Vaxrank: A computational tool for designing personalized cancer vaccines

Alexander Rubinsteyn^{†,1}, Isaac Hodes¹, Julia Kodysh¹, Jeffrey Hammerbacher^{1,2}

¹ Department of Genetics and Genomic Sciences at Icahn School of Medicine at Mount Sinai

² Department of Microbiology and Immunology, Medical University of South Carolina

[†] Contact: alex@hammerlab.org

Abstract

Therapeutic vaccines targeting mutant tumor antigens ("neoantigens") are an increasingly popular form of personalized cancer immunotherapy. Vaxrank is a computational tool for selecting neoantigen vaccine peptides from tumor mutations, tumor RNA data, and patient HLA type. Vaxrank is freely available at www.github.com/hammerlab/vaxrank under the Apache 2.0 open source license and can also be installed from the Python Package Index.

1 Introduction

Mutated cancer proteins recognized by T-cells have become known as "neoantigens" and are considered an essential component of a tumor-specific immune response (Finnigan *et al.*, 2015; Gubin *et al.*, 2015; Schumacher and Schreiber, 2015). Therapeutic vaccination against neoantigens is an emerging experimental cancer therapy that attempts to mobilize an antigen-specific immune response against mutated tumor proteins (Türeci *et al.*, 2016; Zhang *et al.*, 2017). Since few tumor mutations are shared between patients, neoantigen vaccines must be personalized therapies. A common approach for achieving personalization is high-throughput sequencing of tumor and normal patient samples followed by in-silico prioritization of mutated peptides that are likely to be presented on the surface of tumor cells by MHC (major histocompatibility complex) molecules.

Vaxrank is a tool for selecting mutated peptides for personalized therapeutic cancer vaccination. Vaxrank determines which peptides should be used in a vaccine from tumor-specific somatic mutations, tumor RNA sequencing data, and a patient's HLA type. These peptides can then be synthesized and combined with an adjuvant to attempt to elicit an anti-tumor T-cell response in a patient.

The sequence of each mutated protein is determined by assembling variant RNA reads. Mutant protein sequences are ranked using a scoring system which seeks to satisfy two objectives: choosing mutations that are abundant in the tumor and choosing those whose translated amino acid sequences contain likely MHC ligands. Additionally, Vaxrank considers surrounding non-mutated residues in a peptide to prioritize vaccine peptide candidates and to improve the odds of successful synthesis.

Vaxrank was designed for and is currently being used in the Personalized Genomic Vaccine Phase I clinical trial at the Icahn School of Medicine at Mount Sinai (NCT02721043) (Rubinsteyn *et al.*, 2016a).



Figure 1: Users provide tumor mutations, tumor RNA sequence data, and patient HLA type. These are used to determine mutant protein sequences and rank them according to expression and predicted MHC affinity.

2 Running Vaxrank

To generate a Vaxrank vaccine report, the user must provide one or more files containing somatic variants (in VCF, MAF, or JSON format), aligned tumor RNA-seq reads (as an indexed BAM), and the HLA alleles to be used for MHC binding prediction:

```
vaxrank
--vcf somatic-variants.vcf
--bam tumor-rna.bam
--mhc-predictor netmhc
--mhc-alleles H2-Kb,H2-Db
--mhc-peptide-lengths 8-10
--vaccine-peptide-length 21
--min-alt-rna-reads 3
--output-pdf-report vaccine-peptides.pdf
```

The --mhc-predictor argument controls which program is used to predict the affinity between a peptide-MHC pair. Vaxrank supports the use of locally installed instances of NetMHC (Andreatta and Nielsen, 2016), NetMHCpan (Nielsen *et al.*, 2007), NetMHCcons (Karosiene *et al.*, 2012), MHCflurry (Rubinsteyn *et al.*, 2016b), or a variety of web-based predictors through IEDB (Vita *et al.*, 2015). The --min-alt-rna-reads argument controls the minimum number of RNA reads supporting a variant required to include that variant in the output report. In addition to quantifying tumor expression of a mutations, the RNA reads are used to phase adjacent variants when reconstructing the mutated coding sequence. A more complete list of options for input data, filtering, and output formats can be seen by running vaxrank --help. Vaxrank's output can be formatted as PDF, plain-text, HTML, or an Excel spreadsheet. The output lists variants in ranked order along with vaccine peptide(s) containing that variant, predicted MHC ligands, number of supporting RNA reads, and sequence properties that affect manufacturability.

3 Ranking Mutations

A patient's coding mutations are ranked according to a score that combines each mutation's degree of expression and aggregate affinity of overlapping mutant peptides for that patient's MHC alleles.

 $\begin{aligned} RankingScore &= ExpressionScore \cdot TotalBindingScore \\ ExpressionScore &= \sqrt{\# RNA \ reads \ supporting \ variant \ allele} \\ TotalBindingScore &= \sum_{s \in subsequences \ a \in alleles} BindingScore(s, a) \end{aligned}$

The *BindingScore* function is, by default, a logistic transformation of the peptide-MHC binding affinity that loosely approximates the probability of T-cell response (Sette *et al.*, 1994). Alternatively, binding predictions can be scored using an affinity threshold (commonly ≤ 500 nM) or a threshold on the percentile rank of the affinity. Only subsequences which overlap mutant residues and do not occur in the reference proteome are considered as part of the *TotalBindingScore*.

4 Manufacturability

Vaxrank was designed under the assumption that its output will be used to make long peptides, due to their favorable immunological properties (Rosalia *et al.*, 2013). Unfortunately, long peptides are also more difficult to synthesize using traditional solid phase chemistry (Bodanszky, 1988). To avoid known difficulties in synthesis, Vaxrank selects a window of amino acids around each mutation that minimizes the following undesirable properties:

- 1. total number of cysteine residues
- 2. max(0, mean hydrophobicity of 7 residues at C-terminus)
- 3. max(0, mean hydrophobicity of any 7 amino acid window)
- 4. glutamine, glutamic acid, or cysteine at N-terminus
- 5. cysteine at C-terminus
- 6. proline at C-terminus
- 7. asparagine at N-terminus
- 8. total number of asparagine-proline bonds

Manufacturability optimization does not affect the ranking of mutations but is only used for selecting which surrounding residues should be included. In cases where a mutation spans a "difficult" sequence (e.g. long hydrophobic stretch), minimizing these criteria may fail to salvage manufacturability.

Funding: This work has been supported by the Icahn Institute and the Parker Institute for Cancer Immunotherapy.

References

- Andreatta, M. and Nielsen, M. (2016). Gapped sequence alignment using artificial neural networks: application to the MHC class I system. *Bioinformatics*, **32**(4), 511–517.
- Bodanszky, P.D.M. (1988). Peptide Chemistry: A Practical Textbook. Springer Berlin Heidelberg.
- Finnigan, Jr, J.P. et al (2015). Mutation-Derived tumor antigens: Novel targets in cancer immunotherapy. Oncology, 29(12).

- Gubin, M.M. et al (2015). Tumor neoantigens: building a framework for personalized cancer immunotherapy. J. Clin. Invest., 125(9), 3413–3421.
- Karosiene, E. et al (2012). NetMHCcons: a consensus method for the major histocompatibility complex class I predictions. *Immunogenetics*, 64(3), 177–186.
- Nielsen, M. et al (2007). NetMHCpan, a method for quantitative predictions of peptide binding to any HLA-A and -B locus protein of known sequence. *PLoS One*, **2**(8), e796.
- Rosalia, R.A. et al (2013). Dendritic cells process synthetic long peptides better than whole protein, improving antigen presentation and t-cell activation. *Eur. J. Immunol.*, 43(10), 2554–2565.
- Rubinsteyn, A. et al (2016a). Abstract a022: Computational pipeline for a personalized genomic vaccine trial. *Cancer Immunol Res*, 4(11 Supplement), A022–A022.
- Rubinsteyn, A. et al (2016b). Predicting peptide-mhc binding affinities with imputed training data. *bioRxiv*, page 054775.
- Schumacher, T.N. and Schreiber, R.D. (2015). Neoantigens in cancer immunotherapy. Science, 348(6230), 69–74.
- Sette, A. et al (1994). The relationship between class I binding affinity and immunogenicity of potential cytotoxic T cell epitopes. J. Immunol., 153(12), 5586–5592.
- Türeci, O. et al (2016). Targeting the heterogeneity of cancer with individualized neoepitope vaccines. Clin. Cancer Res., 22(8), 1885–1896.
- Vita, R. et al (2015). The immune epitope database (IEDB) 3.0. Nucleic Acids Res., 43(Database issue), D405–12.
- Zhang, X. et al (2017). Personalized cancer vaccines: Targeting the cancer mutanome. Vaccine, 35(7), 1094–1100.