Organoid technology to accelerate therapeutic innovation







Outsmarting cancer Impacting lives





The problem: we need better preclinical cancer models





Heterogeneous patient population

Patient-specific preclinical models Heterogeneous patient population

Lack of preclinical models representative of patient tumors



- Patient X
- Cancer cell lines X
- Animal models \sqrt{X}

What is an organoid?

Lgr5 marks cycling stem cells in the intestine





Barker et al, Nature 2007

Lgr5-positive intestinal stem cells can be expanded in vitro as "mini-guts"





Sato et al, Nature 2009

Lgr5-positive intestinal stem cells can be expanded in vitro as "mini-guts"









Sato et al, Nature 2009

Organoids: stem cells in a dish





- Can be obtained with high efficiency from patient-derived tissue (healthy and diseased)
- Retain phenotypic and genetic features of native tissue
- Genetic modelling using gene editing

Drost et al., Nature 2015; Drost & van Boxtel et al., Science 2017; Drost & Clevers, Nat Rev Cancer 2018; Ganpat et al., under review (pre-print bioRxiv)

- Development of individualized therapies
 - Adult cancer-derived organoids were shown to have predictive value for drug sensitivity

Vlachogiannis et al., Science 2018; Tiriac et al., Cancer Discov. 2018; Ooft et al., Sci Transl Med 2019; Ganesh et al., Nat Med 2019; Yao et al., Cell Stem Cell 2020

Organoiden Technologie: Personalized Medicine



Oncode-Accelerator: Platform Organoids & Regulatory Innovation Workstream

- Shared PhD student (Puck Roos)
- Can organoids provide sufficient evidence for EMA approval of medicines?



Can organoid technology be applied to pediatric tumors?

Pediatric versus adult malignancies



- <u>Adult cancers</u> > carcinomas; <u>Pediatric cancers</u> > heterogeneous (leukemias, lymphomas, brain and non-central nervous system tumors, sarcomas).
- <u>Pediatric cancers</u> > consequence of dysregulated development caused by a limited set of genetic alterations. Compared to <u>adult cancers</u>, pediatric cancers harbor fewer and different mutations.

Culture conditions have to be optimized for every individual tumor entity:

- Growth factors
- Matrices

An organoid model for pediatric renal tumors





Drost group: Childhood solid tumor organoids



-- - Atypical teratoid rhabdoid tumors

- Malignant rhabdoid tumors
- Rhabdomyosarcomas
 - Fusion positive
 - Fusion negative

Kidney tumors

- Wilms tumors
- Renal cell carcinomas
- Malignant rhabdoid tumors of the kidney
- Synovial sarcomas

- Whole genome sequencing
- RNA sequencing
- DNA methylation profiling
- Histology

Calandrini et al., Nat. Commun. 2020 Calandrini et al., Cell Rep. 2021 Meister et al., EMBO Mol. Med. 2022 Paassen et al., Oncogene 2023 Ongoing work in the lab

Summary



- Pediatric cancer organoids are representative of patient tumors.
- Can be used to, amongst others:
 - study the molecular processes underpinning tumorigenesis in a **patient specific manner** Custers et al., Nat. Commun. 2021; Liu et al., Nat. Commun. 2023
 - do low-/medium/high-throughput drug screen to find drug vulnerabilities Calandrini et al., Cell Rep. 2021; Calandrini et al., STAR Protoc. 2022

As drug screen platform





Calandrini et al., Cell Rep. 2021 Calandrini & Drost, STAR Protoc. 2022

Summary



- Pediatric cancer organoids are representative of patient tumors.
- Can be used to, amongst others:
 - study the molecular processes underpinning tumorigenesis in a **patient specific manner** Custers et al., Nat. Commun. 2021; Liu et al., Nat. Commun. 2023
 - do low-/medium/high-throughput drug screen to find drug vulnerabilities Calandrini et al., Cell Rep. 2021; Calandrini et al., STAR Protoc. 2022
 - find tumor-specific metabolic vulnerabilities
 - Kes et al., under review
 - establish co-cultures with normal cells, such as immune cells to develop immunotherapies DeMunter, Buhl et al., under review; Barisa et al., under review, Buhl et al., in preparation.

Acknowledgements



Princess Máxima Center

Group Drost

Jeff De Martino Juliane Buhl Irene Paassen Yvonne Tiersma Sofia Doulkeridou Charlotte op 't Hoog Rugile Januskeviciute Michael Meister Maroussia Ganpat Nhung Pham Jiayou He Marjolein Kes Puck Veen Terezinha de Souza Marian Groot-Koerkamp Carla Rios Arceo Kim Schellekens Mariel Brok Giulia Perticari Nadia Anderson Helena Viñas Gaza Emma van Amersfoort Katie Nachataya Mark Dings

Dept. Neuro-oncology Eelco Hoving, Niels Franken

Dept. Solid tumors Marry van den Heuvel-Eibrink, Ronald de Krijger, Alissa Groenendijk

Single Cell Genomics Facility Thanasis Margaritis Aleksandra Balwierz Tito Candelli Philip Lijnzaad Lindy Visser Wim de Jonge The Netherlands Cancer Institute Elzo de Wit

Erasmus Medical Center Ningqing Liu

KiTZ, DKFZ, Heidelberg (Germany) Marcel Kool

Sanger Institute, Hinxton (UK) Sam Behjati

<u>St. Jude Children's Research Hospital,</u> <u>Memphis (US)</u> Martine Roussel

Andrew Davidoff, Andrew Murphy

AACR

American Association

St. Baldrick's

FOUNDATION

Conquer Childhood Cancers

for Cancer Research









Outsmarting cancer Impacting lives























Outsmarting cancer Impacting lives