

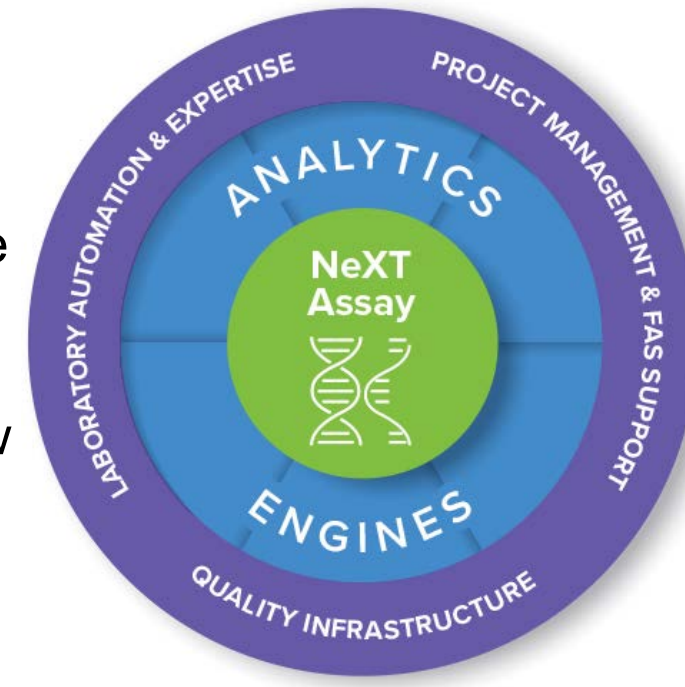
# T-cell receptor alpha and beta repertoire profiling using an augmented transcriptome

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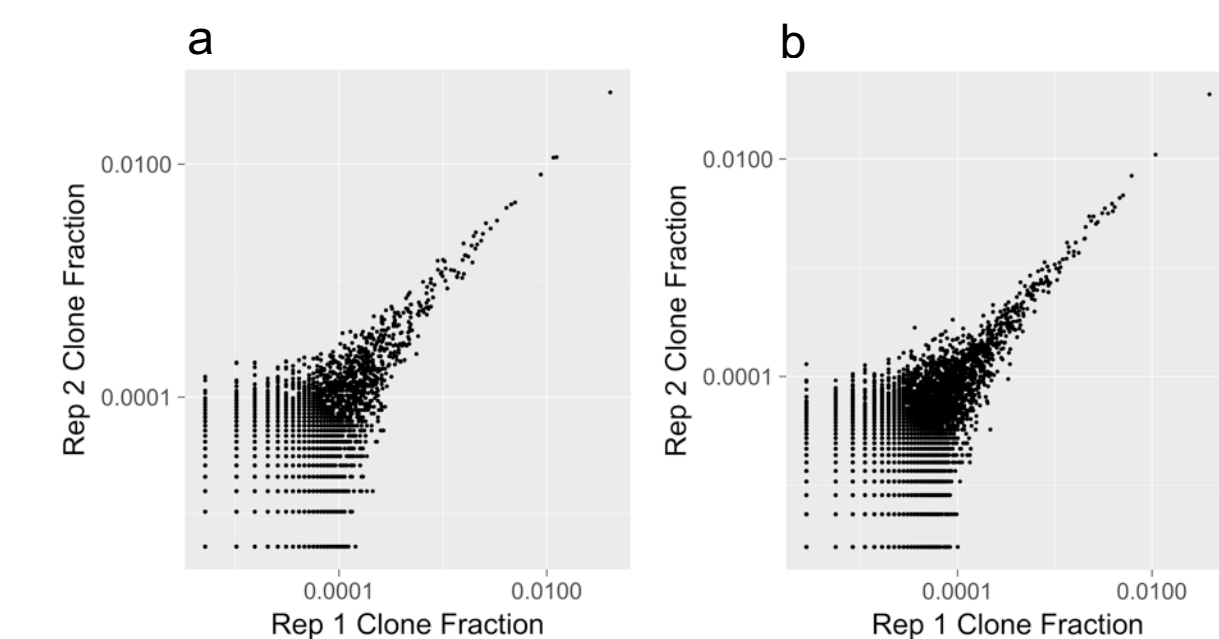
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## Introduction

The promise of immunotherapy has revealed the need for comprehensive profiling of the tumor and its immune microenvironment. This includes analysis of the T-cell receptor (TCR) repertoire, which has traditionally not been feasible with an exome/transcriptome platform. To address this challenge, we developed ImmunID NeXT, an augmented, immuno-oncology optimized exome/transcriptome platform designed to provide a more comprehensive view of the tumor and tumor microenvironment (TME) from limited FFPE tumor biopsies. This includes profiling both the TCR  $\alpha$  and  $\beta$  chains. We show that ImmunID NeXT accurately and reproducibly profiles abundant clones, and provides information on the diversity of T-cells in tumor samples.



## Accurate immune repertoire sequencing with NeXT



Abundances of clones found in common between separate preps of a healthy PBMC sample.  $R^2$  values of 0.99 for both TCR $\alpha$  (a) and TCR $\beta$  (b).

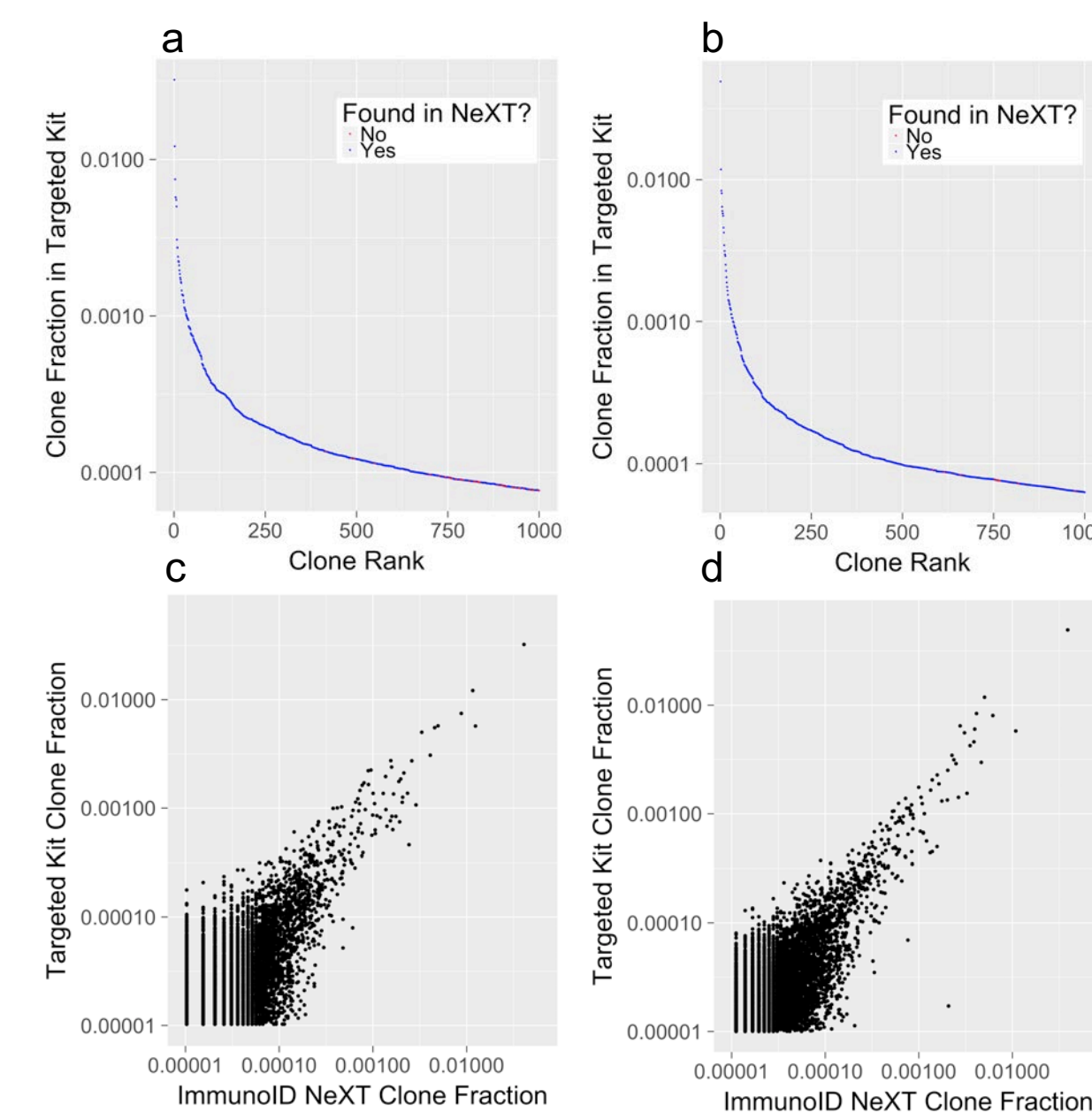
## Accurate profiling of top clones

Next, we compare the concordance of clones from ImmunID NeXT to the top clones from a standalone TCR sequencing approach. Compared to the standalone approach, we identify 96% of the top 1000 TCR $\alpha$  clones, and 99% of the top 1000 TCR $\beta$  clones, both with highly concordance abundances across all shared clones ( $R^2=0.95$  and  $R^2=0.94$  in TCR $\alpha$  and TCR $\beta$ , respectively). This shows that our approach has the capability to accurately profile top clones.

Identification of the top 1000 clones as identified in a targeted kit for TCR $\alpha$  (a) and TCR $\beta$  (b). Comparison of the abundances of clones found in both the targeted kit vs. ImmunID NeXT (clones  $\geq 0.00001$ ) for TCR $\alpha$  (c) and TCR $\beta$  (d).

## Reproducible profiling of TCR $\alpha$ and TCR $\beta$

We first evaluate the reproducibility of ImmunID NeXT at profiling both TCR $\alpha$  and TCR $\beta$  from RNA by analyzing the concordance of clones using replicates of PBMCs. Abundances of clones shared between replicates have a very high concordance, showing that even with a diverse repertoire in healthy PBMCs, our TCR profiling provides reproducible results.



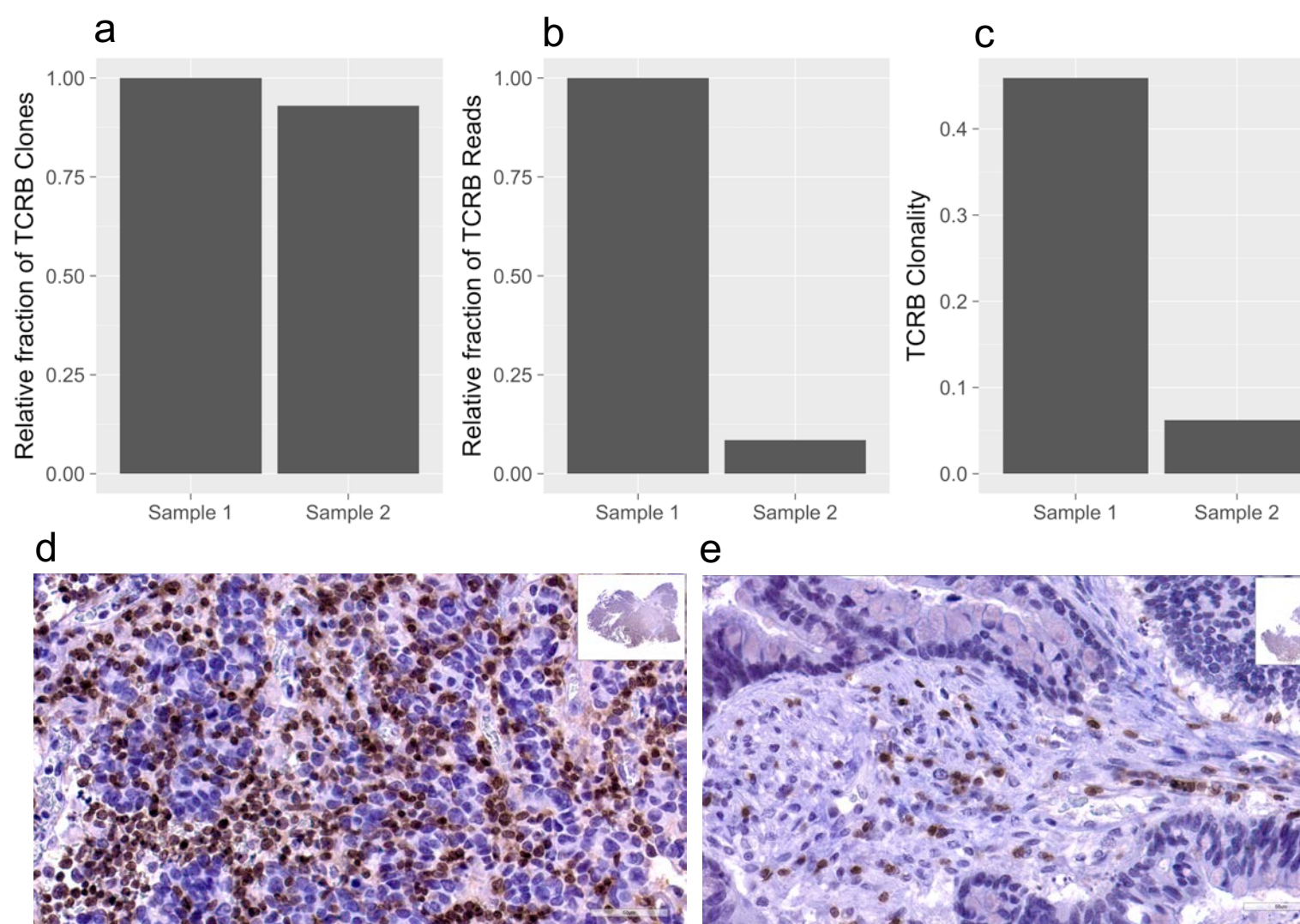
## Repertoire profiling with tumor FFPE samples

### Reproducibility in FFPE samples

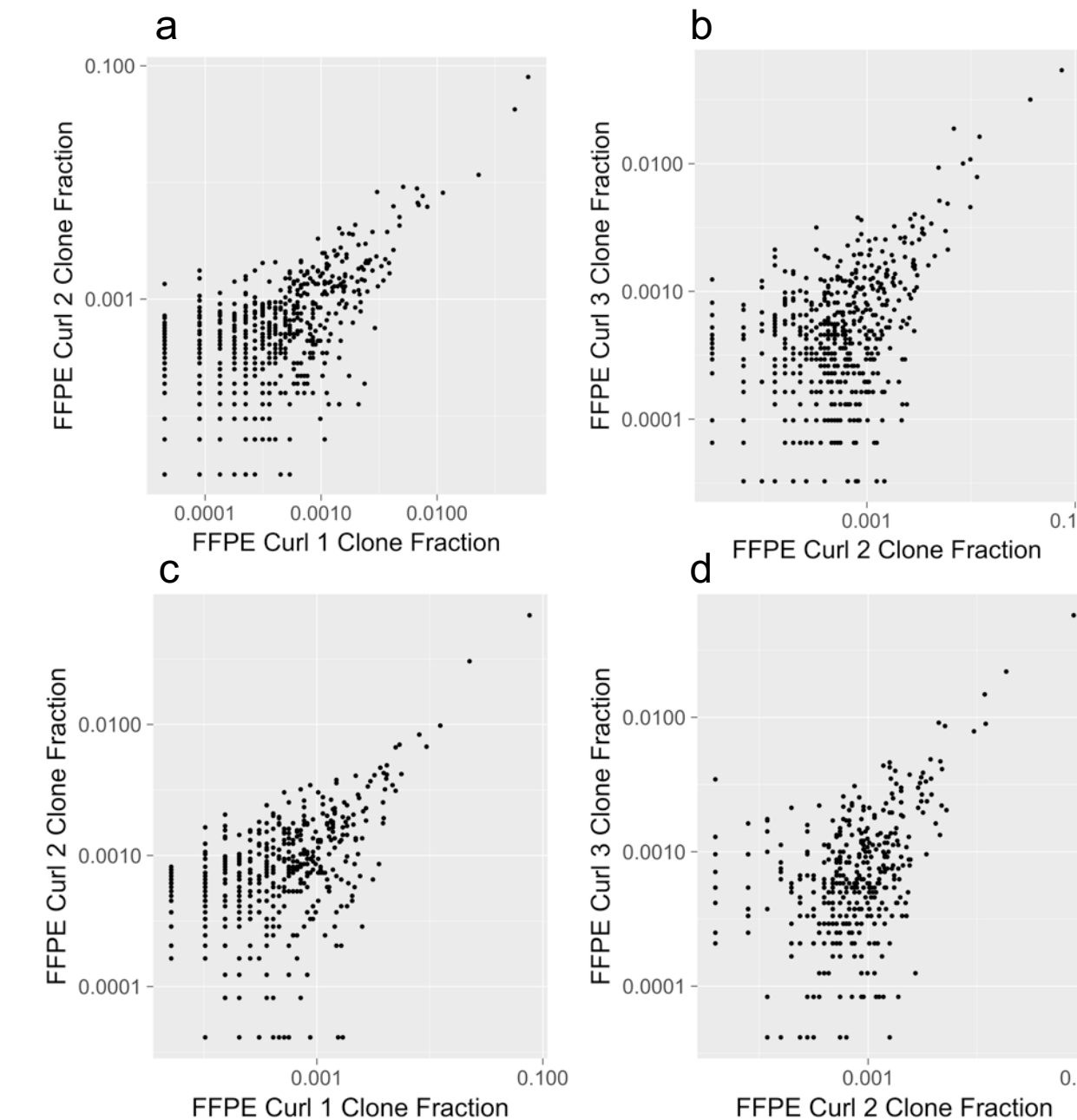
We also analyze patient-derived colorectal cancer (CRC) FFPE tumors to characterize the profiles of tumor-infiltrating immune repertoires. First, we analyze the reproducibility of clones identified using serial sections of FFPE samples. We observe a strong concordance of the abundances for shared clones between the sections, showing that our approach is robust to degraded FFPE samples.

Comparison of abundances for clones found in common between serial sections of a tumor FFPE sample.  $R^2$  values of 0.92 (a) and 0.89 (b) for TCR $\alpha$ , and 0.94 (c) and 0.91 (d) for TCR $\beta$ .

### Clonal distributions compared to immunostaining



(a,b) Comparison of Sample 2 relative to Sample 1 of fraction of TCR $\beta$  clones and of TCR $\beta$  reads. (c) TCR $\beta$  clonality calculated for Samples 1 and 2. IHC of CD3 (brown) for Samples 1 (d) and 2 (e).

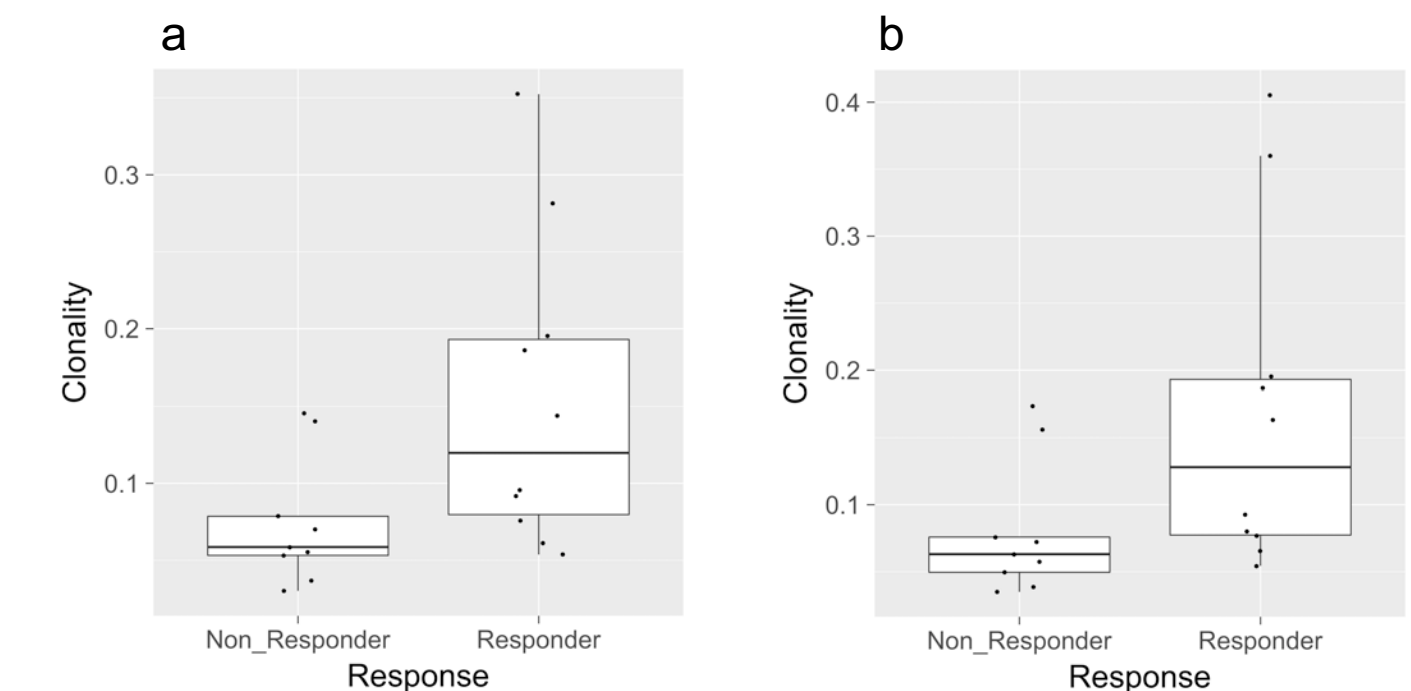


We compare TCR $\beta$  profiling with immunohistochemical (IHC) staining of CD3+ cells in two additional CRC tumor tissues. In our analysis of T-cell infiltration, Sample 1 has only a slightly higher number of clones than Sample 2, but a much higher number of TCR $\beta$  reads and clonality than Sample 2. This is reflected in the IHC data, where Sample 1 has significant infiltration of T-cells (49%) compared to Sample 2 (23%). This shows how different metrics of TCR profiling provide complementary biological information.

## Profiling of TCR clonality in tumor samples

### Clonality in melanoma patients

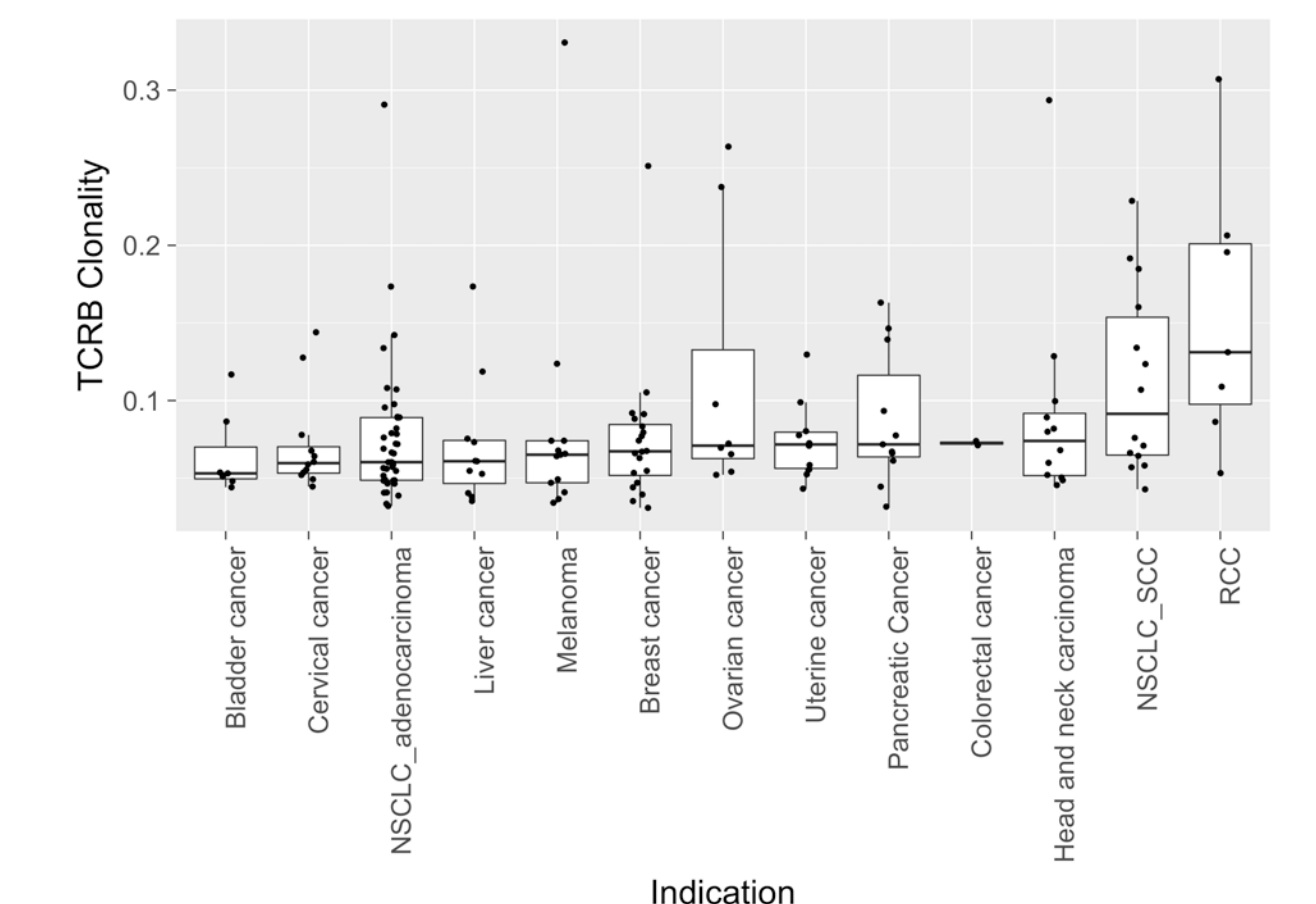
To further analyze the utility of TCR clonality, we use ImmunID NeXT to profile pre-treatment tumor samples in a cohort of melanoma patients who underwent PD-1 blockade therapy. In this cohort, clonality is significantly different in responders to checkpoint inhibition based on either TCR $\alpha$  ( $p=0.028$ ) or TCR $\beta$  ( $p=0.022$ ).



Comparison of clonality for responders and non-responders of checkpoint blockade therapy for both TCR $\alpha$  (a) and TCR $\beta$  (b).

### Diversity of clonality across tumor indications

Finally, we use ImmunID NeXT to profile the diversity of TCR $\beta$  clonality across 168 solid tumor samples. This ongoing effort to profile a diverse set of indications can provide us with a deeper understanding of the distributions of immunological metrics, such as TCR clonality, across samples.



## Conclusion

The ImmunID NeXT platform can provide insight into the diversity of the immune repertoire, highlighting one aspect of the platform's ability to provide analysis of the TME. We demonstrate that ImmunID NeXT is reproducible and accurate at profiling TCR $\alpha$  and TCR $\beta$  clones, as well as robust to degraded FFPE samples. We also describe how profiling clonal distributions using ImmunID NeXT can be used to gain understanding of the immunological composition of the TME. Finally, we show how ImmunID NeXT can profile the diversity of the TCR repertoire in tumor samples. In summary, by combining exome/transcriptome sequencing with TCR characterization into a single assay, our ImmunID NeXT platform enables comprehensive immuno-genomics characterization of a tumor sample while reducing overall sample requirements and cost.