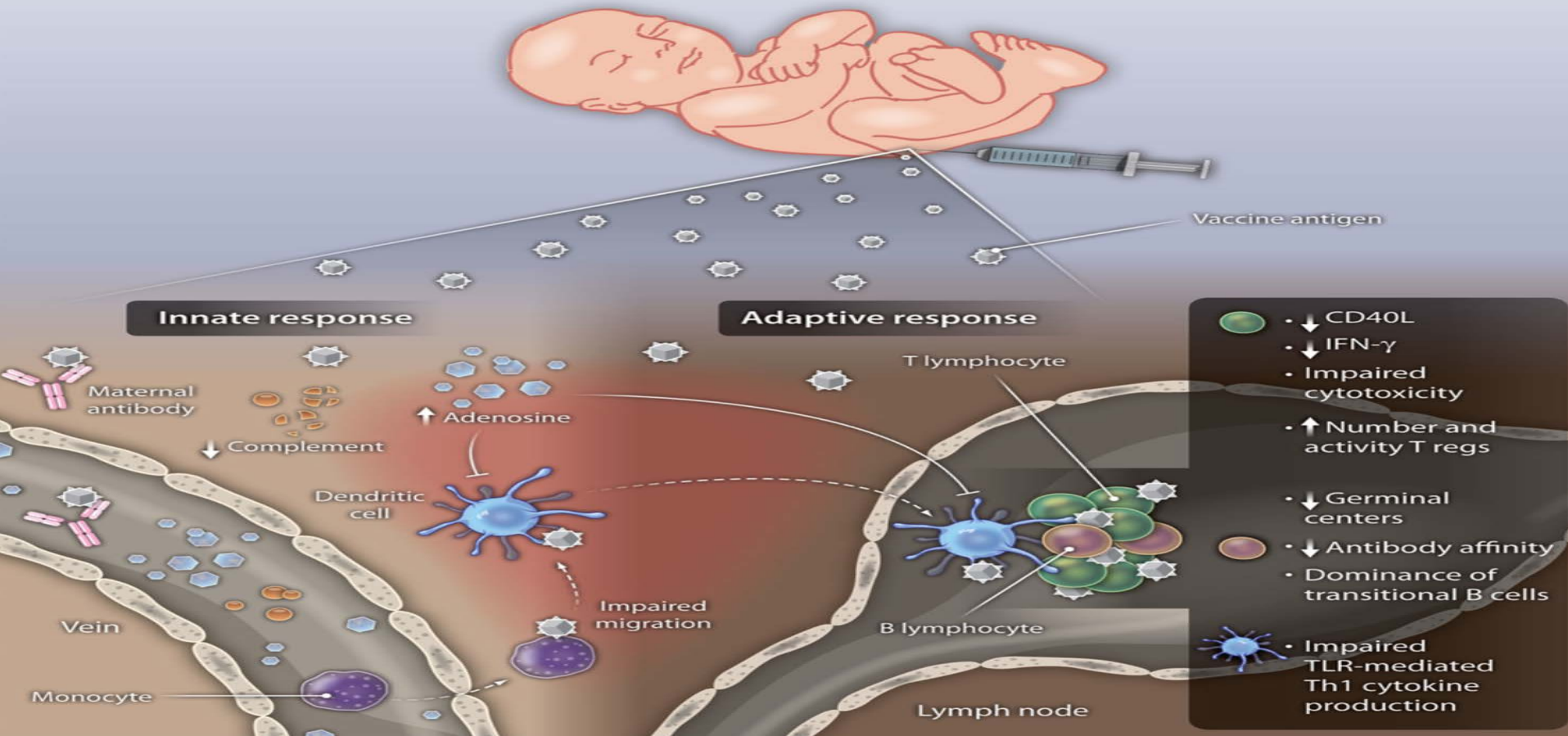
What are Precision Vaccines?

- “Precision Medicine refers to tailoring medical treatment to individual characteristics of each patient. It does not literally mean the creation of drugs ...unique to a patient, but rather the ability to classify individuals into subpopulations that differ in their ...response to a specific treatment.”
{National Research Council}
- Precision Vaccines:
- Take into account the target population
- Formulated to selectively activate the immune system by targeting anatomic sites, cells and molecular pathways that generate a protective response
- As needed, contain an **adjuvant** known to act optimally in the **target population**



- Boston Children's Hospital, Division Infectious Diseases
- Support: internal/philanthropy
- Goal: Develop vaccines for vulnerable populations
- N >160: academia, government, consultants & industry
- Resources: admin, technical, bioinform, organizational, legal, & graphic
- Website: www.childrenshospital.org
- **Program Coordinator Diana Vo**
- **diana.vo@childrens.harvard.edu**
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Modeling neonatal immune responses must take into account humoral & cellular differences

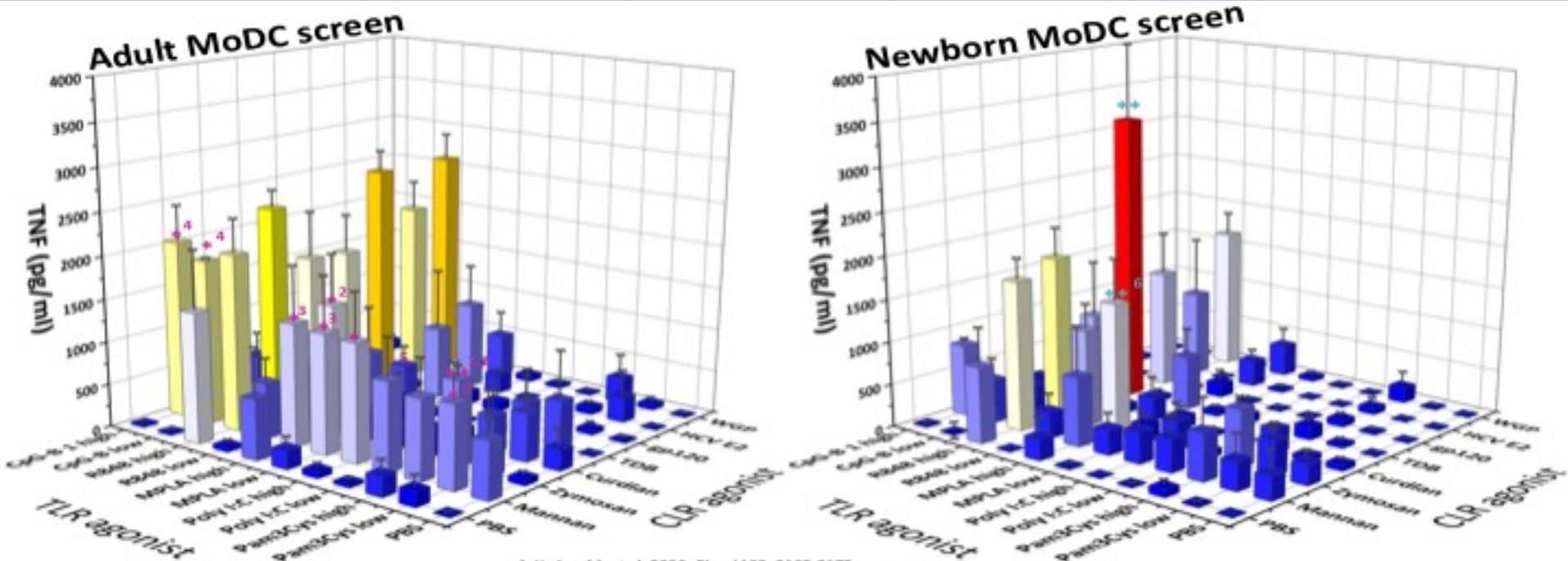


BCG: proof of concept for neonatal immunization & heterologous immunity

- Live attenuated *Mycobacterium bovis*
- Activates multiple PRRs
- Most commonly administered vaccine
- >3 billion doses given (!)
- Efficacy vs disseminated dz/meningitis.
- Potential beneficial heterologous (“non-specific”) effects
- Reduces all cause mortality in 1st month of life (Aaby, *J Infect Dis* 204:245)
- Innate training: NOD2-dependent epigenetic re-programming of monocytes (Kleinnijenhuis, *PNAS* 2012)

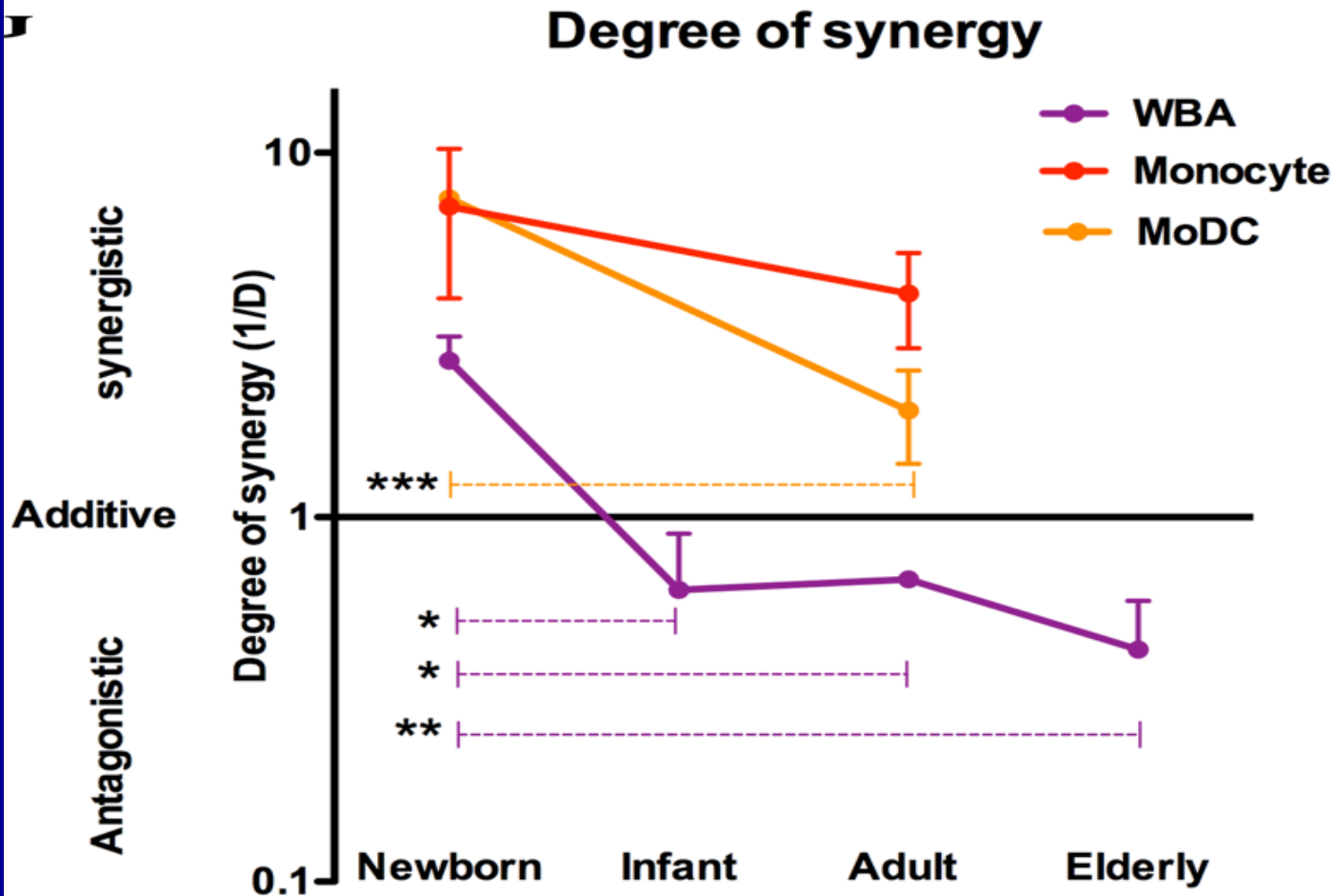


Age-specific adjuvant synergy for Human MoDC Activation: R848 (TLR7/8 agonist) & TDB (Mincle Agonist)

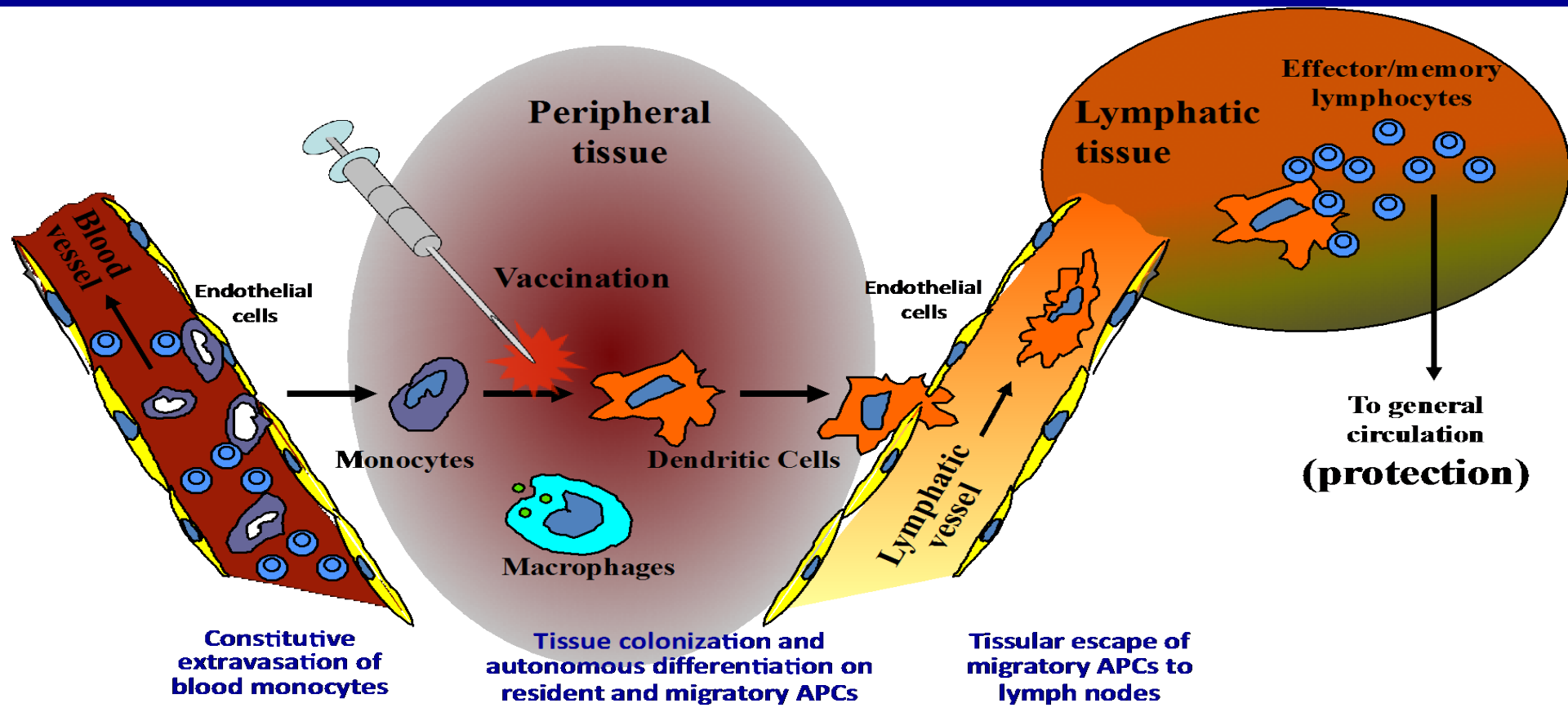


- 1 Yadav, M. et al. 2006. *Blood* 108: 3168-3175
- 2 Ferwerda, G. et al. 2008. *CeW. Microbiol.* 10: 2058-20663 Nakaira
- 4 Moseman, A. P. et al. 2013. *J. Immunol.* 191: 5615-5624
- 5 Dragicevic, A. et al. 2012. *Cytotherapy.*
- 6 Lemoine, S. et al. 2015. *J. Allergy Clin. Immunol.* 136: 1355-1368 e1351-1315

Age-
dependent
adjuvant
action across
in vitro
platforms

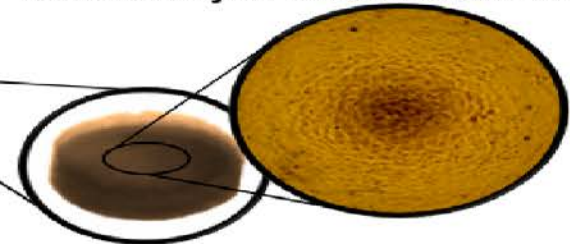
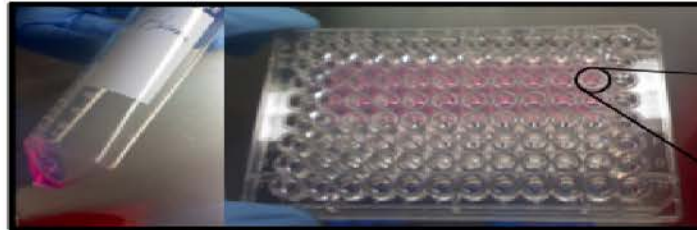
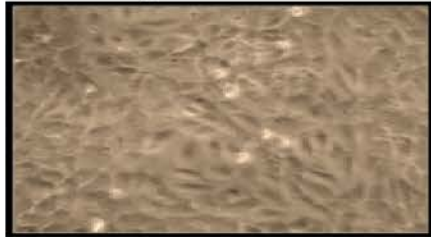


Development of microphysiologic systems to model human vaccine responses

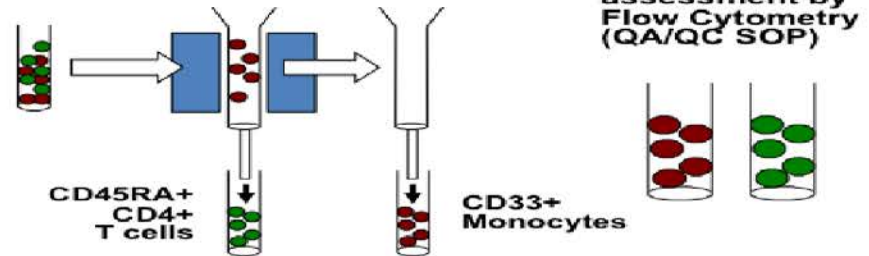


Creation of 3-dimensional microphysiologic tissue constructs

1. A. Primary human endothelium B. Casting of human extracellular matrix C. Assembly of Tissue Construct

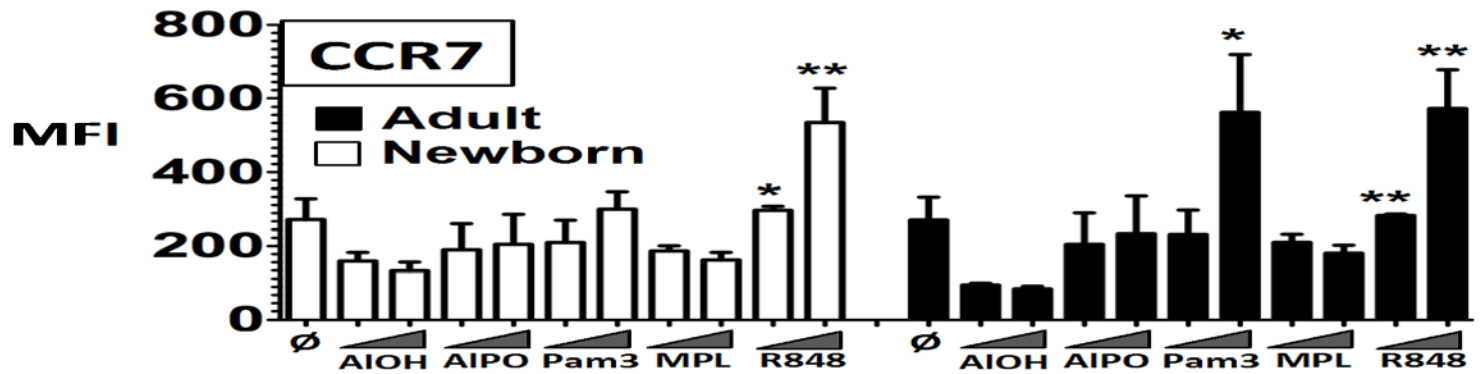
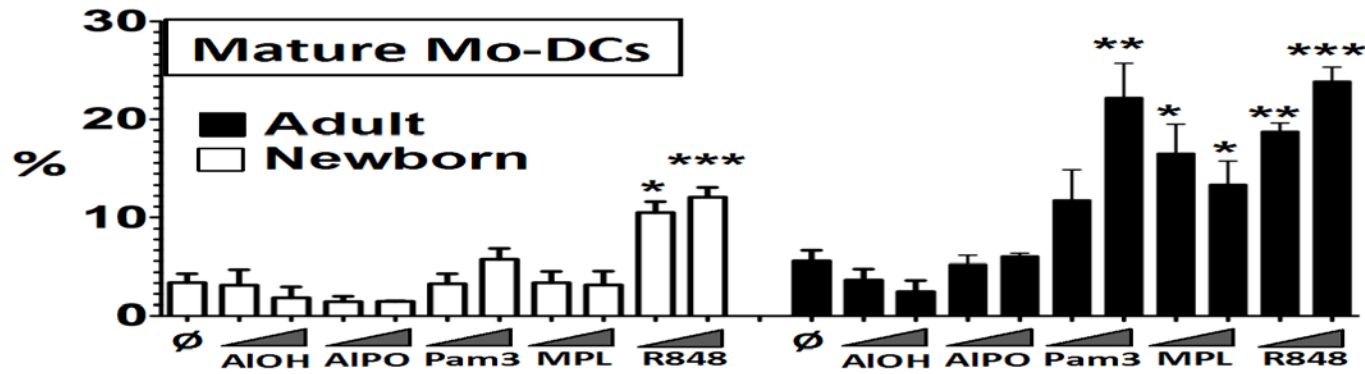
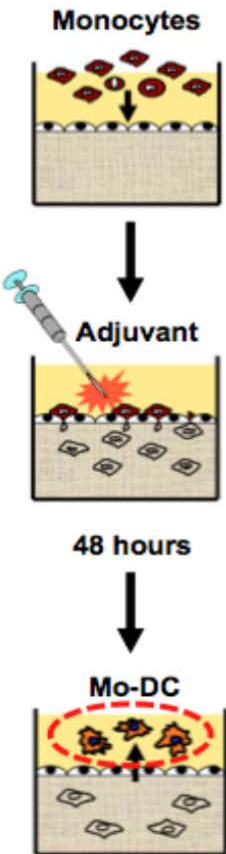


2. A. Human mononuclear cells and intact plasma B. Cell banking/cryopreservation C. Magnetic cell sorting D. Purity assessment by Flow Cytometry (QA/QC SOP)

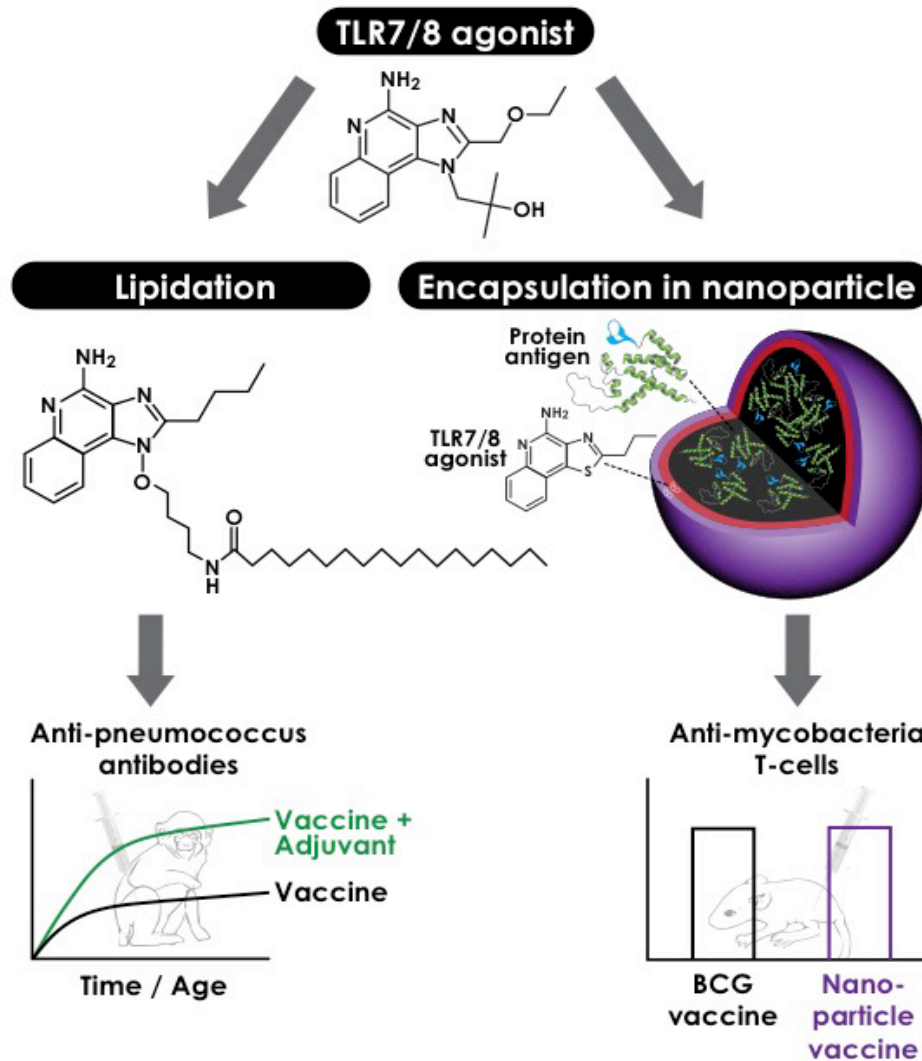


3. Diapedesis of monocytes Vaccine in 100% autologous plasma Reverse transmigration of APCs HLA-DR high CD86 high CD14neg/low CCR7+ CD83+ Lymphocytes
- 1 2 3 4
- 48h
37°C
5% CO₂
-

Tissue constructs demonstrate age-specific differences in responses to Adjuvants



Dowling, DJ et al
J Clin Invest 2017

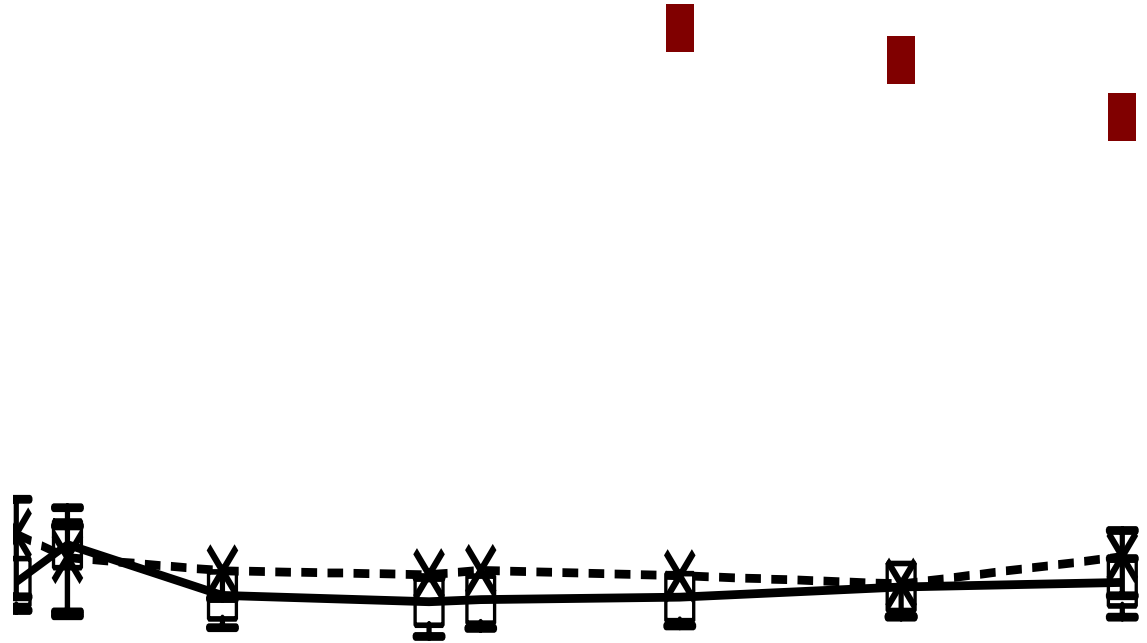


Dowling, DJ et al
J Allerg Clin Immunol 2017



Serotype 9V

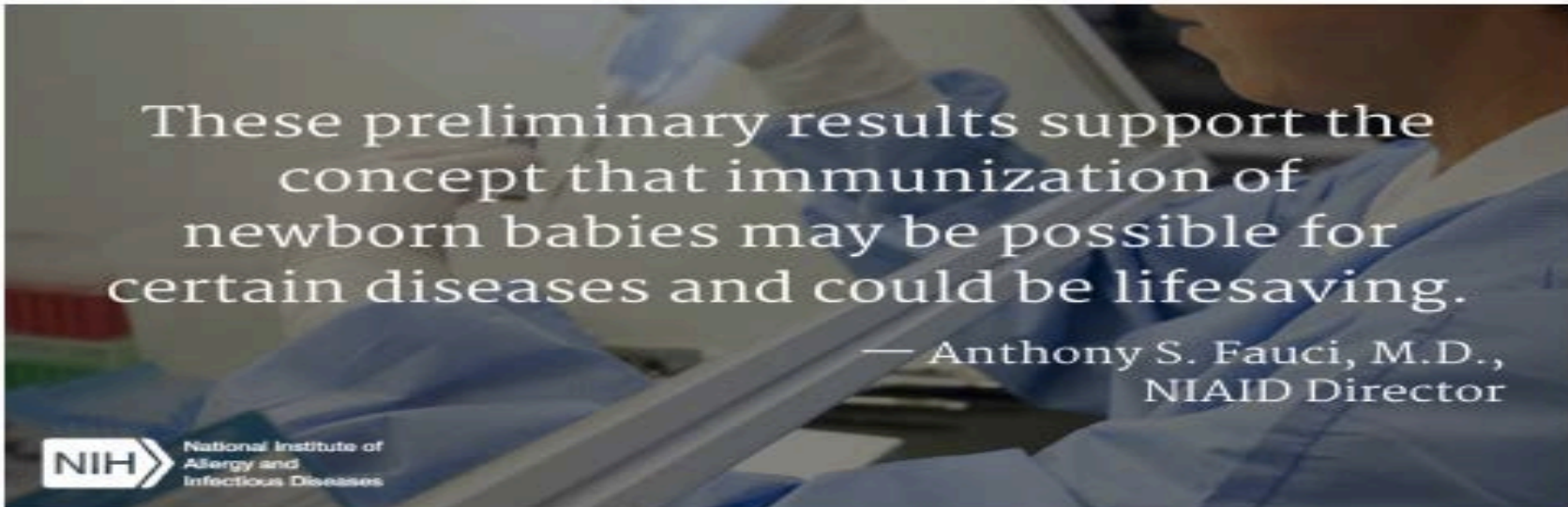
**TLR7/8
adjuvantation
dramatically
accelerates &
enhances neonatal
immune responses
to Pneumococcal
Conjugate Vaccine**



New Adjuvant Permits Early Pneumococcal Immunization in Newborn Monkeys

Compound May Help Protect Human Infants Earlier with Fewer Doses

March 23, 2017



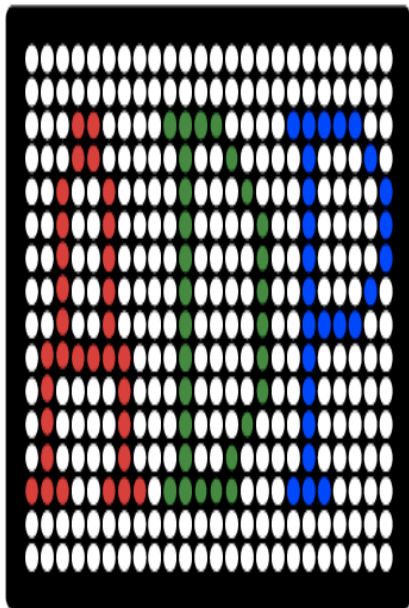
These preliminary results support the concept that immunization of newborn babies may be possible for certain diseases and could be lifesaving.

— Anthony S. Fauci, M.D.,
NIAID Director

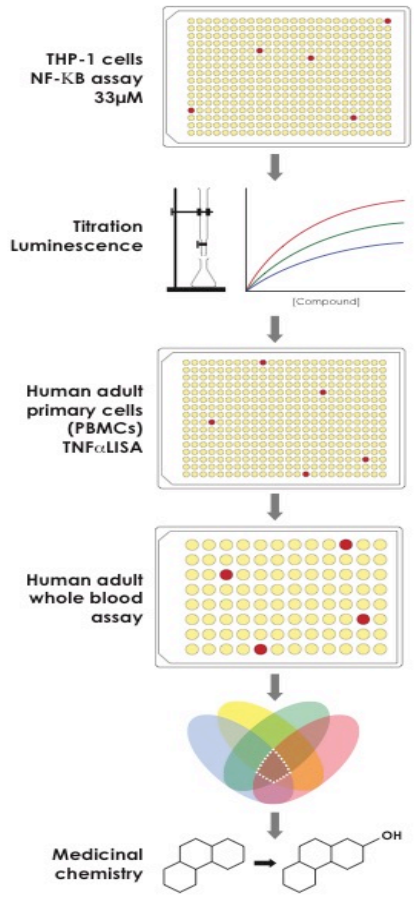


National Institute of Allergy and Infectious Diseases

Leading research to understand, treat, and prevent infectious, immunologic, and allergic diseases.



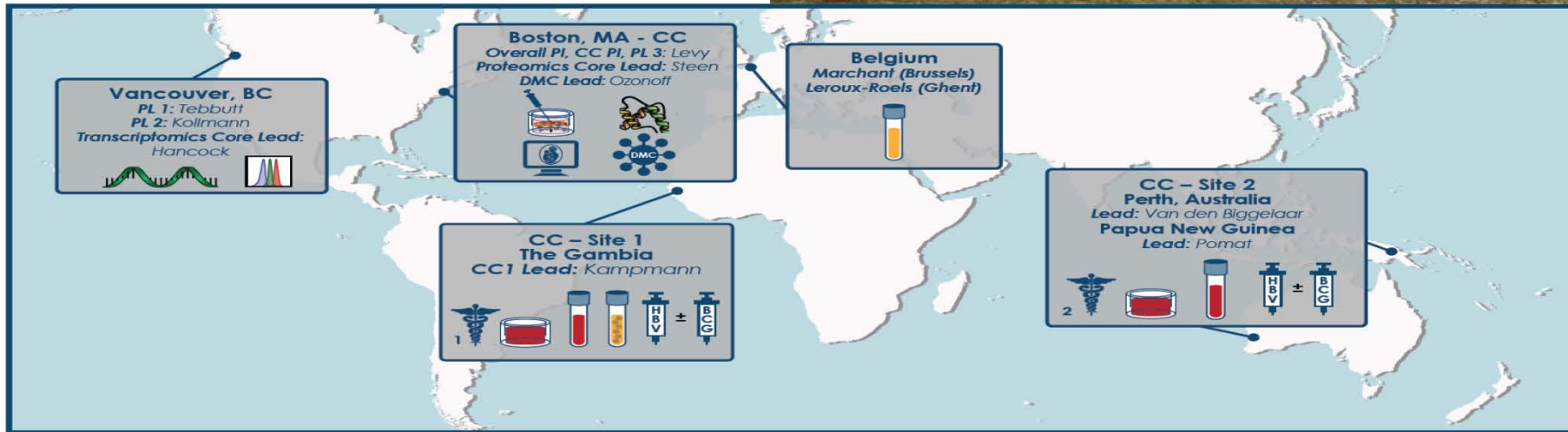
Adjuvant Discovery Program





epic

Twitter: @VaccinesEPIC



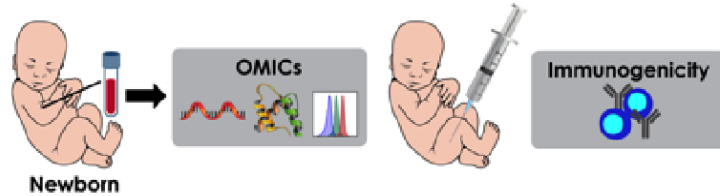
Systems Biology to Define Biomarkers of Newborn Vaccine Immunogenicity



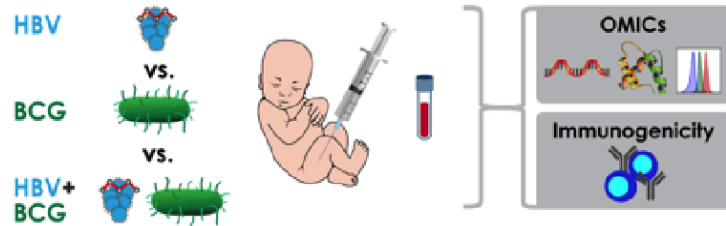
Twitter:
[@hipcProject](https://twitter.com/hipcProject)

Human Immunology
Project Consortium

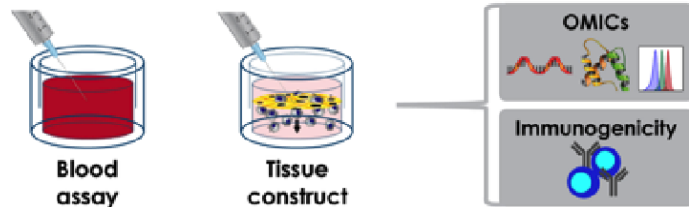
SPECIFIC AIM 1: Characterize the impact of pre-vaccine OMIC and immune *in vivo* signatures that predict immunogenicity of HBV in human newborns



SPECIFIC AIM 2: Characterize the impact of HBV \pm BCG on neonatal OMIC & immune *in vivo* signatures that predict immunogenicity

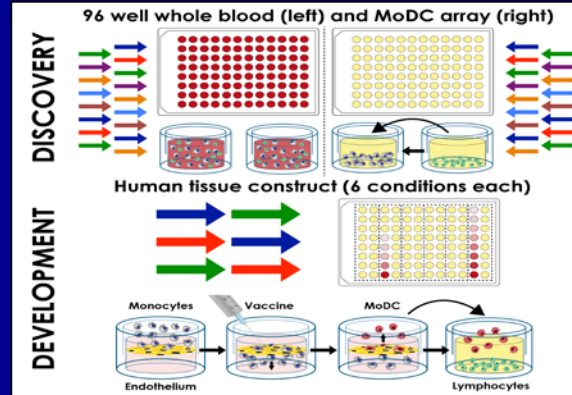
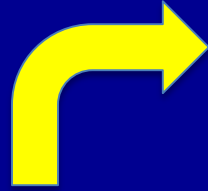


SPECIFIC AIM 3: Interrogate functional correlations identified *in silico* via novel human *in vitro* platforms



Developing Precision Vaccines

Hypothesis
generating



Licensed
or novel
vaccines



 Transcriptomics

 Proteomics

 Metabolomics

Systems Biology
(OMICs)

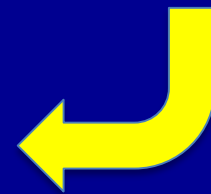


Pre-clinical Targeted Human *In vitro*
Models (newborn, elderly etc)



Appropriate
animal
models

Targeted
Clinical Trial



Conclusions

- Need for vaccines to protect those with distinct immunity: newborns/infants, elderly, & immunocompromised.
- Current vaccine development does not fully account for age- and species-specificity.
- Novel approaches can accelerate, enhance, and de-risk vaccine development:
 - **Age-specific *in vitro* systems** employing primary human leukocytes and autologous plasma to model immune responses
 - **Benchmarking** new vs. licensed adjuvanted vaccines to accelerate translational development
 - **Systems vaccinology**- use of OMIC technologies to gain insight into adjuvant effects that correlate with protection
 - **Age-specific adjuvants and adjuvantation systems** to optimize immunogenicity and potentially to induce heterologous immunity/broad protection
- **Precision Vaccines Program (PVP) at Boston Children's Hospital** provides administrative, intellectual, technical, biostatistical and graphic support to foster collaborative development of vaccines targeted towards vulnerable populations.
- Multi-disciplinary, collaborative efforts will inform a new generation of safe & effective targeted vaccines that protect the most vulnerable

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- Crucell (Johnson & Johnson)

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