# Xenograft-associated B cell lymphoproliferative disease as a surrogate model to study Epstein-Barr Virus (EBV) driven lymphoma of the elderly



Tomas Vilimas<sup>1,3</sup>, Gloryvee Rivera<sup>1,3</sup>, Brandie Fullmer<sup>1,3</sup>, Wiem Lassoued<sup>1,3</sup>, Lindsay Dutko<sup>1,3</sup>, Amanda Peach<sup>1,3</sup>, Corinne Camalier<sup>1,3</sup>, Li Chen<sup>1,3</sup>, Rajesh Patidar<sup>1,3</sup>, Suzanne Borgel<sup>3</sup>, John Carter<sup>3</sup>, Howard Stotler<sup>3</sup>, Raymond Divelbiss<sup>3</sup>, Jesse Stottlemyer<sup>3</sup>, Michelle M. Gottholm-Ahalt<sup>2,4</sup>, Michelle A. Crespo-Eugeni<sup>2,4</sup>, Sean McDermott<sup>1,3</sup>, William Jacob<sup>1,3</sup>, Liqiang Xi<sup>5</sup>, Pallavi Galera<sup>5</sup>, Yvonne A. Evrard<sup>3</sup>, Melinda G. Hollingshead<sup>2,4</sup>, Elaine S. Jaffe<sup>5</sup>, Mark Raffeld<sup>5</sup>, Biswajit Das<sup>1,3</sup>, Chris Karlovich<sup>1,3</sup>, Vivekananda Datta<sup>1,3</sup>, James H. Doroshow<sup>4</sup> and P. Mickey Williams<sup>1,3</sup> <sup>1</sup>Molecular Characterization Lab, FNLCR; <sup>2</sup>Biological Testing Branch, Developmental Therapeutics Program, FNLCR; <sup>3</sup>Leidos Biomedical Research, Inc.,

<sup>4</sup>Division of Cancer Treatment and Diagnosis, <sup>5</sup>Center for Cancer Research, National Cancer Institute





#### Abstract

Background: Patient-derived tumor xenografts (PDX) are powerful tools to study cancer biology, cancer genomics and developmental therapeutics. A common problem in the development o PDX models is proliferation of atypical lymphocytes at the implantation site, which often overtake or limit the growth of the original tumor. This atypical lymphocyte proliferation has been described as xenograft-associated B cell lymphoproliferative disease (XABLD) in our PDX models. In this study, we characterized XABLD cases by morphology, immunophenotyping and genomic profiling. We hypothesize that XABLD tumors are morphologically and phenotypically similar to EBV-driven post-transplant lymphoproliferative disease (PTLD) and diffuse large B cell lymphoma (DLBCL). XABLD is a surrogate model to study EBV-driven PTLD and DLBCL.

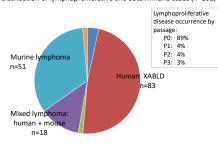
Materials and Methods: Models were generated from patient tissue collected under NCI Tissue Procurement Protocol (clinicaltrials.gov: NCT00900198) and CIRB Tissue Procurement Protocol 9846 for development of models for NCI's Patient-Derived Models Repository (https://pdmr.cancer.gov). Specimens were implanted subcutaneously in NOD/SCID/IL2Rg null (NSG) mice and animal health was monitored throughout the study. Tumors in mice with suspected XABLD were harvested and reviewed by histology and immunohistochemical analysis for CD45, B and T cell markers, EBV status, B-cell clonality assay. All samples were also classified by the Lymph2Cx NanoString cell of origin assay and transcriptome profiling

Results: XABLD cases were found to originate from both solid tumor and circulating tumor cell implants. XABLD is a rapidly growing tumor positive for CD45, CD20, and LMP1 stains, 36 of 42 cases are strongly positive for PD-L1 stain. 39 of 42 cases exhibited an activated B cell (ABC) phenotype with evidence of elevated NF-kB signaling. Most cases were monoclonal for IGK/IGH and contained high numbers of tumor infiltrating CD8-positive T-cells with associated high mRNA expression of activated T cell markers.

Conclusions: The clinical presentation, morphology and molecular characteristics of XABLD cases were similar to EBV-driven DLBCL. As the XABLD models exhibited frequent PD-L1 expression and marked infiltration of CD8-positive T cells, they may be useful for in vitro evaluation of checkpoint

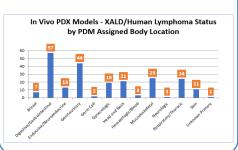
## **XABLD** prevalence in the NCI Patient-Derived Model Repository (PDMR)

Distribution of lymphoproliferative and autoimmune cases (n=161)



XABLD	PDX model
10	7
73	248
)	10

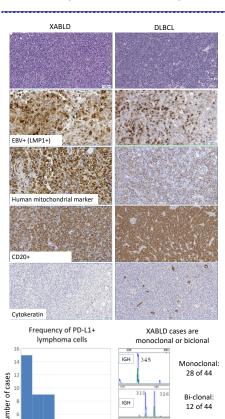
- GvHD (n=5)
- Mixed Dx in patient: solid tumor + lymphoma (n=2)
- B cell lymphoma Dx in patient (n=2)



## XABLD exhibit features of DLBCL-like B cell lymphoma

33

- 42 characterized cases
- EBV+, human mitochondrial marker+, CD45+
- Morphological diagnosis: Polymorphic: Monomorphic:
- CD20 IHC: strong positive
- Lymph2Cx phenotype classification: Activated B cell (ABC): Germinal B cell (GCB): Unclassified:
- > PD-L1 IHC: mainly cases with low fraction of PD-L1 positive cells

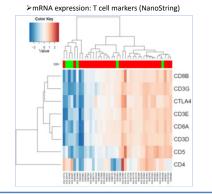


0-1020 30 40 50 60 70 80

% positive cells

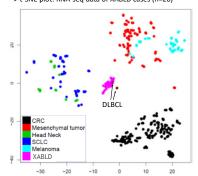
Oligoclonal: 4 of 44

# Some XABLD cases have significant T cell involvement Frequency of CD4 and CD8 T cells in XABLD (passage 0) CD4 CD8 30 40 50 % positive cells



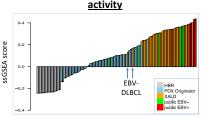
### XABLD cases cluster with ABC-subtype DLBCL

>t-SNE plot: RNA-seg data of XABLD cases (n=26)



- Gene expression clustering of XABLD, DLBCL and selected solid tumor histologies from the public PDMR collection
- Additional EBV+ DLBCL gene expression datasets will be obtained to confirm that XABLD transcriptomes are similar to EBV+ DLBCL

### XABLD models exhibit elevated NF-kB pathway activity



- ➤ EBV+ DLBCL are known to have elevated NF-kB signaling
- Single-sample GSEA enrichment scores for 24 NF-kB target genes
- ➤ Public EBV- and EBV+: Published DLBCL data

#### Conclusions

>XABLD are lymphomas originating from B cells present in solid

>XABLD represent EBV positive DLBCL-like tumors

- EBV-positive
- · ABC phenotype
- · NF-kB activation signature
- Transcriptome profile may be similar to DLBCL

>Some XABLD models have significant T cell involvement

>XABLD may be useful as surrogate DLBCL models for preclinical research

#### **Future work**

- Further characterized XABLD for:
  - IGH and IGK B-cell clonality assay
  - · EBV latency typing
- Compare gene expression profile of XABLD to DLBCL
- Characterize mutations and aneuploidy by whole exome
- ➤ Generate XABLD cell line models
- Compare treatment response of XABLD and DLBCL models

#### References

- Kato H, Karube K, Yamamoto K, Takizawa J, Tsuzuki S, Yatabe Y, Kanda T, Katayama M, Ozawa Y, Ishitsuka K. Okamoto M. Kinoshita T. Ohshima K. Nakamura S. Morishima Y. Seto M. Gene expression profiling of Epstein-Barr virus-positive diffuse large B-cell lymphoma of the elderly reveals alterations of characteristic oncogenetic pathways. Cancer Science 105, 537-544 (2014).

  Menon MP, Pittaluga S, Jaffe ES. The histological and biological spectrum of diffuse large B-cell lymphoma in the World Health Organization classification. The Cancer Journal 18(5), 411-420
- Ok CY, Li L, Xu-Monette ZY, Visco C, Tzankov A, Manyam GC, Montes-Moreno S, Dybkaer K, Chiu A. Orazi A. Zu Y. Bhagat G. Chen J. Richards KL. Hsi ED. Choi WW. van Krieken JH. Huh J. Ai W. Ponzoni M, Ferreri AJ, Farnen JP, Møller MB, Bueso-Ramos CE, Miranda RN, Winter JN, Piris MA, Medeiros LJ, Young KH. Prevalence and clinical implications of Epstein-Barr virus infection in de novo diffuse large B-cell lymphoma in Western countries. Clinical Cancer Research 20(9), 2338-

NCI-Frederick is accredited by AAALAC International and follows the Public Health Service Policy for the Care and Use of Laboratory Animals. Animal care was provided in accordance with the procedures outlined in the "Guide for Care and Use of Laboratory Animals" (National Research Council; 2011; National Academy Press; Washington, D.C.)

This project has been funded in whole or in part with federal funds from the National Cancer Institute National Institutes of Health, under contract HHSN261200800001F. The content of this publication does not necessarily reflect the views or policies of the Department of Health and Human Services, nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. Government.