

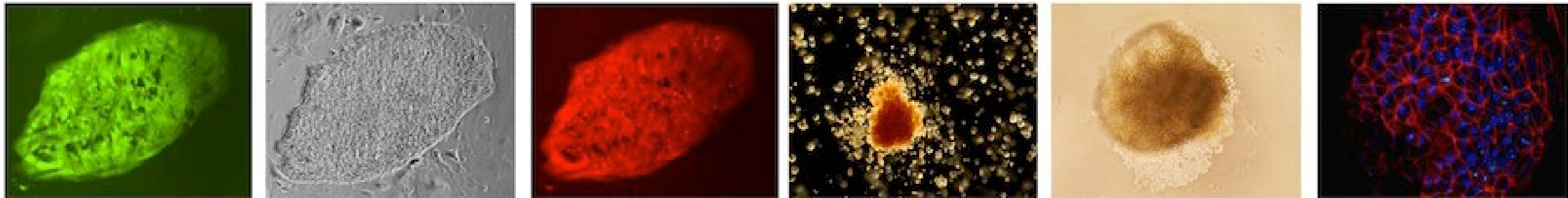
Modelling secondary AML using human induced pluripotent stem cells



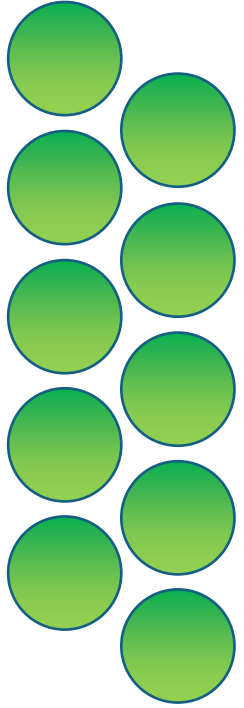
Eirini Papapetrou, MD, PhD
Icahn School of Medicine at Mount Sinai



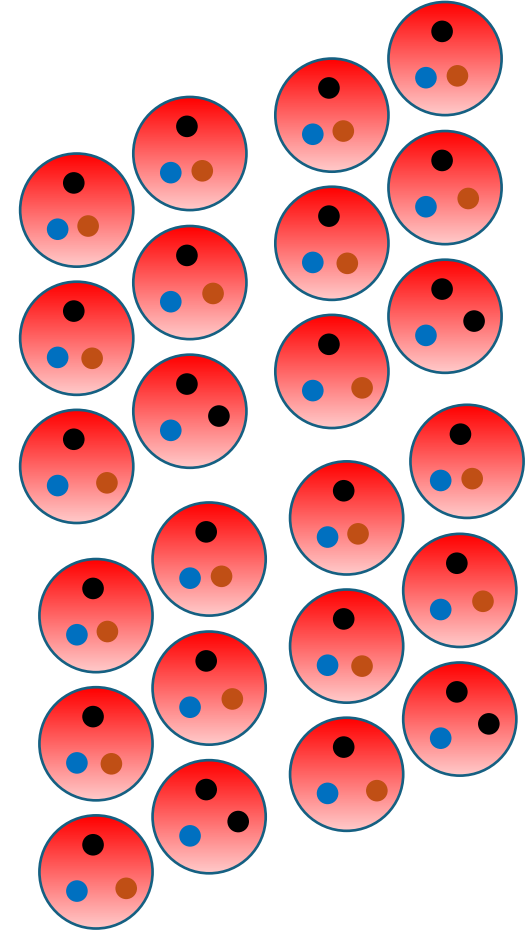
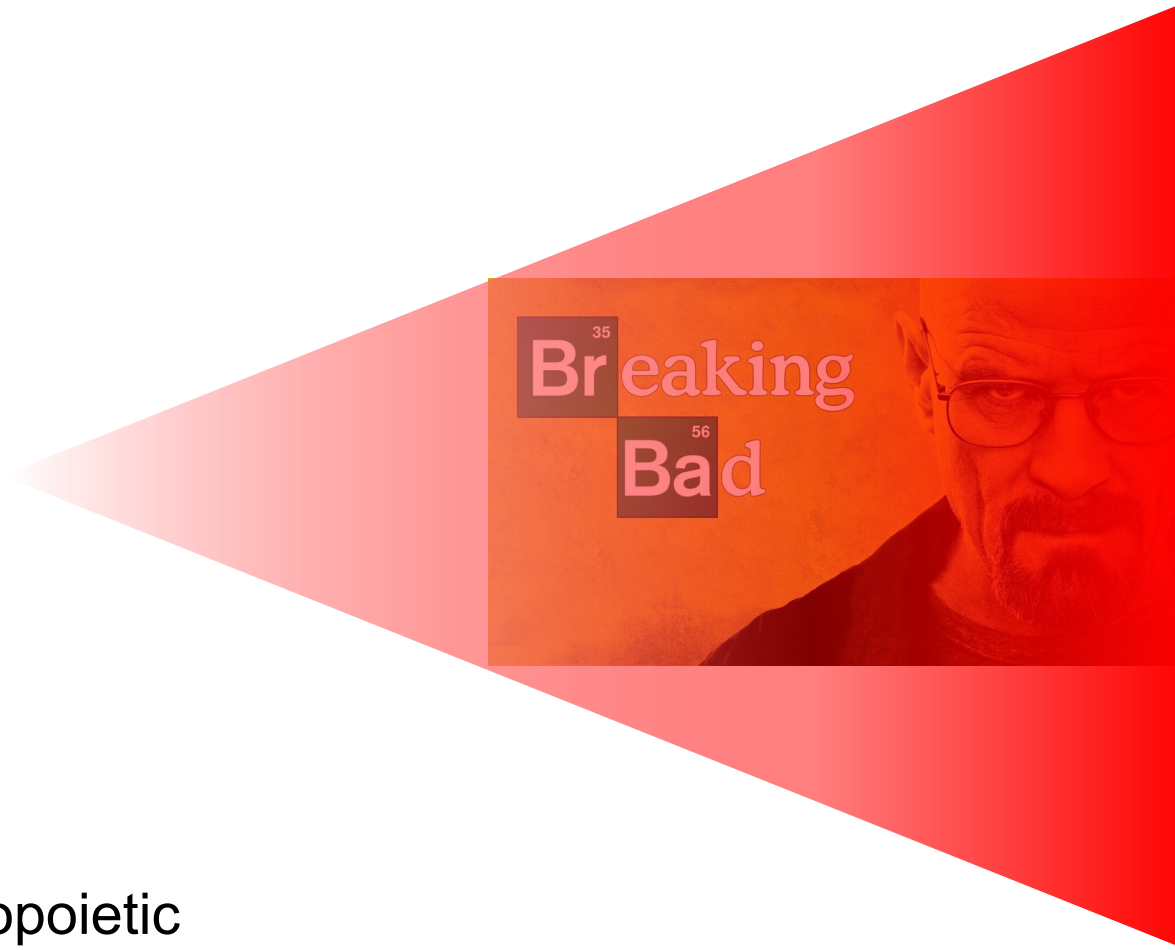
Center for Advancement
of **Blood Cancer Therapies**



How does a normal HSPC turn bad?

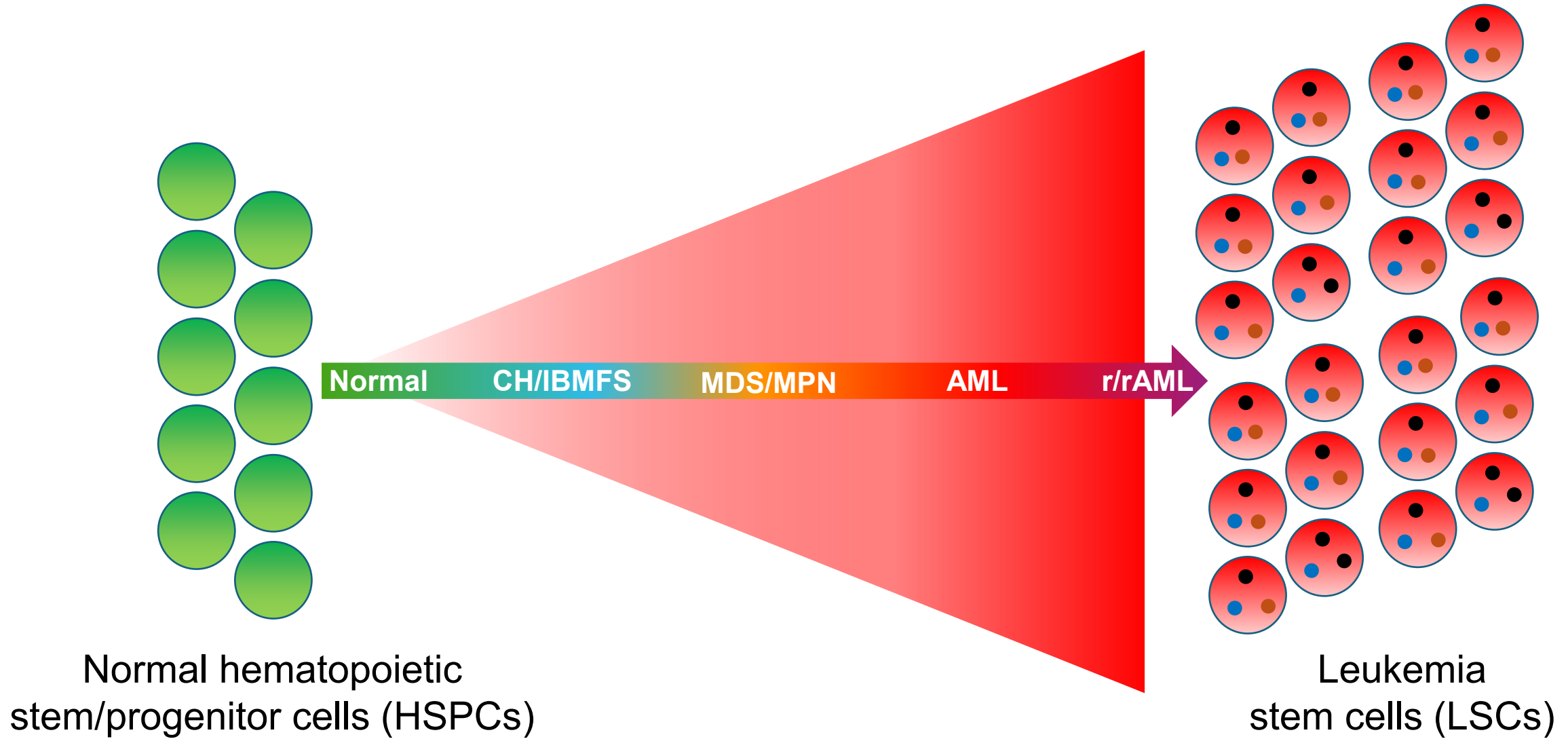


Normal hematopoietic
stem/progenitor cells (HSPCs)



Leukemia
stem cells (LSCs)

How does a normal HSPC turn bad?

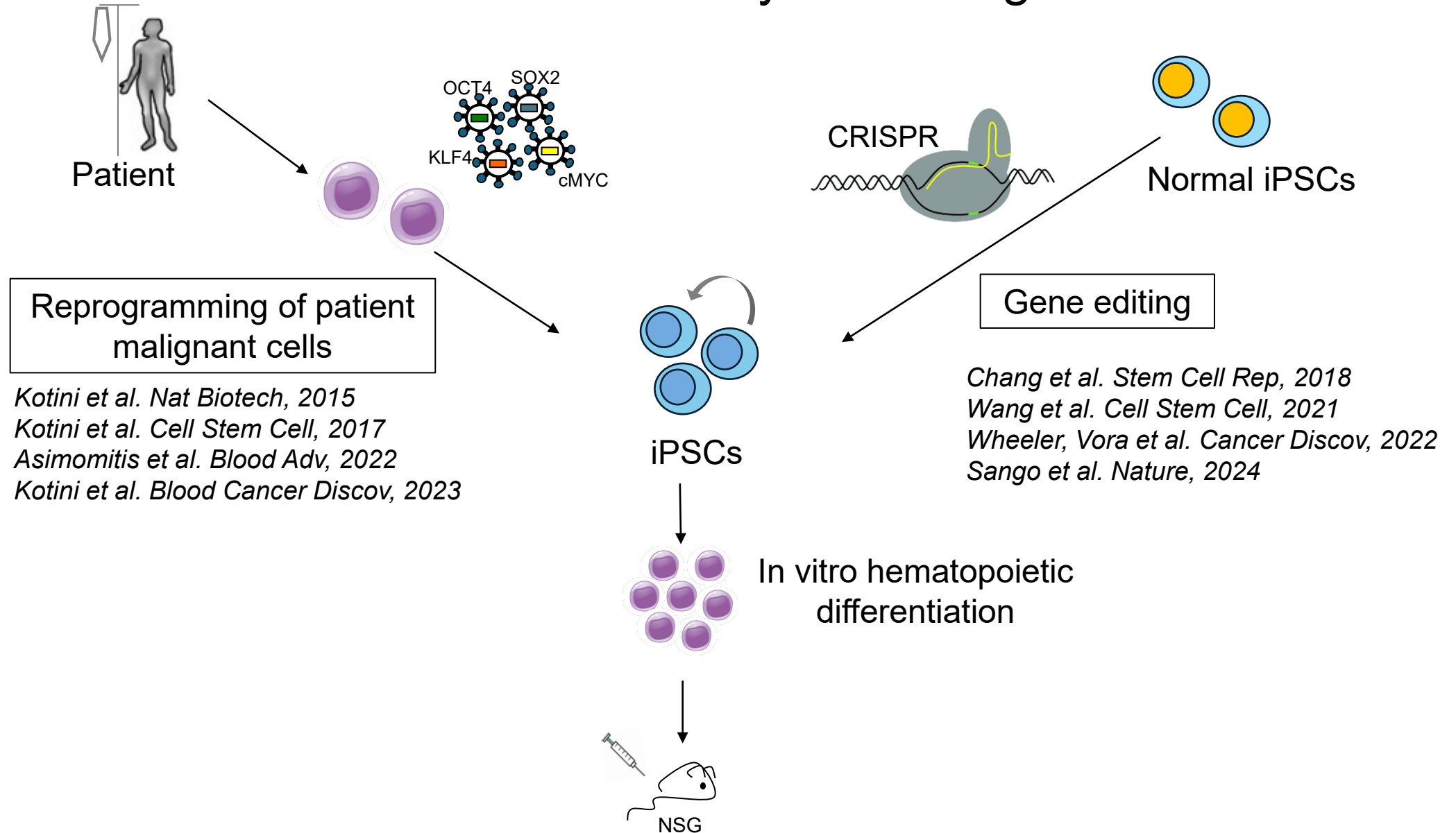




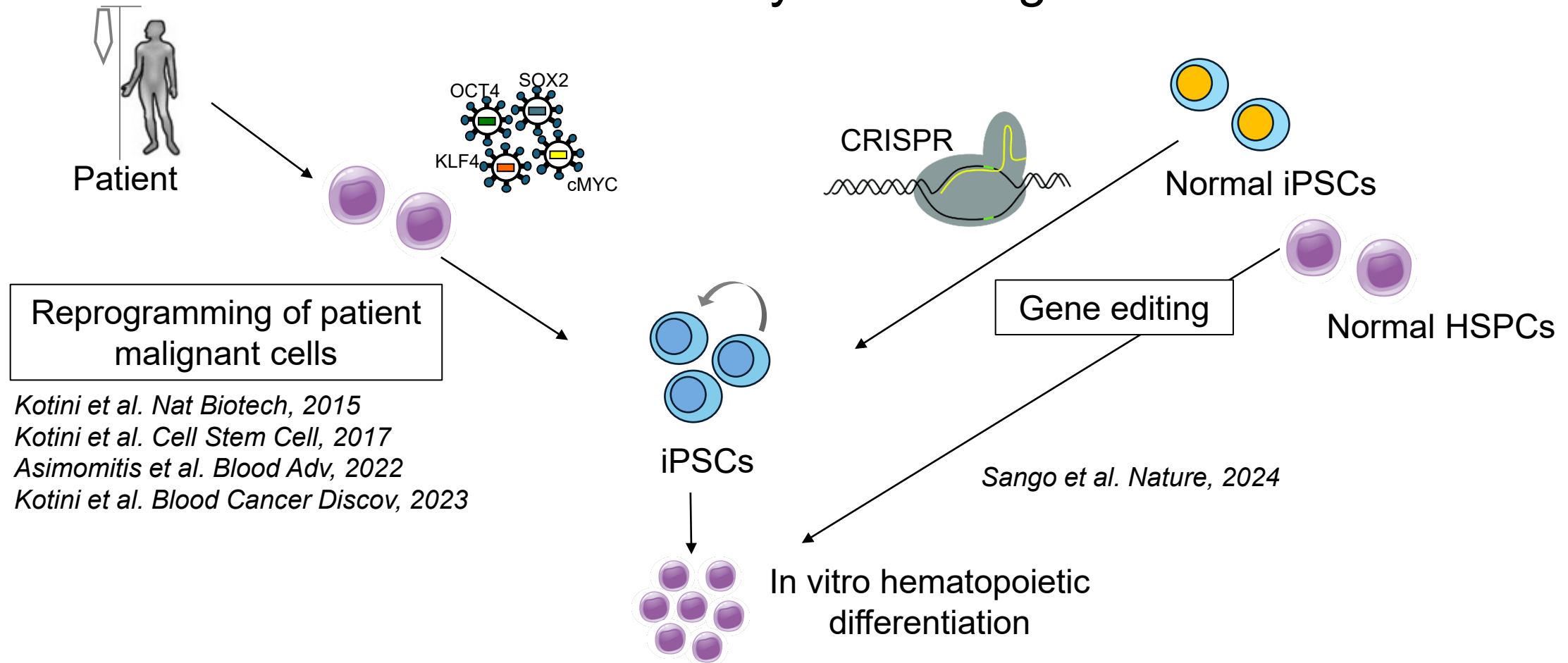
Richard Feynman
1918-1988

“What I cannot create I do not understand”

Human iPSC models of myeloid malignancies



Human iPSC models of myeloid malignancies



Key advantages:

- Human
- Genetically faithful models
- Isogenic
- Unlimited cell numbers, high throughput
- Functional studies

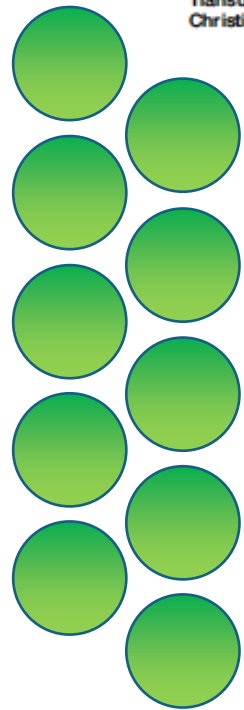
A synthetic model of CH-MDS-sAML progression

Cell Stem Cell

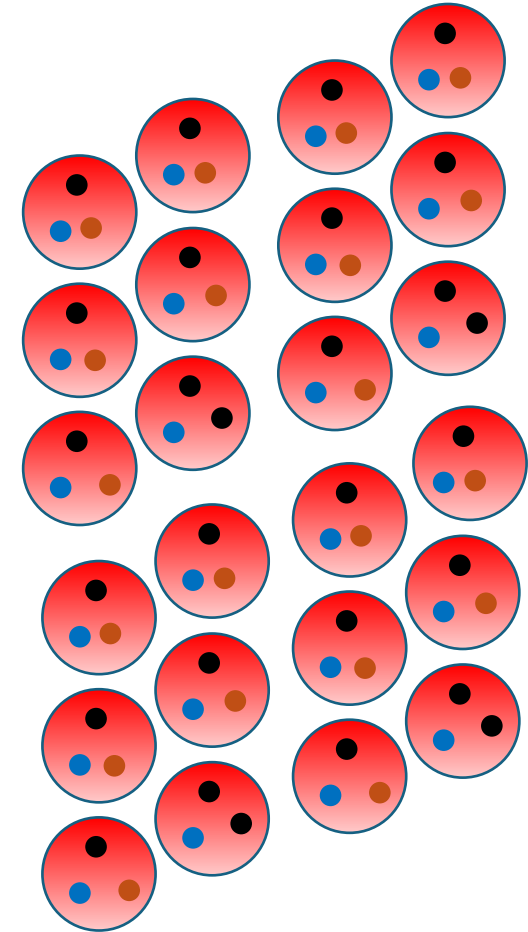
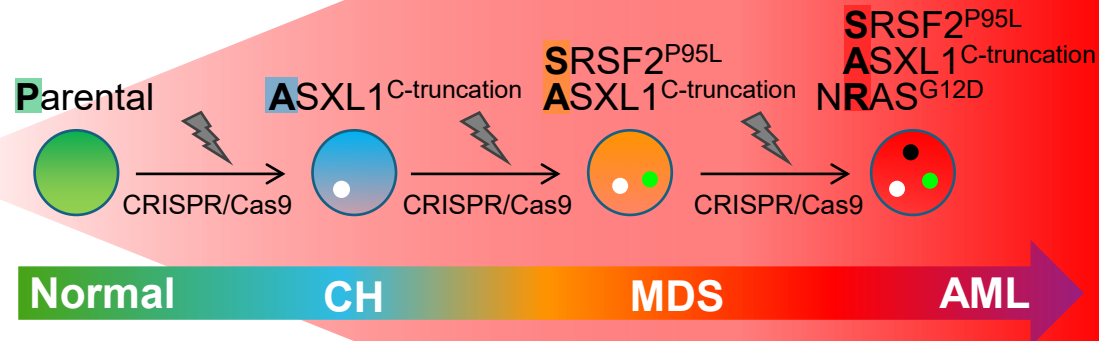
Article

Sequential CRISPR gene editing in human iPSCs charts the clonal evolution of myeloid leukemia and identifies early disease targets

Tiansu Wang,^{1,2,3,4,9} Allison R. Pine,^{5,9} Andriana G. Kotini,^{1,2,3,4} Han Yuan,⁵ Lee Zamparo,⁵ Daniel T. Starczynowski,^{6,7,8} Christina Leslie,^{5,*} and Eirini P. Papapetrou^{1,2,3,4,10,*}



Normal hematopoietic stem/progenitor cells (HSPCs)



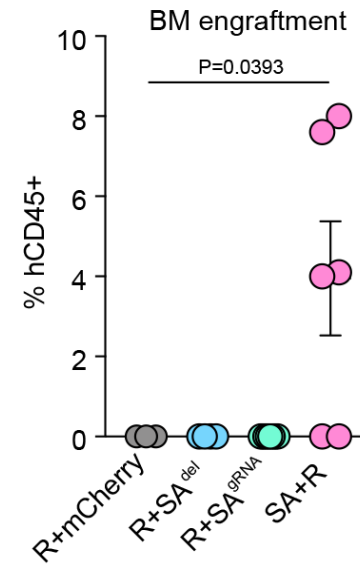
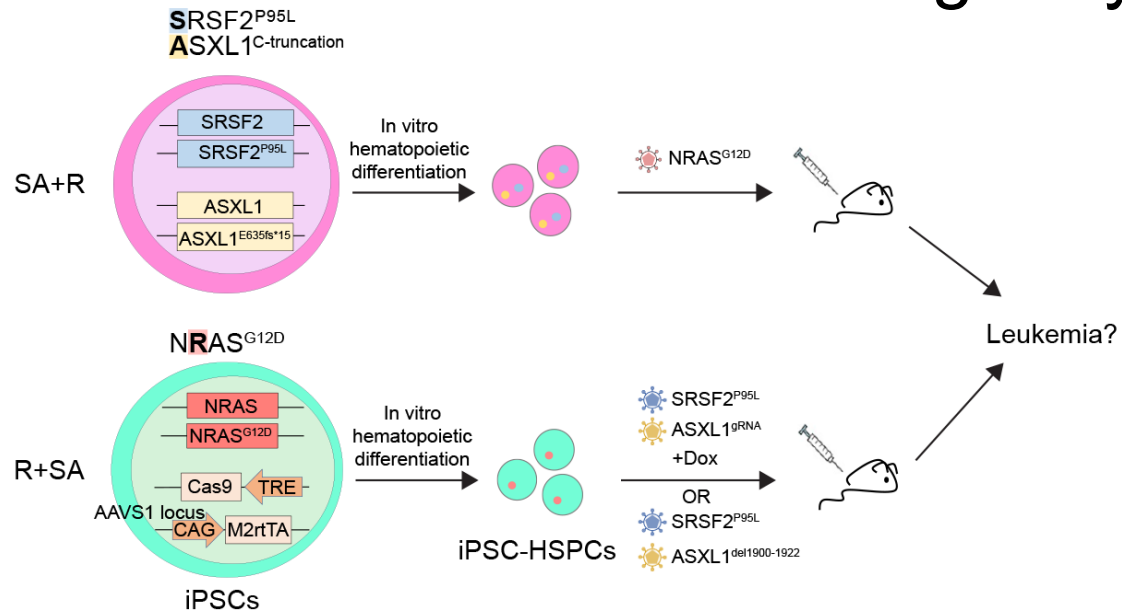
Leukemia stem cells (LSCs)

Why are RAS mutations always late in AML?

N/KRAS mutations:

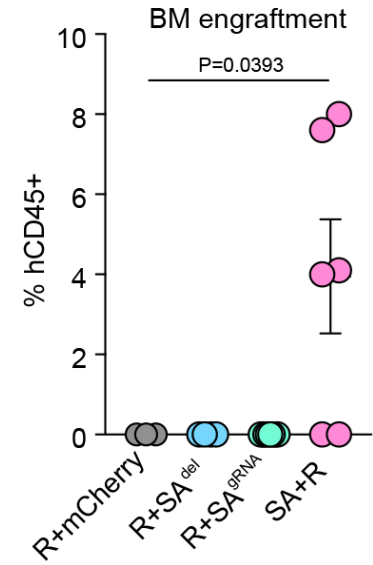
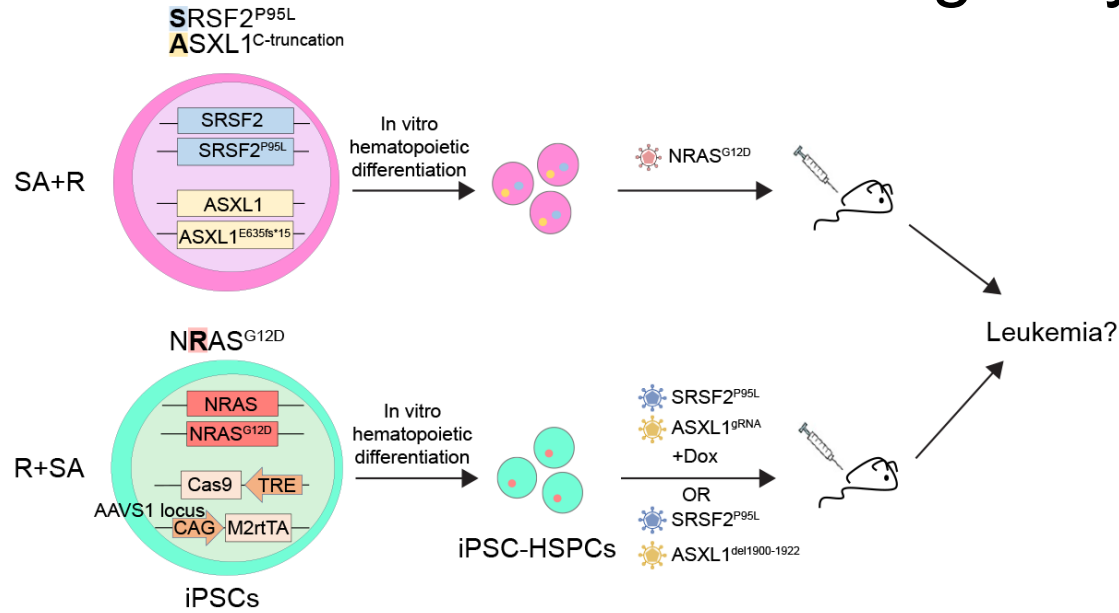
- are present in up to 30% of AML patients
- are almost always subclonal
- are often acquired upon relapse
- are often acquired during progression from MDS to sAML
- are, in contrast, early truncal events in epithelial cancers

NRAS^{G12D} is an obligatory late mutation

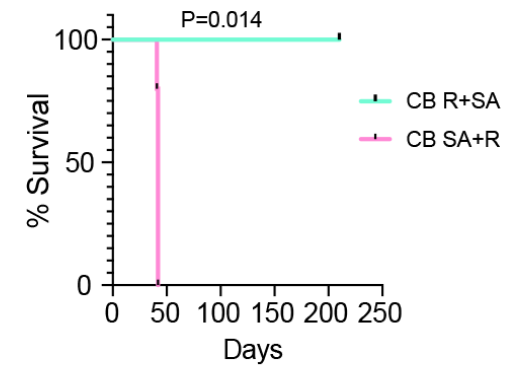
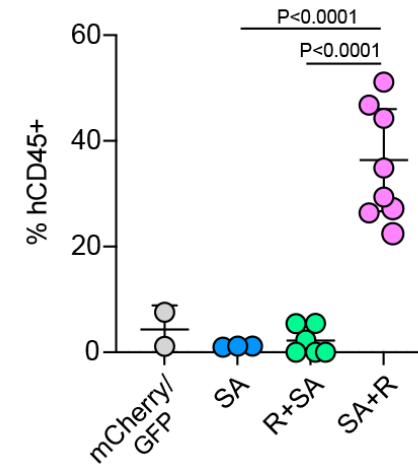
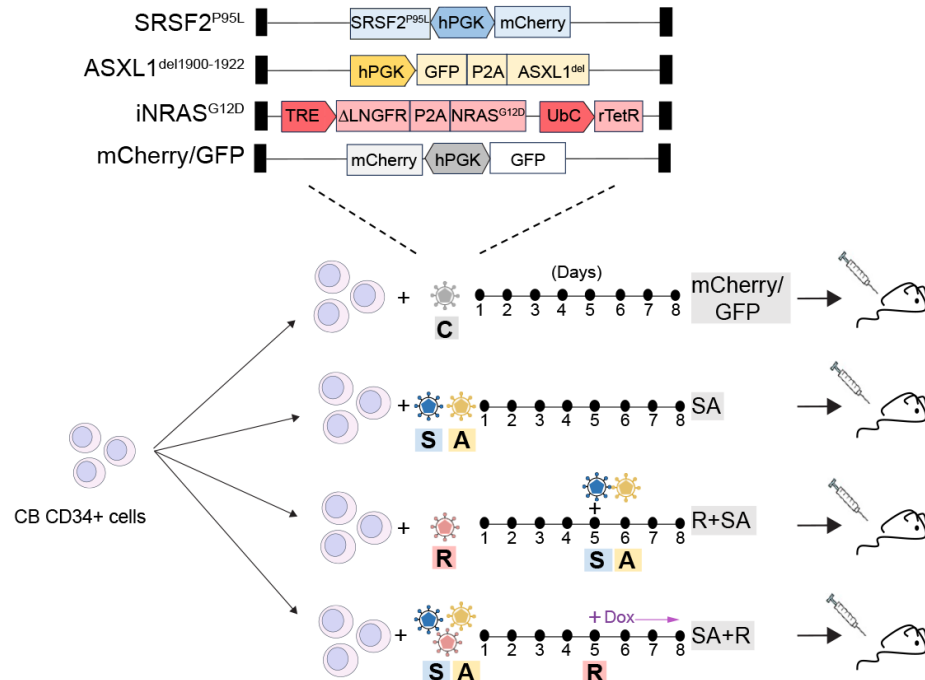


Junya Sango

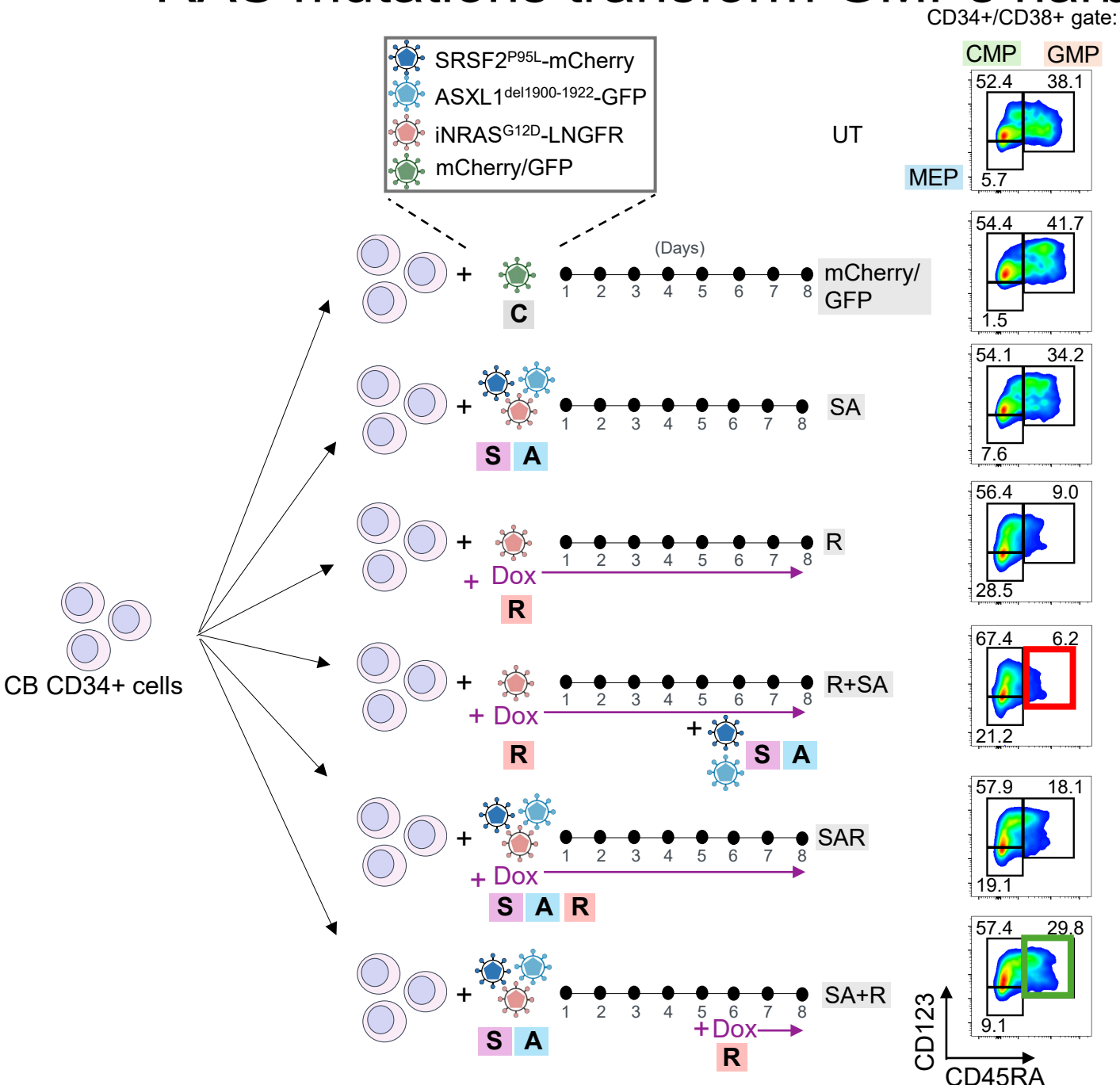
NRAS^{G12D} is an obligatory late mutation



Junya Sango



RAS mutations transform GMPs harboring preexisting mutations



RAS mutations transform GMPs harboring preexisting mutations



Saul Carcamo

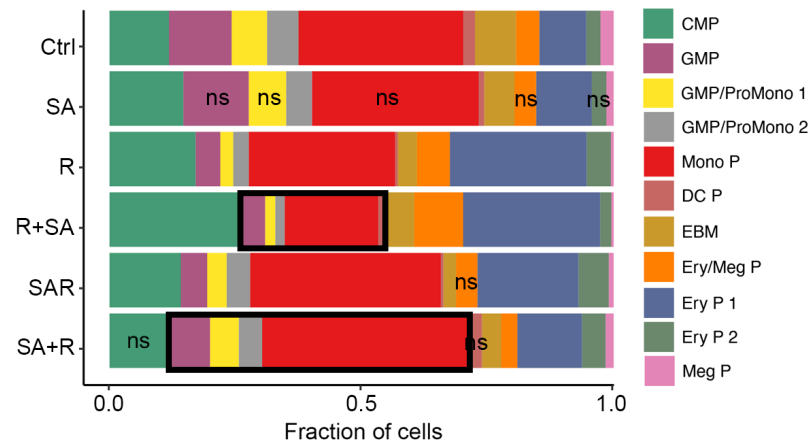
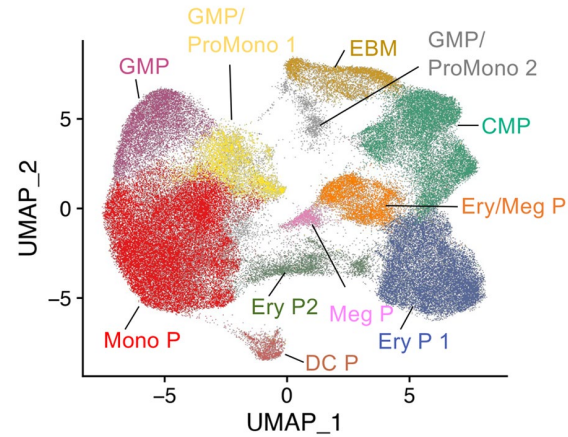


Lewis Tomalin

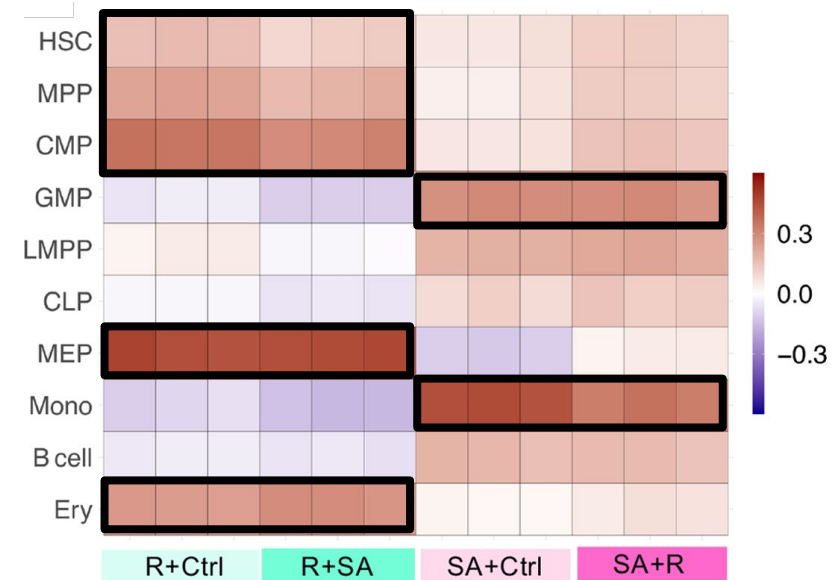


Gulay Ulukaya

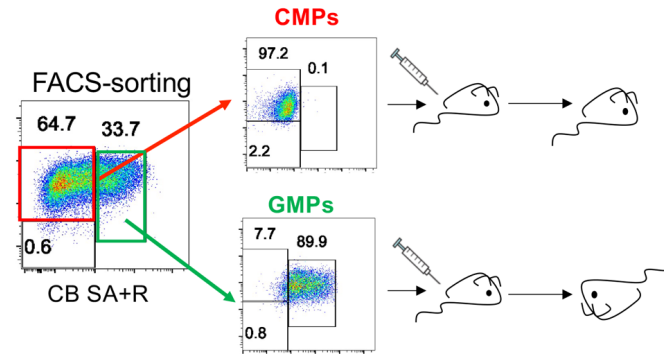
scRNA-Seq



ATAC-Seq

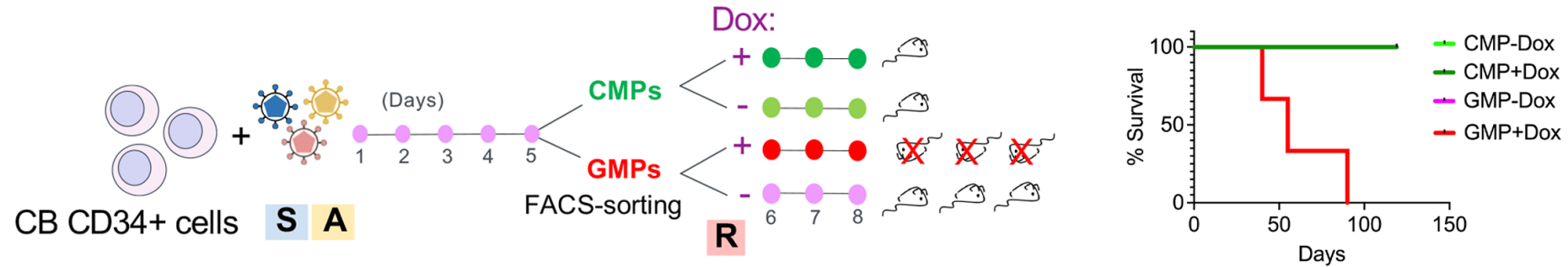


RAS mutations transform GMPs harboring preexisting mutations



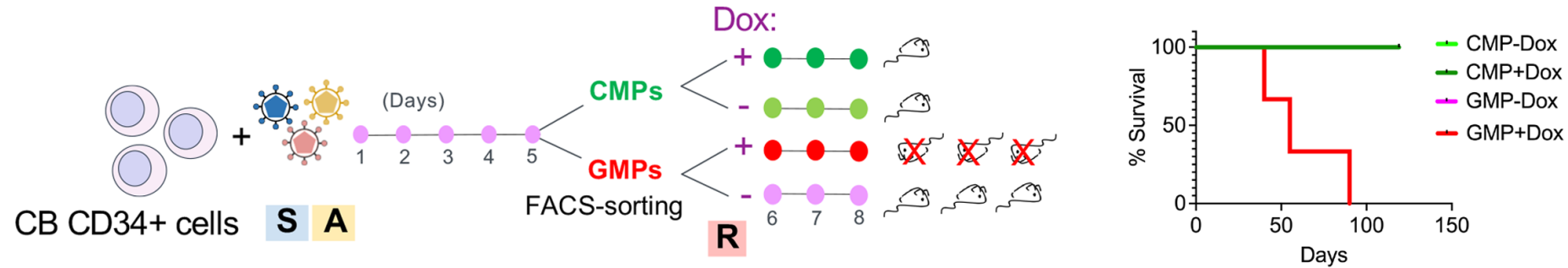
- **SA+R GMPs are the leukemia initiating cells**

RAS mutations transform GMPs harboring preexisting mutations

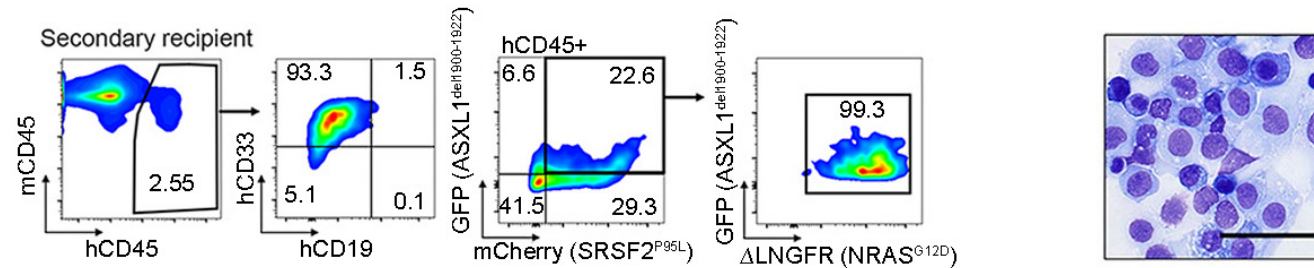


➤ **SA GMPs are the target cells of transformation by RAS mutations**

RAS mutations transform GMPs harboring preexisting mutations

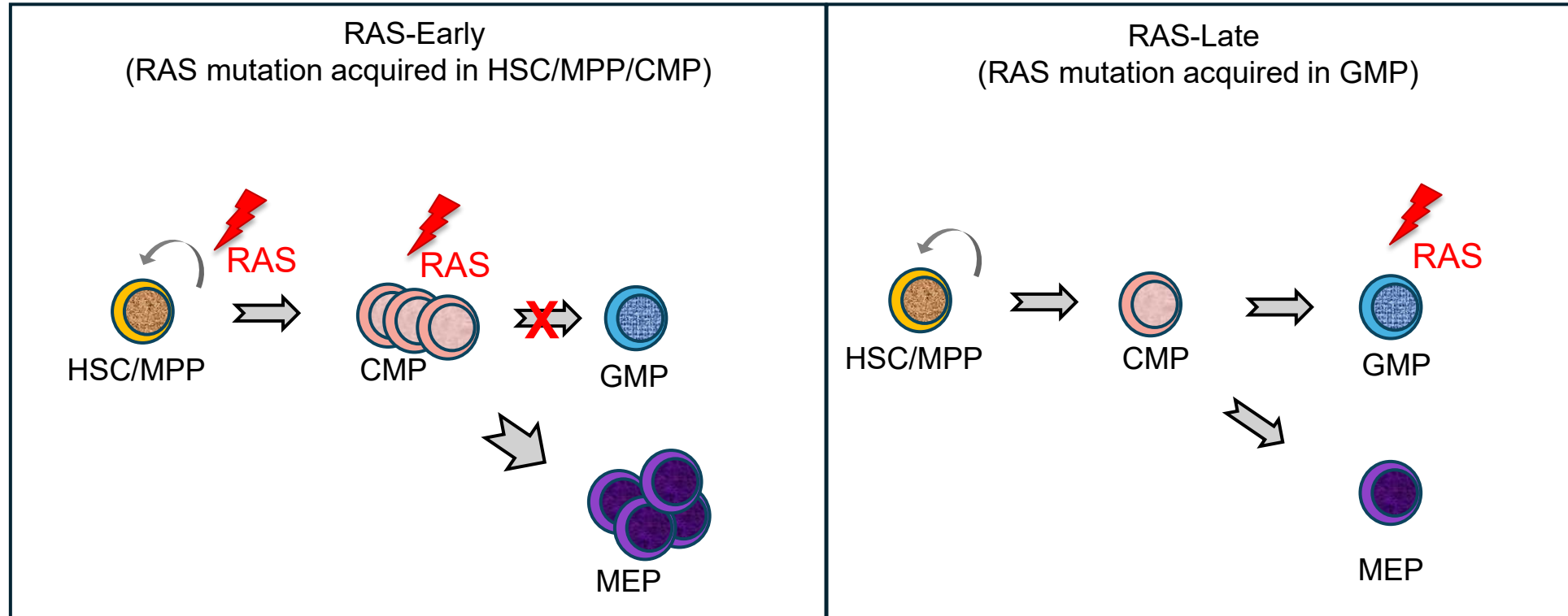


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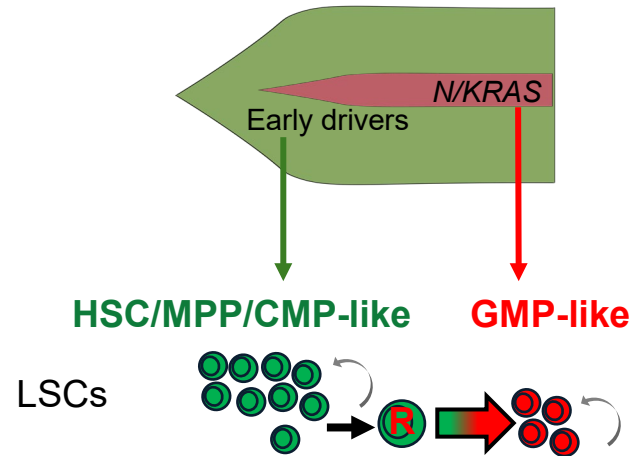


➤ **SA+R GMPs are leukemia stem cells**

RAS mutations transform GMPs harboring preexisting mutations



- RAS mutations transform progenitors committed to the myelomonocytic lineage (GMPs) that have previously acquired driver mutations, i.e. are descendants of an ancestral clone originating from a more primitive (HSC/MPP/CMP) cell



AML hierarchies and phenotype

FAB CLASSIFICATION



M0: Undifferentiated acute myeloblastic leukemia (5%)



M1: Greater number of myeloblasts with <10% granulocytic differentiation.



M2: Myeloblasts in great number with granulocytic differentiation >10%, NSE <20%.



M3: Promyelocytes that are hyper granular with many Auer rods on CAE or Wright-stain and variant form cells with reniform nuclei, multilobed or bibbed, primeval cells with multiple Auer rods or relative scarcity of Hypergranular promyelocytes.



M4: >20% but <80% NSE-butyrate positivity in Monocytic cells



M5: Monocytic cells with >80% NSE positivity. (a) Monocytic differentiated (b) Monocytic, differentiated.

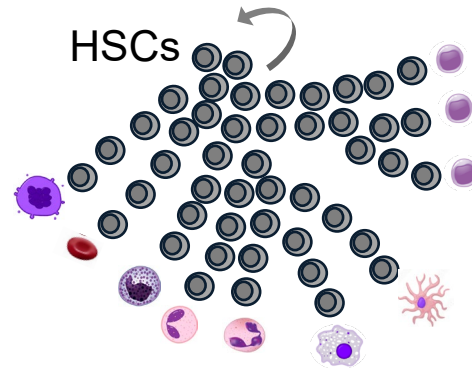


M6: >30% myeloblasts with more than 50% erythroblasts eliminating the erythroid cells.

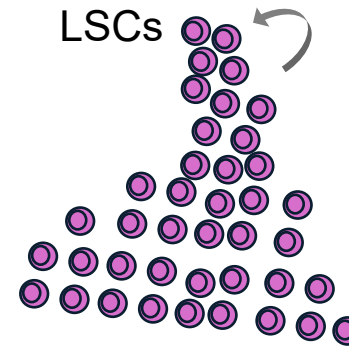


M7: Acute megakaryoblastic leukemia <5%

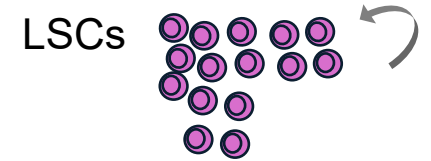
Normal hematopoiesis



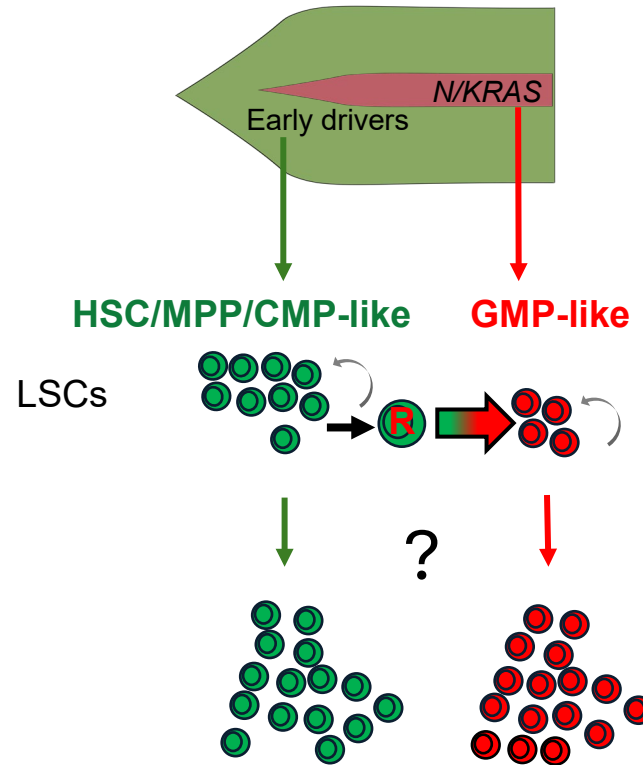
AML with deep hierarchy



AML with shallow hierarchy

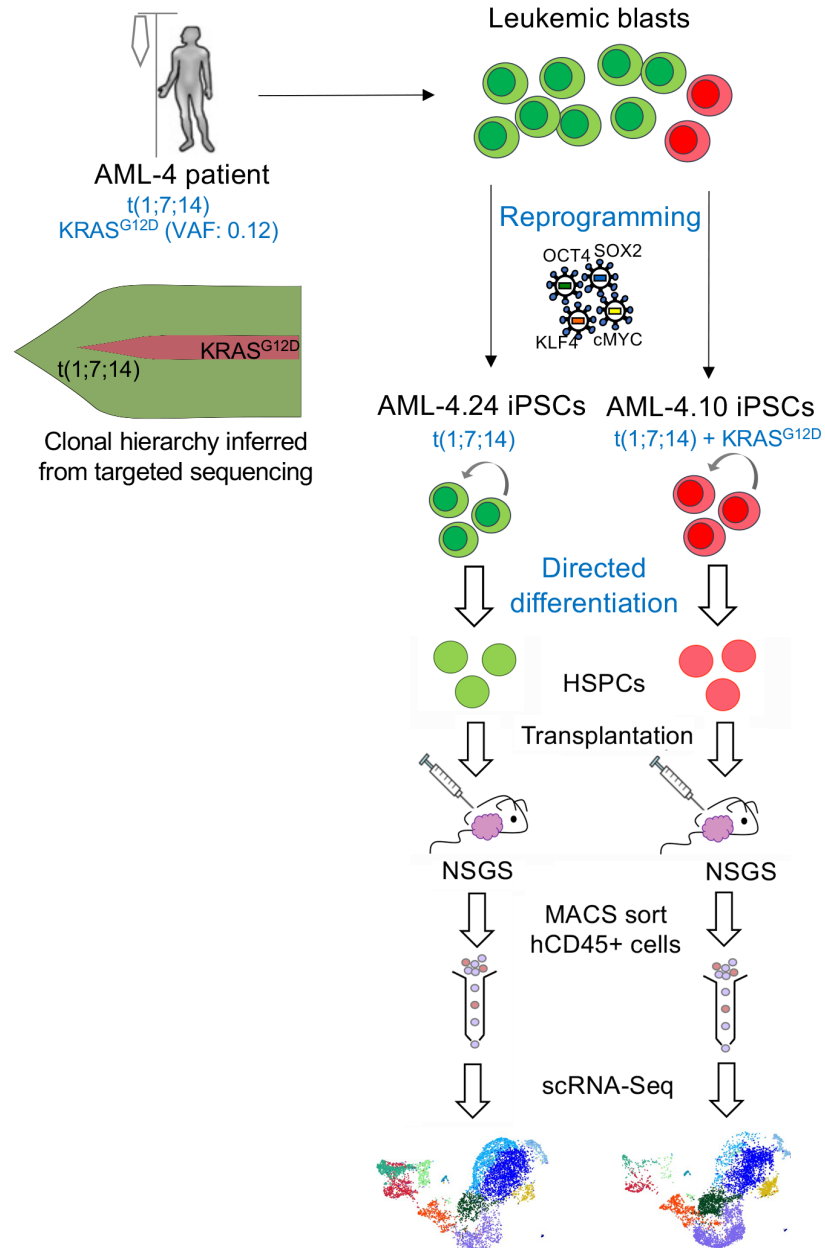


- RAS mutations transform progenitors committed to the myelomonocytic lineage (GMPs) that have previously acquired driver mutations, i.e. are descendants of an ancestral clone originating from a more primitive (HSC/MPP/CMP) cell



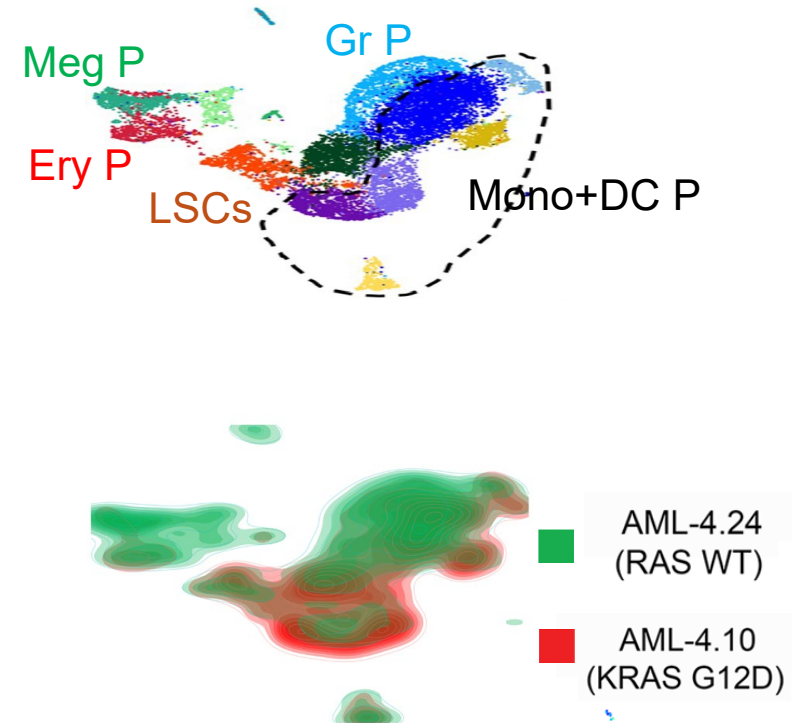
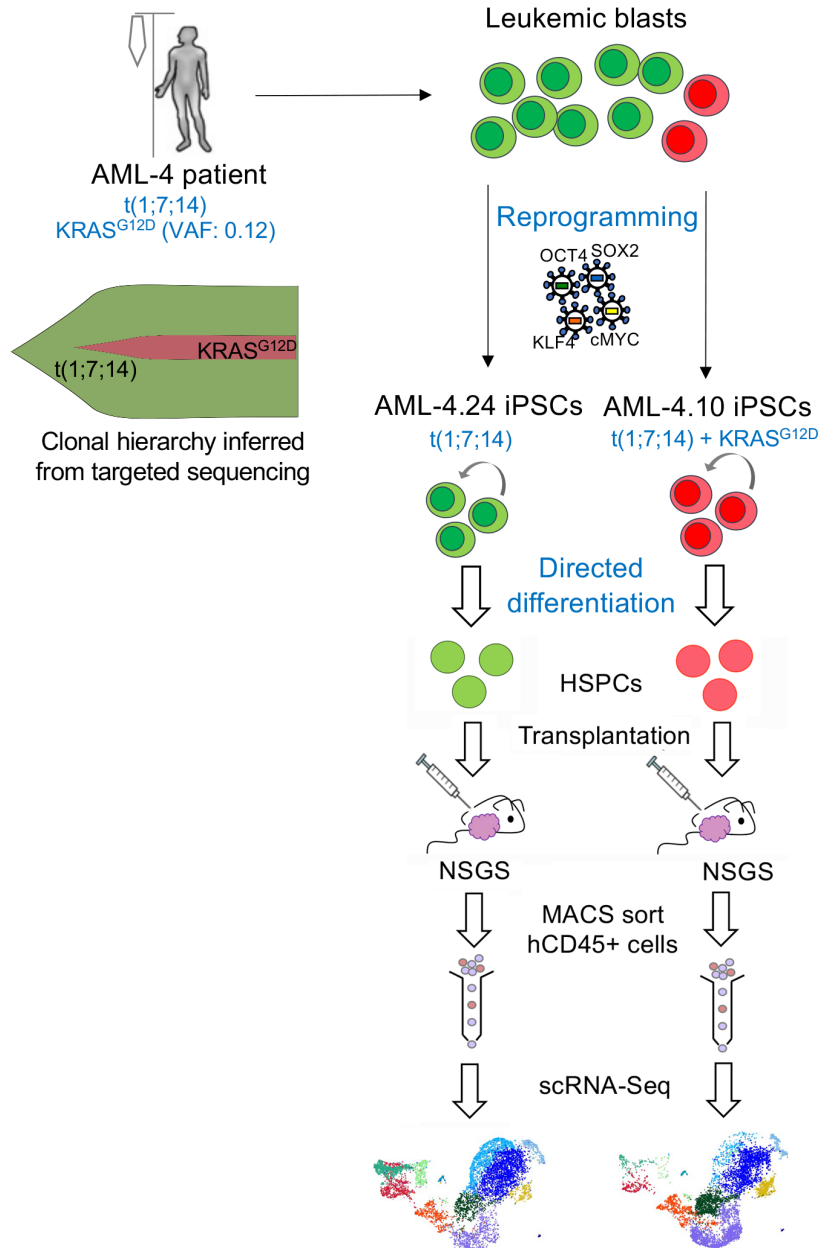
Comparison of RAS-MT and RAS-WT cells within the same AML patient

Patient-derived iPSCs



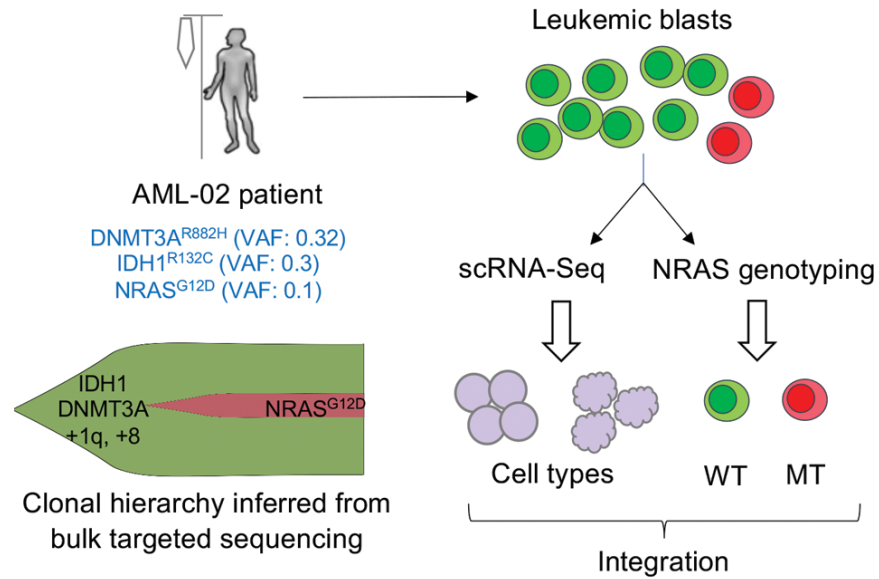
Comparison of RAS-MT and RAS-WT cells within the same AML patient

Patient-derived iPSCs



Comparison of RAS-MT and RAS-WT cells within the same AML patient

Genotyping of Transcriptomes (GoT)



Maria Sirenko



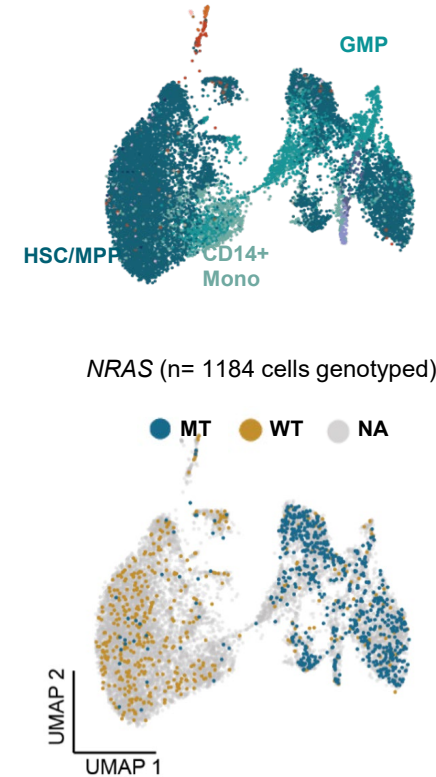
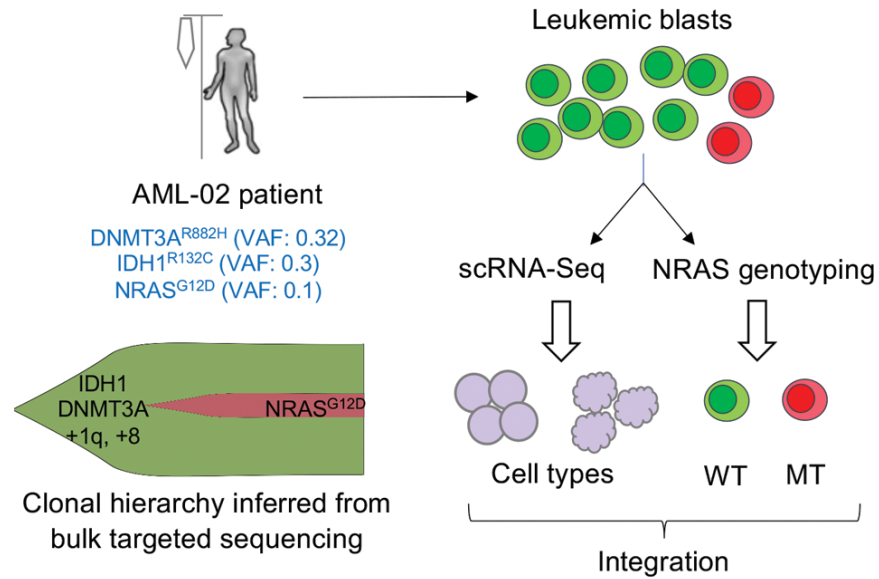
Elli Papaemmanuil



Dan Landau

Comparison of RAS-MT and RAS-WT cells within the same AML patient

Genotyping of Transcriptomes (GoT)



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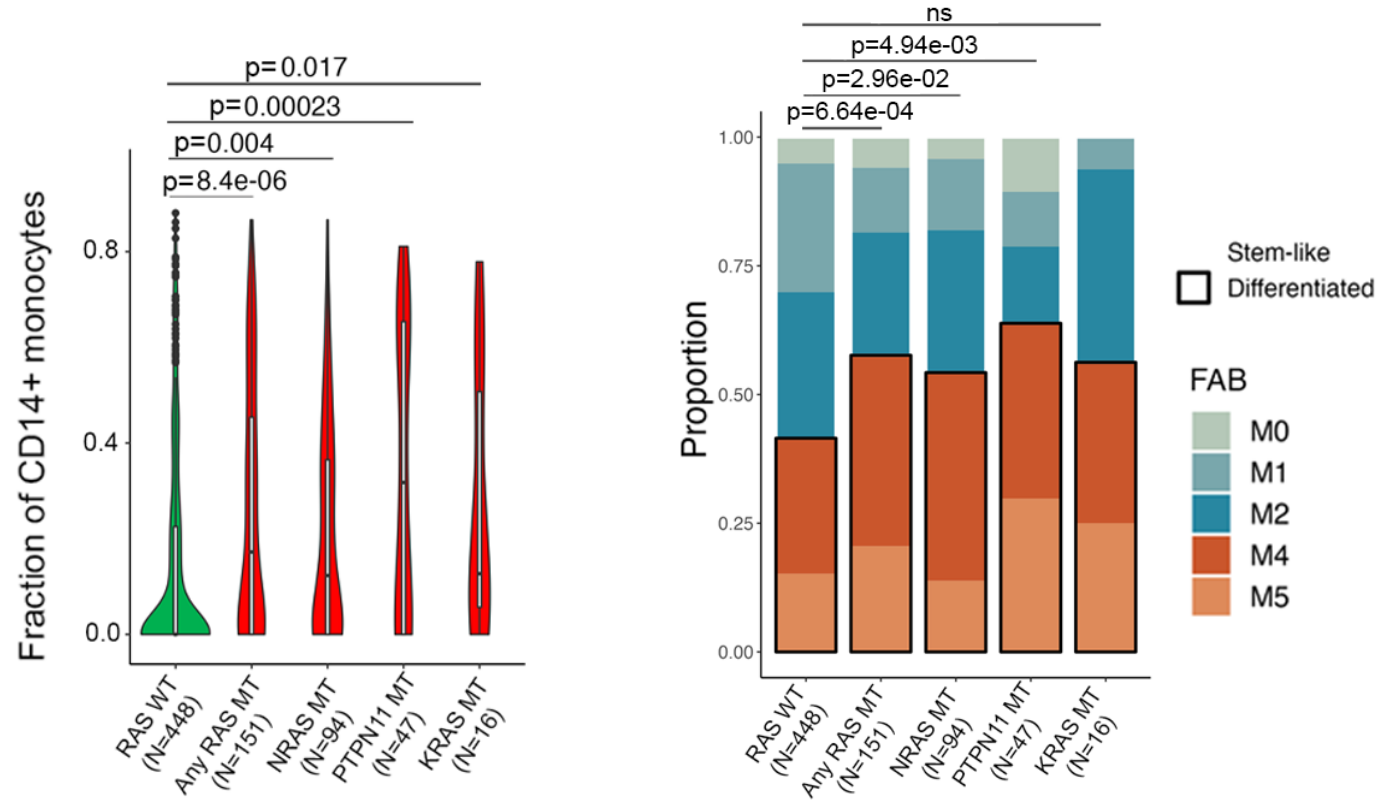


Elli Papaemmanuil



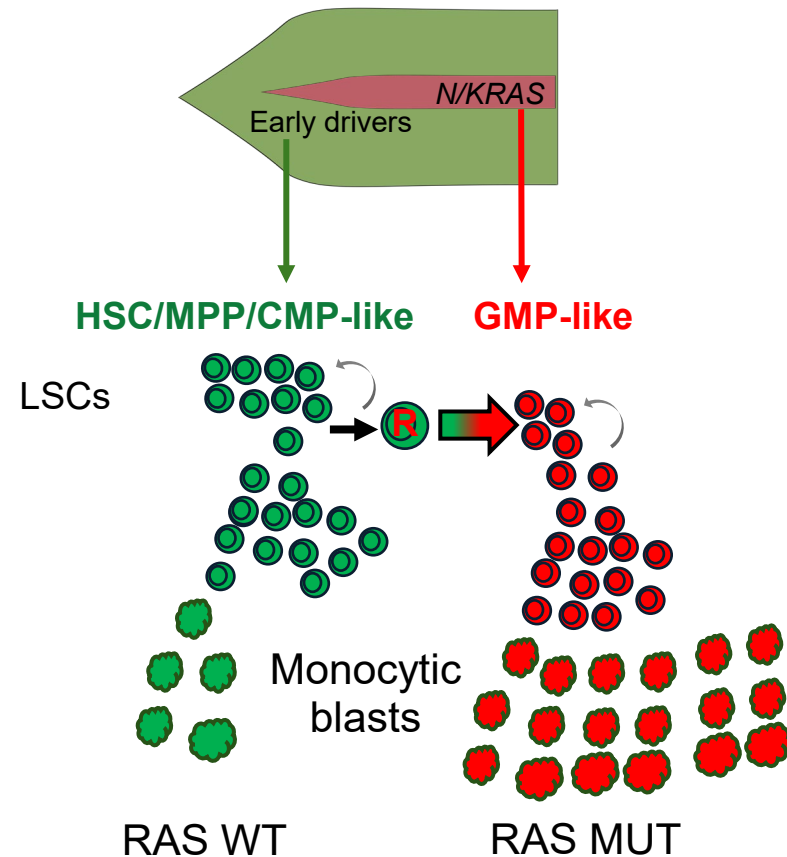
Dan Landau

RAS-MT AML is monocytic



Maria Sirenko
Ann-Kathrin Eisfeld
Bettina Nadorp

- RAS-mutant LSCs give rise to AML blasts with monocytic differentiation, whereas ancestral LSCs generate primitive AML blasts



Venetoclax (VEN) resistance in AML

? Determinants of relapse/resistance

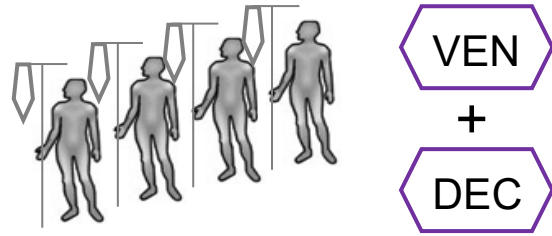
- VEN resistance/relapse associated with monocytic AML.
- VEN resistance/relapse associated with RAS pathway mutations.
- RAS pathway mutations cause monocytic AML.

Venetoclax (VEN) resistance in AML

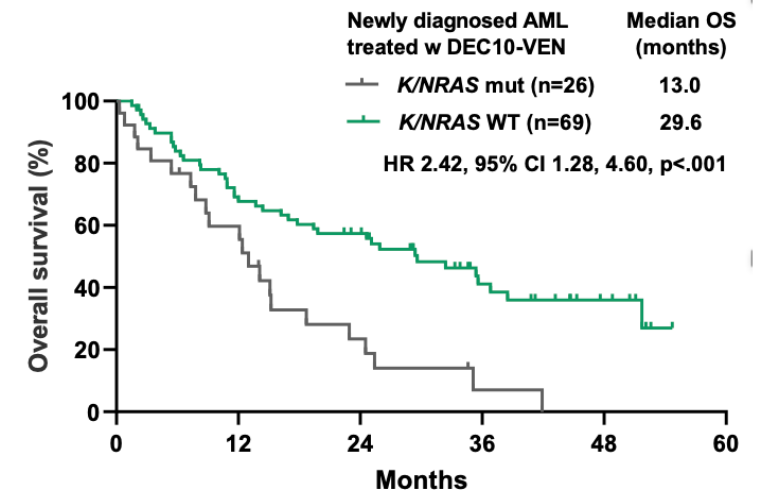
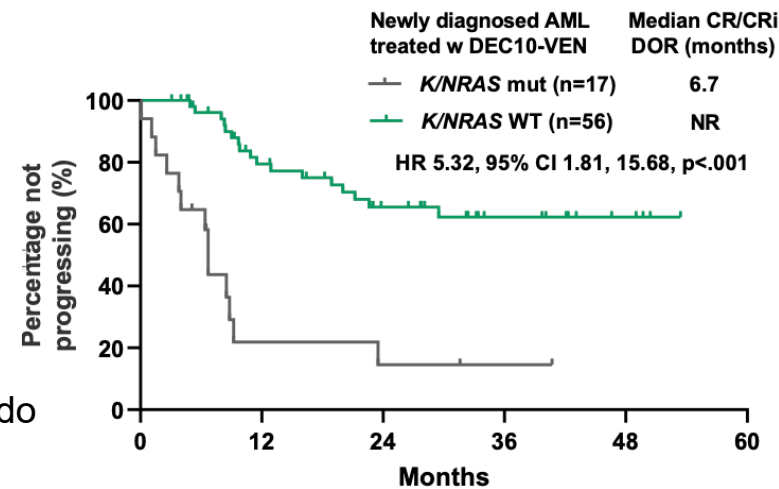
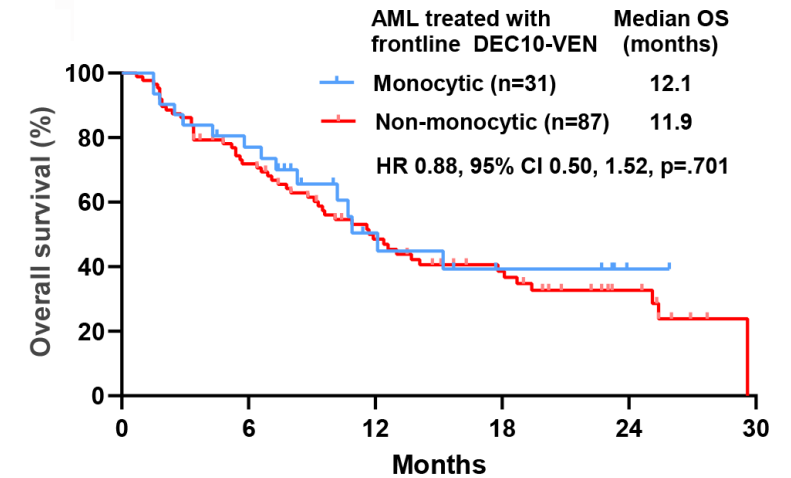
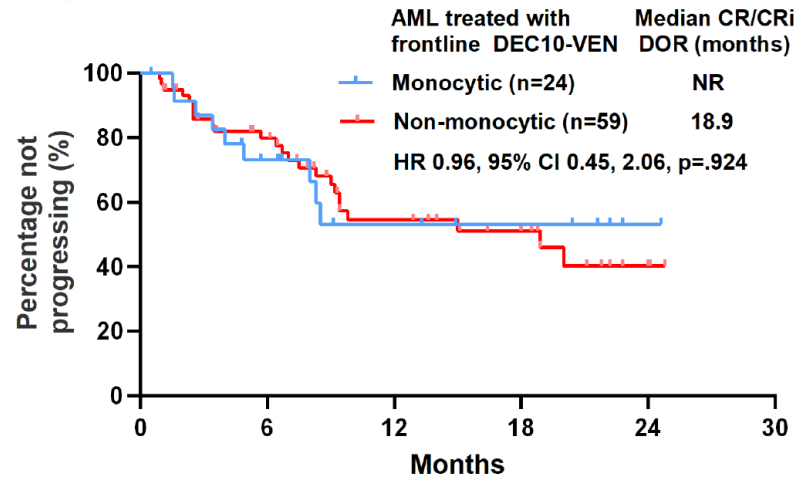
? Determinants of relapse/resistance

- VEN resistance/relapse associated with monocytic AML.
 - VEN resistance/relapse associated with RAS pathway mutations.
 - RAS pathway mutations cause monocytic AML.
-
- Is it the monocytic differentiation stage or the RAS mutational status that is the cause of VEN resistance?

N/KRAS mutation, but not monocytic stage, is associated with poor outcomes in AML patients in a prospective clinical trial of VEN+DEC



Older/unfit patients with
newly diagnosed AML
NCT03404193



Marina Konopleva

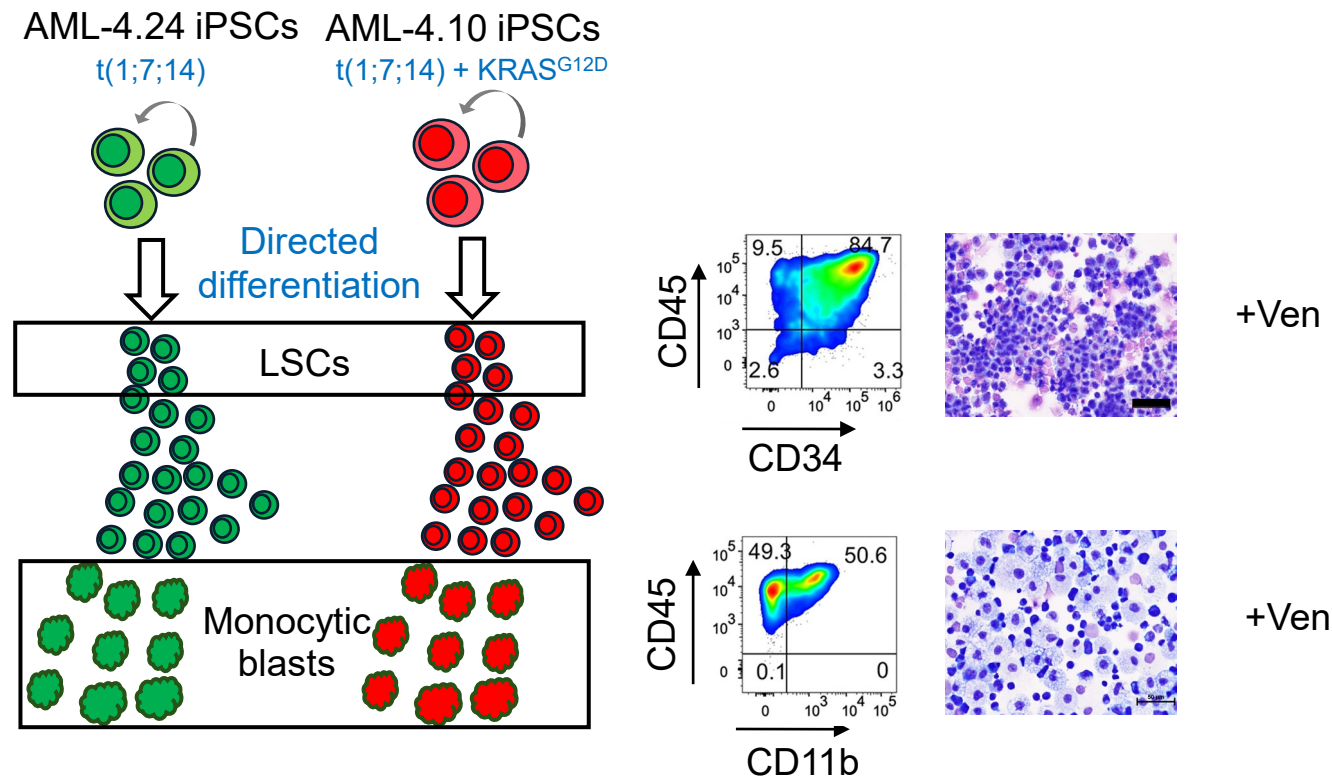


Abhi Maiti

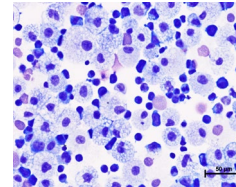
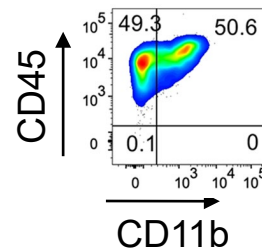
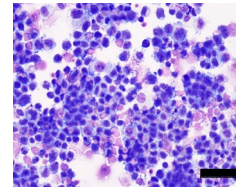
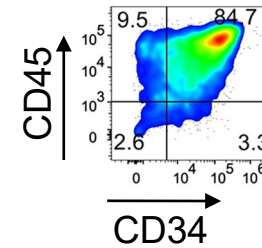
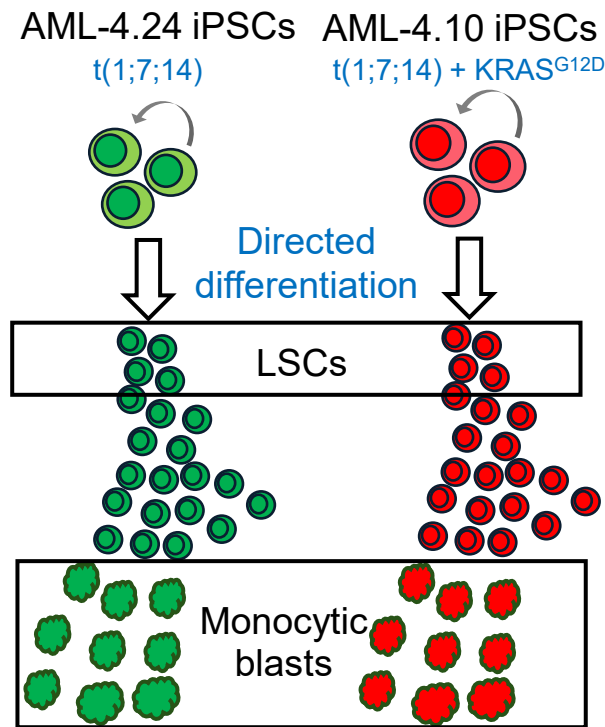


Courtney DiNardo

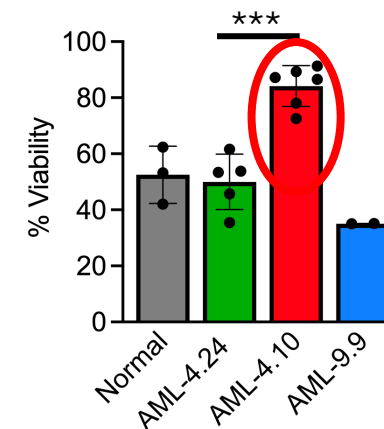
Separating the impact of differentiation state vs mutational status



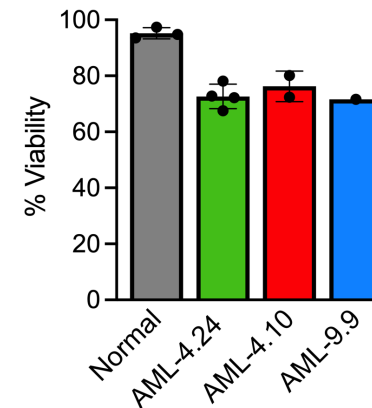
RAS-WT LSCs are sensitive to VEN, but RAS-MT LSCs are resistant



+Ven

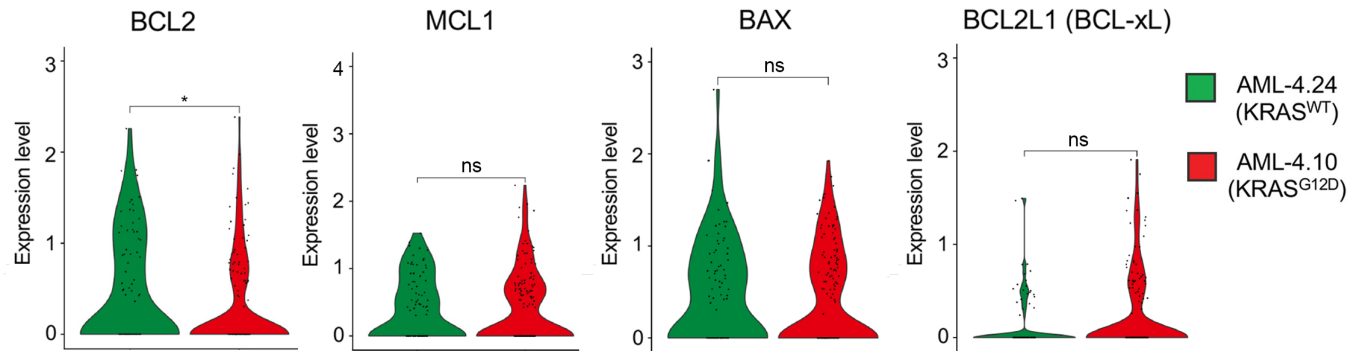


+Ven

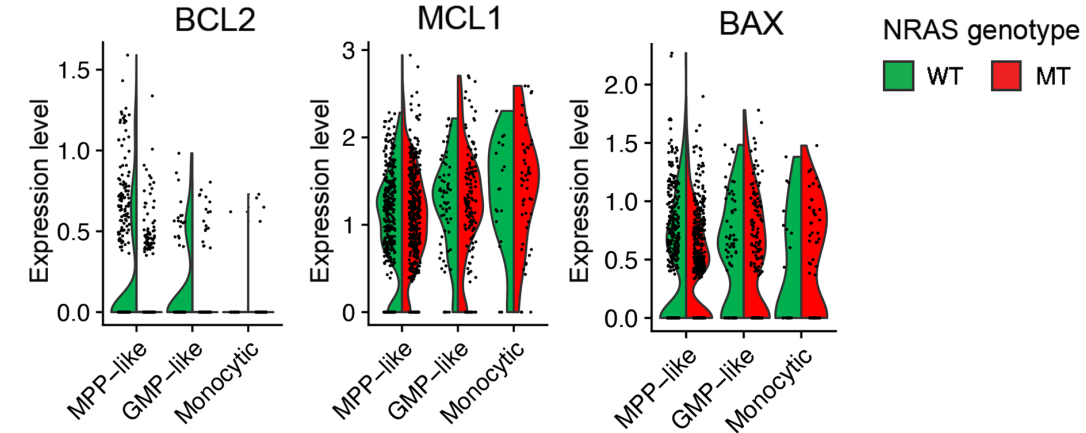


RAS mutations and not the GMP state confer VEN resistance to LSCs

Patient-derived AML-iPSC xenografts

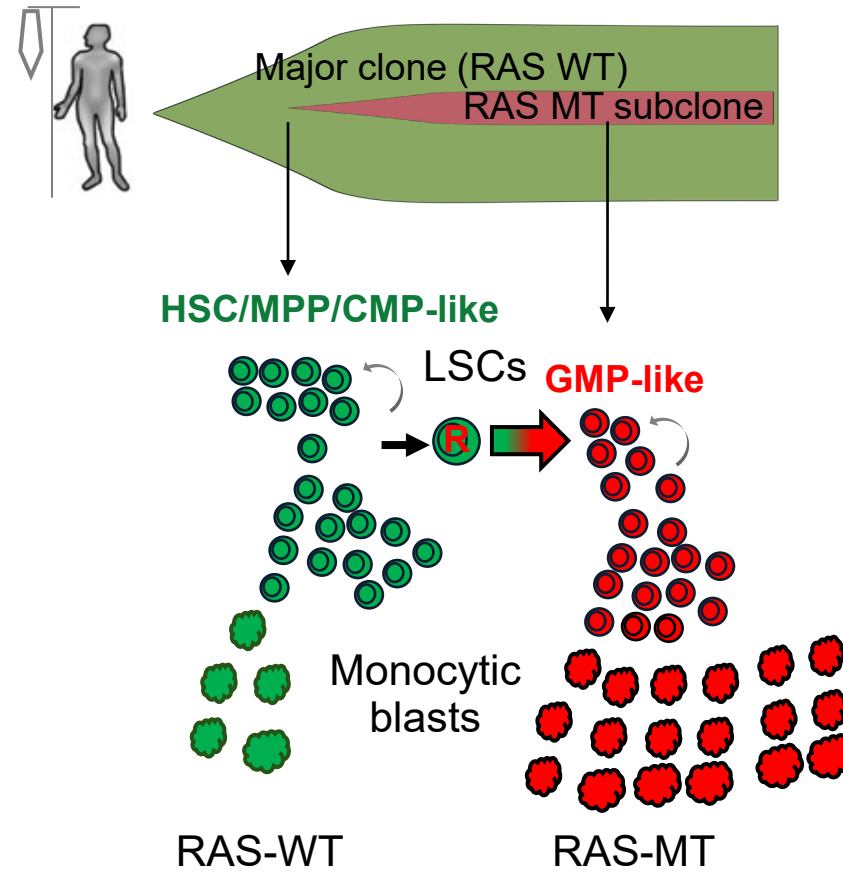


Genotyping of Transcriptomes (GoT)

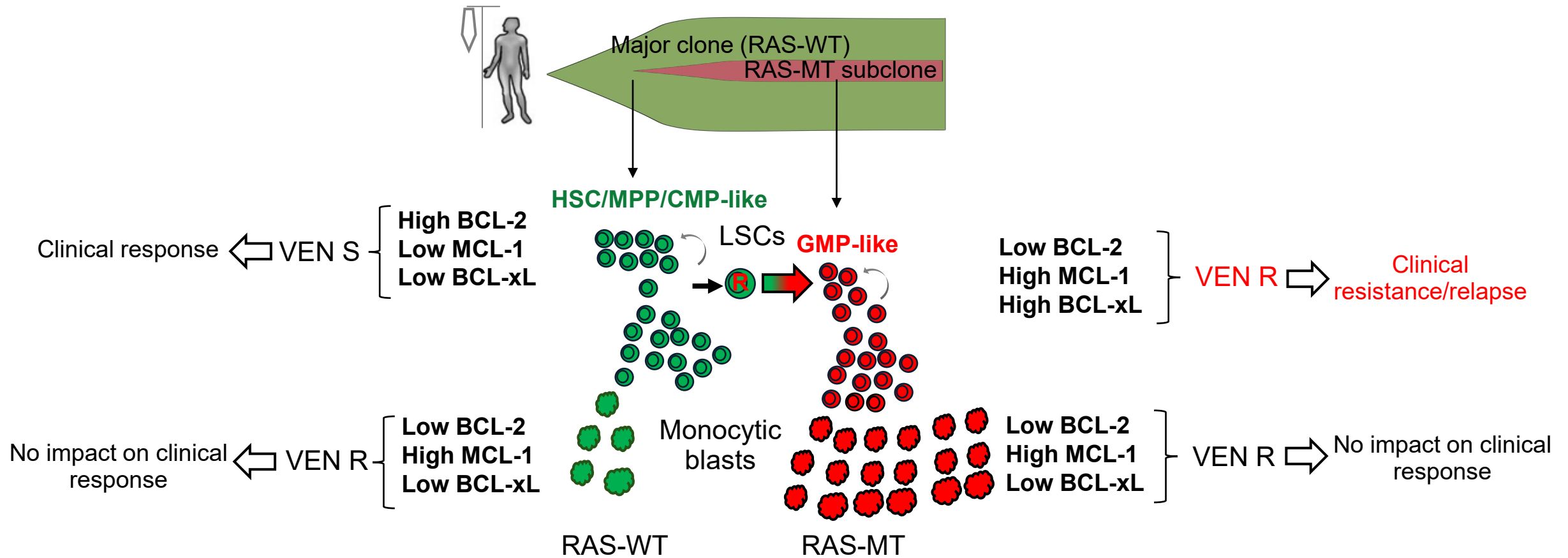


RAS-MT LSCs have ↓ BCL2 and ↑ MCL1 and ↑ BCL-xL

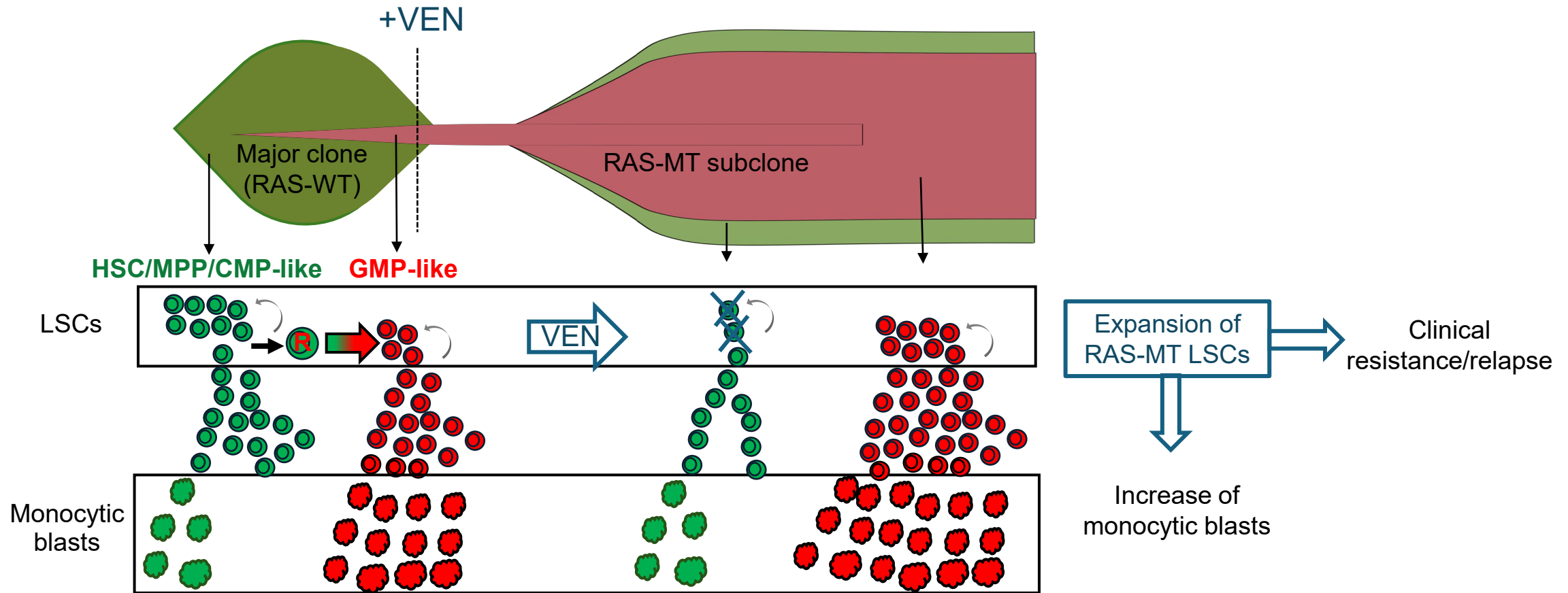
Unified model of VEN resistance



Unified model of VEN resistance



Unified model of VEN resistance



Article

RAS-mutant leukaemia stem cells drive clinical resistance to venetoclax

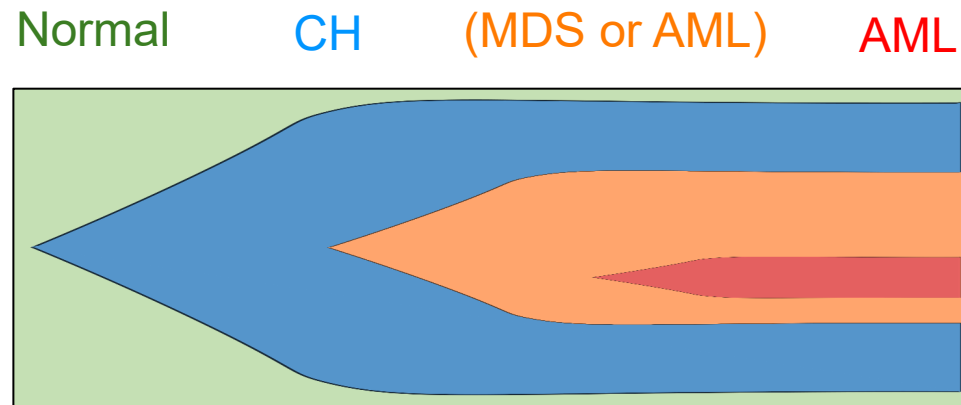
Junya Sango^{1,2,3,4,5,22}, Saul Carcamo^{1,2,3,4,5,6,22}, Maria Sirenko^{7,8,22}, Abhishek Maiti^{9,22},
Hager Mansour^{1,2,3,4,5}, Gulay Ulukaya^{1,2,3,4,5,6}, Lewis E. Tomalin^{2,3,4,5,6},
Nataly Cruz-Rodriguez^{1,2,3,4,5}, Tiansu Wang^{1,2,3,4,5}, Malgorzata Olszewska^{1,2,3,4,5},
Emmanuel Olivier^{1,2,3,4,5}, Manon Jaud^{1,2,3,4,5}, Bettina Nadorp^{10,11}, Benjamin Kroger^{12,13}, Feng Hu¹⁴,
Lewis Silverman^{2,4,5}, Stephen S. Chung^{12,15}, Elvin Wagenblast^{1,2,3,5}, Ronan Chaligne^{16,17},
Ann-Kathrin Eisfeld¹⁸, Deniz Demircioglu^{1,2,5,6}, Dan A. Landau^{16,17}, Piro Lito¹⁴, Elli Papaemmanuil⁷,
Courtney D. DiNardo⁹, Dan Hasson^{1,2,3,5,6}, Marina Konopleva^{19,20,21} & Eirini P. Papapetrou^{1,2,3,4,5}✉

Nature | Vol 636 | 5 December 2024 |

LSCs in two dimensions

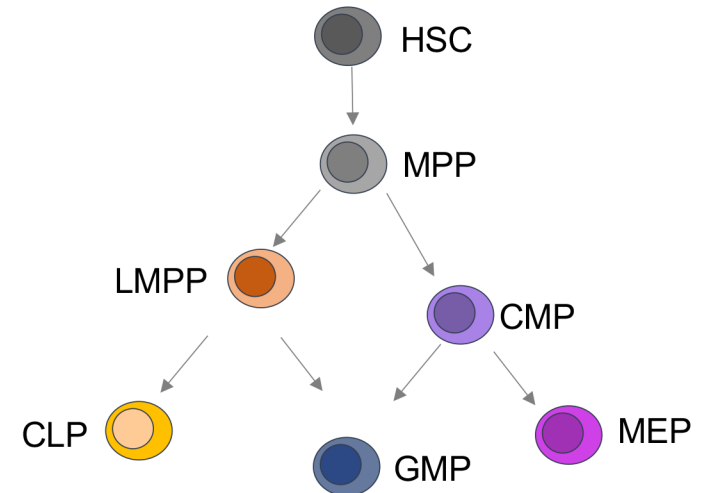
Clonal evolution →

Clonal heterogeneity (genetic)



Differentiation
hierarchy ↓

Cell state heterogeneity (non-genetic)

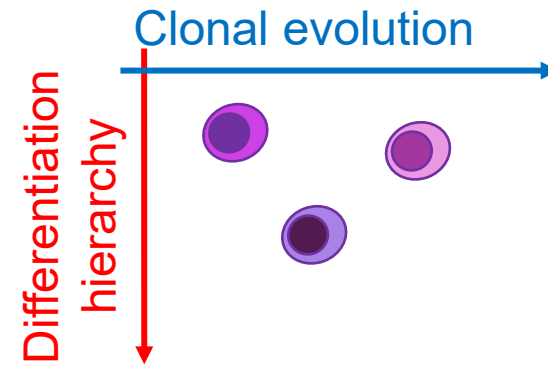
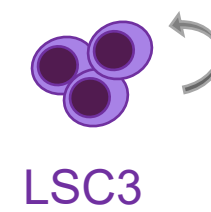
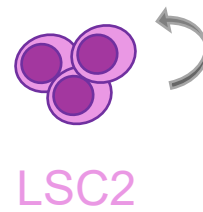
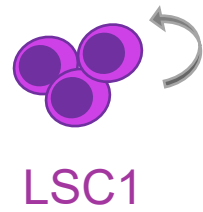


LSCs in two dimensions

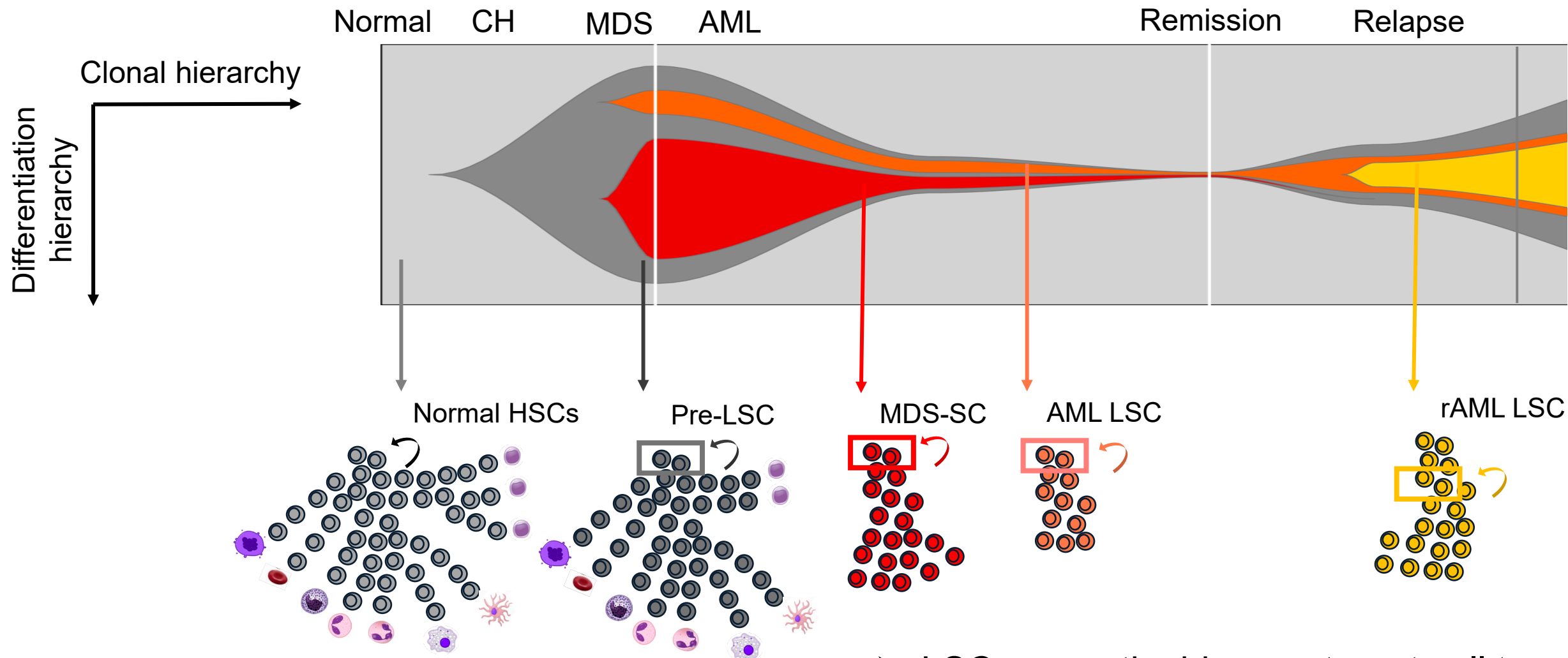
Clonal evolution
→

Differentiation
hierarchy
↓

LSCs in two dimensions



A revised LSC model



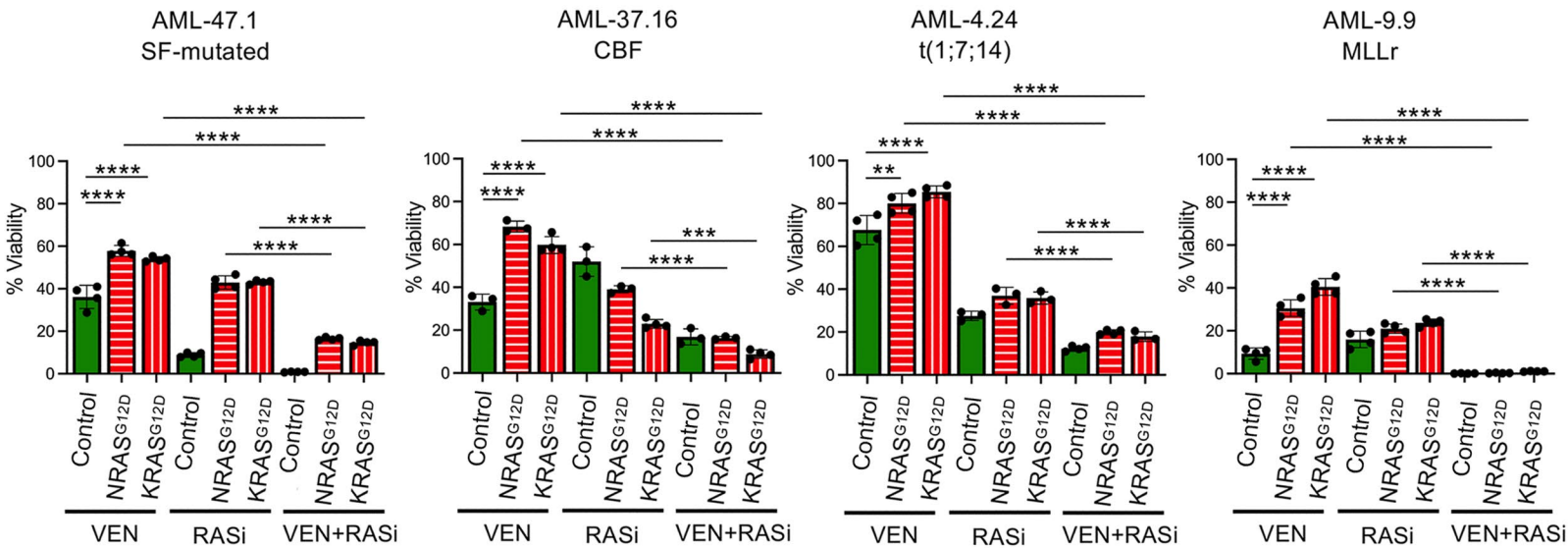
➤ LSC = genetic drivers + target cell type

➤ PreL SC $\neq$ MDS-SC $\neq$ AML LSC $\neq$ rAML LSC

➤ How can we overcome VEN resistance in RAS-MT AML?

N/KRAS mutations confer VEN resistance to AML LSCs

RMC-7977
active state-
selective RAS
multi-inhibitor

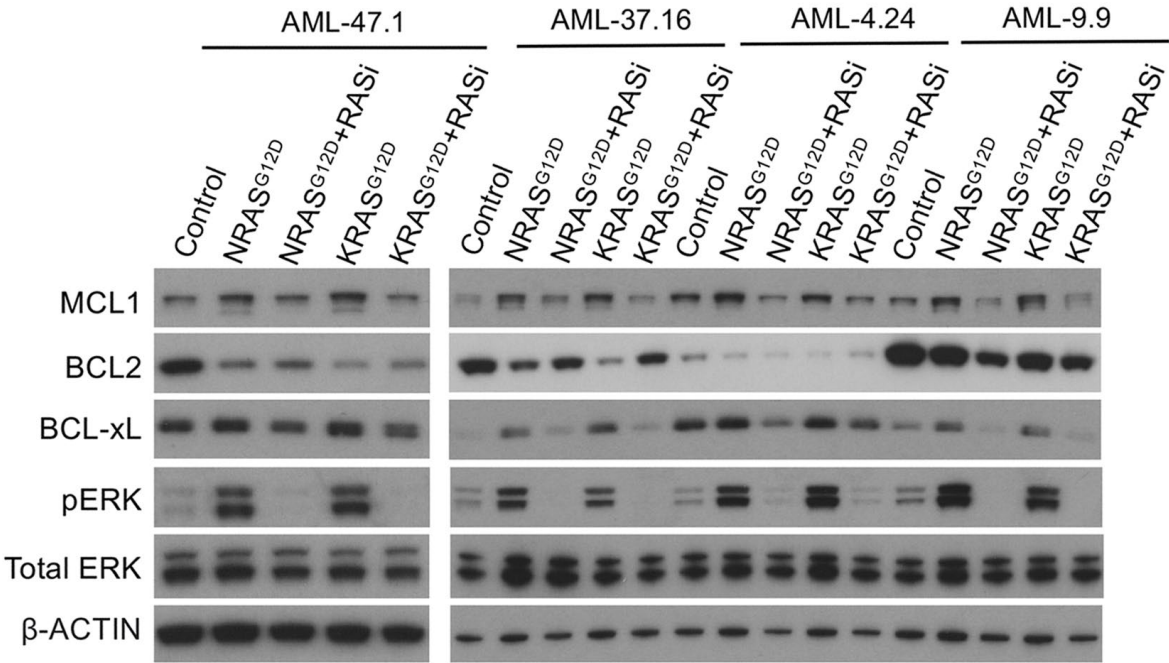


Article

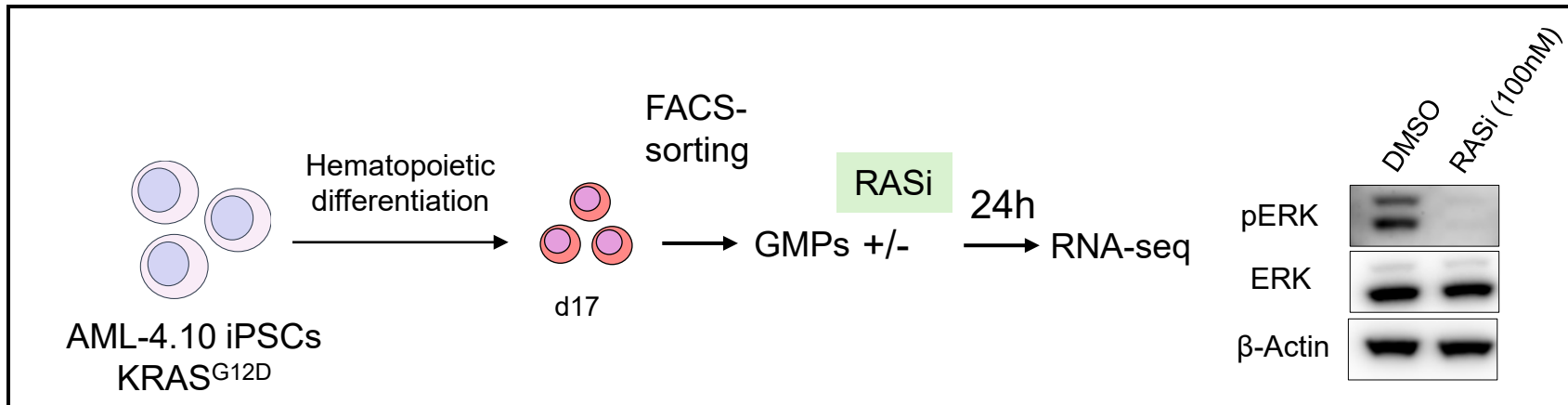
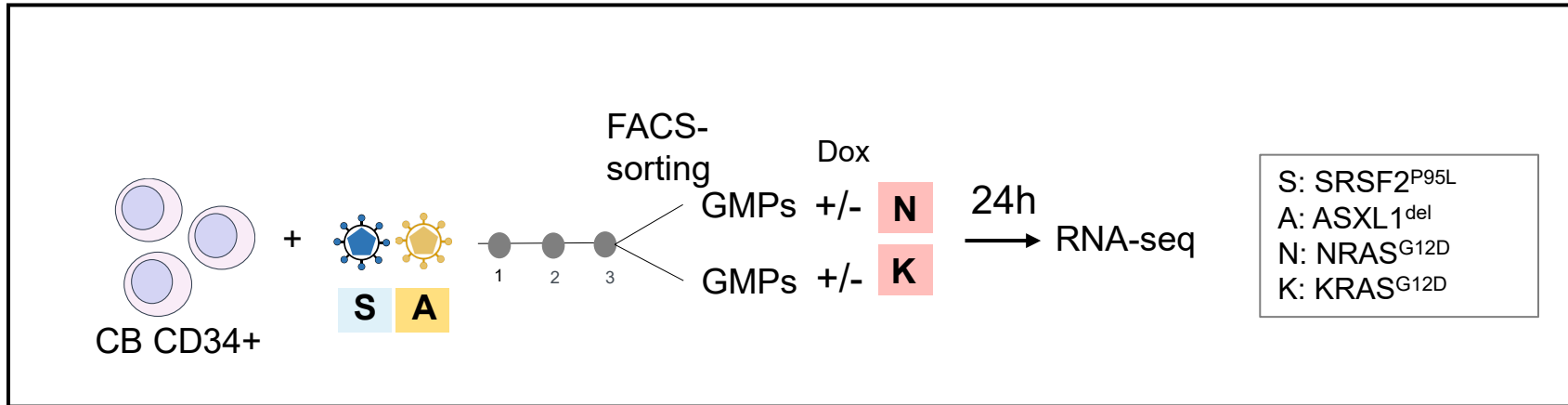
Concurrent inhibition of oncogenic and wild-type RAS-GTP for cancer therapy

Matthew Holderfield¹, Bianca J. Lee¹, Jingjing Jiang¹, Aidan Tomlinson¹, Kyle J. Seamon¹, Alessia Mira², Enrico Patrucco², Grace Goodhart³, Julien Dilly⁴, Yevgeniy Gindin¹, Nuntana Dinglasan¹, Yingyun Wang¹, Lick Pui Lai¹, Shurui Cai¹, Lingyan Jiang¹, Nicole Nasholm¹, Nataliya Shifrin¹, Cristina Blaj¹, Harshit Shah¹, James W. Evans¹, Nilufar Montazer¹, Oliver Lai¹, Jade Shi¹, Ethan Ahler¹, Elsa Quintana¹, Stephanie Chang¹, Anthony Salvador¹, Abby Marquez¹, Jim Cregg¹, Yang Liu¹, Anthony Milin¹, Anqi Chen¹, Tamar Bar Ziv¹, Dylan Parsons¹, John E. Knox¹, Jennifer E. Klomp⁶, Jennifer Roth⁶, Matthew Rees⁶, Melissa Ronan⁶, Antonio Cuevas-Navarro⁷, Feng Hu⁷, Piro Lito^{7,8}, David Santamaria⁹, Andrew J. Aguirre^{4,6,10,11}, Andrew M. Waters^{3,5,12,13}, Channing J. Der^{5,12}, Chiara Ambrogio², Zhengping Wang¹, Adrian L. Gill¹, Elena S. Koltun¹, Jacqueline A. M. Smith¹, David Wildes¹ & Mallika Singh¹

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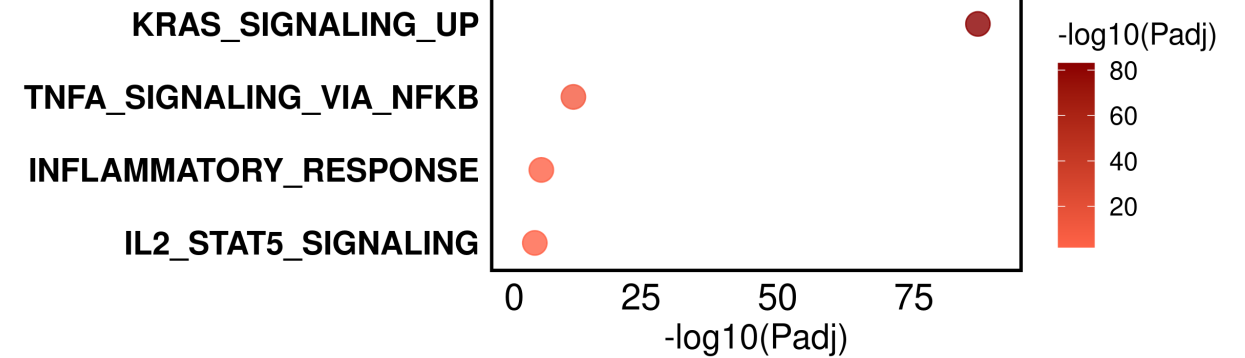
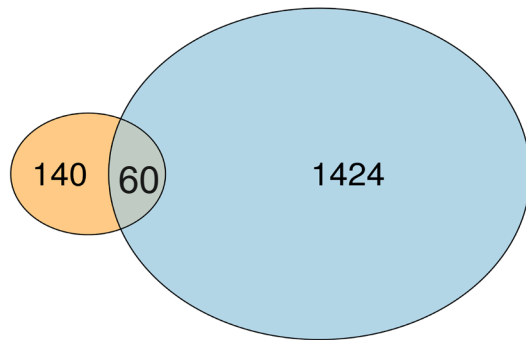


A GMP LSC-specific RAS activation gene signature

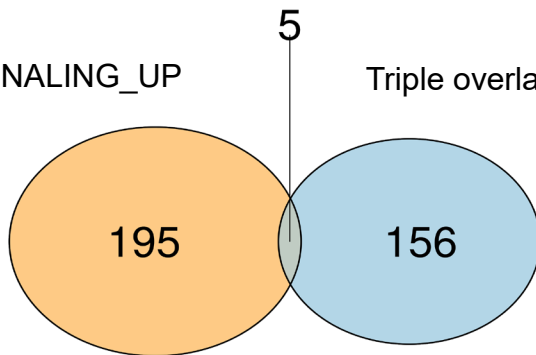


A GMP LSC-specific RAS activation gene signature

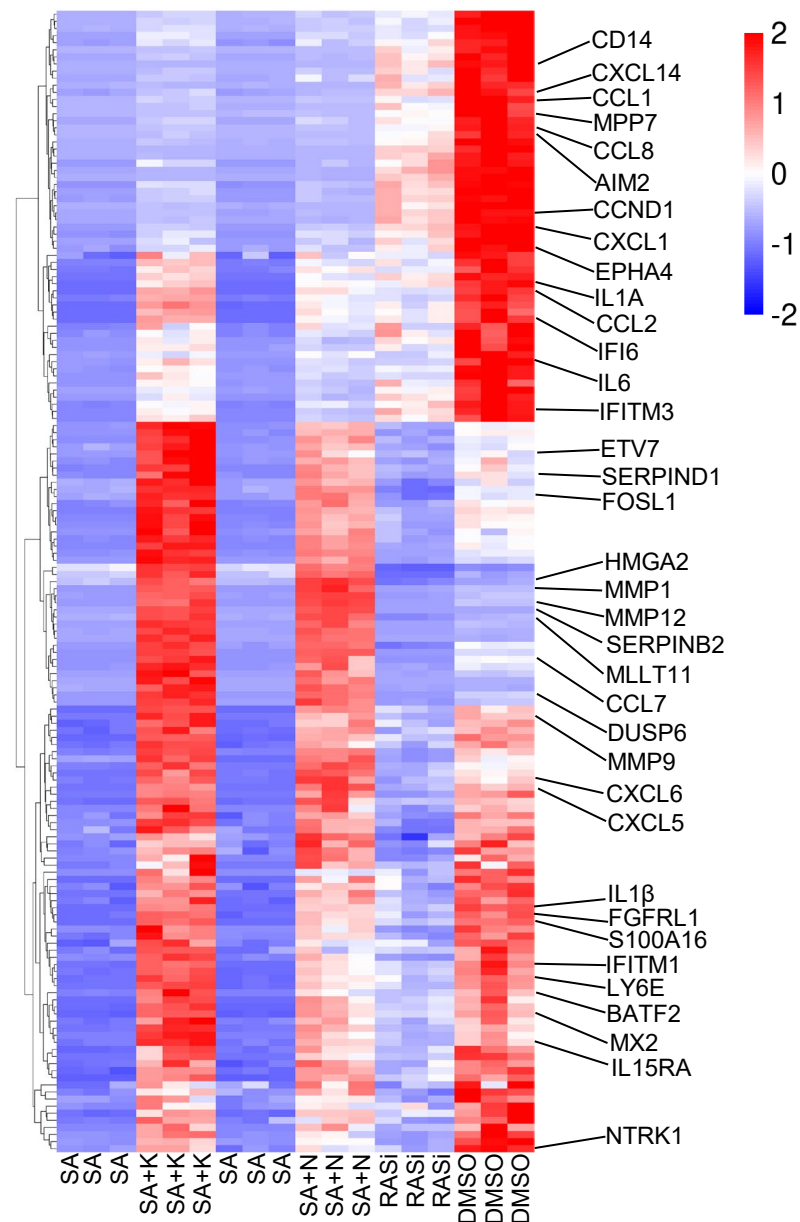
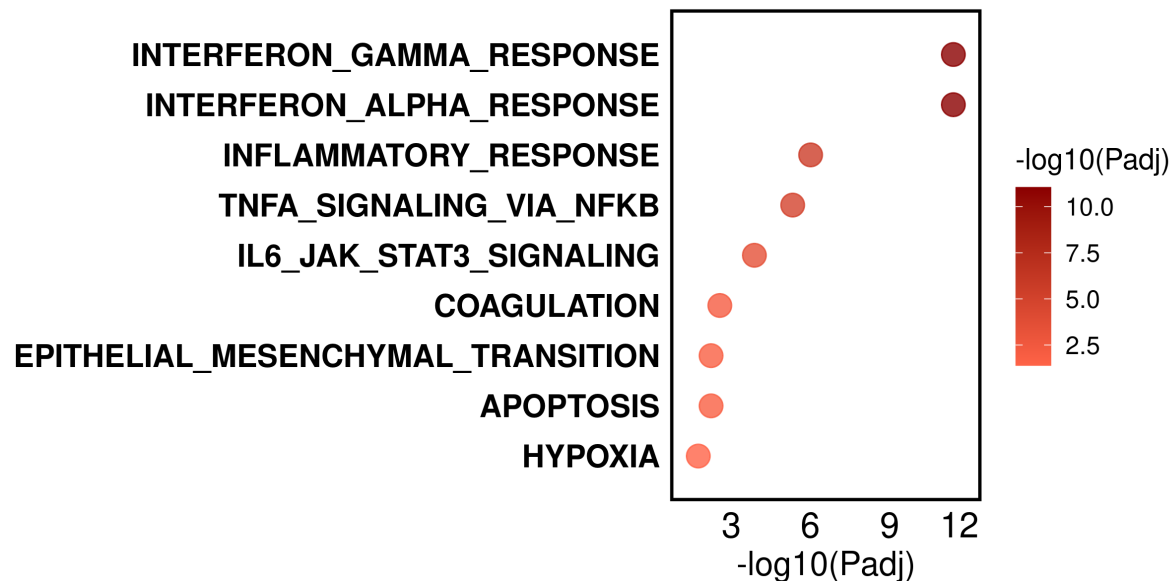
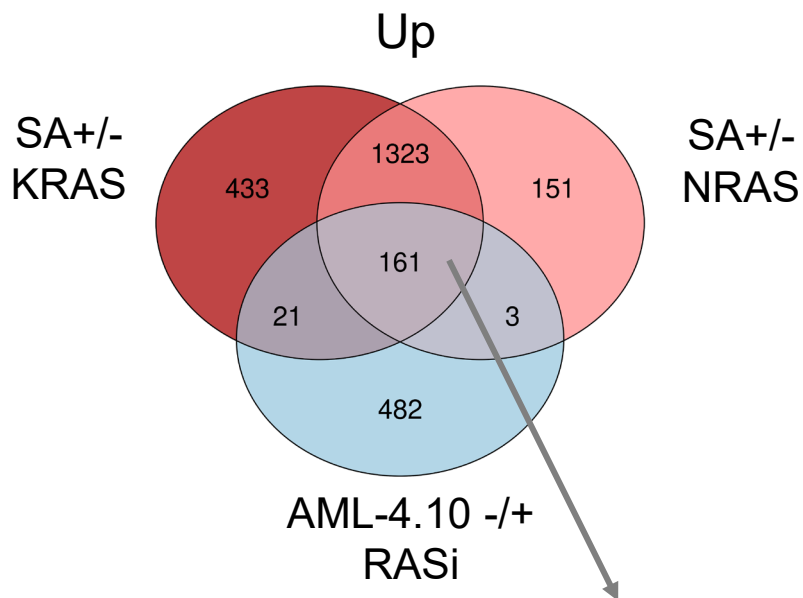
HALLMARK_KRAS_SIGNALING_UP SA-/+/K/N overlap



HALLMARK_KRAS_SIGNALING_UP Triple overlap UP



A GMP LSC-specific RAS activation gene signature



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leukemia
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differentiation stem cells mutant MDS
genomics RNA-Seq clonal
human Cas9 gene iPSCs
myeloid single cell CRISPR
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xenograft hematopoiesis
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