Multi-omics

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Canopy Biosciences World-wide



Canopy's Product range

Gene Editing

- CAS9 Protein
- CRISPR Complete Kits
- TUNR Flexible Gene Editing
- miRNA CRISPR Knockout Kits
- Custom Cell Line Engineering

- Gene/Protein Expression
 Bioprocessing
 - Chip Cytometry
 - Nanostring
 - RNAseq Services
 - RAREseg error corrected NGS services
 - EZ Species
 - Meso Scale Discovery
 - miRNA qPCR Kits
 - miRNA Mimics
 - Multiplex PCR 20/20 Kits & Reagents
 - Cellatrix 3D Cell Culture Systems

- <u>CHO complete</u>
- Host Cell Protein ELISA Kits



CRISPR Complete Kits

- CRISPR Complete Kit is the only CRISPR Kit for Knock-in and Point mutations
 - CRISPR kits are available for almost any project type, including knockouts, knockins, TUNR knockdowns, point mutations, gene replacements, humanizations, tagging, and many more.
 - Included in the CRISPR Complete Kit:
 - crRNA—custom-designed for your project
 - tracrRNA
 - Cas9 Nuclease Protein
 - Donor construct—custom-designed for your project (may be provided as oligonucleotide or plasmid, depending on your project needs)





Main Menu

TUNR Flexible Gene Editing

- Precisely tune gene expression from 100% all the way down to complete knockout.
- PolyA Sequences Reduce Translation.
- Advantages:
 - Generate range of KD
 - Modification of <u>endogenous</u> expression
 - No random insertions
 - Synteny maintained
 - Intronic regions maintained
 - Endogenous promoter
 - Permanent, stable modification









Main Menu

Cell Line Engineering Main project types

1. Knockout: inactivation of a gene

- a) NHEJ knockout (standard)
- b) Large deletion
- 2. Knock-in: targeted insertion of exogenous DNA
 - a) Replacement of mouse gene with human gene
 - b) Introduction of point mutation
 - c) Correction of point mutation
 - d) Tagging with reporter
 - e) More
- 3. Random transgenic: random insertion of exogenous DNA
 - a) Overexpression of recombinant protein
 - b) Tagging with reporter
 - c) more



Successfully Edited Cell Lines

- Many cancer cell lines
- Human iPSC and ESCs
- CHO for Bioprocessing
- You can send own line or we can procure

Cell lines	Specise	Tissue	MCF10DCIS.com	human	Breast cancer cells
92.1	human	eye (primary uveal melanoma)	MDA-MB-231	human	Breast cancer
22Rv1	human	prostate carcinoma	MEF	mouse	embryonic fibroblast
apl-CBR-Luc-cherry-3s	human		MEG-01	human	bone marrow, patient in megakarvoblastic crisis of CML
4T1-Luc2	mouse	breast	Mel202	human	eve (primary uveal melanoma)
59M	human	Ovarian tumor, epithelial	MONO-MAC-6	human	acute monocytic leukemia
A20	mouse	B lymphocyte	MWCL-1	human	Waldenstrom macroglobulinemia
A549	human	lung	N2A	mouse	neuron
Ark-2	human	endomertial serous adenocarcinoma	NCI-H1299	human	lung
Ark-4	human	endomertial serous adenocarcinoma	NCI-H28	human	lung
ATCD5	mouse	chondrocyte	NCI-H441	human	lung
B16-F10	mouse	melanoma, spindle-shaped and epithelial-like	NCI-H460	human	
BalBC T11	mouse	Strain specific fibroblast	NCI-H661	human	
BEAS-2B	human	lung	NCI-H69	human	lung
BJAB	human	blood (suspension)	NCI-H810	human	
BT-20	human	mammary gland/breast, epithelial	NCI-H838	human	
BV2	mouse	microglia	NIH 3T3	mouse	fibroblast
C2C12	mouse	muscle	NKM1	human	acute myeloid leukemia
C6	rat	neuron	NSC-34	mouse	hybrid line fusion of motor neuron enriched, embyronic mouse spinal cord cells w
Caco-2	human	Colon, epithelial	PC3	human	prostate
Calu-3	human	lung adenocarcinoma, epithelial	PC9	human	lung adenocarcinoma, enithelial
Calu-6	human	lung, epithelial	PCI 12	human	chronic B cell leukemia
CAMA-1	human	mammary gland/breast_enithelial	PI 8-985	human	muelomonohlasts
CEM	human	T lymphoblast	PNEC	moure	prostate
CEPAC-1	human	nancreas enithelial	Pumt-Bol	mouro	2
010205	human	colon	Pail	human	r B lumphoblast suspension
01.0668	human	Small cell lung carcinoma derived from metastatic site: brain	Ramor1	human	B lymphocide surpanion
COV/218	human	ovary	PAW264 7	mouro	B lymphocyce, suspension
(7726	mouro	colon fibrhlast	RAW204.7	human	hacrophage
CT_40	chicken	burea lumphoblast suspansion	Rec-1	human	rymphobiast, supension
0101	human	colon	PT112	human	bladdar
Du145	human	prostate	DT4	human	bladder
EEM10	human	proset onithalial	60022	human	bladder bood and posk
ENTE	human	breast	50025	human	nead and neck
5244	manian	orease line	5604271	human	pediatric diruse incrinisic poncine giorna
F244	human	sarconia inte	SUD77	human	lung onitholial
нарт	human	hear-hapiolo, chronic myelogenous leukemia (CML), adherent	SILLa	human	convix enithelial
HCC827	numan	lung, adenocarcinoma, epitheliai	SK BD 2	human	Mammany aland
HCC4006	human	lung, derived from metastatic site: pieural effusion, epithelial	SNIL 1077	human	uterine carcinesarcoma
HCT8	human	colon, ileocecal colorectal adenocarcinoma, epithelial	SNU-1077	human	uterine carcinosarcoma
HCT116	human	colon, colorectal carcinoma, epithelial	SNIL-685	human	uterine carcinosarcoma
HEK293	human	kidney	SPAC1	human	serious surface papillary carcinoma
HeLa	human	ovarian	SPACIE	human	serious surface papillary carcinoma
HepG2	human	liver	SPEC2	human	serious surface papillary carcinoma.2
HL60	human	peripheral blood, acute promeylocytic leukemia, suspension, promyeloblast	SILDHIE	human	paritopoal affurion matartatic site - paritopoal cavity. B hmonhoosta surporcion
HLEB-3	human	lens epithelial cells	SUM225	human	invasive ductal carcinoma
HMC3	human	microglia, adherent, embryo	SWAR	human	colon enithelial
HME1	human	mammary epithelial	7470	human	mammany gland metastatic site derivied enithelial
HPAC	human	pancreas	THP.1	human	hlood monocite suspension
HT-29	human	Colon, epithelial	TMD8	human	B-Cell Lymphoma
HUH7	human	liver	TRAMP.C2	mouse	prostate enithelial
Ins1 832/13	rat	beta cell	11251MG	human	hrain adherent
(BJFF internal clone)	human	fibroblast	11205	human	hone
lurkat, Clone E6-1	human	peripheral blood	U373MG	human	glioblastoma
K562	human	blood	[].027	human	pleural effusion. lymphocyte, monocyte suspension
LLC-OVA	mouse		UM-UC-13	human	hladder
LN-Cap	human	prostate, metastatic derived site: left supraclavicular lymph node, epithelial	LIM-LIC-3	human	bladder
LoVo	human	colorectal adenocarcinoma	UM-UC-5	human	bladder
M2C			UM-UC-7	human	bladder
MC38-OVA	mouse		WI-38	human	fibrohlast lung
MCF7	human	mammary gland, derived from metastatic site: pleural effusion, epithelial	WSULESCO	human	non-Hodekin's lumphoma
MCF10A	human	mammary gland, epithelial	1130-13005	maniali	House and the second seco



iPSO

Timelines

- Billed in 5 milestones
- KO: from 4 months
- KI: from 5 months

Milestone	Description	Time (Weeks)	Price
	Test for Mycoplasm	1	
Milestone 1	Evaluation of cell line suitability for gene editing	2 - 4	10%
Milestone 2	CRISPR and/or TUNR design, assembly and validation in core cell line	1 - 3	5%
Milestone 3	Transfection/nucleofection and activity confirmation in transfected pool	1 - 3	
Milestone 5	Single cell dilution cloning and maintenance of single cell derived clones	3 - 7	50%
Milestone 4	Single cell derived clone screening, deep sequencing library preparation, deep sequencing run and analysis	2	25%
Milestone 5	Positive clone expansion, genotype confirmation, clone cryopreservation	2 - 4	10%
	Test for Mycoplasm	1	



Cell Line Engineering Pricing Sheet

Project Type	Price
CAS9 (50µg)	\$95
CAS9 (250µg)	\$395
CRISPR complete kit	\$990
Knock out	\$14,990
Knock in	\$24,990
Point Mutation	\$24,990
TUNR (4xTUNRs + parental and KO)	\$49,900
Transgenic	\$8,990
iPSC additional fee per project	\$9,990
Extra allele fee per project	\$1,190
Additional clones (if identified)	\$600
Screen of top 10 off target sites**	\$1,390
	CONFIDENTIAL

Standard Deliverables

- Up to 2 clones*
- Biallelic modifications
- In silico off target and essentiality screens
- gRNA validation by NGS
- Sequence verified clones

* Delivery of one clones satisfies the milestone. A second clone, if recovered, is available to the researcher for no additional cost. We will screen 400 wells for KO projects and 800 wells for Kis.

** Deep sequencing of 400 bp region of the top 10 off target sites. Pricing covers screen of 2 clones.

*** If client is providing cell lines, 2 vials of 1 million cells per cell lines should be shipped to Canopy



Canopy's miRNA Offering

tect	Edit	Mimic	
NanoString Service	CRISPR Plasmids	Mimics	
Detect and quantify 800 miRNAs in a single sample	All-in-one plasmids containing two sgRNAs for complete excision	Synthetic miRNA molecules designed for transfection efficiency and reduced OTEs	
	NanoString Service Detect and quantify 800 miRNAs in a single sample	tectEditNanoString ServiceCRISPR PlasmidsDetect and quantify 800 miRNAs in a single sampleAll-in-one plasmids containing two sgRNAs for complete excision	



Meso Scale Discovery

- Multiplexed protein detection
- 50+ analyte panels; 10 analytes in a single sample
- Wide dynamics range
- More sensitive than Luminex



Table 1Limits of quantification

Cytokine	LLOQ (pg/ml +/- S.D.)		
	Luminex (Biosource kit)	MSD (MSD kit)	
IL-2	8.7 (+/-2.2)	2.5 (+/-3.0)	
IL-4	8.6 (+/-2.9)	0.7 (+/-0.1)	
IL-8	7.7 (+/-1.5)	0.7 (+/-0.1)	
IL-10	11.6 (+/-0.8)	3.6 (+/-5.0)	
IL-12	21.3 (+/-6.1)	2.3 (+/-2.8)	
IFNg	14.4 (+/-3.0)	0.7 (+/-0.03)	
TNFa	5.9 (+/-4.9)	3.2 (+/-4.3)	



Nanostring



- Multiplex analysis of up to 800 RNA, DNA, or protein targets.
- We are a NanoString **full service provider**, from RNA isolation to comprehensive data analysis service.
- We provide a comprehensive data & pathway analysis package and reporting service.
- In as little as a two week turnaround time to receive a comprehensive data analysis report.
- We provide the majority of standard Nanostring panels off-the-shelf and custom design services as well.
- We accept a wide variety of samples including: tissue (fresh or fixed), FFPE sections, blood, serum, plasma, PBMCs, and CSF.



Multiplex PCR 20/20 Kits & Reagents

- 3 PCR additives to "clean up" your PCR
- Inhibit PCR enzymes from acting outside of precise temperature ranges, preventing unwanted side reactions and off target activity
- Acts directly on the polymerase to prevent non-specific enzymatic activity below
 50°C; enzyme activity is restored at 60 °C
- PCR 20/20 re-engages with polymerase during cooling to prevent post-reaction amplification
 - Reduces primer dimers
 - Reduces incorrect products
 - Primers aren't wasted = stronger signal





Main Menu

PCR 20/20 Plus

A 2-component kit

- PCR 20/20
- Focus: A double-stranded, chemically modified nucleic acid that suppresses mispriming during the annealing and extension steps of PCR
- Improves reproducibility of data
- Increases detection of low copy number targets
- Reduces mis-priming
- Improves end-point genotyping



PCR 20/20 is a combination of 2 reagents that work synergistically to suppress all forms of mis-priming before, during and after amplification



Main Menu

PCR 20/20 RT

- Controls reverse transcriptases to prevent offtarget amplification
- Increases specificity & yield
- Demonstrated to work with both one-step and two-step RT reactions

Incubation Temperatures <u>50°C</u> <u>55°C</u> <u>50°C</u> <u>55°C</u> Without PCR 20/20 RT With PCR 20/20 RT





RNA Seq services

- We provide a customized service and optimized packages
- Full service workflow: Library prep, QC, and sequencing
- Standard sample inputs:
 - Isolated RNA: 1 µg (>50 ng/µl)
 - Tissue: 5-30 mg
 - Cell pellets: 150,000 cells
 - FFPE: 3 x 10 μm curls
 - Blood: 1 PAX gene tube
- fastq files and run summary standard. Comprehensive analysis and report available

Optimized Package Offerings				
mRNA Seq	Total RNA Seq	FFPE RNA Seq		
 Poly A enrichment library prep As little as 500 pg input Targeting 60M paired end reads 2x150 read length 	 Ribo depletion library prep As little as 500 ng total RNA Targeting 60M paired end reads 2x150 read length 	 Offering both Whole Transcriptome and Targeted Exome strategies for FFPE samples Targeting 100M paired end reads 2x150 read length 		



Main Menu

RAREseq

- Standard NGS methodology introduces errors during PCR and the sequencing workflow. These errors result in noise that makes it challenging to differentiate between errors and true variants. RareSeq[™] NGS data analysis services uncovers these true variants.
- Mutations can be identified 6 years prior to onset of t-AML ... If you can find them

Pre-leukemic subclone identification



Main Menu

EZ Species: Microbiome Sequencing Service

- Easily ID the bacterial composition of your sample, down to the species level
- Achieve shotgun sequencing quality data with the efficiency of 16S sequencing
- Standard 16S rRNA hypervariable region sequencing and analysis is only specific enough to yield genus level sample identification, leaving important taxonomic information on the table
- Comprehensive report available
 <u>Main Menu</u>





Cellatrix 3D Cell Culture systems

- Human Bone 3D Matrix: A 3D-matrix derived from human bone marrow. No exogenous polymers. Promotes cell proliferation for hematopoietic cells and stem cells, especially hematologic malignancies.
- Human Peripheral Blood 3D Matrix: A 3D-matrix derived from human peripheral blood. No exogenous polymers. Promotes cell proliferation especially primary human cells, especially solid tumors.
- Mouse Peripheral Blood 3D Matrix: A 3D-matrix derived from mouse peripheral blood. No exogenous polymers. Promotes cell proliferation.
- 3D Efficacy Studies: Screening service to assess the efficacy of your immunotherapies on patient-derived cells grown in our 3D matrix.

Translational efficacy studies for immunotherapies

Our 3D efficacy studies have demonstrated highly translational results for a variety of emerging immunotherapies, including CAR-T, BiTE, antibody-drug conjugates, and immunomodulatory drugs.





Main Menu

Host Cell Protein ELISA Kit

- Detect and quantify HCP concentrations at any point in your purification process
- ELISA-based: quick, familiar format with high sensitivity
- Available for E. coli, Pichia pastoris, CHO, Protein A and HEK293T
- 96-well plate coated with capture antibody
- HCP standards
- Reporting antibody Streptavidin-HRP conjugate
- TMB substrate 5x dilution buffer, 10x PBS-T, stop solution and plate sealers also included



Main Menu

Chip Cytometry: Quantitative High-Plex Proteomics

Jon Waterman-Smith Director, Business Development jon.watermansmith@canopybiosciences.com +44 7711071249 Main Menu



Agenda

- Key challenges
- Case Studies
- Principles of Chip Cytometry



Key Challenges

Why are researchers looking for alternatives to traditional approaches?

- Single Cell Flow Cytometry
- Visual Pathology
- Biomarkers & Clinical Trials

Single Cell PrecisionSpatial Deep PhenotypingCheckpoint inhibitorsCAR-T TherapyChip Cytometry

Single Cell Flow Cytometry

- Large capacity
- Wide dynamic range
- Well-used tool for multiplexed data
- Tissue sample must be digested
- Sample stable for 2-3 Days
- Must select the right biomarkers at the start of the study
- Significant spillover/compensation challenges for high-plex panel
- No spatial information, limited morphological information





Visual Pathology

- Intact Spatial Relationships
- Intact Cell Morphology
- Limited Multiplexing Capability
- Semi-quantitative



Kroeger, Biology of Human Tumors 2016



Biomarkers & Clinical Trials

- **Sample Stability:** Limited ability to answer all the questions your have about patient longitudinally across a clinical trial (miss objectives?):
 - New Biomarkers?
 - Re-interrogate?
- **Standardisation:** Limited ability to standardise clinical trial sample collection across multiple clinical research sites resulting in a lack of reliable, reproducible data which ultimately negatively impacted the performance and outcome of the clinical trial.
- **Biomarker Discovery & Validation:** Lack of biomarker signature to select patients for recruitment onto studies which reduced the success rate in the trial and ultimately may lead to a negative outcome.
- Multi-omics: Not able to maximise the extraction as much omics data as possible from precious *in vivo* or patient samples to support discovery and development programs, resulting in reduced confidence.



ChipCytometry: Convert images to quantitative flow-like data



Image

Index Sorting

Quantify Populations

- FCS files are generated from high-resolution images allowing for the phenotyping and of each individual cell in your sample
- We also retain all the original images



Single Cell Precision

Checkpoint inhibitors

Spatial Deep Phenotyping

CAR-T Therapy

Case Studies

- Quantitative deep-profiling of the immune compartment and protein expression in monitoring disease progression
- Building a biomarker strategy for checkpoint inhibition/combination therapy
- Understanding the spatial relationship of cell types in tissues & distance metrics
- Characterising CAR-T products and measuring engraftment kinetics

Single Cell Precision

Quantitative deep-profiling of the immune compartment and protein expression in monitoring disease progression

Single Cell PrecisionSpatial Deep PhenotypingCheckpoint inhibitorsCAR-T TherapyChip Cytometry

Comparing Primary with Metastatic Disease in Head and Neck Cancer

- Evaluate the difference in immune population between primary and metastatic tumors.
- Exploratory 12-plex Chipcytometry assay.
- Data processing: FL-quantification and gating.

Antibody	Fluorochrome
CD45	FITC
CD3	BUV395
CD4	PerCP-Cy5.5
CD8	PE
CD56	PE
FOXP3	PE
CD14	PerCP-Cy5.5
CD27	PE
CD279	PE
CD11c	PE
CD39	BV421
CD45RA	BUV395



Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

Identification of key immune cells in head & neck tumor tissue



Gating: Immune cell quantification











Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

Absolute Cell Numbers

Population	Primary Tumor	Metastasis
All	29170	10179
Leukocytes	17454 (59.8% of all)	3291 (32.3% of all)
Monocytes	745	460
T-cells	15191	1576
CD8+ T-cells	681	914
CD4+ T-cells	7788	235
T-reg	827	82
NKT-cells	511	220
NK cells	87	320
CD279+ T-cells	1700	634
CD27+ T-cells	4230	1069
Dendritic cells	534	145
Monocytic DC	541	209



Single Cell Precision Spatial Deep Phenotyping

<u>Checkpoint inhibitors</u> <u>CAR-T Therapy</u> <u>Chip Cytometry</u>

Cell number by mm²

Population	Primary Tumor	Metastasis
All	8334	2908
Leukocytes	4987	940
Monocytes	213	131
T-cells	4340	450
CD8+ T-cells	195	261
CD4+ T-cells	2225	67
T-reg	236	23
NKT-cells	146	63
NK cells	25	91
CD279+ T-cells	486	181
CD27+ T-cells	1209	305
Dendritic cells	153	41
Monocytic DC	155	60



Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

Single-cell resolution in tissue samples



- Algorithmic segmentation of single cells enables identification and quantification of fluorescence values for each individual cell.
- Key cell populations are quantified with single-cell precision.

Immune cell populations in primary tumor Immune cell populations in metastasis





Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

CD279 expression – Primary Tumor

CD45 CD279

S me

the thread of the star

CD279 expression stronger in some areas towards the tumor center

200 µm

11.8% of T-cells are CD279+


Conclusions

- Metastatic tumor has much lower overall cell density than primary tumor (~35% of primary tumor)
- Metastatic tumor has a differing composition of infiltrating immune cells compared to primary tumor:
 - Overall lower immune cell infiltration (primary tumor: 59.8% of all cells; metastasis: 32.3%)
 - Lower T-cell infiltration (but higher CD8+ T-cell percentage)
 - Higher NK cell and NKT-cell percentage
 - Higher monocyte infiltration
- The 12-plex panel for Head and Neck Cancer assay enables clinical trial support.



Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

Checkpoint inhibitors

Building a biomarker strategy for checkpoint inhibition/combination therapy

Single Cell PrecisionSpatial Deep PhenotypingCheckpoint inhibitorsCAR-T TherapyChip Cytometry

Enabling frequent longitudinal monitoring during cancer therapy

- Obtaining tumor biopsies for PD-L1 interrogation is invasive and not suited for frequent longitudinal monitoring during cancer therapy.
- Tumor heterogeneity for PD-L1 expression may not accurately capture the PD-L1 status of the whole tumor burden in a single biopsy.
- An alternative approach the analysis of Circulating Tumor Cells (CTCs).



Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

Chipcytometry enabled the phenotyping of CTCs in Breast Cancer



- CTC phenotyping by Chipcytometry
- CTC candidates identified by CK (Cytokeratin) and EpCAM (Epithelial cell adhesion molecule CD326)
- PD-L1 & PD-L2 expression quantified on CTCs

Teo et al. (2017): A preliminary study for the assessment of PD-L1 and PD-L2 on circulating tumor cells by microfluidic-based Chipcytometry. Future Science OA; Published Online:4 Sep 2017 <u>https://doi.org/10.4155/fsoa-2017-</u> 0079





Ultra-deep phenotyping of cellular biomarkers to support patient selection and combination therapy

- For downstream analysis of the isolated CTCs, we believe the main advantages of chipcytometry lie in the iterative staining process that allows retrospective evaluation of additional markers and the potential to measure a large number of parameters without the spillover/compensation problems encountered with flow cytometry.
- This approach allows the analysis of additional immunomodulatory targets on tumor cells beyond PD-L1 and PD-L2, which is particularly critical, considering high dimensional analysis of these markers is likely to become increasingly relevant as immunotherapy moves beyond the administration of single immunomodulatory agents toward combinations that synergize in their antitumor immune response.
- In addition, the possibility of including more tumor and immune markers (positive and negative) will increase confidence that the identified cells are indeed CTCs.

Teo et al. (2017): A preliminary study for the assessment of PD-L1 and PD-L2 on circulating tumor cells by microfluidic-based Chipcytometry. Future Science OA; Published Online:4 Sep 2017 <u>https://doi.org/10.4155/fsoa-2017-0079</u>



Conclusions

- Chip cytometry enables the iterative, retrospective evaluation of additional biomarkers, supporting long term studies.
- Chip cytometry enables the evaluation of new biomarkers that may be identified post sample collection.
- Chip cytometry is non-destructive and suitable for both cells and tissues.
- Chip cytometry enables ultra-deep phenotyping of immune cells supporting the evaluation of combination therapies.



Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

Spatial Deep Phenotyping

Understanding the spatial relationship of cell types in tissues & distance metrics

Single Cell PrecisionSpatial Deep PhenotypingCheckpoint inhibitorsCAR-T TherapyChip Cytometry

Oxford University *featured on the cover of Cell Reports (Sept 2019)*



- Several types of unconventional T lymphocytes sit at the bridge between innate and adaptive immunity, including mucosal-associated invariant T (MAIT) cells.
- To achieve sufficient activation, TCR signaling is supported by other costimulatory signals, such as CD28, and by cytokines, such as interleukin (IL)-18 and IL-12.

TCR and Inflammatory Signals Tune Human MAIT Cells to Exert Specific Tissue Repair and Effector Functions

Leng et al., 2019, Cell Reports 28, 3077–3091 September 17, 2019 ^a 2019 The Author(s). https://doi.org/10.1016/j.celrep.2019.08.050



High Content and Spatial Imaging reveals importance of localisation

- MAIT cells (indicated as white arrows) show coexpression of Va7.2, CD161, PLZF, and CD3.
- By co-staining for multiple relevant markers in colonic tissue, apposition is observed between MAIT cells and intact epithelium, suggesting twoway cross talk is possible under homeostatic conditions.
- TCR triggering of MAIT cells reveals a transcriptional program linked to tissue-repair functions seen *in vivo*, consistent with a homeostatic role for these cells in epithelia.
- Chip Cytometry revealed the importance of the spatial relationship between cell types.





Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

Automated measurement of distances between different cell populations



- *1: Population 1: germinal center interacting CD4/CD8 T-cells
- *2: Population 2: CD4/CD8 T-cells not belonging to the same germinal center



Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

Cellular Agglomeration detection in Liver









Conclusions

- Chip Cytometry reveal the importance of spatial relationships between cell types.
- The exact distances between cell populations can be determined.



Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

CAR-T Therapy

Characterising CAR-T products and measuring engraftment kinetics

Single Cell PrecisionSpatial Deep PhenotypingCheckpoint inhibitorsCAR-T TherapyChip Cytometry

Validated biomarkers for characterizing CAR-Ts

- Characterise phenotype using 26+ validated biomarkers
- Custom assay development for any additional biomarker

CD3	CD19	CD45RA	CD152	Granzyme E
CD4	CD25	CD45RO	CD184	Ki-67
CD8a	CD27	CD56	CD197	
CD14	CD28	CD57	CD278 (ICOS)	
CD15	CD34	CD95	CD279 (PD-1)	
CD16	CD45	CD127	FoxP3	



Single Cell Precision Spatial Deep Phenotyping

CAR-T Therapy Chip Cytometry Checkpoint inhibitors

Receptor internalisation

Video Cytometry

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Receptor internalization study



- 1) PBMC preparation due to SOP
- 2) BG images
- 3) Cool down for 10 min
- 4) Incubation with CD127 1h, 4°C
 - Cycle (total 6h):
 - Washing (5 min)
 - Image acquisition
 - Medium flow for 5 min
 - Incubation in the videocytometry chipholder (37°C)
- 5) Fixation
- 6) Post-characterization



Gating Strategy Post Characterisation





Checkpoint inhibitors CAR

CAR-T Therapy Chip Cytometry

Internalisation of CD127 (IL-7 Receptor) over 3h



Gating on CD127+ T cells for quantification

CAN





Internalisation of CD127 (IL-7 Receptor) -

Quantification



CANOPY

Internalisation of CD127 (IL-7 Receptor) - Comparison of CD4 and CD8 T cells



Conclusions

- Chip Cytometry enables the characterization of CAR-T cells.
- Engraftment kinetics can be determined for each patient to optimise dosing schedules.



Single Cell Precision Spatial Deep Phenotyping

Checkpoint inhibitors CAR-T Therapy Chip Cytometry

Single Cell Precision Chip Cytometry: what is it?

Single Cell PrecisionSpatial Deep PhenotypingCheckpoint inhibitorsCAR-T TherapyChip Cytometry

Ultra-Deep Proteomics & Phenotyping

Preclinical

- Investigate and validate target selection
- Elucidate mechanism of action
- Study cell cycle, signaling and intracellular cytokine secretion
- Clinical
 - Long-term sample preservation, storage and reinterrogation
 - Chip Cytometry enables sample stability for 24+ months
- Precision Medicine
 - Identify predictive biomarkers
 - Define patient cohorts



Chip Cytometry



ZellScanner ONE™

- Benchtop instrument
- Semi-automated
- Exploratory / Phase I trial application



Cytobot™

- Stand alone, automated system
- Fully automated, 24/7
- Phase II/III trial applications





Sample Collection and Storage



 $\cap \subset$



Product	ZellSafe™ Cells	ZellSafe™ Rare	ZellSafe™ Tissue
Specimen	cell suspension	rare cells (<0.02%)	Tissue sections
Loading capacity	40-100µl	40-300µl	6 sections
Cell number	typically 250,000	typically 1,000,000	tissue-dependent



Store your valuable samples for 2 years+

Sample Stability Biomarkers preserved after 2 years of storage

Cells stored at -80°C

20%

Cells stored on ZellSafe Chips at 4°C

95%

Source: Canopy Biosciences, Dr. Christian Hennig

- Sample integrity is conserved throughout data collection
- Reinterrogate your
 Biobanked samples for
 additional biomarkers at any
 time
- Target Choice AFTER
 Sample Collection

Capture and secure all your precious samples and enable re-interrogation



Avoid the Effects of Cryopreservation



"... 62% of analyzed markers show decreased median intensities upon cryopreservation."

Source: Kadić et al. BMC Immunology (2017) 18:6 DOI 10.1186/s12865-017-0192-1





To quantify with single cell precision requires...

- The dynamic range of flow cytometry
- The resolution of single cells
- Stable samples for 2 years or more
- A large repertoire of biomarkers for blood cells and tissues
- The ability to work with living cells for kinetic assays
- An integrated hardware and software solution to precisely identify and quantify expression in individual cells



Compare what's important

Feature	Chip Cytometry	Flow Cytometry	Mass Cytometry	Spatial Transcriptomics
Sample stability	2 years +	1-3 days	1-3 days	?
Non-destructive	Yes	No	No	No
Spatial Resolution	500nm/pixel	N/A	1,000nm/pixel	10,000nm/pixel
Dynamic Range	>8 logs	8 logs	4 logs	5 logs
Multiplexing	∞	≥48	≥96 theoretically	≥96 (not single cell)
Rare Cells (>5000)	Yes	No	No	N/A
Video Cytometry	Yes	No	No	No



Zellscanner ONE – quantitative cytometry

- 1392 x 1040 pixels high sensitivity grayscale camera
- 20x 0.8 NA very light sensitive Zeiss Apochromat objective
- designed filtersets for each color
 - no/low spillover
 - UV protection filter (no/low protein degradation)
- HDR imaging the only HDR microscope at the market
 - 32bit = 4.3 billion intensity values (>8logs dynamic range)
- Net fluorescence (pre/post stain images)
 - corrects for illumination artefacts
 - corrects for autofluorescence







Net Fluorescence and Dynamic Range



To quantitatively calculate true net fluorescence values, both the pre- and post-stain values must lie within the linear dynamic range of the instrument.



Dynamic Range

Why is dynamic range important?

Why is dynamic range important?



Protein expression levels:

• Expression of interferon- γ in T

cells

- 6 logs of protein expression
- > 6 logs dynamic range required


Dynamic Range: CD8 T-Cells in CRC

CD3: >4 logs of dynamic range







Source: Kim et al. 2018, AACR



8 log Dynamic range



CD4 CD8

Head & Neck Cancer







Head & Neck Cancer



CD4

CD8

Resolution

Why is Resolution important?

Enables True Single Cell Resolution

500 nm/px

1000 nm/px

10000 nm/px



Chipcytometry



Multiplexing

A large, validated repertoire of protein markers

Validated biomarkers Human Cell Suspension

- Gather complex phenotypic data by multiplexing among 120 validated biomarkers
- Custom assay development for any additional biomarker

	Biomarke	ers validated for huma	In PBMC samples	
CD2	CD39	CD123	CD273 (PD-L2)	IL5
CD3	CD40	CD127	CD274 (PD-L1)	IL8
CD4	CD45	CD134	CD278 (ICOS)	IL10
CD5	CD45RA	CD138	CD279 (PD-1)	IL12
CD8	CD45RO	CD141	CD294 (CRTH2)	IL17A
CD10	CD54	CD152 (CTLA-4)	CD319 (CRACC)	IL17F
CD11b	CD56	CD154 (CD40L)	CD326 (EpCAM)	IL23R
CD11c	CD57	CD161	CD366(TIM3)	Ki-67
CD14	CD61	CD163	AIOLOS (IKZF3)	Laminin
CD15	CD62L	CD172a/b	Bcl-2	LC (κ)
CD16	CD64	CD183 (CXCR3)	Collagen IV	LC (λ)
CD19	CD66b	CD184 (CXCR4)	FoxP3	pan Cytokeratin
CD20	CD68	CD185 (CXCR5)	GM-CSF	Perforin
CD21	CD69	CD193 (CCR3)	Granzyme B	RORy(t)
CD22	CD71	CD194 (CCR4)	Helios	T-bet
CD24	CD73	CD195 (CCR5)	HLA-DR	ΤΝFα
CD25	CD80	CD196 (CCR6)	IFNγ	Vimentin
CD27	CD81	CD197 (CCR7)	IgA	Zap-70
CD28	CD86	CCR10	lgD	Caspase-3
CD29	CD90	CD206	lgG	pATM (S1981)
CD30	CD95	CD223 (Lag-3)	IgM	pHistone H2A.X
CD31	CD105 (Endoglin)	CD235a (Glycph. A)	IL1b	pHistone H3
CD34	CD115	CD244	IL2	pStat1
0000	CD117 (c Kit)		11.4	n21 Waf1/Cin1



Validated biomarkers Mouse Cell Suspension

- Gather complex phenotypic data by multiplexing among 39 validated biomarkers
- Custom assay development for any additional biomarker

Biomarke	rs validated fo	r mouse PBM	C samples
CD3	CD86	CD202B	IL12
CD4	CD103	CD204	IL17a
CD5	CD105	CD206	Ly6C
CD8a	CD106	CD274 (PD-L1)	Ly6G (GR1)
CD11b	CD115	CD301	MHC-II
CD11c	CD124 (IL4Ra)	CD317	NK1.1
CD19	CD135	F4/80	SMA
CD25	CD154	FoxP3	T-bet
CD45R (B220)	CD163	IFNg	TNF alpha
CD62L	CD201	IL10	

*Other biomarkers available on a custom basis



Validated biomarkers NHP Cell Suspension

- Gather complex phenotypic data by multiplexing among 31 validated biomarkers
- Custom assay development for any additional biomarker

Biomarkers validated for NHP cell suspension samples			
CD3	CD45	CD279	
CD4	CD45RO	FoxP3	
CD8	CD49d	Granzyme B	
CD11b	CD56	HLA-DR	
CD11c	CD80	Ki-67	
CD14	CD86	Lambda LC	
CD16	CD95	IL-2	
CD20	CD107	IFNy	
CD27	CD123	TNFa	
CD39	CD161		
CD40	CD278		
*Othe	er Custom Biomarkers Av	ailable	



Validated biomarkers in human tissue

- Gather complex phenotypic data by multiplexing among 54 validated biomarkers
- Custom assay development for any additional biomarker
- FFPE available, as well as F/F

Бю	markers valida	ted for numan	FF tissue sam	pies
CD3e	CD27	CD69	CD193 (CCR3)	FoxP3
CD4	CD29	CD73	CD278 (ICOS)	HER2
CD8a	CD31	CD86	CD279 (PD-1)	HLA-A (MHC I)
CD10	CD38	CD90	CD299	HLA-DR
CD11c	CD39	CD95	CD326 (EpCAM)	Ki-67
CD14	CD40	CD105	CD335	Pan-cytokeratin
CD16	CD45	CD123 (IL3RA)	CD366 (TIM3)	SMA
CD19	CD45RA	CD141	Collagen IVa	SMAD1/2/3
CD20	CD45RO	CD152 (CTLA4)	Cytokeratin 18	TIGIT
CD21	CD56	CD155	DNA (Hoechst)	Vimentin
CD25	CD68	CD161	EGFR	
	*Other bioma	rkers available on a	a custom basis	



Validated biomarkers in human FFPE tissue

- Gather complex phenotypic data by multiplexing among validated biomarkers
- Custom assay development for any additional biomarker

Biomarkers for human FFPE tissue samples					
CD3	CD19	CD45RO	HLA-DR		
CD4	CD20	CD68	Ki-67		
CD8	CD27	CD123			
CD11c CD45 CD279					
CD14	CD45RA	FOXP3			
*Other biomarkers available on a custom basis					



Validated biomarkers in mouse tissue

- Gather complex phenotypic data by multiplexing multiple validated biomarkers
- Custom assay development for any additional biomarker

Biomarkers validated for mouse FF tissue samples				
B220	CD45	GFAP		
CD3e	CD64	Ly6c		
CD4	CD68	Ly6G (GR1)		
CD5	CD86	I-A/I-E (MHC II)		
CD8a	CD160	NK1.1		
CD11b	CD274 (PD-L1)	Pan-Cytokeratin		
CD11c	CD326 (EpCAM)			
CD19	DAPI			
CD27	F4/80			
CD31	FoxP3			
*Other	biomarkers available on a custo	om basis		



PBMC Immune Profiling Panel

Immune Cell Subsets	Defining markers
Immune Cells	CD45+
T cells	CD45+ CD3+ CD14-CD19-CD56-
CD4 T cells	CD45+ CD3+ CD14-CD19-CD56- CD4+ CD8-
CD8 T cells	CD45+ CD3+ CD14-CD19-CD56-CD4- CD8+
Regulatory T cells	CD45+CD3+CD14-CD19-CD56-CD4+CD8-CD25+FoxP3+
Naive CD4 T cells	CD45+CD3+CD14-CD19-CD56-CD4+CD8-CD27+CD45RA+
Central memory CD4 T cells	CD45+CD3+CD14-CD19-CD56-CD4+CD8-CD27+CD45RA-
Effector CD4 T cells	CD45+CD3+CD14-CD19-CD56-CD4+CD8-CD27-CD45RA+
Effector Memory CD4 T cells	CD45+CD3+CD14-CD19-CD56-CD4+CD8-CD27-CD45RA-
Naive CD8 T cells	CD45+CD3+CD14-CD19-CD56-CD4-CD8+CD27+CD45RA+
Central memory CD8 T cells	CD45+CD3+CD14-CD19-CD56-CD4-CD8+CD27+CD45RA-
Effector CD8 T cells	CD45+CD3+CD14-CD19-CD56-CD4-CD8+CD27-CD45RA+
Effector Memory CD8 T cells	CD45+CD3+CD14-CD19-CD56-CD4-CD8+CD27-CD45RA-
B cells	CD45+CD3-CD14- CD19+ CD56-
Memory B cells	CD45+CD3-CD14-CD19+CD56-CD27+
Naïve B cells	CD45+CD3-CD14-CD19+CD56-CD27-
Monocytes	CD45+CD3-CD14+CD19-CD56-
Non-classical monocytes	CD45+CD3-CD14+CD19-CD56-CD16+
Classical monocytes	CD45+CD3-CD14+CD19-CD56-CD16-
Dendritic cells	CD45+CD3-CD14-CD19-CD56-HLADR+
Myeloid dendritic cells	CD45+CD3-CD14-CD19-CD56-HLADR+CD11c+CD123-
NK cells	CD45+CD3-CD14-CD19-CD56+CD16+
NK cells	CD45+CD3-CD14-CD19-CD56+CD16+

Biomarkers validated for human PBMC samples							
CD3	CD3 CD16 CD45RA						
CD4	CD19	CD56					
CD8	CD25	CD123					
CD11c CD27 FOXP3							
CD14	CD45	HLADR					
*Other biomarkers available on a custom basis							

- 15 biomarkers used for the identification of basic immune cell phenotyping
- Custom assay development for any additional biomarker



Validated biomarkers for characterizing CAR-Ts

- Characterise phenotype using 26+ validated biomarkers
- Custom assay development for any additional biomarker

CD3	CD19	CD45RA	CD152	Granzyme B
CD4	CD25	CD45RO	CD184	Ki-67
CD8a	CD27	CD56	CD197	
CD14	CD28	CD57	CD278 (ICOS)	
CD15	CD34	CD95	CD279 (PD-1)	
CD16	CD45	CD127	FoxP3	



Standarisation

Multi-centre global trials

We provide training and accreditation

- Wash ZellSafe[™] Cell Chips with 5×200µl of Washing Buffer

- Wash ZellSafe[™] Rare and Tissue Chips with 5×500µl of Washing Buffer

- Unloaded ZellSafe[™] Cell and Rare Chips are now ready for loading

- Loaded CellSafe[™] Chips are now ready for scanning

To help standardize the acquisition, storage and transportation of precious blood and tissue samples



In conclusion...

- Chip Cytometry is a truly quantitative, non-destructive, ultradeep phenotyping solution, available as an instrument or a service.
- Addresses key challenges from biomarker discovery to managing global clinical trials.
- Future proof your studies.



Any questions?