

Supplemental material

An overview of statistical methods for biomarkers relevant to early clinical development of cancer immunotherapies

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Examples of biomarkers for cancer immunotherapies

Table 1: Biomarker examples

Biomarker	Measurement method	Exemplary findings & considerations
PD-L1	IHC	• May be driven by IFN gamma following T-cell infiltration (Shuming Chen et al., 2019) • Imperfect, but commonly used biomarker for selecting patients for CPI therapy across tumor types (Doroshow et al., 2021; Vaddepally et al., 2020) • Different companion diagnostic assays with different PD-L1 antibodies, thresholds of positivity, and scoring systems as challenge (Tsao et al., 2018)
TMB	DNA sequencing (WES, targeted gene panels)	• May indicate presence of immunogenic mutation-associated neoantigens (Fumet et al., 2020; Wei et al., 2018) • Improved response with anti-PD1/PD-L1 therapies (Goodman et al., 2017; Rizvi et al., 2015; Snyder et al., 2014) • Lack of a standardized approach to determine TMB
dMMR/MSI	IHC, qPCR, NGS	• May indicate presence of immunogenic mutation-associated neoantigens (Germano et al., 2017) • Efficacy of CPI has been demonstrated in MSI-H/dMMR colorectal cancers, endometrial cancers and gastric cancers leading to approval of Pembrolizumab in MSI-H/dMMR tumors (Le et al., 2015; Overman et al., 2017) • Lack of standardization in microsatellite panels and thresholds

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Biomarker	Measurement method	Exemplary findings & considerations
Gene expression profiling (e.g. T effector, IFN-g based signatures)	RNA sequencing	• Can predict response to CPI (Ayers et al., 2017; Danaher et al., 2018; Fehrenbacher et al., 2016; Jamieson et al., 2017) • Can be easily applied to existing datasets • Lack of resolution & spatial context (may be overcome by emerging single cell technologies, deconvolution algorithms or spatial transcriptomic approaches)
Tumor infiltrating lymphocytes (TIL) (e.g. CD8 density, PD-1, Granzyme B, tertiary lymphoid structures)	IHC, IF	• Immunophenotyping of tumors may provide crucial novel prognostic information and is associated with improved outcome (Cabrita et al., 2020; Galon et al., 2012; Zeng et al., 2016) • mIHC/IF assays outperformed other biomarkers including PD-L1, IHC, TMB, and GEP (Lu et al., 2019) • Assessment of spatial relationships and protein coexpression on specific cellular subsets as main strength (multimarker approaches)
Peripheral T cell subsets (e.g. proliferating, Teff/mem, PD-1+)	Flow cytometry, CyTOF	• The first-week proliferative response of peripheral blood PD-1+CD8+ T cells predicts the response to anti-PD-1 therapy in solid tumors (Kim et al., 2019) • Functional systemic CD4 immunity is required for clinical responses to PD-L1/PD-1 blockade therapy. (Zuazo et al., 2019) • Multi-marker approaches key to precisely assess specific cellular subsets & co-expression patterns • Limited sample stability & low event counts for rare subpopulations as main challenges along others

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Biomarker	Measurement method	Exemplary findings & considerations
Plasma cytokines (e.g. IFN- γ , IL-6)	Immuno-assay	- Increased levels of IFN-γ is associated with improved outcome to CPI (M. Wang et al., 2021) - Anti-cytokine drug, tocilizumab has been a cornerstone in the treatment of CAR-T-associated CRS through its ability to dampen CRS (Genentech, 2017) - Unlikely a single cytokine will be sufficient to predict immunotherapy response and irAEs for the complexity of TME and interaction between cytokines
Blood cell populations (lymphocyte, neutrophil counts)	Hematology	- A baseline signature of a low absolute neutrophil count, high absolute lymphocyte counts and high absolute eosinophil count was associated with a better outcome of nivolumab treatment (Tanizaki et al., 2018) - Clinical routine assessment broadly available
Inflammatory mediators (e.g. CRP)	Blood chemistry, Immuno-assays	- C-reactive protein reduction post treatment is associated with improved survival in atezolizumab treated NSCLC patients (Nardone et al., 2021; Patil et al., 2021) - Clinical routine assessment broadly available
T cell repertoire	TCR sequencing	TCR repertoire diversity of peripheral PD-1+CD8+ T cells predicts clinical outcomes after immunotherapy in patients with (Han et al., 2020)
Tumor markers (e.g. CA125, PSA)	Immuno-assay	PSA response as potential surrogate efficacy endpoint in prostate cancer treated e.g. with CPI (Powers et al., 2020)

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Biomarker	Measurement method	Exemplary findings & considerations
ctDNA	DNA sequencing (WES, targeted gene panels)	• Early changes in plasma ctDNA levels can predict response to CPI in NSCLC (Vega et al., 2022) • Need to prove clinical utility, decreasing turnaround time, decreasing costs, and improving sensitivity and specificity for MRD (Dang et al., 2022)
Gene mutations (e.g. EGFR, BRCA)	DNA sequencing (WES, targeted gene panels)	• Activating EGFR mutations have been associated with dramatic responses to first-generation EGFR-TKIs • NSCLC patients with wild-type EGFR or a KRAS mutation derived a significant OS benefit from nivolumab (Borghaei et al., 2015)
Others	Multiple approaches	• Imaging (e.g. PET, CT) • Gene polymorphisms (e.g. HLA, KIR) • Circulating tumor cells • Metabolites • Microbiome

List of statistical methods discussed in the manuscript

Table 2: List of statistical methods discussed in the manuscript

Method	Reference
Section 3.1 Statistical modelling of biomarker data	
Box-Cox transformation	Box et al., 1964
Logit transformation	Warton et al., 2011
Generalized linear models	McCullagh et al., 2019
Detection limits	Helsel, 2005
Measurement error	R. J. Carroll et al., 1995
Section 3.2 Dose Finding	
Dose escalation design for cytokine release syndrome	Dejardin et al., 2024; Gerard et al., 2021; Xu et al., 2021
Dose escalation with late toxicities	Wages et al., 2018
Dose escalation with efficacy optimization	Wages et al., 2018
MCPMOD	Bretz et al., 2005; Nie et al., 2016
EMACS model	Seber et al., 2003
Section 3.3 Prognostic baseline markers and models	
Model development, validation, and reporting	Collins et al., 2015; Harrell, 2015; E. Steyerberg, 2019
Sample size calculation	Riley et al., 2020
Lasso, boosting, Bayesian model averaging for model development	Harrell, 2015
Spline models	Harrell, 2015
Cut-point selection	Polley et al., 2021; E. Steyerberg, 2019, chapter 16
Performance measures (Brier score, c-index, calibration plots)	E. Steyerberg, 2019, chapter 15
Cross-validation	E. W. Steyerberg, 2018
Phases of biomarker/prognostic model development	Moons et al., 2009; Ou et al., 2021
Section 3.4 Predictive baseline biomarker	
Subgroup analysis in clinical trials	Alosh et al., 2017
Data-driven subgroup analysis	Lipkovich et al., 2017
Credibility criteria for subgroups	Schandelmaier et al., 2020
Adaptive enrichment trials	Nguyen Duc et al., 2021
Section 3.4 Models for association between on-treatment biomarkers and clinical endpoints	

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Immortal-time bias	Anderson et al., 1983; Mantel et al., 1974
Landmark analysis	Van Houwelingen, 2007
Joint models	Rizopoulos, 2012
Multi-state models	Putter et al., 2007
Principal stratification, comparison between subpopulations based on on-treatment biomarkers	Bornkamp et al., 2021; Kong et al., 2022
Section 3.5 Hypothesis generation and high-dimensional statistics	
Model Selection	Khan et al., 2021
Multiple testing correction	Dudoit et al., 2008
Borrowing across biomarkers	Smyth, 2004
Unsupervised learning	Monti et al., 2003; Städler et al., 2017
3.6 PK/PD modeling	
Models for impact of dose on immune cell subsets	X. Chen et al., 2019; Netterberg et al., 2019; Ribba et al., 2018; Silber Baumann et al., 2018
Mechanistic approaches	Valentinuzzi et al., 2020

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