RESULTS

Figure 7: Positive TISvopra Score and ICOS hi CD4 T Cell Emergence Associated With Longer Duration on Study

Table 1: TISvopra Positively and Not PD-L1 1% Is Associated With ICOS hi CD4 T Cell Emergence and Improved Clinical Benefit in Heavily Pre-Treated PD-I/1-Naive Subjects

<table>
<thead>
<tr>
<th>TISvopra</th>
<th>PD-L1 1%</th>
<th>PFS (%)</th>
<th>OS (mo)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive</td>
<td>4 (20)</td>
<td>3.1 (4)</td>
<td>1.9 (4)</td>
</tr>
<tr>
<td>Negative</td>
<td>52 (25)</td>
<td>10 (5)</td>
<td>16 (9)</td>
</tr>
</tbody>
</table>

Table 2 shows the TISvopra positivity and not PD-L1 1% is associated with ICOS hi CD4 T cell emergence and improved clinical benefit in heavily pre-treated PD-I/1-naive subjects. The optimal TISvopra threshold at the Youden index is what is used as the threshold in TISvopra.

SUMMARY

- TISvopra is the gene signature TIS with a specific threshold that was identified by Jounce as a biomarker predictive of ICOS hi CD4 T cell emergence and was more predictive of clinical benefit than PD-L1 (1% in ICINIC study).
- The emergence of ICOS hi CD4 T cells is a biomarker, but not a PD-I/1 inhibitor pharmacodynamic biomarker linked to clinical benefit in the ICONIC study.
- ICOS hi CD4 T cells display central memory characteristics, expansion of cytolytic mediators, and demonstrate activation of CD4 T cells, priming them for co-stimulation of ICOS hi CD4 T cells.

REFERENCES


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