



Initial experience with the bispecific anti-CEA anti-CD3 antibody and its expected impact on future treatment for patients with colorectal cancer

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In this podcast, Editor Laurids Poulsen speaks to Guillem Argilés (Gastrointestinal Malignancies Program, Vall d'Hebron University Hospital, Barcelona, Spain) about the new therapeutic bispecific anti-carcinoembryonic antigen (CEA) anti-CD3 antibody carcinoembryonic antigen-T-cell bispecific antibody (CEA-TCB) in colorectal cancer.

Colorectal cancer has a strong interaction with the immune system, as underlined by the high prognostic impact of tumour infiltrating lymphocytes in the tumour core, as well as the infiltration margin in the localised setting. However, in the metastatic scenario, the vast majority of these tumours—the 95% lacking deficiencies in the mismatch repair system—demonstrated to be immune-elusive. The CEA-TCB has a 2:1 binding ratio, with one domain of the antibody binding directly to CD3 on T cells, while the remaining two binding domains simultaneously bind to CEA molecules on the tumour cells. The CEA-TCB induces T-cell engagement and activation, with

T-cell proliferation at the site of activation. Two phase I trials with CEA-TCB have been presented this year, one as a single-drug trial and the other in combination with the programmed death-ligand 1 (PD-L1) inhibitor atezolizumab, with promising results. The two studies are debated regarding inclusion, results and toxicity. Finally, the future of CEA-TCB and its impact on colorectal cancer treatment are discussed.

Competing interests None declared.

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