



# KCRS22 Kidney Cancer Research Summit

Circulating biomarkers associated with resistance to nivolumab and ipilimumab based regimens indicate persistent immunosuppression and activation of STAT3 signaling

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# Introduction

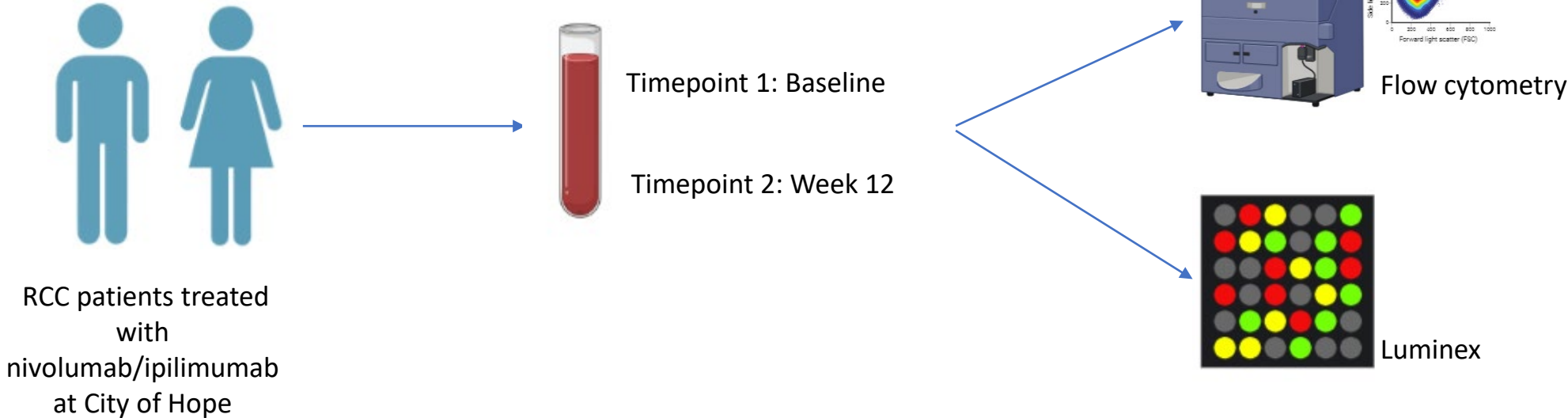
- Nivolumab (PD-1 blockade) and ipilimumab (CTLA-4 blockade) are front line therapy for metastatic RCC (1)
- Resistance involves many factors including the innate and adaptive immunity, the activation of oncogenic pathways and the tumor microenvironment (TME) including: exhausted T cells, T regulatory cells, myeloid-derived suppressor cells and tumor associated macrophages (TAMs)
- There are currently no established predictive biomarkers to anticipate lack of response to immune checkpoint inhibitors (ICIs) in RCC

In this study we aimed to:

- (1) Humans:** Investigate associations in immune alterations in lack of response to nivolumab/ipilimumab
- (2) Mice:** Assess a novel drug combination to target innate and adaptive immune alterations

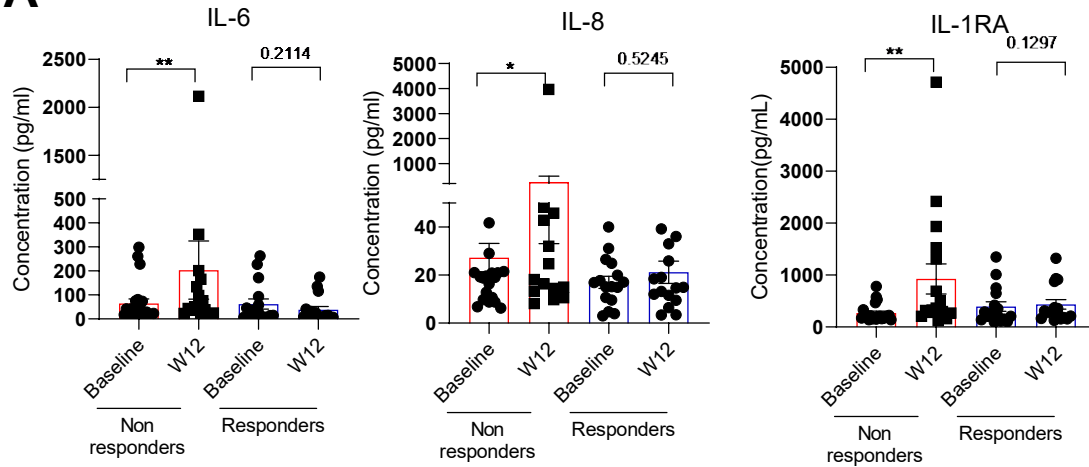
(1) Motzer RJ et al. N Engl J Med (2018)

# Methods: Part 1

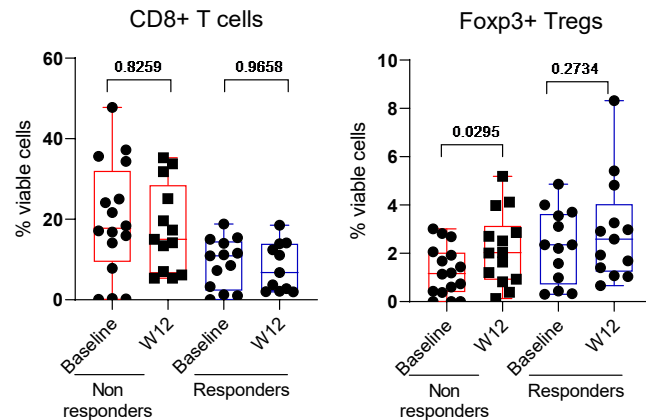


# Results: Part 1

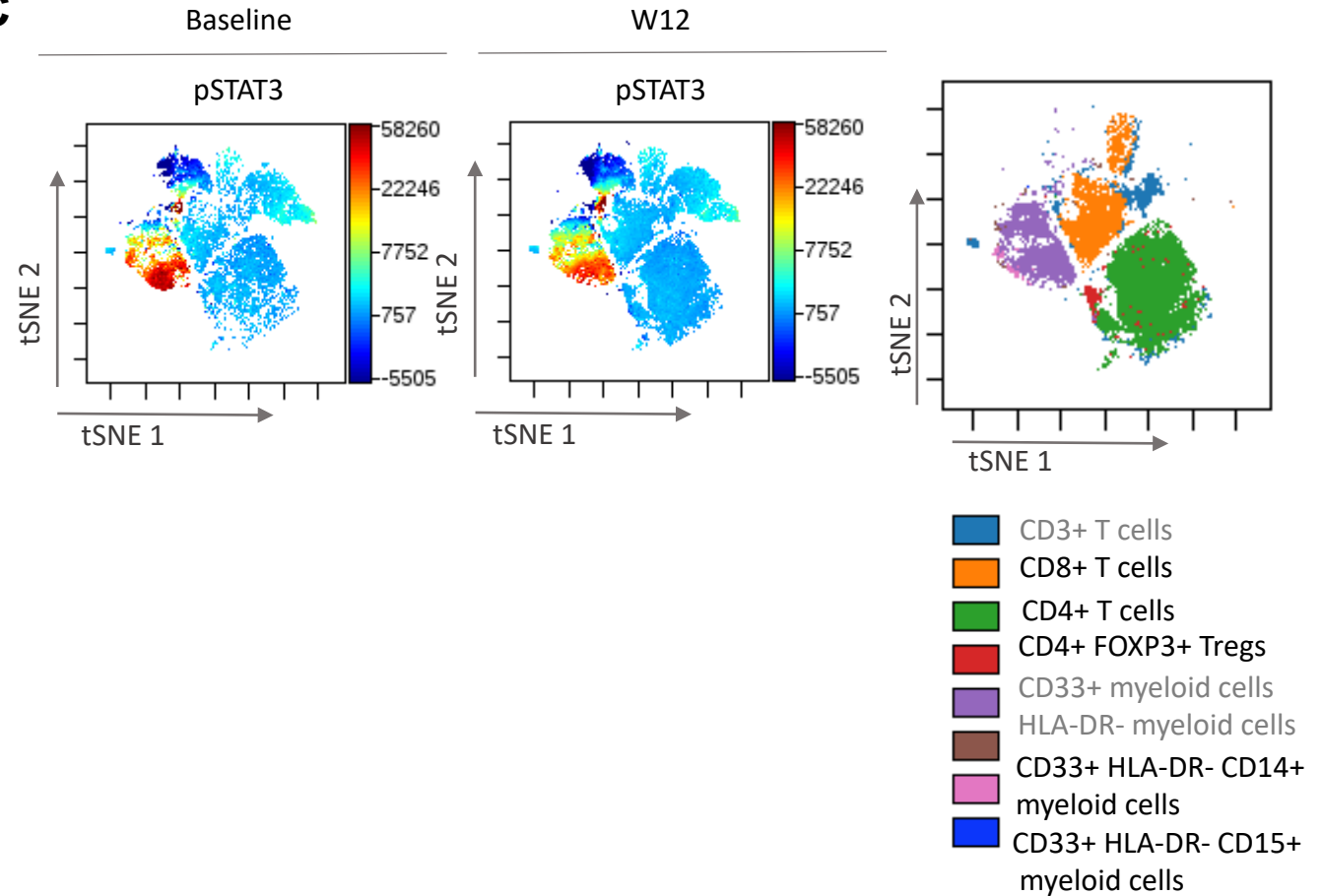
**A**



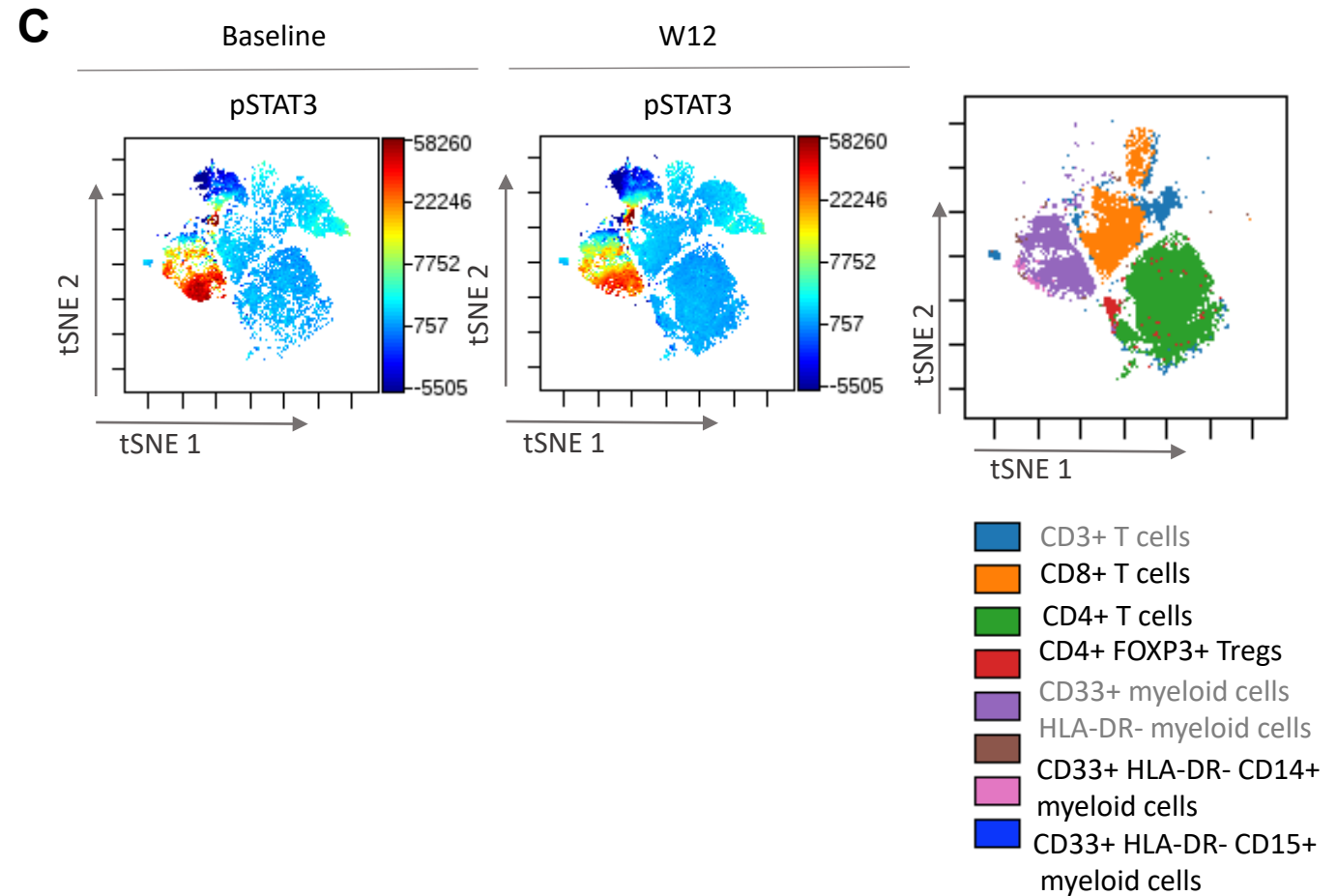
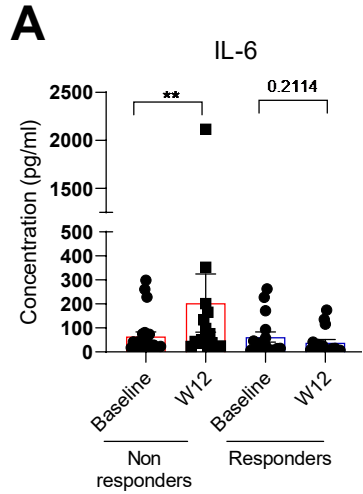
**B**



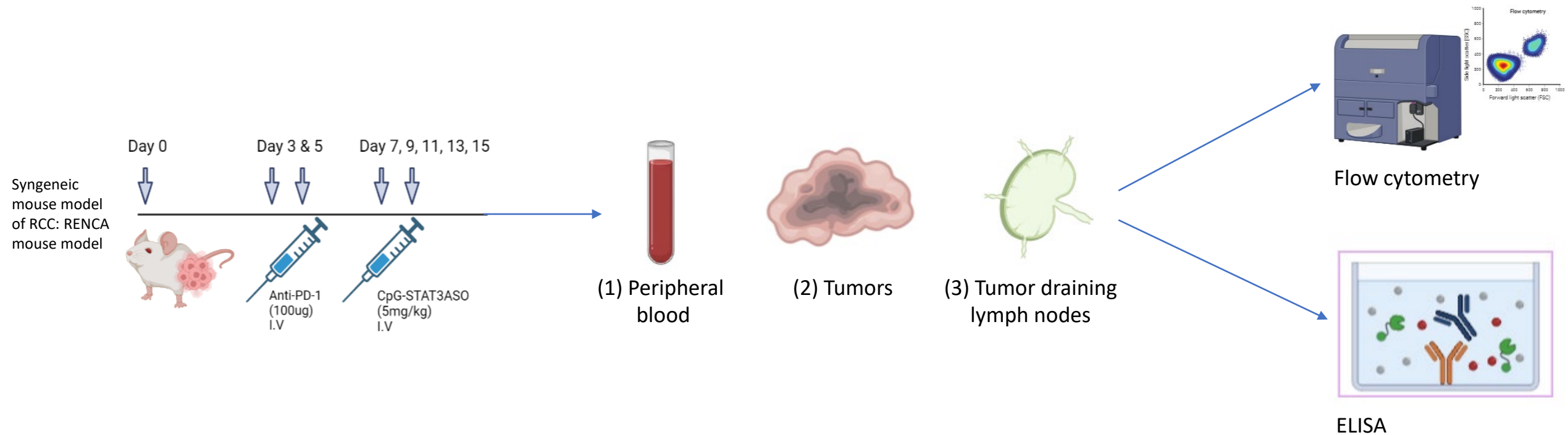
**C**



# Results: Part 1

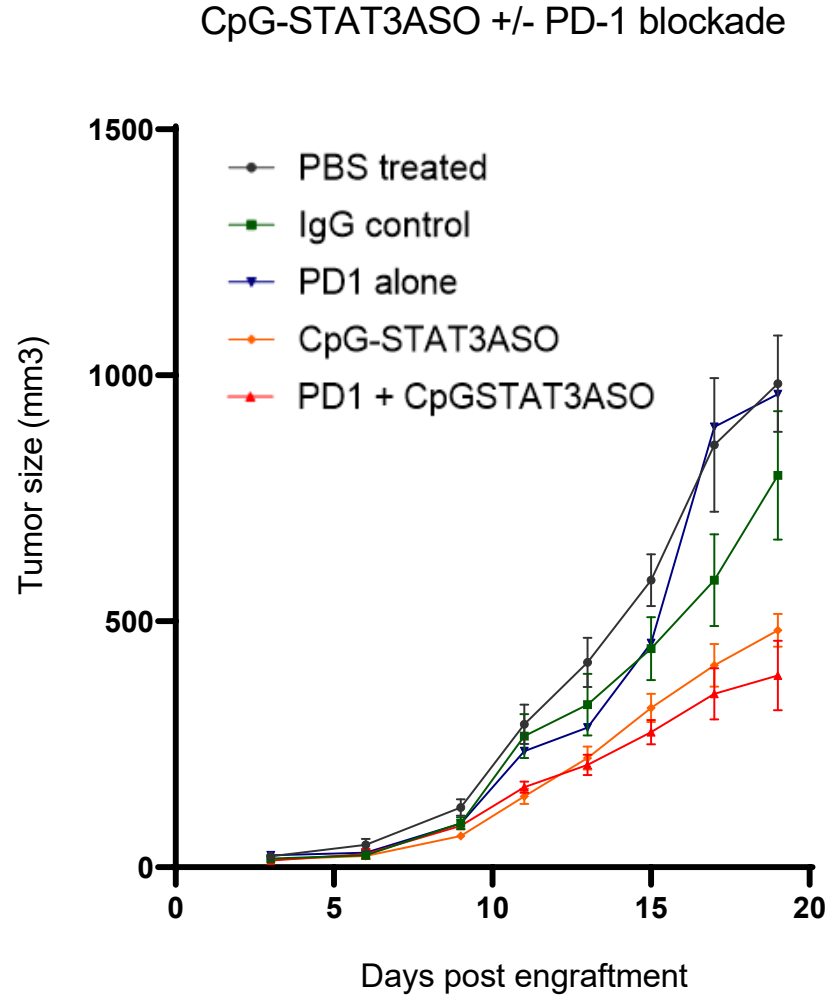


# Methods: Part 2

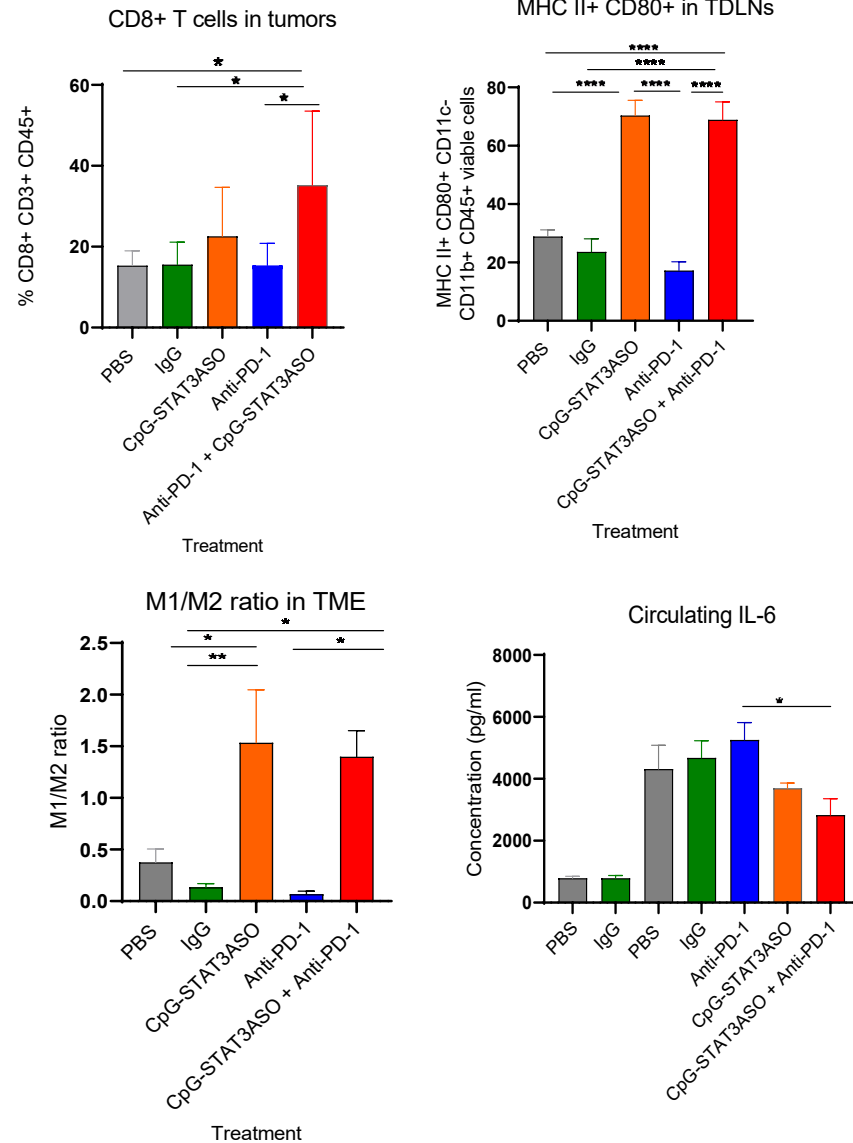


# Results

**A**



**B**



# Summary

- Non-responders to Nivo/Ipi have increased immunosuppressive Tregs, circulating cytokines IL-6, IL-8, IL-1RA and high levels of phosphorylated STAT3 suggesting immune suppression particularly within innate immune system
- IL-6, IL-8 and IL-1RA should be investigated further as potential biomarkers for resistance to nivolumab and ipilimumab
- Finally, our animal studies suggest, combining STAT3 inhibitor with PD-1 blockade could be a way to overcome immune suppression in RCC



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