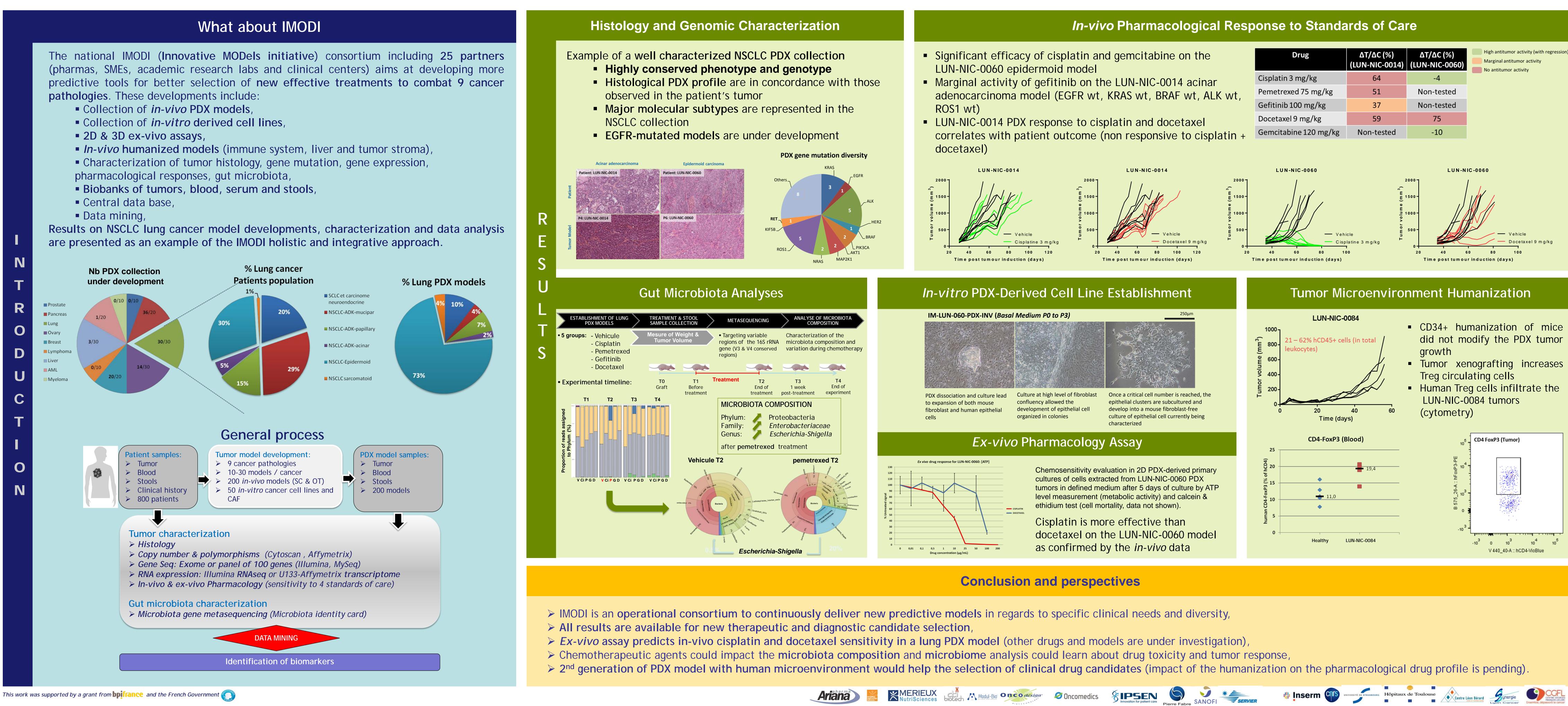


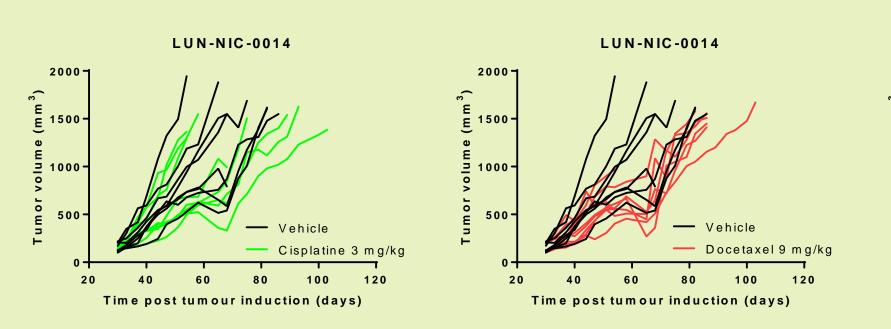
# IMODI Initiative: a Novel Holistic and Integrative Approach with Patient-Derived Tumor Models

<sup>1</sup>Ariana Pharmaceuticals, Paris; <sup>2</sup> BIOFORTIS MERIEUX NUTRISCIENCES, Saint-Herblain; <sup>3</sup> CTI-BIOTECH, Meyzieu; <sup>4</sup> Modul-Bio, Marseille; <sup>5</sup> Oncodesign, Dijon; <sup>6</sup> OncoMedics, Limoges; <sup>7</sup> Ipsen Innovation, Les Ulis; <sup>8</sup> Pierre Fabre Research Institut, Suresnes; <sup>11</sup> CNRS U5059, Toulouse; <sup>12</sup> Centre Georges François Leclerc, Dijon; <sup>10</sup> Servier Research Institut, Suresnes; <sup>11</sup> CNRS U5059, Toulouse; <sup>12</sup> Centre Georges François Leclerc, Dijon; <sup>10</sup> Servier Research Institut, Suresnes; <sup>11</sup> CNRS U5059, Toulouse; <sup>12</sup> Centre Georges François Leclerc, Dijon; <sup>10</sup> Servier Research Institut, Suresnes; <sup>11</sup> CNRS U5059, Toulouse; <sup>12</sup> Centre Georges François Leclerc, Dijon; <sup>10</sup> Servier Research Institut, Suresnes; <sup>11</sup> CNRS U5059, Toulouse; <sup>12</sup> Centre Georges François Leclerc, Dijon; <sup>10</sup> Servier Research Institut, Suresnes; <sup>10</sup> Servier Research Institut, Suresnes; <sup>11</sup> CNRS U5059, Toulouse; <sup>12</sup> Centre Georges François Leclerc, Dijon; <sup>10</sup> Servier Research Institut, Suresnes; <sup>10</sup> Servier Research Institut, Suresnes; <sup>10</sup> CNRS U5059, Toulouse; <sup>12</sup> Centre Georges François Leclerc, Dijon; <sup>10</sup> Servier Research Institut, Suresnes; <sup>10</sup> Servier Rese <sup>13</sup> Toulouse Hospital; <sup>14</sup> Centre Léon Bérard, Lyon; <sup>15</sup> INSERM U938, Paris; <sup>16</sup> INSERM U1033, Lyon; <sup>17</sup> INSERM U1037, Toulouse; <sup>18</sup> INSERM U1037, Toulouse; <sup>18</sup> INSERM U1037, Toulouse; <sup>18</sup> INSERM U1052, Lyon; <sup>19</sup> INSERM U1037, Toulouse; <sup>18</sup> INSERM U1037, Toulouse; <sup>18</sup> INSERM U1037, Toulouse; <sup>18</sup> INSERM U1037, Toulouse; <sup>18</sup> INSERM U1037, Toulouse; <sup>19</sup> INSERM U1037, Toulouse; <sup>19</sup> INSERM U1037, Toulouse; <sup>10</sup> INSERM U1037, <sup>1</sup>

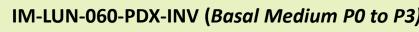


F. Le Vacon<sup>2</sup>, D. Guenot<sup>22</sup>, L. Arnould<sup>12</sup>, A. Bruno<sup>10</sup>, L. Calvet<sup>9</sup>, M. Colombel<sup>16</sup>, J. Corre<sup>17</sup>, O. Rosmorduc<sup>23</sup>, J.E. Sarry<sup>17</sup>, S. Tabone<sup>14,21</sup>, Ph. Vaglio<sup>4</sup>, L.Ysebaert<sup>13</sup>, O. Duchamp<sup>5</sup>, M. Kuras<sup>1</sup>, O. Rosmorduc<sup>23</sup>, J.E. Sarry<sup>17</sup>, S. Tabone<sup>14,21</sup>, Ph. Vaglio<sup>4</sup>, L.Ysebaert<sup>13</sup>, O. Duchamp<sup>5</sup>, S. Tabone<sup>14,21</sup>, Ph. Vaglio<sup>4</sup>, S. Tab

- Significant efficacy of cisplatin and gemcitabine on the LUN-NIC-0060 epidermoid model
- Marginal activity of gefitinib on the LUN-NIC-0014 acinar adenocarcinoma model (EGFR wt, KRAS wt, BRAF wt, ALK wt, ROS1 wt)
- LUN-NIC-0014 PDX response to cisplatin and docetaxel correlates with patient outcome (non responsive to cisplatin + docetaxel)

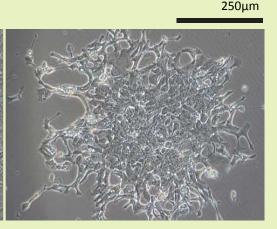


## In-vitro PDX-Derived Cell Line Establishment

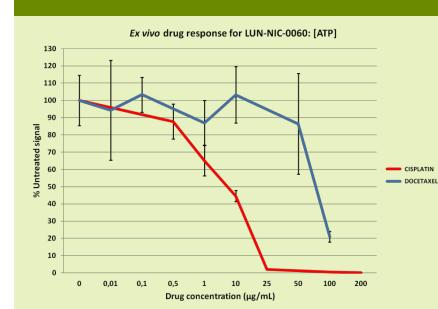




o expansion of both mous oblast and human epithelial Culture at high level of fibro confluency allowed th development of epithelial ce



Once a critical cell number is reached, the epithelial clusters are subcultured and develop into a mouse fibroblast-free culture of epithelial cell currently being characterized



### *Ex-vivo* Pharmacology Assay

organized in colonies

Chemosensitivity evaluation in 2D PDX-derived primary cultures of cells extracted from LUN-NIC-0060 PDX tumors in defined medium after 5 days of culture by ATP level measurement (metabolic activity) and calcein & ethidium test (cell mortality, data not shown).

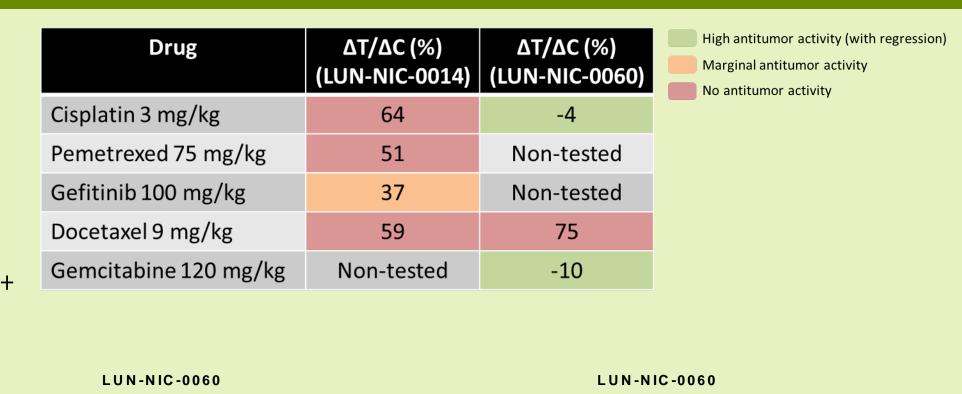
Cisplatin is more effective than docetaxel on the LUN-NIC-0060 model as confirmed by the *in-vivo* data

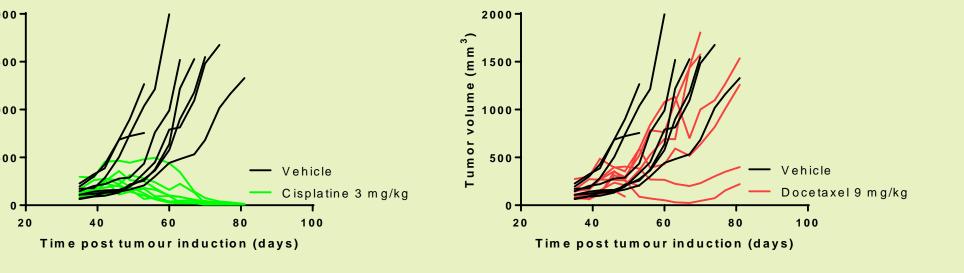
## **Conclusion and perspectives**

> IMODI is an operational consortium to continuously deliver new predictive models in regards to specific clinical needs and diversity,

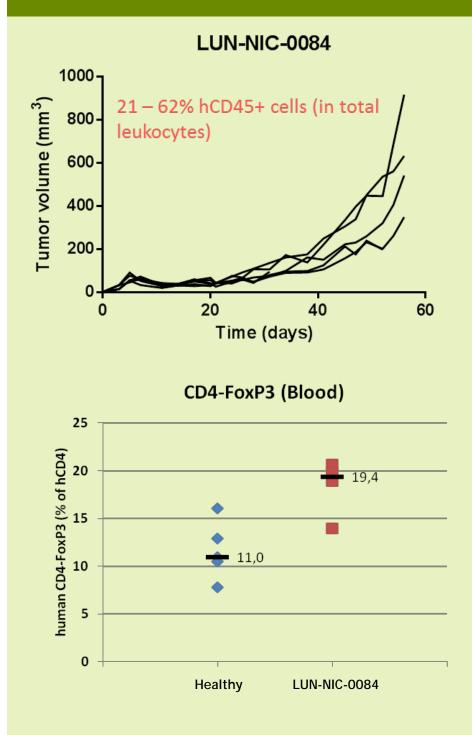
> Ex-vivo assay predicts in-vivo cisplatin and docetaxel sensitivity in a lung PDX model (other drugs and models are under investigation), > Chemotherapeutic agents could impact the microbiota composition and microbiome analysis could learn about drug toxicity and tumor response, > 2<sup>nd</sup> generation of PDX model with human microenvironment would help the selection of clinical drug candidates (impact of the humanization on the pharmacological drug profile is pending).

# In-vivo Pharmacological Response to Standards of Care





### **Tumor Microenvironment Humanization**



CD34+ humanization of mice did not modify the PDX tumor growth

# A38

- Tumor xenografting increases Treg circulating cells
- Human Treg cells infiltrate the LUN-NIC-0084 tumors (cytometry)

