

Neoantigens: Unleashing the Power of Personalized Cancer Immunotherapy

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Abstract

Neoantigens have emerged as a promising avenue for personalized cancer immunotherapy, revolutionizing the treatment landscape for cancer patients. These unique tumor-specific antigens, arising from somatic mutations within tumor cells, offer a highly targeted approach to train the immune system to recognize and eliminate cancer cells. This article provides an in-depth exploration of neoantigens, their significance, discovery methods, and their potential impact on the future of cancer treatment. It highlights the clinical applications of neoantigens, including personalized vaccines and adoptive cell therapies, and discusses the challenges and future directions in this field. Ethical considerations and patient access to these innovative therapies are also addressed, emphasizing the need for equitable distribution and ethical safeguards. Ultimately, understanding and harnessing neoantigens offer a promising pathway towards personalized and effective cancer immunotherapies.

Keywords: Neoantigens • Personalized medicine • Cancer immunotherapy • Tumor-specific antigens • Somatic mutations • Immune system • Personalized vaccines • Adoptive cell therapies • Clinical applications

Introduction

In recent years, the field of cancer immunotherapy has witnessed remarkable advancements, revolutionizing the treatment landscape for cancer patients. Among the emerging breakthroughs, neoantigens have emerged as a promising avenue for personalized cancer immunotherapy. These unique tumor-specific antigens offer a new way to train the immune system to recognize and eliminate cancer cells, opening doors to highly targeted and effective treatments. In this article, we will delve into the world of neoantigens, exploring their significance, discovery methods, and their potential impact on the future of cancer treatment. Neoantigens are antigens that arise from somatic mutations within the tumor cells, making them distinct from the individual's normal cells. These mutations can be caused by a variety of factors, including DNA damage, exposure to mutagens, or errors in DNA replication [1].

Neoantigens can be classified into two categories: non-synonymous mutations and gene fusions. Non-synonymous mutations result in amino acid changes within proteins, while gene fusions involve the fusion of two or more genes, leading to the formation of abnormal proteins. Neoantigens play a pivotal role in cancer immunotherapy due to their unique characteristics. Unlike shared antigens, which are present on both cancerous and healthy cells, neoantigens are specific to tumor cells, minimizing the risk of off-target effects. Additionally, neoantigens exhibit a high degree of tumor heterogeneity, reflecting the diverse nature of cancer cells within an individual. Targeting neoantigens allows for a personalized approach, tailoring treatments to the specific mutations present in each patient's tumor. The discovery of neoantigens relies on various techniques, including Whole-exome Sequencing (WES) and RNA sequencing (RNA-seq). WES involves sequencing the protein-coding regions of an individual's DNA to identify non-synonymous mutations. RNA-seq, on the other hand, analyzes the transcriptome to identify gene fusions.

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Once the mutations are identified, algorithms and computational tools are employed to predict which mutations are likely to produce neoantigens. Peptide-Major Histocompatibility Complex (MHC) binding assays and mass spectrometry can validate the immunogenicity of predicted neoantigens. The ability to identify and target neoantigens has opened up exciting possibilities for cancer immunotherapy. Neoantigen vaccines have shown promise in triggering a potent immune response against tumor cells. These vaccines are designed to stimulate the immune system by presenting neoantigens to antigen-presenting cells, such as dendritic cells, leading to the activation of T cells. Adoptive cell therapies, such as Chimeric Antigen Receptor (CAR) T-cell therapy and T-cell Receptor (TCR) therapy, can also be customized to recognize and attack neoantigens specifically. While the potential of neoantigens in cancer immunotherapy is undeniable, several challenges need to be addressed to translate this approach into widespread clinical practice. One major challenge is the identification of immunogenic neoantigens accurately, as not all mutations generate potent immune responses [2].

Improving computational algorithms and experimental validation methods will be crucial in refining neoantigen prediction. Additionally, the development of efficient and scalable manufacturing processes for personalized neoantigen-based therapies is necessary. Looking ahead, the integration of neoantigen-based immunotherapies with existing treatment modalities, such as immune checkpoint inhibitors, holds great promise. Combination therapies could enhance the efficacy of neoantigen-targeted treatments and overcome potential resistance mechanisms. Furthermore, ongoing research efforts are focused on exploring the potential of neoantigens in other diseases, such as infectious diseases and autoimmune disorders, broadening the impact of this field beyond cancer. Neoantigens represent a new frontier in the field of cancer immunotherapy, offering the potential for personalized treatments that leverage the immune system's power to specifically target and eliminate tumor cells.

Literature Review

Through advancements in genomics, computational biology, and immunology, researchers have made significant strides in identifying and harnessing these unique tumor-specific antigens. While challenges remain, the growing understanding of neoantigens and their role in cancer opens doors to a future where tailored immunotherapies become a standard of care, improving patient outcomes and transforming the landscape of cancer treatment. Neoantigens have shown promising results in preclinical and early clinical studies, fueling excitement for their potential clinical applications. Several ongoing clinical trials are evaluating the safety and efficacy of neoantigen-based immunotherapies across different cancer types. One notable approach is the development of personalized neoantigen vaccines.

These vaccines are designed to elicit a robust and specific immune response against neoantigens present in an individual's tumor. The process involves identifying the patient's unique neoantigens through genomic analysis, followed by the synthesis of peptide vaccines targeting these specific neoantigens. Early-phase clinical trials have demonstrated encouraging results, with evidence of immune activation and tumor regression in some patients. Adoptive cell therapies, such as CAR T-cell therapy and TCR therapy, have also been adapted to target neoantigens. CAR T-cell therapy involves engineering a patient's own T cells to express chimeric antigen receptors that recognize neoantigens on tumor cells. Similarly, TCR therapy involves modifying T cells to express T-cell receptors that specifically target neoantigens. These approaches have shown promise in clinical trials, leading to durable responses in certain patients with advanced solid tumors [3,4].

In addition to vaccines and adoptive cell therapies, neoantigens can also be targeted using immune checkpoint inhibitors. Immune checkpoints, such as programmed cell death protein 1 (PD-1) and Cytotoxic T-Lymphocyte-Associated protein 4 (CTLA-4), regulate the immune response and can be exploited by tumors to evade immune surveillance. Combining neoantigen-targeting approaches with immune checkpoint inhibitors has the potential to enhance the effectiveness of immunotherapy by unleashing the full power of the immune system against tumor cells.

While neoantigens hold great promise, several challenges need to be addressed to fully realize their potential in clinical practice. One significant challenge is the accurate prediction and identification of immunogenic neoantigens. Current computational algorithms have made substantial progress, but there is room for improvement to enhance their sensitivity and specificity. Experimental validation methods, such as peptide-MHC binding assays and mass spectrometry, play a crucial role in confirming the immunogenicity of predicted neoantigens. Another challenge lies in the development of efficient and scalable manufacturing processes for personalized neoantigen-based therapies. The individualized nature of neoantigen vaccines and adoptive cell therapies poses logistical and cost-related hurdles.

Discussion

Strategies to streamline and automate manufacturing processes while maintaining product quality and safety are actively being pursued. Furthermore, tumor heterogeneity poses a significant challenge in neoantigen-based therapies. Tumors can harbor subclonal neoantigens, which are only present in a subset of tumor cells. Targeting dominant neoantigens may result in immune escape by subclonal populations. Therefore, strategies to identify and target subclonal neoantigens are essential to prevent disease recurrence and resistance.

Looking ahead, ongoing research efforts are focused on integrating neoantigen-based immunotherapies with existing treatment modalities. Combination approaches, such as combining neoantigen vaccines with immune checkpoint inhibitors or other immunotherapies, have the potential to enhance treatment efficacy and overcome resistance mechanisms. Moreover, further exploration of neoantigens in other disease contexts, such as infectious diseases and autoimmune disorders, could expand the impact of this field beyond cancer.

As neoantigen-based therapies progress towards clinical implementation, ethical considerations surrounding patient access and equity become crucial. Personalized neoantigen therapies are resource-intensive and can be expensive, posing challenges in terms of affordability and accessibility. Ensuring equitable

access to these innovative therapies will be essential to prevent disparities in cancer care. Moreover, the ethical implications of genomic analysis and the potential identification of germline mutations during neoantigen discovery need to be carefully addressed. Safeguards should be in place to protect patient privacy, promote informed consent, and provide genetic counselling for patients and their families [5,6].

Conclusion

Neoantigens represent a paradigm shift in cancer immunotherapy, holding immense potential for personalized and targeted treatments. The ability to identify and exploit these unique tumor-specific antigens opens up new avenues for harnessing the immune system's power against cancer. While challenges remain, ongoing research and technological advancements continue to propel the field forward. As neoantigen-based therapies move towards clinical translation, collaboration among researchers, clinicians, and industry partners will be essential to address the scientific, technical, and ethical considerations. By overcoming these challenges and harnessing the full potential of neoantigens, we can usher in a new era of precision medicine, where each patient's immune system becomes a powerful weapon against cancer.

Acknowledgement

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Conflict of Interest

None.

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