WEBVTT

NOTE duration:"01:00:05" NOTE recognizability:0.839

NOTE language:en-us

NOTE Confidence: 0.787334406923077

 $00:00:00.000 \longrightarrow 00:00:02.072$ US online. It's my great pleasure today

NOTE Confidence: 0.787334406923077

00:00:02.072 --> 00:00:04.079 to introduce our Grand Round speaker,

NOTE Confidence: 0.787334406923077

 $00:00:04.080 \longrightarrow 00:00:05.226$ Doctor Kevin Harold.

NOTE Confidence: 0.787334406923077

00:00:05.226 --> 00:00:06.754 I've known Doctor Harold,

NOTE Confidence: 0.787334406923077

 $00:00:06.760 \longrightarrow 00:00:08.314$ it turns out, for 10 years now.

NOTE Confidence: 0.787334406923077

 $00:00:08.320 \longrightarrow 00:00:09.680$ We just figured it out.

NOTE Confidence: 0.787334406923077

 $00:00:09.680 \longrightarrow 00:00:11.720$ We met at the bedside.

NOTE Confidence: 0.787334406923077

00:00:11.720 --> 00:00:13.799 And I think for the fellows in the audience,

NOTE Confidence: 0.787334406923077

00:00:13.800 --> 00:00:16.059 this is a this hopefully will be a teaching

NOTE Confidence: 0.787334406923077

00:00:16.059 --> 00:00:17.916 moment because you get a sick patient,

NOTE Confidence: 0.787334406923077

 $00{:}00{:}17.920 \dashrightarrow 00{:}00{:}19.355$ you're not sure what's wrong with him.

NOTE Confidence: 0.787334406923077

 $00:00:19.360 \longrightarrow 00:00:20.524$ You call the expert.

NOTE Confidence: 0.787334406923077

 $00:00:20.524 \longrightarrow 00:00:22.699$ And from that, we developed an

00:00:22.699 --> 00:00:24.716 entire universe of research projects,

NOTE Confidence: 0.787334406923077

 $00{:}00{:}24.716 \dashrightarrow 00{:}00{:}27.222$ grants and so on that Doctor Harold

NOTE Confidence: 0.787334406923077

00:00:27.222 --> 00:00:29.039 will be talking about today.

NOTE Confidence: 0.787334406923077

 $00:00:29.040 \longrightarrow 00:00:31.356$ To me that exemplifies the beauty

NOTE Confidence: 0.787334406923077

 $00:00:31.356 \longrightarrow 00:00:33.711$ of Yale University and what we're

NOTE Confidence: 0.787334406923077

 $00:00:33.711 \longrightarrow 00:00:35.265$ about unusual clinical circumstances

NOTE Confidence: 0.787334406923077

 $00:00:35.265 \longrightarrow 00:00:37.240$ taken back to the bench,

NOTE Confidence: 0.787334406923077

 $00:00:37.240 \longrightarrow 00:00:38.480$ going back to the clinic,

NOTE Confidence: 0.787334406923077

 $00:00:38.480 \longrightarrow 00:00:39.120$ etcetera, etcetera.

NOTE Confidence: 0.787334406923077

00:00:39.120 --> 00:00:41.040 But the best part of it

NOTE Confidence: 0.787334406923077

 $00{:}00{:}41.040 \dashrightarrow 00{:}00{:}42.840$ all is the collegiality.

NOTE Confidence: 0.787334406923077

00:00:42.840 --> 00:00:44.970 So I'm just remembering my

NOTE Confidence: 0.787334406923077

00:00:44.970 --> 00:00:46.400 first after we got our funding,

NOTE Confidence: 0.787334406923077

00:00:46.400 --> 00:00:48.074 the very first research meeting that

NOTE Confidence: 0.787334406923077

 $00:00:48.074 \longrightarrow 00:00:50.177$ I had with Doctor Harold and Doctor

NOTE Confidence: 0.787334406923077

 $00:00:50.177 \dashrightarrow 00:00:52.304$ Eric Murphy, who's since left Yale.

 $00:00:52.304 \longrightarrow 00:00:54.675$ Yeah, I'm not an immunologist, but they are.

NOTE Confidence: 0.787334406923077 00:00:54.680 --> 00:00:55.051 They. NOTE Confidence: 0.787334406923077

00:00:55.051 --> 00:00:56.906 They both are card carrying

NOTE Confidence: 0.787334406923077

 $00:00:56.906 \longrightarrow 00:00:58.870$ immunologists and Doctor Mephre in

NOTE Confidence: 0.787334406923077

 $00:00:58.870 \longrightarrow 00:01:00.558$ particular doesn't tolerate fools.

NOTE Confidence: 0.787334406923077

 $00:01:00.560 \longrightarrow 00:01:02.555$ So I was really intimidated by this

NOTE Confidence: 0.787334406923077

 $00:01:02.555 \longrightarrow 00:01:05.159$ meeting and I had established ground rules.

NOTE Confidence: 0.787334406923077

 $00:01:05.160 \longrightarrow 00:01:06.960$ I don't know if Doctor Harold remembers this.

NOTE Confidence: 0.787334406923077

 $00:01:06.960 \longrightarrow 00:01:09.633$ We decided that this is an idiot free zone.

NOTE Confidence: 0.787334406923077

 $00:01:09.640 \longrightarrow 00:01:10.306$ We're all smart,

NOTE Confidence: 0.787334406923077

 $00:01:10.306 \longrightarrow 00:01:11.860$ we can say whatever we like and

NOTE Confidence: 0.787334406923077

 $00:01:11.915 \longrightarrow 00:01:13.397$ we never have to be embarrassed.

NOTE Confidence: 0.787334406923077

 $00{:}01{:}13.400 \dashrightarrow 00{:}01{:}15.122$ And I think that that principle

NOTE Confidence: 0.787334406923077

 $00:01:15.122 \longrightarrow 00:01:17.557$ has LED us in the last 10 years

NOTE Confidence: 0.787334406923077

 $00:01:17.557 \longrightarrow 00:01:20.066$ because it turns out that even I had

 $00:01:20.066 \longrightarrow 00:01:22.194$ something to bring to the table here.

NOTE Confidence: 0.787334406923077

 $00{:}01{:}22.200 --> 00{:}01{:}23.529$ So collegiality, respect,

NOTE Confidence: 0.787334406923077

 $00:01:23.529 \longrightarrow 00:01:26.187$ creativity has led to a whole

NOTE Confidence: 0.787334406923077

00:01:26.187 --> 00:01:28.845 field that I think we've opened

NOTE Confidence: 0.787334406923077

 $00:01:28.845 \longrightarrow 00:01:30.985$ up here in translational research

NOTE Confidence: 0.787334406923077

 $00:01:31.065 \longrightarrow 00:01:33.695$ on immune related adverse events

NOTE Confidence: 0.787334406923077

00:01:33.695 --> 00:01:35.273 for endocrine toxicities.

NOTE Confidence: 0.787334406923077

 $00{:}01{:}35.280 \dashrightarrow 00{:}01{:}38.304$ So other than this whole world Doctor

NOTE Confidence: 0.787334406923077

 $00:01:38.304 \longrightarrow 00:01:41.165$ Harold is actually really famous for

NOTE Confidence: 0.787334406923077

00:01:41.165 --> 00:01:44.075 delaying type one diabetes in kids,

NOTE Confidence: 0.787334406923077

00:01:44.080 --> 00:01:46.360 a major breakthrough in delivering

NOTE Confidence: 0.787334406923077

 $00:01:46.360 \longrightarrow 00:01:48.640$ CD3 antibodies to children who

NOTE Confidence: 0.787334406923077

00:01:48.719 --> 00:01:51.077 had started to develop type one

NOTE Confidence: 0.787334406923077

00:01:51.077 --> 00:01:53.521 diabetes giving them the anti CD3

NOTE Confidence: 0.787334406923077

 $00:01:53.521 \longrightarrow 00:01:56.192$ antibody delaying the onset of

NOTE Confidence: 0.787334406923077

 $00{:}01{:}56.192 \dashrightarrow 00{:}01{:}59.032$ full blown is let cell destruction.

 $00:01:59.040 \longrightarrow 00:02:00.433$ I don't think he's going to be

NOTE Confidence: 0.787334406923077

00:02:00.433 --> 00:02:01.320 talking about that today,

NOTE Confidence: 0.787334406923077

 $00:02:01.320 \longrightarrow 00:02:02.682$ but today we look forward to

NOTE Confidence: 0.787334406923077

 $00:02:02.682 \longrightarrow 00:02:04.224$ listening to all the cancer related

NOTE Confidence: 0.787334406923077

 $00:02:04.224 \longrightarrow 00:02:05.396$ studies that he's done.

NOTE Confidence: 0.787334406923077

 $00:02:05.400 \longrightarrow 00:02:06.680$ So without further ado,

NOTE Confidence: 0.787334406923077

00:02:06.680 --> 00:02:09.160 thank you Doctor Harold for taking the time.

NOTE Confidence: 0.8798066

00:02:15.160 --> 00:02:17.380 OK, thank you very much Harriet

NOTE Confidence: 0.8798066

 $00:02:17.380 \longrightarrow 00:02:19.280$ for that very kind introduction.

NOTE Confidence: 0.822342689565217

 $00{:}02{:}19.280 \dashrightarrow 00{:}02{:}21.344$ I, I, I I have to admit I I was also

NOTE Confidence: 0.822342689565217

00:02:21.344 --> 00:02:22.928 quite pleased that we were going

NOTE Confidence: 0.822342689565217

 $00:02:22.928 \longrightarrow 00:02:24.958$ to set up our research meeting.

NOTE Confidence: 0.822342689565217

 $00{:}02{:}24.960 \dashrightarrow 00{:}02{:}26.370$ So there'll be no it would

NOTE Confidence: 0.822342689565217

 $00:02:26.370 \longrightarrow 00:02:27.640$ be an idiot free zone.

NOTE Confidence: 0.822342689565217

 $00:02:27.640 \longrightarrow 00:02:29.400$ I I I appreciated that.

 $00:02:31.520 \longrightarrow 00:02:36.720$ So here's my disclosures.

NOTE Confidence: 0.88189794

 $00:02:36.720 \longrightarrow 00:02:41.323$ So hopefully this is review to everyone

NOTE Confidence: 0.88189794

 $00:02:41.323 \longrightarrow 00:02:44.424$ that that basically we we live in

NOTE Confidence: 0.88189794

 $00:02:44.424 \longrightarrow 00:02:46.996$ a constant immunologic equilibrium

NOTE Confidence: 0.88189794

 $00:02:46.996 \longrightarrow 00:02:49.396$ balancing lymphocyte activation

NOTE Confidence: 0.88189794

 $00:02:49.396 \longrightarrow 00:02:52.608$ and control and the activation is

NOTE Confidence: 0.88189794

 $00:02:52.608 \longrightarrow 00:02:55.730$ controlled by a number of Co simulatory

NOTE Confidence: 0.88189794

 $00:02:55.730 \longrightarrow 00:02:58.875$ molecules and recognition by antigen

NOTE Confidence: 0.88189794

 $00{:}02{:}58.880 \rightarrow 00{:}03{:}03.514$ by T cells and other immune cells.

NOTE Confidence: 0.88189794

 $00:03:03.520 \longrightarrow 00:03:06.376$ And we the the major developments in

NOTE Confidence: 0.88189794

 $00{:}03{:}06.376 \dashrightarrow 00{:}03{:}09.435$ the cancer field of course are that by

NOTE Confidence: 0.88189794

 $00:03:09.435 \longrightarrow 00:03:11.964$ disrupting this balance we can develop

NOTE Confidence: 0.88189794

 $00:03:11.964 \longrightarrow 00:03:14.314$ effective ways of treating cancers.

NOTE Confidence: 0.88189794

 $00:03:14.320 \longrightarrow 00:03:17.518$ And and indeed this has revolutionized

NOTE Confidence: 0.88189794

 $00:03:17.520 \longrightarrow 00:03:20.498$ the field over the past decade and

NOTE Confidence: 0.88189794

 $00:03:20.498 \longrightarrow 00:03:23.246$ it became very clear initially when

 $00:03:23.246 \longrightarrow 00:03:25.669$ these agents became available for

NOTE Confidence: 0.88189794

 $00{:}03{:}25.669 \dashrightarrow 00{:}03{:}28.561$ clinical use that there were adverse

NOTE Confidence: 0.88189794

 $00:03:28.561 \longrightarrow 00:03:31.079$ events that would occur as well

NOTE Confidence: 0.88189794

 $00:03:31.080 \longrightarrow 00:03:33.365$ since the balance that prevents

NOTE Confidence: 0.88189794

 $00{:}03{:}33.365 \dashrightarrow 00{:}03{:}35.650$ us from developing autoimmunity is

NOTE Confidence: 0.88189794

 $00:03:35.724 \longrightarrow 00:03:38.079$ controlled by the same mechanisms.

NOTE Confidence: 0.88189794

 $00:03:38.080 \longrightarrow 00:03:40.174$ And we and it's been established

NOTE Confidence: 0.88189794

 $00{:}03{:}40.174 \dashrightarrow 00{:}03{:}42.424$ for many years that even normal

NOTE Confidence: 0.88189794

 $00:03:42.424 \longrightarrow 00:03:44.764$ patients have immune cells that are

NOTE Confidence: 0.88189794

 $00:03:44.764 \longrightarrow 00:03:47.358$ capable of recognizing self antigens.

NOTE Confidence: 0.88189794

 $00{:}03{:}47.360 \dashrightarrow 00{:}03{:}49.985$ So by tipping this balance it's fairly

NOTE Confidence: 0.88189794

 $00:03:49.985 \longrightarrow 00:03:53.383$ clear that one would be able to develop

NOTE Confidence: 0.88189794

 $00{:}03{:}53.383 \dashrightarrow 00{:}03{:}55.578$ autoimmune diseases and that's that's

NOTE Confidence: 0.88189794

 $00:03:55.654 \longrightarrow 00:03:58.558$ what I'm going to be talking about today.

NOTE Confidence: 0.88189794

 $00:03:58.560 \longrightarrow 00:04:01.325$ Now the endocrine organs seem to be

 $00:04:01.325 \longrightarrow 00:04:03.740$ particularly vulnerable to immune related

NOTE Confidence: 0.88189794

 $00{:}04{:}03.740 \dashrightarrow 00{:}04{:}07.250$ adverse events with with biologic

NOTE Confidence: 0.88189794

 $00:04:07.250 \longrightarrow 00:04:09.590$ therapy particularly with checkpoint

NOTE Confidence: 0.88189794

 $00:04:09.590 \longrightarrow 00:04:12.620$ inhibitors and you can this is from a

NOTE Confidence: 0.88189794

00:04:12.620 --> 00:04:15.518 review that came out a number of years ago,

NOTE Confidence: 0.88189794

 $00:04:15.520 \longrightarrow 00:04:17.064$ but there are many,

NOTE Confidence: 0.88189794

 $00{:}04{:}17.064 \dashrightarrow 00{:}04{:}18.994$ many organs that are affected.

NOTE Confidence: 0.88189794

 $00:04:19.000 \longrightarrow 00:04:21.592$ I've on the right side we see just the

NOTE Confidence: 0.88189794

 $00{:}04{:}21.600 \dashrightarrow 00{:}04{:}25.040$ endocrine organs that are affected.

NOTE Confidence: 0.88189794

 $00:04:25.040 \longrightarrow 00:04:29.072$ Fibroid disease is the most common and

NOTE Confidence: 0.88189794

 $00:04:29.072 \longrightarrow 00:04:35.664$ frankly can be over 15% in some series

NOTE Confidence: 0.88189794

 $00:04:35.664 \longrightarrow 00:04:39.156$ and the second most common is pituitary

NOTE Confidence: 0.88189794

 $00:04:39.156 \longrightarrow 00:04:42.478$ disease that can be difficult to diagnose,

NOTE Confidence: 0.88189794

00:04:42.480 --> 00:04:44.696 certainly important to diagnose.

NOTE Confidence: 0.88189794

 $00:04:44.696 \longrightarrow 00:04:48.534$ And then the other endocrine organs seem

NOTE Confidence: 0.88189794

 $00:04:48.534 \longrightarrow 00:04:51.464$ to be affected as well including the

 $00:04:51.464 \longrightarrow 00:04:53.528$ the insulin producing beta cells that

NOTE Confidence: 0.88189794

 $00:04:53.528 \longrightarrow 00:04:56.159$ leads to the development of diabetes.

NOTE Confidence: 0.88189794

 $00:04:56.160 \longrightarrow 00:04:59.600$ Now I would point out from this graph

NOTE Confidence: 0.88189794

 $00:04:59.600 \longrightarrow 00:05:04.473$ that that the development of these

NOTE Confidence: 0.88189794

 $00:05:04.473 \longrightarrow 00:05:06.939$ adverse events are most common with

NOTE Confidence: 0.88189794

 $00:05:06.939 \longrightarrow 00:05:08.812$ combination therapies and this is going

NOTE Confidence: 0.88189794

 $00:05:08.812 \longrightarrow 00:05:10.758$ to come up again in some of the data.

NOTE Confidence: 0.88189794

 $00{:}05{:}10.760 \dashrightarrow 00{:}05{:}13.904$ I'm going to present to you that the

NOTE Confidence: 0.88189794

00:05:13.904 --> 00:05:18.500 combination of anti C2A4 plus anti PD

NOTE Confidence: 0.88189794

 $00{:}05{:}18.500 \dashrightarrow 00{:}05{:}22.648$ one or PDL one seems to be seems to

NOTE Confidence: 0.88189794

 $00{:}05{:}22.648 {\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}} 00{:}05{:}24.776$ impart a higher risk of developing these

NOTE Confidence: 0.88189794

 $00:05:24.776 \longrightarrow 00:05:26.797$ adverse events than either agent alone.

NOTE Confidence: 0.95304476625

 $00{:}05{:}29.040 \dashrightarrow 00{:}05{:}31.840$ So the timing of them varies a bit.

NOTE Confidence: 0.95304476625

 $00:05:31.840 \longrightarrow 00:05:35.634$ And sometimes we, as a practical matter,

NOTE Confidence: 0.95304476625

 $00:05:35.640 \longrightarrow 00:05:38.244$ have a hard time determining whether

 $00:05:38.244 \longrightarrow 00:05:41.986$ or not an adverse event that we may see

NOTE Confidence: 0.95304476625

 $00{:}05{:}41.986 {\:{\mbox{--}}}{\:{\mbox{--}}} 00{:}05{:}44.306$ is directly related to the checkpoint

NOTE Confidence: 0.95304476625

00:05:44.306 --> 00:05:46.622 inhibitor that's been given or whether

NOTE Confidence: 0.95304476625

 $00:05:46.622 \longrightarrow 00:05:49.118$ it was just happening by chance.

NOTE Confidence: 0.95304476625

 $00:05:49.120 \longrightarrow 00:05:51.154$ Because some of these adverse events

NOTE Confidence: 0.95304476625

 $00:05:51.154 \longrightarrow 00:05:53.679$ such as thyroid disease or diabetes are

NOTE Confidence: 0.95304476625

 $00:05:53.679 \longrightarrow 00:05:55.519$ relatively common in the population,

NOTE Confidence: 0.95304476625

 $00:05:55.520 \longrightarrow 00:05:58.440$ particularly in the older population.

NOTE Confidence: 0.95304476625

00:05:58.440 --> 00:06:00.968 But this graph shows you the timing of

NOTE Confidence: 0.95304476625

 $00:06:00.968 \longrightarrow 00:06:04.144$ some of the more common adverse events.

NOTE Confidence: 0.95304476625

 $00:06:04.144 \longrightarrow 00:06:08.200$ You can see that hypothesitis can happen

NOTE Confidence: 0.95304476625

 $00:06:08.200 \longrightarrow 00:06:11.398$ several weeks after the development after

NOTE Confidence: 0.95304476625

 $00:06:11.398 \longrightarrow 00:06:13.888$ a checkpoint inhibitors are administered.

NOTE Confidence: 0.95304476625

 $00:06:13.888 \longrightarrow 00:06:16.996$ Some of the others that are that

NOTE Confidence: 0.95304476625

 $00:06:16.996 \longrightarrow 00:06:20.105$ are also quite common tend to occur

NOTE Confidence: 0.95304476625

00:06:20.105 --> 00:06:22.080 in a more acute manner.

 $00:06:22.080 \longrightarrow 00:06:26.870$ Now as Harriet mentioned we started

NOTE Confidence: 0.95304476625

 $00{:}06{:}26.870 \longrightarrow 00{:}06{:}30.134$ I'm going to spend most of my the rest

NOTE Confidence: 0.95304476625

 $00:06:30.134 \longrightarrow 00:06:32.456$ of the talk talking about checkpoint

NOTE Confidence: 0.95304476625

 $00:06:32.456 \longrightarrow 00:06:34.050$ induced autoimmune diabetes because

NOTE Confidence: 0.95304476625

 $00:06:34.050 \longrightarrow 00:06:36.318$ that's where we've done the most,

NOTE Confidence: 0.95304476625

 $00:06:36.320 \longrightarrow 00:06:36.977$ the most work.

NOTE Confidence: 0.95304476625

00:06:36.977 --> 00:06:38.510 And let me just make it mention

NOTE Confidence: 0.95304476625

 $00:06:38.567 \longrightarrow 00:06:40.240$ one thing about some of the others.

NOTE Confidence: 0.95304476625

00:06:40.240 --> 00:06:43.500 You know I I I do want to say sort

NOTE Confidence: 0.95304476625

 $00:06:43.600 \longrightarrow 00:06:46.402$ of upfront that that the mechanisms

NOTE Confidence: 0.95304476625

 $00{:}06{:}46.402 \dashrightarrow 00{:}06{:}49.126$ of some of these other checkpoint

NOTE Confidence: 0.95304476625

 $00{:}06{:}49.126 \dashrightarrow 00{:}06{:}51.775$ induced endocrine adverse events are

NOTE Confidence: 0.95304476625

 $00{:}06{:}51.775 \dashrightarrow 00{:}06{:}54.120$ not very well worked out at all.

NOTE Confidence: 0.95304476625

 $00:06:54.120 \longrightarrow 00:06:57.224$ There is really one sort of lead paper

NOTE Confidence: 0.95304476625

 $00:06:57.224 \longrightarrow 00:06:59.702$ that described the development of

 $00:06:59.702 \longrightarrow 00:07:01.870$ autoimmune hypothesitis that talked

NOTE Confidence: 0.95304476625

 $00{:}07{:}01.870 \dashrightarrow 00{:}07{:}05.365$ about expression of C of CTLA 4 on

NOTE Confidence: 0.95304476625

 $00:07:05.365 \longrightarrow 00:07:07.160$ pituitary cells and suggested that

NOTE Confidence: 0.95304476625

00:07:07.160 --> 00:07:09.764 what happened with anti CTLA 4 is

NOTE Confidence: 0.95304476625

 $00:07:09.764 \longrightarrow 00:07:12.073$ that the antibodies bound to CTLA

NOTE Confidence: 0.95304476625

00:07:12.073 --> 00:07:14.305 4 on the pituitary fixed complement

NOTE Confidence: 0.95304476625

 $00:07:14.305 \longrightarrow 00:07:16.158$ and destroyed the cells.

NOTE Confidence: 0.95304476625

00:07:16.160 --> 00:07:18.400 But if you go through the paper carefully,

NOTE Confidence: 0.95304476625

 $00:07:18.400 \longrightarrow 00:07:19.360$ you'll see that, well,

NOTE Confidence: 0.95304476625

 $00:07:19.360 \longrightarrow 00:07:20.560$ it really wasn't sort of.

NOTE Confidence: 0.95304476625

 $00{:}07{:}20.560 \dashrightarrow 00{:}07{:}23.158$ It wasn't the ACTH producing cells,

NOTE Confidence: 0.95304476625

 $00:07:23.160 \longrightarrow 00:07:25.500$ which is a common manifestation

NOTE Confidence: 0.95304476625

00:07:25.500 --> 00:07:26.436 of hypothesitis,

NOTE Confidence: 0.95304476625

 $00{:}07{:}26.440 \dashrightarrow 00{:}07{:}28.850$ it was prolact in producing cells

NOTE Confidence: 0.95304476625

 $00:07:28.850 \longrightarrow 00:07:31.840$ and also TSH producing cells.

NOTE Confidence: 0.95304476625

 $00{:}07{:}31.840 \dashrightarrow 00{:}07{:}33.840$ So the precise mechanisms there

 $00:07:33.840 \longrightarrow 00:07:35.840$ really aren't quite so clear.

NOTE Confidence: 0.95304476625

 $00:07:35.840 \longrightarrow 00:07:37.380$ Likewise for thyroid disease.

NOTE Confidence: 0.95304476625

 $00:07:37.380 \longrightarrow 00:07:39.690$ I think it's still somewhat of

NOTE Confidence: 0.95304476625

 $00:07:39.758 \longrightarrow 00:07:42.185$ an unknown or a wide open area

NOTE Confidence: 0.95304476625

 $00{:}07{:}42.185 \dashrightarrow 00{:}07{:}44.565$ for investigation I should say to

NOTE Confidence: 0.95304476625

 $00:07:44.565 \longrightarrow 00:07:46.119$ understand the mechanisms.

NOTE Confidence: 0.95304476625

 $00:07:46.120 \longrightarrow 00:07:48.460$ But we focused our attention on

NOTE Confidence: 0.95304476625

 $00:07:48.460 \longrightarrow 00:07:50.020$ autoimmune diabetes and hopefully

NOTE Confidence: 0.95304476625

 $00:07:50.080 \longrightarrow 00:07:52.145$ have made some inroads into

NOTE Confidence: 0.95304476625

 $00{:}07{:}52.145 \dashrightarrow 00{:}07{:}53.797$ understanding the mechanisms here.

NOTE Confidence: 0.95304476625

 $00:07:53.800 \longrightarrow 00:07:55.400$ And our work began as,

NOTE Confidence: 0.95304476625

00:07:55.400 --> 00:07:57.157 as I I pointed out to Harriet,

NOTE Confidence: 0.95304476625

 $00{:}07{:}57.160 \dashrightarrow 00{:}08{:}00.360$ if you take a look at the date on this,

NOTE Confidence: 0.95304476625

 $00{:}08{:}00.360 \dashrightarrow 00{:}08{:}04.728$ this paper almost a decade ago

NOTE Confidence: 0.95304476625

 $00:08:04.728 \longrightarrow 00:08:07.775$ when the patient #1 here was

 $00:08:07.775 \longrightarrow 00:08:11.000$ referred to me by Doctor Kluger.

NOTE Confidence: 0.95304476625

 $00{:}08{:}11.000 \dashrightarrow 00{:}08{:}16.200$ And the IT was a woman with Melanoma

NOTE Confidence: 0.95304476625

 $00:08:16.200 \longrightarrow 00:08:20.760$ who have been treated with IPI and also

NOTE Confidence: 0.95304476625

 $00:08:20.760 \longrightarrow 00:08:23.928$ had gotten nivolumab at that point and

NOTE Confidence: 0.95304476625

 $00:08:23.928 \longrightarrow 00:08:26.040$ presented with diabetic ketoacidosis.

NOTE Confidence: 0.95304476625

00:08:26.040 --> 00:08:28.714 And you know this was quite striking.

NOTE Confidence: 0.95304476625

 $00:08:28.720 \longrightarrow 00:08:30.360$ This is someone who's 55.

NOTE Confidence: 0.95304476625

 $00:08:30.360 \longrightarrow 00:08:32.040$ And then subsequently there were a

NOTE Confidence: 0.95304476625

 $00:08:32.040 \longrightarrow 00:08:34.928$ number of other cases that came from

NOTE Confidence: 0.95304476625

00:08:34.928 --> 00:08:39.940 Yale of people over the age of 50 who

NOTE Confidence: 0.95304476625

 $00{:}08{:}39.940 \dashrightarrow 00{:}08{:}42.420$ were presenting with ketoacidosis

NOTE Confidence: 0.95304476625

 $00:08:42.420 \longrightarrow 00:08:45.096$ often and new onset hyperglycemia.

NOTE Confidence: 0.95304476625

 $00:08:45.096 \longrightarrow 00:08:48.691$ And this was kind of striking and

NOTE Confidence: 0.95304476625

00:08:48.691 --> 00:08:51.577 to me it was striking because you

NOTE Confidence: 0.95304476625

00:08:51.577 --> 00:08:54.331 know we hadn't seen it before the

NOTE Confidence: 0.95304476625

00:08:54.331 --> 00:08:57.936 the the anti PD one drugs were new

 $00:08:57.936 \longrightarrow 00:09:00.560$ at that time but we had had anti

NOTE Confidence: 0.821795666666667

 $00{:}09{:}00.640 \to 00{:}09{:}03.680$ CTLA 4 Ipilimab for a number of years.

NOTE Confidence: 0.821795666666667

 $00:09:03.680 \dashrightarrow 00:09:06.794$ And so that was kind of kind of striking.

NOTE Confidence: 0.821795666666667

 $00:09:06.800 \longrightarrow 00:09:09.056$ So we ended up putting these series together

NOTE Confidence: 0.821795666666667

 $00{:}09{:}09{:}056 \dashrightarrow 00{:}09{:}11.201$ and this I I know I mentioned this the

NOTE Confidence: 0.821795666666667

00:09:11.201 --> 00:09:13.607 last time I spoke but I I want to kind of

NOTE Confidence: 0.821795666666667

00:09:13.607 --> 00:09:16.440 bring this point up again particularly

NOTE Confidence: 0.821795666666667

 $00:09:16.440 \longrightarrow 00:09:20.904$ for the trainees who are here and and

NOTE Confidence: 0.821795666666667

 $00{:}09{:}20.904 \dashrightarrow 00{:}09{:}23.496$ the the data that we've subsequently

NOTE Confidence: 0.821795666666667

 $00:09:23.496 \longrightarrow 00:09:25.600$ had even makes the point even further.

NOTE Confidence: 0.8217956666666667

 $00:09:25.600 \longrightarrow 00:09:27.070$ So we we put this series

NOTE Confidence: 0.821795666666667

 $00:09:27.070 \longrightarrow 00:09:28.440$ together and we send it in,

NOTE Confidence: 0.821795666666667

 $00:09:28.440 \longrightarrow 00:09:30.462$ we send it into the endocrine

NOTE Confidence: 0.821795666666667

00:09:30.462 --> 00:09:31.473 journals for publication.

NOTE Confidence: 0.821795666666667

 $00:09:31.480 \longrightarrow 00:09:34.154$ And you know a lot of people,

 $00:09:34.160 \longrightarrow 00:09:35.798$ a lot of the journals or some

NOTE Confidence: 0.821795666666667

 $00{:}09{:}35.798 \dashrightarrow 00{:}09{:}37.250$ of the journals didn't weren't

NOTE Confidence: 0.821795666666667

 $00:09:37.250 \longrightarrow 00:09:38.638$ weren't interested in it.

NOTE Confidence: 0.821795666666667

 $00:09:38.640 \longrightarrow 00:09:40.744$ And then finally it goes to one of

NOTE Confidence: 0.821795666666667

 $00:09:40.744 \longrightarrow 00:09:42.252$ the leading endocrine journals and

NOTE Confidence: 0.821795666666667

 $00{:}09{:}42.252 \dashrightarrow 00{:}09{:}44.787$ it's sent out for review and we get

NOTE Confidence: 0.821795666666667

 $00{:}09{:}44.787 \dashrightarrow 00{:}09{:}46.694$ comments back from the review and

NOTE Confidence: 0.821795666666667

 $00:09:46.694 \longrightarrow 00:09:49.032$ and we did a very extensive job

NOTE Confidence: 0.8217956666666667

 $00{:}09{:}49.032 \dashrightarrow 00{:}09{:}51.200$ answering all the all the comments.

NOTE Confidence: 0.821795666666667

 $00:09:51.200 \longrightarrow 00:09:54.133$ There were 12 pages of of responses

NOTE Confidence: 0.821795666666667

 $00{:}09{:}54.133 \dashrightarrow 00{:}09{:}58.184$ and so we sent it back and and the

NOTE Confidence: 0.821795666666667

 $00:09:58.184 \longrightarrow 00:10:01.352$ reviewer comes back and says well

NOTE Confidence: 0.821795666666667

 $00:10:01.360 \longrightarrow 00:10:05.077$ if you know if this was really

NOTE Confidence: 0.821795666666667

00:10:05.077 --> 00:10:07.631 occurring the development of of

NOTE Confidence: 0.821795666666667

 $00:10:07.631 \longrightarrow 00:10:10.474$ diabetes after anti PD one we would

NOTE Confidence: 0.821795666666667

 $00:10:10.474 \longrightarrow 00:10:12.159$ have known about it already.

 $00:10:12.160 \longrightarrow 00:10:14.194$ So that that was the end of that journal.

NOTE Confidence: 0.821795666666667

 $00{:}10{:}14.200 \dashrightarrow 00{:}10{:}17.312$ So we ended up publishing this as a

NOTE Confidence: 0.821795666666667

 $00{:}10{:}17.312 \dashrightarrow 00{:}10{:}19.447$ letter actually in diabetes care and

NOTE Confidence: 0.821795666666667

 $00:10:19.447 \longrightarrow 00:10:22.440$ it is one of the most highly cited,

NOTE Confidence: 0.821795666666667

00:10:22.440 --> 00:10:24.960 certainly one of the most highly cited

NOTE Confidence: 0.821795666666667

 $00:10:24.960 \longrightarrow 00:10:27.308$ papers in diabetes care that that is

NOTE Confidence: 0.821795666666667

 $00:10:27.308 \longrightarrow 00:10:29.520$ the first description of anti PD1 antibodies.

NOTE Confidence: 0.821795666666667

 $00:10:29.520 \longrightarrow 00:10:31.207$ So the reason I wanted to mention

NOTE Confidence: 0.821795666666667

 $00{:}10{:}31.207 \dashrightarrow 00{:}10{:}33.157$ this story to you is as I'm going to,

NOTE Confidence: 0.821795666666667

 $00{:}10{:}33.160 \dashrightarrow 00{:}10{:}35.986$ as I'm going to show you later on that

NOTE Confidence: 0.8217956666666667

 $00:10:35.986 \longrightarrow 00:10:38.477$ not only was the reviewer wrong in

NOTE Confidence: 0.821795666666667

00:10:38.477 --> 00:10:41.560 saying that we would have known about it,

NOTE Confidence: 0.821795666666667

 $00{:}10{:}41.560 \dashrightarrow 00{:}10{:}43.260$ but mechanistically now we know

NOTE Confidence: 0.821795666666667

 $00:10:43.260 \longrightarrow 00:10:44.960$ why the reviewer was wrong.

NOTE Confidence: 0.821795666666667

00:10:44.960 --> 00:10:47.445 So that's kind of nice to know

00:10:47.445 --> 00:10:49.479 why your reviewer is so wrong.

NOTE Confidence: 0.8217956666666667 00:10:49.480 --> 00:10:50.232 So what? NOTE Confidence: 0.8217956666666667

 $00:10:50.232 \longrightarrow 00:10:51.360$ What what is,

NOTE Confidence: 0.821795666666667

 $00:10:51.360 \longrightarrow 00:10:53.160$ what are some of the features

NOTE Confidence: 0.8217956666666667

 $00:10:53.160 \longrightarrow 00:10:55.422$ of this form of of diabetes.

NOTE Confidence: 0.821795666666667

00:10:55.422 --> 00:10:56.838 So first of all,

NOTE Confidence: 0.821795666666667

 $00:10:56.840 \longrightarrow 00:10:59.400$ it happens relatively very acutely.

NOTE Confidence: 0.821795666666667

00:10:59.400 --> 00:11:00.716 Here's here's some data.

NOTE Confidence: 0.821795666666667

00:11:00.716 --> 00:11:02.690 This is coming from our colleagues

NOTE Confidence: 0.821795666666667

00:11:02.754 --> 00:11:04.494 at UCSF where we've put together

NOTE Confidence: 0.821795666666667

 $00{:}11{:}04.494 \dashrightarrow 00{:}11{:}05.985$ patients at the two institutions

NOTE Confidence: 0.821795666666667

 $00:11:05.985 \longrightarrow 00:11:08.397$ and you can see this here are a few

NOTE Confidence: 0.821795666666667

 $00:11:08.400 \longrightarrow 00:11:10.216$ patients who developed checkpoint

NOTE Confidence: 0.8217956666666667

00:11:10.216 --> 00:11:12.486 induced diabetes and their blood

NOTE Confidence: 0.821795666666667

00:11:12.486 --> 00:11:14.980 sugars are completely normal And then

NOTE Confidence: 0.821795666666667

 $00{:}11{:}14.980 \dashrightarrow 00{:}11{:}16.960$ dramatically there is a big spike

 $00:11:16.960 \longrightarrow 00:11:19.238$ in their in their glucose levels.

NOTE Confidence: 0.821795666666667

 $00{:}11{:}19.240 \dashrightarrow 00{:}11{:}21.298$ And the other thing that's that's

NOTE Confidence: 0.821795666666667

00:11:21.298 --> 00:11:23.318 quite interesting about that is if

NOTE Confidence: 0.821795666666667

00:11:23.318 --> 00:11:25.076 you look at their endogenous beta

NOTE Confidence: 0.821795666666667

00:11:25.076 --> 00:11:26.997 cell function by measuring C peptide,

NOTE Confidence: 0.821795666666667

00:11:27.000 --> 00:11:29.124 remember C peptide is cleaved from

NOTE Confidence: 0.821795666666667

 $00:11:29.124 \longrightarrow 00:11:31.256$ pro insulin when the beta cells

NOTE Confidence: 0.821795666666667

 $00{:}11{:}31.256 \dashrightarrow 00{:}11{:}33.510$ make insulin and it's a good measure

NOTE Confidence: 0.821795666666667

00:11:33.510 --> 00:11:35.272 of endogenous insulin production

NOTE Confidence: 0.821795666666667

 $00:11:35.272 \longrightarrow 00:11:38.014$ cause the insulin you inject doesn't

NOTE Confidence: 0.8217956666666667

00:11:38.014 --> 00:11:39.048 have C peptide.

NOTE Confidence: 0.821795666666667

 $00:11:39.048 \longrightarrow 00:11:42.360$ So if you take a look at the kinetics of

NOTE Confidence: 0.821795666666667

 $00{:}11{:}42.360 \dashrightarrow 00{:}11{:}46.320$ loss of C peptide here that it happens very,

NOTE Confidence: 0.821795666666667 00:11:46.320 --> 00:11:47.000 very quickly.

NOTE Confidence: 0.821795666666667

00:11:47.000 --> 00:11:49.696 In fact in one case it it happened

 $00:11:49.696 \longrightarrow 00:11:51.680$ while patients were following the

NOTE Confidence: 0.821795666666667

 $00:11:51.680 \longrightarrow 00:11:53.192$ the individual while investigators

NOTE Confidence: 0.821795666666667

 $00:11:53.192 \longrightarrow 00:11:55.460$ were following the individual in the

NOTE Confidence: 0.81665782

00:11:55.520 --> 00:11:58.285 hospital. And the other point about

NOTE Confidence: 0.81665782

 $00:11:58.285 \longrightarrow 00:12:00.999$ this is patients generally go to

NOTE Confidence: 0.81665782

 $00:12:00.999 \longrightarrow 00:12:03.727$ 0 or near 0 in other words levels

NOTE Confidence: 0.81665782

 $00{:}12{:}03.727 \dashrightarrow 00{:}12{:}06.479$ that are clinically insufficient.

NOTE Confidence: 0.81665782

 $00:12:06.480 \longrightarrow 00:12:08.594$ We'll come back to that later on.

NOTE Confidence: 0.81665782

 $00{:}12{:}08.600 \dashrightarrow 00{:}12{:}12.296$ Here's a few other bits of information

NOTE Confidence: 0.81665782

00:12:12.296 --> 00:12:14.704 about the demographics of patients,

NOTE Confidence: 0.81665782

 $00:12:14.704 \longrightarrow 00:12:17.392$ so you can see the age.

NOTE Confidence: 0.81665782

 $00:12:17.400 \longrightarrow 00:12:21.896$ These are people who are older than you

NOTE Confidence: 0.81665782

 $00:12:21.896 \longrightarrow 00:12:25.048$ might expect with presenting with diabetes.

NOTE Confidence: 0.81665782

 $00{:}12{:}25.048 {\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}} 00{:}12{:}27.528$ It generally occurs with anti

NOTE Confidence: 0.81665782

00:12:27.528 --> 00:12:29.720 PD ONE or anti PDL 1.

NOTE Confidence: 0.81665782

 $00:12:29.720 \longrightarrow 00:12:34.370$ The hemoglobin A1 CS are elevated at probably

 $00:12:34.370 \longrightarrow 00:12:37.280$ because of the degree of hyperglycemia.

NOTE Confidence: 0.81665782

 $00:12:37.280 \longrightarrow 00:12:39.872$ About half of the patients are OR and

NOTE Confidence: 0.81665782

 $00{:}12{:}39.872 \dashrightarrow 00{:}12{:}42.824$ depending on the review some even even

NOTE Confidence: 0.81665782

00:12:42.824 --> 00:12:45.695 higher percentage present with ketoacidosis.

NOTE Confidence: 0.81665782

 $00:12:45.695 \longrightarrow 00:12:48.720$ See peptide frequently Becomes undetectable.

NOTE Confidence: 0.81665782

 $00:12:48.720 \longrightarrow 00:12:51.608$ The median time is about 11 weeks and

NOTE Confidence: 0.81665782

 $00:12:51.608 \longrightarrow 00:12:53.849$ only about 40% of individuals are

NOTE Confidence: 0.81665782

 $00{:}12{:}53.849 \dashrightarrow 00{:}12{:}56.267$ positive for auto antibodies and this

NOTE Confidence: 0.81665782

 $00{:}12{:}56.267 \dashrightarrow 00{:}12{:}58.176$ brings up a a classification issue.

NOTE Confidence: 0.81665782

 $00:12:58.176 \longrightarrow 00:13:00.920$ Some people call this type one diabetes.

NOTE Confidence: 0.81665782

 $00:13:00.920 \longrightarrow 00:13:02.075$ As I'm going to explain to you,

NOTE Confidence: 0.81665782

 $00:13:02.080 \longrightarrow 00:13:04.000$ I don't think this is type one diabetes,

NOTE Confidence: 0.81665782

00:13:04.000 --> 00:13:05.760 it's autoimmune diabetes induced

NOTE Confidence: 0.81665782

 $00:13:05.760 \longrightarrow 00:13:07.080$ by checkpoint inhibitors,

NOTE Confidence: 0.81665782

 $00:13:07.080 \longrightarrow 00:13:10.680$ but it's very different from classic

00:13:10.680 --> 00:13:14.520 spontaneous type one diabetes.

NOTE Confidence: 0.81665782

 $00{:}13{:}14.520 \dashrightarrow 00{:}13{:}17.523$ Now there is a very large proportion

NOTE Confidence: 0.81665782

00:13:17.523 --> 00:13:19.969 of individuals who we don't talk

NOTE Confidence: 0.81665782

 $00:13:19.969 \longrightarrow 00:13:22.482$ about a lot who I think probably

NOTE Confidence: 0.81665782

 $00:13:22.562 \longrightarrow 00:13:24.278$ fall into this bucket,

NOTE Confidence: 0.81665782

00:13:24.280 --> 00:13:27.010 who are individuals who may have mild

NOTE Confidence: 0.81665782

 $00{:}13{:}27.010 \dashrightarrow 00{:}13{:}29.609$ type 2 diabetes who then present

NOTE Confidence: 0.81665782

 $00:13:29.609 \longrightarrow 00:13:32.303$ with much worsening of their glucose

NOTE Confidence: 0.81665782

 $00{:}13{:}32.303 \to 00{:}13{:}34.585$ control and may become may previously

NOTE Confidence: 0.81665782

 $00:13:34.585 \longrightarrow 00:13:36.864$ have been managed with oral anti

NOTE Confidence: 0.81665782

 $00{:}13{:}36.864 \dashrightarrow 00{:}13{:}39.733$ diabetic agents and now all of a

NOTE Confidence: 0.81665782

 $00{:}13{:}39.733 \dashrightarrow 00{:}13{:}41.629$ sudden may present ketoacidosis

NOTE Confidence: 0.81665782

00:13:41.629 --> 00:13:43.999 or may require insulin therapy.

NOTE Confidence: 0.81665782

 $00:13:44.000 \longrightarrow 00:13:47.159$ Now type 2 diabetes is a very common disease.

NOTE Confidence: 0.81665782

 $00:13:47.160 \longrightarrow 00:13:50.030$ So it may actually be that the

NOTE Confidence: 0.81665782

 $00{:}13{:}50.030 \dashrightarrow 00{:}13{:}52.848$ frequency of this disease is much

00:13:52.848 --> 00:13:56.304 higher than is even represented by the

NOTE Confidence: 0.81665782

 $00:13:56.304 \longrightarrow 00:13:59.348$ 0.2 to 1.9% from the past reviews.

NOTE Confidence: 0.81665782

00:13:59.348 --> 00:14:01.383 Now I mentioned not everybody

NOTE Confidence: 0.81665782

 $00:14:01.383 \longrightarrow 00:14:02.960$ has autoantibodies.

NOTE Confidence: 0.81665782

 $00:14:02.960 \longrightarrow 00:14:05.840$ Here's some examples of that.

NOTE Confidence: 0.81665782

00:14:05.840 --> 00:14:07.632 Some patients, if you take a look

NOTE Confidence: 0.81665782

 $00:14:07.632 \longrightarrow 00:14:09.158$ at three patients on the bottom,

NOTE Confidence: 0.81665782

00:14:09.160 --> 00:14:10.564 some start out negative.

NOTE Confidence: 0.81665782

 $00:14:10.564 \longrightarrow 00:14:13.064$ Each of those antibodies are one of

NOTE Confidence: 0.81665782

00:14:13.064 --> 00:14:15.056 the auto antibodies that we measure

NOTE Confidence: 0.81665782

 $00{:}14{:}15.056 \dashrightarrow 00{:}14{:}16.919$ in classic type one diabetes.

NOTE Confidence: 0.81665782

 $00:14:16.920 \longrightarrow 00:14:18.800$ You can see some patients start out negative,

NOTE Confidence: 0.81665782

 $00:14:18.800 \longrightarrow 00:14:19.816$ become positive,

NOTE Confidence: 0.81665782

00:14:19.816 --> 00:14:22.356 some patients start out positive,

NOTE Confidence: 0.81665782

00:14:22.360 --> 00:14:23.308 stay positive.

00:14:23.308 --> 00:14:26.739 So it varies about 40% overall are positive.

NOTE Confidence: 0.81665782

 $00:14:26.739 \longrightarrow 00:14:29.840$ But the frequency of those who are positive,

NOTE Confidence: 0.81665782

 $00:14:29.840 \longrightarrow 00:14:31.752$ sorry let me go back for two or

NOTE Confidence: 0.81665782

 $00:14:31.752 \longrightarrow 00:14:32.920$ more which is what we,

NOTE Confidence: 0.81665782

 $00:14:32.920 \longrightarrow 00:14:36.085$ which is kind of the hallmark of spontaneous

NOTE Confidence: 0.81665782

 $00{:}14{:}36.085 \dashrightarrow 00{:}14{:}39.955$ type one diabetes is relatively low.

NOTE Confidence: 0.81665782

 $00:14:39.960 \longrightarrow 00:14:42.420$ Now curiously the the alpha

NOTE Confidence: 0.81665782

00:14:42.420 --> 00:14:44.880 producing cells in the islet,

NOTE Confidence: 0.81665782

 $00:14:44.880 \longrightarrow 00:14:47.160$ remember the islet is a collection of cells,

NOTE Confidence: 0.81665782

 $00:14:47.160 \longrightarrow 00:14:47.748$ alpha cells,

NOTE Confidence: 0.81665782

00:14:47.748 --> 00:14:48.336 beta cells,

NOTE Confidence: 0.81665782

 $00:14:48.336 \longrightarrow 00:14:50.473$ delta cells and so on that make

NOTE Confidence: 0.81665782

 $00:14:50.473 \longrightarrow 00:14:51.717$ a variety of hormones.

NOTE Confidence: 0.81665782

00:14:51.720 --> 00:14:55.038 The loss of of endocrine cells,

NOTE Confidence: 0.81665782

 $00:14:55.040 \longrightarrow 00:14:58.116$ this seems to be limited to the beta cells.

NOTE Confidence: 0.81665782

 $00:14:58.116 \longrightarrow 00:14:59.970$ The alpha cells sitting right next

 $00{:}15{:}00.033 \dashrightarrow 00{:}15{:}02.112$ to the beta cells are unaffected and

NOTE Confidence: 0.81665782

 $00:15:02.112 \longrightarrow 00:15:04.117$ the reason for that is not clear.

NOTE Confidence: 0.81665782

00:15:04.120 --> 00:15:06.349 But as you can see from this data

NOTE Confidence: 0.81665782

 $00:15:06.349 \longrightarrow 00:15:09.352$ from patients that we we where we

NOTE Confidence: 0.81665782

 $00{:}15{:}09.352 \dashrightarrow 00{:}15{:}11.440$ measure Glucagon here didn't seem

NOTE Confidence: 0.81665782

 $00:15:11.440 \longrightarrow 00:15:15.019$ to make a difference in terms of

NOTE Confidence: 0.81665782

 $00:15:15.019 \longrightarrow 00:15:16.918$ their Glucagon levels.

NOTE Confidence: 0.81665782

00:15:16.920 --> 00:15:18.984 Now one of the early striking

NOTE Confidence: 0.81665782

 $00:15:18.984 \longrightarrow 00:15:20.360$ findings from our series

NOTE Confidence: 0.9349334425

 $00:15:20.424 \longrightarrow 00:15:23.007$ of patients was that a high proportion

NOTE Confidence: 0.9349334425

00:15:23.007 --> 00:15:25.696 of individuals were HLAD, R4. Now Dr.

NOTE Confidence: 0.9349334425

 $00:15:25.696 \longrightarrow 00:15:28.682$ three and four are associated with with

NOTE Confidence: 0.9349334425

 $00{:}15{:}28.682 \dashrightarrow 00{:}15{:}31.397$ classic spontaneous type one diabetes.

NOTE Confidence: 0.9349334425

 $00{:}15{:}31.400 \dashrightarrow 00{:}15{:}33.927$ But this proportion of of DR4 is

NOTE Confidence: 0.9349334425

00:15:33.927 --> 00:15:36.084 strikingly high and it's higher

00:15:36.084 --> 00:15:38.076 than the background population.

NOTE Confidence: 0.9349334425

 $00{:}15{:}38.080 \dashrightarrow 00{:}15{:}40.606$ And DR3, the other allele associated

NOTE Confidence: 0.9349334425

 $00:15:40.606 \longrightarrow 00:15:42.290$ with spontaneous diabetes was

NOTE Confidence: 0.9349334425

00:15:42.357 --> 00:15:44.077 not increased in frequency.

NOTE Confidence: 0.9349334425

 $00:15:44.080 \longrightarrow 00:15:46.336$ So DR4 somehow or another seems

NOTE Confidence: 0.9349334425

 $00:15:46.336 \longrightarrow 00:15:48.432$ to be important in predisposing

NOTE Confidence: 0.9349334425

 $00:15:48.432 \longrightarrow 00:15:51.760$ to the development of type of

NOTE Confidence: 0.9349334425

00:15:51.760 --> 00:15:54.320 of checkpoint induced diabetes.

NOTE Confidence: 0.9349334425

 $00:15:54.320 \longrightarrow 00:15:58.536$ And I want to point out this recent

NOTE Confidence: 0.9349334425

 $00:15:58.536 \longrightarrow 00:16:01.130$ observation that was originally made

NOTE Confidence: 0.9349334425

 $00{:}16{:}01.130 \dashrightarrow 00{:}16{:}04.520$ by Jasmine Caulfield and and Lilac

NOTE Confidence: 0.9349334425

 $00:16:04.520 \longrightarrow 00:16:09.240$ Eisenbud from our patients here.

NOTE Confidence: 0.9349334425

 $00:16:09.240 \longrightarrow 00:16:11.584$ And what was done is we were doing

NOTE Confidence: 0.9349334425

00:16:11.584 --> 00:16:15.616 a a genome sequencing of tumors and

NOTE Confidence: 0.9349334425

 $00:16:15.616 \longrightarrow 00:16:18.462$ identified a number of mutations in

NOTE Confidence: 0.9349334425

 $00:16:18.462 \longrightarrow 00:16:20.630$ a variety of genes that seem to be

 $00:16:20.688 \longrightarrow 00:16:22.482$ associated what seemed what seemed to

NOTE Confidence: 0.9349334425

 $00:16:22.482 \longrightarrow 00:16:25.052$ be at a higher frequency in people

NOTE Confidence: 0.9349334425

00:16:25.052 --> 00:16:26.796 with checkpoint induced diabetes.

NOTE Confidence: 0.9349334425

00:16:26.800 --> 00:16:29.888 And then we ended up going back and

NOTE Confidence: 0.9349334425

 $00:16:29.888 \longrightarrow 00:16:32.056$ doing sequencing of of peripheral

NOTE Confidence: 0.9349334425

 $00:16:32.056 \longrightarrow 00:16:34.642$ blood cells and finding that indeed

NOTE Confidence: 0.9349334425

 $00:16:34.642 \longrightarrow 00:16:36.452$ there were germline mutations that

NOTE Confidence: 0.9349334425

 $00:16:36.452 \longrightarrow 00:16:38.880$ seem to be associated with development

NOTE Confidence: 0.9349334425

 $00:16:38.880 \longrightarrow 00:16:40.720$ of checkpoint induced diabetes.

NOTE Confidence: 0.9349334425

00:16:40.720 --> 00:16:43.919 And interestingly the one of the the,

NOTE Confidence: 0.9349334425

 $00:16:43.920 \longrightarrow 00:16:46.350$ the highest frequency was in this

NOTE Confidence: 0.9349334425

 $00{:}16{:}46.350 \dashrightarrow 00{:}16{:}48.637$ molecule called NLRC 5 and you

NOTE Confidence: 0.9349334425

00:16:48.637 --> 00:16:50.716 can take a look on the right,

NOTE Confidence: 0.9349334425

 $00{:}16{:}50.720 \dashrightarrow 00{:}16{:}54.200$ the frequency of individuals with

NOTE Confidence: 0.9349334425

 $00:16:54.200 \longrightarrow 00:16:58.740$ NLRC 5 variants was in our series 65%.

00:16:58.740 --> 00:17:01.120 Now it's not a huge series because

NOTE Confidence: 0.9349334425

 $00:17:01.120 \longrightarrow 00:17:03.438$ we don't we don't have tons of

NOTE Confidence: 0.9349334425

 $00:17:03.438 \longrightarrow 00:17:05.640$ patients we had we had 13 here.

NOTE Confidence: 0.9349334425

 $00:17:05.640 \longrightarrow 00:17:07.817$ But you can see that at least

NOTE Confidence: 0.9349334425

 $00:17:07.817 \longrightarrow 00:17:09.000$ the statistically it it,

NOTE Confidence: 0.9349334425

00:17:09.000 --> 00:17:12.648 it turns out to be in a much higher

NOTE Confidence: 0.9349334425

 $00:17:12.648 \longrightarrow 00:17:15.208$ frequency compared to those individuals

NOTE Confidence: 0.9349334425

00:17:15.208 --> 00:17:16.998 without checkpoint induced diabetes

NOTE Confidence: 0.9349334425

 $00{:}17{:}16.998 \to 00{:}17{:}19.554$ who get the same checkpoint inhibitors.

NOTE Confidence: 0.9349334425

00:17:19.560 --> 00:17:23.354 Now what's the importance of NLRC 5?

NOTE Confidence: 0.9349334425

 $00{:}17{:}23.360 \dashrightarrow 00{:}17{:}28.162$ So NLRC 5 actually tends to is is is

NOTE Confidence: 0.9349334425

00:17:28.162 --> 00:17:30.780 evolved in a class one MHC antigen

NOTE Confidence: 0.9349334425

00:17:30.869 --> 00:17:32.000 presentation.

NOTE Confidence: 0.9349334425

 $00:17:32.000 \longrightarrow 00:17:34.079$ I'll tell you about that in just a moment.

NOTE Confidence: 0.9349334425

 $00:17:34.080 \longrightarrow 00:17:36.951$ But you can see that it seems to be

NOTE Confidence: 0.9349334425

 $00:17:36.951 \longrightarrow 00:17:41.732$ an important molecule involved in

 $00:17:41.732 \longrightarrow 00:17:46.016$ responses in in cancer patients that

NOTE Confidence: 0.9349334425

 $00{:}17{:}46.016 \mathrel{--}{>} 00{:}17{:}49.424$ that methylation of NLRC 5 reduced

NOTE Confidence: 0.9349334425

 $00:17:49.424 \longrightarrow 00:17:53.867$ NLRC 5 seems to be associated with

NOTE Confidence: 0.9349334425

00:17:53.867 --> 00:17:57.067 impaired CTL activity and clearing

NOTE Confidence: 0.9349334425

 $00:17:57.177 \longrightarrow 00:17:58.518$ of of tumors.

NOTE Confidence: 0.9349334425

 $00:17:58.520 \longrightarrow 00:18:00.962$ The its expression seems to be

NOTE Confidence: 0.9349334425

 $00:18:00.962 \longrightarrow 00:18:03.050$ correlated with survival and in

NOTE Confidence: 0.9349334425

 $00{:}18{:}03.050 \dashrightarrow 00{:}18{:}05.360$ diabetes it's also been a associated

NOTE Confidence: 0.9349334425

 $00:18:05.360 \longrightarrow 00:18:09.600$ with beta cell antigen presentation

NOTE Confidence: 0.9349334425

 $00{:}18{:}09.600 \dashrightarrow 00{:}18{:}11.920$ and and the interferon response.

NOTE Confidence: 0.9349334425

00:18:11.920 --> 00:18:13.720 So for example,

NOTE Confidence: 0.9349334425

 $00{:}18{:}13.720 \dashrightarrow 00{:}18{:}17.048$ the NLRC knocked down beta cells

NOTE Confidence: 0.9349334425

 $00:18:17.048 \longrightarrow 00:18:19.832$ seem to have a decreased interferon

NOTE Confidence: 0.9349334425

 $00{:}18{:}19.832 \dashrightarrow 00{:}18{:}22.238$ induced class one MHC expression

NOTE Confidence: 0.9349334425

 $00:18:22.240 \longrightarrow 00:18:26.344$ and seems to be associated with

 $00:18:26.344 \longrightarrow 00:18:29.080$ protection from autoimmune diabetes.

NOTE Confidence: 0.9349334425

 $00{:}18{:}29.080 \dashrightarrow 00{:}18{:}32.608$ So NLRC 5 is is a regulator of Class

NOTE Confidence: 0.9349334425

00:18:32.608 --> 00:18:35.346 1 dependent antigen presentation,

NOTE Confidence: 0.9349334425

 $00:18:35.346 \longrightarrow 00:18:40.720$ much the same as the classic Class 2

NOTE Confidence: 0.81096498125

 $00:18:42.960 \longrightarrow 00:18:46.220$ transactivator. It's responsible for

NOTE Confidence: 0.81096498125

 $00:18:46.220 \longrightarrow 00:18:50.228$ bringing peptides into the endosome

NOTE Confidence: 0.81096498125

 $00:18:50.228 \longrightarrow 00:18:54.716$ for processing and placing them on

NOTE Confidence: 0.81096498125

00:18:54.720 --> 00:18:57.840 developing class one MHC molecules.

NOTE Confidence: 0.81096498125

 $00:18:57.840 \longrightarrow 00:18:59.416$ It's expression seems to

NOTE Confidence: 0.81096498125

 $00:18:59.416 \longrightarrow 00:19:01.340$ be induced by interferons,

NOTE Confidence: 0.81096498125

00:19:01.340 --> 00:19:03.560 particularly interferon gamma

NOTE Confidence: 0.81096498125

00:19:03.560 --> 00:19:06.520 through Stat 1 signalling.

NOTE Confidence: 0.81096498125

 $00:19:06.520 \longrightarrow 00:19:08.848$ So this review actually

NOTE Confidence: 0.81096498125

 $00:19:08.848 \longrightarrow 00:19:10.594$ describes the mechanism.

NOTE Confidence: 0.81096498125

00:19:10.600 --> 00:19:12.994 I'm not going to go into detail about it,

NOTE Confidence: 0.81096498125

 $00:19:13.000 \longrightarrow 00:19:14.880$ but what we ended up doing and this

00:19:14.880 --> 00:19:16.719 is work that Anna Pertigato did,

NOTE Confidence: 0.81096498125

 $00:19:16.720 \longrightarrow 00:19:19.600$ we ended up looking at expression of TAP ONE,

NOTE Confidence: 0.81096498125

 $00:19:19.600 \longrightarrow 00:19:22.720$ which is an important transactivator

NOTE Confidence: 0.886076019166667

00:19:25.240 --> 00:19:28.042 that's associated with class one MHC

NOTE Confidence: 0.886076019166667

00:19:28.042 --> 00:19:31.443 expression as well as HLAA on peripheral

NOTE Confidence: 0.886076019166667

 $00:19:31.443 \longrightarrow 00:19:34.824$ blood cells in patients with the mutation

NOTE Confidence: 0.886076019166667

 $00:19:34.910 \longrightarrow 00:19:40.280$ or with wild type type of the NLRC 5.

NOTE Confidence: 0.886076019166667

 $00:19:40.280 \longrightarrow 00:19:43.457$ And as you can see and in patients with

NOTE Confidence: 0.886076019166667

 $00:19:43.457 \longrightarrow 00:19:46.671$ the mutant there seems to be higher

NOTE Confidence: 0.886076019166667

 $00:19:46.671 \longrightarrow 00:19:50.048$ expression of TAP one and actually of HLAA

NOTE Confidence: 0.886076019166667

 $00:19:50.048 \longrightarrow 00:19:52.220$ although we haven't reached statistical

NOTE Confidence: 0.886076019166667

 $00:19:52.220 \dashrightarrow 00:19:54.920$ significance for the HLA molecule.

NOTE Confidence: 0.886076019166667

 $00{:}19{:}54.920 {\:{\circ}{\circ}{\circ}}>00{:}19{:}58.385$ So it it suggests at least that there is

NOTE Confidence: 0.886076019166667

 $00:19:58.385 \longrightarrow 00:20:02.362$ some change in expression of MHC molecules

NOTE Confidence: 0.886076019166667

 $00:20:02.362 \longrightarrow 00:20:05.332$ or potentially presentation of peptides

 $00:20:05.332 \longrightarrow 00:20:08.638$ by individuals who have this mutant.

NOTE Confidence: 0.886076019166667

00:20:08.640 --> 00:20:10.398 So to summarize these two points,

NOTE Confidence: 0.886076019166667

 $00:20:10.400 \longrightarrow 00:20:13.856$ the there seems to be evidence

NOTE Confidence: 0.886076019166667

 $00:20:13.856 \longrightarrow 00:20:16.480$ for mutations or differences.

NOTE Confidence: 0.886076019166667

 $00{:}20{:}16.480 \dashrightarrow 00{:}20{:}18.944$ In class one and Class 2 MHC molecules

NOTE Confidence: 0.886076019166667

 $00:20:18.944 \longrightarrow 00:20:21.654$ that that are associated with development

NOTE Confidence: 0.886076019166667

 $00:20:21.654 \longrightarrow 00:20:23.678$ of checkpoint induced diabetes.

NOTE Confidence: 0.886076019166667

 $00{:}20{:}23.680 \dashrightarrow 00{:}20{:}26.996$ First of all HLAD R4 is common and

NOTE Confidence: 0.886076019166667

 $00:20:26.996 \longrightarrow 00:20:29.132$ perhaps that leads to the development

NOTE Confidence: 0.886076019166667

00:20:29.132 --> 00:20:31.920 of an auto autoreactive repertoire.

NOTE Confidence: 0.886076019166667

 $00:20:31.920 \longrightarrow 00:20:35.082$ This NLRC 5 mutation also seems

NOTE Confidence: 0.886076019166667

 $00:20:35.082 \longrightarrow 00:20:38.637$ to have some role in potentially

NOTE Confidence: 0.886076019166667

 $00:20:38.637 \longrightarrow 00:20:41.205$ in expression of molecules.

NOTE Confidence: 0.886076019166667

00:20:41.205 --> 00:20:44.595 A presentation of molecules by beta

NOTE Confidence: 0.886076019166667

00:20:44.595 --> 00:20:48.225 cells or even potentially in affecting

NOTE Confidence: 0.886076019166667

 $00{:}20{:}48.225 \dashrightarrow 00{:}20{:}51.514$ a subgroup of CDA positive T cells have

 $00:20:51.514 \longrightarrow 00:20:53.920$ been associated with immune regulation.

NOTE Confidence: 0.8729991115

 $00:20:56.120 \longrightarrow 00:20:58.983$ Now the let me just raise some

NOTE Confidence: 0.8729991115

 $00:20:58.983 \longrightarrow 00:21:01.456$ questions about these these two points

NOTE Confidence: 0.8729991115

 $00:21:01.456 \longrightarrow 00:21:04.158$ by make by by pointing this out.

NOTE Confidence: 0.8729991115

 $00:21:04.160 \longrightarrow 00:21:07.022$ When we've looked at auto antigen

NOTE Confidence: 0.8729991115

 $00:21:07.022 \longrightarrow 00:21:09.614$ reactive T cells in patients

NOTE Confidence: 0.8729991115

00:21:09.614 --> 00:21:12.099 with checkpoint induced diabetes,

NOTE Confidence: 0.8729991115

 $00:21:12.099 \longrightarrow 00:21:14.842$ we've looked for auto antigen

NOTE Confidence: 0.8729991115

00:21:14.842 --> 00:21:17.368 reactive T cells that are reactive

NOTE Confidence: 0.8729991115

 $00:21:17.368 \longrightarrow 00:21:19.480$ to conventional type one diabetes.

NOTE Confidence: 0.8729991115

00:21:19.480 --> 00:21:20.290 Auto antigens,

NOTE Confidence: 0.8729991115

 $00:21:20.290 \longrightarrow 00:21:22.720$ we don't really find an increase.

NOTE Confidence: 0.8729991115

 $00:21:22.720 \longrightarrow 00:21:24.560$ So if you take a look at that,

NOTE Confidence: 0.8729991115

 $00:21:24.560 \longrightarrow 00:21:27.339$ we've looked at T cells that are

NOTE Confidence: 0.8729991115

 $00:21:27.339 \longrightarrow 00:21:30.099$ identified by binding to class one MHC

 $00:21:30.099 \longrightarrow 00:21:32.343$ tetramers that are loaded with the

NOTE Confidence: 0.8729991115

 $00:21:32.426 \longrightarrow 00:21:35.434$ peptides that are shown on the left side.

NOTE Confidence: 0.8729991115

00:21:35.440 --> 00:21:37.631 If you look at the frequency of

NOTE Confidence: 0.8729991115

 $00:21:37.631 \longrightarrow 00:21:39.599$ these cells on the right side

NOTE Confidence: 0.8729991115

 $00:21:39.600 \longrightarrow 00:21:41.656$ and the individuals treated

NOTE Confidence: 0.8729991115

00:21:41.656 --> 00:21:43.198 with checkpoint inhibitors,

NOTE Confidence: 0.8729991115

 $00:21:43.200 \longrightarrow 00:21:45.034$ those who don't have diabetes or do,

NOTE Confidence: 0.8729991115

 $00:21:45.040 \longrightarrow 00:21:46.388$ there's really no difference.

NOTE Confidence: 0.8729991115

 $00{:}21{:}46.388 \dashrightarrow 00{:}21{:}49.000$ So it at least would suggest that the,

NOTE Confidence: 0.8729991115

 $00:21:49.000 \longrightarrow 00:21:53.106$ the known auto antigens or recognition

NOTE Confidence: 0.8729991115

 $00{:}21{:}53.106 \dashrightarrow 00{:}21{:}55.857$ of the known auto antigens is not

NOTE Confidence: 0.8729991115

 $00:21:55.857 \longrightarrow 00:21:58.141$ really increased or at least the

NOTE Confidence: 0.8729991115

 $00:21:58.141 \longrightarrow 00:22:00.680$ frequency of cells is not increased

NOTE Confidence: 0.8729991115

 $00:22:00.680 \longrightarrow 00:22:02.680$ in those individuals who are

NOTE Confidence: 0.8729991115

00:22:02.680 --> 00:22:03.880 developing checkpoint inhibitors.

NOTE Confidence: 0.8729991115

 $00{:}22{:}03.880 \dashrightarrow 00{:}22{:}05.840$ Let me just you know sort of say

 $00:22:05.840 \longrightarrow 00:22:08.318$ as a preface to this data the the,

NOTE Confidence: 0.8729991115

 $00:22:08.320 \longrightarrow 00:22:11.120$ the low hanging fruit on this was well,

NOTE Confidence: 0.8729991115

 $00:22:11.120 \longrightarrow 00:22:13.085$ these individuals had an autoreactive

NOTE Confidence: 0.8729991115

 $00:22:13.085 \longrightarrow 00:22:14.680$ repertoire. They had Dr.

NOTE Confidence: 0.8729991115

 $00:22:14.680 \longrightarrow 00:22:17.080$ Four, we removed the checkpoint blockade.

NOTE Confidence: 0.8729991115

00:22:17.080 --> 00:22:18.880 These cells just did their thing,

NOTE Confidence: 0.8729991115

 $00:22:18.880 \longrightarrow 00:22:19.765$ don't think so.

NOTE Confidence: 0.8729991115

 $00:22:19.765 \longrightarrow 00:22:22.227$ It could be that there are cells that

NOTE Confidence: 0.8729991115

00:22:22.227 --> 00:22:24.219 are reactive to unknown auto antigens

NOTE Confidence: 0.8729991115

00:22:24.219 --> 00:22:26.876 and as I'll show you in just a moment,

NOTE Confidence: 0.8729991115

 $00:22:26.880 \longrightarrow 00:22:29.490$ there is some evidence that that

NOTE Confidence: 0.8729991115

 $00:22:29.490 \longrightarrow 00:22:32.500$ might be true, but that's not all.

NOTE Confidence: 0.8729991115

 $00:22:32.500 \longrightarrow 00:22:35.050$ There are also there's also evidence

NOTE Confidence: 0.8729991115

 $00{:}22{:}35.128 \to 00{:}22{:}37.036$ of inflammatory lesions that or

NOTE Confidence: 0.8729991115

 $00:22:37.036 \longrightarrow 00:22:38.353$ inflammation that's occurring

 $00:22:38.353 \longrightarrow 00:22:41.246$ in the pancreas that may be very

NOTE Confidence: 0.8729991115

00:22:41.246 --> 00:22:42.762 important for development of

NOTE Confidence: 0.8729991115

 $00{:}22{:}42.762 \dashrightarrow 00{:}22{:}44.120$ checkpoint induced diabetes.

NOTE Confidence: 0.8729991115

00:22:44.120 --> 00:22:47.907 And this actually came from from

NOTE Confidence: 0.8729991115

 $00:22:47.907 \longrightarrow 00:22:50.242$ actually a clinical observation from

NOTE Confidence: 0.8729991115

 $00:22:50.242 \longrightarrow 00:22:53.287$ patients here in which we found that

NOTE Confidence: 0.8729991115

00:22:53.287 --> 00:22:55.842 there was an increase in amylase and

NOTE Confidence: 0.8729991115

00:22:55.921 --> 00:22:57.744 lipase in individuals who ultimately

NOTE Confidence: 0.8729991115

 $00:22:57.744 \longrightarrow 00:22:59.474$ went on to develop diabetes.

NOTE Confidence: 0.8729991115

 $00:22:59.480 \longrightarrow 00:23:02.480$ They don't develop clinical pancreatitis.

NOTE Confidence: 0.8729991115

 $00:23:02.480 \longrightarrow 00:23:05.378$ But here we're looking at the amylase

NOTE Confidence: 0.8729991115

 $00:23:05.378 \longrightarrow 00:23:07.915$ and lipase level on one individual

NOTE Confidence: 0.8729991115

 $00:23:07.915 \longrightarrow 00:23:09.816$ who is who develops checkpoint

NOTE Confidence: 0.8729991115

00:23:09.816 --> 00:23:12.404 induced diabetes and you can see the

NOTE Confidence: 0.8729991115

00:23:12.404 --> 00:23:14.357 lipase on the left bumps and then

NOTE Confidence: 0.8729991115

00:23:14.357 --> 00:23:16.475 red is when they developed diabetes

00:23:16.475 --> 00:23:19.080 and the amylase bumps and then red

NOTE Confidence: 0.8729991115

 $00:23:19.080 \longrightarrow 00:23:20.880$ is when they developed diabetes.

NOTE Confidence: 0.8729991115

00:23:20.880 --> 00:23:25.598 If you look at our entire series

NOTE Confidence: 0.8729991115

 $00:23:25.600 \longrightarrow 00:23:28.205$ and look at the relative levels

NOTE Confidence: 0.8729991115

00:23:28.205 --> 00:23:30.635 of lipacer amylase on the bottom,

NOTE Confidence: 0.8729991115

 $00:23:30.640 \longrightarrow 00:23:33.188$ you can see that the that

NOTE Confidence: 0.8729991115

 $00:23:33.188 \longrightarrow 00:23:35.499$ both are elevated prior to the

NOTE Confidence: 0.8729991115

 $00:23:35.499 \longrightarrow 00:23:37.410$ development of of diabetes.

NOTE Confidence: 0.8729991115

 $00{:}23{:}37.410 \longrightarrow 00{:}23{:}39.335$ Now interestingly it prompted us

NOTE Confidence: 0.8729991115

 $00{:}23{:}39.335 \dashrightarrow 00{:}23{:}42.300$ to look at what well like what's

NOTE Confidence: 0.8729991115

 $00:23:42.300 \longrightarrow 00:23:44.475$ actually happening in the pancreas.

NOTE Confidence: 0.8729991115

 $00:23:44.480 \longrightarrow 00:23:48.490$ They were not symptomatic and so we

NOTE Confidence: 0.8729991115

 $00{:}23{:}48.490 \dashrightarrow 00{:}23{:}51.080$ ended up looking at CT scans that

NOTE Confidence: 0.8729991115

 $00:23:51.080 \longrightarrow 00:23:54.740$ for tunately we had from before and

NOTE Confidence: 0.8729991115

 $00:23:54.740 \longrightarrow 00:23:57.106$ after individuals presented with diabetes.

 $00:23:57.106 \longrightarrow 00:24:00.355$ And what we found if you take a look

NOTE Confidence: 0.8729991115

 $00:24:00.355 \longrightarrow 00:24:03.176$ at the CTS and on the on the top here

NOTE Confidence: 0.8729991115

 $00:24:03.176 \longrightarrow 00:24:06.232$ is the the red arrow identifies the pancreas.

NOTE Confidence: 0.8729991115

 $00:24:06.240 \longrightarrow 00:24:08.816$ The there actually seem to be shrinkage

NOTE Confidence: 0.8729991115

 $00:24:08.816 \longrightarrow 00:24:11.816$ of the pancreas in individuals who went

NOTE Confidence: 0.8729991115

 $00:24:11.816 \longrightarrow 00:24:14.632$ on to develop checkpoint induced diabetes.

NOTE Confidence: 0.8729991115

 $00:24:14.632 \longrightarrow 00:24:17.880$ So it's suggested that there is more

NOTE Confidence: 0.85453898866666

00:24:17.957 --> 00:24:20.456 than just a direct attack on beta

NOTE Confidence: 0.85453898866666

 $00{:}24{:}20.456 \dashrightarrow 00{:}24{:}22.606$ cells that there may actually be

NOTE Confidence: 0.85453898866666

00:24:22.606 --> 00:24:24.951 a broader attack in a a broader

NOTE Confidence: 0.854538988666666

 $00{:}24{:}24.960 \dashrightarrow 00{:}24{:}27.880$ inflammatory response in the pancreas.

NOTE Confidence: 0.854538988666666

00:24:27.880 --> 00:24:31.066 And unfortunately one of our patients

NOTE Confidence: 0.85453898866666

 $00:24:31.066 \longrightarrow 00:24:33.706$ died as soon after they had developed

NOTE Confidence: 0.854538988666666

00:24:33.706 --> 00:24:34.759 checkpoint induced diabetes.

NOTE Confidence: 0.85453898866666

 $00:24:34.760 \longrightarrow 00:24:36.856$ But we had the opportunity to take a

NOTE Confidence: 0.85453898866666

 $00{:}24{:}36.856 \dashrightarrow 00{:}24{:}38.872$ look at their pancreas by immunohistic

 $00:24:38.872 \longrightarrow 00:24:41.440$ chemistry and this is what we found.

NOTE Confidence: 0.854538988666666

 $00:24:41.440 \longrightarrow 00:24:43.302$ You can see that there are plenty

NOTE Confidence: 0.85453898866666

00:24:43.302 --> 00:24:45.797 of CD 45 positive immune cells that

NOTE Confidence: 0.85453898866666

 $00:24:45.797 \longrightarrow 00:24:47.837$ are infiltrating the islets and

NOTE Confidence: 0.85453898866666

 $00:24:47.840 \longrightarrow 00:24:49.600$ that are infiltrating the pancreas.

NOTE Confidence: 0.85453898866666

 $00:24:49.600 \longrightarrow 00:24:51.796$ They are not just in the islets and in

NOTE Confidence: 0.85453898866666

00:24:51.796 --> 00:24:54.318 fact many of them are outside of the islets,

NOTE Confidence: 0.85453898866666

 $00:24:54.320 \longrightarrow 00:24:55.976$ as you can see by standing

NOTE Confidence: 0.85453898866666

 $00:24:55.976 \longrightarrow 00:24:57.520$ for insulin on the right.

NOTE Confidence: 0.85453898866666

 $00:24:57.520 \longrightarrow 00:25:00.052$ And there are both CD4 and

NOTE Confidence: 0.85453898866666

 $00:25:00.052 \longrightarrow 00:25:01.318$ CD8 positive cells.

NOTE Confidence: 0.85453898866666

 $00:25:01.320 \longrightarrow 00:25:05.400$ Chromagranin identifies the endocrine cells.

NOTE Confidence: 0.85453898866666

 $00{:}25{:}05.400 \dashrightarrow 00{:}25{:}06.936$ They're infiltrating the islets

NOTE Confidence: 0.85453898866666

 $00:25:06.936 \longrightarrow 00:25:09.240$ and they're outside of the islets.

NOTE Confidence: 0.85453898866666

 $00:25:09.240 \longrightarrow 00:25:12.425$ And if you look at cytokines that

 $00:25:12.425 \longrightarrow 00:25:15.119$ are present in the pancreas,

NOTE Confidence: 0.85453898866666

 $00:25:15.120 \longrightarrow 00:25:18.879$ we find both interferon gamma and TNF.

NOTE Confidence: 0.854538988666666

 $00:25:18.880 \longrightarrow 00:25:19.986$ And interestingly,

NOTE Confidence: 0.85453898866666

 $00:25:19.986 \longrightarrow 00:25:24.417$ one of the other findings from this

NOTE Confidence: 0.85453898866666

 $00:25:24.417 \longrightarrow 00:25:27.373$ immunohistochemical analysis is PDL

NOTE Confidence: 0.85453898866666

 $00:25:27.373 \longrightarrow 00:25:31.200$ one was actually induced on beta

NOTE Confidence: 0.85453898866666

 $00:25:31.200 \longrightarrow 00:25:34.075$ cells in and on the other endocrine

NOTE Confidence: 0.85453898866666

 $00{:}25{:}34.075 \dashrightarrow 00{:}25{:}36.511$ cells in this patient who died

NOTE Confidence: 0.85453898866666

 $00:25:36.511 \longrightarrow 00:25:38.916$ with a checkpoint induced diabetes.

NOTE Confidence: 0.85453898866666

 $00:25:38.920 \longrightarrow 00:25:40.840$ Now that's a little weird.

NOTE Confidence: 0.85453898866666

 $00:25:40.840 \longrightarrow 00:25:44.445$ We thought that PDL one was actually

NOTE Confidence: 0.854538988666666

 $00:25:44.445 \longrightarrow 00:25:46.050$ protective against diabetes.

NOTE Confidence: 0.85453898866666

 $00:25:46.050 \longrightarrow 00:25:49.320$ So what what's going on here?

NOTE Confidence: 0.854538988666666

 $00:25:49.320 \longrightarrow 00:25:52.209$ So let me just make the point and again

NOTE Confidence: 0.85453898866666

00:25:52.209 --> 00:25:54.950 this is work that Anna Pertigato has

NOTE Confidence: 0.85453898866666

00:25:54.950 --> 00:25:57.162 done that indeed inflammatory mediators,

00:25:57.162 --> 00:25:58.725 particularly gamma interferon

NOTE Confidence: 0.854538988666666

00:25:58.725 --> 00:26:02.159 will induce PDL One on beta cells.

NOTE Confidence: 0.85453898866666

 $00:26:02.160 \longrightarrow 00:26:04.285$ There is a interferon response

NOTE Confidence: 0.85453898866666

00:26:04.285 --> 00:26:06.789 element in the promoter of PDL

NOTE Confidence: 0.85453898866666

00:26:06.789 --> 00:26:09.229 one and as you can see by looking

NOTE Confidence: 0.85453898866666

 $00:26:09.229 \longrightarrow 00:26:11.480$ but by flow interferon gamma.

NOTE Confidence: 0.85453898866666

 $00:26:11.480 \longrightarrow 00:26:13.320$ This is human beta cells.

NOTE Confidence: 0.85453898866666

 $00:26:13.320 \longrightarrow 00:26:16.546$ Interferon gamma and interferon

NOTE Confidence: 0.85453898866666

 $00:26:16.546 \longrightarrow 00:26:19.102$ gamma with TNF induce expression of

NOTE Confidence: 0.85453898866666

 $00{:}26{:}19.102 \dashrightarrow 00{:}26{:}22.591$ PDL one on beta cells and it seems

NOTE Confidence: 0.85453898866666

00:26:22.591 --> 00:26:24.721 to be dependent through signaling

NOTE Confidence: 0.85453898866666

 $00:26:24.801 \longrightarrow 00:26:27.303$ by gamma interferon because if you

NOTE Confidence: 0.85453898866666

 $00{:}26{:}27.303 \dashrightarrow 00{:}26{:}31.696$ give rexolitinib to block Jack

NOTE Confidence: 0.85453898866666

00:26:31.696 --> 00:26:34.160 signaling through Stat One,

NOTE Confidence: 0.85453898866666

 $00:26:34.160 \longrightarrow 00:26:38.880$ you can inhibit the expression of PDL one.

 $00:26:38.880 \longrightarrow 00:26:41.974$ Now there was good evidence for the

NOTE Confidence: 0.85453898866666

 $00{:}26{:}41.974 \dashrightarrow 00{:}26{:}45.255$ importance of PDL 1 in development of

NOTE Confidence: 0.854538988666666

 $00:26:45.255 \longrightarrow 00:26:48.057$ autoimmune diabetes and most of this

NOTE Confidence: 0.854538988666666

 $00:26:48.145 \longrightarrow 00:26:51.397$ work came originally from Arlene Sharp.

NOTE Confidence: 0.85453898866666

 $00:26:51.400 \longrightarrow 00:26:54.848$ And the the work that I'm I'm showing

NOTE Confidence: 0.854538988666666

 $00:26:54.848 \longrightarrow 00:26:58.558$ on the left is from a paper of hers

NOTE Confidence: 0.85453898866666

 $00:26:58.560 \longrightarrow 00:27:00.779$ a number of actually 20 years ago

NOTE Confidence: 0.854538988666666

 $00:27:00.779 \longrightarrow 00:27:03.098$ now that showed if you knock PDL one

NOTE Confidence: 0.85453898866666

 $00{:}27{:}03.098 \dashrightarrow 00{:}27{:}06.360$ out of this susceptible mouse strain

NOTE Confidence: 0.85453898866666

00:27:06.360 --> 00:27:08.676 NOD that the mice spontaneously

NOTE Confidence: 0.854538988666666

 $00{:}27{:}08.676 \longrightarrow 00{:}27{:}11.600$ developed diabetes at a very young age.

NOTE Confidence: 0.854538988666666

 $00:27:11.600 \longrightarrow 00:27:14.935$ And the Histology is shown in

NOTE Confidence: 0.85453898866666

 $00:27:14.935 \longrightarrow 00:27:15.760$ the middle here.

NOTE Confidence: 0.85453898866666

 $00:27:15.760 \longrightarrow 00:27:16.202$ Furthermore,

NOTE Confidence: 0.85453898866666

00:27:16.202 --> 00:27:19.296 if you gave anti CD3 antibody to

NOTE Confidence: 0.85453898866666

 $00:27:19.296 \longrightarrow 00:27:21.981$ mice that spontaneously developed

 $00:27:21.981 \longrightarrow 00:27:24.265$ diabetes and induced remission

NOTE Confidence: 0.854538988666666

 $00:27:24.265 \longrightarrow 00:27:26.640$ with the anti CD3 antibody,

NOTE Confidence: 0.85453898866666

00:27:26.640 --> 00:27:30.360 if you gave anti PD one or anti PDL one,

NOTE Confidence: 0.85453898866666

 $00:27:30.360 \longrightarrow 00:27:32.034$ this is work by Jeff Bluestone

NOTE Confidence: 0.854538988666666

00:27:32.034 --> 00:27:34.078 and Brian Fife On the right side,

NOTE Confidence: 0.85453898866666

 $00:27:34.080 \longrightarrow 00:27:37.240$ the mice immediately redeveloped diabetes.

NOTE Confidence: 0.85453898866666

 $00:27:37.240 \longrightarrow 00:27:40.516$ So this work suggested that PDL one

NOTE Confidence: 0.85453898866666

 $00:27:40.516 \longrightarrow 00:27:43.798$ had a critical role in maintaining

NOTE Confidence: 0.85453898866666

 $00:27:43.800 \longrightarrow 00:27:45.850$ non development of diabetes in

NOTE Confidence: 0.85453898866666

 $00:27:45.850 \longrightarrow 00:27:47.080$ a susceptible host.

NOTE Confidence: 0.85453898866666

00:27:47.080 --> 00:27:50.090 And here are some additional studies

NOTE Confidence: 0.85453898866666

 $00:27:50.090 \longrightarrow 00:27:52.860$ from Arlene's lab that showed

NOTE Confidence: 0.85453898866666

 $00:27:52.860 \longrightarrow 00:27:54.600$ if you took wild type cells,

NOTE Confidence: 0.85453898866666

 $00{:}27{:}54.600 \dashrightarrow 00{:}27{:}56.750$ transferred them into APDL 1

NOTE Confidence: 0.85453898866666

 $00:27:56.750 \longrightarrow 00:27:58.900$ knockout or a wild type

 $00:27:58.985 \longrightarrow 00:28:02.135$ host if you put them into the

NOTE Confidence: 0.865200372631579

 $00{:}28{:}02.135 \dashrightarrow 00{:}28{:}03.676$ knock out recipient, which is on

NOTE Confidence: 0.865200372631579

 $00:28:03.676 \longrightarrow 00:28:05.160$ the left side in the open circles,

NOTE Confidence: 0.865200372631579

 $00:28:05.160 \longrightarrow 00:28:06.960$ mice rapidly developed diabetes whereas

NOTE Confidence: 0.865200372631579

 $00:28:06.960 \longrightarrow 00:28:09.678$ they didn't at the same rate if you

NOTE Confidence: 0.865200372631579

 $00{:}28{:}09.678 \dashrightarrow 00{:}28{:}11.680$ put them into the wild type recipient.

NOTE Confidence: 0.865200372631579

 $00:28:11.680 \longrightarrow 00:28:13.948$ And it also was shown in her

NOTE Confidence: 0.865200372631579

 $00:28:13.948 \longrightarrow 00:28:16.214$ work that the importance of PDL

NOTE Confidence: 0.865200372631579

 $00:28:16.214 \longrightarrow 00:28:18.632$ One was indeed on the islets.

NOTE Confidence: 0.865200372631579

 $00{:}28{:}18.640 \dashrightarrow 00{:}28{:}21.790$ Because if she transplanted PDL 1

NOTE Confidence: 0.865200372631579

 $00{:}28{:}21.790 \dashrightarrow 00{:}28{:}24.484$ deficient beta cells into either

NOTE Confidence: 0.865200372631579

00:28:24.484 --> 00:28:26.760 wild type or knockout mice,

NOTE Confidence: 0.865200372631579

 $00:28:26.760 \longrightarrow 00:28:29.000$ which is shown on the on the right,

NOTE Confidence: 0.865200372631579

 $00:28:29.000 \longrightarrow 00:28:32.892$ the PDL 1 knockout islets were more

NOTE Confidence: 0.865200372631579

 $00:28:32.892 \longrightarrow 00:28:37.520$ rapidly killed compared to wild type eyelids.

NOTE Confidence: 0.865200372631579

 $00:28:37.520 \longrightarrow 00:28:40.160$ So PDL one seems to have some unique

 $00:28:42.960 \longrightarrow 00:28:45.735$ features that's important in in

NOTE Confidence: 0.89180748

 $00{:}28{:}45.735 \dashrightarrow 00{:}28{:}47.955$ protecting against autoimmune diabetes.

NOTE Confidence: 0.89180748

 $00:28:47.960 \longrightarrow 00:28:51.142$ Now we did some additional studies

NOTE Confidence: 0.89180748

00:28:51.142 --> 00:28:53.914 look comparing anti PDL one and

NOTE Confidence: 0.89180748

00:28:53.914 --> 00:28:57.395 anti CTE 4 because let me go back

NOTE Confidence: 0.89180748

 $00{:}28{:}57.395 \dashrightarrow 00{:}29{:}00.257$ to that paper in that that letter

NOTE Confidence: 0.89180748

 $00:29:00.257 \longrightarrow 00:29:03.190$ in 2015 and and the comments from

NOTE Confidence: 0.89180748

 $00:29:03.274 \longrightarrow 00:29:05.039$ the reviewer that pointed out,

NOTE Confidence: 0.89180748

 $00:29:05.039 \longrightarrow 00:29:06.557$ well if this was really important

NOTE Confidence: 0.89180748

00:29:06.557 --> 00:29:08.080 we would have known about it.

NOTE Confidence: 0.89180748

 $00{:}29{:}08.080 \dashrightarrow 00{:}29{:}10.774$ Well that reviewer was completely wrong

NOTE Confidence: 0.89180748

00:29:10.774 --> 00:29:13.089 because indeed the only checkpoint

NOTE Confidence: 0.89180748

 $00:29:13.089 \longrightarrow 00:29:15.299$ inhibitor that was available prior

NOTE Confidence: 0.89180748

 $00:29:15.299 \longrightarrow 00:29:17.999$ to that time was anti CTLA 4.

NOTE Confidence: 0.89180748

 $00:29:18.000 \longrightarrow 00:29:20.184$ And if you take a look at the

 $00:29:20.184 \longrightarrow 00:29:22.380$ mouse data here and this has been

NOTE Confidence: 0.89180748

 $00:29:22.380 \longrightarrow 00:29:23.680$ reproduced in other labs,

NOTE Confidence: 0.89180748

00:29:23.680 --> 00:29:26.935 anti CTLA 4 doesn't do this seems

NOTE Confidence: 0.89180748

 $00:29:26.935 \longrightarrow 00:29:29.957$ to be unique for anti PDL 1.

NOTE Confidence: 0.89180748

 $00:29:29.960 \longrightarrow 00:29:32.888$ And so we did some studies to to

NOTE Confidence: 0.89180748

 $00:29:32.888 \longrightarrow 00:29:35.910$ try to identify what's different

NOTE Confidence: 0.89180748

00:29:35.910 --> 00:29:40.792 about anti PDL one and anti CTLA 4IN

NOTE Confidence: 0.89180748

00:29:40.792 --> 00:29:44.474 induction of diabetes and I'm going to

NOTE Confidence: 0.89180748

 $00:29:44.474 \longrightarrow 00:29:46.273$ go through the data fairly quickly.

NOTE Confidence: 0.89180748

 $00:29:46.280 \longrightarrow 00:29:50.224$ We did this by performing single cell

NOTE Confidence: 0.89180748

 $00:29:50.224 \longrightarrow 00:29:56.280$ RNA seq on infiltrating cells and

NOTE Confidence: 0.89180748

 $00:29:56.280 \longrightarrow 00:29:59.717$ islet cells from mice that had received

NOTE Confidence: 0.89180748

 $00:29:59.720 \longrightarrow 00:30:02.040$ either of these checkpoint inhibitors.

NOTE Confidence: 0.89180748

 $00:30:02.040 \longrightarrow 00:30:05.181$ And let me first point out that in the

NOTE Confidence: 0.89180748

 $00:30:05.181 \longrightarrow 00:30:07.571$ presence that when when these susceptible

NOTE Confidence: 0.89180748

00:30:07.571 --> 00:30:10.690 mice and OD mice are given anti C24,

 $00:30:10.690 \longrightarrow 00:30:13.000$ there are cells that infiltrate the islets.

NOTE Confidence: 0.89180748

 $00:30:13.000 \dashrightarrow 00:30:15.800$ It's not that they don't develop insulitis,

NOTE Confidence: 0.89180748

 $00:30:15.800 \longrightarrow 00:30:17.956$ it's just that they don't develop diabetes.

NOTE Confidence: 0.89180748

00:30:17.960 --> 00:30:19.880 They don't go on and kill,

NOTE Confidence: 0.89180748

 $00:30:19.880 \longrightarrow 00:30:21.340$ kill the beta cells.

NOTE Confidence: 0.89180748

00:30:21.340 --> 00:30:22.800 So first of all,

NOTE Confidence: 0.89180748

 $00:30:22.800 \longrightarrow 00:30:25.820$ when we look at and when we look at immune

NOTE Confidence: 0.89180748

 $00{:}30{:}25.820 \dashrightarrow 00{:}30{:}27.920$ cells that are infiltrating the islets,

NOTE Confidence: 0.89180748

 $00{:}30{:}27.920 \dashrightarrow 00{:}30{:}29.754$ you can see there is a difference.

NOTE Confidence: 0.89180748

 $00:30:29.760 \longrightarrow 00:30:32.140$ If you take a look at panel

NOTE Confidence: 0.89180748

 $00{:}30{:}32.140 --> 00{:}30{:}34.148$ D in the MELD analysis,

NOTE Confidence: 0.89180748

 $00{:}30{:}34.148 \dashrightarrow 00{:}30{:}36.420$ there's a difference in CDAT cells

NOTE Confidence: 0.89180748

 $00:30:36.420 \longrightarrow 00:30:38.460$ that are infiltrating the islets when

NOTE Confidence: 0.89180748

 $00:30:38.460 \longrightarrow 00:30:40.722$ the when the mice are treated with

NOTE Confidence: 0.89180748

 $00:30:40.722 \longrightarrow 00:30:43.079$ anti PDL 1 compared to anti cetal A4.

 $00:30:43.080 \longrightarrow 00:30:45.608$ And there are a number of genes that

NOTE Confidence: 0.89180748

 $00:30:45.608 \longrightarrow 00:30:47.010$ are differentially expressed including

NOTE Confidence: 0.89180748

00:30:47.010 --> 00:30:49.700 some of the the ones that you might

NOTE Confidence: 0.89180748

00:30:49.700 --> 00:30:53.910 expect such as as Tea Bed Interferon,

NOTE Confidence: 0.89180748

 $00:30:53.910 \longrightarrow 00:30:57.118$ Gamma Granzyme B and even PDL one

NOTE Confidence: 0.89180748

 $00:30:57.118 \longrightarrow 00:31:00.040$ as as we would have predicted,

NOTE Confidence: 0.89180748

 $00:31:00.040 \longrightarrow 00:31:03.215$ as well as Perfran and the volcano

NOTE Confidence: 0.89180748

00:31:03.215 --> 00:31:05.090 plot showing you the differences

NOTE Confidence: 0.89180748

 $00{:}31{:}05.090 \dashrightarrow 00{:}31{:}07.640$ in expression in the CDA T cells

NOTE Confidence: 0.89180748

 $00:31:07.640 \longrightarrow 00:31:09.640$ as shown in the bottom.

NOTE Confidence: 0.89180748

 $00{:}31{:}09.640 \dashrightarrow 00{:}31{:}11.392$ Now what about the cells that

NOTE Confidence: 0.89180748

 $00:31:11.392 \longrightarrow 00:31:12.560$ are infiltrating the eyelids?

NOTE Confidence: 0.89180748

 $00:31:12.560 \longrightarrow 00:31:15.556$ Are they the same? Maybe they're different.

NOTE Confidence: 0.89180748

 $00:31:15.560 \longrightarrow 00:31:18.160$ And this is the data that we have to date.

NOTE Confidence: 0.89180748

00:31:18.160 --> 00:31:20.800 And fortunately I can't go into

NOTE Confidence: 0.89180748

 $00:31:20.800 \longrightarrow 00:31:23.251$ this and more with more granularity

 $00:31:23.251 \longrightarrow 00:31:25.513$ except to point out that yes,

NOTE Confidence: 0.89180748

 $00:31:25.520 \longrightarrow 00:31:26.450$ they are different.

NOTE Confidence: 0.89180748

 $00:31:26.450 \longrightarrow 00:31:28.971$ They are not the same cells that are

NOTE Confidence: 0.89180748

 $00:31:28.971 \longrightarrow 00:31:30.973$ being driven to the eyelids in when

NOTE Confidence: 0.89180748

 $00:31:30.973 \longrightarrow 00:31:33.758$ with the two different checkpoint inhibitors.

NOTE Confidence: 0.89180748

 $00:31:33.760 \longrightarrow 00:31:36.112$ If you just take a look at the

NOTE Confidence: 0.89180748

00:31:36.112 --> 00:31:37.465 frequency of various clonotypes

NOTE Confidence: 0.89180748

 $00{:}31{:}37.465 \dashrightarrow 00{:}31{:}40.249$ you can see with anti PDL one in

NOTE Confidence: 0.89180748

 $00:31:40.326 \longrightarrow 00:31:42.720$ mice that that do develop diabetes,

NOTE Confidence: 0.89180748

 $00{:}31{:}42.720 \dashrightarrow 00{:}31{:}46.626$ there seems to be a relative selection

NOTE Confidence: 0.89180748

 $00{:}31{:}46.626 \dashrightarrow 00{:}31{:}48.831$ of particular clonotypes compared

NOTE Confidence: 0.89180748

 $00:31:48.831 \longrightarrow 00:31:52.920$ to the anti C2E4 treated mice.

NOTE Confidence: 0.89180748

 $00{:}31{:}52.920 {\:{\mbox{--}}\!>}\ 00{:}31{:}56.016$ Now macrophages also seem to be

NOTE Confidence: 0.89180748

 $00:31:56.016 \longrightarrow 00:31:58.512$ different for reasons that we

NOTE Confidence: 0.89180748

00:31:58.512 --> 00:32:00.240 we don't completely understand.

 $00:32:00.240 \longrightarrow 00:32:04.200$ But you can see that they they express

NOTE Confidence: 0.712054261428571

 $00:32:06.280 \longrightarrow 00:32:09.234$ PDL one, they themselves express PDL one.

NOTE Confidence: 0.712054261428571

 $00:32:09.240 \longrightarrow 00:32:12.376$ They produce CXCL 10, which is important

NOTE Confidence: 0.712054261428571

 $00:32:12.376 \longrightarrow 00:32:14.839$ in recruiting cells to the islets,

NOTE Confidence: 0.712054261428571

 $00:32:14.840 \longrightarrow 00:32:17.822$ as well as Stat 1 indicating they've

NOTE Confidence: 0.712054261428571

00:32:17.822 --> 00:32:20.680 they've been looking at interferon gamma.

NOTE Confidence: 0.712054261428571

 $00:32:20.680 \longrightarrow 00:32:23.040$ And this is interesting because

NOTE Confidence: 0.712054261428571

 $00{:}32{:}23.040 \dashrightarrow 00{:}32{:}25.572$ work from Emil Yunanoway's lab had

NOTE Confidence: 0.712054261428571

 $00{:}32{:}25.572 \dashrightarrow 00{:}32{:}28.159$ actually pointed out that these cells

NOTE Confidence: 0.712054261428571

00:32:28.159 --> 00:32:30.637 seem to be the critically important

NOTE Confidence: 0.712054261428571

 $00{:}32{:}30.640 \dashrightarrow 00{:}32{:}33.040$ cells for initiating checkpoint

NOTE Confidence: 0.712054261428571

 $00:32:33.040 \longrightarrow 00:32:35.878$ induced diabetes in in this model.

NOTE Confidence: 0.9614282

 $00{:}32{:}38.040 \dashrightarrow 00{:}32{:}41.948$ Now in addition there are there

NOTE Confidence: 0.9614282

 $00{:}32{:}41.948 \dashrightarrow 00{:}32{:}44.036$ there are changes in beta cells.

NOTE Confidence: 0.9614282

 $00:32:44.040 \longrightarrow 00:32:46.490$ I showed you already in humans that

NOTE Confidence: 0.9614282

 $00:32:46.490 \longrightarrow 00:32:49.015$ that we found that there was induction

 $00{:}32{:}49.015 \dashrightarrow 00{:}32{:}52.129$ of PDL one in human beta cells that

NOTE Confidence: 0.9614282

 $00:32:52.129 \longrightarrow 00:32:54.474$ were treated with interferon gamma.

NOTE Confidence: 0.9614282

 $00:32:54.480 \longrightarrow 00:32:56.562$ And indeed if we looked at

NOTE Confidence: 0.9614282

 $00:32:56.562 \longrightarrow 00:32:57.950$ genes that are differentially

NOTE Confidence: 0.9614282

 $00:32:58.015 \longrightarrow 00:32:59.999$ expressed with interferon gamma,

NOTE Confidence: 0.9614282

 $00:33:00.000 \longrightarrow 00:33:02.079$ you can see that there are a

NOTE Confidence: 0.9614282

 $00:33:02.079 \longrightarrow 00:33:04.531$ whole lot of genes that have

NOTE Confidence: 0.9614282

 $00:33:04.531 \longrightarrow 00:33:06.515$ some immune response properties.

NOTE Confidence: 0.9614282

 $00:33:06.520 \longrightarrow 00:33:08.548$ Now the reason that we think

NOTE Confidence: 0.9614282

 $00{:}33{:}08.548 \dashrightarrow 00{:}33{:}10.520$ this is important is because

NOTE Confidence: 0.9614282

 $00{:}33{:}10.520 \dashrightarrow 00{:}33{:}12.700$ seeing inflammatory when beta

NOTE Confidence: 0.9614282

00:33:12.700 --> 00:33:14.880 cells see inflammatory cytokines,

NOTE Confidence: 0.9614282

 $00{:}33{:}14.880 \dashrightarrow 00{:}33{:}18.120$ they make a number of important

NOTE Confidence: 0.9614282

 $00:33:18.120 \longrightarrow 00:33:21.080$ immune ligands such as CXCL 9,

NOTE Confidence: 0.9614282

00:33:21.080 --> 00:33:24.320 CXCL 10 important for recruiting

 $00:33:24.320 \longrightarrow 00:33:28.696$ cells to the islets and as well as

NOTE Confidence: 0.9614282

 $00{:}33{:}28.696 \dashrightarrow 00{:}33{:}31.160$ increase expression of of class one.

NOTE Confidence: 0.9614282

 $00{:}33{:}31.160 \dashrightarrow 00{:}33{:}35.052$ MHC when we looked at this again

NOTE Confidence: 0.9614282

 $00:33:35.052 \longrightarrow 00:33:36.356$ is with human cells.

NOTE Confidence: 0.9614282

 $00:33:36.360 \longrightarrow 00:33:38.985$ When we looked at other features of

NOTE Confidence: 0.9614282

 $00:33:38.985 \longrightarrow 00:33:41.518$ human islets exposed to gamma interferon,

NOTE Confidence: 0.9614282

 $00:33:41.520 \longrightarrow 00:33:43.250$ we found that actually there

NOTE Confidence: 0.9614282

 $00:33:43.250 \longrightarrow 00:33:45.188$ was induction of FAS suggesting

NOTE Confidence: 0.9614282

 $00{:}33{:}45.188 \dashrightarrow 00{:}33{:}47.928$ that indeed that cytokine might

NOTE Confidence: 0.9614282

 $00:33:47.928 \longrightarrow 00:33:50.880$ induce a killing of beta cells.

NOTE Confidence: 0.9614282

 $00{:}33{:}50.880 \dashrightarrow 00{:}33{:}54.504$ And if you take a look at impanel

NOTE Confidence: 0.9614282

 $00:33:54.504 \longrightarrow 00:33:57.800$ E you you can see that in the PDL

NOTE Confidence: 0.9614282

 $00:33:57.800 \longrightarrow 00:34:00.644$ 1 expressing cells we we find

NOTE Confidence: 0.9614282

 $00{:}34{:}00.644 \dashrightarrow 00{:}34{:}02.726$ this morphology suggesting the cells

NOTE Confidence: 0.9614282

 $00:34:02.726 \longrightarrow 00:34:04.874$ are are are actually dying.

NOTE Confidence: 0.9614282

 $00:34:04.880 \longrightarrow 00:34:08.120$ And indeed if if we look at at

 $00:34:08.120 \longrightarrow 00:34:10.640$ the percentage of dead beta cells

NOTE Confidence: 0.9614282

 $00{:}34{:}10.640 \dashrightarrow 00{:}34{:}13.520$ in panel D it is much higher with

NOTE Confidence: 0.9614282

 $00:34:13.520 \longrightarrow 00:34:16.002$ cells that are cultured with

NOTE Confidence: 0.9614282

00:34:16.002 --> 00:34:18.576 interferon gamma back to the mice.

NOTE Confidence: 0.9614282

 $00:34:18.576 \longrightarrow 00:34:21.215$ Now when we look at beta cells

NOTE Confidence: 0.9614282

 $00:34:21.215 \longrightarrow 00:34:23.478$ in the mice in site two,

NOTE Confidence: 0.9614282

 $00:34:23.478 \longrightarrow 00:34:26.257$ there are a number of differences in

NOTE Confidence: 0.9614282

 $00:34:26.257 \longrightarrow 00:34:28.999$ in in them including the development

NOTE Confidence: 0.9614282

 $00{:}34{:}28.999 \dashrightarrow 00{:}34{:}32.797$ of a unique subgroup of of beta cells.

NOTE Confidence: 0.9614282

 $00:34:32.800 \longrightarrow 00:34:36.280$ If you take a look at panel C,

NOTE Confidence: 0.9614282

 $00:34:36.280 \longrightarrow 00:34:37.260$ the fate,

NOTE Confidence: 0.9614282

00:34:37.260 --> 00:34:40.200 the fate diagram here shows you

NOTE Confidence: 0.9614282

 $00:34:40.200 \longrightarrow 00:34:42.520$ 2 populations of beta cells.

NOTE Confidence: 0.9614282

 $00:34:42.520 \longrightarrow 00:34:44.458$ The the standard beta cells

NOTE Confidence: 0.9614282

00:34:44.458 --> 00:34:46.746 that you can see in mice treated

00:34:46.746 --> 00:34:49.307 with anti cetal E4 or anti PDL one

NOTE Confidence: 0.9614282

 $00{:}34{:}49.307 \dashrightarrow 00{:}34{:}51.302$ and then this unique a cluster

NOTE Confidence: 0.9614282

 $00:34:51.302 \longrightarrow 00:34:53.759$ of beta cells that seems to be

NOTE Confidence: 0.9614282

00:34:53.759 --> 00:34:55.758 uniquely found in anti PDL one.

NOTE Confidence: 0.9614282

 $00:34:55.760 \longrightarrow 00:34:58.336$ The main beta cells express the same

NOTE Confidence: 0.9614282

 $00{:}34{:}58.336 \dashrightarrow 00{:}35{:}01.520$ log in so they just showed you with

NOTE Confidence: 0.9614282

00:35:01.520 --> 00:35:04.240 human beta cells CXCL 10 PDL one.

NOTE Confidence: 0.9614282

 $00:35:04.240 \longrightarrow 00:35:06.214$ Class one MHC goes up stat

NOTE Confidence: 0.9614282

00:35:06.214 --> 00:35:08.440 one is signaling and trail is

NOTE Confidence: 0.9614282

 $00:35:08.440 \longrightarrow 00:35:10.120$ actually increased as well.

NOTE Confidence: 0.9614282

 $00:35:10.120 \longrightarrow 00:35:12.495$ But in the unique beta

NOTE Confidence: 0.9614282

 $00{:}35{:}12.495 \dashrightarrow 00{:}35{:}14.395$ cells there's also changes,

NOTE Confidence: 0.9614282

 $00:35:14.400 \longrightarrow 00:35:15.921$ including reduced expression

NOTE Confidence: 0.9614282

 $00:35:15.921 \longrightarrow 00:35:19.470$ of a number of the beta cell

NOTE Confidence: 0.9614282

 $00:35:19.562 \longrightarrow 00:35:23.060$ identity genes such as NTX 6.1,

NOTE Confidence: 0.9614282

 $00:35:23.060 \longrightarrow 00:35:25.106$ Maffe of course,

 $00:35:25.106 \longrightarrow 00:35:27.636$ insulin and and chromogram.

NOTE Confidence: 0.9614282

 $00:35:27.640 \longrightarrow 00:35:29.168$ So it's what this,

NOTE Confidence: 0.9614282

00:35:29.168 --> 00:35:31.460 what this finding suggests is work

NOTE Confidence: 0.9614282

 $00:35:31.532 \longrightarrow 00:35:33.866$ that we've done in other models

NOTE Confidence: 0.9614282

 $00:35:33.866 \longrightarrow 00:35:36.000$ of diabetes that there is some

NOTE Confidence: 0.927789400833333

 $00:35:38.560 \longrightarrow 00:35:41.493$ pathway leading to beta cell survival in

NOTE Confidence: 0.927789400833333

 $00:35:41.493 \longrightarrow 00:35:44.400$ the presence of checkpoint inhibitors

NOTE Confidence: 0.927789400833333

 $00{:}35{:}44.400 \dashrightarrow 00{:}35{:}48.272$ that that seems to be turned on when

NOTE Confidence: 0.927789400833333

00:35:48.272 --> 00:35:51.260 these drugs are given. All right.

NOTE Confidence: 0.927789400833333

 $00:35:51.260 \longrightarrow 00:35:54.444$ So that's that's kind of where things are

NOTE Confidence: 0.927789400833333

00:35:54.444 --> 00:35:56.760 in terms of what's going on in the islet,

NOTE Confidence: 0.927789400833333

 $00{:}35{:}56.760 \dashrightarrow 00{:}36{:}00.072$ what how human beta cells respond

NOTE Confidence: 0.927789400833333

 $00{:}36{:}00.072 \dashrightarrow 00{:}36{:}02.280$ similarly to inflammatory mediators.

NOTE Confidence: 0.927789400833333

 $00:36:02.280 \longrightarrow 00:36:04.278$ So what what is, what is,

NOTE Confidence: 0.927789400833333

00:36:04.280 --> 00:36:06.794 what's the point of that and

 $00:36:06.794 \longrightarrow 00:36:07.958$ what can we do about it.

NOTE Confidence: 0.927789400833333

 $00{:}36{:}07.960 \dashrightarrow 00{:}36{:}13.725$ So let me point out that in follow

NOTE Confidence: 0.927789400833333

 $00:36:13.725 \longrightarrow 00:36:16.781$ up work that that we did to try to

NOTE Confidence: 0.927789400833333

 $00:36:16.781 \longrightarrow 00:36:18.790$ figure out could we based on this

NOTE Confidence: 0.927789400833333

 $00:36:18.859 \longrightarrow 00:36:20.927$ knowledge stop the development

NOTE Confidence: 0.927789400833333

 $00:36:20.927 \longrightarrow 00:36:22.995$ of checkpoint induced diabetes.

NOTE Confidence: 0.927789400833333

 $00:36:23.000 \longrightarrow 00:36:25.634$ We first tested whether anti cytokine

NOTE Confidence: 0.927789400833333

 $00:36:25.634 \longrightarrow 00:36:28.238$ antibodies might be able to do that.

NOTE Confidence: 0.927789400833333

 $00:36:28.240 \longrightarrow 00:36:30.826$ And I've shown you already the

NOTE Confidence: 0.927789400833333

 $00:36:30.826 \longrightarrow 00:36:33.457$ critical role of interferon gamma and

NOTE Confidence: 0.927789400833333

 $00{:}36{:}33.457 \dashrightarrow 00{:}36{:}35.742$ potentially TNF in development of

NOTE Confidence: 0.927789400833333

 $00:36:35.742 \longrightarrow 00:36:37.975$ checkpoint induced diabetes at least

NOTE Confidence: 0.927789400833333

 $00:36:37.975 \longrightarrow 00:36:40.278$ in mice and evidence in humans that

NOTE Confidence: 0.927789400833333

 $00:36:40.278 \longrightarrow 00:36:42.653$ both of these cytokines were present

NOTE Confidence: 0.927789400833333

 $00:36:42.653 \longrightarrow 00:36:45.486$ in the pancreas of an individual who

NOTE Confidence: 0.927789400833333

 $00:36:45.486 \longrightarrow 00:36:47.316$ died with checkpoint induced diabetes.

 $00:36:47.320 \longrightarrow 00:36:49.630$ What happens if you neutralize

NOTE Confidence: 0.927789400833333

 $00:36:49.630 \longrightarrow 00:36:50.554$ those cytokines?

NOTE Confidence: 0.927789400833333

00:36:50.560 --> 00:36:53.660 And you can see in the on the top here

NOTE Confidence: 0.927789400833333

00:36:53.742 --> 00:36:57.168 that if you gave the combination of

NOTE Confidence: 0.927789400833333

 $00:36:57.168 \longrightarrow 00:37:00.464$ anti PDL interferon gamma and anti TNF

NOTE Confidence: 0.927789400833333

00:37:00.464 --> 00:37:03.400 to mice treated with anti PDL one,

NOTE Confidence: 0.927789400833333

 $00:37:03.400 \longrightarrow 00:37:06.034$ you could indeed prevent the development

NOTE Confidence: 0.927789400833333

 $00:37:06.034 \longrightarrow 00:37:08.598$ of checkpoint induced diabetes in the mice.

NOTE Confidence: 0.927789400833333

 $00:37:08.600 \longrightarrow 00:37:09.021$ Furthermore,

NOTE Confidence: 0.927789400833333

 $00:37:09.021 \dashrightarrow 00:37:11.968$ if you blocked a little further downstream

NOTE Confidence: 0.927789400833333

00:37:11.968 --> 00:37:14.920 with a Jack inhibitor and this is,

NOTE Confidence: 0.927789400833333

00:37:14.920 --> 00:37:17.000 I'm sorry, this says Jack inhibitor 1,

NOTE Confidence: 0.927789400833333

 $00{:}37{:}17.000 \dashrightarrow 00{:}37{:}18.962$ Jack inhibitor 2 and I should

NOTE Confidence: 0.927789400833333

 $00{:}37{:}18.962 \longrightarrow 00{:}37{:}21.289$ just mention this is an ongoing

NOTE Confidence: 0.927789400833333

 $00:37:21.289 \longrightarrow 00:37:23.506$ collaboration with folks at Pfizer

 $00:37:23.506 \longrightarrow 00:37:26.038$ and with two new Jack inhibitors,

NOTE Confidence: 0.927789400833333

 $00:37:26.040 \dashrightarrow 00:37:27.741$ The identities of which we don't know

NOTE Confidence: 0.927789400833333

00:37:27.741 --> 00:37:29.360 except we know they're different.

NOTE Confidence: 0.927789400833333

00:37:29.360 --> 00:37:31.968 But as you can see Jack inhibitor 1

NOTE Confidence: 0.927789400833333

00:37:31.968 --> 00:37:34.600 looks pretty good in terms of developing,

NOTE Confidence: 0.927789400833333

00:37:34.600 --> 00:37:37.616 preventing the development of

NOTE Confidence: 0.927789400833333

00:37:37.616 --> 00:37:39.878 checkpoint induced diabetes.

NOTE Confidence: 0.927789400833333

 $00:37:39.880 \longrightarrow 00:37:42.106$ So to summarize what I've just told

NOTE Confidence: 0.927789400833333

 $00:37:42.106 \longrightarrow 00:37:44.769$ you then what we think is there's

NOTE Confidence: 0.927789400833333

00:37:44.769 --> 00:37:46.814 actually an inflammatory cycle that's

NOTE Confidence: 0.927789400833333

 $00{:}37{:}46.814 \dashrightarrow 00{:}37{:}49.325$ going on between immune cells and beta

NOTE Confidence: 0.927789400833333

 $00:37:49.325 \longrightarrow 00:37:51.580$ cells that leads to the development

NOTE Confidence: 0.927789400833333

 $00:37:51.580 \longrightarrow 00:37:54.280$ of of a checkpoint induced diabetes

NOTE Confidence: 0.927789400833333

 $00:37:54.280 \longrightarrow 00:37:56.679$ in response to interferon gamma.

NOTE Confidence: 0.927789400833333

00:37:56.680 --> 00:37:59.753 Beta cells in turn make a number

NOTE Confidence: 0.927789400833333

00:37:59.753 --> 00:38:01.738 of immune regulatory molecules

 $00:38:01.738 \longrightarrow 00:38:04.638$ that recruit other immune cells,

NOTE Confidence: 0.927789400833333

 $00:38:04.640 \dashrightarrow 00:38:08.780$ activate immune cells leads to increased

NOTE Confidence: 0.927789400833333

 $00:38:08.780 \longrightarrow 00:38:11.536$ production of inflammatory cytokines

NOTE Confidence: 0.927789400833333

 $00:38:11.536 \longrightarrow 00:38:13.600$ particularly interferon gamma.

NOTE Confidence: 0.927789400833333

 $00:38:13.600 \dashrightarrow 00:38:16.274$ It leads to expression of PDL one.

NOTE Confidence: 0.927789400833333

 $00:38:16.280 \longrightarrow 00:38:20.088$ When you block PDL 1 you seem to

NOTE Confidence: 0.927789400833333

 $00:38:20.088 \longrightarrow 00:38:23.670$ block the stop signal in immune cells

NOTE Confidence: 0.927789400833333

 $00{:}38{:}23.670 \dashrightarrow 00{:}38{:}26.420$ that otherwise would would cause

NOTE Confidence: 0.927789400833333

 $00:38:26.518 \longrightarrow 00:38:28.920$ them to leave the eyelid and and

NOTE Confidence: 0.927789400833333

 $00{:}38{:}28.920 \dashrightarrow 00{:}38{:}31.415$ the immune cells then are there in

NOTE Confidence: 0.927789400833333

 $00:38:31.415 \longrightarrow 00:38:33.732$ the eyelid and capable of going on

NOTE Confidence: 0.927789400833333

 $00:38:33.732 \longrightarrow 00:38:36.106$ and killing the insulin producing

NOTE Confidence: 0.927789400833333

 $00{:}38{:}36.106 \dashrightarrow 00{:}38{:}39.558$ cells so and and killing beta cells.

NOTE Confidence: 0.927789400833333 00:38:39.560 --> 00:38:40.565 So what is, NOTE Confidence: 0.927789400833333

 $00:38:40.565 \longrightarrow 00:38:43.294$ is there anything we can take home from

00:38:43.294 --> 00:38:45.484 this in terms of treating patients?

NOTE Confidence: 0.927789400833333

 $00:38:45.484 \longrightarrow 00:38:48.858$ And let me just start by mentioning

NOTE Confidence: 0.927789400833333

 $00:38:48.858 \longrightarrow 00:38:53.324$ this patient that was again another

NOTE Confidence: 0.927789400833333

 $00:38:53.324 \longrightarrow 00:38:57.234$ another letter in diabetes care

NOTE Confidence: 0.927789400833333

 $00:38:57.240 \longrightarrow 00:39:00.320$ that was treated in Switzerland.

NOTE Confidence: 0.927789400833333

00:39:00.320 --> 00:39:02.378 This is a patient who had presented

NOTE Confidence: 0.927789400833333

 $00:39:02.378 \longrightarrow 00:39:04.587$ with type 2 diabetes and let me go

NOTE Confidence: 0.927789400833333

 $00{:}39{:}04.587 \dashrightarrow 00{:}39{:}06.720$ back to a point I made earlier.

NOTE Confidence: 0.927789400833333

 $00:39:06.720 \longrightarrow 00:39:08.813$ Type 2 diabetes is a common disease

NOTE Confidence: 0.927789400833333

 $00:39:08.813 \longrightarrow 00:39:11.277$ and so it follows that there are

NOTE Confidence: 0.927789400833333

 $00:39{:}11.277 \dashrightarrow 00{:}39{:}13.515$ patients who are going to develop

NOTE Confidence: 0.878915246296296

00:39:13.582 --> 00:39:15.862 checkpoint induced diabetes who already

NOTE Confidence: 0.878915246296296

 $00:39:15.862 \longrightarrow 00:39:18.624$ may have pre-existing type 2 diabetes.

NOTE Confidence: 0.878915246296296

00:39:18.624 --> 00:39:21.390 And that's the explanation I'm going

NOTE Confidence: 0.878915246296296

 $00:39:21.464 \longrightarrow 00:39:24.032$ to give you for for this this case

NOTE Confidence: 0.878915246296296

 $00{:}39{:}24.032 \dashrightarrow 00{:}39{:}26.384$ report that appeared in the literature.

 $00:39:26.384 \longrightarrow 00:39:29.240$ So this is an individual with pre

NOTE Confidence: 0.878915246296296

 $00:39:29.240 \dashrightarrow 00:39:32.380$ pre-existing type 2 diabetes had

NOTE Confidence: 0.878915246296296

 $00:39:32.380 \longrightarrow 00:39:34.592$ much worsening glucose control.

NOTE Confidence: 0.878915246296296

 $00:39:34.592 \longrightarrow 00:39:38.880$ You can see with a hemoglobin A1C of 11.6%

NOTE Confidence: 0.878915246296296

 $00:39:38.880 \longrightarrow 00:39:42.240$ but did have detectable beta cell function.

NOTE Confidence: 0.878915246296296

 $00:39:42.240 \longrightarrow 00:39:45.278$ The C peptide was 993 which is

NOTE Confidence: 0.878915246296296

00:39:45.278 --> 00:39:48.126 you know plenty respectable and

NOTE Confidence: 0.878915246296296

 $00{:}39{:}48.126 \dashrightarrow 00{:}39{:}50.156$ was also auto anybody positive.

NOTE Confidence: 0.878915246296296

00:39:50.160 --> 00:39:52.284 So they believe that this patient

NOTE Confidence: 0.878915246296296

 $00{:}39{:}52.284 \dashrightarrow 00{:}39{:}54.005$ had immune mediated diabetes.

NOTE Confidence: 0.878915246296296

 $00:39:54.005 \longrightarrow 00:39:56.280$ They gave the patient infliximal,

NOTE Confidence: 0.878915246296296

 $00:39:56.280 \longrightarrow 00:39:59.512$ the anti TNF antibody and as you can

NOTE Confidence: 0.878915246296296

 $00{:}39{:}59.512 \dashrightarrow 00{:}40{:}02.600$ see the the glucose is improved.

NOTE Confidence: 0.878915246296296

 $00{:}40{:}02.600 \dashrightarrow 00{:}40{:}05.400$ The hemoglobin A1C came down

NOTE Confidence: 0.878915246296296

 $00:40:05.400 \longrightarrow 00:40:06.760$ and so that was

 $00:40:08.800 \longrightarrow 00:40:10.852$ that seemed to be very impressive

NOTE Confidence: 0.86068467

00:40:10.852 --> 00:40:11.878 to those investigators.

NOTE Confidence: 0.86068467

 $00:40:11.880 \longrightarrow 00:40:13.238$ The patient had been treated with insulin.

NOTE Confidence: 0.86068467

 $00:40:13.240 \longrightarrow 00:40:14.856$ They stopped the insulin.

NOTE Confidence: 0.86068467

 $00:40:14.856 \longrightarrow 00:40:16.876$ Now since we saw that,

NOTE Confidence: 0.86068467

00:40:16.880 --> 00:40:19.400 we've also treated a few patients

NOTE Confidence: 0.86068467

 $00:40:19.400 \longrightarrow 00:40:22.512$ here and I want to mention this

NOTE Confidence: 0.86068467

00:40:22.512 --> 00:40:25.188 work that's been ongoing by Noam

NOTE Confidence: 0.86068467

 $00{:}40{:}25.188 \operatorname{--}{>} 00{:}40{:}27.964$ and Anna for treating patients

NOTE Confidence: 0.86068467

00:40:27.964 --> 00:40:30.288 here who've developed checkpoint

NOTE Confidence: 0.86068467

 $00{:}40{:}30.288 \dashrightarrow 00{:}40{:}32.759$ induced diabetes with infliximab.

NOTE Confidence: 0.86068467

 $00:40:32.760 \longrightarrow 00:40:36.120$ Let me show you 2 cases.

NOTE Confidence: 0.86068467

00:40:36.120 --> 00:40:39.179 This patient had a history of type

NOTE Confidence: 0.86068467

 $00:40:39.179 \longrightarrow 00:40:41.572$ 2 diabetes like the previous one

NOTE Confidence: 0.86068467

 $00:40:41.572 \longrightarrow 00:40:44.771$ that I showed you and presented with

NOTE Confidence: 0.86068467

 $00{:}40{:}44.771 \dashrightarrow 00{:}40{:}49.360$ very very high glucoses and the the

00:40:49.360 --> 00:40:52.430 hemoglobin A1C in the past had been

NOTE Confidence: 0.86068467

 $00:40:52.430 \longrightarrow 00:40:54.433$ a fairly reasonable and the patient

NOTE Confidence: 0.86068467

 $00:40:54.433 \longrightarrow 00:40:56.755$ had not been treated with insulin.

NOTE Confidence: 0.86068467

 $00:40:56.760 \longrightarrow 00:40:59.476$ There was a bump in the amylase

NOTE Confidence: 0.86068467

 $00:40:59.476 \longrightarrow 00:41:01.484$ and light paves just as I showed

NOTE Confidence: 0.86068467

 $00:41:01.484 \longrightarrow 00:41:03.560$ you in in one of the first slides.

NOTE Confidence: 0.86068467

00:41:03.560 --> 00:41:05.708 And then the glucose became markedly

NOTE Confidence: 0.86068467

 $00:41:05.708 \longrightarrow 00:41:08.282$ elevated and as you can see the

NOTE Confidence: 0.86068467

00:41:08.282 --> 00:41:10.592 patient received 3 doses of infliximab.

NOTE Confidence: 0.86068467

 $00:41:10.592 \longrightarrow 00:41:13.888$ And if you take a look at the response

NOTE Confidence: 0.86068467

 $00{:}41{:}13.888 \rightarrow 00{:}41{:}16.192$ curves and in terms of the C peptide,

NOTE Confidence: 0.86068467

 $00:41:16.200 \longrightarrow 00:41:17.904$ it actually did seem to these

NOTE Confidence: 0.86068467

 $00:41:17.904 \longrightarrow 00:41:19.040$ are random C peptides.

NOTE Confidence: 0.86068467

00:41:19.040 --> 00:41:20.986 I should point out the C peptide

NOTE Confidence: 0.86068467

 $00:41:20.986 \longrightarrow 00:41:23.039$ did seem to improve after the

 $00:41:23.039 \longrightarrow 00:41:24.964$ patient was treated with infliximab

NOTE Confidence: 0.86068467

 $00{:}41{:}24.964 \dashrightarrow 00{:}41{:}27.319$ and the glucose was also better.

NOTE Confidence: 0.86068467

 $00:41:27.320 \longrightarrow 00:41:30.518$ Now these are, these are anecdotal,

NOTE Confidence: 0.86068467

 $00:41:30.520 \longrightarrow 00:41:33.754$ these are not performed in a rigorous

NOTE Confidence: 0.86068467

 $00:41:33.760 \longrightarrow 00:41:35.935$ endocrine setting where we're actually

NOTE Confidence: 0.86068467

 $00:41:35.935 \longrightarrow 00:41:37.675$ stimulating beta cell function.

NOTE Confidence: 0.86068467

 $00{:}41{:}37.680 \dashrightarrow 00{:}41{:}39.276$ But nonetheless and I think from

NOTE Confidence: 0.86068467

00:41:39.276 --> 00:41:40.640 the patient's point of view,

NOTE Confidence: 0.86068467

 $00{:}41{:}40.640 \dashrightarrow 00{:}41{:}42.808$ the fact that he was able to get

NOTE Confidence: 0.86068467

00:41:42.808 --> 00:41:44.896 off of insulin and his hemoglobin

NOTE Confidence: 0.86068467

 $00{:}41{:}44.896 \dashrightarrow 00{:}41{:}47.372$ A1 CS were subsequently improved

NOTE Confidence: 0.86068467

 $00:41:47.372 \longrightarrow 00:41:50.116$ is is clinically meaningful.

NOTE Confidence: 0.86068467

 $00:41:50.120 \longrightarrow 00:41:52.136$ Here's another case.

NOTE Confidence: 0.86068467

 $00:41:52.136 \longrightarrow 00:41:54.572$ This individual with metastatic

NOTE Confidence: 0.86068467

 $00:41:54.572 \longrightarrow 00:41:57.302$ Melanoma was treated with EPI

NOTE Confidence: 0.86068467

 $00:41:57.302 \longrightarrow 00:42:00.404$ and Nevo and had adverse events

00:42:00.404 --> 00:42:02.909 including uveitis and diarrhea that

NOTE Confidence: 0.86068467

 $00{:}42{:}02.909 \dashrightarrow 00{:}42{:}06.142$ have been treated with steroids and

NOTE Confidence: 0.86068467

 $00:42:06.142 \longrightarrow 00:42:09.634$ hyperglycemia was noted at cycle 21.

NOTE Confidence: 0.86068467

 $00:42:09.640 \longrightarrow 00:42:11.884$ There was no prior history of

NOTE Confidence: 0.86068467

 $00:42:11.884 \longrightarrow 00:42:14.272$ diabetes in this patient and previous

NOTE Confidence: 0.86068467

 $00:42:14.272 \longrightarrow 00:42:16.714$ hemoglobin A1 CS have been normal.

NOTE Confidence: 0.86068467

00:42:16.720 --> 00:42:19.200 This patient again presented with

NOTE Confidence: 0.86068467

 $00{:}42{:}19.200 \longrightarrow 00{:}42{:}21.858$ a very elevated hemoglobin A1C and

NOTE Confidence: 0.86068467

 $00{:}42{:}21.858 \longrightarrow 00{:}42{:}24.920$ the glucose was also quite elevated.

NOTE Confidence: 0.86068467

 $00{:}42{:}24.920 \longrightarrow 00{:}42{:}27.164$ This patient did not have evidence

NOTE Confidence: 0.86068467

 $00:42:27.164 \longrightarrow 00:42:29.061$ of ketoacidosis whereas the previous

NOTE Confidence: 0.86068467

 $00:42:29.061 \longrightarrow 00:42:31.077$ patient that I showed you did.

NOTE Confidence: 0.86068467

 $00{:}42{:}31.080 \dashrightarrow 00{:}42{:}34.200$ And remember that ketoacidosis is a

NOTE Confidence: 0.86068467

 $00:42:34.200 \longrightarrow 00:42:37.359$ sign of of substantial insulin deficiency.

NOTE Confidence: 0.86068467

 $00:42:37.359 \longrightarrow 00:42:40.557$ This patient was auto antibody negative.

 $00:42:40.560 \longrightarrow 00:42:43.200$ So here we're looking at the

NOTE Confidence: 0.86068467

 $00:42:43.200 \longrightarrow 00:42:44.692$ random C peptide levels,

NOTE Confidence: 0.86068467

 $00:42:44.692 \longrightarrow 00:42:46.557$ one of them is stimulated,

NOTE Confidence: 0.86068467

 $00:42:46.560 \longrightarrow 00:42:48.952$ the last one that was just done a

NOTE Confidence: 0.86068467

 $00:42:48.952 \longrightarrow 00:42:51.293$ few days ago and the glucose levels

NOTE Confidence: 0.86068467

00:42:51.293 --> 00:42:54.269 and you can see that the glucose did

NOTE Confidence: 0.86068467

 $00:42:54.269 \longrightarrow 00:42:56.375$ improve probably with the medical care

NOTE Confidence: 0.86068467

 $00{:}42{:}56.375 \dashrightarrow 00{:}42{:}58.796$ of the patient received but the C

NOTE Confidence: 0.86068467

 $00{:}42{:}58.796 \dashrightarrow 00{:}43{:}01.113$ peptide also seemed to be pretty substantial.

NOTE Confidence: 0.86068467

 $00:43:01.120 \longrightarrow 00:43:03.178$ This is markedly different than what

NOTE Confidence: 0.86068467

 $00{:}43{:}03.178 --> 00{:}43{:}05.966$ I showed you in in in one of the

NOTE Confidence: 0.86068467

 $00:43:05.966 \longrightarrow 00:43:07.815$ first slides where the C peptides

NOTE Confidence: 0.86068467

 $00:43:07.815 \longrightarrow 00:43:10.472$ pretty much go to undetectable in

NOTE Confidence: 0.86068467

 $00{:}43{:}10.472 \dashrightarrow 00{:}43{:}13.544$ in the majority of patients who

NOTE Confidence: 0.86068467

 $00:43:13.544 \longrightarrow 00:43:15.700$ present with checkpoint induced

NOTE Confidence: 0.86068467

 $00:43:15.700 \longrightarrow 00:43:18.874$ diabetes and do so fairly rapidly.

 $00:43:18.880 \longrightarrow 00:43:21.260$ So to conclude adverse events are not

NOTE Confidence: 0.86068467

 $00{:}43{:}21.260 \to 00{:}43{:}22.920$ infrequent with checkpoint inhibitors.

NOTE Confidence: 0.86068467

 $00:43:22.920 \longrightarrow 00:43:25.173$ In fact I would change that to

NOTE Confidence: 0.86068467

00:43:25.173 --> 00:43:27.038 say adverse events are common

NOTE Confidence: 0.86068467

 $00{:}43{:}27.038 \dashrightarrow 00{:}43{:}28.157$ with checkpoint inhibitors.

NOTE Confidence: 0.86068467

00:43:28.160 --> 00:43:30.525 Most common is thyroid disease

NOTE Confidence: 0.86068467

 $00:43:30.525 \longrightarrow 00:43:32.417$ and hypothesitis but diabetes

NOTE Confidence: 0.86068467

 $00:43:32.417 \longrightarrow 00:43:34.277$ also occurs in about 1%

NOTE Confidence: 0.67271843625

 $00{:}43{:}34.280 \dashrightarrow 00{:}43{:}37.005$ of checkpoint induce a checkpoint

NOTE Confidence: 0.67271843625

 $00{:}43{:}37.005 \dashrightarrow 00{:}43{:}38.640$ inhibitor treated patients.

NOTE Confidence: 0.67271843625

 $00:43:38.640 \longrightarrow 00:43:41.800$ Now one thing I should mention is for

NOTE Confidence: 0.67271843625

 $00:43:41.800 \longrightarrow 00:43:44.516$ patients and you know we see them.

NOTE Confidence: 0.67271843625

 $00:43:44.520 \longrightarrow 00:43:47.005$ Thanks to all of you in our clinic.

NOTE Confidence: 0.67271843625

00:43:47.005 --> 00:43:48.480 But for the patients this

NOTE Confidence: 0.67271843625

 $00:43:48.480 \longrightarrow 00:43:50.319$ is a difficult disease.

 $00:43:50.320 \longrightarrow 00:43:52.206$ I mean you know it's it, it,

NOTE Confidence: 0.67271843625

 $00:43:52.206 \longrightarrow 00:43:54.760$ it's a lot different when a

NOTE Confidence: 0.67271843625

 $00:43:54.760 \longrightarrow 00:43:56.360$ 12 year old presents with.

NOTE Confidence: 0.67271843625

 $00:43:56.360 \longrightarrow 00:43:57.535$ It's not that the disease

NOTE Confidence: 0.67271843625

 $00:43:57.535 \longrightarrow 00:43:59.279$ is easy for a 12 year old,

NOTE Confidence: 0.67271843625

 $00:43:59.280 \longrightarrow 00:44:00.885$ but it's even more cumbersome

NOTE Confidence: 0.67271843625

 $00:44:00.885 \longrightarrow 00:44:04.240$ for a 65 or 75 year old who now

NOTE Confidence: 0.67271843625

 $00:44:04.240 \longrightarrow 00:44:05.916$ has become insulin deficient,

NOTE Confidence: 0.67271843625

 $00:44:05.920 \longrightarrow 00:44:09.160$ completely dependent on exogenous insulin

NOTE Confidence: 0.67271843625

00:44:09.160 --> 00:44:11.752 for maintaining metabolic control.

NOTE Confidence: 0.67271843625

 $00{:}44{:}11.760 \dashrightarrow 00{:}44{:}15.120$ So it is quite a burden for patients.

NOTE Confidence: 0.67271843625

00:44:15.120 --> 00:44:18.102 So preventing the disease would obviously

NOTE Confidence: 0.67271843625

00:44:18.102 --> 00:44:20.640 be would result in very significant

NOTE Confidence: 0.67271843625

00:44:20.640 --> 00:44:22.680 improvements in quality of life.

NOTE Confidence: 0.67271843625

00:44:22.680 --> 00:44:24.840 It's most common in patients treated

NOTE Confidence: 0.67271843625

 $00:44:24.840 \longrightarrow 00:44:27.654$ with anti PD one or anti PDL 1

00:44:27.654 --> 00:44:29.900 antibodies and in patients or HLAD R4.

NOTE Confidence: 0.67271843625

 $00:44:29.900 \longrightarrow 00:44:33.318$ Still a lot of work needs to go on to

NOTE Confidence: 0.67271843625

 $00:44:33.318 \longrightarrow 00:44:35.880$ understand what is the significance of

NOTE Confidence: 0.67271843625

00:44:35.880 --> 00:44:40.200 DL DDR4 or the significance of NLRC 5.

NOTE Confidence: 0.67271843625

 $00:44:40.200 \longrightarrow 00:44:42.624$ But it nonetheless suggests that there

NOTE Confidence: 0.67271843625

00:44:42.624 --> 00:44:45.606 is some some change or some difference

NOTE Confidence: 0.67271843625

00:44:45.606 --> 00:44:48.198 in these patients in presentation of

NOTE Confidence: 0.67271843625

 $00{:}44{:}48.198 \dashrightarrow 00{:}44{:}50.716$ either class one or Class 2 or both.

NOTE Confidence: 0.67271843625

00:44:50.720 --> 00:44:53.240 MHC presented antigens,

NOTE Confidence: 0.67271843625

 $00:44:53.240 \longrightarrow 00:44:56.600$ pancreatic inflammation is is

NOTE Confidence: 0.67271843625

 $00:44:56.600 \longrightarrow 00:44:59.340$ frequent prior to the development

NOTE Confidence: 0.67271843625

 $00{:}44{:}59.340 \dashrightarrow 00{:}45{:}01.240$ of checkpoint induced diabetes.

NOTE Confidence: 0.67271843625

 $00:45:01.240 \longrightarrow 00:45:04.040$ Curiously, PDL one's expressed on beta cells.

NOTE Confidence: 0.67271843625

 $00:45:04.040 \longrightarrow 00:45:06.238$ And I think we have to conclude

NOTE Confidence: 0.67271843625

 $00:45:06.238 \longrightarrow 00:45:08.256$ that in spite of expressing PDL

00:45:08.256 --> 00:45:11.132 One on beta cells and in spite of

NOTE Confidence: 0.67271843625

 $00{:}45{:}11.132 \dashrightarrow 00{:}45{:}12.972$ showing its extraordinary protective

NOTE Confidence: 0.67271843625

00:45:12.972 --> 00:45:15.874 effect in animal models of disease

NOTE Confidence: 0.67271843625

00:45:15.874 --> 00:45:19.438 that when you give a checkpoint,

NOTE Confidence: 0.67271843625

 $00:45:19.440 \longrightarrow 00:45:21.320$ when the checkpoint inhibitor

NOTE Confidence: 0.67271843625

 $00:45:21.320 \longrightarrow 00:45:23.200$ is given that protective,

NOTE Confidence: 0.67271843625

 $00:45:23.200 \longrightarrow 00:45:26.280$ that protective blockade is gone.

NOTE Confidence: 0.67271843625

 $00{:}45{:}26.280 \dashrightarrow 00{:}45{:}30.232$ And even afterwards PDL one

NOTE Confidence: 0.67271843625

 $00{:}45{:}30.232 {\: -->\:} 00{:}45{:}33.040$ expression is no longer able to

NOTE Confidence: 0.67271843625

 $00:45:33.040 \longrightarrow 00:45:35.240$ stop the development of diabetes.

NOTE Confidence: 0.67271843625

00:45:35.240 --> 00:45:37.712 And I think the identification of

NOTE Confidence: 0.67271843625

 $00:45:37.712 \longrightarrow 00:45:39.884$ mechanism suggest have suggested a

NOTE Confidence: 0.67271843625

 $00:45:39.884 \longrightarrow 00:45:41.760$ therapeutic strategy inhibition of

NOTE Confidence: 0.67271843625

00:45:41.760 --> 00:45:43.680 inflammatory mediators may potentially

NOTE Confidence: 0.67271843625

 $00:45:43.680 \longrightarrow 00:45:46.023$ halt progression of diabetes and

NOTE Confidence: 0.67271843625

00:45:46.023 --> 00:45:47.803 beta cell loss with checkpoint

00:45:47.803 --> 00:45:51.010 induced diabetes and a short acting

NOTE Confidence: 0.67271843625

 $00:45:51.010 \longrightarrow 00:45:53.290$ inhibitor potentially Jack inhibitors

NOTE Confidence: 0.67271843625

 $00:45:53.290 \longrightarrow 00:45:56.277$ would warrant some further testing.

NOTE Confidence: 0.67271843625

 $00:45:56.280 \longrightarrow 00:45:58.200$ One last one last comment,

NOTE Confidence: 0.67271843625

00:45:58.200 --> 00:45:59.992 let me mention that you know I

NOTE Confidence: 0.67271843625

 $00:45:59.992 \longrightarrow 00:46:01.996$ think one of the interesting things

NOTE Confidence: 0.67271843625

00:46:01.996 --> 00:46:04.348 about all of the adverse checkpoint

NOTE Confidence: 0.67271843625

00:46:04.348 --> 00:46:05.879 induced adverse events is,

NOTE Confidence: 0.67271843625

00:46:05.880 --> 00:46:08.400 is it a feature of the checkpoint inhibitor,

NOTE Confidence: 0.67271843625

 $00{:}46{:}08.400 \dashrightarrow 00{:}46{:}10.656$ a feature of the tissue or a feature

NOTE Confidence: 0.67271843625

 $00{:}46{:}10.656 \dashrightarrow 00{:}46{:}13.320$ of the patients or all three of these.

NOTE Confidence: 0.67271843625

 $00:46:13.320 \longrightarrow 00:46:15.920$ And let me just point out this work

NOTE Confidence: 0.67271843625

 $00{:}46{:}15.920 \dashrightarrow 00{:}46{:}18.936$ from Jackie Mann in our group who

NOTE Confidence: 0.67271843625

 $00{:}46{:}18.936 \dashrightarrow 00{:}46{:}21.456$ looked at checkpoint inhibitor induced

NOTE Confidence: 0.67271843625

 $00:46:21.456 \longrightarrow 00:46:25.000$ colitis and she did this by single cell RNAC.

00:46:25.000 --> 00:46:27.838 This work was published fairly recently,

NOTE Confidence: 0.67271843625

 $00:46:27.840 \longrightarrow 00:46:30.441$ but let me point out that a number of

NOTE Confidence: 0.67271843625

 $00:46:30.441 \longrightarrow 00:46:32.970$ the molecules that I just told you

NOTE Confidence: 0.67271843625

00:46:32.970 --> 00:46:35.780 about being found in the pancreas of

NOTE Confidence: 0.67271843625

 $00{:}46{:}35.780 \dashrightarrow 00{:}46{:}37.935$ checkpoint induced diabetes can also

NOTE Confidence: 0.67271843625

00:46:37.935 --> 00:46:41.040 be found in patients who develop colitis,

NOTE Confidence: 0.67271843625

 $00:46:41.040 \longrightarrow 00:46:44.134$ suggesting that we might even think about

NOTE Confidence: 0.67271843625

00:46:44.134 --> 00:46:47.560 a broader use of of various inhibitors,

NOTE Confidence: 0.67271843625

 $00:46:47.560 \longrightarrow 00:46:48.530$ not inhibitors.

NOTE Confidence: 0.67271843625

 $00:46:48.530 \longrightarrow 00:46:51.460$ Obviously that would prevent the anti

NOTE Confidence: 0.67271843625

00:46:51.460 --> 00:46:54.375 tumor effect of the checkpoint inhibitors,

NOTE Confidence: 0.67271843625

 $00:46:54.375 \longrightarrow 00:46:56.450$ but might be given sequentially

NOTE Confidence: 0.67271843625

 $00{:}46{:}56.450 \dashrightarrow 00{:}46{:}59.583$ after the anti tumor effects of the

NOTE Confidence: 0.67271843625

 $00{:}46{:}59.583 \dashrightarrow 00{:}47{:}02.659$ checkpoint inhibitors and that might

NOTE Confidence: 0.67271843625

 $00:47:02.659 \longrightarrow 00:47:06.612$ be rapidly tapered in the event that

NOTE Confidence: 0.67271843625

 $00{:}47{:}06.612 \dashrightarrow 00{:}47{:}08.877$ further cancer the rapy is needed.

 $00:47:08.880 \longrightarrow 00:47:10.280$ So I'm going to close with that.

NOTE Confidence: 0.914448272857143

 $00:47:10.280 \longrightarrow 00:47:13.120$ I want to thank a number of individuals,

NOTE Confidence: 0.914448272857143

00:47:13.120 --> 00:47:15.544 particularly Harriet, who's been,

NOTE Confidence: 0.914448272857143

00:47:15.544 --> 00:47:19.436 you know, a colleague for a decade now,

NOTE Confidence: 0.914448272857143

 $00:47:19.440 \longrightarrow 00:47:21.624$ and a number of individuals in

NOTE Confidence: 0.914448272857143

 $00:47:21.624 \longrightarrow 00:47:23.650$ her group who've I've had the

NOTE Confidence: 0.914448272857143

 $00:47:23.650 \longrightarrow 00:47:25.200$ good fortune of working with.

NOTE Confidence: 0.914448272857143

 $00:47:25.200 \longrightarrow 00:47:27.960$ As well, I want to mention

NOTE Confidence: 0.3145552

00:47:30.440 --> 00:47:33.419 Lalak's work on identifying

NOTE Confidence: 0.3145552

00:47:33.419 --> 00:47:35.370 the LLRC 5 mutations.

NOTE Confidence: 0.3145552

00:47:35.370 --> 00:47:37.400 I showed you some of Jackie's work.

NOTE Confidence: 0.3145552

 $00:47:37.400 \longrightarrow 00:47:40.916$ Nolan is continuing this work with

NOTE Confidence: 0.3145552

 $00{:}47{:}40.916 \dashrightarrow 00{:}47{:}43.614$ particularly with giving with the

NOTE Confidence: 0.3145552

00:47:43.614 --> 00:47:45.949 NLRC 5 mutations and therapies

NOTE Confidence: 0.3145552

 $00:47:45.949 \longrightarrow 00:47:48.120$ of checkpoint induced diabetes.

00:47:48.120 --> 00:47:49.560 Anna Perdigata did a lot of,

NOTE Confidence: 0.3145552

 $00:47:49.560 \longrightarrow 00:47:51.678$ did actually all of the work,

NOTE Confidence: 0.3145552

 $00:47:51.680 \longrightarrow 00:47:54.000$ the single cell work with the mouse models

NOTE Confidence: 0.3145552

 $00:47:54.000 \longrightarrow 00:47:56.394$ and it's continuing to go on to do that.

NOTE Confidence: 0.3145552

 $00:47:56.400 \longrightarrow 00:48:00.042$ And we have colleagues at UCSF and funding

NOTE Confidence: 0.3145552

 $00{:}48{:}00.042 \dashrightarrow 00{:}48{:}03.480$ you can see on the right side here.

NOTE Confidence: 0.3145552

 $00:48:03.480 \longrightarrow 00:48:04.950$ So I'll stop there and I'm

NOTE Confidence: 0.3145552

 $00:48:04.950 \longrightarrow 00:48:06.520$ happy to answer any questions.

NOTE Confidence: 0.840739008571428

00:48:13.720 --> 00:48:15.890 Thank you, Kevin for a

NOTE Confidence: 0.840739008571428

00:48:15.890 --> 00:48:17.240 wonderful presentation. Kurt,

NOTE Confidence: 0.97329267

 $00:48:22.570 \longrightarrow 00:48:23.450$ thank you for an excellent

NOTE Confidence: 0.929915654

 $00:48:23.450 \longrightarrow 00:48:24.930$ talk. I wanted to ask,

NOTE Confidence: 0.929915654

 $00{:}48{:}24.930 \dashrightarrow 00{:}48{:}26.484$ so LRC 5 is a little bit

NOTE Confidence: 0.625720556

00:48:26.690 --> 00:48:28.570 kind of superficially counter intuitive

NOTE Confidence: 0.625720556

 $00:48:28.570 \longrightarrow 00:48:29.530$ in terms of germline mutation.

NOTE Confidence: 0.625720556

 $00:48:29.530 \longrightarrow 00:48:30.800$ I was wondering if there was a

 $00:48:30.800 \longrightarrow 00:48:32.050$ role in central tolerance and

NOTE Confidence: 0.80699388

 $00{:}48{:}32.050 \dashrightarrow 00{:}48{:}33.980$ if you saw increased checkpoint

NOTE Confidence: 0.80699388

 $00:48:33.980 \longrightarrow 00:48:35.570$ inhibitor autoimmunity in

NOTE Confidence: 0.80699388

 $00{:}48{:}35.570 \dashrightarrow 00{:}48{:}37.610$ hypothesitis or hypothyroidism.

NOTE Confidence: 0.771907615

 $00{:}48{:}41.280 \dashrightarrow 00{:}48{:}43.280$ I'm sorry I I missed the second part.

NOTE Confidence: 0.771907615

00:48:43.280 --> 00:48:45.464 I, I, I, I, I understood your

NOTE Confidence: 0.771907615

 $00:48:45.464 \longrightarrow 00:48:46.752$ question about central tolerance

NOTE Confidence: 0.771907615

 $00:48:46.752 \longrightarrow 00:48:48.796$ but so and so whether you saw

NOTE Confidence: 0.771907615

00:48:48.800 --> 00:48:51.820 rather than an LRC 5 mutations,

NOTE Confidence: 0.771907615

 $00:48:51.820 \longrightarrow 00:48:54.733$ germline ingest type one diabetes

NOTE Confidence: 0.771907615

00:48:54.733 --> 00:48:56.839 or well check one inhibitor diabetes

NOTE Confidence: 0.6369411675

 $00:48:56.840 \longrightarrow 00:48:57.840$ or whether also intra,

NOTE Confidence: 0.81279564125

 $00{:}48{:}59.840 \dashrightarrow 00{:}49{:}02.590$ I think that's still somewhat

NOTE Confidence: 0.81279564125

 $00:49:02.590 \longrightarrow 00:49:04.880$ of a ongoing question.

NOTE Confidence: 0.95789525

 $00:49:07.280 \longrightarrow 00:49:10.800$ I think it's unlikely Harriet may have a

 $00:49:10.800 \longrightarrow 00:49:12.480$ thought as to whether it's more likely.

NOTE Confidence: 0.78725771777778

 $00{:}49{:}12.680 \to 00{:}49{:}15.155$ Yeah, I can Norm can answer it as well.

NOTE Confidence: 0.78725771777778

00:49:15.160 --> 00:49:17.936 So we have looked in at NLRC 5

NOTE Confidence: 0.78725771777778

 $00:49:17.936 \longrightarrow 00:49:20.639$ SNPs in other other toxicity,

NOTE Confidence: 0.78725771777778

 $00:49:20.640 \longrightarrow 00:49:23.656$ it seems to be higher as well in

NOTE Confidence: 0.78725771777778

 $00:49:23.656 \longrightarrow 00:49:25.096$ hypothesitis but not colitis.

NOTE Confidence: 0.78725771777778

 $00:49:25.096 \longrightarrow 00:49:27.960$ That's as far as we know so far.

NOTE Confidence: 0.78725771777778

 $00:49:27.960 \longrightarrow 00:49:29.626$ But the statistics are they're

NOTE Confidence: 0.78725771777778

 $00:49:29.626 \longrightarrow 00:49:30.756$ not this numbers are small.

NOTE Confidence: 0.78725771777778

 $00:49:30.760 \longrightarrow 00:49:31.924$ Still, that's exactly what

NOTE Confidence: 0.787257717777778

 $00{:}49{:}31.924 \dashrightarrow 00{:}49{:}33.280$ Norm is working on right now.

NOTE Confidence: 0.83181655

 $00:49:46.160 \longrightarrow 00:49:48.240$ Yeah. I mean it could be

NOTE Confidence: 0.687196584545454

 $00:49:48.240 \longrightarrow 00:49:51.271$ the only. So I I I think

NOTE Confidence: 0.687196584545454

 $00:49:51.271 \longrightarrow 00:49:53.520$ that's an interesting question.

NOTE Confidence: 0.687196584545454

 $00:49:53.520 \longrightarrow 00:49:54.830$ But you're taking us back

NOTE Confidence: 0.687196584545454

 $00:49:54.830 \longrightarrow 00:49:55.878$ to the original model.

 $00:49:55.880 \longrightarrow 00:50:00.200$ These patients had a repertoire ready to go.

NOTE Confidence: 0.687196584545454

00:50:00.200 --> 00:50:01.880 And look, it could be right.

NOTE Confidence: 0.687196584545454

00:50:01.880 --> 00:50:03.662 I mean just because we don't

NOTE Confidence: 0.687196584545454

00:50:03.662 --> 00:50:05.298 see the usual suspects doesn't

NOTE Confidence: 0.687196584545454

 $00:50:05.298 \longrightarrow 00:50:07.238$ mean that there aren't suspects.

NOTE Confidence: 0.687196584545454

 $00:50:07.240 \longrightarrow 00:50:08.680$ Kevin, that was an amazing lecture.

NOTE Confidence: 0.687196584545454

 $00:50:08.680 \longrightarrow 00:50:11.070$ It it reminds me of 2015 or earlier when

NOTE Confidence: 0.687196584545454

 $00{:}50{:}11.070 \dashrightarrow 00{:}50{:}12.855$ we first started using these agents

NOTE Confidence: 0.687196584545454

 $00:50:12.855 \longrightarrow 00:50:14.760$ and we're seeing wonderful responses.

NOTE Confidence: 0.687196584545454

 $00:50:14.760 \longrightarrow 00:50:16.080$ And you know patients with lung

NOTE Confidence: 0.687196584545454

 $00:50:16.080 \longrightarrow 00:50:17.400$ cancers and others would have these

NOTE Confidence: 0.687196584545454

 $00:50:17.400 \longrightarrow 00:50:19.110$ problems and you know they'd be

NOTE Confidence: 0.687196584545454

 $00{:}50{:}19.110 \dashrightarrow 00{:}50{:}20.370$ on the throughout the hospital and

NOTE Confidence: 0.687196584545454

 $00{:}50{:}20.370 \dashrightarrow 00{:}50{:}21.779$ they wouldn't get the care they

NOTE Confidence: 0.687196584545454

00:50:21.779 --> 00:50:22.929 needed because no one recognized

 $00:50:22.972 \longrightarrow 00:50:24.062$ that these toxicities were were

NOTE Confidence: 0.687196584545454

00:50:24.062 --> 00:50:25.720 part of this even though they were

NOTE Confidence: 0.687196584545454

 $00:50:25.720 \longrightarrow 00:50:27.120$ benefiting from the therapy.

NOTE Confidence: 0.687196584545454

 $00:50:27.120 \longrightarrow 00:50:29.120$ I have a two-part question for you and

NOTE Confidence: 0.687196584545454

00:50:29.120 --> 00:50:30.700 you you now know who's at most risk,

NOTE Confidence: 0.687196584545454

 $00:50:30.700 \longrightarrow 00:50:32.760$ you have the NLR, other other risk factors.

NOTE Confidence: 0.687196584545454

 $00:50:32.760 \longrightarrow 00:50:35.920$ So my first question would be 1,

NOTE Confidence: 0.687196584545454

 $00:50:35.920 \longrightarrow 00:50:37.780$ would you treat prophylactically or

NOTE Confidence: 0.687196584545454

 $00:50:37.780 \longrightarrow 00:50:40.372$ or would you wait until they develop

NOTE Confidence: 0.687196584545454

 $00:50:40.372 \longrightarrow 00:50:42.800$ the toxicity to to start treating

NOTE Confidence: 0.687196584545454

 $00:50:42.800 \longrightarrow 00:50:44.312$ And then the second would be you see

NOTE Confidence: 0.687196584545454

00:50:44.312 --> 00:50:46.370 that the activity against the cancer

NOTE Confidence: 0.687196584545454

 $00:50:46.370 \longrightarrow 00:50:47.960$ is is increased in the patients

NOTE Confidence: 0.687196584545454

 $00:50:47.960 \longrightarrow 00:50:49.559$ that have these abnormalities.

NOTE Confidence: 0.687196584545454

 $00:50:49.560 \longrightarrow 00:50:50.848$ Yeah that's a let.

NOTE Confidence: 0.687196584545454

 $00:50:50.848 \longrightarrow 00:50:52.780$ Let me address the second question

 $00:50:52.843 \longrightarrow 00:50:55.177$ first because there is some literature

NOTE Confidence: 0.687196584545454

 $00{:}50{:}55.177 \dashrightarrow 00{:}50{:}57.135$ suggesting that those who develop

NOTE Confidence: 0.687196584545454

00:50:57.135 --> 00:50:59.175 these adverse events do better in

NOTE Confidence: 0.687196584545454

00:50:59.175 --> 00:51:01.672 terms of their anti cancer activity and

NOTE Confidence: 0.687196584545454

00:51:01.672 --> 00:51:04.480 indeed our patients did well in general,

NOTE Confidence: 0.687196584545454

 $00:51:04.480 \longrightarrow 00:51:06.916$ but there is a publication for sure

NOTE Confidence: 0.687196584545454

 $00:51:06.916 \longrightarrow 00:51:08.924$ suggesting that those who develop

NOTE Confidence: 0.687196584545454

 $00:51:08.924 \longrightarrow 00:51:10.716$ hypothesitis had better outcomes

NOTE Confidence: 0.687196584545454

 $00:51:10.720 \longrightarrow 00:51:13.280$ in patients with Melanoma.

NOTE Confidence: 0.687196584545454

00:51:13.280 --> 00:51:13.920 So,

NOTE Confidence: 0.687196584545454

 $00:51:13.920 \longrightarrow 00:51:17.288$ so I'm not certain but I think it's

NOTE Confidence: 0.687196584545454

 $00:51:17.288 \longrightarrow 00:51:19.600$ certainly not a negative thing

NOTE Confidence: 0.687196584545454

 $00{:}51{:}19.600 \dashrightarrow 00{:}51{:}22.276$ in terms of the cancer response

NOTE Confidence: 0.687196584545454

00:51:22.280 --> 00:51:23.360 and it may look it may,

NOTE Confidence: 0.687196584545454

 $00{:}51{:}23.360 \to 00{:}51{:}25.754$ I mean just because you don't develop

 $00:51:25.760 \longrightarrow 00:51:27.540$ toxicities doesn't mean you can't

NOTE Confidence: 0.687196584545454

 $00{:}51{:}27.540 \dashrightarrow 00{:}51{:}29.320$ do well with checkpoint inhibitors.

NOTE Confidence: 0.687196584545454

 $00:51:29.320 \longrightarrow 00:51:31.800$ So in terms of when I would treat

NOTE Confidence: 0.687196584545454

 $00:51:31.800 \longrightarrow 00:51:34.383$ if I if if if we knew how to

NOTE Confidence: 0.687196584545454

00:51:34.383 --> 00:51:36.878 treat type autoimmune diabetes,

NOTE Confidence: 0.687196584545454

 $00:51:36.880 \longrightarrow 00:51:38.452$ if we knew what the antigens

NOTE Confidence: 0.687196584545454

 $00:51:38.452 \longrightarrow 00:51:39.238$ were for example,

NOTE Confidence: 0.687196584545454

 $00:51:39.240 \longrightarrow 00:51:41.634$ we could we could dream about coming

NOTE Confidence: 0.687196584545454

00:51:41.634 --> 00:51:44.802 up with some sort of antigen specific

NOTE Confidence: 0.687196584545454

00:51:44.802 --> 00:51:46.712 prophylactic therapy and give that

NOTE Confidence: 0.687196584545454

 $00:51:46.712 \longrightarrow 00:51:48.800$ before we give the checkpoint inhibitor.

NOTE Confidence: 0.687196584545454

00:51:48.800 --> 00:51:49.706 At this point,

NOTE Confidence: 0.687196584545454

 $00:51:49.706 \longrightarrow 00:51:51.518$ I don't think we have that.

NOTE Confidence: 0.687196584545454

 $00:51:51.520 \longrightarrow 00:51:54.220$ And so my suggestion would be

NOTE Confidence: 0.687196584545454

 $00:51:54.220 \longrightarrow 00:51:55.862$ to carefully follow patients,

NOTE Confidence: 0.687196584545454

 $00:51:55.862 \longrightarrow 00:51:58.088$ look for the signs that identify

 $00:51:58.088 \longrightarrow 00:52:00.313$ those who are at risk of developing

NOTE Confidence: 0.687196584545454

 $00{:}52{:}00.313 \dashrightarrow 00{:}52{:}02.549$ it and then when is appropriate in

NOTE Confidence: 0.687196584545454

 $00:52:02.549 \longrightarrow 00:52:04.830$ terms of the cancer therapy strategy,

NOTE Confidence: 0.687196584545454

 $00:52:04.830 \longrightarrow 00:52:07.560$ if if it's possible come in with

NOTE Confidence: 0.687196584545454

 $00:52:07.560 \dashrightarrow 00:52:09.880$ some short term inhibitor. Thanks.

NOTE Confidence: 0.792301511666667

00:52:13.360 --> 00:52:15.440 Thanks, Kevin. Dr. Wagner.

NOTE Confidence: 0.792301511666667

00:52:15.440 --> 00:52:18.960 And then just just great talk,

NOTE Confidence: 0.792301511666667

 $00:52:18.960 \longrightarrow 00:52:21.080$ just a couple of simple questions.

NOTE Confidence: 0.792301511666667

 $00:52:21.080 \longrightarrow 00:52:23.360$ Are there gender differences in toxicity?

NOTE Confidence: 0.9163537

 $00:52:26.800 \longrightarrow 00:52:27.360$ We

NOTE Confidence: 0.929516157142857

 $00:52:29.600 \longrightarrow 00:52:32.274$ not that we had seen in diabetes.

NOTE Confidence: 0.929516157142857

 $00:52:32.280 \longrightarrow 00:52:34.239$ Not significantly different.

NOTE Confidence: 0.8302601148

00:52:35.160 --> 00:52:35.958 Harry looks puzzled.

NOTE Confidence: 0.8302601148

 $00{:}52{:}35.958 \dashrightarrow 00{:}52{:}37.820$ Why I would ask that only because

NOTE Confidence: 0.8302601148

 $00{:}52{:}37.873 \dashrightarrow 00{:}52{:}39.153$ autoimmune disease is so much

00:52:39.153 --> 00:52:40.733 more common in is more common

NOTE Confidence: 0.8302601148

 $00:52:40.733 \longrightarrow 00:52:42.240$ in women than men. Yeah. We

NOTE Confidence: 0.6828273

 $00:52:44.760 \longrightarrow 00:52:46.640$ didn't find that we we'd

NOTE Confidence: 0.764676322222222

00:52:46.640 --> 00:52:47.936 love. Yeah. The only the only

NOTE Confidence: 0.764676322222222

 $00:52:47.936 \longrightarrow 00:52:49.599$ thing I could say is type one

NOTE Confidence: 0.764676322222222

 $00:52:49.599 \longrightarrow 00:52:50.839$ diabetes is not really general.

NOTE Confidence: 0.49742869

 $00:52:50.840 \longrightarrow 00:52:53.440$ No, I I realized that, but

NOTE Confidence: 0.598270838333333

 $00:52:53.440 \longrightarrow 00:52:57.120$ this isn't type 1 to obvious and

NOTE Confidence: 0.598270838333333

 $00:52:57.120 \longrightarrow 00:52:59.238$ and this is for either of you.

NOTE Confidence: 0.941466585714286

 $00:52:59.640 \longrightarrow 00:53:02.352$ I mean do you think that that clinicians

NOTE Confidence: 0.941466585714286

 $00{:}53{:}02.352 \dashrightarrow 00{:}53{:}06.960$ really have a sense of how abrupt the

NOTE Confidence: 0.941466585714286

 $00:53:06.960 \longrightarrow 00:53:10.000$ onset is of of diabetes in this

NOTE Confidence: 0.941466585714286

 $00:53:10.090 \longrightarrow 00:53:12.880$ situation and are looking for it.

NOTE Confidence: 0.941466585714286

00:53:12.880 --> 00:53:14.644 I mean because you know it's

NOTE Confidence: 0.941466585714286

 $00:53:14.644 \longrightarrow 00:53:16.120$ happening not at week two,

NOTE Confidence: 0.941466585714286

00:53:16.120 --> 00:53:19.158 it's happening at week six or eight.

00:53:19.160 --> 00:53:22.240 The presentation is very acute.

NOTE Confidence: 0.941466585714286

 $00{:}53{:}22.240 \dashrightarrow 00{:}53{:}23.700$ I mean you know there are some

NOTE Confidence: 0.941466585714286

 $00:53:23.700 \longrightarrow 00:53:25.344$ number of people out there as

NOTE Confidence: 0.941466585714286

 $00:53:25.344 \longrightarrow 00:53:26.904$ these therapies are used more and

NOTE Confidence: 0.941466585714286

00:53:26.904 --> 00:53:28.360 more we're going to die from this.

NOTE Confidence: 0.941466585714286

 $00:53:28.360 \longrightarrow 00:53:30.520$ So there have been deaths,

NOTE Confidence: 0.941466585714286

 $00:53:30.520 \longrightarrow 00:53:32.785$ there will be deaths where

NOTE Confidence: 0.941466585714286

00:53:32.785 --> 00:53:36.192 there isn't sufficient there,

NOTE Confidence: 0.941466585714286

 $00:53:36.192 \longrightarrow 00:53:38.400$ there isn't sufficient insight.

NOTE Confidence: 0.941466585714286

 $00:53:38.400 \longrightarrow 00:53:40.206$ The cup, the two patients that we

NOTE Confidence: 0.941466585714286

00:53:40.206 --> 00:53:41.836 haven't showed that we were able to

NOTE Confidence: 0.941466585714286

 $00:53:41.836 \longrightarrow 00:53:43.399$ give the TNF that was just chance.

NOTE Confidence: 0.941466585714286

 $00{:}53{:}43.399 \dashrightarrow 00{:}53{:}45.170$ The first one was in hospital because

NOTE Confidence: 0.941466585714286

 $00:53:45.226 \longrightarrow 00:53:47.102$ of colitis or something else and that's

NOTE Confidence: 0.941466585714286

00:53:47.102 --> 00:53:48.798 when they noticed the ship going up.

 $00:53:48.800 \longrightarrow 00:53:50.480$ The second one is an EMT and

NOTE Confidence: 0.941466585714286

 $00:53:50.480 \longrightarrow 00:53:52.028$ he he noted his only party,

NOTE Confidence: 0.941466585714286

 $00:53:52.028 \longrightarrow 00:53:53.363$ that's it called a million

NOTE Confidence: 0.941466585714286

 $00:53:53.363 \longrightarrow 00:53:54.680$ started checking his glucose.

NOTE Confidence: 0.941466585714286

 $00:53:54.680 \longrightarrow 00:53:56.558$ But there there's not sufficient awareness.

NOTE Confidence: 0.840468102666666

 $00:53:57.440 \longrightarrow 00:53:58.934$ Yeah. The but the other sort

NOTE Confidence: 0.840468102666666

 $00:53:58.934 \longrightarrow 00:54:00.638$ of take home point from that is

NOTE Confidence: 0.840468102666666

 $00:54:00.638 \longrightarrow 00:54:02.157$ you need to be aware of this

NOTE Confidence: 0.840468102666666

00:54:02.215 --> 00:54:04.217 acutely because I showed you the C

NOTE Confidence: 0.840468102666666

 $00:54:04.217 \longrightarrow 00:54:06.380$ peptide levels when it goes to 0,

NOTE Confidence: 0.840468102666666

 $00:54:06.380 \longrightarrow 00:54:07.680$ there's no turning back.

NOTE Confidence: 0.840468102666666

 $00{:}54{:}07.680 \dashrightarrow 00{:}54{:}10.515$ So I think close surveillance was important.

NOTE Confidence: 0.82001626

 $00{:}54{:}13.400 --> 00{:}54{:}13.680 \ \mathrm{Yeah}.$

NOTE Confidence: 0.893244745

00:54:15.480 --> 00:54:18.648 Well, I can tell you that I don't

NOTE Confidence: 0.893244745

00:54:18.648 --> 00:54:20.120 educate patients, you know so, so look

NOTE Confidence: 0.716728292

 $00:54:23.200 \longrightarrow 00:54:23.880$ for these kinds of things.

 $00:54:23.880 \longrightarrow 00:54:24.914$ Can I just a quick, very,

NOTE Confidence: 0.716728292

00:54:24.914 --> 00:54:26.096 very interesting data,

NOTE Confidence: 0.716728292

 $00:54:26.096 \longrightarrow 00:54:27.278$ Two quick questions.

NOTE Confidence: 0.716728292

00:54:27.280 --> 00:54:30.640 One for the germline NLCR 5 mutations,

NOTE Confidence: 0.716728292

 $00:54:30.640 \longrightarrow 00:54:31.560$ you may have said this,

NOTE Confidence: 0.716728292

 $00:54:31.560 \longrightarrow 00:54:34.825$ but are those associated with

NOTE Confidence: 0.716728292

00:54:34.825 --> 00:54:36.784 standard classic autoimmune

NOTE Confidence: 0.716728292

 $00:54:36.784 \longrightarrow 00:54:38.760$ diet type one diabetes as well?

NOTE Confidence: 0.716728292

 $00:54:38.760 \longrightarrow 00:54:40.359$ Yeah, there there's,

NOTE Confidence: 0.716728292

 $00{:}54{:}40.359 \dashrightarrow 00{:}54{:}44.090$ there's that one paper from Dejo Isrich

NOTE Confidence: 0.716728292

 $00:54:44.186 \longrightarrow 00:54:48.238$ suggesting that the answer is no not really,

NOTE Confidence: 0.716728292

 $00:54:48.240 \longrightarrow 00:54:50.436$ not one of the important players.

NOTE Confidence: 0.716728292

 $00{:}54{:}50.440 {\:{\circ}{\circ}{\circ}}>00{:}54{:}52.491$ None the less though seems to be

NOTE Confidence: 0.716728292

 $00{:}54{:}52.491 \dashrightarrow 00{:}54{:}54.663$ important and it it can affect

NOTE Confidence: 0.716728292

 $00:54:54.663 \longrightarrow 00:54:56.718$ antigenicity and development of diabetes.

00:54:56.720 --> 00:54:58.196 And and did you go back so you made

NOTE Confidence: 0.716728292

 $00:54:58.196 \longrightarrow 00:54:59.836$ a comment early that you know the,

NOTE Confidence: 0.716728292

 $00:54:59.840 \longrightarrow 00:55:03.844$ the, the, the, the,

NOTE Confidence: 0.716728292

 $00:55:03.844 \longrightarrow 00:55:07.076$ the 40% of the patients who have autoimmune,

NOTE Confidence: 0.716728292

 $00:55:07.080 \longrightarrow 00:55:09.120$ who have auto antibodies to to,

NOTE Confidence: 0.716728292

 $00.55.09.120 \longrightarrow 00.55.10.760$ to, to the islet cells.

NOTE Confidence: 0.648686158571429

 $00:55:13.280 \longrightarrow 00:55:15.135$ There's only relatively it was

NOTE Confidence: 0.648686158571429

 $00:55:15.135 \longrightarrow 00:55:16.720$ only 40% as opposed to all of them.

NOTE Confidence: 0.648686158571429

 $00:55:16.720 \longrightarrow 00:55:17.875$ And that was one of the reasons

NOTE Confidence: 0.648686158571429

 $00:55:17.875 \longrightarrow 00:55:18.760$ why this looked like this,

NOTE Confidence: 0.648686158571429

 $00{:}55{:}18.760 \dashrightarrow 00{:}55{:}21.560$ one of your conclusions why this was

NOTE Confidence: 0.648686158571429

00:55:21.560 --> 00:55:23.274 different than standard, you know,

NOTE Confidence: 0.648686158571429

 $00:55:23.274 \longrightarrow 00:55:25.330$ type one diabetes did when you went back

NOTE Confidence: 0.648686158571429

 $00:55:25.383 \longrightarrow 00:55:27.357$ and you started looking at all these

NOTE Confidence: 0.648686158571429

00:55:27.357 --> 00:55:29.239 mechanisms in your patient population,

NOTE Confidence: 0.648686158571429

 $00:55:29.240 \longrightarrow 00:55:31.496$ did you, did you look at the difference

00:55:31.496 --> 00:55:33.415 in those patients who had auto

NOTE Confidence: 0.648686158571429

00:55:33.415 --> 00:55:35.353 antibodies and those who did not,

NOTE Confidence: 0.648686158571429

00:55:35.360 --> 00:55:39.200 You know, yeah it's interesting point.

NOTE Confidence: 0.648686158571429

 $00:55:39.200 \longrightarrow 00:55:42.185$ No, to my knowledge,

NOTE Confidence: 0.648686158571429

 $00:55:42.185 \longrightarrow 00:55:45.035$ I don't think we've done that.

NOTE Confidence: 0.648686158571429

00:55:45.040 --> 00:55:47.360 That's an interesting point way to kind of.

NOTE Confidence: 0.648686158571429 00:55:47.360 --> 00:55:47.760 Yeah, yeah.

NOTE Confidence: 0.648686158571429

 $00:55:47.760 \longrightarrow 00:55:49.332$ Yeah, confirm this here,

NOTE Confidence: 0.648686158571429

 $00:55:49.332 \longrightarrow 00:55:50.118$ this hypothesis.

NOTE Confidence: 0.648686158571429 00:55:50.120 --> 00:55:50.266 Yeah. NOTE Confidence: 0.64868615857142900:55:50.266 --> 00:55:50.558 So we

NOTE Confidence: 0.896271925

 $00:55:51.840 \longrightarrow 00:55:53.640$ have a couple of online questions.

NOTE Confidence: 0.896271925

 $00:55:53.640 \longrightarrow 00:55:55.340$ Oh, oh comments that would be

NOTE Confidence: 0.896271925

 $00:55:55.340 \longrightarrow 00:55:56.920$ easy for you to look at it there.

NOTE Confidence: 0.862695698

 $00:55:56.920 \longrightarrow 00:56:00.840$ OK. Anna has a comment.

 $00:56:00.840 \longrightarrow 00:56:03.030$ It'd be helpful to monitor blood

NOTE Confidence: 0.862695698

 $00{:}56{:}03.030 \dashrightarrow 00{:}56{:}05.020$ glucose more carefully in patients

NOTE Confidence: 0.862695698

 $00:56:05.020 \longrightarrow 00:56:07.978$ who have lipase elevation and in some

NOTE Confidence: 0.862695698

 $00:56:07.978 \longrightarrow 00:56:10.208$ patients there's mild elevation in

NOTE Confidence: 0.862695698

 $00:56:10.208 \longrightarrow 00:56:12.639$ glucose before severe presentation.

NOTE Confidence: 0.862695698

00:56:12.640 --> 00:56:14.555 So monitoring them more more

NOTE Confidence: 0.862695698

00:56:14.555 --> 00:56:17.000 carefully may be valuable that that's,

NOTE Confidence: 0.862695698

00:56:17.000 --> 00:56:19.040 yeah, a very good point.

NOTE Confidence: 0.862695698

 $00{:}56{:}19.040 \dashrightarrow 00{:}56{:}21.170$ And then there's a question about

NOTE Confidence: 0.862695698

00:56:21.170 --> 00:56:22.855 racial differences in in toxicity,

NOTE Confidence: 0.862695698

 $00:56:22.855 \longrightarrow 00:56:24.480$ not that I know of

NOTE Confidence: 0.910353418

 $00:56:28.560 \longrightarrow 00:56:31.456$ most. Yeah, I think we, I think that's right.

NOTE Confidence: 0.910353418

 $00:56:31.456 \longrightarrow 00:56:33.760$ Most of our patients are Caucasian.

NOTE Confidence: 0.6970684

 $00:56:36.440 \longrightarrow 00:56:38.678$ Yeah. Time for two.

NOTE Confidence: 0.604493355

 $00:56:38.720 \longrightarrow 00:56:39.960$ Oh, what are we going to do here?

NOTE Confidence: 0.604493355

00:56:39.960 --> 00:56:41.927 You see you should have sent your

00:56:41.927 --> 00:56:44.788 paper to the New England Journal to the

NOTE Confidence: 0.604493355

 $00:56:44.788 \longrightarrow 00:56:46.360$ clinical oncology inside the diabetes.

NOTE Confidence: 0.7047284125

 $00:56:46.960 \longrightarrow 00:56:47.640$ That's right. That's right.

NOTE Confidence: 0.840401586

00:56:53.040 --> 00:56:54.622 That was an amazing talk. Thank you.

NOTE Confidence: 0.840401586

00:56:54.622 --> 00:56:56.799 I had a question about the the,

NOTE Confidence: 0.840401586

 $00:56:56.800 \longrightarrow 00:56:59.840$ the lipase elevation occurring before

NOTE Confidence: 0.840401586

 $00:56:59.840 \longrightarrow 00:57:02.996$ the onset of diabetes as well.

NOTE Confidence: 0.840401586

 $00:57:03.000 \longrightarrow 00:57:04.285$ You showed that it's it's

NOTE Confidence: 0.840401586

 $00:57:04.285 \longrightarrow 00:57:05.313$ common that that occurs,

NOTE Confidence: 0.840401586

 $00:57:05.320 \longrightarrow 00:57:07.408$ but did you look at patients

NOTE Confidence: 0.840401586

 $00:57:07.408 \longrightarrow 00:57:09.288$ that have lipase elevations and

NOTE Confidence: 0.840401586

 $00:57:09.288 \longrightarrow 00:57:11.198$ how often they develop diabetes.

NOTE Confidence: 0.840401586

00:57:11.200 --> 00:57:12.512 We don't routinely follow

NOTE Confidence: 0.840401586

 $00:57:12.512 \longrightarrow 00:57:14.152$ amylocin lipase in patients but

NOTE Confidence: 0.840401586

00:57:14.152 --> 00:57:15.436 occasionally on clinical trials we

 $00:57:15.436 \longrightarrow 00:57:17.120$ do we are required to look at it.

NOTE Confidence: 0.840401586

 $00:57:17.120 \longrightarrow 00:57:19.456$ And so that may be it would be

NOTE Confidence: 0.840401586

 $00:57:19.456 \longrightarrow 00:57:21.072$ interesting to see is it common

NOTE Confidence: 0.840401586

 $00:57:21.072 \longrightarrow 00:57:23.559$ that it it is pre occurring or or

NOTE Confidence: 0.906680966

 $00:57:24.200 \longrightarrow 00:57:25.640$ that's a very good point.

NOTE Confidence: 0.906680966

00:57:25.640 --> 00:57:27.796 I I don't believe we've done the

NOTE Confidence: 0.906680966

 $00:57:27.796 \longrightarrow 00:57:29.408$ analysis that way unless area

NOTE Confidence: 0.906680966

 $00:57:29.408 \longrightarrow 00:57:31.144$ to know them you or Anna you

NOTE Confidence: 0.906680966

 $00:57:31.144 \longrightarrow 00:57:33.157$ know of of doing it differently.

NOTE Confidence: 0.906680966

00:57:33.160 --> 00:57:34.216 It's an interesting approach

NOTE Confidence: 0.906680966

 $00{:}57{:}34.216 --> 00{:}57{:}35.800$ because we use the a lipase

NOTE Confidence: 0.815012178846154

 $00:57:36.120 \longrightarrow 00:57:37.807$ elevated or not often but when we

NOTE Confidence: 0.815012178846154

 $00:57:37.807 \longrightarrow 00:57:39.293$ see elevated amylase or lipase and

NOTE Confidence: 0.815012178846154

 $00:57:39.293 \longrightarrow 00:57:40.715$ patients are asymptomatic we we just

NOTE Confidence: 0.815012178846154

 $00:57:40.715 \longrightarrow 00:57:42.516$ we don't really do anything about it.

NOTE Confidence: 0.815012178846154

 $00:57:42.520 \longrightarrow 00:57:43.352$ We just watch them.

00:57:43.352 --> 00:57:45.408 But if you knew that that had a higher

NOTE Confidence: 0.815012178846154

 $00{:}57{:}45.408 \dashrightarrow 00{:}57{:}46.678$ incidence of going to diabetes,

NOTE Confidence: 0.815012178846154

 $00:57:46.680 \longrightarrow 00:57:48.675$ maybe that's a population you could treat.

NOTE Confidence: 0.27943775 00:57:51.840 --> 00:57:52.200 Yes. NOTE Confidence: 0.895023865

 $00:57:59.080 \longrightarrow 00:58:03.358$ Hello, I'm relatively new to immunobiology,

NOTE Confidence: 0.895023865

 $00:58:03.360 \longrightarrow 00:58:05.106$ but I had a question about

NOTE Confidence: 0.895023865

 $00.58:05.106 \longrightarrow 00.58:07.565$ the slide where you showed the

NOTE Confidence: 0.895023865

 $00{:}58{:}07.565 \rightarrow 00{:}58{:}09.121$ immunohistochemistry results and

NOTE Confidence: 0.895023865

 $00{:}58{:}09.121 \dashrightarrow 00{:}58{:}11.689$ you said that you saw signal or you

NOTE Confidence: 0.895023865

 $00:58:11.689 \longrightarrow 00:58:14.478$ saw standing outside of the eyelids.

NOTE Confidence: 0.895023865

 $00:58:14.480 \longrightarrow 00:58:16.489$ And I was wondering if you could

NOTE Confidence: 0.895023865

 $00:58:16.489 \longrightarrow 00:58:17.720$ further explain the significance

NOTE Confidence: 0.895023865

 $00{:}58{:}17.720 \dashrightarrow 00{:}58{:}19.630$ on why you were excited about

NOTE Confidence: 0.895023865

 $00{:}58{:}19.630 \dashrightarrow 00{:}58{:}21.640$ them being outside of the islets.

NOTE Confidence: 0.778589834666667

 $00:58:21.960 \longrightarrow 00:58:24.272$ Oh yeah, look, I would have been more

 $00:58:24.272 \longrightarrow 00:58:26.598$ excited if they were inside the islets.

NOTE Confidence: 0.778589834666667

 $00{:}58{:}26.600 \to 00{:}58{:}32.044$ But the I think I think the point from

NOTE Confidence: 0.778589834666667

 $00:58:32.044 \longrightarrow 00:58:35.693$ that is that this is not just there's

NOTE Confidence: 0.778589834666667

 $00:58:35.693 \longrightarrow 00:58:39.558$ a broader inflammatory response and

NOTE Confidence: 0.778589834666667

 $00:58:39.560 \longrightarrow 00:58:42.812$ our assumption is that the islets

NOTE Confidence: 0.778589834666667

 $00:58:42.812 \longrightarrow 00:58:46.999$ cells can see the soluble mediators.

NOTE Confidence: 0.778589834666667

 $00:58:47.000 \longrightarrow 00:58:49.830$ So I I think you know we at least in

NOTE Confidence: 0.778589834666667

 $00:58:49.916 \longrightarrow 00:58:52.506$ the type one diabetes field we tend

NOTE Confidence: 0.778589834666667

 $00:58:52.506 \longrightarrow 00:58:55.629$ to think of you know single T cell

NOTE Confidence: 0.778589834666667

 $00:58:55.629 \longrightarrow 00:58:58.276$ clone going into the islet hitting a

NOTE Confidence: 0.778589834666667

 $00{:}58{:}58.276 \dashrightarrow 00{:}59{:}01.140$ single target and I think this is this

NOTE Confidence: 0.778589834666667

 $00:59:01.220 \longrightarrow 00:59:03.760$ is a bigger inflammatory response.

NOTE Confidence: 0.778589834666667

 $00:59:03.760 \longrightarrow 00:59:04.280$ Thank you.

NOTE Confidence: 0.778589834666667

00:59:04.280 --> 00:59:06.016 And I think that's why the lipase

NOTE Confidence: 0.778589834666667

 $00:59:06.016 \longrightarrow 00:59:07.200$ and amylase are elevated.

NOTE Confidence: 0.775977063333333

 $00{:}59{:}10.280 \dashrightarrow 00{:}59{:}11.552$ I have, I have many questions

00:59:11.552 --> 00:59:12.800 but I'll I'll just ask you.

NOTE Confidence: 0.775977063333333

00:59:12.800 --> 00:59:15.520 Had you mentioned or you

NOTE Confidence: 0.70661166

 $00:59:15.520 \longrightarrow 00:59:17.720$ had referred to the potential

NOTE Confidence: 0.70661166

 $00:59:17.720 \longrightarrow 00:59:19.720$ implication of regulatory

NOTE Confidence: 0.793536518181818

 $00{:}59{:}19.720 \dashrightarrow 00{:}59{:}22.378$ CDAT cells and was wondering in

NOTE Confidence: 0.793536518181818

00:59:22.378 --> 00:59:24.520 your comparison between anti PD1,

NOTE Confidence: 0.793536518181818

00:59:24.520 --> 00:59:28.320 anti CTLA 4 differences, did you see any,

NOTE Confidence: 0.793536518181818

 $00:59:28.320 \longrightarrow 00:59:30.300$ no differences, haven't seen it.

NOTE Confidence: 0.793536518181818

 $00:59:30.300 \longrightarrow 00:59:32.600$ And then have you also,

NOTE Confidence: 0.728210011428572

 $00:59:30.880 \longrightarrow 00:59:31.650$ but we're going to look

NOTE Confidence: 0.728210011428572

 $00:59:31.650 \longrightarrow 00:59:32.600$ for it, you know if there

NOTE Confidence: 0.7376229775

 $00:59:32.600 \longrightarrow 00:59:36.440$ are any differences in HLAC allotypes

NOTE Confidence: 0.7376229775

00:59:36.440 --> 00:59:40.040 or HLAU or non canonical MHC.

NOTE Confidence: 0.957117892

 $00:59:42.200 \longrightarrow 00:59:43.960$ That's a good question

NOTE Confidence: 0.957117892

 $00:59:43.960 \longrightarrow 00:59:46.600$ and not that I know of,

 $00:59:46.600 \longrightarrow 00:59:50.510$ but that certainly is something

NOTE Confidence: 0.957117892

00:59:50.510 --> 00:59:55.158 worth doing EG and yeah,

NOTE Confidence: 0.957117892

 $00:59:55.160 \longrightarrow 00:59:56.520$ yeah, for the yeah,

NOTE Confidence: 0.957117892

 $00:59:56.520 \longrightarrow 00:59:57.920$ for the Kurds probably the

NOTE Confidence: 0.8989110425

 $00{:}59{:}58.040 {\: --> \:} 00{:}59{:}59.720$ C and EI think.

NOTE Confidence: 0.7785933

 $01:00:01.800 \longrightarrow 01:00:03.864$ Yeah. Kevin, thank you so

NOTE Confidence: 0.7785933

 $01:00:03.864 \longrightarrow 01:00:04.994$ much for a wonderful talk.