

Editorial

Interleukin 12 in Cancer Treatment

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Interleukin 12 (IL-12) is made up of two disulphide-linked chains, p35 and p40. The cytokine is produced by monocytes, macrophages, myeloid dendritic cells and B cells. It stimulates development of NK cells and TH1 differentiation of CD4⁺ T cells, thus participating in the regulation of the immune response (for a review, see Klein and Hořejší, 1997; Grufman and Kärre, 2000; Jinushi and Tahara, 2009). Recently, the structurally similar but functionally different cytokine IL-23 displaying anti-tumour effects and related to the IL-12 family of cytokines was discovered (Engel and Neurath, 2010). In a variety of experimental tumour models it has been demonstrated that tumour immunogenicity could be enhanced by administration of IL-12 or by gene therapy employing insertion of the *IL12* gene into tumour cells (for a review, see Bubeník, 1996; Bubeník et al., 2000; Bubeník, 2008). IL-12 is known to activate IFN- γ production by NK and T cells and development of cytotoxic T lymphocytes *in vitro* (Grufman and Kärre, 2000; Dranhoff, 2004; Indrova et al., 2008, 2009). IL-12 was also found to have anti-angiogenic activity, apparently through the induction of IFN- γ -inducible protein 10 (Sgadari et al., 1996). Each of these properties of IL-12 may contribute to the anti-tumour activity (Tsong et al., 1998). However, serious toxicity has been associated with the IL-12 systemic administration. Therefore, peritumoral administration of IL-12, expression of the *IL12* genes in the peritumoral milieu after injection of *IL12* gene-modified vaccines, or nanoparticle-based gene delivery (Hallaj-Nezhadi et al., 2010) were considered to help avoid the systemic toxicity. It has also been shown that the *IL12* gene-modified cellular vaccines augment the efficacy of cancer surgery and chemotherapy in experimental models mimicking some human tumours (Indrová et al., 2006, 2008; Malvicini et al. 2009; Bubeník and Šímová, 2009). With regard to the mechanism of these IL-12 effects, it was reported that IL-12 is an indispensable cytokine for activating dendritic cells (Jinushi and Tahara, 2009). It stimulates dendritic cell-mediated cross-presentation of tumour-associated antigens and promotes the TH1 differentiation crucial for tumour defence mechanisms (Engleman 2003; Dran-

hoff, 2004). The administration of DNA encoding human IL-12 by intratumoral injection into patients with metastatic melanoma (Heinzerling et al., 2005), intratumoral injection of a recombinant canarypox virus expressing IL-12 (Triozi et al., 2005), IL-12 plasmid electroporation (Daud et al., 2008), *IL12* gene therapy by peritumoral injection of IL-12-transduced autologous fibroblasts (Kang et al., 2001), vaccination with *IL12* gene-modified autologous melanoma cells (Sun et al., 1998), utilization of IL-12 plasmid/lipopolymer complexes for the treatment of recurrent ovarian cancer (Anwer et al., 2010), treatment of multiple myeloma by subcutaneous IL-12 injections (Lacy et al., 2009), as well as other procedures (for a review see Jinushi and Tahara, 2009) were found to induce local immune responses, to enhance cellular and humoral immune reactions, as well as to prolong survival of patients and to decrease tumour neoangiogenesis.

Taken together, preclinical studies as well as phase I–III clinical trials have clearly demonstrated that local IL-12 therapy and peritumoral administration of the IL-12-based tumour vaccines can induce and enhance tumour immunity and by this way prolong survival of the tumour-bearing individuals. In addition, utilization of the IL-12-based therapeutic procedures as adjuvant treatment together with conventional therapeutic modalities, chemotherapy and surgery also provided promising results. However, many technical problems have still to be solved (Berrando et al., 2009) and the translational therapeutic trials have to be carefully evaluated before the definitive conclusions regarding the actual therapeutic potency of this novel and promising strategies for the management of cancer patients can be drawn and relevant therapeutic protocols can be designed.

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References

- Anwer, K., Barnes, M. N., Fewell, J., Lewis, D. H., Alvarez, R. D. (2010) Phase-I clinical trial of IL-12 plasmid/lipopolymer complexes for the treatment of recurrent ovarian cancer. *Gene Ther.* **17**, 360-369.
- Berraondo, P., Prieto, J., Gonzalez-Aseguinolaza, G. (2009) Advances in interleukin-12 gene therapy for acquired liver diseases. *Curr. Gene Ther.* **9**, 62-71.

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- Bubeník, J. (1996) Gene transfer for immunotherapy of cancer (Editorial). *Gene Ther.* **3**, 944-945.
- Bubeník, J., Den Otter, W., Huland, E. (2000) Local cytokine therapy of cancer: interleukin-2, interferons and related cytokines. *Cancer Immunol. Immunother.* **49**, 116-122.
- Bubeník, J. (2008) Genetically modified cellular vaccines for therapy of human papillomavirus type 16 (HPV16)-associated tumours. *Curr. Cancer Drug Targets* **8**, 180-186.
- Bubeník, J., Šimová, J. (2009) Genetically modified cellular vaccines against human papilloma virus type 16 (HPV16)-associated tumours: adjuvant treatment of minimal residual tumour disease after surgery/chemotherapy. *J. BUON* **14** (Suppl.), S169-S174.
- Daud, A. I., DeConti, R. C., Andrews, S., Urbas, P., Riker, A. I., Sondak, V. K., Munster, P. N., Sullivan, D. M., Ugen, K. E., Messina, J. L., Heller, R. (2008) Phase I trial of interleukin-12 plasmid electroporation in patients with metastatic melanoma. *J. Clin. Oncol.* **26**, 5896-5903.
- Dranoff, G. (2004) Cytokines in cancer pathogenesis and cancer therapy. *Nat. Rev. Cancer* **4**, 11-22.
- Engel, M. A., Neurath, M. F. (2010) Anticancer properties of the IL-12 family – focus on colorectal cancer. *Curr. Med. Chem.* **17**, 3303-3308.
- Engleman, E. G. (2003) Dendritic cell-based cancer immunotherapy. *Semin. Oncol.* **30**, 23-29.
- Grufman, P., Kärre, K. (2000) Innate and adaptive immunity to tumors: IL-12 is required for optimal responses. *Eur. J. Immunol.* **30**, 1088-1093.
- Hallaj-Nezhadi, S., Lotfipour, F., Dass, C. (2010) Nanoparticle-mediated interleukin-12 cancer gene therapy. *J. Pharm. Pharm. Sci.* **13**, 472-485.
- Heinzerling, L., Burg, G., Dummer, R., Maier, T., Oberholzer, P. A., Schultz, J., Elzaouk, L., Pavlovic, J., Moelling, K. (2005) Intratumoral injection of DNA encoding human interleukin 12 into patients with metastatic melanoma: clinical efficacy. *Hum. Gene Ther.* **16**, 35-48.
- Indrová, M., Bieblová, J., Jandlová, T., Vonka, V., Pajtasz-Piasecka, E., Reinis, M. (2006) Chemotherapy, IL-12 gene therapy and combined adjuvant therapy of HPV 16-associated MHC class I-proficient and -deficient tumours. *Int. J. Oncol.* **28**, 253-259.
- Indrová, M., Bieblová, J., Bubeník, J., Reinis, M. (2008) IL-12 immunotherapy of minimal residual disease in murine models of HPV16-associated tumours: induction of immune responses, cytokine production and kinetics of immune cell subsets. *Int. J. Oncol.* **32**, 499-507.
- Indrová, M., Bieblová, J., Rossowska, J., Kuroopka, P., Pajtasz-Piasecka, E., Bubeník, J., Reinis, M. (2009) HPV 16-associated tumours: IL-12 can repair the absence of cytotoxic and proliferative responses of tumour infiltrating cells after chemotherapy. *Int. J. Oncol.* **34**, 173-179.
- Jinushi, M., Tahara, H. (2009) Cytokine gene-mediated immunotherapy: current status and future perspectives. *Cancer Sci.* **100**, 1389-1396.
- Kang, W. K., Park, C., Yoon, H. L., Kim, W. S., Yoon, S. S., Lee, M. H., Park, K., Kim, K., Jeong, H. S., Kim, J. A., Nam, S. J., Yang, J. H., Son, Y. I., Baek, C. H., Han, J., Ree, H. J., Lee, E. S., Kim, S. H., Kim, D. W., Ahn, Y. C., Huh, S. J., Choe, Y. H., Lee, J. H., Park, M. H., Kong, G. S., Park, E. Y., Kang, Y. K., Bang, Y. J., Paik, N. S., Lee, S. N., Kim, S. H., Kim, S., Robbins, P. D., Tahara, H., Lotze, M. T., Park, C. H. (2001) Interleukin 12 gene therapy of cancer by peritumoral injection of transduced autologous fibroblasts: outcome of a phase I study. *Hum. Gene Ther.* **12**, 671-684.
- Klein, J., Hořejší, V. (1997) *Immunology*, p.721 (Blackwell Science, Oxford).
- Lacy, M. Q., Jacobus, S., Blood, E. A., Kay, N. E., Rajkumar, S. V., Greipp, P. R. (2009) Phase II study of interleukin-12 for treatment of plateau phase multiple myeloma (E1A96): a trial of the Eastern Cooperative Oncology Group. *Leuk. Res.* **33**, 1485-1489.
- Malvicini, M., Rizzo, M., Alaniz, L., Piñero, F., García, M., Atorrasagasti, C., Aquino, J. B., Rozados, V., Scharovsky, O. G., Matar, P., Mazzolini, G. (2009) A novel synergistic combination of cyclophosphamide and gene transfer of interleukin-12 eradicates colorectal carcinoma in mice. *Clin. Cancer Res.* **15**, 7256-7265.
- Sgadari, C., Angiolillo, A. L., Tosato, G. (1996) Inhibition of angiogenesis by interleukin-12 is mediated by the interferon-inducible protein 10. *Blood* **87**, 3877-3882.
- Sun, Y., Jurgovsky, K., Möller, P., Alijagic, S., Dorbic, T., Georgieva, J., Wittig, B., Schadendorf, D. (1998) Vaccination with IL-12 gene-modified autologous melanoma cells: preclinical results and a first clinical phase I study. *Gene Ther.* **5**, 481-490.
- Triozi, P. L., Strong, T. V., Bucy, R. P., Allen, K. O., Carlisle, R. R., Moore, S. E., Lobuglio, A. F., Conry, R. M. (2005) Intratumoral administration of a recombinant canarypox virus expressing interleukin 12 in patients with metastatic melanoma. *Hum. Gene Ther.* **16**, 91-100.
- Tsung, K., Meko, J. B., Tsung, Y. L., Peplinski, G. R., Norton, J. A. (1998) Immune response against large tumors eradicated by treatment with cyclophosphamide and IL-12. *J. Immunol.* **160**, 1369-1377.