## CD161+ T<sub>RM</sub> cells counteracts HPV-positive oropharyngeal cancer immunotherapy outcomes

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## Highlights

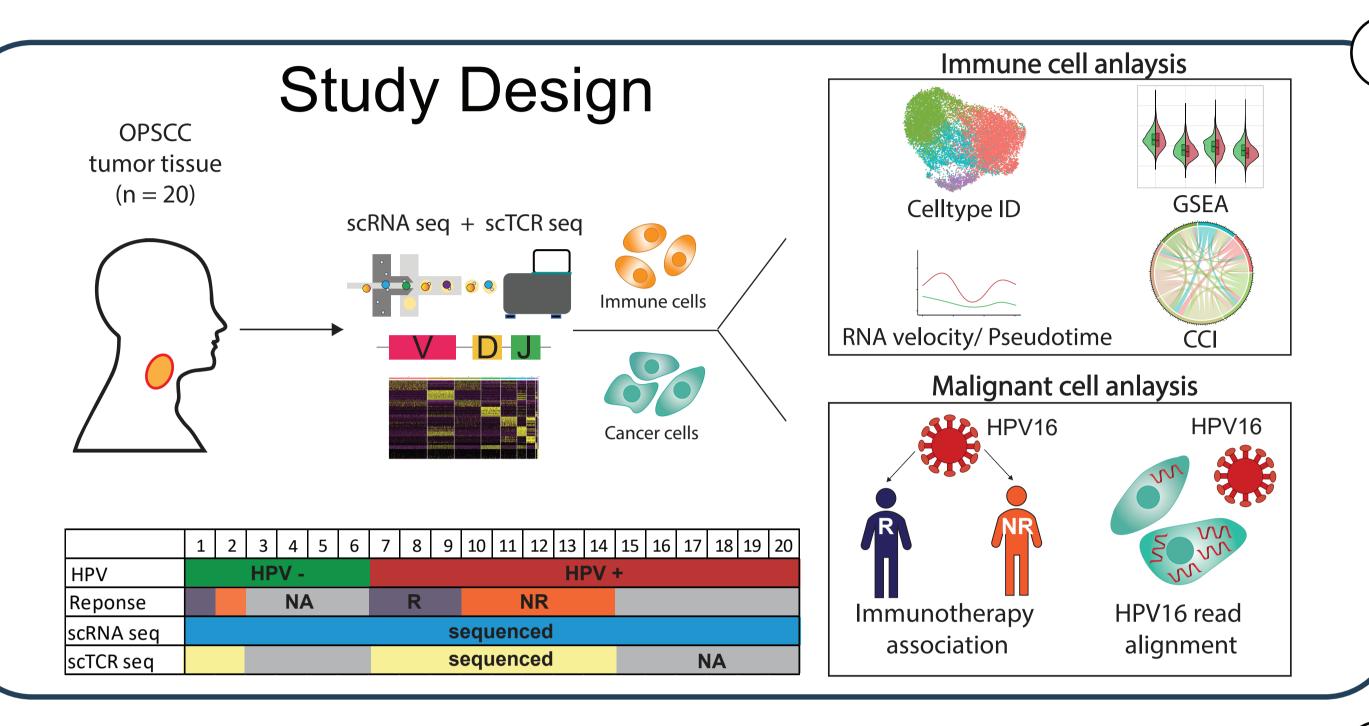
- Transcriptional diversity of malignant cells negates immunotherapy response in oropharyngeal squamous cell carcinoma (OPSCC).
- HPV infection promotes differentiation of CD4+ folicullar helper T cells, enhancing antitumor activity.
- In HPV-positive OPSCC, anti-tumor effect is dampened in terms of TLS activity and T cell effector functions specifically in the tumor resident memory T cells (Trm) with elevated *KLRB1* (encoding CD161).

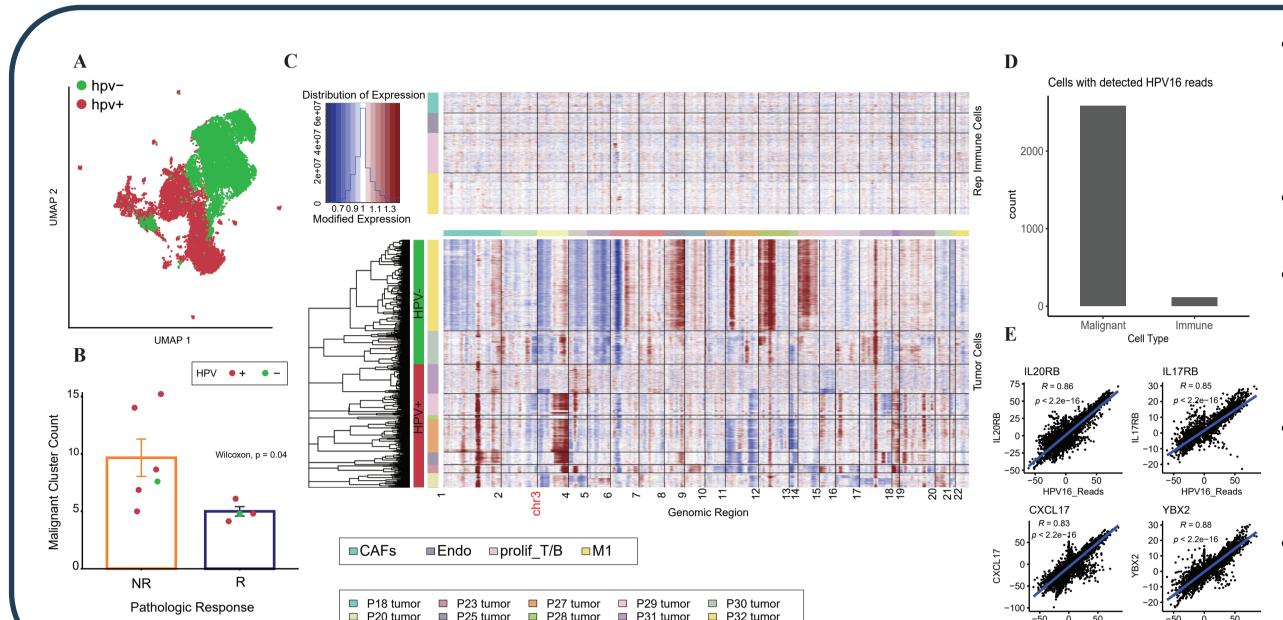
cocor p-value: 0.011

1000 - R = 0.075, p = 0.76

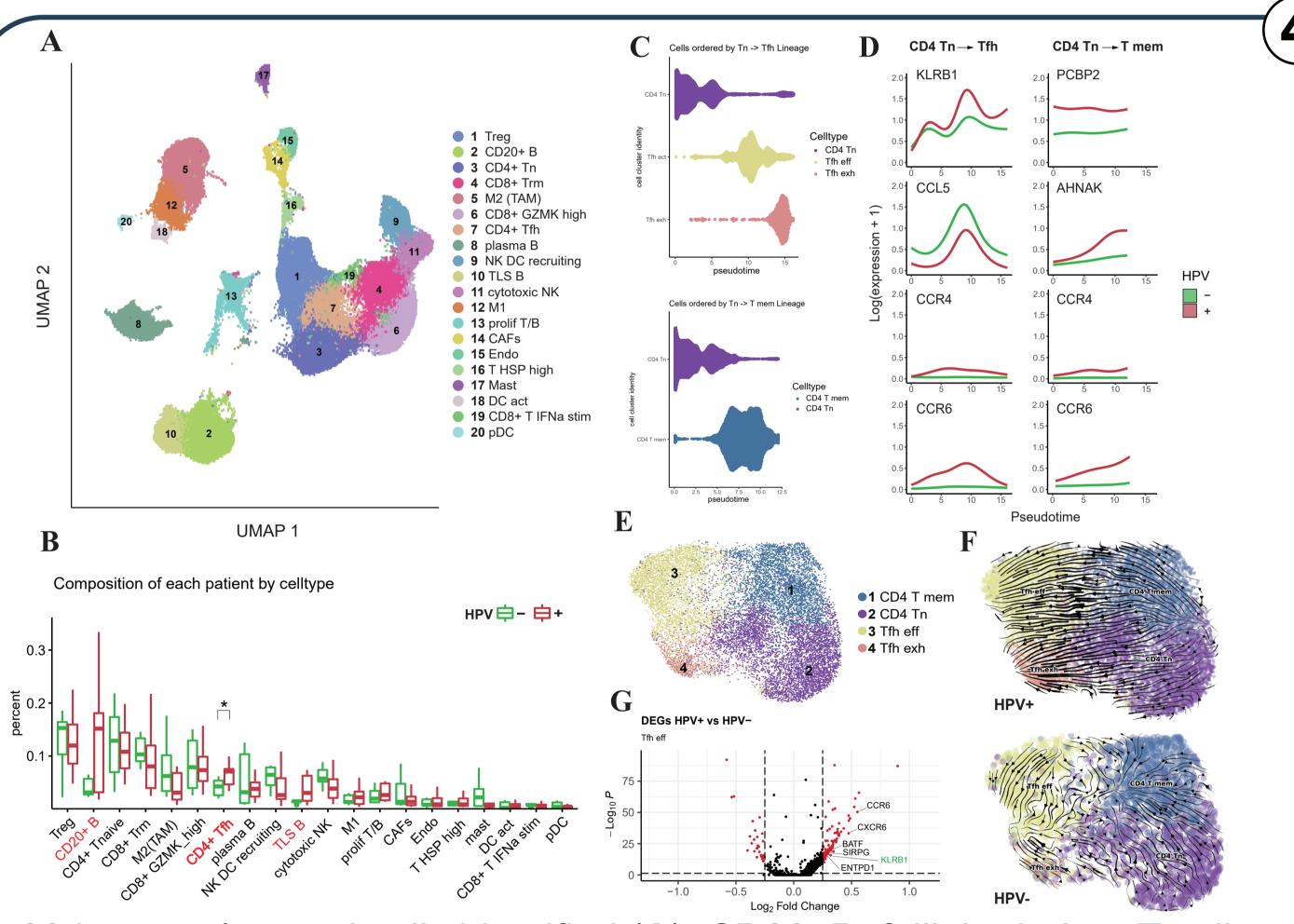
y = 89 + 0.015 x

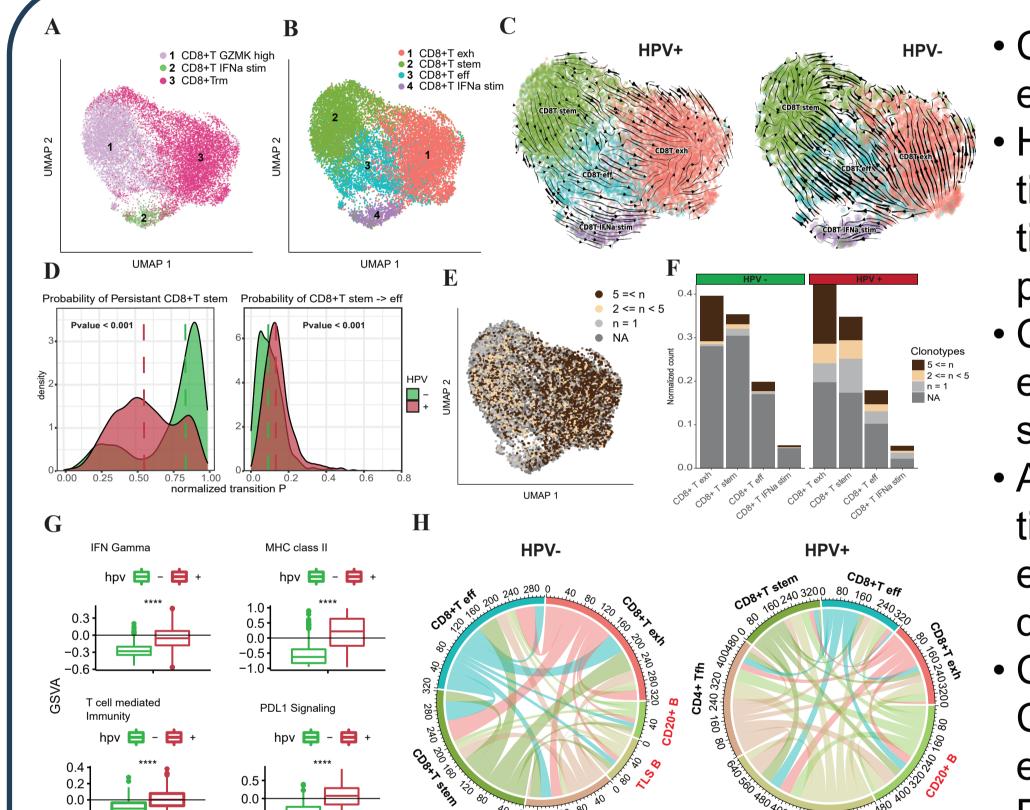
• Computational and experimental validation confirm that density of CD161+ Trm inversely correlates with immunotherapy efficacy in the HPV-positive OPSCC.





- Analysis of 8 HPV+ and 2 I malignant cells show global transcriptome difference due to viral infection (A)
- Low transcriptome diversity predicts Immunotherapy response (B)
- broad copy number variations (CNV) in HPV- compared to HPV+, amplification in chr3 observed in most HPV+ samples (C)
- aligned HPV16 genome reads detected mostly in malignant cells compared to immune cells (**D**)
- Distinctive genes show correlations with HPV16 genome reads (viral titration, E)





**HPV Pos** 

R = 0.63, p = 1.4e - 06

y = 100 + 0.11 x

- CD8+ Tcell subclassfied into stem-like, effector, and exhausted states (A, B)
- HPV- and HPV+ CD8+ Tcells showing distinctive RNA velocity differences (C), with transition of stem-like to effector high in HPV+ and persistence of stem-like high in HPV- (**D**)
- Clonal expansion mostly oberserved in exhausted CD8+ Tcells (E) with clonal expansion increased in all HPV+ subclusters (F)
- Antigen presenting functions, and T cell functions related to anti-tumor immunity upregulated in expanded T cells of HPV+ (G), possibly due to additional viral activation.
- Cell-cell interactions among CD8+ Tcells, CD4+ Tcells, and B cell increased in HPV+, especially interaction of TLS B and CD20+ Bcells to T cell subsets (H)

cocor p-value: 0.0249

R = 0.69, p = 6.7e-08

y = 170 + 1.6 x

R = 0.27, p = 0.26

y = 230 + 0.17 x

S 5000

- 20 immune/stromal cells identified (A). CD20+B, foillular helper T cells (CD4+ Tfh), and TLS B cells upregulated in HPV+ (B)
- Distinctive genes showing temporal dynamics along two pseudotime lineages (Tn->Tm, Tn->Tfh) (**C,D**) in CD4+ T cell subsets (**E**)
- Tfh differntiation prominent in HPV+ (F), distinctive genes upregulated in Tfh eff (**G**)

## **HPV+** cells further divided into R = 0.31, p = 0.033R = -0.15, p = 0.55two groups with KLRB1 v = 400 - 0.072 xy = 1400 + 0.91 x Temporal dynamics of increased viral 5000 response genes upregulated in KLRB1 low CD8+ Tcells (A), contributing to increased anti-tumor immunity. KLRB1 was found specifically upregulated in HPV+ CD8 subsets (B) RNA velocity show identical differences P = 0.017 \*observed in HPV- vs HPV+, when comparing HPV+KLRB1 Low vs HPV+ KLRB1 high in CD8+ substates (**C**). Persistence of stem-like were high and 2 <= n < 5 exhausted were low in KLRB1 low group for CD8+ Tcells (**D**) CD161+ CD103+ CD8+ (no/mm<sup>2</sup>) Increased interaction of TLS B and CD20+ B cells to CD4+ and CD8+ Discussion Tcells observed when comparing HPV+KLRB1 low vs HPV+KLRB1 high cells, providing mechanistic insight into heterogeneity of HPV+ anti-tumor im-

munity (**E**)

patients (G)

TCR clonal expansion generally in-

to HPV+ KLRB1 low group (**F**)

crease from HPV-, HPV+ KLRB1 high,

KLRB1 and its ligand CLEC2D expres-

ly clearly stratifies HPV+ OPSCC

sion in CD8 Trm and B cells respective-

## for HPV genome via alignment CD8+Trm increase in HPV+ OPSCC (C, D).

**HPV** Pos

R = 0.64, p = 9.2e - 07

y = 75 + 0.14 x

cocor p-value: 0.0008 \*\*\*

1000 - R = -0.16, p = 0.51

y = 120 - 0.025 x

**HPV Neg** 

- OPSCC samples extracted from TCGA-HNSC, labeled
- HPV positive samples show significantly higher correlations of KLRB1 to CD4+Tfh markers and CD8+ Trm markers (A, B). Correlation with B cells to CD4+Tfh and
- Co-localization of CD161 in Trm confirmed (E), and its density found to be inversely correlated with immunotherapy response (**F**)
- Antibody bispecific for CD103 and CD161 is expected to increase immunotherapy efficacy for HPV+OPSCC patients with high KLRB1 expression in the Trm
- KLRB1 in CD8+ Tcells were recently demonstrated to have a co- inhibitory effect in tumor clearance of glioblastoma
- It is difficult to determine whether which of the expanded T cells are specically due to virus epitope or cancer eptope
- Further assessment of KLRB1 expression should be evaluated in other viral-induced cancer such as HPV+ ovarian cancer, EBV+ gastic cancer, and HBV+ liver cancer
- KLRB1 expression in CD4+ Tfh is clinically beneficial and further functional assessment of KLRB1 in different cellular context is necessary