WEBVTT

NOTE duration: "00:44:10.4000000"

NOTE language:en-us

NOTE Confidence: 0.83471704

 $00:00:00.000 \longrightarrow 00:00:03.010$ The hearts go out to his wife.

NOTE Confidence: 0.83471704

 $00:00:03.010 \longrightarrow 00:00:05.100$ Doctor Kellie Martin is two

NOTE Confidence: 0.83471704

 $00{:}00{:}05.100 \dashrightarrow 00{:}07.655$ children tests and Jacob and just

NOTE Confidence: 0.83471704

 $00{:}00{:}07.655 \dashrightarrow 00{:}00{:}09.983$ take a moment just to silence

NOTE Confidence: 0.83471704

00:00:09.983 --> 00:00:12.269 just to recognize Tony's legacy.

NOTE Confidence: 0.86117405

00:00:21.180 --> 00:00:24.435 Well, thank you, so let's now turn

NOTE Confidence: 0.86117405

 $00{:}00{:}24.435 \dashrightarrow 00{:}00{:}28.108$ to our first of two great speakers.

NOTE Confidence: 0.86117405

00:00:28.110 --> 00:00:30.894 We were very fortunate this year

NOTE Confidence: 0.86117405

 $00{:}00{:}30.894 \dashrightarrow 00{:}00{:}33.560$ to recruit Doctor Jeffrey Ishizuka.

NOTE Confidence: 0.86117405

 $00:00:33.560 \longrightarrow 00:00:38.026$ Jeff is an assistant professor of medicine.

NOTE Confidence: 0.86117405

 $00{:}00{:}38.030 \dashrightarrow 00{:}00{:}39.377$ And Jeff's work.

NOTE Confidence: 0.86117405

00:00:39.377 --> 00:00:41.622 Previously at Harvard was was

NOTE Confidence: 0.86117405

00:00:41.622 --> 00:00:44.408 focused on the biology of T cells.

NOTE Confidence: 0.86117405

 $00:00:44.410 \longrightarrow 00:00:46.162$ Discovering knew better understanding

 $00{:}00{:}46.162 --> 00{:}00{:}48.790$ of that biology and and and

NOTE Confidence: 0.86117405

 $00{:}00{:}48.857 \dashrightarrow 00{:}00{:}50.417$ ultimately leveraging that science

NOTE Confidence: 0.86117405

 $00:00:50.417 \longrightarrow 00:00:53.708$ to what is likely to be the next

NOTE Confidence: 0.86117405

 $00:00:53.708 \longrightarrow 00:00:55.460$ generation of amino therapies.

NOTE Confidence: 0.86117405

 $00{:}00{:}55.460 \dashrightarrow 00{:}00{:}58.001$ And we're really very fortunate to have

NOTE Confidence: 0.86117405

 $00:00:58.001 \longrightarrow 00:01:01.381$ Jeff as one of our physician scientists in

NOTE Confidence: 0.86117405

00:01:01.381 --> 00:01:04.380 the center of molecular Italian Colosseum,

NOTE Confidence: 0.86117405

 $00{:}01{:}04.380 \dashrightarrow 00{:}01{:}06.510$ member of the Melanoma program,

NOTE Confidence: 0.86117405

 $00:01:06.510 \longrightarrow 00:01:09.276$ and physician scientists in general at.

NOTE Confidence: 0.86117405

 $00:01:09.280 \longrightarrow 00:01:10.920$ At Yale and Smile also,

NOTE Confidence: 0.86117405

 $00:01:10.920 \longrightarrow 00:01:13.528$ Jeff really excited to hear about your work.

NOTE Confidence: 0.86117405

 $00:01:13.530 \longrightarrow 00:01:17.040$ Turn it over to you.

NOTE Confidence: 0.86117405

 $00{:}01{:}17.040 --> 00{:}01{:}17.370 \ \mathrm{Thank}$

NOTE Confidence: 0.84582025

 $00:01:17.370 \longrightarrow 00:01:19.536$ you so much Charlie, really appreciate

NOTE Confidence: 0.84582025

 $00:01:19.536 \longrightarrow 00:01:22.659$ it and let me just project my slides.

 $00:01:22.660 \longrightarrow 00:01:25.204$ How there we go?

NOTE Confidence: 0.84582025

 $00{:}01{:}25.204 \dashrightarrow 00{:}01{:}27.954$ Yes, thank you so much and thank you

NOTE Confidence: 0.84582025

 $00:01:27.954 \longrightarrow 00:01:29.809$ for the opportunity to speak today.

NOTE Confidence: 0.84582025

00:01:29.810 --> 00:01:32.234 Today I'm going to be talking to you

NOTE Confidence: 0.84582025

 $00:01:32.234 \longrightarrow 00:01:34.398$ about some of the work we've done.

NOTE Confidence: 0.84582025

 $00:01:34.400 \longrightarrow 00:01:36.515$ Targeting double stranded RNA in

NOTE Confidence: 0.84582025

 $00:01:36.515 \longrightarrow 00:01:38.207$ order to overcome immunotherapy

NOTE Confidence: 0.84582025

00:01:38.207 --> 00:01:39.891 resistance and also update on

NOTE Confidence: 0.84582025

 $00{:}01{:}39.891 \dashrightarrow 00{:}01{:}41.685$ other ongoing projects in the lab.

NOTE Confidence: 0.84582025

 $00:01:41.690 \longrightarrow 00:01:45.270$ This is my disclosure slide.

NOTE Confidence: 0.84582025

 $00:01:45.270 \longrightarrow 00:01:48.310$ I wanted to begin with the overall survival

NOTE Confidence: 0.84582025

00:01:48.310 --> 00:01:50.797 curves from the Checkmate 067 trial,

NOTE Confidence: 0.84582025

 $00:01:50.800 \longrightarrow 00:01:54.398$ which is likely familiar to this audience.

NOTE Confidence: 0.84582025

 $00:01:54.400 \longrightarrow 00:01:56.035$ These curves represent survival in

NOTE Confidence: 0.84582025

 $00:01:56.035 \longrightarrow 00:01:57.670$ advanced Melanoma by patients treated

NOTE Confidence: 0.84582025

 $00:01:57.716 \longrightarrow 00:01:59.168$ with immune checkpoint blockade.

 $00:01:59.170 \longrightarrow 00:02:00.193$ In this case,

NOTE Confidence: 0.84582025

 $00{:}02{:}00.193 \dashrightarrow 00{:}02{:}01.898$ with antibodies targeting PD 1C,

NOTE Confidence: 0.84582025

 $00:02:01.900 \longrightarrow 00:02:04.640$ TL A4 or the combination.

NOTE Confidence: 0.84582025

 $00:02:04.640 \longrightarrow 00:02:06.482$ I wanted to start here because

NOTE Confidence: 0.84582025

 $00{:}02{:}06.482 \dashrightarrow 00{:}02{:}08.043$ Melanoma has been something of

NOTE Confidence: 0.84582025

 $00:02:08.043 \longrightarrow 00:02:09.723$ a touchstone for the use of

NOTE Confidence: 0.84582025

 $00:02:09.723 \longrightarrow 00:02:11.310$ checkpoint blockade in solid tumors.

NOTE Confidence: 0.84582025

 $00{:}02{:}11.310 \dashrightarrow 00{:}02{:}12.755$ First indication approved and remains

NOTE Confidence: 0.84582025

 $00:02:12.755 \longrightarrow 00:02:14.836$ one of the indications in which immune

NOTE Confidence: 0.84582025

 $00{:}02{:}14.836 \dashrightarrow 00{:}02{:}16.301$ checkpoint blockade is most effective

NOTE Confidence: 0.84582025

 $00:02:16.301 \longrightarrow 00:02:17.969$ in these data are outstanding,

NOTE Confidence: 0.84582025

 $00:02:17.970 \longrightarrow 00:02:19.788$ particularly when compared with the pre

NOTE Confidence: 0.84582025

 $00:02:19.788 \dashrightarrow 00:02:21.609$ immun
otherapy standard of Care Dakar Busine,

NOTE Confidence: 0.84582025

00:02:21.610 --> 00:02:23.125 which had an overall survival

NOTE Confidence: 0.84582025

 $00:02:23.125 \longrightarrow 00:02:25.600$ of five to 10% at five years.

00:02:25.600 --> 00:02:26.020 However,

NOTE Confidence: 0.84582025

 $00:02:26.020 \longrightarrow 00:02:27.700$ even in this disease,

NOTE Confidence: 0.84582025

00:02:27.700 --> 00:02:29.140 large proportion of patients

NOTE Confidence: 0.84582025

 $00:02:29.140 \longrightarrow 00:02:30.580$ don't experience durable benefit.

NOTE Confidence: 0.84582025

 $00:02:30.580 \longrightarrow 00:02:32.992$ The situation which is which is

NOTE Confidence: 0.84582025

 $00:02:32.992 \longrightarrow 00:02:35.103$ actually more challenging in other

NOTE Confidence: 0.84582025

 $00{:}02{:}35.103 \dashrightarrow 00{:}02{:}37.689$ diseases where responses are less good.

NOTE Confidence: 0.84582025

 $00:02:37.690 \longrightarrow 00:02:39.363$ And this is really the focus of

NOTE Confidence: 0.84582025

 $00{:}02{:}39.363 \dashrightarrow 00{:}02{:}40.811$ our work to improve responses

NOTE Confidence: 0.84582025

 $00:02:40.811 \longrightarrow 00:02:42.815$ in this disease and in others.

NOTE Confidence: 0.8365905

 $00:02:46.340 \longrightarrow 00:02:47.840$ Certainly, however, if you check,

NOTE Confidence: 0.8365905

 $00:02:47.840 \longrightarrow 00:02:49.454$ my blockade is rapidly reshaping the

NOTE Confidence: 0.8365905

 $00:02:49.454 \longrightarrow 00:02:51.420$ landscape of cancer care across indications.

NOTE Confidence: 0.8365905

 $00{:}02{:}51.420 \dashrightarrow 00{:}02{:}53.212$ I was preparing for this talk and I

NOTE Confidence: 0.8365905

 $00:02:53.212 \longrightarrow 00:02:55.762$ had to go through and update this slide

NOTE Confidence: 0.8365905

 $00:02:55.762 \longrightarrow 00:02:57.506$ because indications have nearly doubled

00:02:57.506 --> 00:02:59.106 since its original publication by

NOTE Confidence: 0.8365905

00:02:59.106 --> 00:03:01.494 Tony Ribas and Jed will Chuck in 2018.

NOTE Confidence: 0.8365905

00:03:01.494 --> 00:03:03.150 Although many of us have followed

NOTE Confidence: 0.8365905

 $00:03:03.209 \longrightarrow 00:03:04.879$ this emerging data very closely,

NOTE Confidence: 0.8365905

 $00{:}03{:}04.880 \dashrightarrow 00{:}03{:}07.850$ I have to admit that it gave me pause to

NOTE Confidence: 0.8365905

 $00:03:07.928 \longrightarrow 00:03:11.048$ consider the pace of change in this field.

NOTE Confidence: 0.8365905

 $00:03:11.050 \longrightarrow 00:03:14.249$ The advancement of PD one access approvals

NOTE Confidence: 0.8365905

 $00:03:14.249 \longrightarrow 00:03:16.529$ continues through lymphomas and solid

NOTE Confidence: 0.8365905

 $00:03:16.529 \longrightarrow 00:03:18.629$ tumors of desperate tissue origins.

NOTE Confidence: 0.8365905

 $00:03:18.630 \longrightarrow 00:03:20.414$ Combination approaches have also

NOTE Confidence: 0.8365905

 $00{:}03{:}20.414 \dashrightarrow 00{:}03{:}21.752$ proliferated, including approaches,

NOTE Confidence: 0.8365905

00:03:21.752 --> 00:03:23.694 approvals in music, leoma,

NOTE Confidence: 0.8365905

 $00:03:23.694 \longrightarrow 00:03:26.110$ breast cancer, and others.

NOTE Confidence: 0.8365905

 $00:03:26.110 \longrightarrow 00:03:27.385$ Successful combinations include

NOTE Confidence: 0.8365905

 $00:03:27.385 \longrightarrow 00:03:29.085$ combinations of checkpoint inhibitors

 $00:03:29.085 \longrightarrow 00:03:30.920$ with other checkpoint inhibitors,

NOTE Confidence: 0.8365905

 $00{:}03{:}30.920 \dashrightarrow 00{:}03{:}32.228$ chemotherapies and touristing

NOTE Confidence: 0.8365905

 $00:03:32.228 \longrightarrow 00:03:33.100$ kinese inhibitors,

NOTE Confidence: 0.8365905

00:03:33.100 --> 00:03:35.716 and notably many here at Yale,

NOTE Confidence: 0.8365905

 $00:03:35.720 \longrightarrow 00:03:38.779$ have played critical roles in this dance.

NOTE Confidence: 0.84251946

 $00:03:41.580 \longrightarrow 00:03:43.230$ Still, for all the advances,

NOTE Confidence: 0.84251946

 $00:03:43.230 \longrightarrow 00:03:45.726$ there have been a lot of failures and

NOTE Confidence: 0.84251946

 $00:03:45.726 \longrightarrow 00:03:48.158$ there remain a lot of ongoing challenges.

NOTE Confidence: 0.84251946

 $00{:}03{:}48.160 \to 00{:}03{:}50.128$ For most, many patients don't respond,

NOTE Confidence: 0.84251946

00:03:50.130 --> 00:03:51.780 indeed, considered across all indications,

NOTE Confidence: 0.84251946

 $00{:}03{:}51.780 \dashrightarrow 00{:}03{:}53.894$ most patients don't respond in a few

NOTE Confidence: 0.84251946

 $00:03:53.894 \longrightarrow 00:03:55.885$ of the response rates listed are

NOTE Confidence: 0.84251946

 $00:03:55.885 \longrightarrow 00:03:57.937$ really based on earlier trials that

NOTE Confidence: 0.84251946

 $00:03:57.937 \longrightarrow 00:04:00.028$ likely overestimated response rates.

NOTE Confidence: 0.84251946

 $00:04:00.030 \longrightarrow 00:04:01.920$ Many of them also include

NOTE Confidence: 0.84251946

 $00:04:01.920 \longrightarrow 00:04:02.676$ biomarker cutpoints,

00:04:02.680 --> 00:04:07.189 PDL 1 positive ITI and this sort of thing.

NOTE Confidence: 0.84251946

 $00{:}04{:}07.190 \dashrightarrow 00{:}04{:}09.233$ And in my mind there are really a couple

NOTE Confidence: 0.84251946

 $00:04:09.233 \longrightarrow 00:04:11.319$ of big areas in which we can improve.

NOTE Confidence: 0.84251946

 $00:04:11.320 \longrightarrow 00:04:14.365$ 1st for all of the new indications,

NOTE Confidence: 0.84251946

 $00:04:14.370 \longrightarrow 00:04:16.710$ few combinations involving novel

NOTE Confidence: 0.84251946

00:04:16.710 --> 00:04:19.050 targets have been approved.

NOTE Confidence: 0.84251946

 $00:04:19.050 \longrightarrow 00:04:21.918$ 2nd, we have a limited mechanistic

NOTE Confidence: 0.84251946

 $00:04:21.918 \longrightarrow 00:04:24.849$ understanding of how these agents work.

NOTE Confidence: 0.84251946

00:04:24.850 --> 00:04:25.130 Accordingly,

NOTE Confidence: 0.84251946

 $00:04:25.130 \longrightarrow 00:04:27.090$ the biomarkers that we used to deploy

NOTE Confidence: 0.84251946

 $00{:}04{:}27.090 \dashrightarrow 00{:}04{:}29.009$ them lack sensitivity and specificity,

NOTE Confidence: 0.84251946

 $00:04:29.010 \longrightarrow 00:04:31.810$ and there's not a great way to rationally

NOTE Confidence: 0.84251946

 $00{:}04{:}31.810 \dashrightarrow 00{:}04{:}33.488$ prioritize combinations with anti PD one.

NOTE Confidence: 0.84928113

 $00:04:35.570 \longrightarrow 00:04:37.418$ So it's worth considering for a moment what

NOTE Confidence: 0.84928113

00:04:37.418 --> 00:04:39.139 we've learned about response and resistance,

 $00:04:39.140 \longrightarrow 00:04:40.876$ not so much in the interest of

NOTE Confidence: 0.84928113

 $00{:}04{:}40.876 \dashrightarrow 00{:}04{:}42.184$ an extensive overview for which

NOTE Confidence: 0.84928113

00:04:42.184 --> 00:04:43.474 we wouldn't have time today,

NOTE Confidence: 0.84928113

 $00{:}04{:}43.480 \dashrightarrow 00{:}04{:}45.688$ but in terms of the pathways that have

NOTE Confidence: 0.84928113

 $00:04:45.688 \longrightarrow 00:04:48.308$ given the strongest clinical signals to date.

NOTE Confidence: 0.84928113

 $00:04:48.310 \longrightarrow 00:04:50.606$ The data shown here are from the study

NOTE Confidence: 0.84928113

 $00:04:50.606 \longrightarrow 00:04:53.172$ by Merck of over 300 different patients

NOTE Confidence: 0.84928113

 $00:04:53.172 \longrightarrow 00:04:55.530$ across 22 different tumor tissue types.

NOTE Confidence: 0.84928113

 $00{:}04{:}55.530 \dashrightarrow 00{:}04{:}59.130$ These figures show responses.

NOTE Confidence: 0.84928113

 $00:04:59.130 \longrightarrow 00:05:01.450$ Non response defined as CR

NOTE Confidence: 0.84928113

 $00:05:01.450 \longrightarrow 00:05:04.190$ or PR versus no CR PR.

NOTE Confidence: 0.84928113

 $00{:}05{:}04.190 \dashrightarrow 00{:}05{:}05{:}05{:}942$ When graphed with tumor mutational burden

NOTE Confidence: 0.84928113

 $00:05:05.942 \longrightarrow 00:05:09.354$ on the Y axis and a gene expression profile

NOTE Confidence: 0.84928113

 $00{:}05{:}09.354 \dashrightarrow 00{:}05{:}10.668$ representing tumor microenvironment,

NOTE Confidence: 0.84928113

 $00{:}05{:}10.670 \dashrightarrow 00{:}05{:}12.470$ inflammation kind of T cell

NOTE Confidence: 0.84928113

 $00:05:12.470 \longrightarrow 00:05:14.270$ inflammation on the X axis.

 $00:05:14.270 \longrightarrow 00:05:17.258$ The genes in this profile are listed in the

NOTE Confidence: 0.84928113

 $00{:}05{:}17.258 \dashrightarrow 00{:}05{:}20.028$ upper right here and notably include PDL,

NOTE Confidence: 0.84928113

 $00:05:20.030 \longrightarrow 00:05:23.333$ one among them as well as several MHC related

NOTE Confidence: 0.84928113

 $00:05:23.333 \longrightarrow 00:05:26.147$ genes and kind of T cell related genes.

NOTE Confidence: 0.82015085

 $00:05:28.360 \longrightarrow 00:05:30.226$ Tumor mutational burden, as you know,

NOTE Confidence: 0.82015085

 $00:05:30.230 \longrightarrow 00:05:32.148$ is often used as a surrogate for

NOTE Confidence: 0.82015085

 $00:05:32.148 \longrightarrow 00:05:34.071$ too many antigens and the gene

NOTE Confidence: 0.82015085

 $00:05:34.071 \longrightarrow 00:05:35.455$ expression profile really points

NOTE Confidence: 0.82015085

 $00:05:35.455 \longrightarrow 00:05:37.100$ to information of the tumor,

NOTE Confidence: 0.82015085

 $00{:}05{:}37.100 \dashrightarrow 00{:}05{:}38.858$ micro environment and the authors make

NOTE Confidence: 0.82015085

 $00{:}05{:}38.858 \mathrel{\text{--}}{>} 00{:}05{:}40.840$ two points that are important here.

NOTE Confidence: 0.82015085

 $00:05:40.840 \longrightarrow 00:05:43.003$ First, that these are two of the

NOTE Confidence: 0.82015085

 $00{:}05{:}43.003 \dashrightarrow 00{:}05{:}44.580$ strongest predictors they could find.

NOTE Confidence: 0.82015085

00:05:44.580 --> 00:05:46.230 Reviewing one of the largest

NOTE Confidence: 0.82015085

 $00:05:46.230 \longrightarrow 00:05:47.550$ and most comprehensive datasets

 $00:05:47.550 \longrightarrow 00:05:48.950$ that existed at the time.

NOTE Confidence: 0.82015085

 $00:05:48.950 \longrightarrow 00:05:50.534$ Really, it's telling us in second

NOTE Confidence: 0.82015085

 $00:05:50.534 \longrightarrow 00:05:52.409$ that they appear to predict response

NOTE Confidence: 0.82015085

 $00:05:52.409 \longrightarrow 00:05:53.937$ independently of one another.

NOTE Confidence: 0.82015085

 $00:05:53.940 \longrightarrow 00:05:56.271$ That is to say that although the

NOTE Confidence: 0.82015085

00:05:56.271 --> 00:05:58.379 best responses are in that kind of.

NOTE Confidence: 0.82015085

 $00:05:58.380 \longrightarrow 00:06:01.334$ Upper right quadrant that you actually get

NOTE Confidence: 0.82015085

 $00:06:01.334 \longrightarrow 00:06:04.567$ a good number of responses in a T cell.

NOTE Confidence: 0.82015085

 $00{:}06{:}04.570 \dashrightarrow 00{:}06{:}06.074$ Inflamed only micro environment,

NOTE Confidence: 0.82015085

 $00:06:06.074 \longrightarrow 00:06:09.219$ or in TMB only TB high only tumors.

NOTE Confidence: 0.7979447

 $00:06:11.570 \longrightarrow 00:06:13.226$ For the sake of time today,

NOTE Confidence: 0.7979447

 $00:06:13.230 \longrightarrow 00:06:14.910$ I won't spend a lot of time

NOTE Confidence: 0.7979447

 $00:06:14.910 \longrightarrow 00:06:16.540$ on TMB or antigen load,

NOTE Confidence: 0.7979447

 $00:06:16.540 \longrightarrow 00:06:18.190$ so it's obviously an important consideration.

NOTE Confidence: 0.7979447

00:06:18.190 --> 00:06:20.122 Instead, I'm just going to talk about

NOTE Confidence: 0.7979447

00:06:20.122 --> 00:06:20.950 tumor microenvironment information,

 $00:06:20.950 \longrightarrow 00:06:23.158$ which is really the focus of our lab.

NOTE Confidence: 0.7979447

 $00{:}06{:}23.160 \dashrightarrow 00{:}06{:}24.532$ Aside from the work by the Merck

NOTE Confidence: 0.7979447

 $00:06:24.532 \longrightarrow 00:06:26.571$ Group A number of lines of evidence

NOTE Confidence: 0.7979447

 $00:06:26.571 \longrightarrow 00:06:27.975$ have established inadequate tumor

NOTE Confidence: 0.7979447

 $00:06:27.975 \longrightarrow 00:06:28.677$ microenvironment information.

NOTE Confidence: 0.7979447

 $00:06:28.680 \longrightarrow 00:06:30.661$ As one of the most prominent mechanisms

NOTE Confidence: 0.7979447

 $00:06:30.661 \longrightarrow 00:06:33.410$ of resistance to me, no therapy.

NOTE Confidence: 0.7979447

 $00:06:33.410 \longrightarrow 00:06:34.200$ Most dramatically,

NOTE Confidence: 0.7979447

 $00:06:34.200 \longrightarrow 00:06:36.965$ this occurs in immune desert type tumors,

NOTE Confidence: 0.7979447

 $00{:}06{:}36.970 \dashrightarrow 00{:}06{:}39.346$ which entirely lack T cell in filtrate,

NOTE Confidence: 0.7979447

 $00:06:39.350 \longrightarrow 00:06:40.602$ as depicted here. However,

NOTE Confidence: 0.7979447

 $00:06:40.602 \longrightarrow 00:06:43.830$ it can also occur in a different phenotype.

NOTE Confidence: 0.7979447

 $00{:}06{:}43.830 \dashrightarrow 00{:}06{:}45.146$ The so-called immune excluded

NOTE Confidence: 0.7979447

00:06:45.146 --> 00:06:47.120 tumors which have anti tumor immune

NOTE Confidence: 0.7979447

 $00:06:47.171 \longrightarrow 00:06:48.739$ cells at the site of the tumor,

 $00:06:48.740 \longrightarrow 00:06:49.900$ although they are excluded

NOTE Confidence: 0.7979447

 $00:06:49.900 \longrightarrow 00:06:51.060$ from the tumor core,

NOTE Confidence: 0.7979447

00:06:51.060 --> 00:06:52.840 either by physical barriers

NOTE Confidence: 0.7979447

 $00:06:52.840 \longrightarrow 00:06:54.620$ or by immune signaling.

NOTE Confidence: 0.7979447

00:06:54.620 --> 00:06:54.932 Finally,

NOTE Confidence: 0.7979447

 $00:06:54.932 \longrightarrow 00:06:57.428$ we believe that there is the T cell

NOTE Confidence: 0.7979447

 $00:06:57.428 \longrightarrow 00:06:59.426$ inflamed type of tumor that have

NOTE Confidence: 0.7979447

00:06:59.426 --> 00:07:01.046 diffuse infiltration of T cells

NOTE Confidence: 0.7979447

 $00{:}07{:}01.111 \dashrightarrow 00{:}07{:}02.938$ that tend to be PD L1 positive,

NOTE Confidence: 0.7979447

 $00:07:02.940 \longrightarrow 00:07:05.845$ and these are the ones that we

NOTE Confidence: 0.7979447

 $00{:}07{:}05.845 \to 00{:}07{:}08.559$ believe respond best to immunother apy.

NOTE Confidence: 0.7979447

 $00:07:08.560 \longrightarrow 00:07:09.202$ To date,

NOTE Confidence: 0.7979447

 $00:07:09.202 \longrightarrow 00:07:10.807$ there's been progress in identifying

NOTE Confidence: 0.7979447

 $00{:}07{:}10.807 \dashrightarrow 00{:}07{:}12.686$ the rapeutic strategies to enhance this

NOTE Confidence: 0.7979447

00:07:12.686 --> 00:07:13.988 tumor microenvironment information,

NOTE Confidence: 0.7979447

 $00:07:13.990 \longrightarrow 00:07:16.144$ many of which involve either real

 $00:07:16.144 \longrightarrow 00:07:18.355$ or simulated infection of the tumor

NOTE Confidence: 0.7979447

 $00{:}07{:}18.355 \dashrightarrow 00{:}07{:}20.135$ to trigger anti tumor immunity,

NOTE Confidence: 0.7979447

 $00:07:20.140 \longrightarrow 00:07:22.429$ and I think about them in kind

NOTE Confidence: 0.7979447

 $00:07:22.429 \longrightarrow 00:07:24.130$ of two big buckets.

NOTE Confidence: 0.7979447

 $00:07:24.130 \longrightarrow 00:07:26.224$ The first is the provision of

NOTE Confidence: 0.7979447

 $00:07:26.224 \longrightarrow 00:07:27.620$ exogenous sources that mimic

NOTE Confidence: 0.7979447

 $00:07:27.690 \longrightarrow 00:07:29.560$ nucleic acid ligands to tumors.

NOTE Confidence: 0.7979447

 $00:07:29.560 \longrightarrow 00:07:31.008$ This includes sting agonist,

NOTE Confidence: 0.7979447

00:07:31.008 --> 00:07:33.180 MDA 5 or rig I agonist,

NOTE Confidence: 0.7979447

 $00:07:33.180 \longrightarrow 00:07:34.992$ double stranded RNA sensing

NOTE Confidence: 0.7979447

00:07:34.992 --> 00:07:37.257 pathways and uncle lytic viruses.

NOTE Confidence: 0.7979447

 $00:07:37.260 \longrightarrow 00:07:40.445$ The other is the induction of endogenous

NOTE Confidence: 0.7979447

00:07:40.445 --> 00:07:42.900 sources of nucleic acid ligands,

NOTE Confidence: 0.7979447

 $00:07:42.900 \longrightarrow 00:07:44.310$ primarily endogenous retroviruses,

NOTE Confidence: 0.7979447

 $00:07:44.310 \longrightarrow 00:07:47.130$ although others have been published recently,

 $00:07:47.130 \longrightarrow 00:07:50.630$ alualu repeats in humans.

NOTE Confidence: 0.7979447

 $00{:}07{:}50.630 \dashrightarrow 00{:}07{:}52.952$ And examples of this include a

NOTE Confidence: 0.7979447

 $00:07:52.952 \longrightarrow 00:07:55.450$ deciding in CDK 46 inhibitors.

NOTE Confidence: 0.781458700000001

 $00:07:57.470 \longrightarrow 00:08:00.067$ So my interest in turning these cold

NOTE Confidence: 0.781458700000001

 $00{:}08{:}00.067 \dashrightarrow 00{:}08{:}01.968$ microenvironments hot and kind of

NOTE Confidence: 0.781458700000001

00:08:01.968 --> 00:08:04.152 providing these logins to tuners really

NOTE Confidence: 0.781458700000001

 $00:08:04.152 \longrightarrow 00:08:06.624$ developed out of work in the Canings

NOTE Confidence: 0.781458700000001

00:08:06.624 --> 00:08:08.665 lab was finishing my postdoctoral work

NOTE Confidence: 0.781458700000001

 $00:08:08.665 \longrightarrow 00:08:11.220$ there and through the type of experiment

NOTE Confidence: 0.781458700000001

 $00:08:11.220 \longrightarrow 00:08:13.716$ that I'm showing here on the left,

NOTE Confidence: 0.781458700000001

 $00:08:13.720 \longrightarrow 00:08:16.240$ you have kind of a transplantable tumor

NOTE Confidence: 0.781458700000001

 $00{:}08{:}16.240 \dashrightarrow 00{:}08{:}18.770$ cell line, something like a B16 Melanoma,

NOTE Confidence: 0.781458700000001

 $00:08:18.770 \longrightarrow 00:08:21.658$ and the way the experiment works is to,

NOTE Confidence: 0.781458700000001

 $00:08:21.660 \longrightarrow 00:08:23.998$ in fact, that cell line with a

NOTE Confidence: 0.781458700000001

00:08:23.998 --> 00:08:26.273 library of CRISPR CAS 9 guides

NOTE Confidence: 0.781458700000001

00:08:26.273 --> 00:08:27.865 that knockout thousands of.

 $00:08:27.870 \longrightarrow 00:08:29.220$ Immunologically relevant genes.

NOTE Confidence: 0.781458700000001

 $00:08:29.220 \longrightarrow 00:08:32.789$ In the genome and then to kind of

NOTE Confidence: 0.781458700000001

 $00:08:32.789 \longrightarrow 00:08:34.835$ select those guides until you have

NOTE Confidence: 0.781458700000001

 $00:08:34.835 \longrightarrow 00:08:37.620$ a pool of knockout tumor cell lines

NOTE Confidence: 0.781458700000001

 $00:08:37.620 \longrightarrow 00:08:40.146$ that is then implanted into mice

NOTE Confidence: 0.781458700000001

00:08:40.150 --> 00:08:41.994 under increasing immune selective

NOTE Confidence: 0.781458700000001

00:08:41.994 --> 00:08:43.838 pressure from extremely immunodeficient

NOTE Confidence: 0.781458700000001

 $00{:}08{:}43.838 \dashrightarrow 00{:}08{:}46.381$ mice that lack T cells to mice with

NOTE Confidence: 0.781458700000001

00:08:46.381 --> 00:08:47.870 an intact immune cell system.

NOTE Confidence: 0.781458700000001

 $00:08:47.870 \longrightarrow 00:08:49.710$ 2 mice treated with immunotherapy.

NOTE Confidence: 0.781458700000001 00:08:49.710 --> 00:08:50.802 In this case, NOTE Confidence: 0.781458700000001

 $00:08:50.802 \longrightarrow 00:08:52.622$ the irradiated GM CSF secreting

NOTE Confidence: 0.781458700000001

00:08:52.622 --> 00:08:54.500 whole tumor cell vaccine GBX,

NOTE Confidence: 0.781458700000001

 $00{:}08{:}54.500 \dashrightarrow 00{:}08{:}57.636$ plus anti PD one kind of strong

NOTE Confidence: 0.781458700000001

 $00:08:57.636 \longrightarrow 00:08:58.980$ immunotherapy treatment regiment.

 $00{:}08{:}58.980 \dashrightarrow 00{:}09{:}01.320$ Would grow these tumors for about

NOTE Confidence: 0.781458700000001

 $00:09:01.320 \longrightarrow 00:09:03.899$ 2 weeks and then remove them.

NOTE Confidence: 0.781458700000001

 $00:09:03.900 \longrightarrow 00:09:06.360$ Harvested tumors and sequence the sequence.

NOTE Confidence: 0.781458700000001

 $00:09:06.360 \longrightarrow 00:09:08.544$ The barcodes sequence the guides using

NOTE Confidence: 0.781458700000001

 $00:09:08.544 \longrightarrow 00:09:10.870$ them as barcodes and quantitating.

NOTE Confidence: 0.781458700000001

00:09:10.870 --> 00:09:12.595 Enrichment and depletion of each

NOTE Confidence: 0.781458700000001

00:09:12.595 --> 00:09:14.810 guy and the way we interpreted

NOTE Confidence: 0.781458700000001

 $00:09:14.810 \longrightarrow 00:09:17.288$ this experiment was to compare high

NOTE Confidence: 0.781458700000001

 $00{:}09{:}17.288 \dashrightarrow 00{:}09{:}19.889$ to lower mean selective pressure.

NOTE Confidence: 0.781458700000001

 $00:09:19.890 \longrightarrow 00:09:21.530$ So immunotherapy treated to

NOTE Confidence: 0.781458700000001

 $00{:}09{:}21.530 \dashrightarrow 00{:}09{:}23.110$ immunodeficient mice, for example,

NOTE Confidence: 0.781458700000001

 $00:09:23.110 \longrightarrow 00:09:25.390$ and to interpret it that guides

NOTE Confidence: 0.781458700000001

 $00:09:25.390 \longrightarrow 00:09:26.860$ that were depleted.

NOTE Confidence: 0.781458700000001

00:09:26.860 --> 00:09:28.090 Comparing height alone,

NOTE Confidence: 0.781458700000001

00:09:28.090 --> 00:09:30.140 selective pressure represented Jews that,

NOTE Confidence: 0.781458700000001

 $00:09:30.140 \longrightarrow 00:09:32.060$ when deleted, convert sensitivity.

 $00:09:32.060 \longrightarrow 00:09:33.980$ To the mean system,

NOTE Confidence: 0.781458700000001

 $00:09:33.980 \longrightarrow 00:09:36.208$ and therefore potential targets

NOTE Confidence: 0.781458700000001

 $00:09:36.208 \longrightarrow 00:09:37.879$ for combination therapy.

NOTE Confidence: 0.781458700000001

 $00{:}09{:}38.654 \dashrightarrow 00{:}09{:}40.589$ guides that were enriched under

NOTE Confidence: 0.781458700000001

 $00:09:40.589 \longrightarrow 00:09:42.120$ strongly selective pressure suggested

NOTE Confidence: 0.781458700000001

 $00:09:42.120 \longrightarrow 00:09:44.304$ to US jeans that were lost made

NOTE Confidence: 0.781458700000001

 $00:09:44.304 \longrightarrow 00:09:45.790$ tumors resistant to new therapy.

NOTE Confidence: 0.8393771

 $00{:}09{:}48.360 \dashrightarrow 00{:}09{:}50.264$ And a lot of the targets that we

NOTE Confidence: 0.8393771

 $00:09:50.264 \longrightarrow 00:09:52.047$ found this way actually ended up in

NOTE Confidence: 0.8393771

00:09:52.047 --> 00:09:54.178 the kind of realm of double stranded

NOTE Confidence: 0.8393771

00:09:54.178 --> 00:09:56.238 RNA sensing or antiviral triggering,

NOTE Confidence: 0.8393771

 $00{:}09{:}56.240 \dashrightarrow 00{:}09{:}58.445$ and this is really the area that

NOTE Confidence: 0.8393771

 $00{:}09{:}58.445 \dashrightarrow 00{:}10{:}00.799$ I focused on throughout my time.

NOTE Confidence: 0.8393771

 $00:10:00.800 \longrightarrow 00:10:03.329$ And this guy is thinking because a lot of

 $00:10:03.329 \longrightarrow 00:10:05.619$ what we know about viral infection comes

NOTE Confidence: 0.8393771

 $00{:}10{:}05.619 \dashrightarrow 00{:}10{:}08.079$ from the study of exonerees viruses.

NOTE Confidence: 0.8393771

 $00:10:08.080 \longrightarrow 00:10:11.020$ But of course the genome is comprised

NOTE Confidence: 0.8393771

 $00:10:11.020 \longrightarrow 00:10:13.656$ largely of repetitive elements that have

NOTE Confidence: 0.8393771

 $00:10:13.656 \longrightarrow 00:10:16.694$ the potential to form double stranded RNA.

NOTE Confidence: 0.8393771

 $00:10:16.700 \longrightarrow 00:10:18.855$ These could be small interspersed

NOTE Confidence: 0.8393771

 $00{:}10{:}18.855 \dashrightarrow 00{:}10{:}21.010$ nuclear elements and obvious retrovirus.

NOTE Confidence: 0.8393771

00:10:21.010 --> 00:10:23.158 Endogenous retroviruses are long

NOTE Confidence: 0.8393771

 $00{:}10{:}23.158 \dashrightarrow 00{:}10{:}26.380$ interspersed nuclear elements or or others.

NOTE Confidence: 0.8393771

 $00:10:26.380 \longrightarrow 00:10:28.788$ And so we considered that that we've

NOTE Confidence: 0.8393771

 $00{:}10{:}28.788 \mathrel{--}{>} 00{:}10{:}30.879$ Co evolved with these elements.

NOTE Confidence: 0.8393771

 $00:10:30.880 \longrightarrow 00:10:32.656$ With these kind of viral remnants

NOTE Confidence: 0.8393771

 $00:10:32.656 \longrightarrow 00:10:34.732$ in many cases and ourselves have

NOTE Confidence: 0.8393771

 $00{:}10{:}34.732 \dashrightarrow 00{:}10{:}36.817$ developed systems to regulate double

NOTE Confidence: 0.8393771

 $00:10:36.817 \longrightarrow 00:10:38.966$ stranded RNA sensing to distinguish

NOTE Confidence: 0.8393771

 $00:10:38.966 \longrightarrow 00:10:40.630$ between double stranded RNA.

 $00:10:40.630 \longrightarrow 00:10:43.162$ That's a result of normal cellular

NOTE Confidence: 0.8393771

 $00:10:43.162 \longrightarrow 00:10:45.460$ activity and exogenous viral threats.

NOTE Confidence: 0.8393771

00:10:45.460 --> 00:10:47.780 And so we thought that by targeting some

NOTE Confidence: 0.8393771

 $00:10:47.780 \longrightarrow 00:10:50.587$ of the genes that control this regulation,

NOTE Confidence: 0.8393771

 $00{:}10{:}50.590 \dashrightarrow 00{:}10{:}52.300$ we might sensitize tumor cells

NOTE Confidence: 0.8393771

 $00:10:52.300 \longrightarrow 00:10:53.326$ to tumor therapy.

NOTE Confidence: 0.8393771

 $00:10:53.330 \longrightarrow 00:10:55.717$ Trigger this kind of anti virus state.

NOTE Confidence: 0.78675884

 $00{:}10{:}57.800 \dashrightarrow 00{:}11{:}00.537$ And the top hits that we discovered

NOTE Confidence: 0.78675884

 $00:11:00.537 \longrightarrow 00:11:02.963$ through this process in the antiviral

NOTE Confidence: 0.78675884

00:11:02.963 --> 00:11:04.928 sensing arena was this paid.

NOTE Confidence: 0.78675884

 $00:11:04.930 \longrightarrow 00:11:07.162$ R18 R is an adenosine deaminase

NOTE Confidence: 0.78675884

 $00{:}11{:}07.162 \dashrightarrow 00{:}11{:}09.680$ that acts on double stranded RNA.

NOTE Confidence: 0.78675884

 $00{:}11{:}09.680 \dashrightarrow 00{:}11{:}12.445$ It has a long cytoplasmic P-150 isoform.

NOTE Confidence: 0.78675884

 $00:11:12.450 \longrightarrow 00:11:15.408$ That's interferon inducible and a short.

NOTE Confidence: 0.78675884

 $00:11:15.410 \longrightarrow 00:11:18.590$ Constitu Tively Express P110I support him.

00:11:18.590 --> 00:11:20.758 The main known function of edar is to

NOTE Confidence: 0.78675884

 $00:11:20.758 \longrightarrow 00:11:22.284$ catalyze the conversion of adenosine

NOTE Confidence: 0.78675884

 $00{:}11{:}22.284 \dashrightarrow 00{:}11{:}24.720$ to in a scene and double stranded RNA.

NOTE Confidence: 0.78675884

 $00:11:24.720 \longrightarrow 00:11:27.264$ And it's thought that in so doing it

NOTE Confidence: 0.78675884

 $00:11:27.264 \longrightarrow 00:11:29.630$ prevents double stranded RNA sensing in

NOTE Confidence: 0.78675884

 $00:11:29.630 \longrightarrow 00:11:31.705$ the triggering of antiviral immunity.

NOTE Confidence: 0.78675884

00:11:31.710 --> 00:11:33.024 Kind of autoimmunity.

NOTE Confidence: 0.78675884

00:11:33.024 --> 00:11:33.462 Accordingly,

NOTE Confidence: 0.78675884

 $00{:}11{:}33.462 {\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}} 00{:}11{:}36.090$ there is an autoimmune syndrome called

NOTE Confidence: 0.78675884

00:11:36.150 --> 00:11:38.310 Acardi Goutieres syndrome that is

NOTE Confidence: 0.78675884

 $00{:}11{:}38.310 \dashrightarrow 00{:}11{:}40.038$ associated with biallelic mutations

NOTE Confidence: 0.78675884

 $00{:}11{:}40.038 \to 00{:}11{:}42.510$ of a Darwin on the catalytic domain.

NOTE Confidence: 0.78675884

00:11:42.510 --> 00:11:44.586 It can be quite severe effects

NOTE Confidence: 0.78675884

 $00:11:44.586 \longrightarrow 00:11:46.660$ children and mimics viral infection.

NOTE Confidence: 0.78675884

00:11:46.660 --> 00:11:47.452 However, Interestingly,

NOTE Confidence: 0.78675884

 $00:11:47.452 \longrightarrow 00:11:49.432$ the parents of affected patients

00:11:49.432 --> 00:11:51.818 who have monolith mutations in the

NOTE Confidence: 0.78675884

00:11:51.818 --> 00:11:53.718 catalytic domain have evidence of

NOTE Confidence: 0.78675884

 $00:11:53.718 \longrightarrow 00:11:55.194$ increased signatures of interferon

NOTE Confidence: 0.78675884

00:11:55.194 --> 00:11:56.839 gene expression in the blood,

NOTE Confidence: 0.78675884

00:11:56.840 --> 00:11:59.096 but have no detectable disease phenotype,

NOTE Confidence: 0.78675884

 $00{:}11{:}59.100 \dashrightarrow 00{:}12{:}01.739$ suggesting that there's a gene dose effect.

NOTE Confidence: 0.8696512

 $00:12:03.950 \longrightarrow 00:12:05.654$ So to begin to validate our

NOTE Confidence: 0.8696512

 $00:12:05.654 \longrightarrow 00:12:07.900$ one as a potential drug target

NOTE Confidence: 0.8696512

 $00:12:07.900 \longrightarrow 00:12:09.460$ for combination immunotherapy.

NOTE Confidence: 0.8696512

 $00:12:09.460 \longrightarrow 00:12:11.812$ We created dedicated knockout tumor cell

NOTE Confidence: 0.8696512

 $00{:}12{:}11.812 \dashrightarrow 00{:}12{:}14.650$ lines again using the B16 Melanoma model.

NOTE Confidence: 0.8696512

 $00{:}12{:}14.650 \dashrightarrow 00{:}12{:}16.415$ This transplantable tumor model and

NOTE Confidence: 0.8696512

 $00{:}12{:}16.415 \dashrightarrow 00{:}12{:}18.738$ we implanted these into mice under

NOTE Confidence: 0.8696512

 $00{:}12{:}18.738 \to 00{:}12{:}20.229$ increasing selective pressure.

NOTE Confidence: 0.8696512

 $00:12:20.230 \longrightarrow 00:12:22.580$ It means selective pressure starting

00:12:22.580 --> 00:12:24.460 with the extremely immunodeficient

NOTE Confidence: 0.8696512

 $00{:}12{:}24.460 \to 00{:}12{:}26.881$ nods give gamma mice that entirely

NOTE Confidence: 0.8696512

 $00:12:26.881 \longrightarrow 00:12:28.766$ lack adaptive immunity and have

NOTE Confidence: 0.8696512

00:12:28.833 --> 00:12:30.689 only impaired innate immunity.

NOTE Confidence: 0.8696512

 $00:12:30.690 \longrightarrow 00:12:31.740$ In these mice,

NOTE Confidence: 0.8696512

00:12:31.740 --> 00:12:33.840 looking at the 8 Arnold tumors,

NOTE Confidence: 0.8696512

 $00:12:33.840 \longrightarrow 00:12:35.590$ either P-150 knockouts in Orange,

NOTE Confidence: 0.8696512

 $00:12:35.590 \longrightarrow 00:12:37.666$ P-150 P, 110 knockouts in red

NOTE Confidence: 0.8696512

00:12:37.666 --> 00:12:39.440 compared to controls and Gray,

NOTE Confidence: 0.8696512

 $00:12:39.440 \longrightarrow 00:12:42.240$ and looking at tumor volume on the top,

NOTE Confidence: 0.8696512

 $00:12:42.240 \longrightarrow 00:12:43.990$ or survival in the bottom,

NOTE Confidence: 0.8696512

 $00{:}12{:}43.990 \dashrightarrow 00{:}12{:}46.370$ you can see a sort of minimal

NOTE Confidence: 0.8696512

00:12:46.370 --> 00:12:48.885 decrease in the growth of the

NOTE Confidence: 0.8696512

 $00:12:48.885 \longrightarrow 00:12:51.245$ Darnell tumors compared to controls.

NOTE Confidence: 0.8696512

 $00{:}12{:}51.250 \dashrightarrow 00{:}12{:}54.526$ And a minimal increase in survival.

NOTE Confidence: 0.8696512

 $00:12:54.530 \longrightarrow 00:12:55.164$ In contrast,

00:12:55.164 --> 00:12:57.066 when planted these tumors into wild

NOTE Confidence: 0.8696512

 $00{:}12{:}57.066 \dashrightarrow 00{:}12{:}59.347$ type mice with an intact immune system,

NOTE Confidence: 0.8696512

 $00:12:59.350 \longrightarrow 00:13:01.144$ you see a significant decrease in

NOTE Confidence: 0.8696512

 $00:13:01.144 \longrightarrow 00:13:03.418$ the growth of tumors in a significant

NOTE Confidence: 0.8696512

 $00:13:03.418 \longrightarrow 00:13:05.113$ survival advantage for the mice.

NOTE Confidence: 0.8696512

00:13:05.120 --> 00:13:05.470 Finally,

NOTE Confidence: 0.8696512

 $00:13:05.470 \longrightarrow 00:13:07.570$ when we implemented these tumors into

NOTE Confidence: 0.8696512

00:13:07.570 --> 00:13:09.620 mice and treated with anti PD one,

NOTE Confidence: 0.8696512

 $00:13:09.620 \longrightarrow 00:13:12.315$ we saw a near 100% cure rate for

NOTE Confidence: 0.8696512

 $00:13:12.315 \longrightarrow 00:13:14.870$ mice treated that were a Darnall and

NOTE Confidence: 0.8696512

 $00:13:14.947 \longrightarrow 00:13:17.866$ almost no cures in the control chambers.

NOTE Confidence: 0.8696512

 $00:13:17.870 \longrightarrow 00:13:19.580$ So to start to understand

NOTE Confidence: 0.8696512

 $00:13:19.580 \longrightarrow 00:13:20.948$ the mechanism of this,

NOTE Confidence: 0.8696512

 $00:13:20.950 \longrightarrow 00:13:23.099$ we looked at the tumor micro environment

NOTE Confidence: 0.8696512

 $00:13:23.099 \longrightarrow 00:13:25.212$ of untreated a Darnall and control

00:13:25.212 --> 00:13:27.097 tumors 14 days after implantation,

NOTE Confidence: 0.8696512

 $00{:}13{:}27.100 \dashrightarrow 00{:}13{:}29.431$ and we did this using immuno histo

NOTE Confidence: 0.8696512

00:13:29.431 --> 00:13:31.973 chemistry and as you can see on the

NOTE Confidence: 0.8696512

00:13:31.973 --> 00:13:33.927 left in control tumors you have

NOTE Confidence: 0.8696512

00:13:33.927 --> 00:13:35.997 the immune desert type phenotype.

NOTE Confidence: 0.8696512

00:13:36.000 --> 00:13:38.450 Almost no CD8T cells infiltrating.

NOTE Confidence: 0.8696512

 $00:13:38.450 \longrightarrow 00:13:38.940$ In contrast,

NOTE Confidence: 0.8696512

 $00{:}13{:}38.940 \dashrightarrow 00{:}13{:}40.655$ in a Darnall tumors we saw this

NOTE Confidence: 0.8696512

 $00{:}13{:}40.655 \dashrightarrow 00{:}13{:}42.477$ T cell inflamed phenotype with

NOTE Confidence: 0.8696512

 $00{:}13{:}42.477 \dashrightarrow 00{:}13{:}44.372$ diffuse infiltration of CD8T cells.

NOTE Confidence: 0.8696512

 $00{:}13{:}44.380 \to 00{:}13{:}45.940$ Quantitative here on the right.

NOTE Confidence: 0.78991807

 $00:13:48.570 \longrightarrow 00:13:50.050$ To understand this more deeply,

NOTE Confidence: 0.78991807

00:13:50.050 --> 00:13:52.200 we next perform flow cytometry.

NOTE Confidence: 0.78991807

 $00{:}13{:}52.200 \dashrightarrow 00{:}13{:}54.312$ Again with tumors 14 days after

NOTE Confidence: 0.78991807

00:13:54.312 --> 00:13:56.250 implantation in the untreated setting,

NOTE Confidence: 0.78991807

 $00:13:56.250 \longrightarrow 00:13:58.090$ and as you might predict,

 $00{:}13{:}58.090 \dashrightarrow 00{:}14{:}00.792$ we saw an increase in CD 45

NOTE Confidence: 0.78991807

 $00{:}14{:}00.792 \dashrightarrow 00{:}14{:}03.516$ positive immune cells and a Darnell

NOTE Confidence: 0.78991807

 $00{:}14{:}03.516 \dashrightarrow 00{:}14{:}05.496$ tumors compared with controls.

NOTE Confidence: 0.78991807

00:14:05.500 --> 00:14:08.380 And then looking within the CD 45 compartment

NOTE Confidence: 0.78991807

 $00{:}14{:}08.380 \to 00{:}14{:}11.596$ we saw increases in CD 3 positive T cells,

NOTE Confidence: 0.78991807

00:14:11.600 --> 00:14:13.400 CD 4 positive T cells,

NOTE Confidence: 0.78991807

00:14:13.400 --> 00:14:15.190 CD 8 positive T cells,

NOTE Confidence: 0.78991807

 $00{:}14{:}15.190 \dashrightarrow 00{:}14{:}19.425$ gamma Delta T cells and NK cells.

NOTE Confidence: 0.78991807

 $00:14:19.430 \longrightarrow 00:14:22.382$ In contrast, when we looked at

NOTE Confidence: 0.78991807

00:14:22.382 --> 00:14:23.366 immunosuppressive populations,

NOTE Confidence: 0.78991807

 $00:14:23.370 \longrightarrow 00:14:25.342$ including mdse and tumor

NOTE Confidence: 0.78991807

 $00:14:25.342 \longrightarrow 00:14:26.328$ associated neutrophils,

NOTE Confidence: 0.78991807

 $00:14:26.330 \longrightarrow 00:14:29.792$ we saw significant increases in control

NOTE Confidence: 0.78991807

 $00:14:29.792 \longrightarrow 00:14:33.649$ tumors relative to a Darnall tumors.

NOTE Confidence: 0.78991807

 $00:14:33.650 \longrightarrow 00:14:35.460$ Finally, to probe the micro

 $00:14:35.460 \longrightarrow 00:14:36.908$ environment yet more deeply,

NOTE Confidence: 0.78991807

 $00:14:36.910 \longrightarrow 00:14:39.076$ we perform single cell RNA sequencing.

NOTE Confidence: 0.78991807

 $00:14:39.080 \longrightarrow 00:14:41.495$ These are the populations we

NOTE Confidence: 0.78991807

 $00:14:41.495 \longrightarrow 00:14:43.427$ recovered with myeloid populations

NOTE Confidence: 0.78991807

00:14:43.427 --> 00:14:46.264 in the upper right and T cell

NOTE Confidence: 0.78991807

 $00:14:46.264 \longrightarrow 00:14:48.230$ populations in the bottom left.

NOTE Confidence: 0.78991807

 $00:14:48.230 \longrightarrow 00:14:49.542$ As you can see,

NOTE Confidence: 0.78991807

 $00:14:49.542 \longrightarrow 00:14:51.182$ using these density plots that

NOTE Confidence: 0.78991807

00:14:51.182 --> 00:14:53.259 we adapted for this purpose,

NOTE Confidence: 0.78991807

 $00:14:53.260 \longrightarrow 00:14:55.843$ you get a strong signal from suppressive

NOTE Confidence: 0.78991807

 $00{:}14{:}55.843 \dashrightarrow 00{:}14{:}57.685$ myeloid populations and to like

NOTE Confidence: 0.78991807

 $00:14:57.685 \longrightarrow 00:14:59.713$ macrophages and mdse in control tumors.

NOTE Confidence: 0.78991807

 $00:14:59.720 \longrightarrow 00:15:01.874$ But a weaker signal from inflammatory

NOTE Confidence: 0.78991807

 $00:15:01.874 \longrightarrow 00:15:03.310$ monocytes and CD8T cells.

NOTE Confidence: 0.78991807

 $00:15:03.310 \longrightarrow 00:15:03.894$ In contrast,

NOTE Confidence: 0.78991807

 $00:15:03.894 \longrightarrow 00:15:05.646$ in the 8 Arnold tumors you

 $00:15:05.646 \longrightarrow 00:15:07.880$ have hardly any signal from the

NOTE Confidence: 0.78991807

 $00{:}15{:}07.880 \dashrightarrow 00{:}15{:}09.068$ suppressive minded populations

NOTE Confidence: 0.78991807

 $00:15:09.068 \longrightarrow 00:15:11.456$ and and enrichment of single from

NOTE Confidence: 0.78991807

 $00:15:11.456 \longrightarrow 00:15:13.356$ inflammatory monocytes and CD8T cells.

NOTE Confidence: 0.8100181

 $00{:}15{:}15.920 \dashrightarrow 00{:}15{:}17.795$ To understand what's driving this

NOTE Confidence: 0.8100181

 $00:15:17.795 \longrightarrow 00:15:19.670$ change in the micro environment,

NOTE Confidence: 0.8100181

 $00:15:19.670 \longrightarrow 00:15:21.812$ we wanted to study the double

NOTE Confidence: 0.8100181

00:15:21.812 --> 00:15:23.670 stranded RNA sensing pathways that

NOTE Confidence: 0.8100181

 $00{:}15{:}23.670 \dashrightarrow 00{:}15{:}25.485$ we thought could be associated

NOTE Confidence: 0.8100181

 $00:15:25.485 \longrightarrow 00:15:27.550$ with the phenotypes we'd observed.

NOTE Confidence: 0.8100181

 $00{:}15{:}27.550 \dashrightarrow 00{:}15{:}30.070$ Specifically, we wanted to understand the

NOTE Confidence: 0.8100181

00:15:30.070 --> 00:15:32.800 role of protein kinase are an MD5 rig,

NOTE Confidence: 0.8100181

 $00{:}15{:}32.800 \dashrightarrow 00{:}15{:}35.299$ I and nouns which are both associated

NOTE Confidence: 0.8100181

 $00:15:35.299 \longrightarrow 00:15:37.602$ with his internal sensors of nucleic

NOTE Confidence: 0.8100181

00:15:37.602 --> 00:15:39.547 acids in double stranded RNA,

00:15:39.550 --> 00:15:41.186 specifically protein kinase power

NOTE Confidence: 0.8100181

 $00{:}15{:}41.186 \dashrightarrow 00{:}15{:}42.822$ is associated with translation

NOTE Confidence: 0.8100181

 $00:15:42.822 \longrightarrow 00:15:44.418$ arrest in a pop ptosis.

NOTE Confidence: 0.8100181

 $00:15:44.420 \longrightarrow 00:15:46.810$ Upon binding double stranded RNA.

NOTE Confidence: 0.8100181

 $00:15:46.810 \longrightarrow 00:15:50.058$ Where is MD5 regarding mass induced type

NOTE Confidence: 0.8100181

 $00:15:50.058 \longrightarrow 00:15:53.129$ one interferon in the antiviral state?

NOTE Confidence: 0.8100181

 $00:15:53.130 \longrightarrow 00:15:56.028$ To test the role of each of these sensors,

NOTE Confidence: 0.8100181

 $00:15:56.030 \longrightarrow 00:15:58.094$ we generated a series of double

NOTE Confidence: 0.8100181

 $00{:}15{:}58.094 \dashrightarrow 00{:}15{:}59.844$ and triple knock out tumor cell

NOTE Confidence: 0.8100181

 $00:15:59.844 \longrightarrow 00:16:02.035$ lines and probe some of the in

NOTE Confidence: 0.8100181

 $00{:}16{:}02.035 \dashrightarrow 00{:}16{:}03.896$ vitro phenotypes that we previously

NOTE Confidence: 0.8100181

 $00:16:03.896 \longrightarrow 00:16:06.230$ previously studied in a Darnell tumors.

NOTE Confidence: 0.8100181

00:16:06.230 --> 00:16:06.644 Specifically,

NOTE Confidence: 0.8100181

 $00:16:06.644 \longrightarrow 00:16:09.128$ we looked 1st at growth inhibition.

NOTE Confidence: 0.8100181

 $00:16:09.130 \longrightarrow 00:16:11.200$ So when you stimulate control

NOTE Confidence: 0.8100181

00:16:11.200 --> 00:16:13.270 tumors with interferon in vitro,

 $00:16:13.270 \longrightarrow 00:16:16.959$ there's a slight defect in growth that's

NOTE Confidence: 0.8100181

 $00:16:16.959 \longrightarrow 00:16:20.240$ magnified when you knockout eight R1.

NOTE Confidence: 0.8100181

00:16:20.240 --> 00:16:22.160 Looking at our double knockouts,

NOTE Confidence: 0.8100181

 $00:16:22.160 \longrightarrow 00:16:25.216$ we saw no effect of knocking out rig.

NOTE Confidence: 0.8100181

 $00:16:25.220 \longrightarrow 00:16:27.947$ I MDA 5 or Mens but saw that knocking

NOTE Confidence: 0.8100181

 $00:16:27.947 \longrightarrow 00:16:30.810$ out peak PQR reduced the phenotype to

NOTE Confidence: 0.8100181

 $00:16:30.810 \longrightarrow 00:16:33.649$ the levels observed in control tumors,

NOTE Confidence: 0.8100181

 $00:16:33.650 \longrightarrow 00:16:36.980$ suggesting a PQR was alone.

NOTE Confidence: 0.8100181

 $00:16:36.980 \longrightarrow 00:16:38.840$ Responsible for the in vitro

NOTE Confidence: 0.8100181

 $00{:}16{:}38.840 \dashrightarrow 00{:}16{:}40.700$ growth defect that we'd observed.

NOTE Confidence: 0.8100181

 $00{:}16{:}40.700 \dashrightarrow 00{:}16{:}44.459$ We next looked at interferon beta production.

NOTE Confidence: 0.8100181

 $00:16:44.460 \longrightarrow 00:16:47.439$ And this was again an in vitro Aliza and

NOTE Confidence: 0.8100181

 $00:16:47.439 \longrightarrow 00:16:50.230$ tumor cells stimulated with interferon.

NOTE Confidence: 0.8100181

00:16:50.230 --> 00:16:51.878 As you can see,

NOTE Confidence: 0.8100181

00:16:51.878 --> 00:16:53.526 control tumors produce no

 $00:16:53.526 \longrightarrow 00:16:54.350$ detectable interferon,

NOTE Confidence: 0.8100181

 $00:16:54.350 \longrightarrow 00:16:56.530$ whereas a Darnall tumors

NOTE Confidence: 0.8100181

 $00:16:56.530 \longrightarrow 00:16:58.165$ produces significant quantity.

NOTE Confidence: 0.8100181

 $00:16:58.170 \longrightarrow 00:17:00.006$ This is maintained from the loss

NOTE Confidence: 0.8100181

 $00:17:00.006 \longrightarrow 00:17:02.221$ of Rig I suggesting that guy is

NOTE Confidence: 0.8100181

 $00:17:02.221 \longrightarrow 00:17:03.766$ not involved in the phenotype.

NOTE Confidence: 0.8100181

00:17:03.770 --> 00:17:04.080 However,

NOTE Confidence: 0.8100181

 $00:17:04.080 \longrightarrow 00:17:05.630$ following the loss of MDA,

NOTE Confidence: 0.8100181

 $00{:}17{:}05.630 \dashrightarrow 00{:}17{:}07.918$ Five Man's or PK are you see a

NOTE Confidence: 0.8100181

00:17:07.918 --> 00:17:08.889 significant reduction suggesting

NOTE Confidence: 0.8100181

 $00{:}17{:}08.889 \dashrightarrow 00{:}17{:}10.917$ that all three of these sensors,

NOTE Confidence: 0.8100181

 $00:17:10.920 \longrightarrow 00:17:13.013$ or these two sensors in this adapter

NOTE Confidence: 0.8100181

00:17:13.013 --> 00:17:15.280 have a role to play in phenotype.

NOTE Confidence: 0.767478799999999

00:17:17.480 --> 00:17:19.517 We next wanted to understand which of

NOTE Confidence: 0.767478799999999

 $00:17:19.517 \longrightarrow 00:17:21.313$ these double stranded RNA sensing pathways

NOTE Confidence: 0.767478799999999

 $00:17:21.313 \longrightarrow 00:17:23.770$ was required for the in vivo phenotype of

 $00:17:23.770 \longrightarrow 00:17:25.620$ sensitization to whom checkpoint blockade.

NOTE Confidence: 0.767478799999999

 $00{:}17{:}25.620 \dashrightarrow 00{:}17{:}27.988$ So we took our double and triple knock out

NOTE Confidence: 0.767478799999999

 $00:17:27.988 \longrightarrow 00:17:30.297$ tumor cell lines and implanted them into

NOTE Confidence: 0.767478799999999

00:17:30.297 --> 00:17:33.246 mice, treating the mice with PD one.

NOTE Confidence: 0.767478799999999

00:17:33.250 --> 00:17:34.302 Antibodies targeting PD one,

NOTE Confidence: 0.767478799999999

 $00:17:34.302 \longrightarrow 00:17:37.150$ and as you can see in our control experiment,

NOTE Confidence: 0.767478799999999

00:17:37.150 --> 00:17:39.034 control tumors continue to grow out

NOTE Confidence: 0.767478799999999

 $00:17:39.034 \longrightarrow 00:17:41.461$ as they did previously for us in the

NOTE Confidence: 0.767478799999999

00:17:41.461 --> 00:17:42.846 eternal summers respond well to,

NOTE Confidence: 0.767478799999999

 $00:17:42.850 \longrightarrow 00:17:45.250$ you know, therapy.

NOTE Confidence: 0.767478799999999

 $00{:}17{:}45.250 \dashrightarrow 00{:}17{:}46.850$ This phenotype persisted following

NOTE Confidence: 0.767478799999999

00:17:46.850 --> 00:17:49.898 loss of PQR, suggesting that PQR is

NOTE Confidence: 0.767478799999999

 $00{:}17{:}49.898 \dashrightarrow 00{:}17{:}52.670$ alone not required for the phenotype.

NOTE Confidence: 0.767478799999999 00:17:52.670 --> 00:17:53.274 Similarly. NOTE Confidence: 0.767478799999999

00:17:53.274 --> 00:17:56.898 It persisted following loss of MD5,

 $00:17:56.900 \longrightarrow 00:17:59.924$ suggesting MDA 5 alone does not

NOTE Confidence: 0.767478799999999

 $00:17:59.924 \longrightarrow 00:18:01.436$ explain the phenotype.

NOTE Confidence: 0.767478799999999 00:18:01.440 --> 00:18:01.767 However. NOTE Confidence: 0.767478799999999

00:18:01.767 --> 00:18:03.729 Following the deletion of both PK

NOTE Confidence: 0.767478799999999

 $00:18:03.729 \longrightarrow 00:18:05.992$ are in MDA 5 together with eight

NOTE Confidence: 0.767478799999999

 $00:18:05.992 \longrightarrow 00:18:08.262$ or one we no longer observe any

NOTE Confidence: 0.767478799999999

 $00:18:08.262 \longrightarrow 00:18:10.207$ difference between the growth of

NOTE Confidence: 0.767478799999999

 $00{:}18{:}10.207 \dashrightarrow 00{:}18{:}12.262$ eight R1 knowledge control tumors

 $00{:}18{:}12.262 \dashrightarrow 00{:}18{:}13.738$ treated with immunotherapy.

NOTE Confidence: 0.767478799999999 00:18:13.738 --> 00:18:14.230 Together, NOTE Confidence: 0.767478799999999

 $00:18:14.230 \longrightarrow 00:18:16.408$ these results suggested to us that

NOTE Confidence: 0.767478799999999

 $00:18:16.408 \longrightarrow 00:18:18.758$ growth inhibition by PQR or antiviral

NOTE Confidence: 0.767478799999999

 $00:18:18.758 \longrightarrow 00:18:21.266$ sensing by MDA 5 amounts sufficient

 $00:18:21.266 \longrightarrow 00:18:23.052$ mediate sensitivity to no therapy

NOTE Confidence: 0.767478799999999

 $00:18:23.052 \longrightarrow 00:18:25.117$ but that at least one is required.

NOTE Confidence: 0.782579

 $00:18:28.290 \longrightarrow 00:18:30.270$ We next wanted to understand which

00:18:30.270 --> 00:18:32.002 double stranded RNA sensing pathway

NOTE Confidence: 0.782579

 $00{:}18{:}32.002 \dashrightarrow 00{:}18{:}34.114$ was required for the enhanced community

NOTE Confidence: 0.782579

 $00:18:34.114 \longrightarrow 00:18:36.462$ filtration for the inflammation in the

NOTE Confidence: 0.782579

 $00:18:36.462 \longrightarrow 00:18:38.527$ tumor microenvironment that we'd observed.

NOTE Confidence: 0.782579

 $00{:}18{:}38.530 \dashrightarrow 00{:}18{:}41.138$ And so we again used our double and

NOTE Confidence: 0.782579

00:18:41.138 --> 00:18:42.939 triple knockout tumor cell lines.

NOTE Confidence: 0.782579

 $00:18:42.940 \longrightarrow 00:18:45.124$ In this time return to our habit of

NOTE Confidence: 0.782579

 $00:18:45.124 \longrightarrow 00:18:47.340$ looking at the tumor microenvironment,

NOTE Confidence: 0.782579

00:18:47.340 --> 00:18:48.700 dissecting the tumors out,

NOTE Confidence: 0.782579

 $00:18:48.700 \longrightarrow 00:18:50.060$ separating out the cells,

NOTE Confidence: 0.782579

 $00:18:50.060 \longrightarrow 00:18:52.328$ and quantitating them.

NOTE Confidence: 0.782579

 $00{:}18{:}52.330 \dashrightarrow 00{:}18{:}56.635$ To look which sensor was was required.

NOTE Confidence: 0.782579

00:18:56.640 --> 00:18:58.236 In our control tumors,

NOTE Confidence: 0.782579

 $00:18:58.236 \longrightarrow 00:19:00.630$ you see a relatively low infiltration

NOTE Confidence: 0.782579

00:19:00.699 --> 00:19:02.959 of immune cells that significantly

 $00:19:02.959 \longrightarrow 00:19:05.490$ increased following loss of eight R1.

NOTE Confidence: 0.782579

00:19:05.490 --> 00:19:06.190 And Interestingly,

NOTE Confidence: 0.782579

 $00:19:06.190 \longrightarrow 00:19:07.240$ this phenotype is,

NOTE Confidence: 0.782579

 $00:19:07.240 \longrightarrow 00:19:08.920$ if anything exaggerated following

NOTE Confidence: 0.782579

 $00:19:08.920 \longrightarrow 00:19:11.440$ loss of protein kinase are however

NOTE Confidence: 0.782579

00:19:11.508 --> 00:19:13.393 it's attenuated following loss of

NOTE Confidence: 0.782579

 $00{:}19{:}13.393 \dashrightarrow 00{:}19{:}15.661$ MBA 5 and oblated following the

NOTE Confidence: 0.782579

 $00:19:15.661 \longrightarrow 00:19:17.569$ loss of the two senses together.

NOTE Confidence: 0.782579

 $00{:}19{:}17.570 \dashrightarrow 00{:}19{:}19.420$ A similar pattern followed when

NOTE Confidence: 0.782579

 $00:19:19.420 \longrightarrow 00:19:21.670$ we looked at the proportion of

NOTE Confidence: 0.782579

 $00{:}19{:}21.670 \dashrightarrow 00{:}19{:}23.662$ the 45 positive immune cells that

NOTE Confidence: 0.782579

00:19:23.662 --> 00:19:25.419 was comprised of CD8T cells,

NOTE Confidence: 0.782579

 $00:19:25.420 \longrightarrow 00:19:25.848$ again,

NOTE Confidence: 0.782579

 $00:19:25.848 \longrightarrow 00:19:28.416$ increases in eight are null that

NOTE Confidence: 0.782579

 $00:19:28.416 \longrightarrow 00:19:30.485$ persisted following loss of PQR

NOTE Confidence: 0.782579

00:19:30.485 --> 00:19:31.905 was attenuated following loss

 $00:19:31.905 \longrightarrow 00:19:34.234$ of MD5 with loss following the

NOTE Confidence: 0.782579

 $00:19:34.234 \longrightarrow 00:19:36.339$ loss of both sensors together.

NOTE Confidence: 0.782579

 $00:19:36.340 \longrightarrow 00:19:39.175$ When we look at a immunosuppressive mdse,

NOTE Confidence: 0.782579

 $00:19:39.180 \longrightarrow 00:19:41.265$ we saw the opposite pattern

NOTE Confidence: 0.782579

 $00:19:41.265 \longrightarrow 00:19:43.350$ increases in control that persisted

NOTE Confidence: 0.782579

 $00:19:43.417 \longrightarrow 00:19:45.267$ or work were even increased.

NOTE Confidence: 0.782579

00:19:45.270 --> 00:19:47.825 Further following loss of PQR and no

NOTE Confidence: 0.782579

 $00:19:47.825 \longrightarrow 00:19:50.211$ loss of the phenotype following loss

NOTE Confidence: 0.782579

 $00:19:50.211 \longrightarrow 00:19:53.800$ of MDA 5 for the two sensors together.

NOTE Confidence: 0.78578705

 $00:19:56.900 \longrightarrow 00:19:58.482$ This suggested to us that MBA five

NOTE Confidence: 0.78578705

 $00:19:58.482 \dashrightarrow 00:20:00.179$ may be playing the predominant role.

NOTE Confidence: 0.78578705

 $00:20:00.180 \longrightarrow 00:20:02.304$ And inducing tumor microenvironment

NOTE Confidence: 0.78578705

 $00{:}20{:}02.304 \dashrightarrow 00{:}20{:}04.428$ inflammation may darnel tumors.

NOTE Confidence: 0.78578705

 $00:20:04.430 \longrightarrow 00:20:05.567$ To confirm this,

NOTE Confidence: 0.78578705

 $00:20:05.567 \longrightarrow 00:20:08.220$ we looked at the production of interferon

 $00:20:08.287 \longrightarrow 00:20:10.873$ beta interferon gamma in the tumor

NOTE Confidence: 0.78578705

 $00{:}20{:}10.873 --> 00{:}20{:}13.190$ microenvironment of the eternal jiggers.

NOTE Confidence: 0.78578705

00:20:13.190 --> 00:20:15.437 And we saw a similar pattern again

NOTE Confidence: 0.78578705

00:20:15.437 --> 00:20:17.651 increases in a terminal tumors that

NOTE Confidence: 0.78578705

 $00:20:17.651 \longrightarrow 00:20:20.402$ persisted following loss of PQR but was

NOTE Confidence: 0.78578705

 $00:20:20.477 \longrightarrow 00:20:23.015$ lost after law after loss of MD5 or the

NOTE Confidence: 0.78578705

 $00:20:23.015 \longrightarrow 00:20:25.316$ two sensors together in the same pattern.

NOTE Confidence: 0.78578705

00:20:25.320 --> 00:20:27.604 Again looking at tumor

NOTE Confidence: 0.78578705

00:20:27.604 --> 00:20:29.317 lysate interferon gamma.

NOTE Confidence: 0.78578705

00:20:29.320 --> 00:20:31.160 So haven't seen having seen

NOTE Confidence: 0.78578705

 $00:20:31.160 \longrightarrow 00:20:33.000$ this powerful dual mechanism for

NOTE Confidence: 0.78578705

 $00{:}20{:}33.068 \to 00{:}20{:}35.280$ sensitizing tumors to immunotherapy.

NOTE Confidence: 0.78578705

 $00{:}20{:}35.280 \to 00{:}20{:}38.008$ We asked whether loss of eight R1 was

NOTE Confidence: 0.78578705

00:20:38.008 --> 00:20:40.300 sufficient to overcome commonly acquired

NOTE Confidence: 0.78578705

 $00:20:40.300 \longrightarrow 00:20:43.378$ mechanisms of resistance to amino therapy,

NOTE Confidence: 0.78578705

 $00:20:43.380 \longrightarrow 00:20:44.553$ including genetic aberrations

 $00:20:44.553 \longrightarrow 00:20:46.508$ that have been identified as

NOTE Confidence: 0.78578705

00:20:46.508 --> 00:20:48.490 enriched when comparing discordant,

NOTE Confidence: 0.78578705

00:20:48.490 --> 00:20:48.916 responsive,

NOTE Confidence: 0.78578705

 $00:20:48.916 \longrightarrow 00:20:49.342$ pretreatment,

NOTE Confidence: 0.78578705

 $00:20:49.342 \longrightarrow 00:20:51.046$ and resistant posttreatment lesions.

NOTE Confidence: 0.78578705

 $00{:}20{:}51.050 \dashrightarrow 00{:}20{:}54.280$ Matched with the same patient.

NOTE Confidence: 0.78578705

00:20:54.280 --> 00:20:56.505 Known mechanisms that fit this

NOTE Confidence: 0.78578705

 $00{:}20{:}56.505 \dashrightarrow 00{:}20{:}59.502$ description include the loss of MHC one

NOTE Confidence: 0.78578705

 $00:20:59.502 \longrightarrow 00:21:01.952$ through mutations of HLA or beta 2M,

NOTE Confidence: 0.78578705

00:21:01.960 --> 00:21:03.166 loss of targeting,

NOTE Confidence: 0.78578705

 $00{:}21{:}03.166 \dashrightarrow 00{:}21{:}04.774$ children expressing through Mino,

NOTE Confidence: 0.78578705

 $00:21:04.780 \longrightarrow 00:21:06.800$ editing mutations and interferon sensing

NOTE Confidence: 0.78578705

 $00{:}21{:}06.800 \dashrightarrow 00{:}21{:}08.820$ pathways including interferon gamma receptor,

NOTE Confidence: 0.78578705

 $00:21:08.820 \longrightarrow 00:21:09.630$ the Jackson,

NOTE Confidence: 0.78578705

 $00:21:09.630 \longrightarrow 00:21:10.440$ the stats.

00:21:12.610 --> 00:21:16.080 And we focused first on the loss of MHC one,

NOTE Confidence: 0.81089616

 $00:21:16.080 \longrightarrow 00:21:18.720$ as mediated by loss of data to microblogging

NOTE Confidence: 0.81089616

 $00{:}21{:}18.720 \dashrightarrow 00{:}21{:}21.252$ which has been repeatedly identified as

NOTE Confidence: 0.81089616

 $00:21:21.252 \longrightarrow 00:21:23.964$ important in challenging form of resistance.

NOTE Confidence: 0.81089616

 $00:21:23.970 \longrightarrow 00:21:25.750$ To create this model we

NOTE Confidence: 0.81089616

 $00:21:25.750 \longrightarrow 00:21:27.530$ again use CRISPR CAS 9.

NOTE Confidence: 0.81089616

 $00{:}21{:}27.530 \dashrightarrow 00{:}21{:}29.852$ This time deleting beta 2 micro

NOTE Confidence: 0.81089616

 $00:21:29.852 \longrightarrow 00:21:32.120$ globulin and eight are together.

NOTE Confidence: 0.81089616

 $00{:}21{:}32.120 \dashrightarrow 00{:}21{:}34.324$ Along with creating match

NOTE Confidence: 0.81089616

 $00:21:34.324 \longrightarrow 00:21:36.528$ control tumor cell lines.

NOTE Confidence: 0.81089616

00:21:36.530 --> 00:21:38.768 To validate our model of resistance,

NOTE Confidence: 0.81089616

 $00:21:38.770 \longrightarrow 00:21:41.442$ we compared control in beta two of null

NOTE Confidence: 0.81089616

 $00:21:41.442 \longrightarrow 00:21:44.167$ tumors in the untreated that is dashed

NOTE Confidence: 0.81089616

 $00:21:44.167 \longrightarrow 00:21:46.630$ line state versus the treated state.

NOTE Confidence: 0.81089616

 $00:21:46.630 \longrightarrow 00:21:48.868$ That's the solid lines using again,

NOTE Confidence: 0.81089616

 $00:21:48.870 \longrightarrow 00:21:50.922$ this strong immunotherapy treatment

00:21:50.922 --> 00:21:54.000 regimen of GBX and PD one.

NOTE Confidence: 0.81089616

 $00:21:54.000 \longrightarrow 00:21:56.485$ And we did this because the normal

NOTE Confidence: 0.81089616

 $00:21:56.485 \longrightarrow 00:21:58.113$ control chambers responded very poorly

NOTE Confidence: 0.81089616

00:21:58.113 --> 00:22:00.475 to PD one and we wanted to make sure

NOTE Confidence: 0.81089616

 $00:22:00.475 \longrightarrow 00:22:02.851$ that we could see a response in control

NOTE Confidence: 0.81089616

 $00:22:02.851 \longrightarrow 00:22:05.124$ tumors and then validate that it was

NOTE Confidence: 0.81089616

00:22:05.124 --> 00:22:07.880 lost in the beta two unknown tumors.

NOTE Confidence: 0.81089616

00:22:07.880 --> 00:22:08.621 And sure enough,

NOTE Confidence: 0.81089616

 $00:22:08.621 \longrightarrow 00:22:11.179$ that's what we did see you can see the

NOTE Confidence: 0.81089616

 $00:22:11.179 \longrightarrow 00:22:13.099$ control tumors respond albiate transiently.

NOTE Confidence: 0.81089616

00:22:13.100 --> 00:22:13.391 Alternately,

NOTE Confidence: 0.81089616

00:22:13.391 --> 00:22:15.428 do grow out to this strong unit

NOTE Confidence: 0.81089616

 $00{:}22{:}15.428 \dashrightarrow 00{:}22{:}16.480$ the rapy treatment regiment,

NOTE Confidence: 0.81089616

 $00:22:16.480 \longrightarrow 00:22:18.010$ but made it to heaven.

NOTE Confidence: 0.81089616

00:22:18.010 --> 00:22:19.846 All tumors hardly respond at all.

 $00:22:22.400 \longrightarrow 00:22:24.738$ We next looked at a Darnall tumors.

NOTE Confidence: 0.7943555

 $00{:}22{:}24.740 \dashrightarrow 00{:}22{:}26.255$ This is our positive control

NOTE Confidence: 0.7943555

 $00:22:26.255 \longrightarrow 00:22:27.467$ experiment using strong again

NOTE Confidence: 0.7943555

00:22:27.467 --> 00:22:29.080 with therapy treatment regimen.

NOTE Confidence: 0.7943555

 $00:22:29.080 \longrightarrow 00:22:31.418$ We got a great response to treatment.

NOTE Confidence: 0.7943555

00:22:31.420 --> 00:22:33.090 The untreated tumors grow out,

NOTE Confidence: 0.7943555

 $00:22:33.090 \longrightarrow 00:22:36.330$ albeit more slowly than controls.

NOTE Confidence: 0.7943555

00:22:36.330 --> 00:22:37.058 Strikingly, however,

NOTE Confidence: 0.7943555

 $00:22:37.058 \longrightarrow 00:22:38.514$ this sensitivity persisted following

NOTE Confidence: 0.7943555

 $00:22:38.514 \longrightarrow 00:22:40.710$ loss of beta two microglobulin,

NOTE Confidence: 0.7943555

 $00{:}22{:}40.710 \longrightarrow 00{:}22{:}43.164$ suggesting that loss of a Darwin

NOTE Confidence: 0.7943555

 $00:22:43.164 \longrightarrow 00:22:45.872$ in tumors is sufficient to overcome

NOTE Confidence: 0.7943555

00:22:45.872 --> 00:22:47.868 this mechanism of resistance.

NOTE Confidence: 0.7943555

 $00:22:47.870 \longrightarrow 00:22:49.879$ This result was a bit surprising actually.

NOTE Confidence: 0.7943555

 $00:22:49.880 \longrightarrow 00:22:52.288$ At first, as it suggests that CD8T

NOTE Confidence: 0.7943555

 $00{:}22{:}52.288 \rightarrow 00{:}22{:}54.240$ cell recognition with MHC one in

 $00:22:54.240 \longrightarrow 00:22:56.221$ tumors is not in all cases required

NOTE Confidence: 0.7943555

 $00{:}22{:}56.286 \dashrightarrow 00{:}22{:}58.380$ for the response to a mino therapy.

NOTE Confidence: 0.7943555

 $00{:}22{:}58.380 \dashrightarrow 00{:}23{:}00.515$ It also raises the question as to

NOTE Confidence: 0.7943555

 $00:23:00.515 \longrightarrow 00:23:02.593$ whether it could be possible to

NOTE Confidence: 0.7943555

 $00:23:02.593 \longrightarrow 00:23:04.423$ target tumors that entirely lack

NOTE Confidence: 0.7943555

 $00:23:04.423 \longrightarrow 00:23:06.319$ high quality CDH cell antigens.

NOTE Confidence: 0.7943555

 $00:23:06.320 \longrightarrow 00:23:07.769$ A lot of ongoing work in the

NOTE Confidence: 0.7943555

 $00:23:07.769 \longrightarrow 00:23:09.354$ lab is focused on dissecting the

NOTE Confidence: 0.7943555

00:23:09.354 --> 00:23:10.566 mechanism of this finding,

NOTE Confidence: 0.7943555

 $00:23:10.570 \longrightarrow 00:23:12.270$ and one of the first

NOTE Confidence: 0.7943555

 $00:23:12.270 \longrightarrow 00:23:13.970$ things we wanted to know.

NOTE Confidence: 0.7943555

00:23:13.970 --> 00:23:15.920 Is whether antigenic vaccine GBX,

NOTE Confidence: 0.7943555

 $00{:}23{:}15.920 \dashrightarrow 00{:}23{:}17.472$ which was unsuccessful in

NOTE Confidence: 0.7943555

 $00:23:17.472 \longrightarrow 00:23:19.024$ translating to human use,

NOTE Confidence: 0.7943555

 $00:23:19.030 \longrightarrow 00:23:22.520$ was required for this response.

 $00:23:22.520 \longrightarrow 00:23:24.194$ This is actually pretty new data

NOTE Confidence: 0.7943555

 $00:23:24.194 \longrightarrow 00:23:25.929$ or a fraid with PD one alone,

NOTE Confidence: 0.7943555

00:23:25.930 --> 00:23:27.925 and found that indeed you still get

NOTE Confidence: 0.7943555

 $00:23:27.925 \longrightarrow 00:23:29.897$ great responses in a Darwin all tumors.

NOTE Confidence: 0.792159180909091

 $00:23:31.940 \longrightarrow 00:23:33.580$ Even without the gmax.

NOTE Confidence: 0.792159180909091

 $00{:}23{:}33.580 \dashrightarrow 00{:}23{:}35.630$ To start to understand this

NOTE Confidence: 0.792159180909091

 $00:23:35.630 \longrightarrow 00:23:37.611$ mechanism further, we again looked

NOTE Confidence: 0.792159180909091

00:23:37.611 --> 00:23:38.879 in the tumor microenvironment,

NOTE Confidence: 0.792159180909091

 $00:23:38.880 \longrightarrow 00:23:41.232$ this time focusing on our beta 2M

NOTE Confidence: 0.792159180909091

 $00:23:41.232 \longrightarrow 00:23:43.319$ null compared to control tumors.

NOTE Confidence: 0.792159180909091

 $00:23:43.320 \longrightarrow 00:23:45.846$ And so, as you would expect,

NOTE Confidence: 0.792159180909091

 $00:23:45.850 \longrightarrow 00:23:47.440$ increased immune infiltration

NOTE Confidence: 0.792159180909091

 $00:23:47.440 \longrightarrow 00:23:49.560$ CD 45 positive cells.

NOTE Confidence: 0.792159180909091

 $00:23:49.560 \longrightarrow 00:23:52.038$ But now focused on some of these

NOTE Confidence: 0.792159180909091

 $00{:}23{:}52.038 \dashrightarrow 00{:}23{:}54.848$ MHC one non MHC one restricted

NOTE Confidence: 0.792159180909091

 $00:23:54.848 \longrightarrow 00:23:57.068$ cytotoxic populations and these

00:23:57.068 --> 00:23:59.604 include granzyme B positive CD

NOTE Confidence: 0.792159180909091

 $00:23:59.604 \longrightarrow 00:24:02.355$ 4 positive T cells and NK cells.

NOTE Confidence: 0.792159180909091

 $00:24:02.360 \longrightarrow 00:24:04.435$ With the hypothesis that perhaps

NOTE Confidence: 0.792159180909091

00:24:04.435 --> 00:24:06.940 these cells which don't require MHC

NOTE Confidence: 0.792159180909091

 $00{:}24{:}06.940 \dashrightarrow 00{:}24{:}09.106$ one for recognition of tumor cells.

NOTE Confidence: 0.792159180909091

 $00:24:09.110 \longrightarrow 00:24:12.632$ May be involved in the phenotype

NOTE Confidence: 0.792159180909091

 $00:24:12.632 \longrightarrow 00:24:13.806$ we've observed.

NOTE Confidence: 0.792159180909091

 $00:24:13.810 \longrightarrow 00:24:15.754$ We've also begun to dissect the

NOTE Confidence: 0.792159180909091

00:24:15.754 --> 00:24:17.050 cytokinin kyma kind drivers,

NOTE Confidence: 0.792159180909091

 $00{:}24{:}17.050 \dashrightarrow 00{:}24{:}19.350$ by which these populations may

NOTE Confidence: 0.792159180909091

 $00:24:19.350 \longrightarrow 00:24:21.190$ be recruited and activated.

NOTE Confidence: 0.792159180909091

 $00:24:21.190 \longrightarrow 00:24:24.462$ These graphs are from side to kinda be

NOTE Confidence: 0.792159180909091

 $00{:}24{:}24.462 \dashrightarrow 00{:}24{:}27.736$ Teresa Beta to null and a Darnall tumors.

NOTE Confidence: 0.792159180909091

00:24:27.740 --> 00:24:29.415 The two prominent chemo kinds

NOTE Confidence: 0.792159180909091

 $00:24:29.415 \longrightarrow 00:24:30.755$ were identified so far.

 $00:24:30.760 \longrightarrow 00:24:33.790$ CX CL 10 in CCL 5.

NOTE Confidence: 0.792159180909091

 $00{:}24{:}33.790 \dashrightarrow 00{:}24{:}35.170$ Which are both significantly

NOTE Confidence: 0.792159180909091

00:24:35.170 --> 00:24:37.240 increased in our beta to emulate

NOTE Confidence: 0.792159180909091

00:24:37.297 --> 00:24:38.989 our one all tumors compared with

NOTE Confidence: 0.792159180909091

 $00:24:38.989 \longrightarrow 00:24:41.030$ beta to a control control tumors.

NOTE Confidence: 0.76325333

00:24:43.550 --> 00:24:45.614 Notably Ehrenring here at Yale has

NOTE Confidence: 0.76325333

00:24:45.614 --> 00:24:47.284 described a similar phenotype of

NOTE Confidence: 0.76325333

 $00:24:47.284 \longrightarrow 00:24:48.730$ being able to overcome the loss

NOTE Confidence: 0.76325333

 $00:24:48.730 \longrightarrow 00:24:50.631$ of MHC one using a modified I'll

NOTE Confidence: 0.76325333

 $00:24:50.631 \longrightarrow 00:24:52.305$ 18 side kind that he designed.

NOTE Confidence: 0.76325333

 $00{:}24{:}52.310 \dashrightarrow 00{:}24{:}54.360$ So this remains another possibility

NOTE Confidence: 0.76325333

 $00:24:54.360 \longrightarrow 00:24:56.410$ that we haven't yet explored.

NOTE Confidence: 0.76325333

00:24:56.410 --> 00:24:58.524 However, we think this type of study

NOTE Confidence: 0.76325333

 $00:24:58.524 \longrightarrow 00:25:00.136$ is important 'cause articulating the

NOTE Confidence: 0.76325333

00:25:00.136 --> 00:25:02.404 general principles by which loss of MHC

NOTE Confidence: 0.76325333

 $00:25:02.404 \longrightarrow 00:25:04.931$ one can be overcome could lead to new

 $00:25:04.931 \longrightarrow 00:25:06.490$ treatment approaches to target tumor

NOTE Confidence: 0.76325333

 $00:25:06.490 \longrightarrow 00:25:07.750$ specific immune evasion mechanisms.

NOTE Confidence: 0.8231248

00:25:10.820 --> 00:25:13.022 In summary, I hope I've convinced

NOTE Confidence: 0.8231248

 $00:25:13.022 \longrightarrow 00:25:14.490$ you have several points.

NOTE Confidence: 0.8231248

 $00:25:14.490 \longrightarrow 00:25:18.178$ First aid are one loss over improves the

NOTE Confidence: 0.8231248

00:25:18.178 --> 00:25:20.787 response to me to therapy. Specifically,

NOTE Confidence: 0.8231248

 $00:25:20.787 \longrightarrow 00:25:23.216$ it can overcome the lack of evidence.

NOTE Confidence: 0.8231248

00:25:23.220 --> 00:25:26.160 Plain tumor, micro environment and the

NOTE Confidence: 0.8231248

 $00:25:26.160 \longrightarrow 00:25:29.080$ loss of antigen presentation by image C1.

NOTE Confidence: 0.8231248

 $00:25:29.080 \longrightarrow 00:25:30.884$ Additionally, this phenotype is

NOTE Confidence: 0.8231248

 $00{:}25{:}30.884 \to 00{:}25{:}33.139$ driven both by tumor microenvironment,

NOTE Confidence: 0.8231248

 $00{:}25{:}33.140 \dashrightarrow 00{:}25{:}34.944$ inflammation mediated by MDA

NOTE Confidence: 0.8231248

 $00:25:34.944 \longrightarrow 00:25:36.297$ 5 and sensitization.

NOTE Confidence: 0.8231248

 $00:25:36.300 \longrightarrow 00:25:39.990$ Interferon driven by PK are.

NOTE Confidence: 0.8231248

 $00:25:39.990 \longrightarrow 00:25:42.806$ Finally, and I think this may be important.

 $00:25:42.810 \longrightarrow 00:25:44.715$ Tumor cells contain sufficient innate

NOTE Confidence: 0.8231248

 $00:25:44.715 \longrightarrow 00:25:46.620$ lightning into drive the rapeutic information.

NOTE Confidence: 0.8231248

 $00:25:46.620 \longrightarrow 00:25:48.530$ If they are in need.

NOTE Confidence: 0.8231248

 $00:25:48.530 \longrightarrow 00:25:50.213$ Nucleic acid sensing

NOTE Confidence: 0.8231248

00:25:50.213 --> 00:25:51.896 checkpoints are disabled.

NOTE Confidence: 0.8231248

 $00:25:51.900 \longrightarrow 00:25:53.868$ And what we think this implies is that

NOTE Confidence: 0.8231248

 $00{:}25{:}53.868 \dashrightarrow 00{:}25{:}55.745$ there may be other similar in nate

NOTE Confidence: 0.8231248

00:25:55.745 --> 00:25:57.410 immune checkpoints that limit the

NOTE Confidence: 0.8231248

 $00:25:57.410 \longrightarrow 00:25:59.549$ sensing of double stranded RNA or other

NOTE Confidence: 0.8231248

 $00:25:59.549 \longrightarrow 00:26:01.308$ nucleic acid ligands that we could

NOTE Confidence: 0.8231248

 $00:26:01.308 \longrightarrow 00:26:02.778$ think about as the rapeutic targets.

NOTE Confidence: 0.81072354

 $00:26:04.830 \longrightarrow 00:26:06.894$ And really, those questions inform the

NOTE Confidence: 0.81072354

 $00:26:06.894 \longrightarrow 00:26:09.716$ rest of the work that the lab is doing.

NOTE Confidence: 0.81072354

 $00:26:09.720 \longrightarrow 00:26:11.712$ I've mentioned already a focus on

NOTE Confidence: 0.81072354

 $00:26:11.712 \longrightarrow 00:26:13.629$ double stranded RNA and eight R1.

NOTE Confidence: 0.81072354

 $00:26:13.630 \longrightarrow 00:26:15.210$ We're also applying functional genomics

 $00:26:15.210 \longrightarrow 00:26:17.539$ to try to identify other novel targets.

NOTE Confidence: 0.81072354

 $00:26:17.540 \longrightarrow 00:26:19.370$ Really, with the insight that we

NOTE Confidence: 0.81072354

 $00:26:19.370 \longrightarrow 00:26:22.047$ have to focus on turning on some of

NOTE Confidence: 0.81072354

00:26:22.047 --> 00:26:24.135 these pathways of double stranded RNA

NOTE Confidence: 0.81072354

 $00{:}26{:}24.205 \dashrightarrow 00{:}26{:}26.510$ sensing or micro violent information.

NOTE Confidence: 0.81072354

 $00:26:26.510 \longrightarrow 00:26:29.226$ And then we're involved in human translation,

NOTE Confidence: 0.81072354

 $00:26:29.230 \longrightarrow 00:26:31.402$ doing kind of in depth tumor

NOTE Confidence: 0.81072354

 $00:26:31.402 \longrightarrow 00:26:32.488$ microenvironment investigation across

NOTE Confidence: 0.81072354

 $00:26:32.488 \longrightarrow 00:26:34.268$ several different tumor indications.

NOTE Confidence: 0.81072354

00:26:34.270 --> 00:26:36.930 We're always looking for new

NOTE Confidence: 0.81072354

 $00:26:36.930 \longrightarrow 00:26:37.994$ collaborators there.

NOTE Confidence: 0.81072354

 $00{:}26{:}38.000 \dashrightarrow 00{:}26{:}40.888$ And all of this comes under the rubric

NOTE Confidence: 0.81072354

 $00:26:40.888 \longrightarrow 00:26:42.685$ of the apeutically targeting the

NOTE Confidence: 0.81072354

 $00:26:42.685 \longrightarrow 00:26:45.215$ information in the tumor microenvironment.

NOTE Confidence: 0.81072354

00:26:45.220 --> 00:26:46.940 In just the last couple of minutes here,

00:26:46.940 --> 00:26:48.886 I want to quickly mention some of

NOTE Confidence: 0.81072354

 $00{:}26{:}48.886 \to 00{:}26{:}50.763$ the ongoing projects in the lab that

NOTE Confidence: 0.81072354

 $00{:}26{:}50.763 \dashrightarrow 00{:}26{:}52.245$ I haven't talked about this far.

NOTE Confidence: 0.81072354

 $00:26:52.250 \longrightarrow 00:26:56.876$ First, I mentioned just the project.

NOTE Confidence: 0.81072354

 $00:26:56.880 \longrightarrow 00:26:59.210$ Describing how to Riker environment

NOTE Confidence: 0.81072354

 $00:26:59.210 \longrightarrow 00:27:01.074$ inflammation can overcome the

NOTE Confidence: 0.81072354

 $00:27:01.074 \longrightarrow 00:27:02.340$ loss of MHC one.

NOTE Confidence: 0.81072354

00:27:02.340 --> 00:27:05.280 This is being led by Jessica Way,

NOTE Confidence: 0.81072354

 $00{:}27{:}05.280 \to 00{:}27{:}08.556$ but she's Additionally leading a project.

NOTE Confidence: 0.81072354

00:27:08.560 --> 00:27:10.480 Looking at human tumors and trying

NOTE Confidence: 0.81072354

 $00{:}27{:}10.480 \dashrightarrow 00{:}27{:}12.544$ to turn these pathways on in ex

NOTE Confidence: 0.81072354

 $00:27:12.544 \longrightarrow 00:27:14.231$ vivo samples as well as doing deep

NOTE Confidence: 0.81072354

 $00:27:14.296 \longrightarrow 00:27:16.316$ dissection of the micro environment.

NOTE Confidence: 0.81072354

 $00:27:16.320 \longrightarrow 00:27:18.623$ Where we go is working on novel

NOTE Confidence: 0.81072354

 $00:27:18.623 \longrightarrow 00:27:20.361$ strategies to detect double stranded

NOTE Confidence: 0.81072354

 $00:27:20.361 \longrightarrow 00:27:23.097$ RNA and to mimic the sensors of double

 $00:27:23.160 \longrightarrow 00:27:25.953$ stranded RNA that we believe will be

NOTE Confidence: 0.81072354

 $00{:}27{:}25.953 \dashrightarrow 00{:}27{:}27.588$ compatible with functional genomic

NOTE Confidence: 0.81072354

 $00:27:27.588 \longrightarrow 00:27:29.778$ screening in the identification of

NOTE Confidence: 0.81072354

 $00:27:29.778 \longrightarrow 00:27:31.530$ novel cancer immunotherapy targets.

NOTE Confidence: 0.81072354

00:27:31.530 --> 00:27:32.234 And finally,

NOTE Confidence: 0.81072354

 $00:27:32.234 \longrightarrow 00:27:36.182$ even Kim who is in the lab focused on the

NOTE Confidence: 0.81072354

 $00:27:36.182 \longrightarrow 00:27:38.807$ comparison of discordant response lesions.

NOTE Confidence: 0.81072354

 $00{:}27{:}38.810 \dashrightarrow 00{:}27{:}41.700$ So responsive and resistant lesions.

NOTE Confidence: 0.81072354

 $00:27:41.700 \longrightarrow 00:27:44.112$ From the same patient trying to

NOTE Confidence: 0.81072354

 $00{:}27{:}44.112 \longrightarrow 00{:}27{:}45.720$ understand novel mechanisms of

NOTE Confidence: 0.81072354

 $00{:}27{:}45.785 \dashrightarrow 00{:}27{:}47.435$ resistance to new therapies so

NOTE Confidence: 0.81072354

 $00:27:47.435 \longrightarrow 00:27:49.870$ that we can focus on overcoming.

NOTE Confidence: 0.81072354

 $00{:}27{:}49.870 \dashrightarrow 00{:}27{:}52.246$ With that I want to thank every body in

NOTE Confidence: 0.81072354

 $00:27:52.246 \longrightarrow 00:27:54.670$ our lab as well as our collaborators

NOTE Confidence: 0.81072354

 $00:27:54.670 \longrightarrow 00:27:56.736$ and mentors here at, you know,

 $00:27:56.736 \longrightarrow 00:27:57.720$ have been fantastic.

NOTE Confidence: 0.81072354

 $00{:}27{:}57.720 \dashrightarrow 00{:}27{:}59.676$ I also wanted knowledge at Nikki

NOTE Confidence: 0.81072354

00:27:59.676 --> 00:28:01.268 Ning my form. Enter drumming.

NOTE Confidence: 0.81072354

 $00:28:01.268 \longrightarrow 00:28:04.113$ So much of the work that I presented early

NOTE Confidence: 0.81072354

00:28:04.113 --> 00:28:06.219 derives from from studies with them,

NOTE Confidence: 0.81072354

 $00:28:06.220 \longrightarrow 00:28:07.852$ and of course our funding here

NOTE Confidence: 0.81072354

 $00:28:07.852 \longrightarrow 00:28:09.849$ at the Cancer Center and the

NOTE Confidence: 0.81072354

00:28:09.849 --> 00:28:11.130 International Research Alliance.

NOTE Confidence: 0.81072354

00:28:11.130 --> 00:28:13.086 With that, I will wrap up.

NOTE Confidence: 0.81072354

00:28:13.090 --> 00:28:16.024 Thank you so much for the chance to present,

NOTE Confidence: 0.81072354

 $00{:}28{:}16.030 \dashrightarrow 00{:}28{:}17.986$ and I'm happy to take questions.

NOTE Confidence: 0.825338

 $00:28:19.150 \longrightarrow 00:28:21.250$ Jeff, thank you. That's just

NOTE Confidence: 0.825338

00:28:21.250 --> 00:28:23.350 terrific work and really exciting.

NOTE Confidence: 0.825338

 $00:28:23.350 \longrightarrow 00:28:26.710$ And we we have folks can submit questions.

NOTE Confidence: 0.825338

 $00:28:26.710 \longrightarrow 00:28:28.390$ We have one question.

NOTE Confidence: 0.825338

 $00:28:28.390 \longrightarrow 00:28:29.650$ Mike Hurwitz asked.

 $00:28:29.650 \longrightarrow 00:28:32.548$ So given the response in eight R1

NOTE Confidence: 0.825338

 $00:28:32.548 \longrightarrow 00:28:35.948$ knockouts in the absence of MHC class one,

NOTE Confidence: 0.825338

 $00:28:35.950 \longrightarrow 00:28:38.368$ do you think that's function of

NOTE Confidence: 0.825338

00:28:38.368 --> 00:28:41.626 CD4T cells or NK cells, or both?

NOTE Confidence: 0.825338

00:28:41.626 --> 00:28:44.020 Or some other mechanism? Yeah,

NOTE Confidence: 0.87834716

 $00{:}28{:}44.020 \dashrightarrow 00{:}28{:}46.324$ I think that's a great question and we

NOTE Confidence: 0.87834716

 $00:28:46.324 \longrightarrow 00:28:49.810$ definitely would love to know that answer.

NOTE Confidence: 0.87834716

 $00{:}28{:}49.810 \to 00{:}28{:}52.216$ Best hypothesis Now is that partially

NOTE Confidence: 0.87834716

 $00:28:52.216 \longrightarrow 00:28:55.755$ based on some of the work that Ehrenring

NOTE Confidence: 0.87834716

 $00{:}28{:}55.755 \dashrightarrow 00{:}28{:}58.090$ is presented in Marcus Bosenberg.

NOTE Confidence: 0.87834716

 $00:28:58.090 \longrightarrow 00:29:00.506$ NK cells could be an important player there.

NOTE Confidence: 0.87834716

 $00{:}29{:}00.510 \dashrightarrow 00{:}29{:}02.050$ Certainly there increased and we

NOTE Confidence: 0.87834716

 $00{:}29{:}02.050 \dashrightarrow 00{:}29{:}04.220$ started to see some cytokines in Kemah

NOTE Confidence: 0.87834716

00:29:04.220 --> 00:29:05.936 kinds that may activate them further,

NOTE Confidence: 0.87834716

00:29:05.940 --> 00:29:08.012 but you know, we don't even know for

 $00:29:08.012 \longrightarrow 00:29:10.167$ sure that CD8T cells aren't important.

NOTE Confidence: 0.87834716

 $00{:}29{:}10.170 \dashrightarrow 00{:}29{:}11.976$ That's an experiment we're doing now.

NOTE Confidence: 0.87834716

00:29:11.980 --> 00:29:14.099 We just know they're not recognizing the

NOTE Confidence: 0.87834716

00:29:14.100 --> 00:29:16.060 tumor, but could they be activated through

NOTE Confidence: 0.87834716

 $00:29:16.060 \longrightarrow 00:29:17.915$ cross presentation or another means is

NOTE Confidence: 0.87834716

 $00:29:17.915 \longrightarrow 00:29:19.530$ another question that we're investigating.

NOTE Confidence: 0.7803051

 $00:29:20.700 \longrightarrow 00:29:23.570$ And then you know, in related work.

NOTE Confidence: 0.7803051

00:29:23.570 --> 00:29:24.941 Obviously Akiko, Saki,

NOTE Confidence: 0.7803051

00:29:24.941 --> 00:29:28.140 and Anna Pile of working independently on

NOTE Confidence: 0.7803051

00:29:28.218 --> 00:29:31.344 Rig Rig I are iguana, which which it is.

NOTE Confidence: 0.7803051

 $00:29:31.344 \longrightarrow 00:29:33.780$ But which obviously is not necessarily

NOTE Confidence: 0.7803051

 $00:29:33.856 \longrightarrow 00:29:36.280$ related to the function vadar one,

NOTE Confidence: 0.7803051

 $00:29:36.280 \longrightarrow 00:29:37.732$ and you know how?

NOTE Confidence: 0.7803051

00:29:37.732 --> 00:29:40.906 How do you see those two with those

NOTE Confidence: 0.7803051

00:29:40.906 --> 00:29:44.070 two sort of bodies of work relating?

NOTE Confidence: 0.7803051

 $00:29:44.070 \longrightarrow 00:29:45.710$ Yeah, so this is

00:29:45.710 --> 00:29:48.374 a great question Charlie and actually

NOTE Confidence: 0.7803051

 $00:29:48.374 \longrightarrow 00:29:51.910$ Akiko is one of my mentors here and.

NOTE Confidence: 0.7803051

 $00:29:51.910 \longrightarrow 00:29:54.826$ Collaborators and we've talked about this.

NOTE Confidence: 0.7803051

00:29:54.830 --> 00:29:58.225 We're actually in the process of testing.

NOTE Confidence: 0.7803051

 $00:29:58.230 \longrightarrow 00:30:02.736$ Are a guy at. Egotist with the innate

NOTE Confidence: 0.7803051

 $00:30:02.736 \longrightarrow 00:30:04.548$ arnolin control tumor cell lines and

NOTE Confidence: 0.7803051

 $00:30:04.548 \longrightarrow 00:30:06.885$ you know the colloquial way we we

NOTE Confidence: 0.7803051

 $00{:}30{:}06.885 \dashrightarrow 00{:}30{:}09.202$ thought about this is kind of as a

NOTE Confidence: 0.7803051

 $00:30:09.202 \longrightarrow 00:30:10.841$ maximum inflammation bomb because what

NOTE Confidence: 0.7803051

 $00:30:10.841 \longrightarrow 00:30:13.019$ we've shown is that any interferon

NOTE Confidence: 0.7803051

 $00{:}30{:}13.019 \dashrightarrow 00{:}30{:}14.541$ producing stimulus can trigger this

NOTE Confidence: 0.7803051

00:30:14.541 --> 00:30:16.050 8 Arnold amplification of sensing,

NOTE Confidence: 0.7803051

 $00{:}30{:}16.050 \dashrightarrow 00{:}30{:}18.418$ and so our hypothesis would be that if

NOTE Confidence: 0.7803051

00:30:18.418 --> 00:30:20.470 you initiate signaling through a guy,

NOTE Confidence: 0.7803051

 $00:30:20.470 \longrightarrow 00:30:22.502$ even if there a guy is not involved

00:30:22.502 --> 00:30:24.899 in the pathways we've described here,

NOTE Confidence: 0.7803051

 $00:30:24.900 \longrightarrow 00:30:26.475$ you basically create a massive

NOTE Confidence: 0.7803051

00:30:26.475 --> 00:30:27.424 amplification of interferon,

NOTE Confidence: 0.7803051

 $00:30:27.424 \longrightarrow 00:30:29.320$ buy by further knocking out eight

NOTE Confidence: 0.7803051

 $00:30:29.320 \longrightarrow 00:30:31.534$ R1 so that remains to be seen,

NOTE Confidence: 0.7803051

 $00:30:31.534 \longrightarrow 00:30:33.430$ but that's what I would hypothesize.

NOTE Confidence: 0.8670604

 $00:30:33.830 \longrightarrow 00:30:34.892$ Yeah, that's interesting.

NOTE Confidence: 0.8670604

 $00:30:34.892 \longrightarrow 00:30:36.662$ It sounds like a great

NOTE Confidence: 0.8670604

 $00{:}30{:}36.662 {\:{\circ}{\circ}{\circ}}> 00{:}30{:}38.158$ opportunity to look at that.

NOTE Confidence: 0.8670604

00:30:38.160 --> 00:30:41.157 Well, I I want to keep us on time,

NOTE Confidence: 0.8670604

00:30:41.160 --> 00:30:42.400 so Jeff, thank you.

NOTE Confidence: 0.8670604

 $00:30:42.400 \longrightarrow 00:30:44.260$ I know there are other questions

NOTE Confidence: 0.8670604

 $00:30:44.326 \longrightarrow 00:30:46.258$ coming in and people should certainly

NOTE Confidence: 0.8670604

00:30:46.258 --> 00:30:48.490 reach out to you directly, Jeff.

NOTE Confidence: 0.8670604

 $00:30:48.490 \longrightarrow 00:30:50.870$ But thank you for a superb presentation

NOTE Confidence: 0.8670604

 $00:30:50.870 \longrightarrow 00:30:53.807$ and let me now turn to our second speaker,

 $00:30:53.810 \longrightarrow 00:30:56.130$ doctor Robert Bone and Bob Bone is a

NOTE Confidence: 0.8670604

 $00{:}30{:}56.130 \dashrightarrow 00{:}30{:}58.138$ professor of medicine in hematology,

NOTE Confidence: 0.8670604

 $00:30:58.140 \longrightarrow 00:31:00.831$ and recently the past year joins us as the

NOTE Confidence: 0.8670604

00:31:00.831 --> 00:31:03.128 director of the Benign Hematology program,

NOTE Confidence: 0.8670604

 $00:31:03.130 \longrightarrow 00:31:05.846$ as well as the medical director of

NOTE Confidence: 0.8670604

 $00:31:05.846 \longrightarrow 00:31:07.540$ the Hemophilia Treatment Center.

NOTE Confidence: 0.8670604

00:31:07.540 --> 00:31:09.156 Prior to joining Yale,

NOTE Confidence: 0.8670604

00:31:09.156 --> 00:31:11.176 Bob was founding faculty member

NOTE Confidence: 0.8670604

00:31:11.176 --> 00:31:13.745 and leader at the Frank Netter

NOTE Confidence: 0.8670604

00:31:13.745 --> 00:31:15.835 School of Medicine at Quinnipiac,

NOTE Confidence: 0.8670604

 $00:31:15.840 \longrightarrow 00:31:18.784$ as well as a professor of medicine at

NOTE Confidence: 0.8670604

 $00:31:18.784 \longrightarrow 00:31:21.416$ the University of Connecticut School of

NOTE Confidence: 0.8670604

 $00{:}31{:}21.416 \dashrightarrow 00{:}31{:}24.140$ Medicine and Bob throughout his career,

NOTE Confidence: 0.8670604

 $00:31:24.140 \longrightarrow 00:31:27.101$ really has been a leader in in the

NOTE Confidence: 0.8670604

 $00:31:27.101 \longrightarrow 00:31:29.615$ clinical care and sort of advancing

 $00:31:29.615 \longrightarrow 00:31:32.344$ work in hemostasis thrombosis as well

NOTE Confidence: 0.8670604

 $00{:}31{:}32.344 \dashrightarrow 00{:}31{:}34.520$ as benign hematologic conditions.

NOTE Confidence: 0.8670604

00:31:34.520 --> 00:31:35.816 And we're really,

NOTE Confidence: 0.8670604

 $00:31:35.816 \longrightarrow 00:31:37.544$ very fortunate Bob to.

NOTE Confidence: 0.8670604

00:31:37.550 --> 00:31:38.218 That Bob,

NOTE Confidence: 0.8670604

 $00{:}31{:}38.218 \dashrightarrow 00{:}31{:}40.222$ now leading this section and sharing

NOTE Confidence: 0.8670604

 $00:31:40.222 \longrightarrow 00:31:41.740$ with his work with us.

NOTE Confidence: 0.8670604

 $00{:}31{:}41.740 \dashrightarrow 00{:}31{:}43.020$ So Bob thank you.

NOTE Confidence: 0.9011822

 $00{:}31{:}44.410 \dashrightarrow 00{:}31{:}47.134$ Thank you, Charlie for that introduction

NOTE Confidence: 0.9011822

 $00:31:47.134 \longrightarrow 00:31:50.090$ and for the opportunity to speak today.

NOTE Confidence: 0.9011822

 $00{:}31{:}50.090 \dashrightarrow 00{:}31{:}52.890$ Let me just share my screen here.

NOTE Confidence: 0.9011822

00:31:52.890 --> 00:31:55.760 So good afternoon everybody.

NOTE Confidence: 0.9011822

 $00{:}31{:}55.760 \dashrightarrow 00{:}31{:}58.358$ And what I would like to do in the

NOTE Confidence: 0.9011822

 $00:31:58.358 \longrightarrow 00:32:00.996$ next 25 minutes or so is discuss with

NOTE Confidence: 0.9011822

 $00:32:00.996 \longrightarrow 00:32:04.060$ you some of the advances that have a

NOTE Confidence: 0.9011822

 $00:32:04.060 \longrightarrow 00:32:06.544$ curd in the treatment of hemophilia

 $00:32:06.550 \longrightarrow 00:32:08.800$ and what I hope to show you is that

NOTE Confidence: 0.9011822

 $00:32:08.800 \longrightarrow 00:32:11.285$ over the past five years there have

NOTE Confidence: 0.9011822

 $00:32:11.285 \longrightarrow 00:32:13.219$ really been significant and substantial

NOTE Confidence: 0.9011822

 $00:32:13.219 \longrightarrow 00:32:15.727$ advances which came in the background

NOTE Confidence: 0.9011822

 $00:32:15.727 \longrightarrow 00:32:18.421$ of really several decades of really

NOTE Confidence: 0.9011822

 $00{:}32{:}18.421 \dashrightarrow 00{:}32{:}20.806$ only modest advances in the rapy.

NOTE Confidence: 0.9011822

00:32:20.810 --> 00:32:23.960 So just as a brief review here,

NOTE Confidence: 0.9011822

 $00:32:23.960 \longrightarrow 00:32:25.760$ these are excellent disorders,

NOTE Confidence: 0.9011822

 $00:32:25.760 \longrightarrow 00:32:27.110$ mostly affecting men,

NOTE Confidence: 0.9011822

 $00:32:27.110 \longrightarrow 00:32:29.840$ but can also affect women who might

NOTE Confidence: 0.9011822

 $00:32:29.840 \longrightarrow 00:32:32.660$ have low factor levels due to

NOTE Confidence: 0.9011822

 $00:32:32.660 \longrightarrow 00:32:34.756$ unequal X chromosome inactivation,

NOTE Confidence: 0.9011822

00:32:34.760 --> 00:32:36.560 hemophilia A&B or deficiencies

NOTE Confidence: 0.9011822

 $00:32:36.560 \longrightarrow 00:32:39.260$ in factor 8 or 9 respectively.

NOTE Confidence: 0.9011822

 $00:32:39.260 \longrightarrow 00:32:41.685$ They are clinically identical disorders

 $00:32:41.685 \longrightarrow 00:32:44.664$ and the severity of the disease

NOTE Confidence: 0.9011822

 $00:32:44.664 \longrightarrow 00:32:47.526$ is really relies primarily on the

NOTE Confidence: 0.9011822

 $00:32:47.526 \longrightarrow 00:32:49.876$ residual factor that is remaining

NOTE Confidence: 0.9011822

 $00:32:49.876 \longrightarrow 00:32:52.809$ in the blood with those with severe.

NOTE Confidence: 0.9011822

 $00:32:52.810 \longrightarrow 00:32:54.800$ And moderate disease having less

NOTE Confidence: 0.9011822

 $00:32:54.800 \longrightarrow 00:32:57.430$ than 5% of factor 8 or factor 9

NOTE Confidence: 0.9011822

 $00:32:57.430 \longrightarrow 00:32:59.571$ and those with mild disease having

NOTE Confidence: 0.9011822

 $00:32:59.571 \longrightarrow 00:33:02.121$ a higher value and morbidity and

NOTE Confidence: 0.9011822

00:33:02.121 --> 00:33:04.475 mortality is due to spontaneous

NOTE Confidence: 0.9011822

 $00:33:04.475 \longrightarrow 00:33:06.379$ and trauma induced bleeding,

NOTE Confidence: 0.9011822

 $00{:}33{:}06.380 \dashrightarrow 00{:}33{:}09.010$ including bleeding into joints which

NOTE Confidence: 0.9011822

00:33:09.010 --> 00:33:11.640 can cause a hemophilic arthropathy

NOTE Confidence: 0.9011822

 $00:33:11.721 \longrightarrow 00:33:14.535$ which we can be quite quite disabling.

NOTE Confidence: 0.9011822

 $00{:}33{:}14.540 \dashrightarrow 00{:}33{:}16.892$ And just the history of hemophilia

NOTE Confidence: 0.9011822

00:33:16.892 --> 00:33:18.916 treatment in the last century

NOTE Confidence: 0.9011822

 $00:33:18.916 \longrightarrow 00:33:21.196$ is seen briefly on this slide,

 $00:33:21.200 \longrightarrow 00:33:23.592$ and at the end of World War Two

NOTE Confidence: 0.9011822

 $00{:}33{:}23.592 \dashrightarrow 00{:}33{:}25.812$ blood or plasma transfusions were

NOTE Confidence: 0.9011822

 $00:33:25.812 \longrightarrow 00:33:27.864$ used to treat patients.

NOTE Confidence: 0.9011822

 $00:33:27.870 \longrightarrow 00:33:29.830$ This these were largely ineffective,

NOTE Confidence: 0.9011822

 $00:33:29.830 \longrightarrow 00:33:32.686$ is only small amounts of factor 8 or

NOTE Confidence: 0.9011822

 $00:33:32.686 \longrightarrow 00:33:36.097$ factor 9 could be transfused in the 1960s.

NOTE Confidence: 0.9011822

 $00:33:36.100 \longrightarrow 00:33:37.276$ Cryoprecipitate was discovered

NOTE Confidence: 0.9011822

 $00:33:37.276 \longrightarrow 00:33:39.628$ as a source of Factor 8,

NOTE Confidence: 0.9011822

 $00{:}33{:}39.630 \longrightarrow 00{:}33{:}42.087$ and that quickly gave way to the

NOTE Confidence: 0.9011822

 $00:33:42.087 \longrightarrow 00:33:44.120$ use of factor concentrates either

NOTE Confidence: 0.9011822

 $00:33:44.120 \longrightarrow 00:33:46.360$ factor 8 or factor 9.

NOTE Confidence: 0.9011822

 $00{:}33{:}46.360 \dashrightarrow 00{:}33{:}48.535$ Purified from the plasma of

NOTE Confidence: 0.9011822

 $00:33:48.535 \longrightarrow 00:33:50.710$ 10s of thousands of donors.

NOTE Confidence: 0.9011822

00:33:50.710 --> 00:33:52.015 And of course,

NOTE Confidence: 0.9011822

 $00:33:52.015 \longrightarrow 00:33:53.755$ while this advanced care,

 $00:33:53.760 \longrightarrow 00:33:56.142$ it also exposed individuals to a

NOTE Confidence: 0.9011822

 $00{:}33{:}56.142 \dashrightarrow 00{:}33{:}58.670$ number of viral viral particles and

NOTE Confidence: 0.9011822

 $00{:}33{:}58.670 \dashrightarrow 00{:}34{:}01.701$ hepatitis C and HIV became a very

NOTE Confidence: 0.9011822

 $00:34:01.701 \longrightarrow 00:34:04.199$ significant problem in this population.

NOTE Confidence: 0.9011822

 $00:34:04.200 \longrightarrow 00:34:06.780$ And then in the early 90s

NOTE Confidence: 0.9011822

 $00:34:06.780 \longrightarrow 00:34:08.980$ recombinant factors 8:00 and 9:00,

NOTE Confidence: 0.9011822

 $00:34:08.980 \longrightarrow 00:34:12.025$ or produced and for the developed world,

NOTE Confidence: 0.9011822

 $00:34:12.030 \longrightarrow 00:34:14.495$ where economically this was allowable

NOTE Confidence: 0.9011822

00:34:14.495 --> 00:34:16.960 of the treatment of hemophilia

NOTE Confidence: 0.9011822

 $00:34:17.036 \longrightarrow 00:34:19.430$ with recombinant factors 8 and 9.

NOTE Confidence: 0.9011822

 $00{:}34{:}19.430 \dashrightarrow 00{:}34{:}22.735$ Became really the standard of

NOTE Confidence: 0.9011822

 $00:34:22.735 \longrightarrow 00:34:26.040$ care up until very recently.

NOTE Confidence: 0.9011822

 $00:34:26.040 \longrightarrow 00:34:29.196$ There are now about 145 federally

NOTE Confidence: 0.9011822

00:34:29.196 --> 00:34:31.300 funded hemophilia treatment centers

NOTE Confidence: 0.9011822

 $00:34:31.376 \longrightarrow 00:34:34.120$ in this country and of course jeliz is

NOTE Confidence: 0.9011822

 $00:34:34.120 \longrightarrow 00:34:37.169$ one of those is one of those centers.

 $00:34:37.170 \longrightarrow 00:34:38.400$ And the therapeutic.

NOTE Confidence: 0.9011822

 $00{:}34{:}38.400 \dashrightarrow 00{:}34{:}40.450$ The approach in clinical issues

NOTE Confidence: 0.9011822

 $00:34:40.450 \longrightarrow 00:34:41.650$ are outlined here.

NOTE Confidence: 0.9011822

 $00:34:41.650 \longrightarrow 00:34:43.912$ Patients with hemophilia can either be

NOTE Confidence: 0.9011822

 $00{:}34{:}43.912 \dashrightarrow 00{:}34{:}46.375$ treated in what's known as on-demand

NOTE Confidence: 0.9011822

 $00{:}34{:}46.375 \dashrightarrow 00{:}34{:}48.159$ or episodic factor replacement,

NOTE Confidence: 0.9011822

 $00:34:48.160 \longrightarrow 00:34:50.692$ which is the treatment with Ivy

NOTE Confidence: 0.9011822

00:34:50.692 --> 00:34:54.284 Factor 8 or factor 9 to treat a

NOTE Confidence: 0.9011822

 $00{:}34{:}54.284 \dashrightarrow 00{:}34{:}56.100$ bleed or prophylactic therapy.

NOTE Confidence: 0.9011822

00:34:56.100 --> 00:34:57.393 An inhibitor development,

NOTE Confidence: 0.9011822

 $00:34:57.393 \longrightarrow 00:34:59.979$ that is an Allo antibody directed

NOTE Confidence: 0.9011822

00:34:59.979 --> 00:35:02.159 against Factor 8 or less commonly,

NOTE Confidence: 0.9011822

 $00{:}35{:}02.160 \dashrightarrow 00{:}35{:}04.848$ factor 9 is a significant problem

NOTE Confidence: 0.9011822

 $00{:}35{:}04.848 \dashrightarrow 00{:}35{:}07.918$ for patients and may occur in 30 or

NOTE Confidence: 0.9011822

00:35:07.918 --> 00:35:10.455 40% of individuals with hemophilia A

 $00:35:10.455 \longrightarrow 00:35:12.690$ and makes treatment very difficult

NOTE Confidence: 0.9011822

 $00:35:12.765 \longrightarrow 00:35:15.145$ and the goals of therapy are really

NOTE Confidence: 0.9011822

 $00:35:15.145 \longrightarrow 00:35:16.165$ here to prevent

NOTE Confidence: 0.85170436

 $00:35:16.241 \longrightarrow 00:35:17.984$ any bleeding. If possible,

NOTE Confidence: 0.85170436

 $00:35:17.984 \longrightarrow 00:35:20.606$ prevent joint disease and optimize a

NOTE Confidence: 0.85170436

 $00{:}35{:}20.606 \dashrightarrow 00{:}35{:}23.528$ quality of life for these individuals.

NOTE Confidence: 0.85170436

 $00:35:23.530 \longrightarrow 00:35:25.224$ And the infusion of factor 8 or

NOTE Confidence: 0.85170436

00:35:25.224 --> 00:35:27.318 factor 9 by patients is traditionally

NOTE Confidence: 0.85170436

 $00{:}35{:}27.318 \to 00{:}35{:}29.058$ given at home intravenously.

NOTE Confidence: 0.85170436

 $00:35:29.060 \longrightarrow 00:35:32.030$ Patients from a very young age learn to start

NOTE Confidence: 0.85170436

 $00:35:32.030 \longrightarrow 00:35:34.904$ an Ivy and infuse factor 8 or factor 9,

NOTE Confidence: 0.85170436

 $00:35:34.910 \longrightarrow 00:35:36.530$ but because of the short

NOTE Confidence: 0.85170436

 $00:35:36.530 \longrightarrow 00:35:37.826$ half-life of these drugs,

NOTE Confidence: 0.85170436

 $00:35:37.830 \longrightarrow 00:35:39.951$ about 12 hours for factor 8 and

NOTE Confidence: 0.85170436

 $00:35:39.951 \longrightarrow 00:35:42.379$ 18 to 24 hours for factor 9,

NOTE Confidence: 0.85170436

 $00{:}35{:}42.380 \dashrightarrow 00{:}35{:}44.676$ they need to be administered two to

00:35:44.676 --> 00:35:46.597 three to sometimes four times per

NOTE Confidence: 0.85170436

 $00{:}35{:}46.597 \dashrightarrow 00{:}35{:}49.056$ week to keep the factor levels in a

NOTE Confidence: 0.85170436

 $00:35:49.056 \longrightarrow 00:35:50.826$ range that will prevent bleeding.

NOTE Confidence: 0.85170436

 $00:35:50.830 \longrightarrow 00:35:52.978$ So this is an onerous thing

NOTE Confidence: 0.85170436

 $00:35:52.978 \longrightarrow 00:35:54.410$ for patients to do.

NOTE Confidence: 0.85170436

 $00:35:54.410 \longrightarrow 00:35:57.662$ And any advances here would be

NOTE Confidence: 0.85170436

00:35:57.662 --> 00:35:59.830 greatly appreciated by them.

NOTE Confidence: 0.85170436

 $00{:}35{:}59.830 \dashrightarrow 00{:}36{:}02.268$ So here's the obligatory coagulations

NOTE Confidence: 0.85170436

 $00:36:02.268 \longrightarrow 00:36:05.656$ slide that I would like to show

NOTE Confidence: 0.85170436

 $00{:}36{:}05.656 \dashrightarrow 00{:}36{:}07.997$ to to reinforce and emphasize

NOTE Confidence: 0.85170436

 $00:36:07.997 \longrightarrow 00:36:11.308$ the role that Factor 8 and factor

NOTE Confidence: 0.85170436

00:36:11.308 --> 00:36:13.580 9 having blood coagulation.

NOTE Confidence: 0.85170436

 $00{:}36{:}13.580 \dashrightarrow 00{:}36{:}17.304$ So what we're seeing here is the

NOTE Confidence: 0.85170436

 $00:36:17.304 \longrightarrow 00:36:20.041$ tissue factor initiated pathway and

NOTE Confidence: 0.85170436

 $00:36:20.041 \longrightarrow 00:36:23.173$ activation of factor 10 by tissue

00:36:23.173 --> 00:36:25.915 factor 7A or activation by factor

NOTE Confidence: 0.85170436

 $00{:}36{:}25.915 \dashrightarrow 00{:}36{:}29.160$ 9 to 9 A by tissue factor 7A.

NOTE Confidence: 0.85170436

 $00{:}36{:}29.160 \dashrightarrow 00{:}36{:}32.560$ And 9A is also able to activate $9{:}50$

NOTE Confidence: 0.85170436

 $00:36:32.655 \longrightarrow 00:36:36.055$ A O2 pathways to get down to this

NOTE Confidence: 0.85170436

00:36:36.055 --> 00:36:38.630 all important enzyme factor 10A,

NOTE Confidence: 0.85170436

 $00:36:38.630 \longrightarrow 00:36:40.922$ and in this latter reaction factor

NOTE Confidence: 0.85170436

 $00:36:40.922 \longrightarrow 00:36:43.885$ 8 serves as a cofactor for the

NOTE Confidence: 0.85170436

 $00:36:43.885 \longrightarrow 00:36:45.238$ enzyme factor 9A.

NOTE Confidence: 0.85170436

 $00:36:45.240 \longrightarrow 00:36:48.166$ To act on its substrate factor 10

NOTE Confidence: 0.85170436

 $00{:}36{:}48.166 \dashrightarrow 00{:}36{:}50.785$ and increases the rate of reaction

NOTE Confidence: 0.85170436

 $00{:}36{:}50.785 \dashrightarrow 00{:}36{:}53.767$ hundreds of 1000 fold when factor 8

NOTE Confidence: 0.85170436

 $00:36:53.856 \longrightarrow 00:36:56.495$ is able to align the substrate and

NOTE Confidence: 0.85170436

 $00:36:56.495 \longrightarrow 00:36:58.899$ enzyme on a phospholipid surface in

NOTE Confidence: 0.85170436

 $00:36:58.899 \longrightarrow 00:37:02.978$ the correct in. In the correct fashion.

NOTE Confidence: 0.85170436

 $00:37:02.980 \longrightarrow 00:37:05.212$ One other thing to mention about

NOTE Confidence: 0.85170436

00:37:05.212 --> 00:37:08.141 Factor 8 before we get into some of

 $00:37:08.141 \longrightarrow 00:37:10.610$ the details of the advances is that

NOTE Confidence: 0.85170436

 $00{:}37{:}10.610 \dashrightarrow 00{:}37{:}13.290$ factor 8 travels if you will in the

NOTE Confidence: 0.85170436

 $00:37:13.290 \longrightarrow 00:37:15.410$ blood bound to von Willebrand factor.

NOTE Confidence: 0.85170436

 $00:37:15.410 \longrightarrow 00:37:17.979$ Von Willebrand factor is seen here in

NOTE Confidence: 0.85170436

00:37:17.979 --> 00:37:20.018 this linear structure at the bottom,

NOTE Confidence: 0.85170436

 $00:37:20.020 \longrightarrow 00:37:22.505$ factor 8 is the yellow diagram above,

NOTE Confidence: 0.85170436

 $00:37:22.510 \longrightarrow 00:37:25.345$ and the binding of factor 8 von

NOTE Confidence: 0.85170436

 $00{:}37{:}25.345 \dashrightarrow 00{:}37{:}26.937$ Willibrand factor enhances the

NOTE Confidence: 0.85170436

 $00:37:26.937 \longrightarrow 00:37:29.086$ half life of factor 8 from about

NOTE Confidence: 0.85170436

 $00:37:29.086 \longrightarrow 00:37:31.029$ 2 hours to about 12 hours.

NOTE Confidence: 0.85170436

 $00:37:31.030 \dashrightarrow 00:37:34.117$ So this is a very important interaction.

NOTE Confidence: 0.85170436

 $00:37:34.120 \longrightarrow 00:37:36.220$ And just to point out here,

NOTE Confidence: 0.85170436

 $00{:}37{:}36.220 \dashrightarrow 00{:}37{:}37.955$ 'cause this will become important

NOTE Confidence: 0.85170436

 $00:37:37.955 \longrightarrow 00:37:40.096$ later is that the binding site

NOTE Confidence: 0.85170436

 $00:37:40.096 \longrightarrow 00:37:42.178$ on von Willebrand factor is these

 $00:37:42.178 \longrightarrow 00:37:43.219$ two protein domains,

NOTE Confidence: 0.85170436

 $00:37:43.220 \longrightarrow 00:37:44.970$ designated D prime and D3,

NOTE Confidence: 0.85170436

 $00:37:44.970 \longrightarrow 00:37:46.998$ and another important point is there

NOTE Confidence: 0.85170436

 $00:37:46.998 \longrightarrow 00:37:49.769$ appears to be a large portion of the

NOTE Confidence: 0.85170436

00:37:49.769 --> 00:37:52.320 factor 8 molecules termed the B domain,

NOTE Confidence: 0.85170436

 $00:37:52.320 \dashrightarrow 00:37:55.120$ which is not required for factor 8 function,

NOTE Confidence: 0.85170436

 $00:37:55.120 \longrightarrow 00:37:57.706$ so you could remove that domain

NOTE Confidence: 0.85170436

 $00{:}37{:}57.706 \dashrightarrow 00{:}38{:}01.138$ and in fact factor 8 has a similar

NOTE Confidence: 0.85170436

 $00{:}38{:}01.138 \dashrightarrow 00{:}38{:}04.260$ activity than it does with that domain.

NOTE Confidence: 0.85170436

 $00:38:04.260 \longrightarrow 00:38:06.885$ So the advances in care of hemophilia

NOTE Confidence: 0.85170436

 $00{:}38{:}06.885 {\:{\circ}{\circ}{\circ}}>00{:}38{:}09.641$ really over the past five to six

NOTE Confidence: 0.85170436

 $00:38:09.641 \longrightarrow 00:38:11.975$ years come into three different areas.

NOTE Confidence: 0.85170436

 $00:38:11.980 \longrightarrow 00:38:13.138$ One is extended,

NOTE Confidence: 0.85170436

00:38:13.138 --> 00:38:14.296 half-life factor concentrates,

NOTE Confidence: 0.85170436

 $00:38:14.300 \longrightarrow 00:38:16.225$ allowing for patients to infuse

NOTE Confidence: 0.85170436

 $00:38:16.225 \longrightarrow 00:38:16.995$ less frequently.

00:38:17.000 --> 00:38:19.310 The development of non factor 8

NOTE Confidence: 0.85170436

 $00:38:19.310 \longrightarrow 00:38:20.465$ or 9 therapeutics,

NOTE Confidence: 0.85170436

 $00:38:20.470 \longrightarrow 00:38:23.530$ and then gene therapy and we'll

NOTE Confidence: 0.85170436

 $00:38:23.530 \longrightarrow 00:38:25.570$ go through these individually

NOTE Confidence: 0.85170436

 $00:38:25.662 \longrightarrow 00:38:28.084$ in the next 15 minutes or so.

NOTE Confidence: 0.85170436

 $00:38:28.090 \longrightarrow 00:38:30.155$ So the extended Half-life products

NOTE Confidence: 0.85170436

 $00:38:30.155 \longrightarrow 00:38:32.220$ have been produced by manipulating

NOTE Confidence: 0.85170436

 $00:38:32.285 \longrightarrow 00:38:33.505$ the recombinant factor eight

NOTE Confidence: 0.85170436

 $00:38:33.505 \longrightarrow 00:38:35.335$ or nine in a number of

NOTE Confidence: 0.85449994

 $00:38:35.401 \longrightarrow 00:38:37.850$ different ways, many of which are familiar

NOTE Confidence: 0.85449994

 $00{:}38{:}37.850 \dashrightarrow 00{:}38{:}39.861$ to you by either adding polyethylene

NOTE Confidence: 0.85449994

 $00:38:39.861 \longrightarrow 00:38:42.598$ glycol or conjugating the factor to the

NOTE Confidence: 0.85449994

 $00:38:42.598 \longrightarrow 00:38:45.248$ FC portion of immunoglobulin or albumen,

NOTE Confidence: 0.85449994

 $00:38:45.250 \longrightarrow 00:38:46.742$ to improve half-life, or,

NOTE Confidence: 0.85449994

 $00:38:46.742 \longrightarrow 00:38:48.980$ in the case of factor 8,

 $00:38:48.980 \longrightarrow 00:38:51.774$ to remove that B domain, which causes

NOTE Confidence: 0.85449994

 $00:38:51.774 \longrightarrow 00:38:55.043$ a slight increase in the half life.

NOTE Confidence: 0.85449994

 $00:38:55.050 \longrightarrow 00:38:57.626$ And there are now a number of products

NOTE Confidence: 0.85449994

 $00:38:57.626 \longrightarrow 00:39:00.476$ that have been approved for use at

NOTE Confidence: 0.85449994

00:39:00.476 --> 00:39:02.180 our extended Half-life products,

NOTE Confidence: 0.85449994

 $00:39:02.180 \longrightarrow 00:39:04.015$ and I'll draw your attention

NOTE Confidence: 0.85449994

 $00:39:04.015 \longrightarrow 00:39:06.680$ to the last three on this list.

NOTE Confidence: 0.85449994

00:39:06.680 --> 00:39:09.179 These are factor 9 products which have

NOTE Confidence: 0.85449994

 $00{:}39{:}09.179 \dashrightarrow 00{:}39{:}11.179$ been manipulated by these methods,

NOTE Confidence: 0.85449994

 $00:39:11.180 \longrightarrow 00:39:14.268$ seen here and the half life of these

NOTE Confidence: 0.85449994

 $00:39:14.268 \longrightarrow 00:39:16.982$ products has been extended from 18 to

NOTE Confidence: 0.85449994

 $00:39:16.982 \longrightarrow 00:39:20.177$ 24 hours to upwards of 90 or 100 hours.

NOTE Confidence: 0.85449994

 $00:39:20.180 \longrightarrow 00:39:23.444$ So this is allowed patients with factor 9

NOTE Confidence: 0.85449994

 $00:39:23.444 \longrightarrow 00:39:26.336$ deficiency or hemophilia B to be treated.

NOTE Confidence: 0.85449994

 $00:39:26.340 \longrightarrow 00:39:27.267$ Once a week,

NOTE Confidence: 0.85449994

00:39:27.267 --> 00:39:30.510 once every 10 days and in some circumstances,

 $00:39:30.510 \longrightarrow 00:39:32.400$ even once every two weeks.

NOTE Confidence: 0.85449994

 $00{:}39{:}32.400 \dashrightarrow 00{:}39{:}34.235$ So a significant advance for

NOTE Confidence: 0.85449994

 $00:39:34.235 \longrightarrow 00:39:36.070$ people needing to give intravenous

NOTE Confidence: 0.85449994

 $00:39:36.135 \longrightarrow 00:39:37.707$ therapy themselves at home.

NOTE Confidence: 0.85449994

 $00:39:37.710 \longrightarrow 00:39:40.734$ The advances in hemophilia A with factor 8.

NOTE Confidence: 0.85449994

00:39:40.740 --> 00:39:41.119 However,

NOTE Confidence: 0.85449994

00:39:41.119 --> 00:39:43.393 a much more modest with this

NOTE Confidence: 0.85449994

 $00:39:43.393 \longrightarrow 00:39:44.530$ type of manipulation,

NOTE Confidence: 0.85449994

 $00:39:44.530 \longrightarrow 00:39:46.784$ and it turns out that the the

NOTE Confidence: 0.85449994

 $00:39:46.784 \dashrightarrow 00:39:48.633$ degradation in the catabolism and

NOTE Confidence: 0.85449994

 $00:39:48.633 \longrightarrow 00:39:50.648$ clearance from the circulation of

NOTE Confidence: 0.85449994

 $00:39:50.648 \dashrightarrow 00:39:53.911$ factor 8 is much more linked to the

NOTE Confidence: 0.85449994

00:39:53.911 --> 00:39:55.891 clearance of von Willebrand factor,

NOTE Confidence: 0.85449994

 $00:39:55.900 \longrightarrow 00:39:58.570$ the protein that it's bound to.

NOTE Confidence: 0.85449994

 $00:39:58.570 \longrightarrow 00:40:00.328$ So making modifications in the FAQ.

 $00:40:00.330 \longrightarrow 00:40:03.246$ After 8 molecule has really had

NOTE Confidence: 0.85449994

00:40:03.246 --> 00:40:05.828 minimal effect up until recently

NOTE Confidence: 0.85449994

 $00:40:05.828 \longrightarrow 00:40:08.020$ on Factor 8 Half-life.

NOTE Confidence: 0.85449994

00:40:08.020 --> 00:40:10.778 So an interesting construct has been devised,

NOTE Confidence: 0.85449994

 $00:40:10.780 \longrightarrow 00:40:13.460$ and it's shown on the top panel here

NOTE Confidence: 0.85449994

00:40:13.460 --> 00:40:16.461 and in this construct the D prime and

NOTE Confidence: 0.85449994

00:40:16.461 --> 00:40:19.450 D3 regions of von Willebrand factor,

NOTE Confidence: 0.85449994

 $00:40:19.450 \longrightarrow 00:40:21.808$ the binding region to factor 8,

NOTE Confidence: 0.85449994

 $00{:}40{:}21.810 \dashrightarrow 00{:}40{:}24.922$ is linked to an FC portion of an

NOTE Confidence: 0.85449994

 $00:40:24.922 \longrightarrow 00:40:26.954$ immunoglobulin and linked to the

NOTE Confidence: 0.85449994

00:40:26.954 --> 00:40:29.294 B domain less factor 8 molecule,

NOTE Confidence: 0.85449994

 $00:40:29.300 \longrightarrow 00:40:31.658$ which also has linked on at

NOTE Confidence: 0.85449994

00:40:31.658 --> 00:40:32.837 this hydrophilic polypeptide,

NOTE Confidence: 0.85449994

 $00:40:32.840 \longrightarrow 00:40:35.598$ which also can extend the half life.

NOTE Confidence: 0.85449994

 $00:40:35.600 \longrightarrow 00:40:39.216$ So this product has been called bib 001.

NOTE Confidence: 0.85449994

 $00:40:39.220 \longrightarrow 00:40:40.680$ And was treated with.

 $00:40:40.680 \longrightarrow 00:40:43.324$ Was used to treat a handful of

NOTE Confidence: 0.85449994

00:40:43.324 --> 00:40:45.189 patients in a safety study,

NOTE Confidence: 0.85449994

 $00:40:45.190 \longrightarrow 00:40:46.935$ and those results were were

NOTE Confidence: 0.85449994

 $00:40:46.935 \longrightarrow 00:40:49.149$ reported in the New England Journal

NOTE Confidence: 0.85449994

 $00:40:49.149 \longrightarrow 00:40:51.159$ of Medicine earlier this year,

NOTE Confidence: 0.85449994

00:40:51.160 --> 00:40:53.010 and patients were either treated

NOTE Confidence: 0.85449994

 $00:40:53.010 \longrightarrow 00:40:55.597$ at two different doses of this new

NOTE Confidence: 0.85449994

 $00:40:55.597 \longrightarrow 00:40:57.589$ product and the factor a clearance

NOTE Confidence: 0.85449994

 $00{:}40{:}57.589 \dashrightarrow 00{:}40{:}59.528$ from the circulation was compared

NOTE Confidence: 0.85449994

 $00:40:59.528 \longrightarrow 00:41:01.940$ to the typical factor 8 clearance

NOTE Confidence: 0.85449994

 $00:41:01.940 \longrightarrow 00:41:04.618$ seen in the lighter blue bars here

NOTE Confidence: 0.85449994

00:41:04.618 --> 00:41:07.198 and what you can see I think,

NOTE Confidence: 0.85449994

 $00{:}41{:}07.200 \dashrightarrow 00{:}41{:}10.863$ is that the half life of this newer product.

NOTE Confidence: 0.85449994

00:41:10.870 --> 00:41:12.868 Is now about two days increased,

NOTE Confidence: 0.85449994

 $00:41:12.870 \longrightarrow 00:41:15.166$ about five or six fold the half life

 $00:41:15.166 \longrightarrow 00:41:17.548$ of the standard factor 8 product.

NOTE Confidence: 0.85449994

 $00:41:17.550 \longrightarrow 00:41:19.895$ So this this product is now in

NOTE Confidence: 0.85449994

00:41:19.895 --> 00:41:21.797 large scale clinical trials and I

NOTE Confidence: 0.85449994

 $00:41:21.797 \longrightarrow 00:41:24.202$ think in the next year or two we

NOTE Confidence: 0.85449994

00:41:24.202 --> 00:41:26.227 should have some more information,

NOTE Confidence: 0.85449994

 $00:41:26.230 \longrightarrow 00:41:28.774$ and this may be an advanced

NOTE Confidence: 0.85449994

 $00:41:28.774 \longrightarrow 00:41:31.860$ for for some of our patients.

NOTE Confidence: 0.85449994

 $00:41:31.860 \longrightarrow 00:41:33.636$ So let me shift for a minute for

NOTE Confidence: 0.85449994

 $00:41:33.636 \longrightarrow 00:41:35.799$ the to the non factor product for

NOTE Confidence: 0.85449994

00:41:35.799 --> 00:41:37.832 the treatment of hemophilia and I

NOTE Confidence: 0.85449994

 $00{:}41{:}37.832 \dashrightarrow 00{:}41{:}39.108$ think their significant advance

NOTE Confidence: 0.85449994

 $00:41:39.108 \longrightarrow 00:41:41.370$ has been made here and there are

NOTE Confidence: 0.85449994

 $00:41:41.370 \longrightarrow 00:41:43.350$ three drugs that will talk about

NOTE Confidence: 0.85449994

 $00:41:43.350 \longrightarrow 00:41:45.428$ will really focus primarily on this

NOTE Confidence: 0.85449994

00:41:45.428 --> 00:41:47.450 first drug which is called EMAS

NOTE Confidence: 0.84887415

00:41:47.511 --> 00:41:50.895 ISM AB. A nemesis Omab is a

 $00:41:50.895 \longrightarrow 00:41:52.668$ bispecific monoclonal antibody.

NOTE Confidence: 0.84887415

00:41:52.670 --> 00:41:56.086 That binds the factor 9 and factor 10,

NOTE Confidence: 0.84887415

 $00:41:56.090 \longrightarrow 00:41:59.514$ so it simulates the activity of Factor 8.

NOTE Confidence: 0.84887415

 $00:41:59.520 \longrightarrow 00:42:01.974$ Remember that factor 8 is able

NOTE Confidence: 0.84887415

 $00:42:01.974 \longrightarrow 00:42:04.580$ to colocalize factor 9 and factor

NOTE Confidence: 0.84887415

 $00:42:04.580 \longrightarrow 00:42:06.790$ 10 on a phospholipid surface.

NOTE Confidence: 0.84887415

 $00:42:06.790 \longrightarrow 00:42:10.024$ This antibody is able to bind factor

NOTE Confidence: 0.84887415

 $00{:}42{:}10.024 \dashrightarrow 00{:}42{:}14.057$ 9A and factor 10 in the circulation an

NOTE Confidence: 0.84887415

 $00{:}42{:}14.057 \dashrightarrow 00{:}42{:}17.529$ again simulate the activity of Factor 8.

NOTE Confidence: 0.84887415

 $00:42:17.530 \longrightarrow 00:42:21.148$ So this drug is not exactly like Factor 8.

NOTE Confidence: 0.84887415

 $00:42:21.150 \longrightarrow 00:42:21.952$ There are.

NOTE Confidence: 0.84887415

 $00{:}42{:}21.952 \dashrightarrow 00{:}42{:}23.957$ There are certain differences here.

NOTE Confidence: 0.84887415

 $00:42:23.960 \longrightarrow 00:42:26.774$ It binds to factor 8 and nine

NOTE Confidence: 0.84887415

 $00:42:26.774 \longrightarrow 00:42:27.980$ in the circulation,

NOTE Confidence: 0.84887415

 $00:42:27.980 \longrightarrow 00:42:30.386$ not just on the phospholipid membrane.

 $00:42:30.390 \longrightarrow 00:42:31.998$ It has different infinities

NOTE Confidence: 0.84887415

 $00:42:31.998 \longrightarrow 00:42:34.008$ for the substrate and enzyme,

NOTE Confidence: 0.84887415

 $00:42:34.010 \longrightarrow 00:42:36.782$ and whether or not that becomes an

NOTE Confidence: 0.84887415

 $00:42:36.782 \longrightarrow 00:42:39.892$ issue for this drug will only know

NOTE Confidence: 0.84887415

 $00:42:39.892 \longrightarrow 00:42:42.652$ as more experience is is accumulated.

NOTE Confidence: 0.84887415

00:42:42.660 --> 00:42:43.426 But nonetheless,

NOTE Confidence: 0.84887415

00:42:43.426 --> 00:42:46.107 this drug is really shown dramatic activity,

NOTE Confidence: 0.84887415

 $00:42:46.110 \longrightarrow 00:42:48.854$ so this this is a study that was

NOTE Confidence: 0.84887415

 $00{:}42{:}48.854 \dashrightarrow 00{:}42{:}51.697$ published a few years ago in the

NOTE Confidence: 0.84887415

 $00{:}42{:}51.697 \dashrightarrow 00{:}42{:}53.767$ New England Journal of Medicine.

NOTE Confidence: 0.84887415

 $00:42:53.770 \longrightarrow 00:42:56.612$ Here we had patients who have hemophilia

NOTE Confidence: 0.84887415

00:42:56.612 --> 00:42:58.748 A with inhibitors to factor 8,

NOTE Confidence: 0.84887415

 $00:42:58.750 \longrightarrow 00:43:01.326$ so a challenging group of patients to

NOTE Confidence: 0.84887415

 $00:43:01.326 \longrightarrow 00:43:03.703$ treat were treated either with their

NOTE Confidence: 0.84887415

 $00:43:03.703 \longrightarrow 00:43:05.708$ typical regimen of recombinant factor

NOTE Confidence: 0.84887415

00:43:05.708 --> 00:43:07.982 7A or factor 8, bypassing activity,

00:43:07.982 --> 00:43:10.824 or with Emma system AB given by

NOTE Confidence: 0.84887415

 $00{:}43{:}10.824 \dashrightarrow 00{:}43{:}12.730$ subcutaneous injection once a week

NOTE Confidence: 0.84887415

 $00:43:12.730 \longrightarrow 00:43:14.525$ and the annual bleeding rate.

NOTE Confidence: 0.84887415

00:43:14.530 --> 00:43:17.099 Is been been described on this slide

NOTE Confidence: 0.84887415

 $00:43:17.099 \longrightarrow 00:43:20.532$ here and you could see if we just look

NOTE Confidence: 0.84887415

 $00:43:20.532 \longrightarrow 00:43:23.457$ at these blue histograms for a minute here.

NOTE Confidence: 0.84887415

 $00:43:23.460 \longrightarrow 00:43:26.496$ The annualized bleeding rate in the

NOTE Confidence: 0.84887415

 $00{:}43{:}26.496 \to 00{:}43{:}28.969$ EMA system app Prophylaxis Group

NOTE Confidence: 0.84887415

 $00:43:28.969 \longrightarrow 00:43:31.905$ was about five or six and it was

NOTE Confidence: 0.84887415

 $00{:}43{:}31.905 \dashrightarrow 00{:}43{:}34.558$ almost 30 in the standard of care.

NOTE Confidence: 0.84887415

 $00{:}43{:}34.560 \dashrightarrow 00{:}43{:}36.532$ Treatment of patients with

NOTE Confidence: 0.84887415

00:43:36.532 --> 00:43:38.504 hemophilia A and inhibitors.

NOTE Confidence: 0.84887415

 $00:43:38.510 \longrightarrow 00:43:40.834$ So a really significant

NOTE Confidence: 0.84887415

 $00{:}43{:}40.834 \dashrightarrow 00{:}43{:}43.158$ advantage for these individuals.

NOTE Confidence: 0.84887415

 $00:43:43.160 \longrightarrow 00:43:45.421$ And then a second study was published

 $00:43:45.421 \longrightarrow 00:43:47.770$ with looked at patients with hemophilia

NOTE Confidence: 0.84887415

 $00:43:47.770 \longrightarrow 00:43:49.950$ A without inhibitors and these.

NOTE Confidence: 0.84887415

 $00{:}43{:}49.950 \dashrightarrow 00{:}43{:}51.830$ This was a randomized trial.

NOTE Confidence: 0.84887415

 $00:43:51.830 \longrightarrow 00:43:53.610$ Patients were treated with one

NOTE Confidence: 0.84887415

00:43:53.610 --> 00:43:56.425 of two doses of Emma's is a map

NOTE Confidence: 0.84887415

 $00{:}43{:}56.425 \dashrightarrow 00{:}43{:}58.357$ either given weekly or every other

NOTE Confidence: 0.84887415

00:43:58.357 --> 00:44:00.499 week by subcutaneous injection,

NOTE Confidence: 0.84887415

 $00:44:00.500 \longrightarrow 00:44:02.008$ compared with no prophylaxis.

NOTE Confidence: 0.84887415

00:44:02.008 --> 00:44:04.270 About 100 patients in the trial,

NOTE Confidence: 0.84887415

 $00{:}44{:}04.270 \dashrightarrow 00{:}44{:}06.465$ and again the annual annualized

NOTE Confidence: 0.84887415

NOTE Confidence: 0.84887415

 $00:44:08.741 \longrightarrow 00:44:10.397$ 40 to about one or two.