

SAXOCELL®



**CLUSTERS
4 FUTURE**
Innovationsnetzwerke
für unsere Zukunft

GEFÖRDERT VOM



Bundesministerium
für Bildung
und Forschung

LIVING DRUGS

PRECISION THERAPY CLUSTER FOR SAXONY

Welcome to our

SaxoCell Consortium Meeting 2022

20th June 2022 | CRTD Dresden

Ezio Bonifacio, Ulrike Köhl, Martin Bornhäuser, Uwe Platzbecker



TECHNISCHE
UNIVERSITÄT
DRESDEN



UNIVERSITÄT
LEIPZIG



Fraunhofer
IZI



KLINIKUM CHEMNITZ
gGmbH

Partners from Research and Industry

Research



Universitätsklinikum Leipzig
Medizin ist unsere Berufung.

Universitätsklinikum Carl Gustav Carus
DIE DRESDNER.

Fraunhofer IZI

TECHNISCHE UNIVERSITÄT DRESDEN

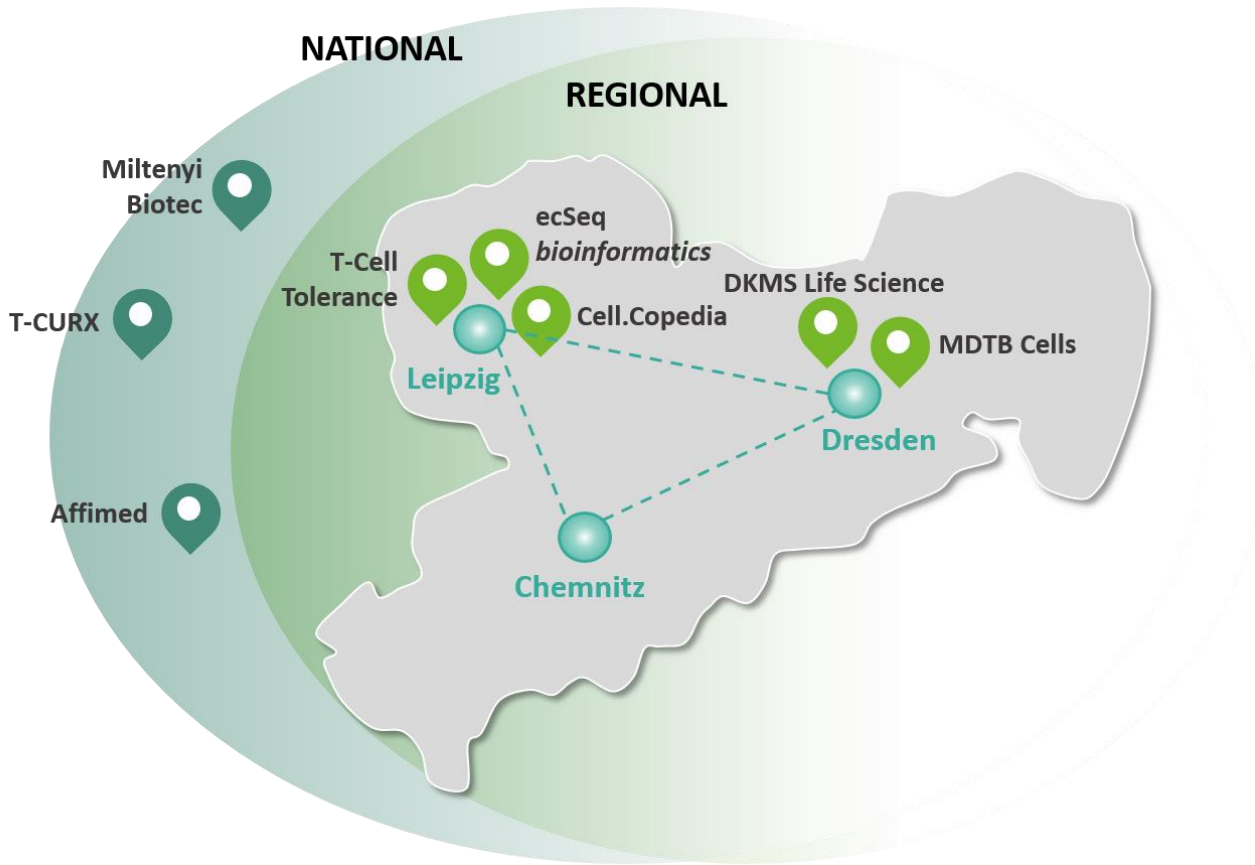
UNIVERSITÄT LEIPZIG

hZDR
HELMHOLTZ ZENTRUM DRESDEN ROSSENDORF

KLINIKUM CHEMNITZ
gGmbH

38 academic PIs

Industry



NATIONAL

REGIONAL

Miltenyi Biotec

T-CURX

Affimed

Leipzig

Dresden

Chemnitz

ecSeq bioinformatics

T-Cell Tolerance

Cell.Copedia

DKMS Life Science

MDTB Cells

Vision

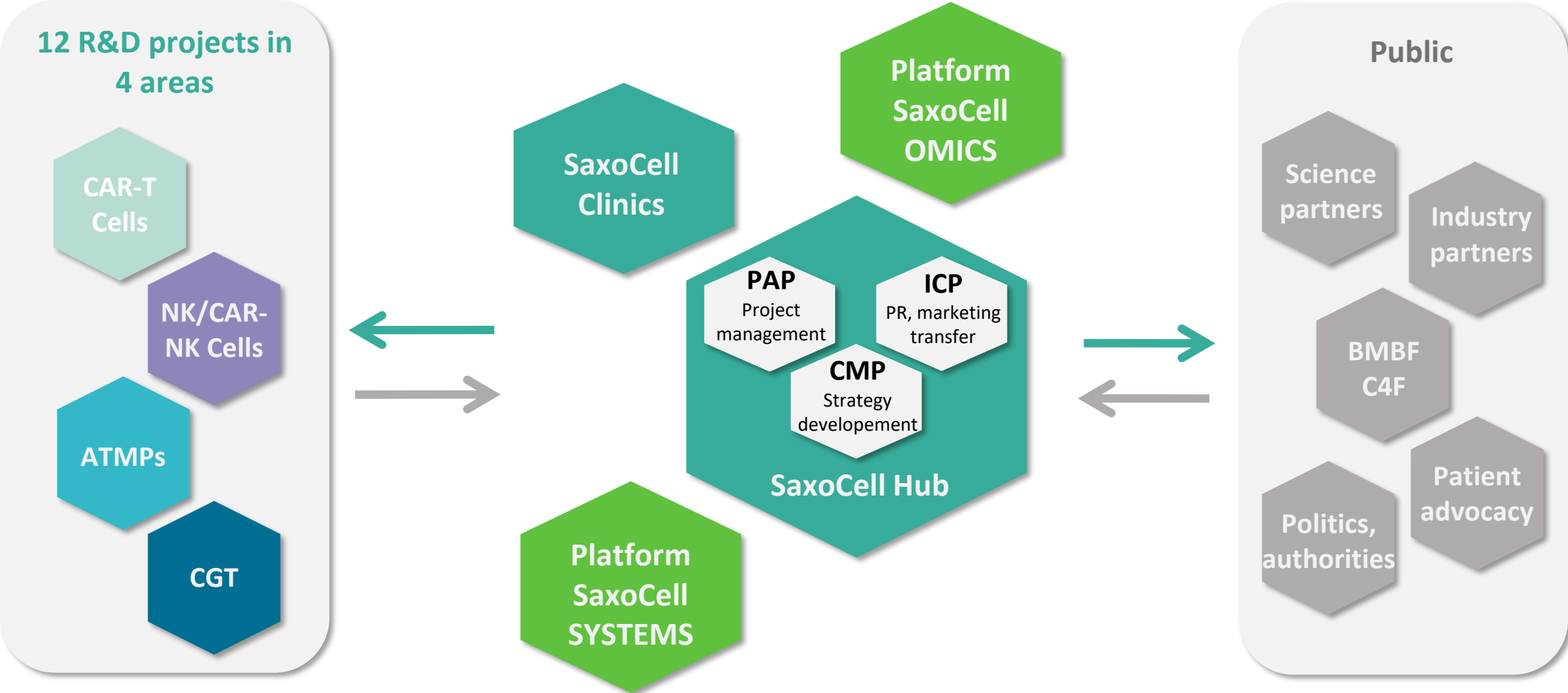


SaxoCell will bring **efficient, safe** and **affordable** autologous and allogeneic **Cell and Gene Therapies** (CGTs) to patients who suffer from serious disease.

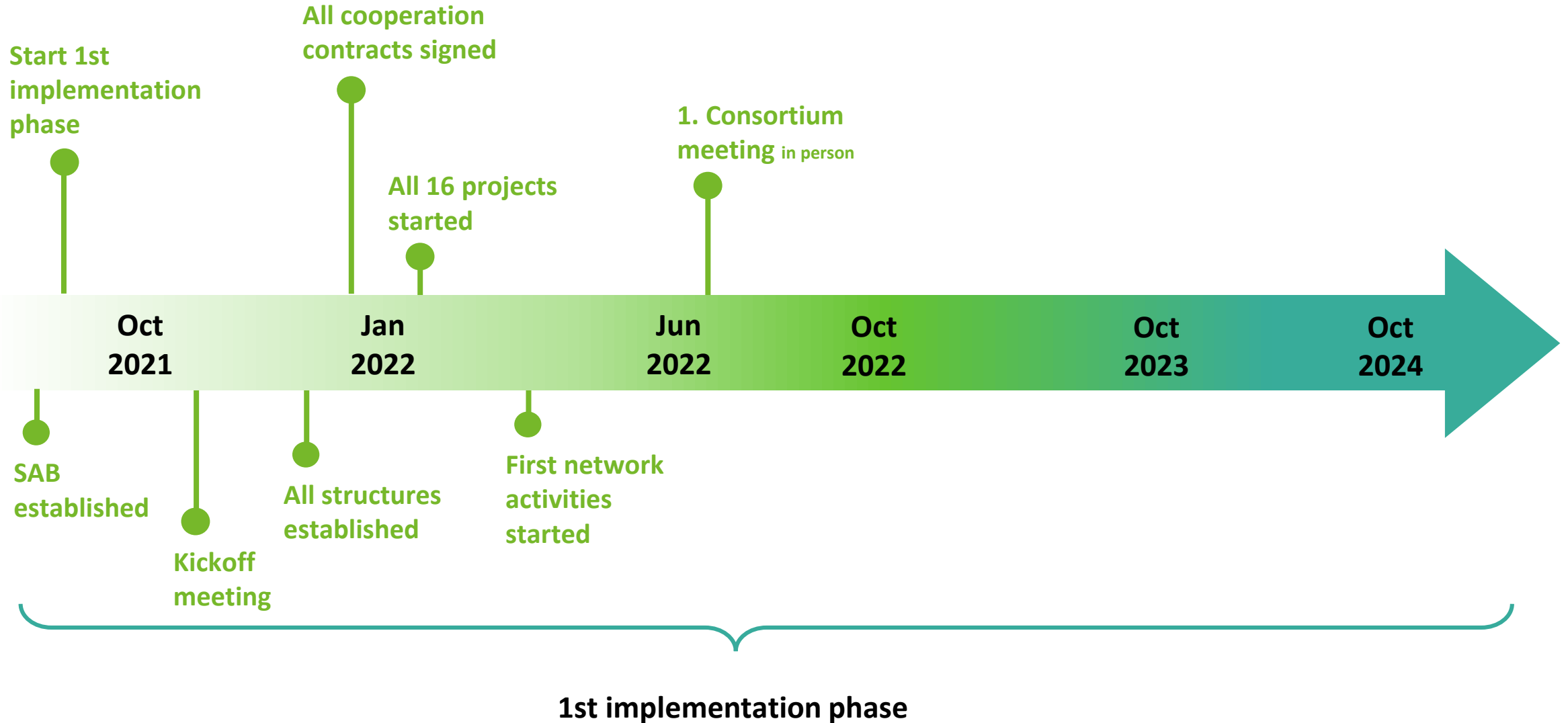
Core Partners



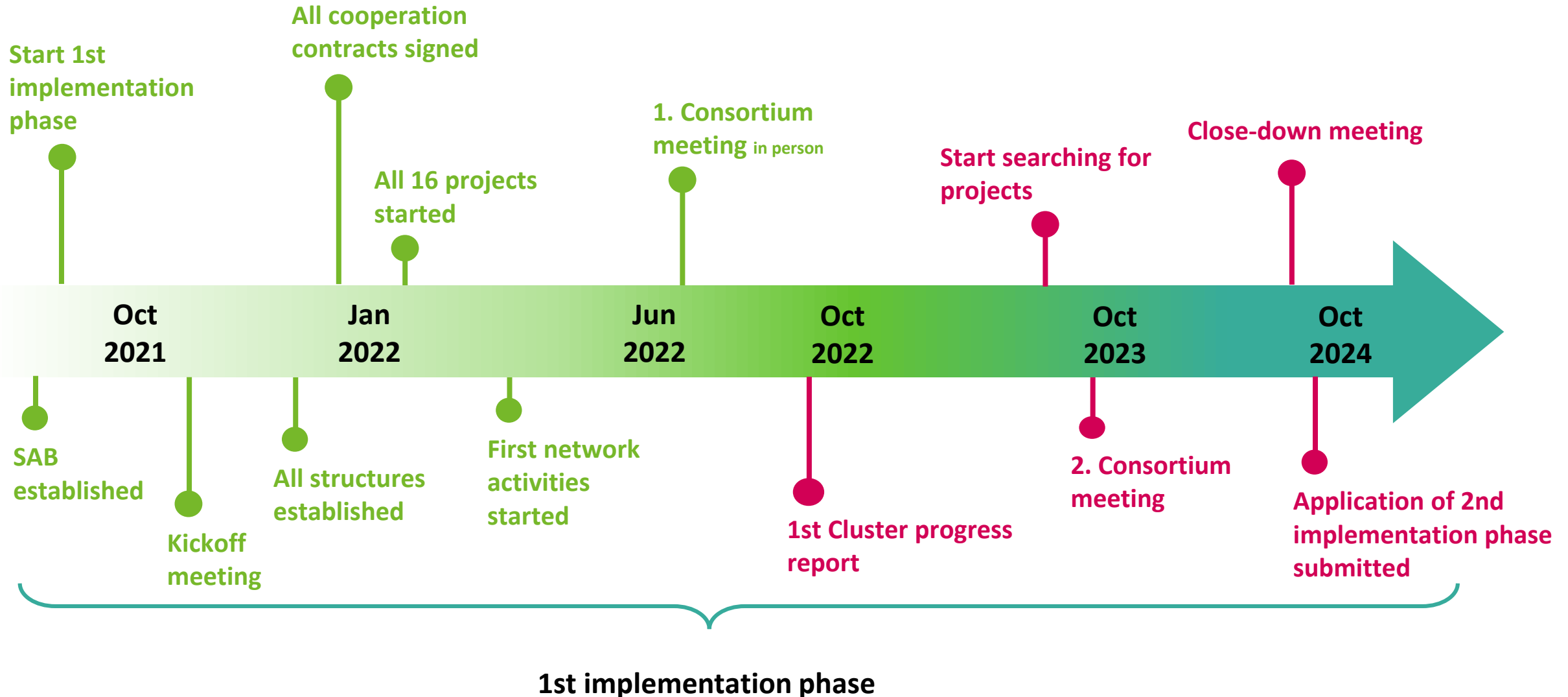
Cluster-Structure



Activities so far

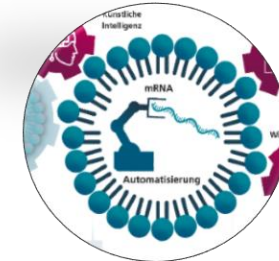


Activities so far and next steps



The region starts growing

- 1st start-up **RecTech** established, winner of the Science 4 award; Buchholz
- **ERC proof-of-Concept-grant**; Sieweke
- Fraunhofer lighthouse project: Automation technologies for the production of mRNA-based vaccines and gene and cell therapeutics; Köhl, Fricke
- Fraunhofer **ICON Grant** “Natural killer cells for allogeneic cancer Immunotherapy” (DesingerNK) with University Hospital Oslo; Köhl, Fricke, Blache
- **Life Center for Medicine Innovation (CMI)** is one of the 6 finalists in the competition for 'Großforschungszentrum' of BMBF; Meiler, Neumuth, Beck-Sickinger, Köhl



Overall time schedule



1st implementation phase

2021-2024

20% industry contribution

2nd implementation phase

2024-2027

35% industry contribution

3rd implementation phase

2027-2030

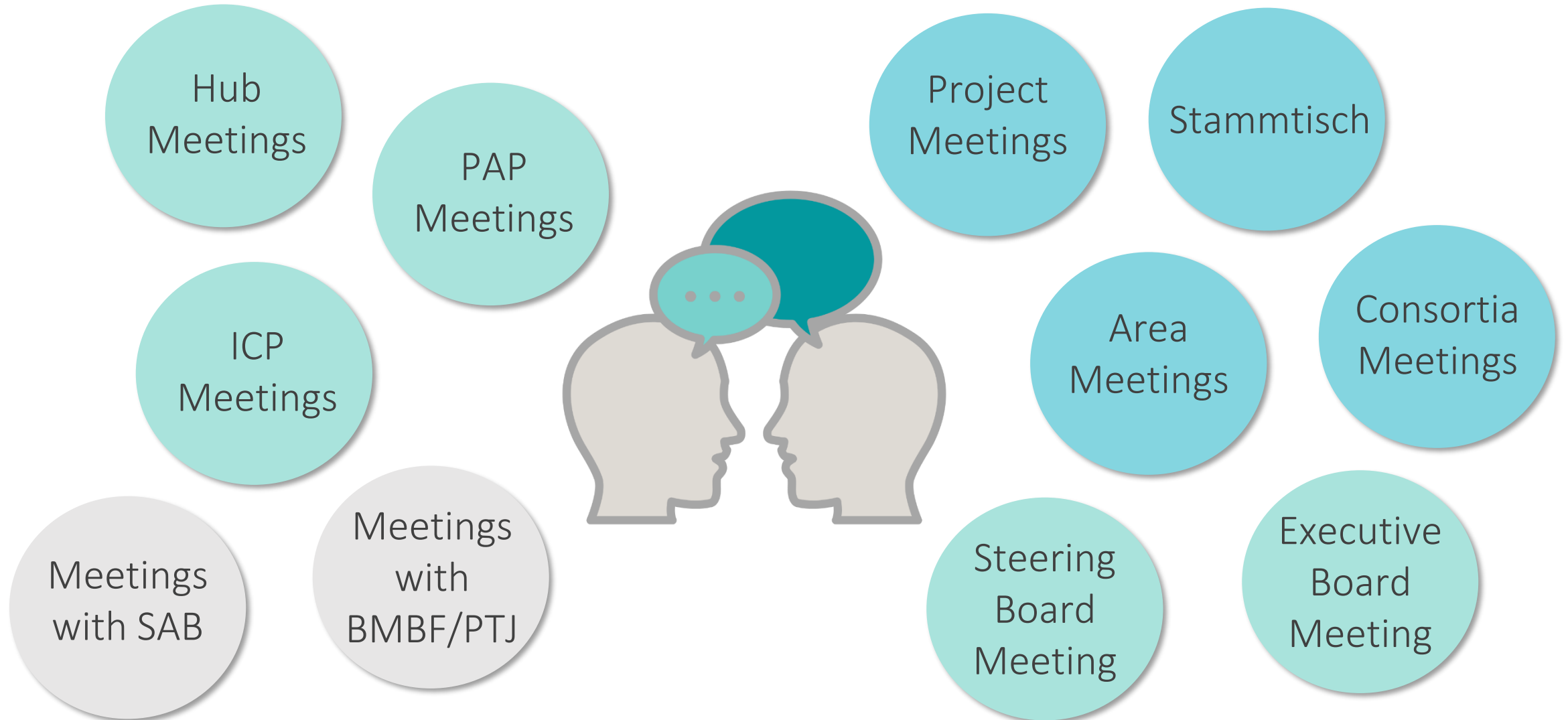
50% industry contribution

BMBF plans to avoid time gap between 1st and 2nd funding period
The jury will read all of the clusters' annual progress reports and provide feedback in between!

News from BMBF C4F meeting

- The BMBF/PtJ suggest to **meet once a year** for an exchange
- BMBF offered **additional cross topic** and **cross networking workshops** for all clusters
- Acquisition of **additional funding** to the cluster is important
- It is important to achieve **benefits for the region**
- BMBF will try to be more **flexible** with parts in the funding to react on new ideas or aspects in the future
- Interest from other clusters (e.g. **Proxidrug**) for **closer collaboration** (transfer, VC contacts, workshops,...) and cross-clustering

Communication is the  of the Cluster!



AGENDA

CONSORTIUM MEETING 2022



Time	Topic	Responsible
10:00 – 10:20	Welcome	Ulrike Köhl + Ezio Bonifacio
10:20 – 10:55	Key note – Gene editing	Frank Buchholz 30min + 5min discussion
10:55 – 11:10	Coffee break	All
11:10 – 13:00	Project Pitches	5min + 5min discussion each
13:00 – 13:05	Group picture	All
13:05 – 14:00	Lunch Break	All
14:00 – 14:50	Presentation of Platforms and Hub	5min + 2min discussion
14:50 – 16:15	Area Meetings	All
16:15 – 16:35	Coffee Break	All
16:35 – 16:40	Results and Discusson Area 1	Area 1
16:40 – 16:45	Results and Discusson Area 2	Area 2
16:45 – 16:50	Results and Discusson Area 3	Area 3
16:50 – 16:55	Results and Discusson Area 4	Area 4
16:55 – 17:15	Discussion	All
17:15 – 17:30	Wrap up, outlook and Goodbye	All
17:30	Get together	All

KEY NOTE – Gene Editing



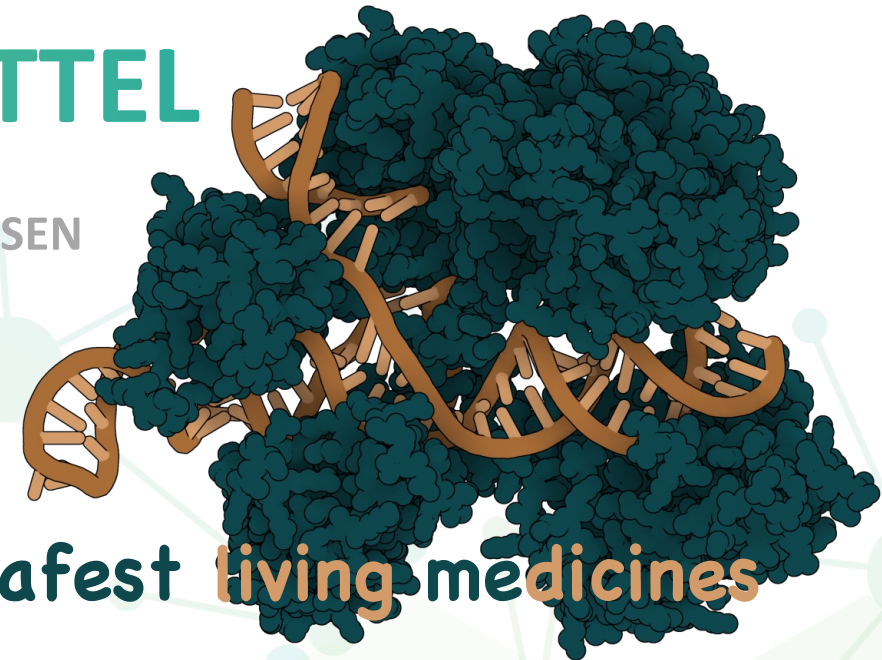
**Genome editing
tools to make the
best and safest
living medicines**

Frank Buchholz
frank.buchholz@tu-dresden.de



LEBENDE ARZNEIMITTEL

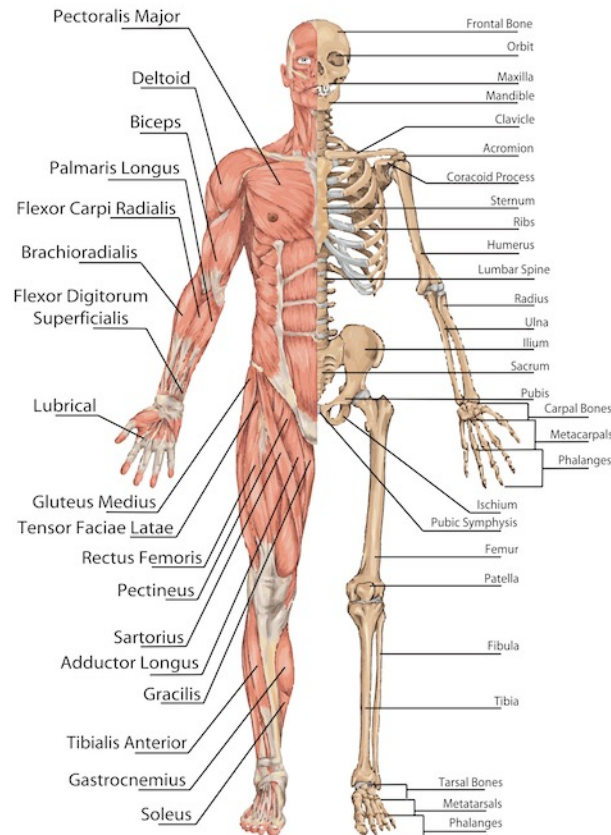
PRÄZISIONSTHERAPIE-CLUSTER IN SACHSEN



Genome editing tools to make the best and safest **living medicines**

From Surgery to Genome Surgery

“Anatomy is the Basis of Surgery”



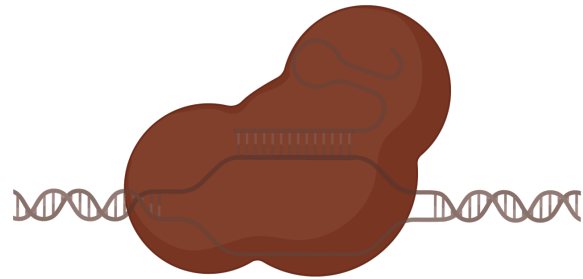
“Genomics is the Basis of Genome Surgery”



↓

We know the genetic basis for many diseases, but how can we repair them?

The CRISPR revolution



CRISPR Knockout / In



RNA-based programmable nuclease



Great research tool, but...

Letter | [Published: 18 May 2020](#)

Cas9 activates the p53 pathway and selects for p53-inactivating mutations

Article | [Open Access](#) | [Published: 06 October 2021](#)

Whole chromosome loss and genomic instability in mouse embryos after CRISPR-Cas9 genome editing

Brief Communications Arising | [Published: 08 August 2018](#)

Large deletions induced by Cas9 cleavage

NEWS | 15 July 2021

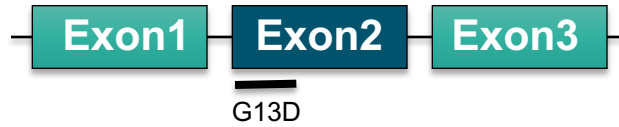
CRISPR therapies march into clinic, but genotoxicity concerns linger

Article | [Open Access](#) | [Published: 11 November 2021](#)

A systematic genome-wide mapping of oncogenic mutation selection during CRISPR-Cas9 genome editing

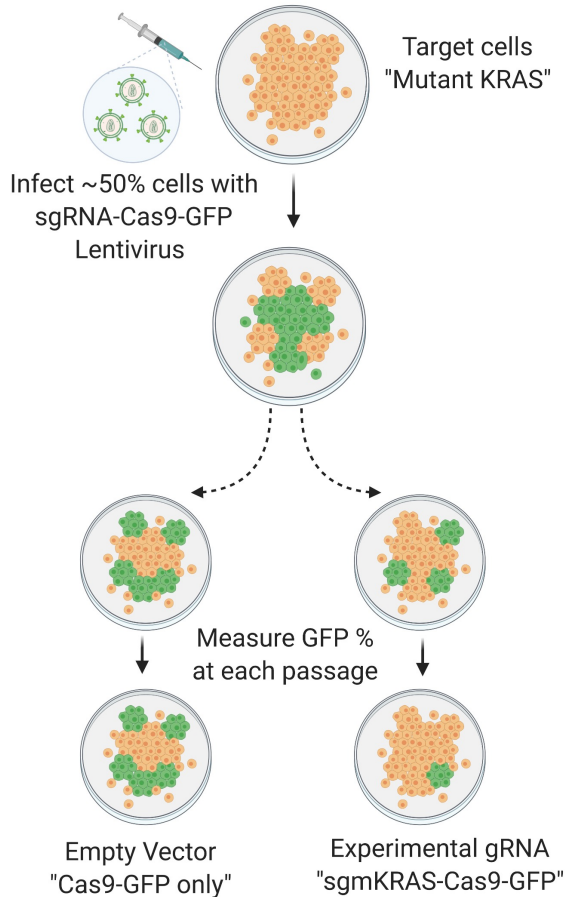
... not ideal for (cell) therapies

Inactivation of KRAS mutations with CRISPR/Cas9 nuclease

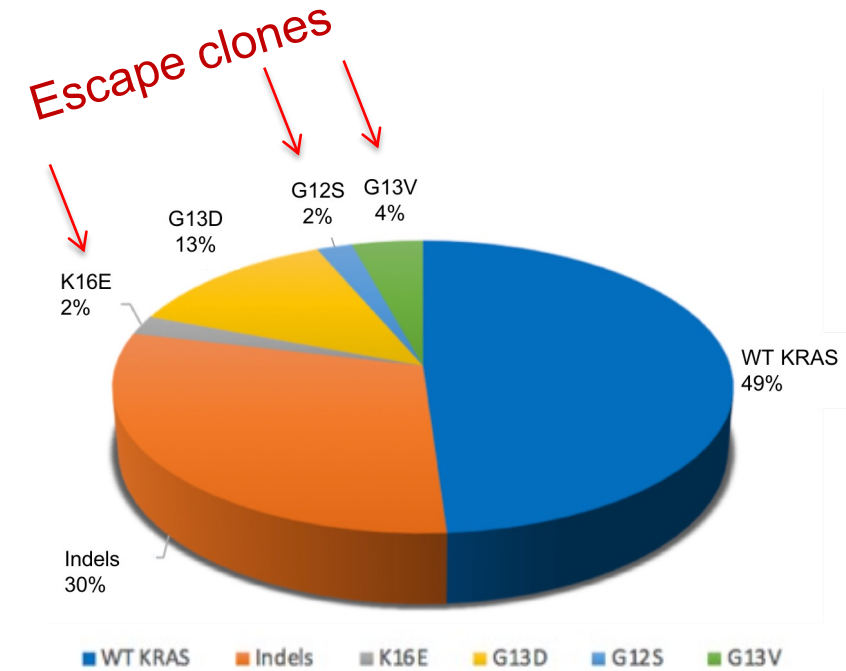
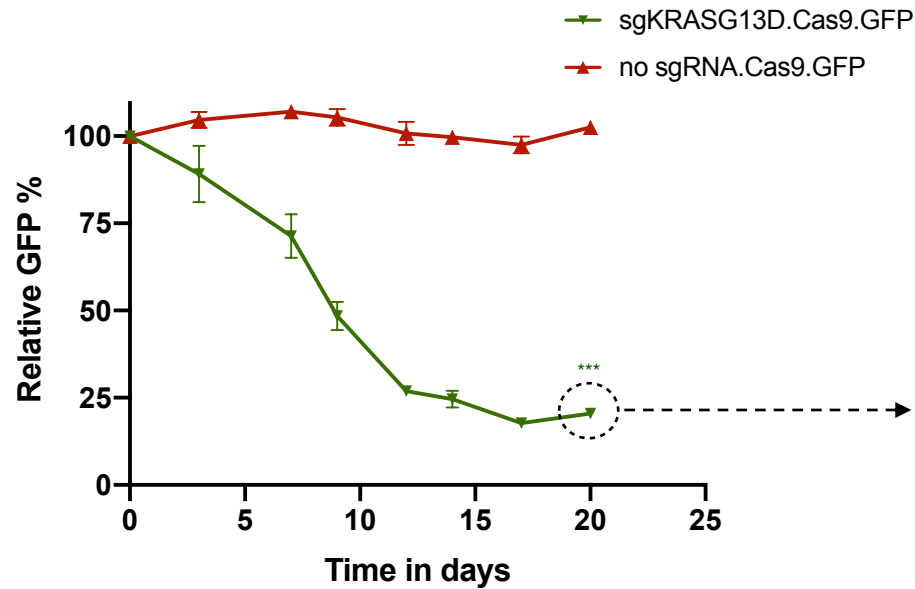


KRASwt
 5' -GTAGTTGGAGCTGGTGGCGTAGG-3'
 3' -CATCAACCTCGACCACCGCATCC-5'

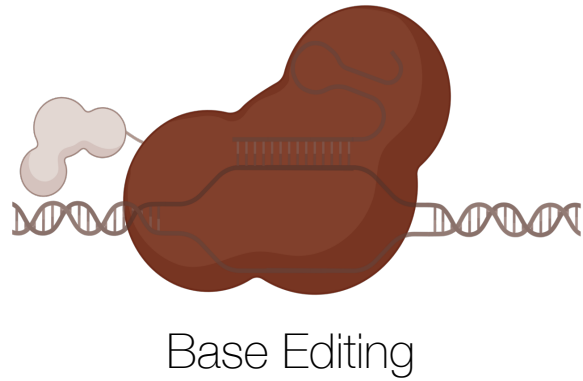
KRASG13D
 5' -GTAGTTGGAGCTGGTGACGTAGG-3'
 3' -CATCAACCTCGACCACTGCATCC-5'



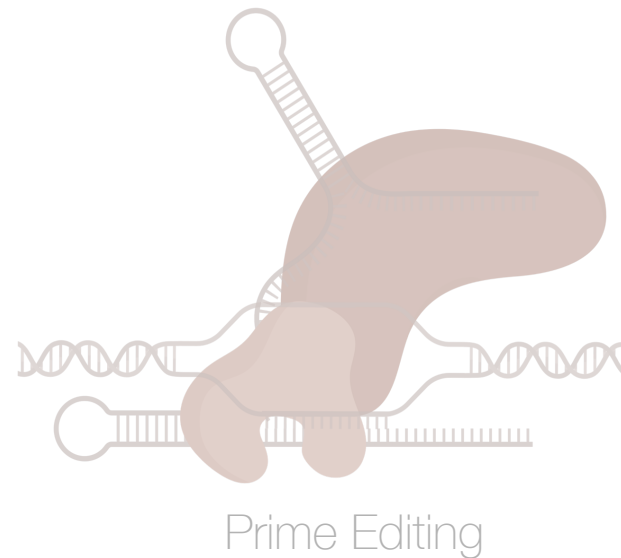
KRAS G13D Timecourse – HCT116 cells



Gene editing without DNA breaks

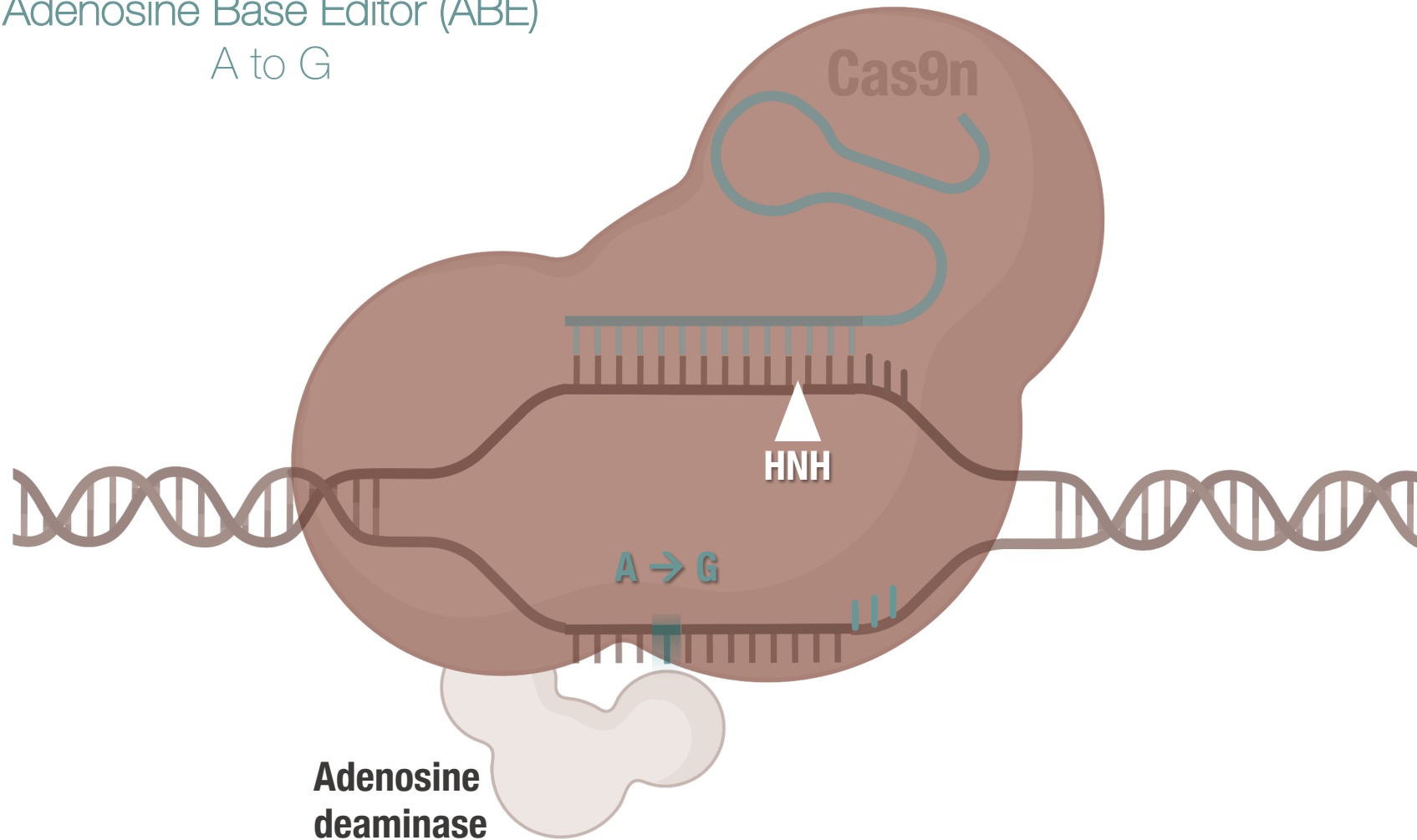


CRISPR Tool box



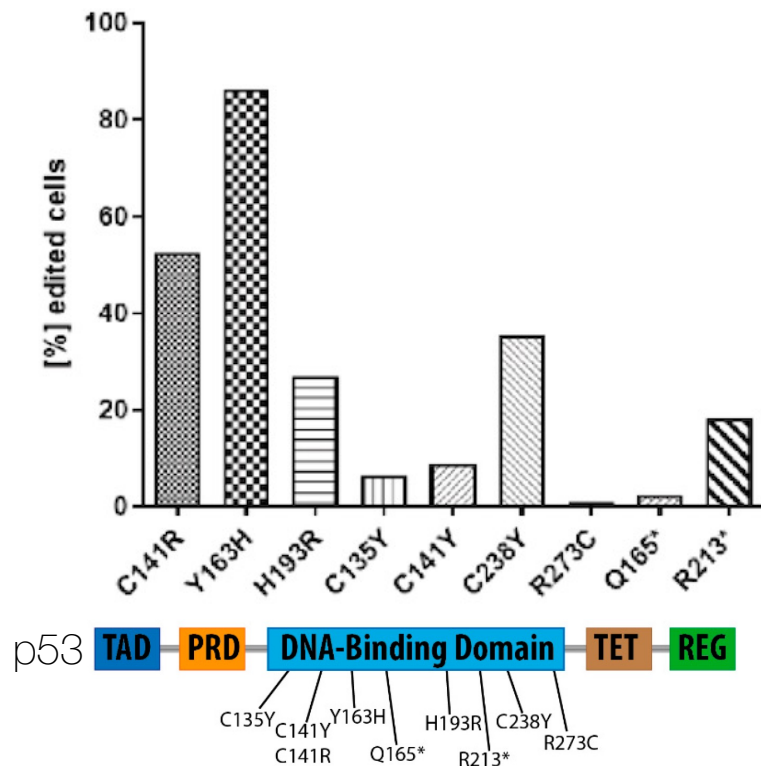
Base editors induce precise single base mutations SAOCELL[®]

Adenosine Base Editor (ABE)
A to G



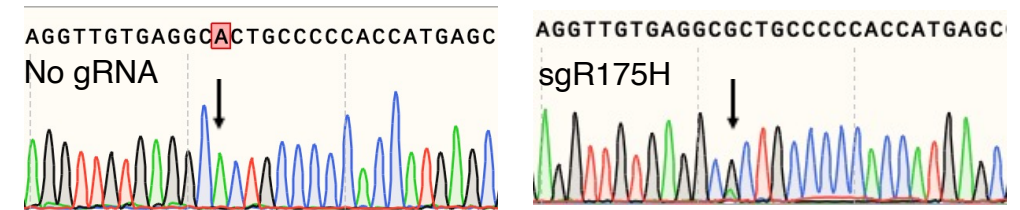
Base editors for cancer research/therapy

p53 mutant hiPS cell lines to study cancer associated mutations in an isogenic background

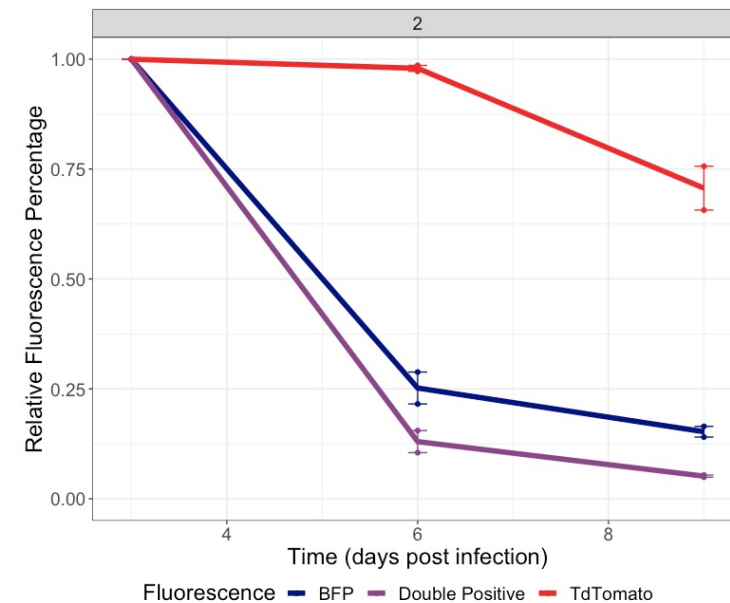


Dürün et al., Genes, 2020

P53 + KRAS mutation correction



KRAS+TP53 Double targeting in PANC1-ABE8e

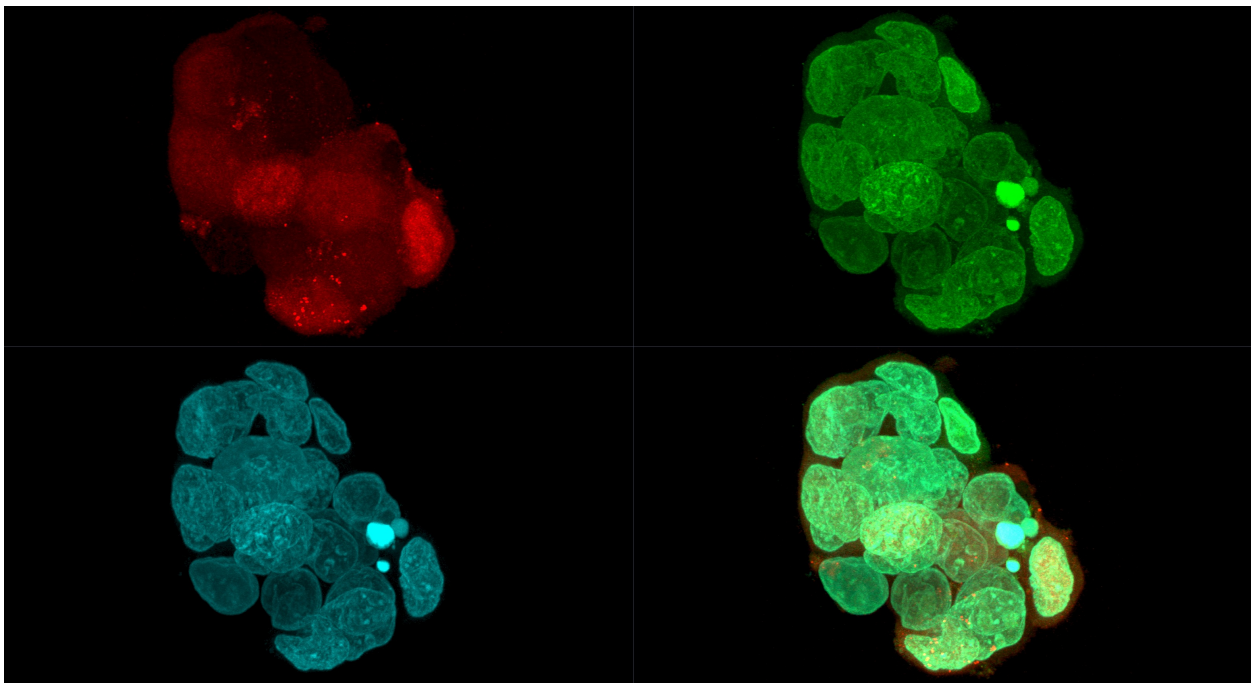


Sayed et al., Cancer Research, in press

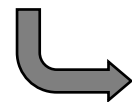
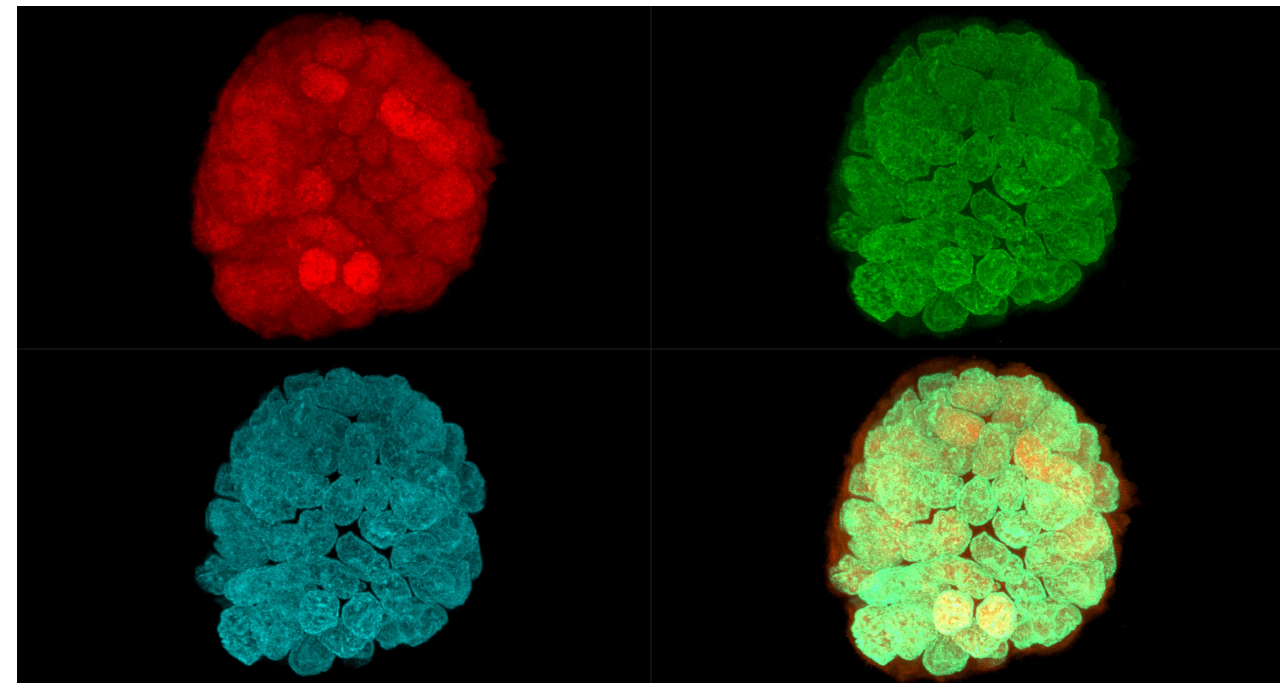
Correction of TP53 mutation in patient organoids



P53_sg175H



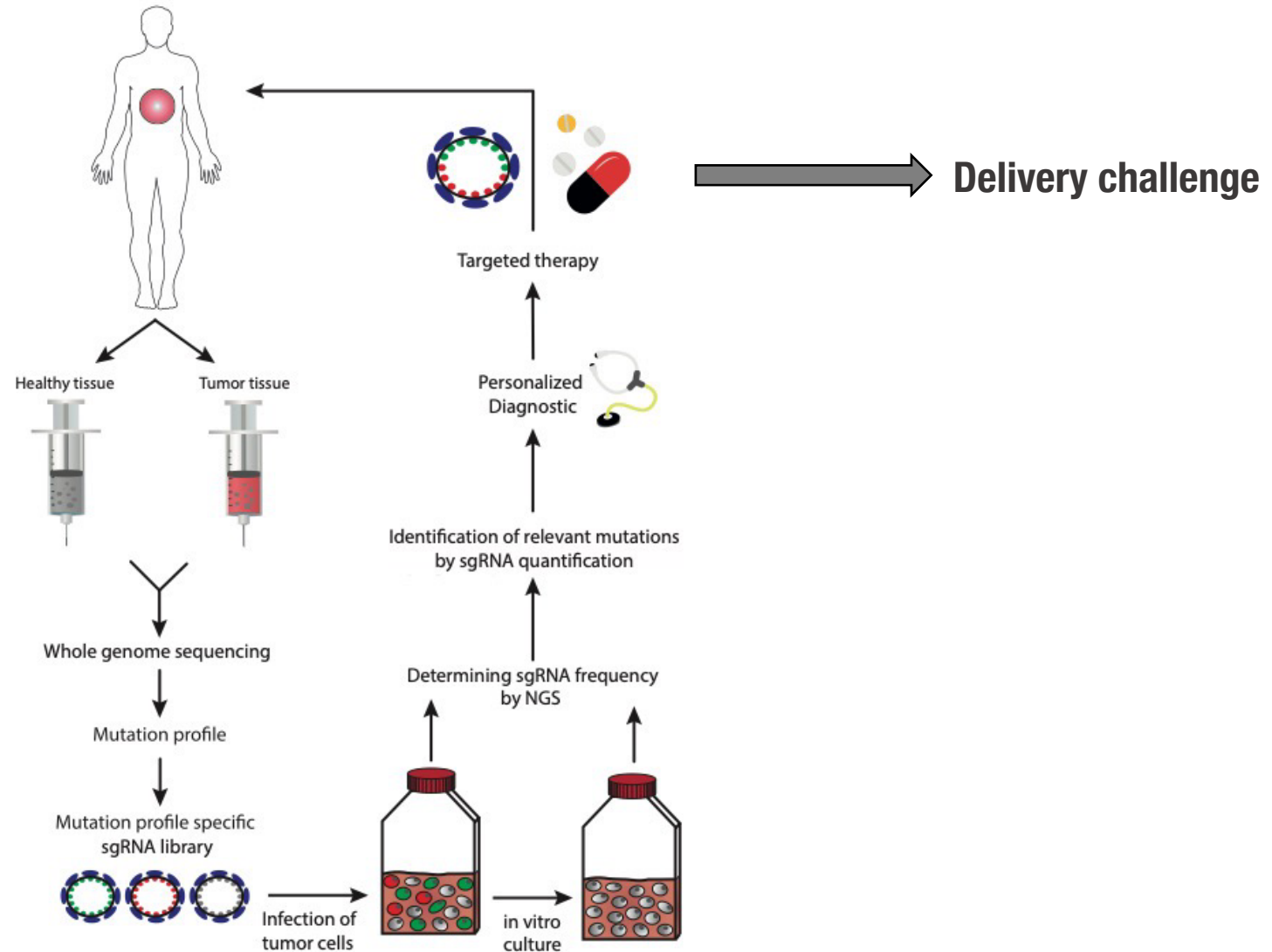
P53_sgControl



functional interrogation of vulnerabilities in a personalized manner for precision oncology

Vision of cancer genome surgery

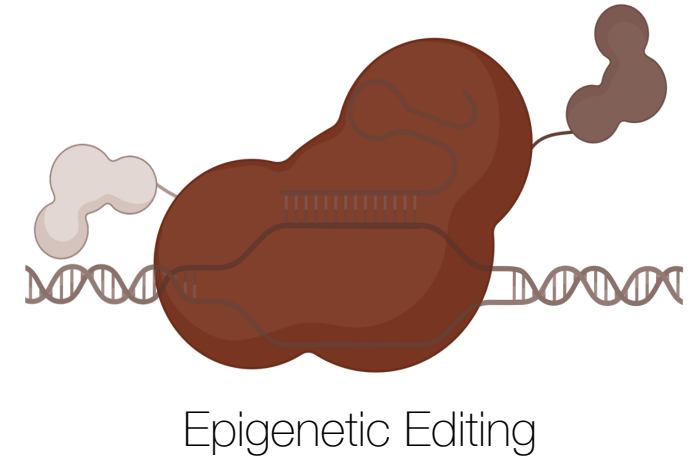
**The ultimate
precision oncology
approach**



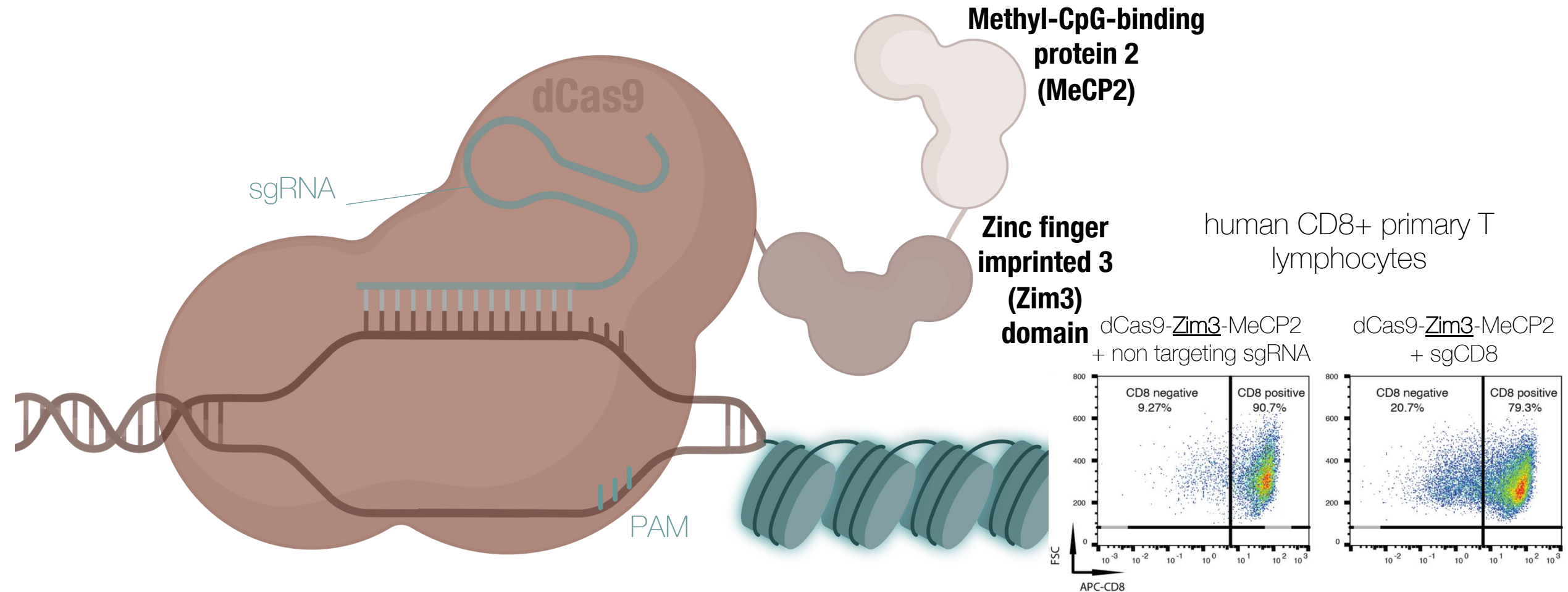
Gene editing without DNA breaks



CRISPR Tool box

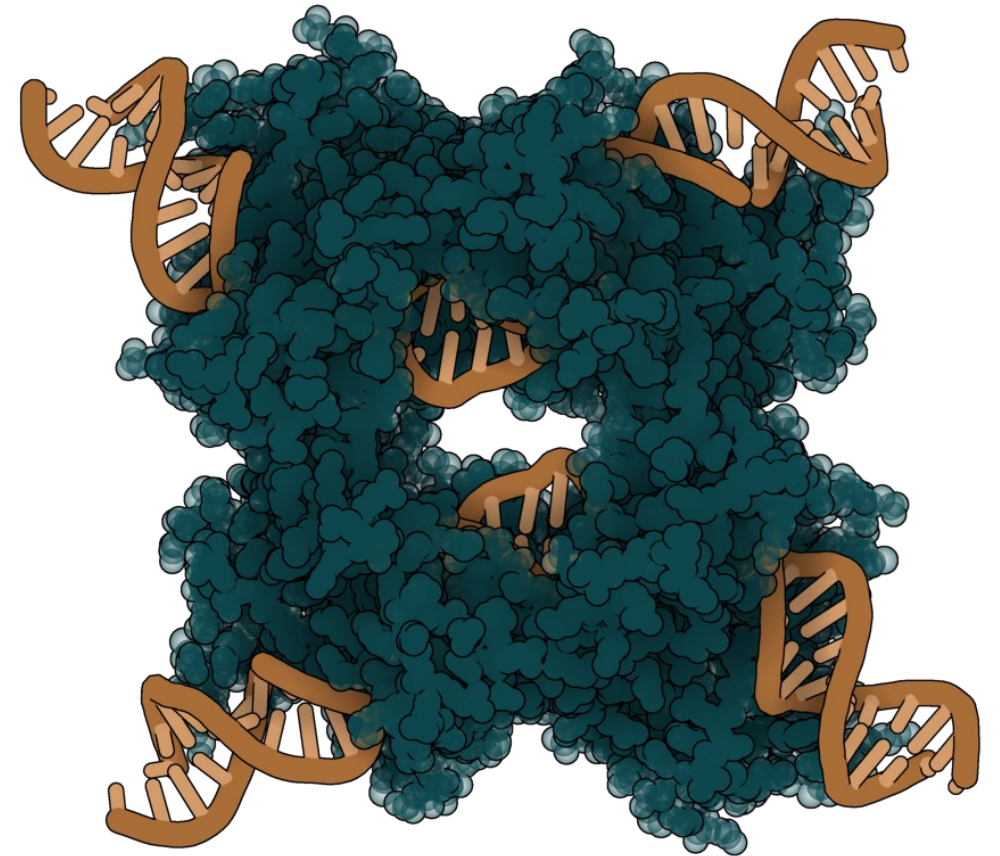
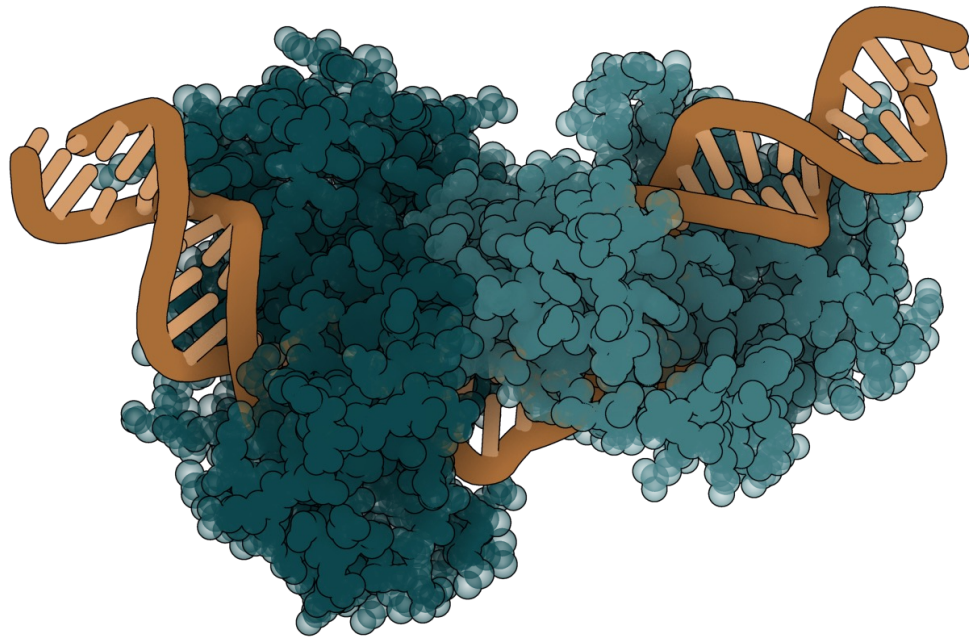


Long-term gene silencing with epigenetic editors



The Swiss knife of genome editing tools

Site-specific recombinases (SSR)



half-site

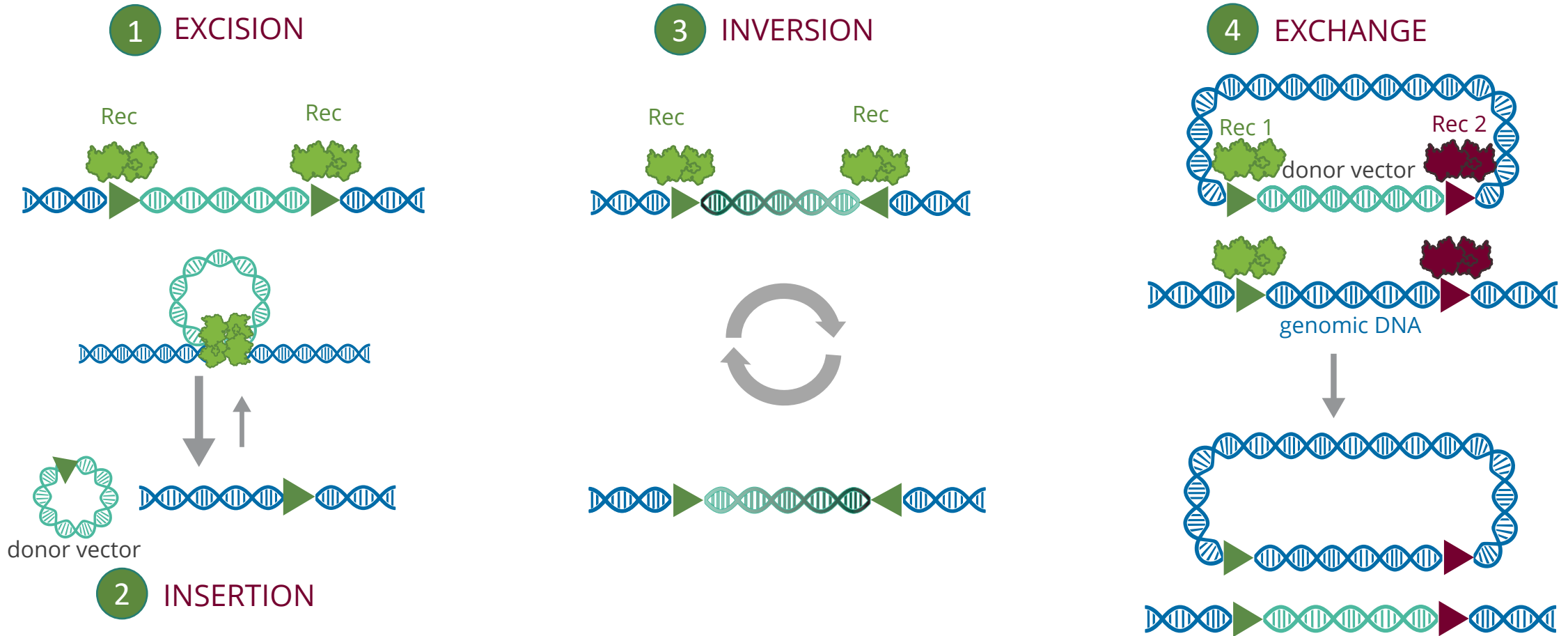
spacer

half-site

ATAACTTCGTATA-ATGTATGC-TATACGAAGTTAT
TATTGAAGCATAT-TACATACG-ATATGCTTCAATA



Recombinases – Next Generation Editing

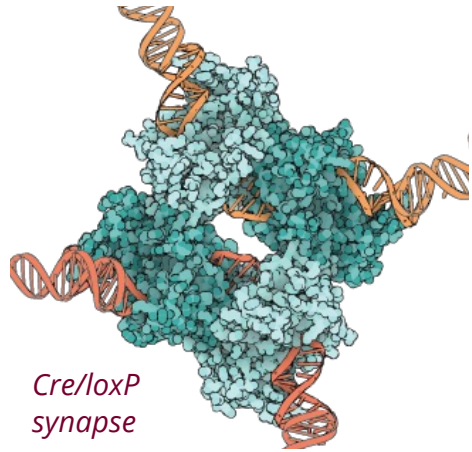


PRECISE RECOMBINATION

▶ = lox-like target site
 ● = Cre-like recombinase

Why are recombinases not used by everyone for gene editing?

Programming Recombinases to new target sites

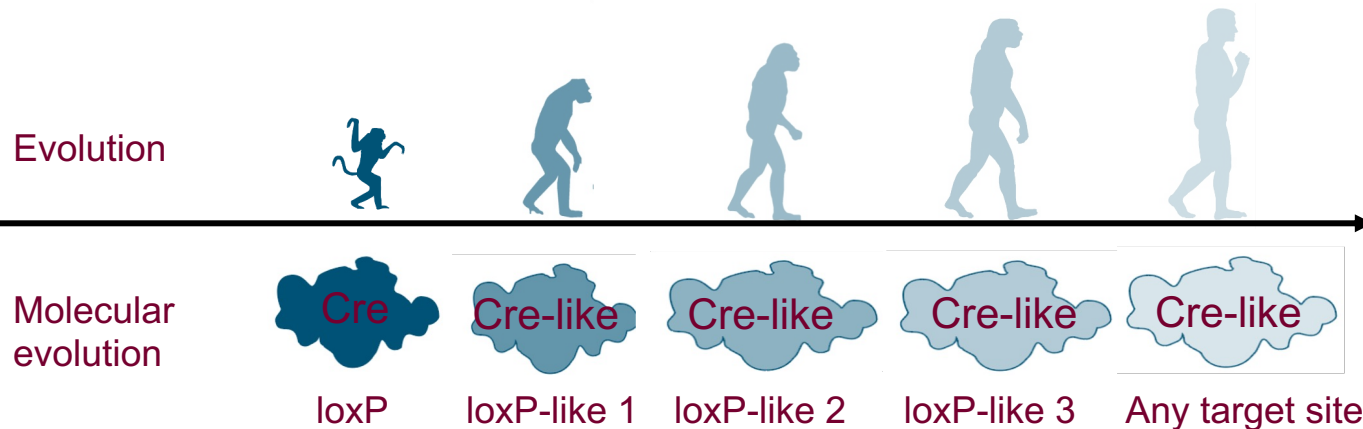


- No DNA binding domain
- Need of tetramer formation
- Need of DNA bending
- Consecutive strand cleavage
- Formation of holliday junction intermediate
- Isomerization
- Resolution

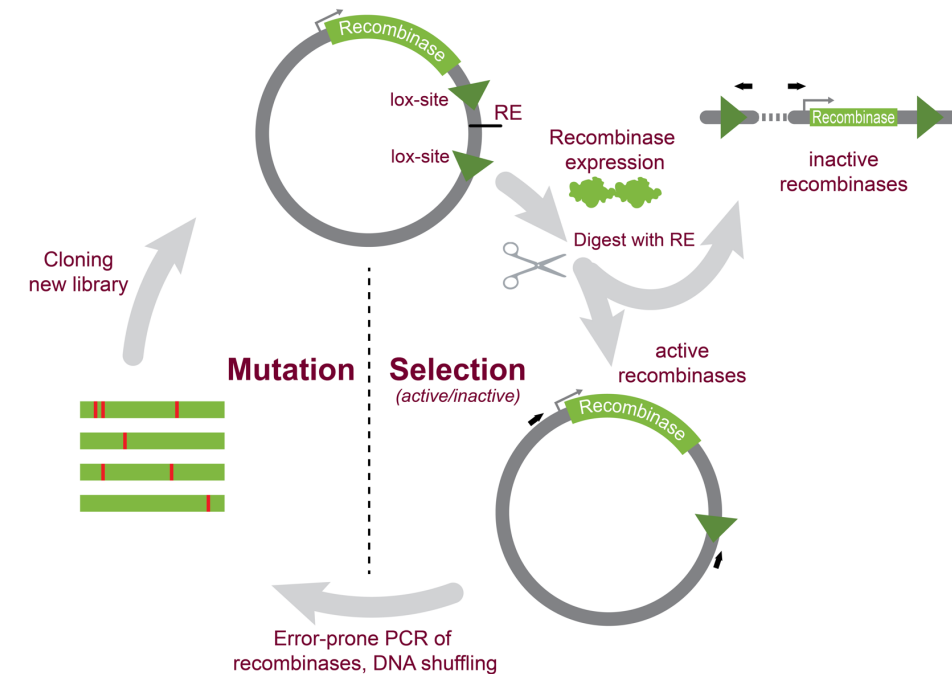
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All of these hard-coded into the protein therefore it is difficult to program recombinases

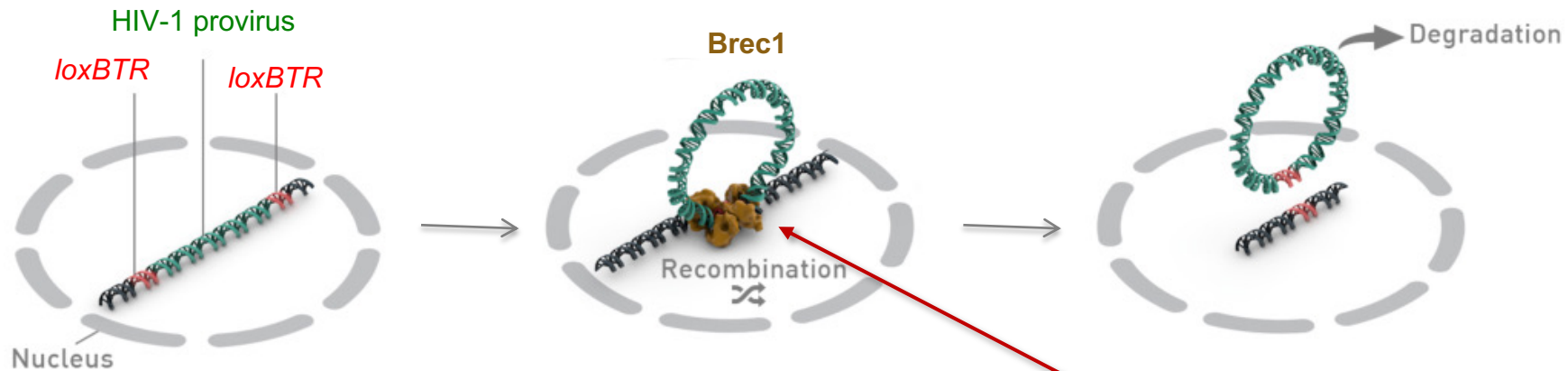
Our solution – Directed Evolution



Substrate linked directed evolution (SLiDE) Way to program recombinases



Brec1 as a clinical SSR candidate to treat HIV-1 infections



One recombinase is sufficient

nature
biotechnology

Article | Published: 22 February 2016

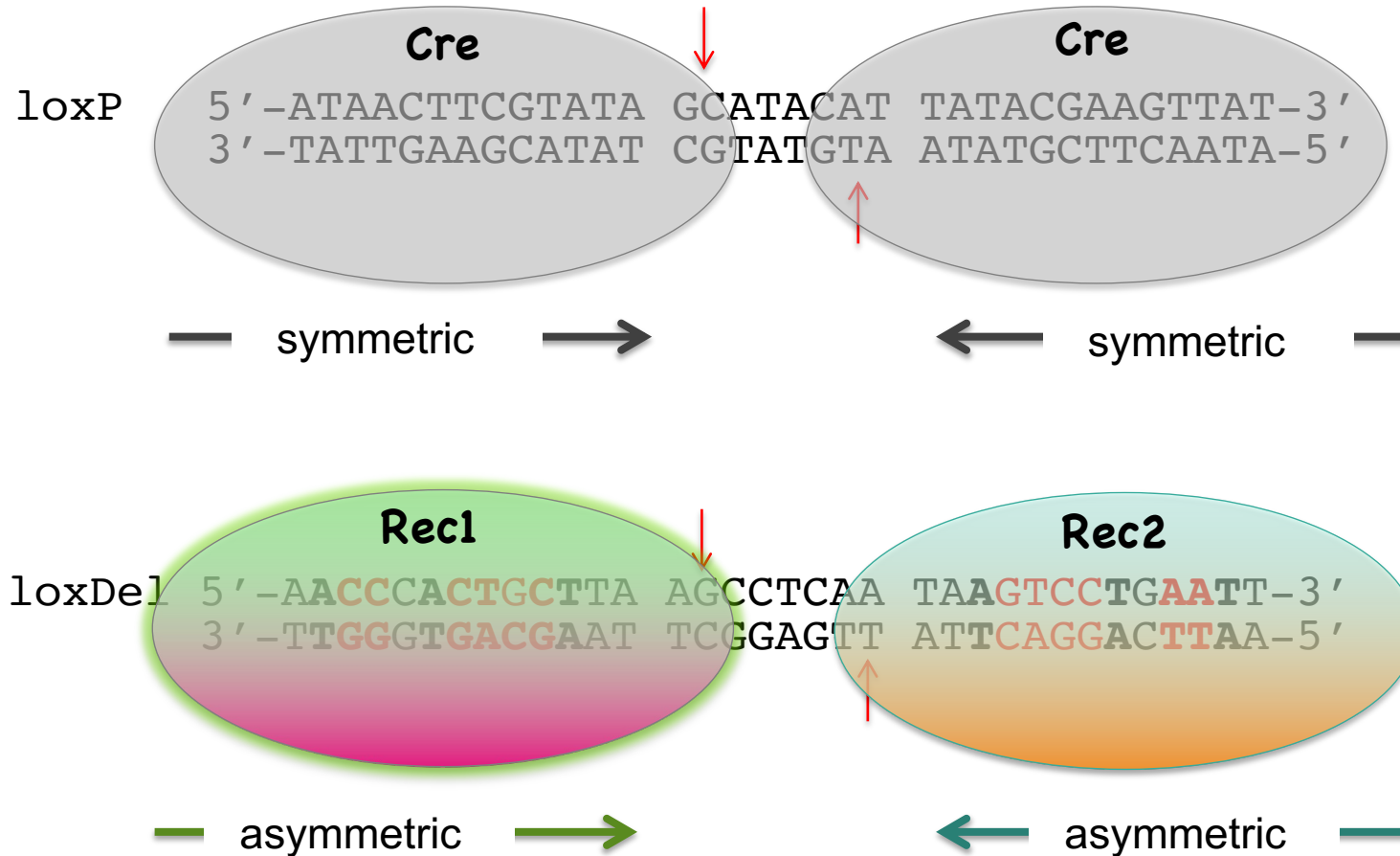
Directed evolution of a recombinase that excises the provirus of most HIV-1 primary isolates with high specificity

Janet Karpinski, Ilona Hauber, Jan Chemnitz, Carola Schäfer, Maciej Paszkowski-Rogacz, Deboyoti Chakraborty, Niklas Beschoner, Helga Hofmann-Sieber, Ulrike C Lange, Adam Grundhoff, Karl Hackmann, Evelin Schrock, Josephine Abi-Ghanem, M Teresa Pisabarro, Vineeth Surendranath, Axel Schambach, Christoph Lindner, Jan van Lunzen, Joachim Hauber & Frank Buchholz

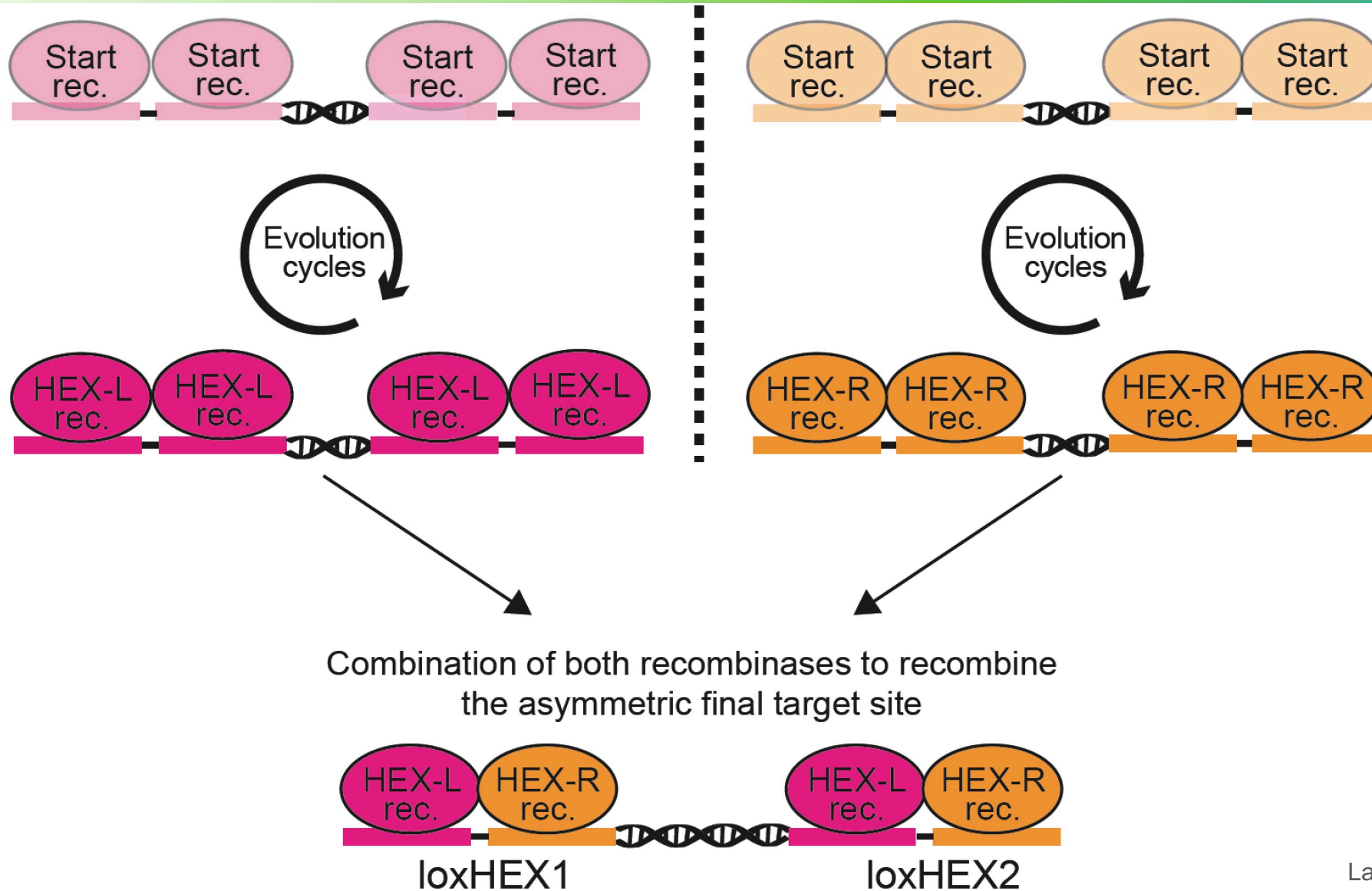
PROVIR^{EX}
Genome Editing Therapies GmbH

Sarkar *et al.*, *Science* (2007)
Karpinski *et al.*, *Nat. Biotechnol.* (2016)

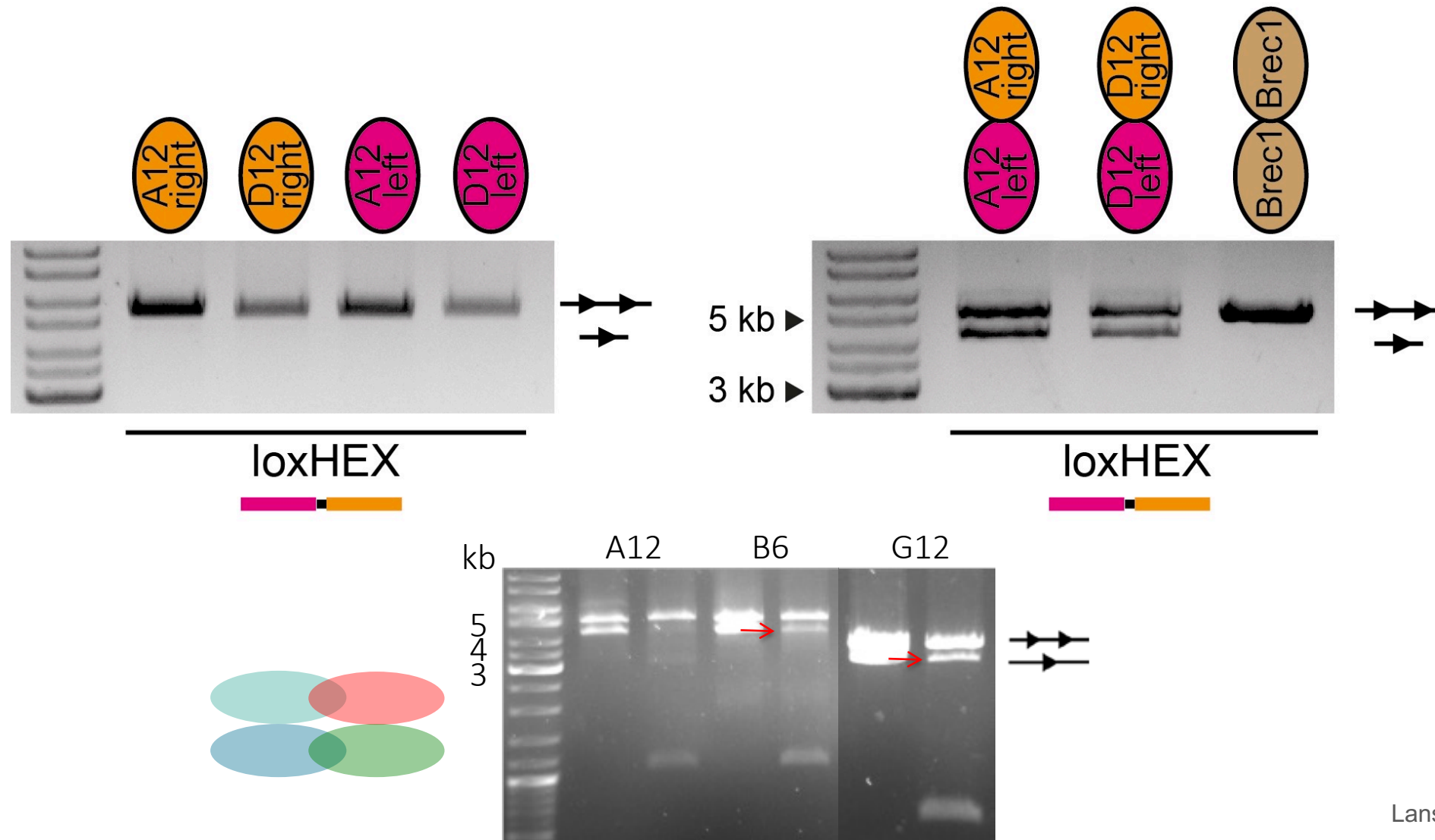
Dual recombinases targeting asymmetric sites



Dual SLiDE strategy



Liberating SSRs from target site restrictions



Example for a therapeutic heterospecific designer-recombinase: Hemophilia A



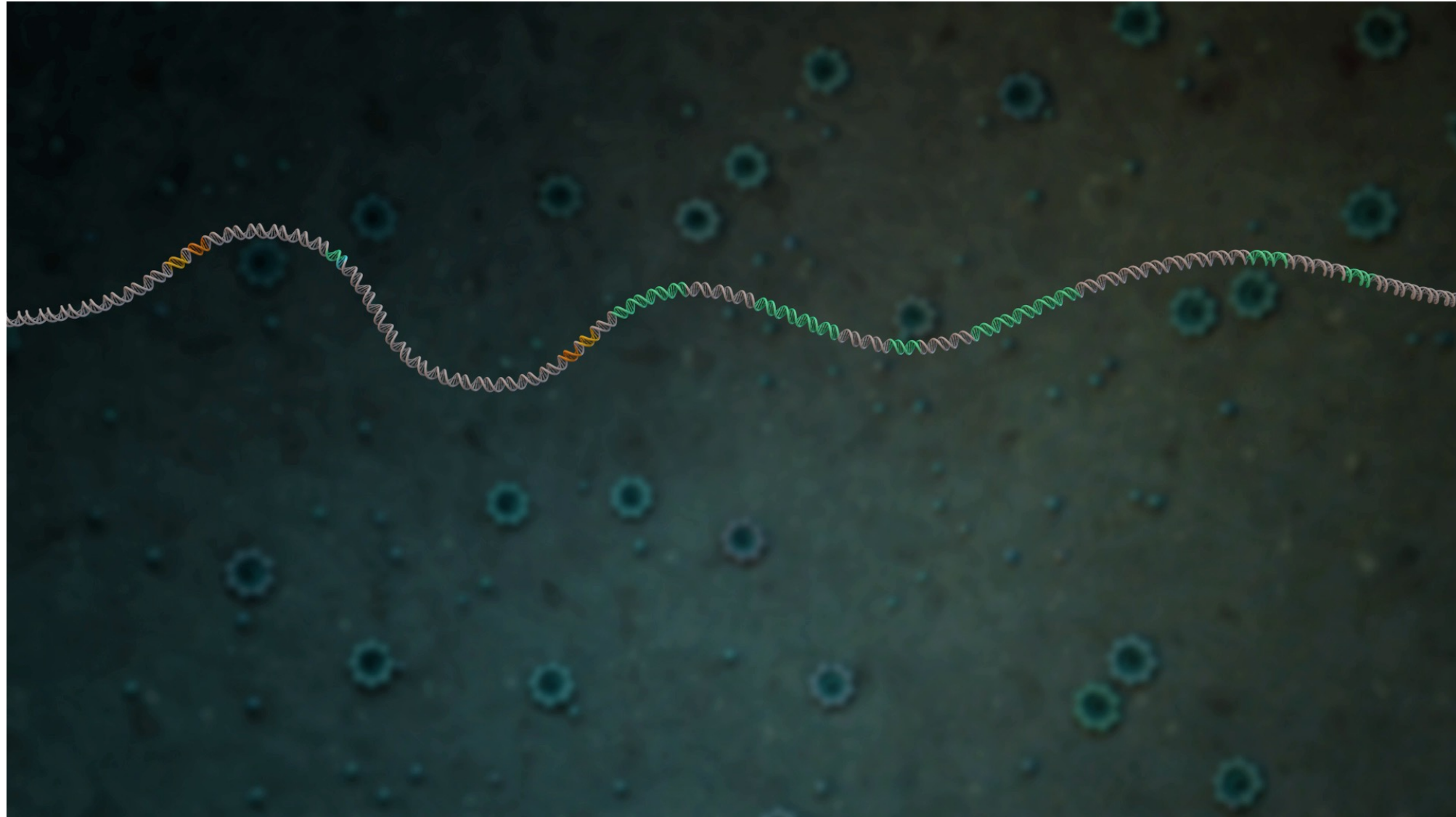
Hemophilia A in a nutshell

- ❖ Monogenetic X-linked disease (disruption of the F8 gene)
- ❖ Most common blood clotting disorder (**1:5000** new born males)
- ❖ Current treatment option - injections of recombinant Factor VIII (2-8 times a month - **100,000€ - 600,000€/year**)
- ❖ Problem I: Stable Factor VIII level (**short half-life**)
- ❖ Problem II: Formation of **antibodies** against recombinant Factor VIII

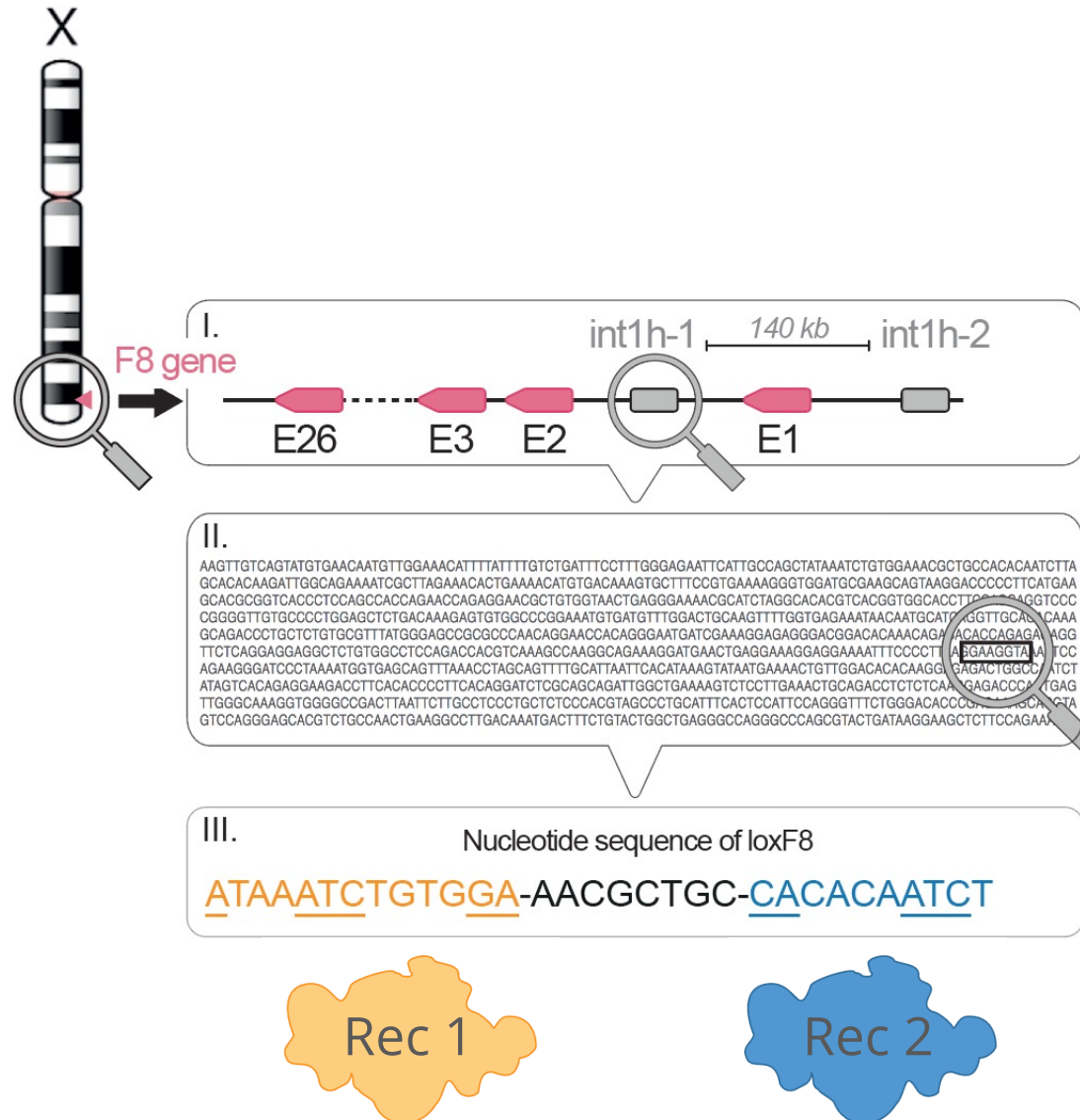
Gene therapy for treating Hemophilia?

- ❖ Severely affected individuals (**<1%** activity) would profit the most
- ❖ A clinical benefit could be achieved by reconstitution of **3-5%** of F8 activity
- ❖ Severe Hemophilia A is often caused by genomic inversions (**50%** of the cases)

Designer-Recombinase induced Genomic Inversion (DRiGI)

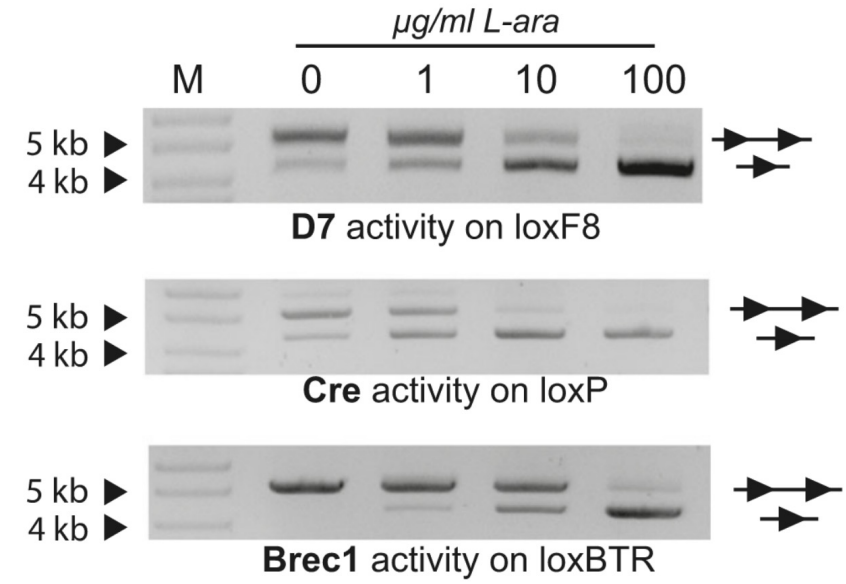
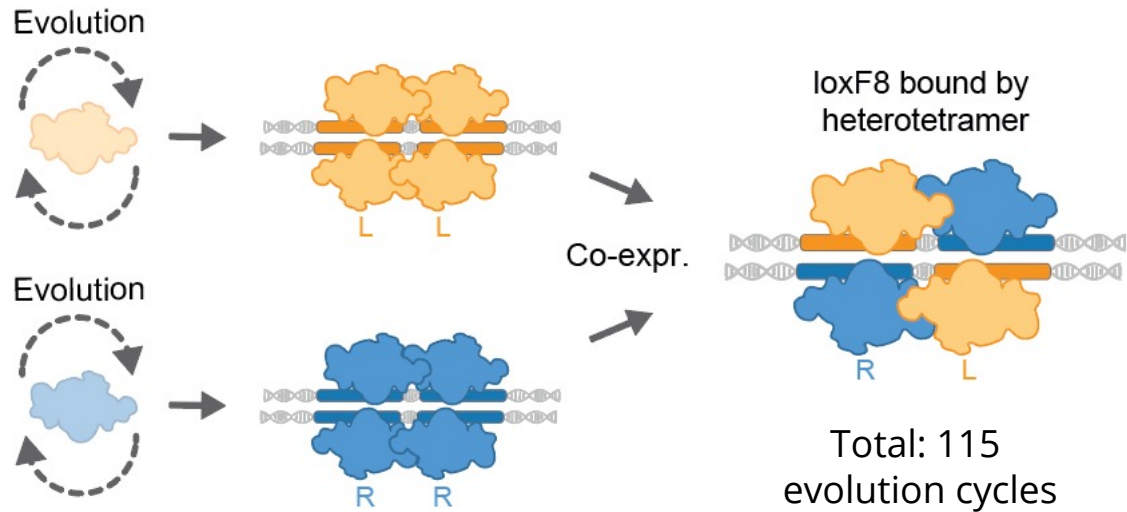


Finding a target site



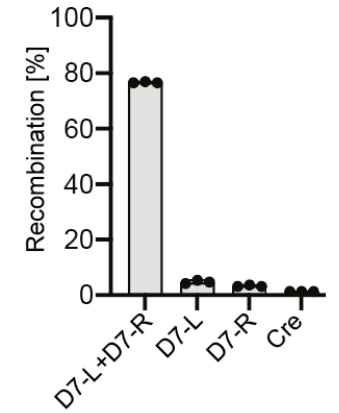
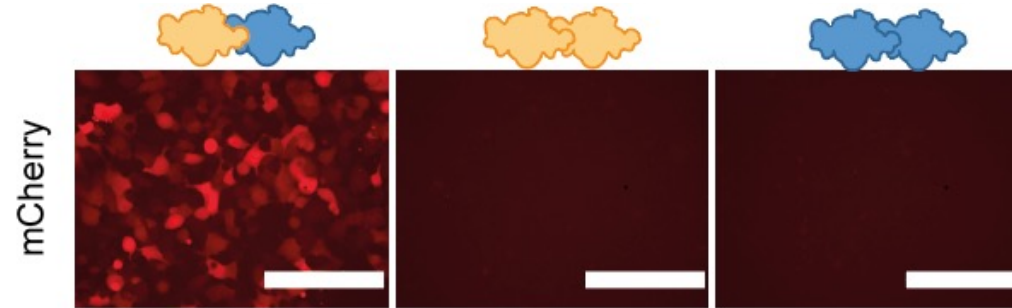
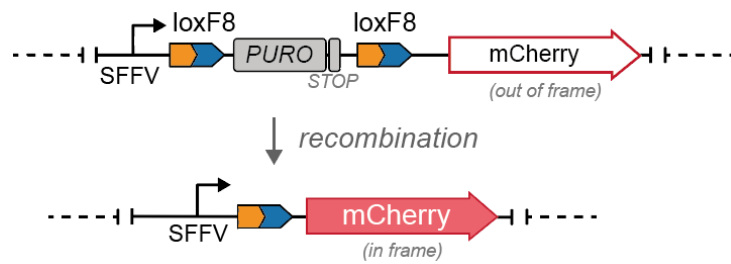
Making a heterospecific RecF8 recombinase

III. Nucleotide sequence of loxF8
ATAAATCTGTGGA-AACGCTGC-CACACAATCT

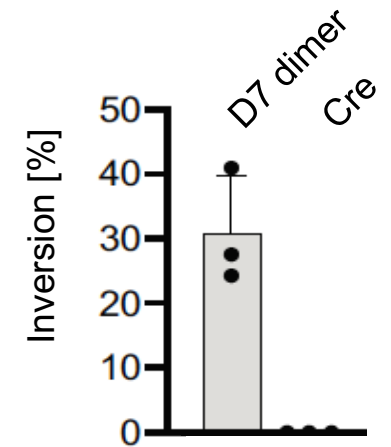
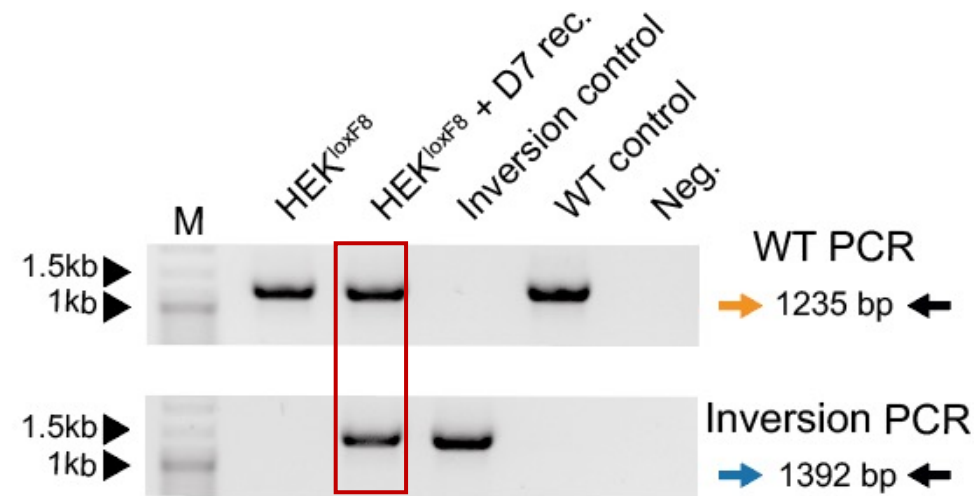
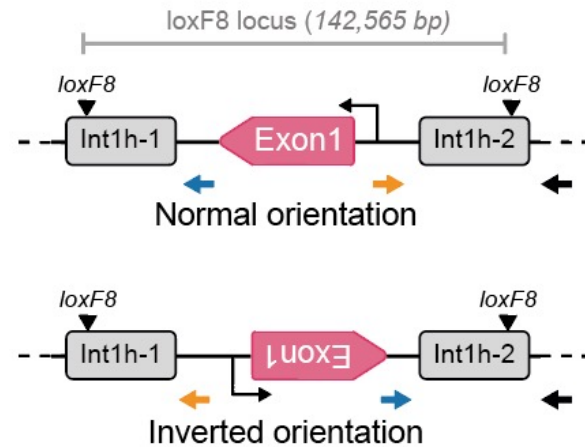


RecF8 in reporter cells

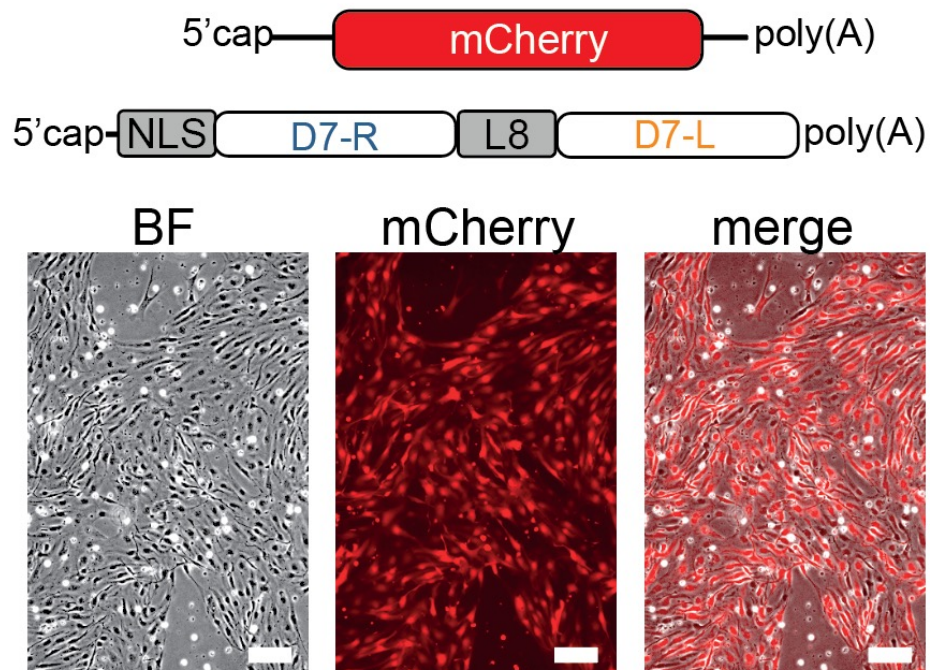
Reporter cell line



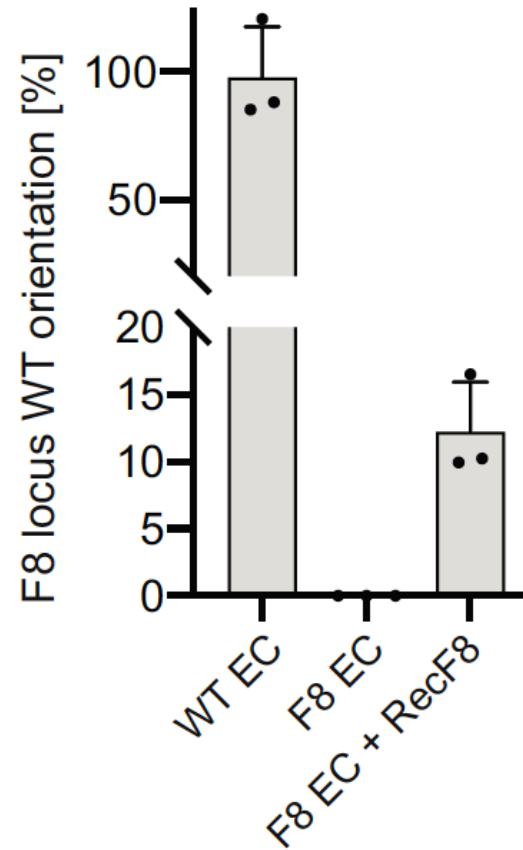
Genomic loxF8 locus



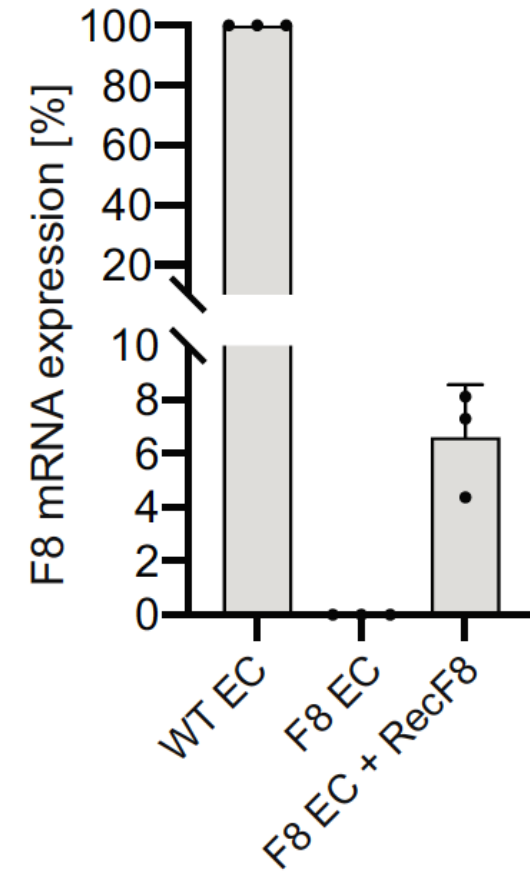
RecF8 corrects the inversion in patient cells



Genomic inversion

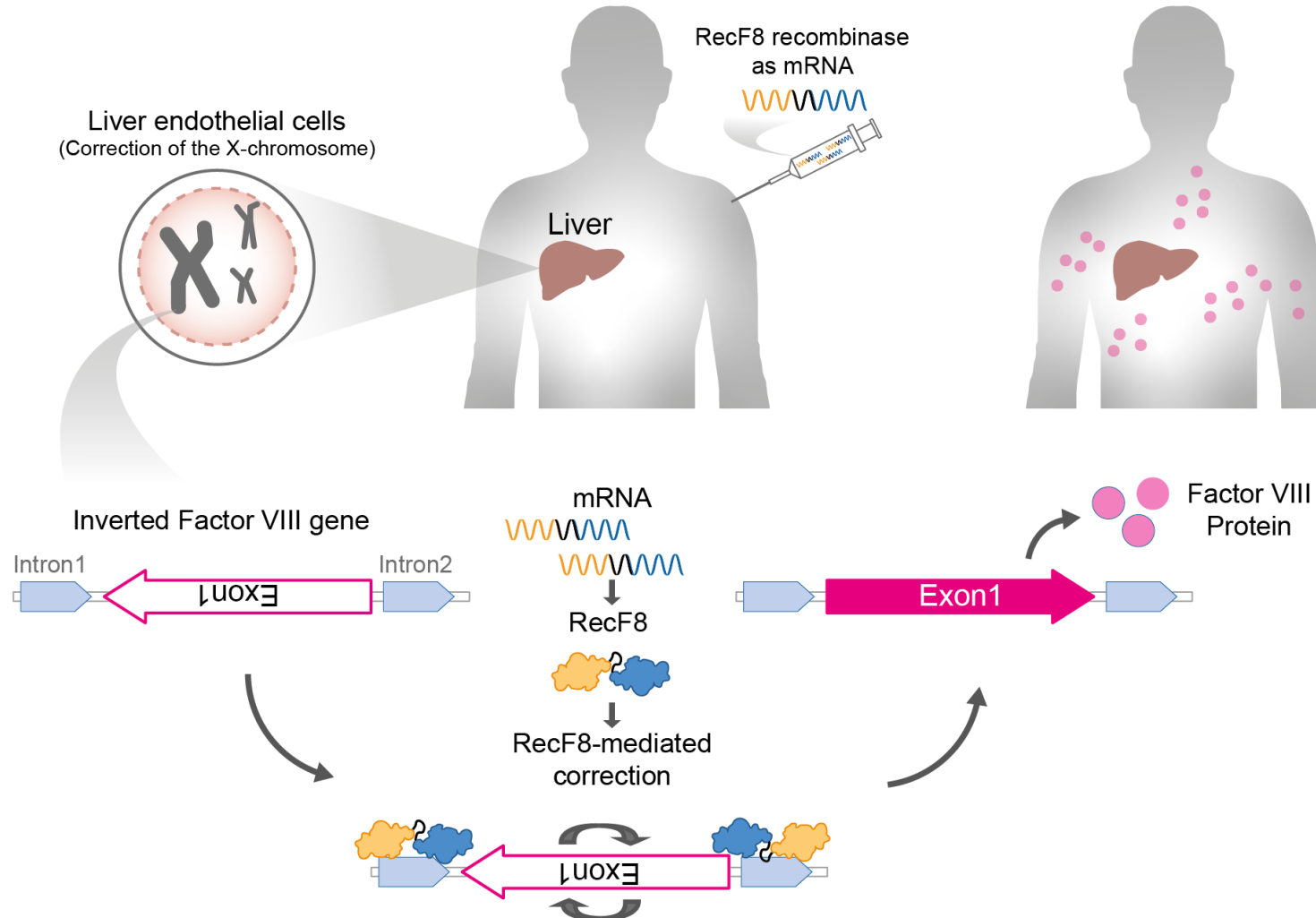


mRNA expression

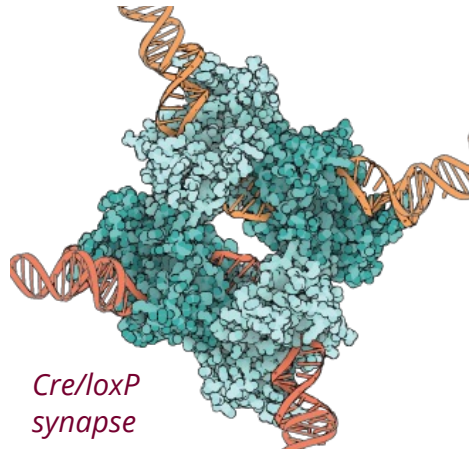


Envisioned RecF8 therapy

Potential therapy for Hemophilia A patients



Are there better ways of programming Recombinases to new target sites?

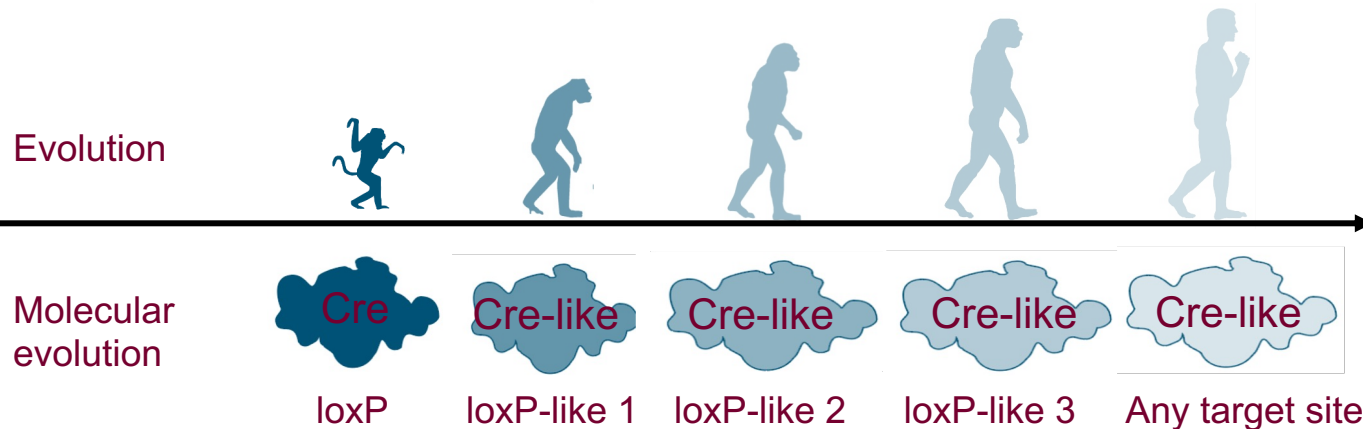


- No DNA binding domain
- Need of tetramer formation
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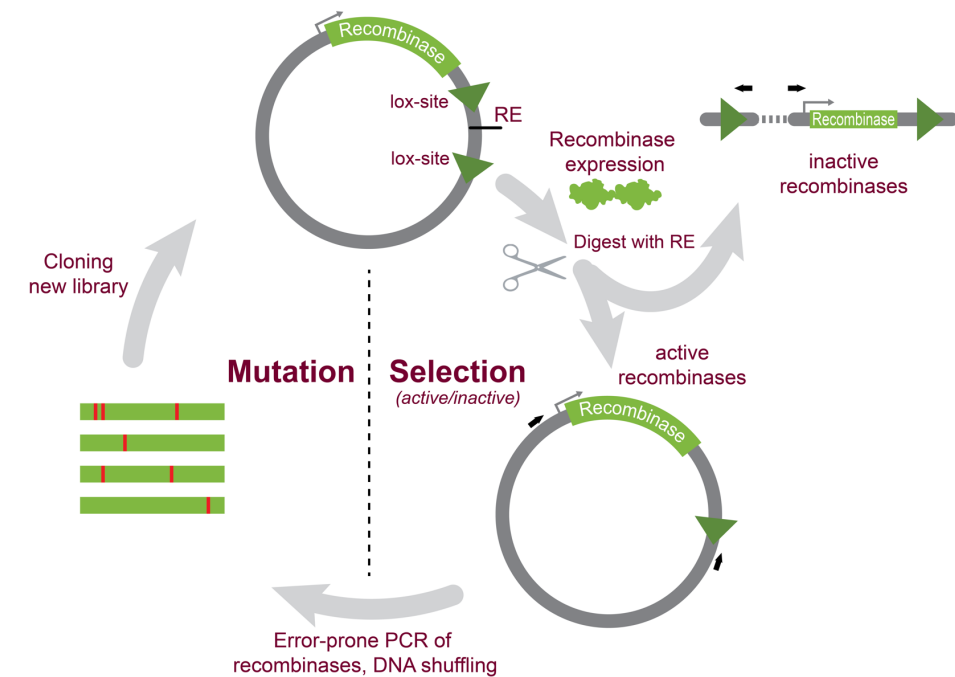
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All of these hard-coded into the protein therefore it is difficult to program recombinases

Our solution – Directed Evolution



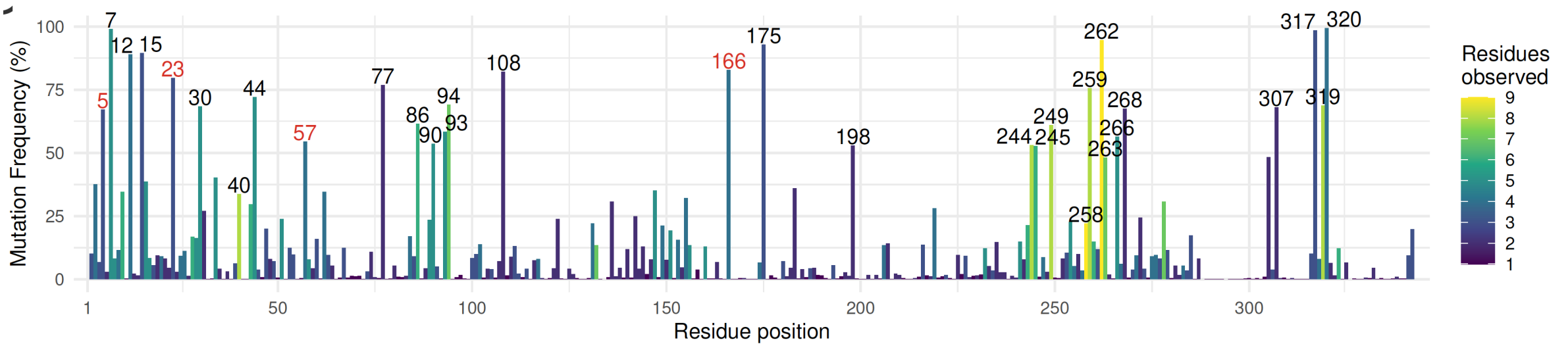
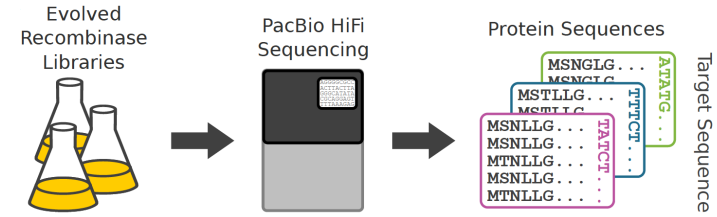
Substrate linked directed evolution (SLiDE) Way to program recombinases



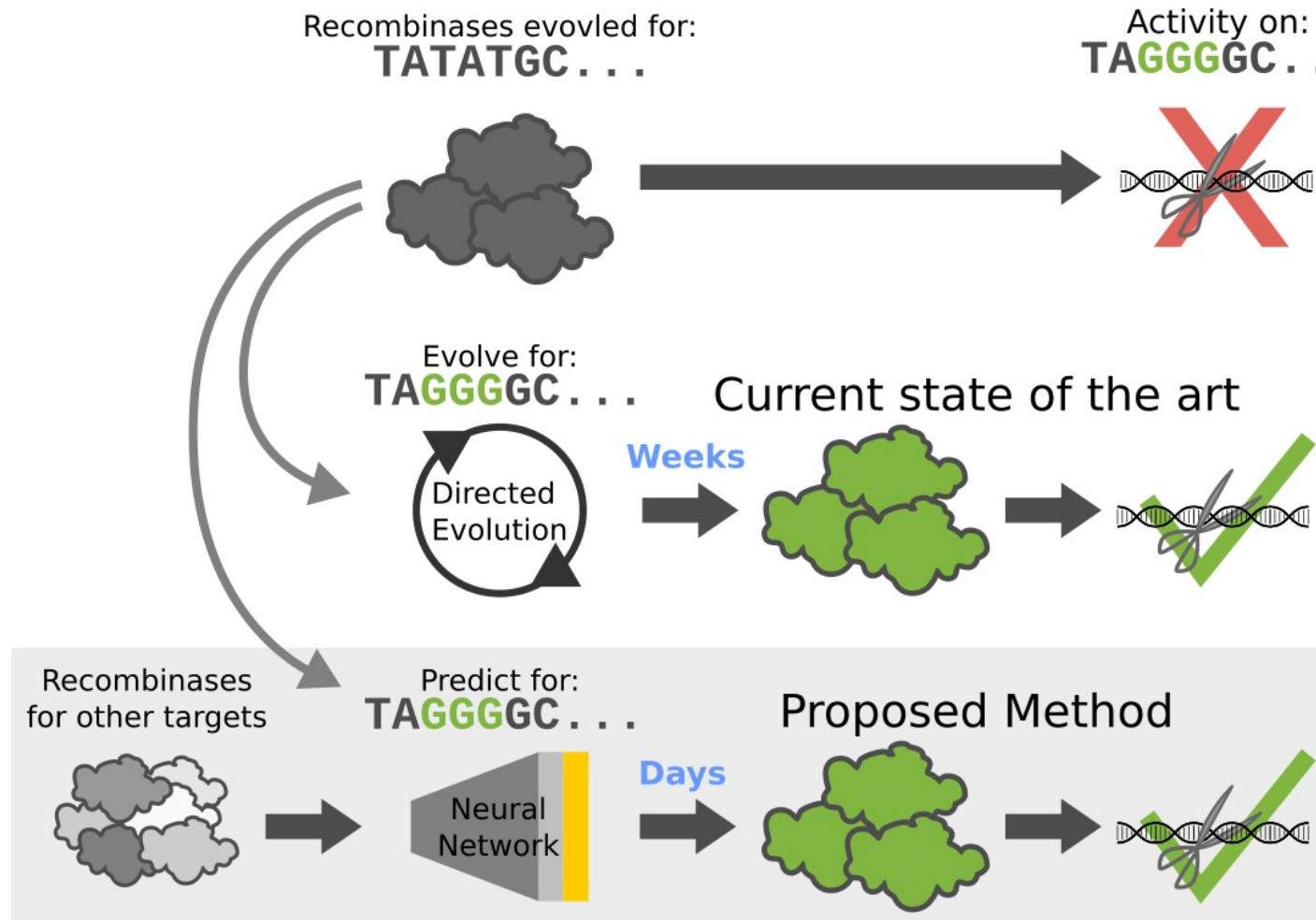
→ 89 evolved recombinase Libraries targeting different sites

Rational design of designer-recombinases is out of reach

- **89 evolved recombinase Libraries targeting different sites**
- **Deep sequencing > 2 Mio. full-length recombinases**



RecGen: an AI-based algorithm to predict designer-recombinases



- **Non-nuclease approaches are likely safer for therapeutic genome editing**
- **Base editors are excellent tools to correct cancer mutations**
- **Epigenetic editors allow long-term silencing of genes**
- **Designer-Recombinases are efficient, versatile and safe genome editing tools**
- **RecF8 seamlessly corrects int1h inversion with potential for clinical use**
- **RecGen is an AI-based algorithm to accelerate the generation of new designer-recombinases**

Acknowledgments



Funding



Janet



Felix

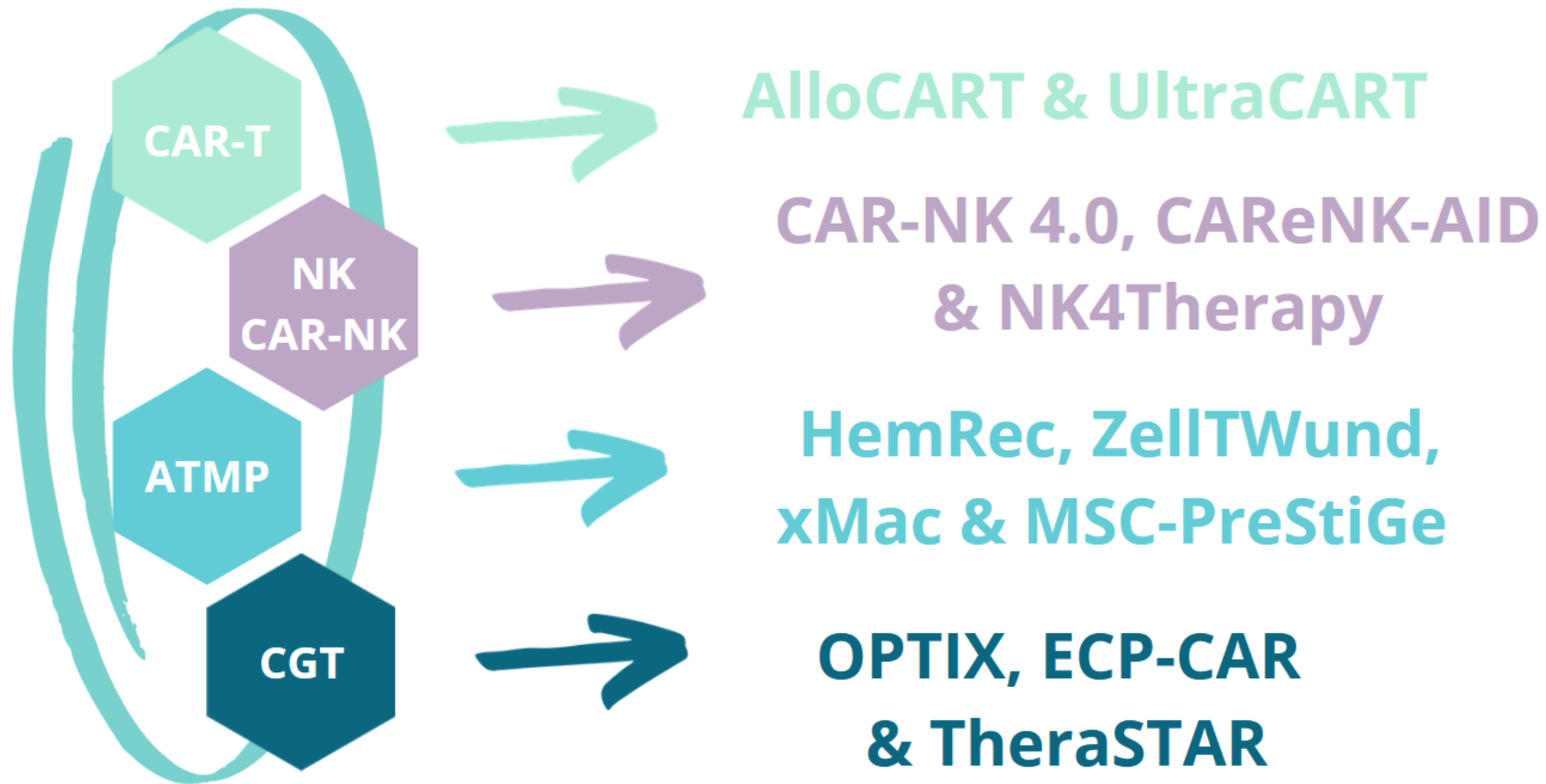


Joachim Hauber, HPI, Hamburg
M. Teresa Pisabarro, Biotec, DD
Daniel Stange, DD
Ralf Knöffler, DD
Takanori Takebe, Cincinnati, USA

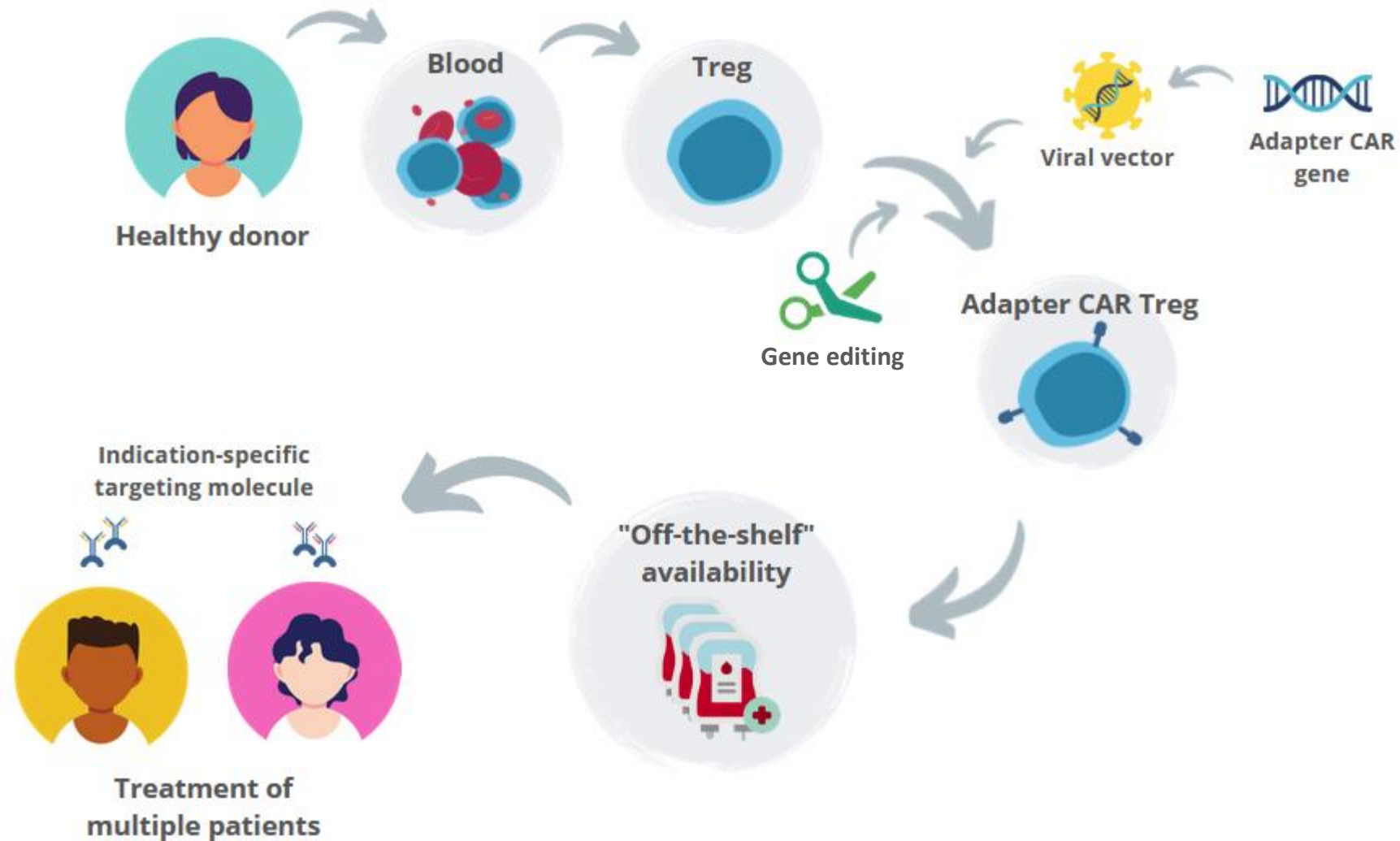
Coffee Break

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13:00 – 13:05	Group picture	All
13:05 – 14:00	Lunch Break	All
14:00 – 14:50	Presentation of Platforms and Hub	5min + 2min discussion
14:50 – 16:15	Area Meetings	All
16:15 – 16:35	Coffee Break	All

PROJECT PITCHES



AlloCART_{reg} – Project Overview

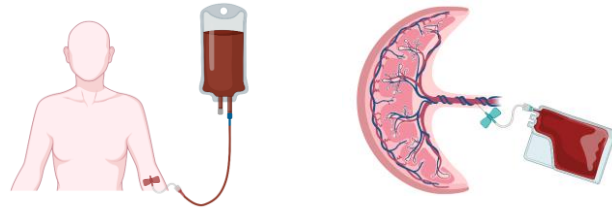


AlloCART_{reg} – Results so far

Samikshya



Treg source
Adult vs cord blood

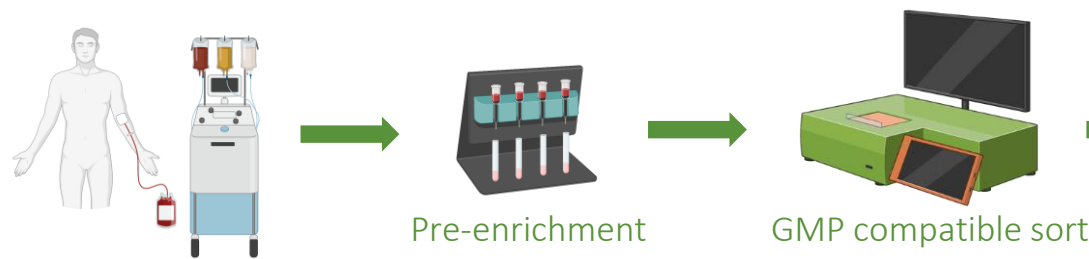


Collaboration with UKD maternity ward ✓
Ethics approval ✓
Panels for 20 Treg markers ✓

Kavitha



Treg isolation
Optimizing purity

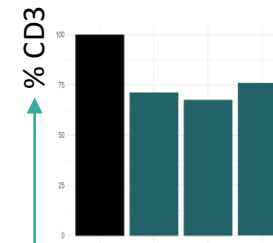
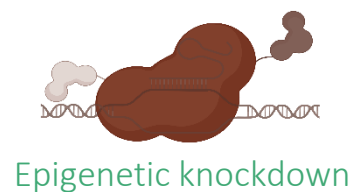


Phenotype ✓
Expansion potential ✓

Pascal



T cell receptor knockdown
Proof of concept



T cell lines ✓
Tool comparison ✓
Testing different gRNAs ✓

AlloCART_{reg} – Outlook



Samikshya



Treg source
Adult vs cord blood

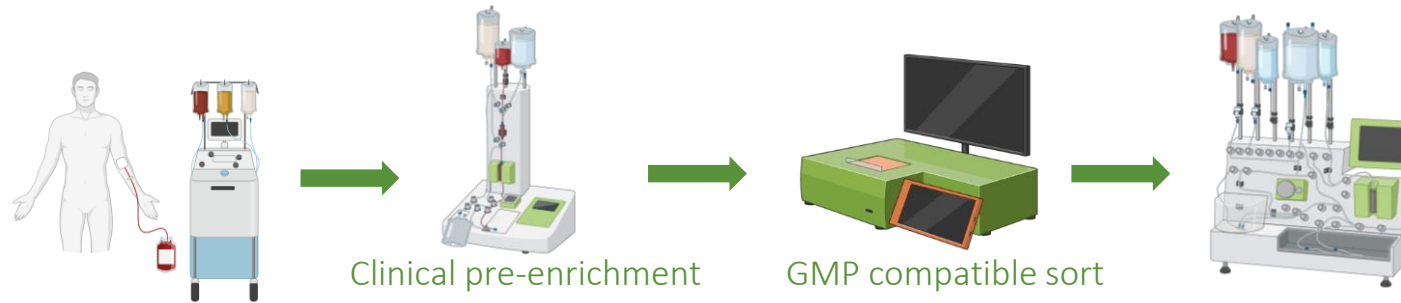


Expansion potential
Transduction efficiency
Stability & function

Kavitha



Treg isolation
Optimizing purity



Clinical pre-enrichment

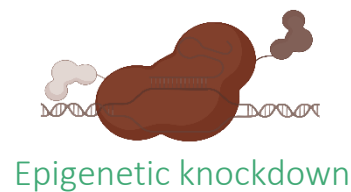
GMP compatible sort

CAR transduction
Functionality
Stability

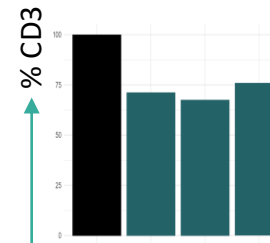
Pascal



T cell receptor knockdown
Proof of concept

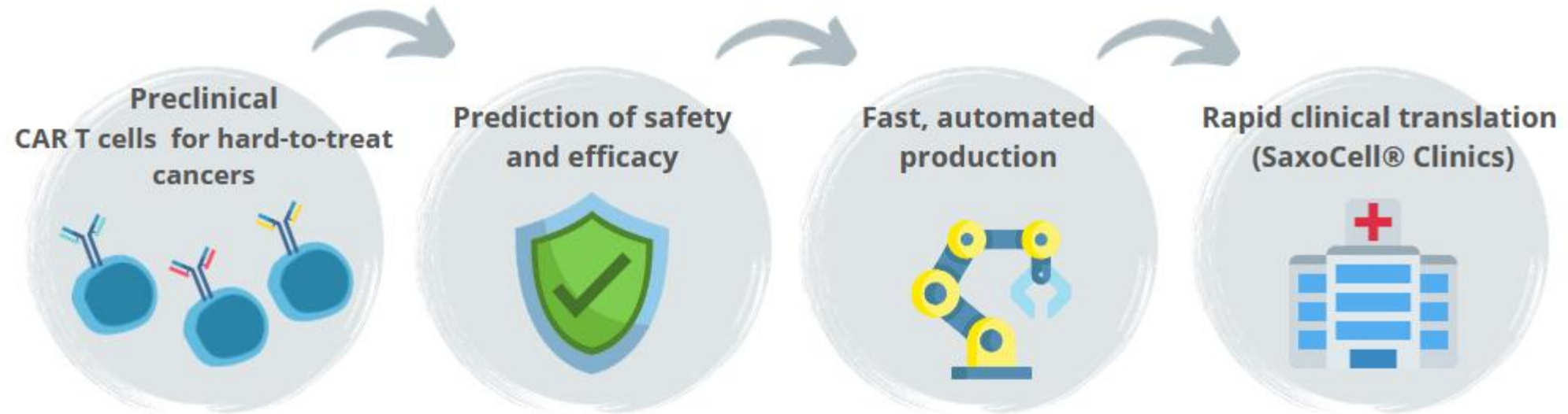


Epigenetic knockdown



Identify best editing system
Search for epigenetic repressors
→ Primary T cells → Treg

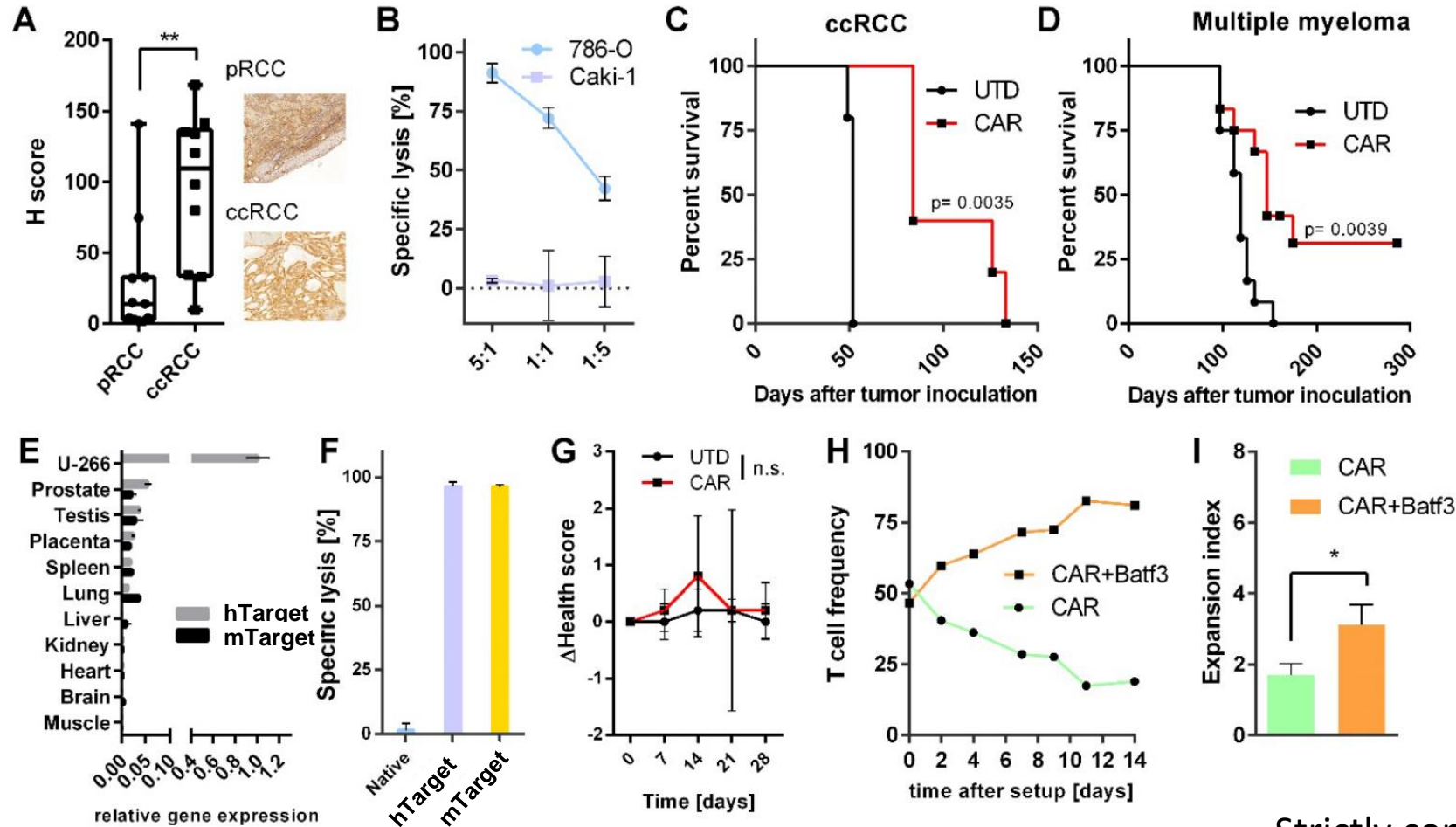
UltraCART – Project Overview



Strategisches Ziel: Klinische Translation des ersten Lead-CAR T Zell Produktes aus der Innovationspipeline von T-CURX und Initiierung einer klinischen Studie der Phase I/IIa im Programm SaxoCellClinics.

UltraCART – Results so far

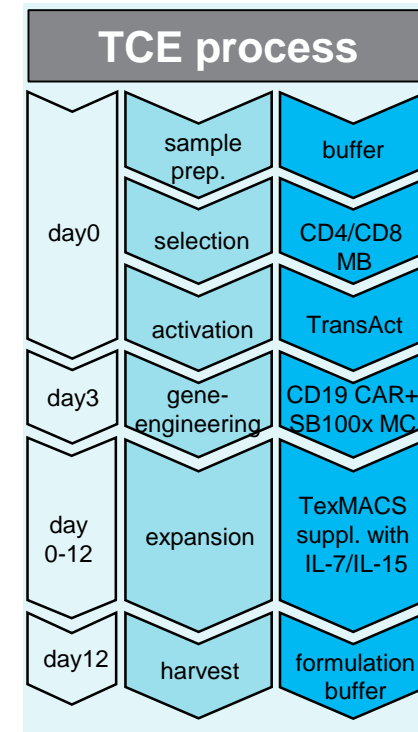
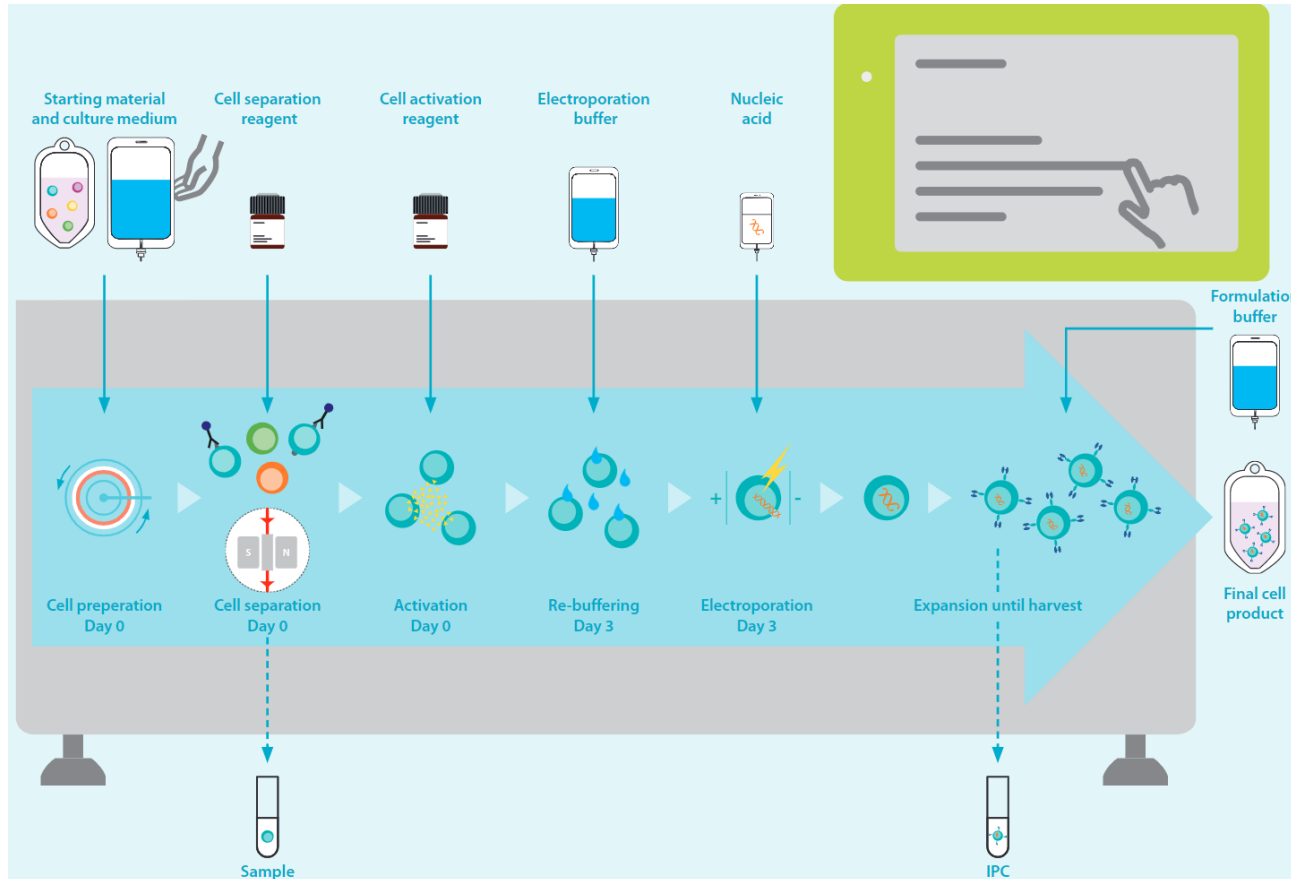
Arbeitspaket 1: Neue Targets und CAR-T Zell Produkte. Lead: T-CURX.
 → Neues Top Target für CAR-T, adressiert liquide und solide Tumore



UltraCART – Results so far

Arbeitspaket 3: Herstellung & Automation. Lead: Fnh-IZI

→ Automatisierter Herstellungsprozess für virus-freie Transposon basierte CAR-T auf Miltenyi Prodigy (+ EP)

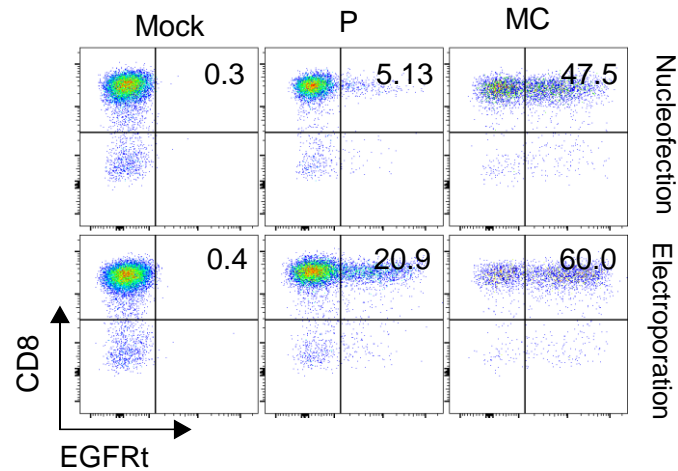


AREA 1 – CAR-T

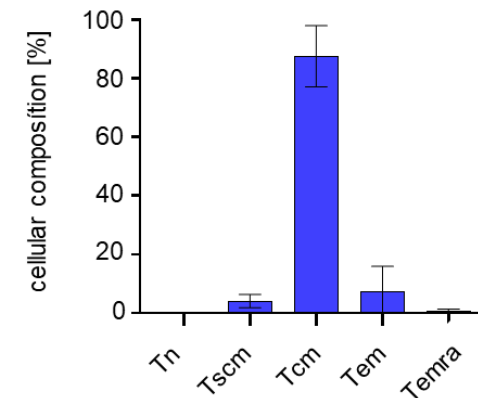
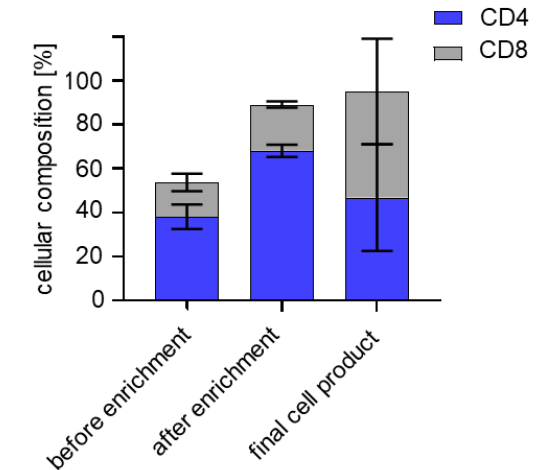
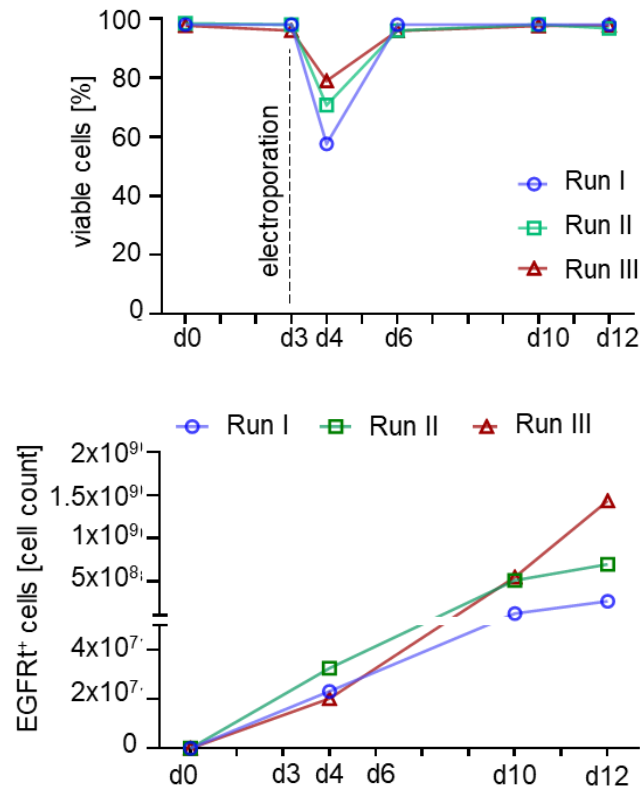
UltraCART – Results so far

Arbeitspaket 3: Herstellung & Automation. Lead: Fnh-IZI

→ Automatisierter Herstellungsprozess für virus-freie Transposon basierte CAR-T auf Miltenyi Prodigy (+ EP)



Genttransfer Rate: 60%
 Therapeutische Dosis
 TCM Phänotyp, CD4/CD8 Ratio 1:1



Strictly confidential, do NOT post or distribute

UltraCART – Outlook

Arbeitspaket 1: Neue Targets und CAR-T Zell Produkte. Lead: T-CURX.

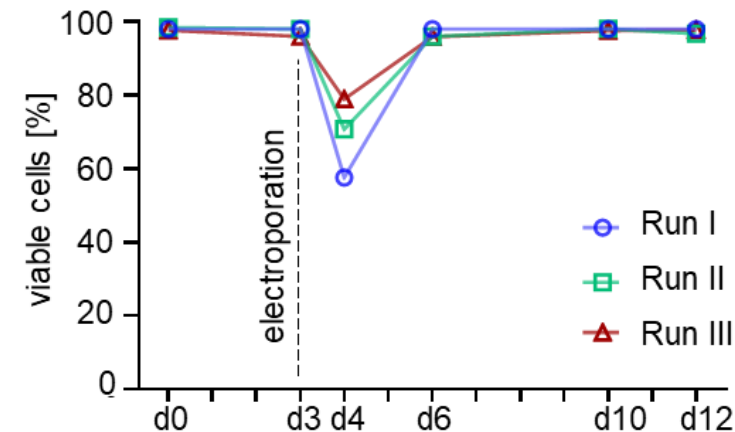
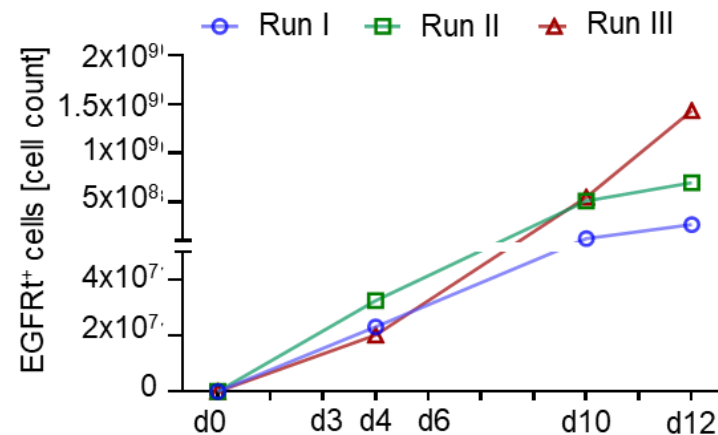
Arbeitspaket 2: Neue Modelle für die Prädiktion von Sicherheit & Wirksamkeit. Lead: Fnh-IZI.

Arbeitspaket 3: Herstellung & Automation. Lead: Fnh-IZI.

→ Verkürzung des Herstellungsprozesses – 7 Tage

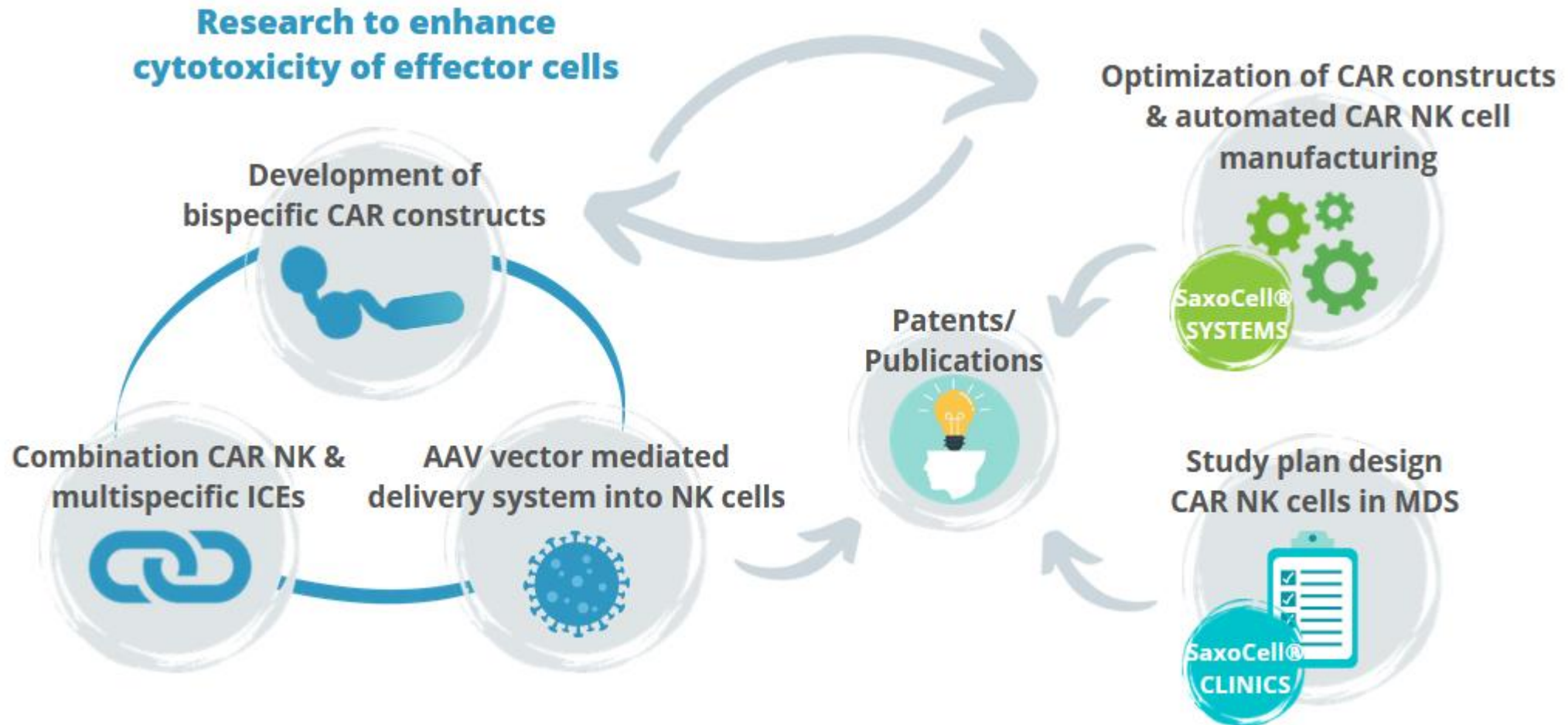
Arbeitspaket 4: Hochauflösende Mikroskopie. Lead: T-CURX.

Arbeitspaket 5: Omics Analytik und Künstliche Intelligenz. Lead: Fh-IZI.

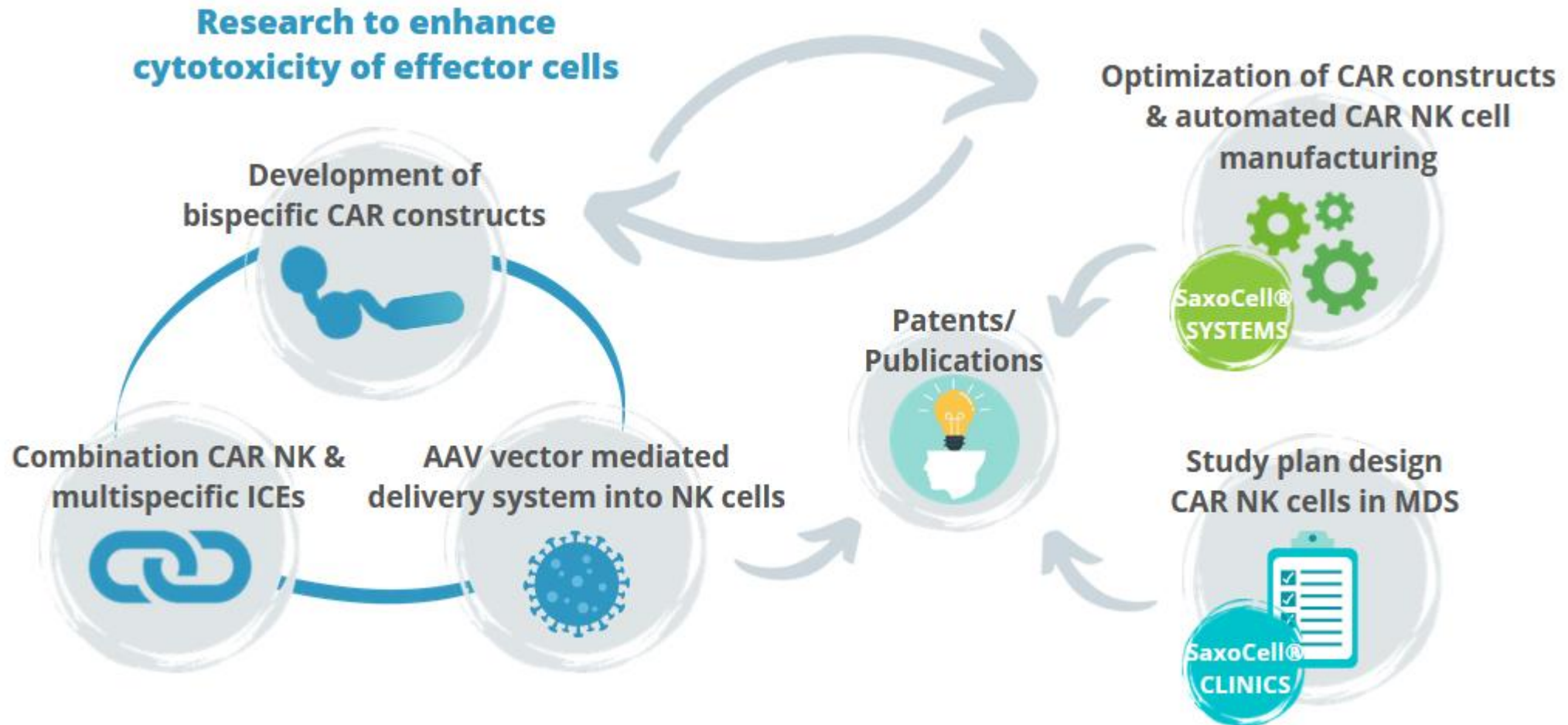


Strictly confidential, do NOT post or distribute

CAR-NK 4.0 – Project Overview



CAR-NK 4.0 – Project Overview



CAR-NK 4.0 – Results so far

AP1

- Continuous improvement and synchronization of NK-protocols, supply of human pNK cells for different WPs (IZI)
- Establishment of an automated process for production of target-specific CAR-NK cells is ongoing (MB)
- RUO protocols for production and testing of CAR NK functionality have been transferred from MB to IZI (MB)

AP2

- Preparation of the study protocol has started (KCh)
- New Proposal (former BMBF-DoNKAR) to ensure the financing of the clinical trial is under development (UKL)

AP3

- Relevant antigen-binding domains have been identified and EMM-specific CAR-domains have been *designed* (IZI)
- Infrastructure to obtain EMM-material has been established (IZI/KCh)
- Common sense on standardized diagnostics (IZI/KCh)
- Recruitments of two project responsables in Chemnitz, who will guide the scientific transfer to IZI (IZI/KCh)

AP4

- Production of anti-CD19/CD16 ICE[®], purity and stability check (AFMD)
- Demonstrating activity in cytotoxicity assays (IZI/AFMD)
- *In vitro* testing of cytotoxic CAR-NKCs via retroviral transduction (IZI)

AP5

- Different AAV-Serotypes and –capsid variants were tested on human pNK cells (IZI)
- Protocol for AAV-vectors has been established with transduction efficiencies in human pNK cells of up to 80% (IZI/UCCL)
- Cloning of CAR-constructs for AAV-vectors started (IZI/UCCL)

AP6

- The works in AP6 will start according to the foreseen timeline in Q3 2022 (MB)

CAR-NK 4.0 – Outlook

AP1

- Finish establishment of the automated process for the production of target-specific CAR NK cells (MB)
- preparation of a data package for *in vitro* analysis of the target-specific CAR NK cells (MB)

AP2

- Continue working on study protocol/ study plan combining forces of KCh and UKL
- Application for new funding for the clinical trial (UKL)

AP3

- Defining methods to analyze EMM-samples for potential CAR-NK-therapie targets (IZI/KCh)
- Improving preparation of EMM-material prior biobanking (IZI/KCh)

AP4

- Affinity assays to check CD19 and CD16 binding of ICE[®] (AFMD)
- further *in vitro* tests of cytotoxic CAR-NK cells in combination with ICE[®] (IZI/AFMD)

AP5

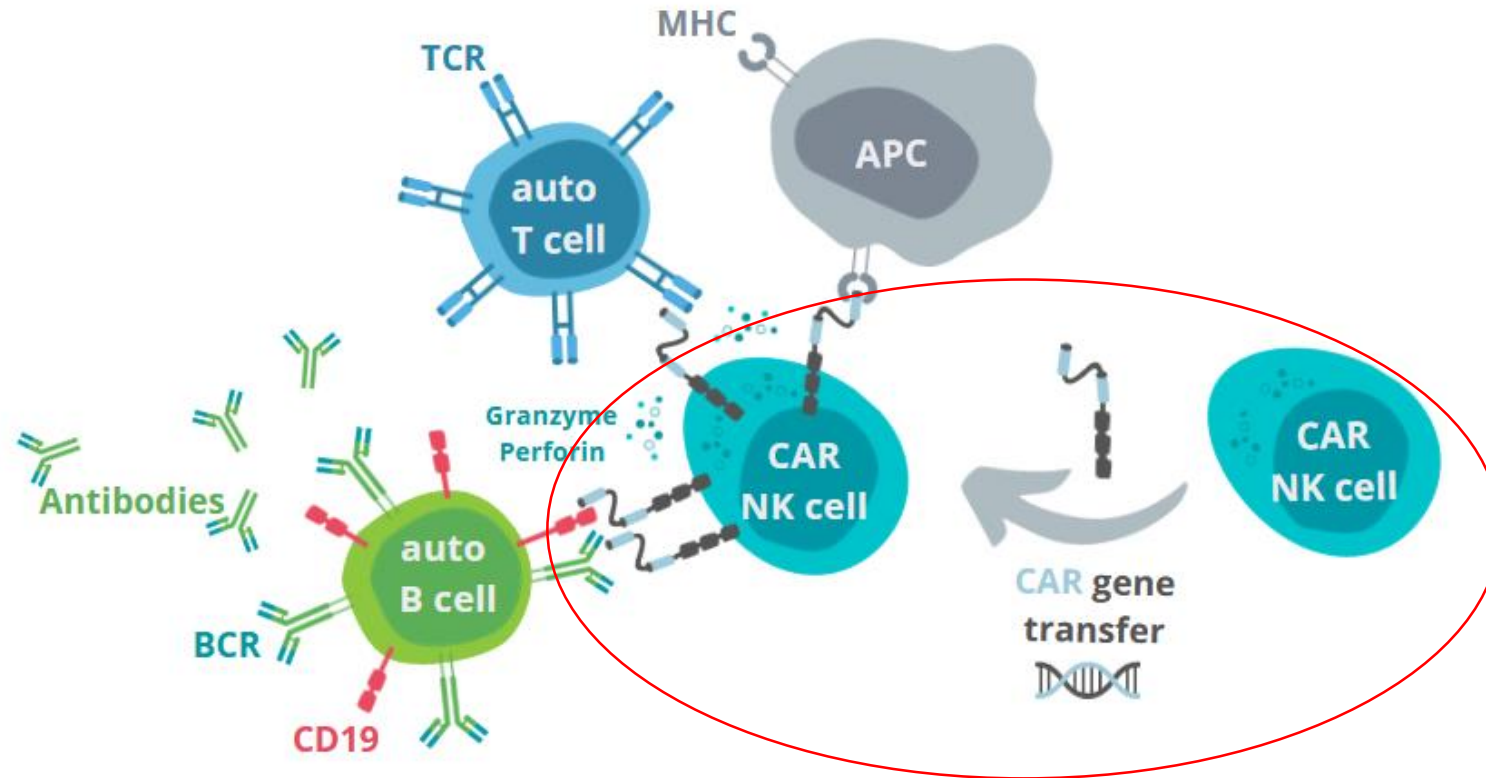
- Investigation of the kinetics and the of transgen expression (IZI)
- Transduction of human pNKC with AAV-CAR-Vectors
- Further optimization of transduction efficiency and analysis of intracellular processing and infection biology (UCCL)

AP6

- Production of optimized target-specific CAR lentiviral vectors in pre-clinical quality (MB)

CAReNK-AID – Project Overview

CAR engineered NK cells for the targeting of severe AutoImmune Diseases



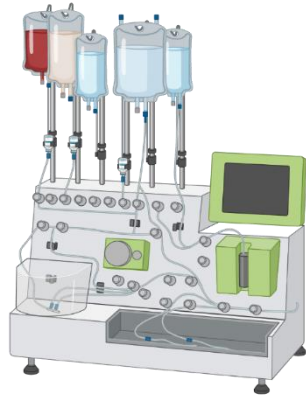
CAR-NK-AID – Outlook

WP3
Achim Aigner

MaxCyte nanoparticles



virus-free gene transfer



GMP/Expansion

WP1
WP2
Torsten Tonn
Achim Temme

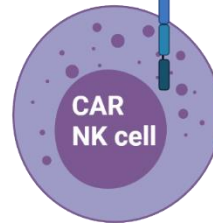


autoimmunity model

WP5
Stefan Bornstein

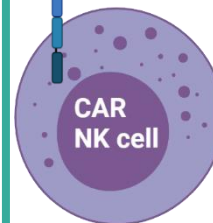
Pan B cell
marker

CD19.CAR



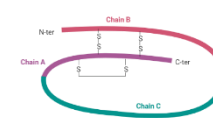
Autoreactive
B cell receptors

BCR.CAR

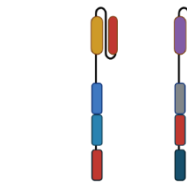


autoimmune targets

WP4
Ezio Bonifacio

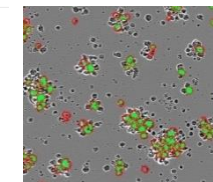
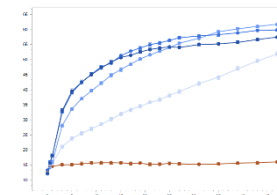


Type I Diabetes, Myasthenia Gravis, Graves disease,...



CAR generation

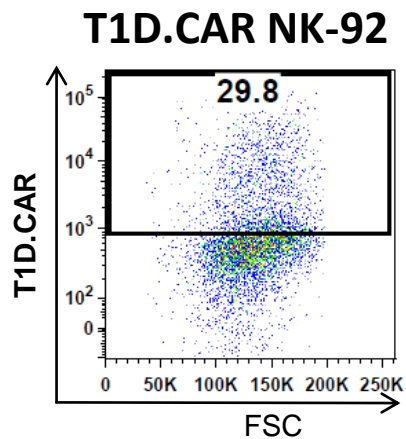
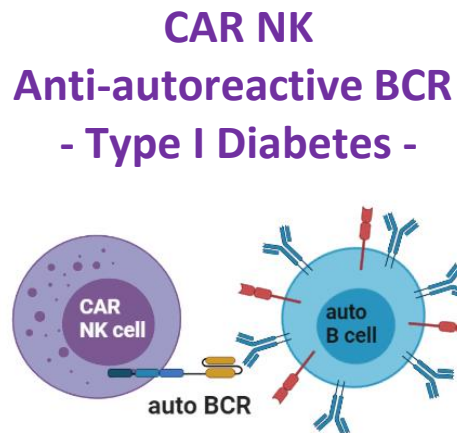
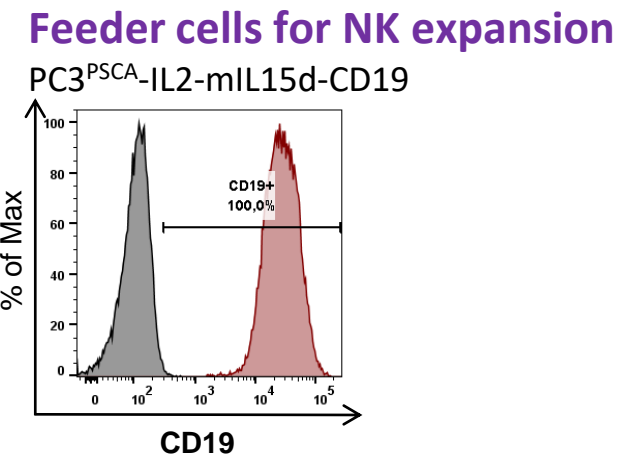
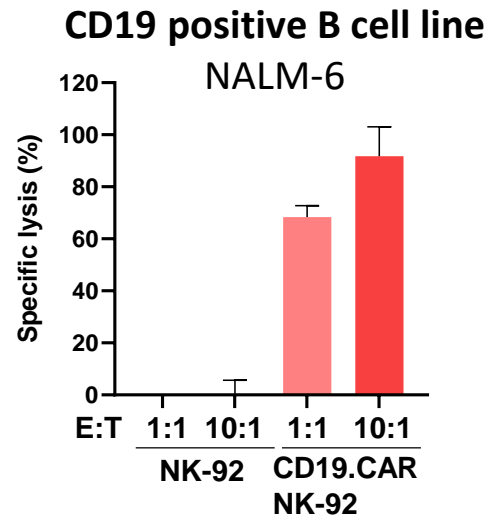
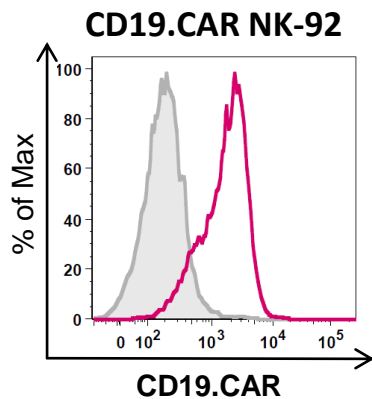
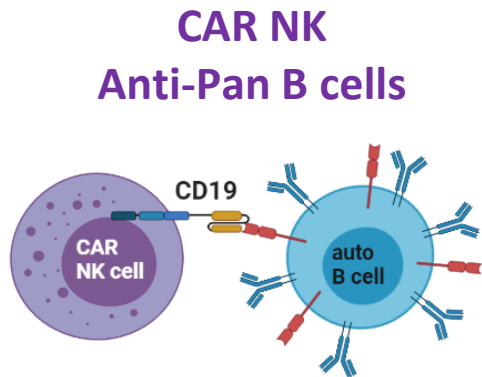
WP1/WP4
Torsten Tonn
Ezio Bonifacio



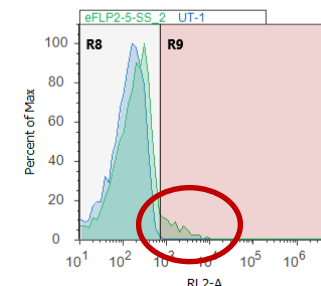
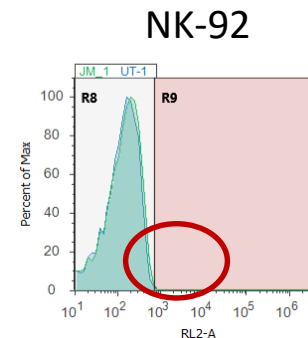
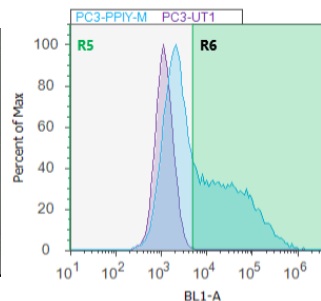
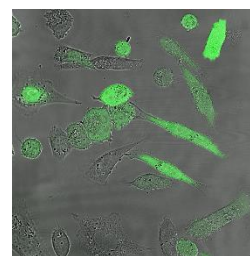
CAR-NK characterisation

WP1
Torsten Tonn

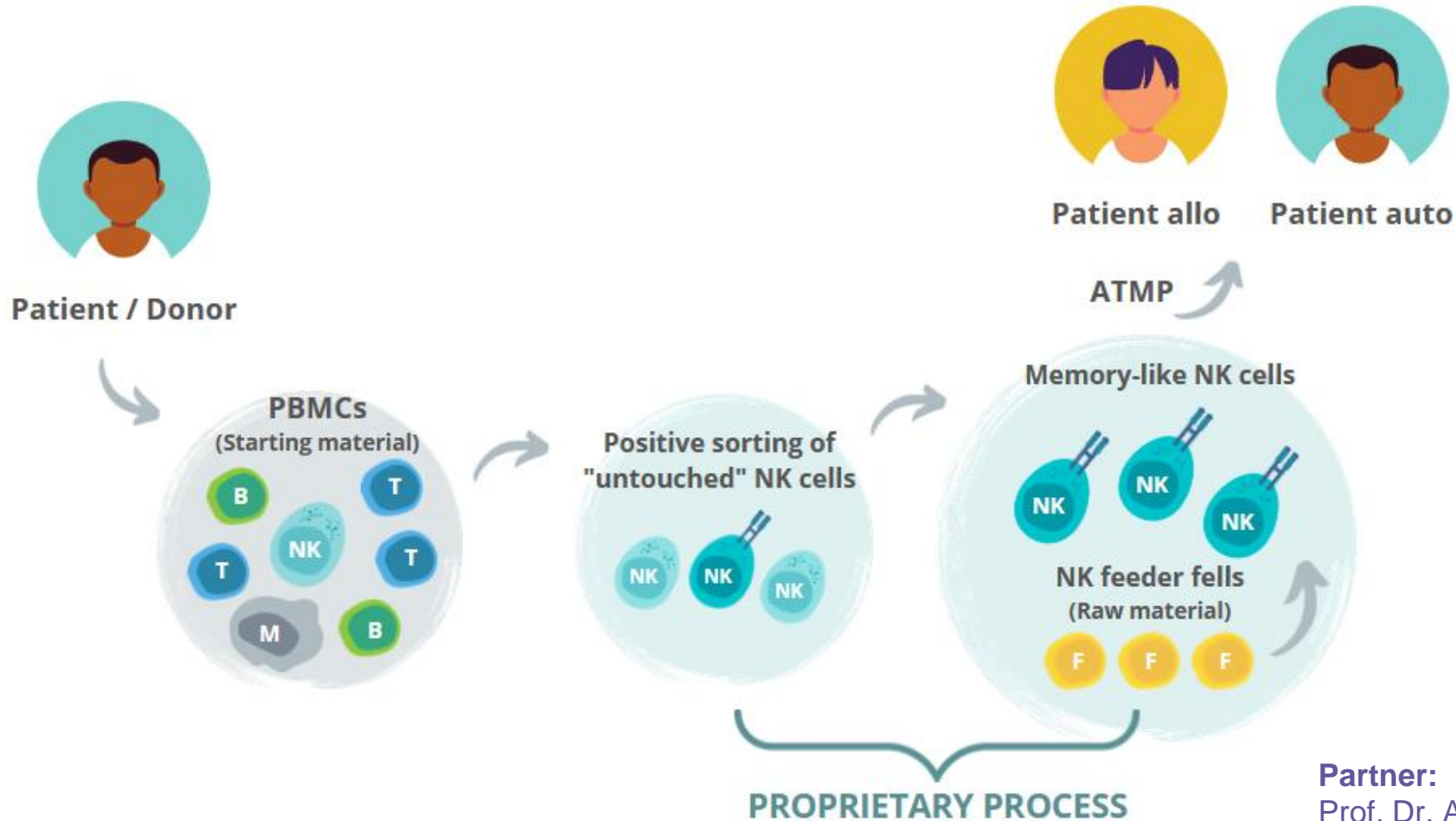
CAReNK-AID – Results so far



Virus-free NK cell transfection



NK4Therapy – Project Overview



Partner:

Prof. Dr. A. Temme (NCH-FOR, UKD, TUD)
Prof. Dr. T. Tonn (ETM, TUD)
Prof. Dr. M. Bornhäuser (MKI, UKD, TUD)
Cell.Copedia GmbH, Leipzig

NK4Therapy – Workflow/Outlook

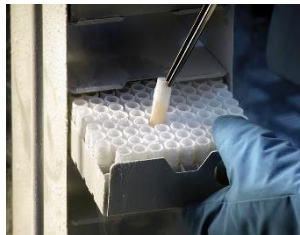
WP1 - Feeder cell clones and validation
Temme Group



IMTEK
DEPARTMENT OF
MICROSYSTEMS ENGINEERING

Cell printing

WP2 - Feeder Cell Master Cell Bank (MCB)
Temme Group



Raw material for
production of ATMP

Optimizing
production process

**WP3 - Large Scale Expansion of NK cells
using feeder cell MCB**
Temme Group

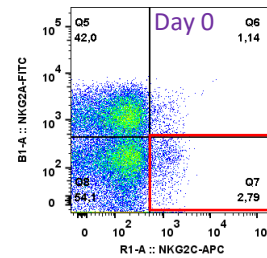


ScaleReady

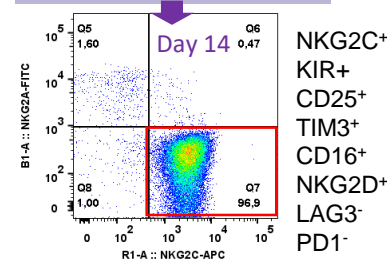
Establishing a GMP compliant process
for production of NKG2C+ NK cells

WP6 – translation into clinical settings
Temme Group / Tonn Group

NK cells from peripheral blood
(raw material)



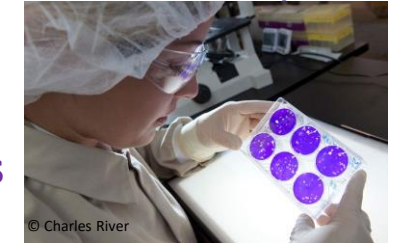
+ Feeder Cells



Tumor-reactive NKG2C+ NK cells

WP4 - GMP conformance Tonn Group
Temme Group

Safety /
Identity Tests



WP5
Temme Group
Bornhäuser Group

in vitro / in vivo validation
of NKG2C+ NK cells



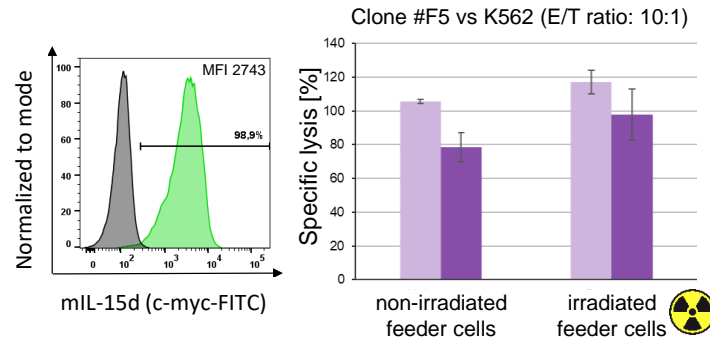
GMP compliant NK cell isolation

WP7
Cell.Copedia GmbH



NK4Therapy – Results so far

WP1 – Cell clones and validation



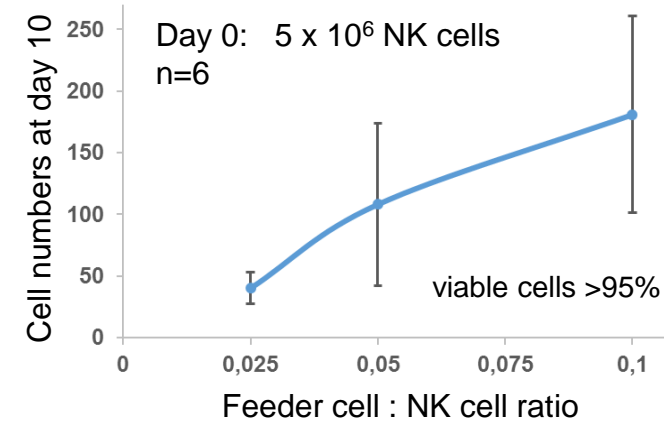
- first precursor clones validated

WP4 – Identity Testing

- whole genome seq from 6 clones for establishing locus-specific PCR of transgenes
- ongoing bioinformatic analysis



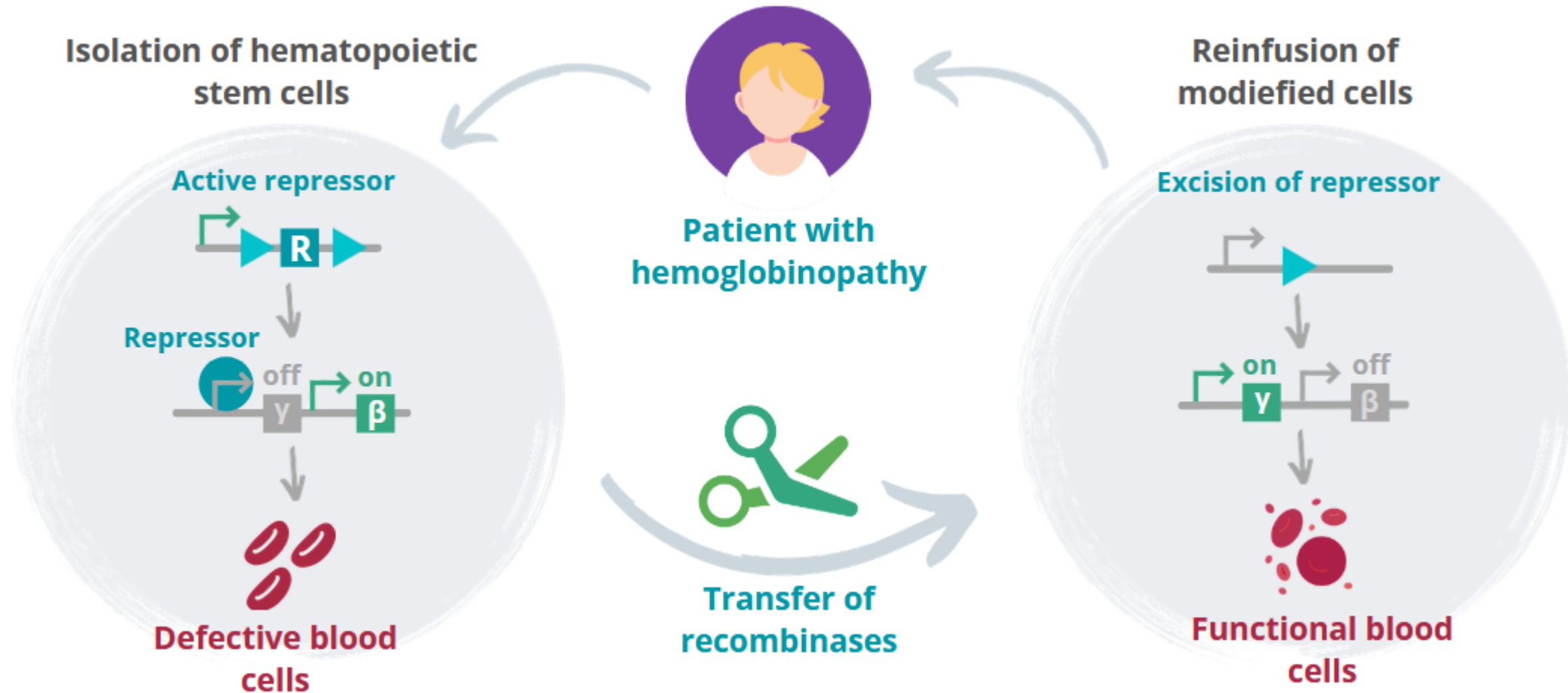
WP3 – Expansion of NKG2C+ NK cells



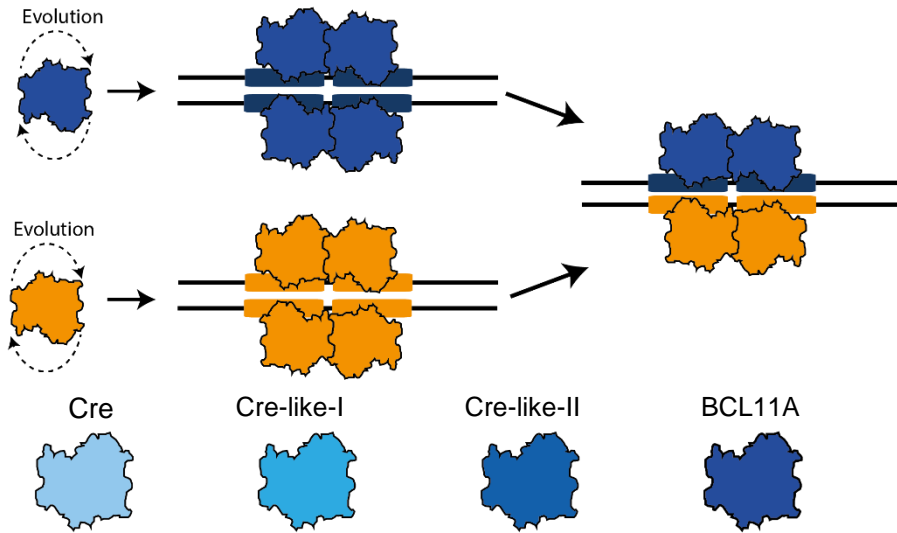
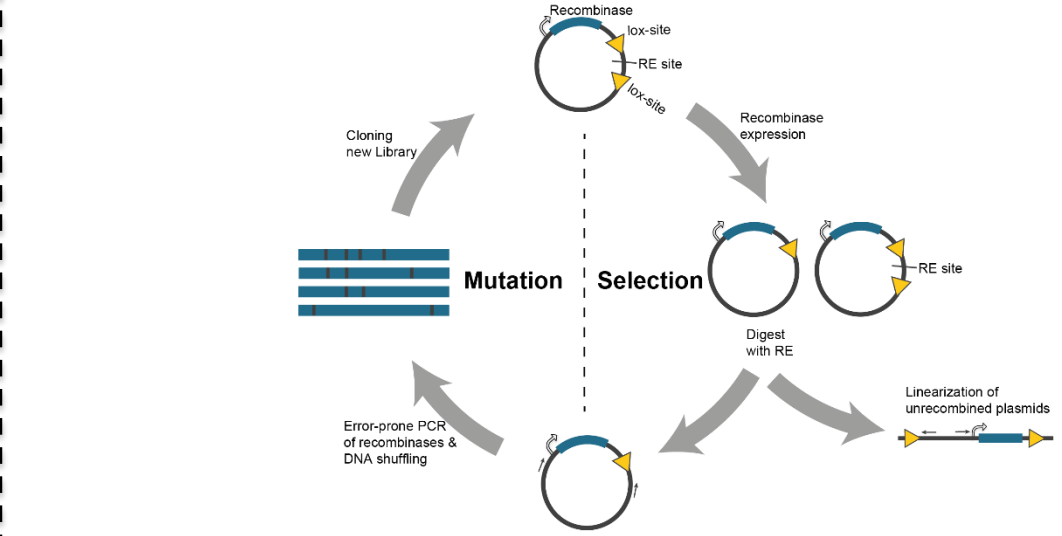
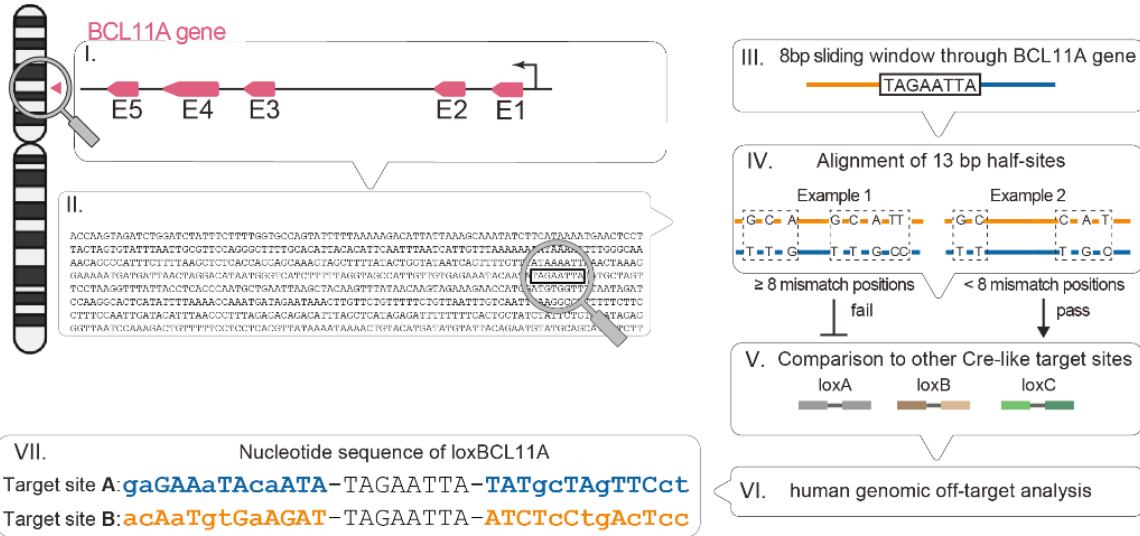
Soon be started...

WP2 – Generation of Master Cell Bank (MCB) and End of Production Cell Bank (EoPCB)

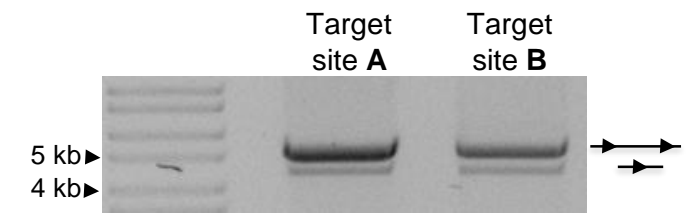
HemRec – Project Overview



HemRec – Results so far



Recombination test of the BCL11A libraries



HemRec – Outlook

- Evolving recombinases for final BCL11A target site
- Deep sequencing based screening of the libraries to test efficiency for on-target and potential off-targets in the human genome with support of DKMS
- Analyzing single clones in bacteria
- Testing most promising clones in cell culture in a reporter cell line
- Analysis of the BCL11A deletion at the endogenous locus using adult erythroid cell line
- Analysis of the BCL11A deletion in patient cells with support of DKMS
- BCL11A deletion in patient cells and transplantation of the cells with support of DKMS

Universitätsklinikum
Carl Gustav Carus



DKMS x
Life Science Lab



Universitätsklinikum
Carl Gustav Carus



DKMS x
Life Science Lab



Universitätsklinikum
Carl Gustav Carus



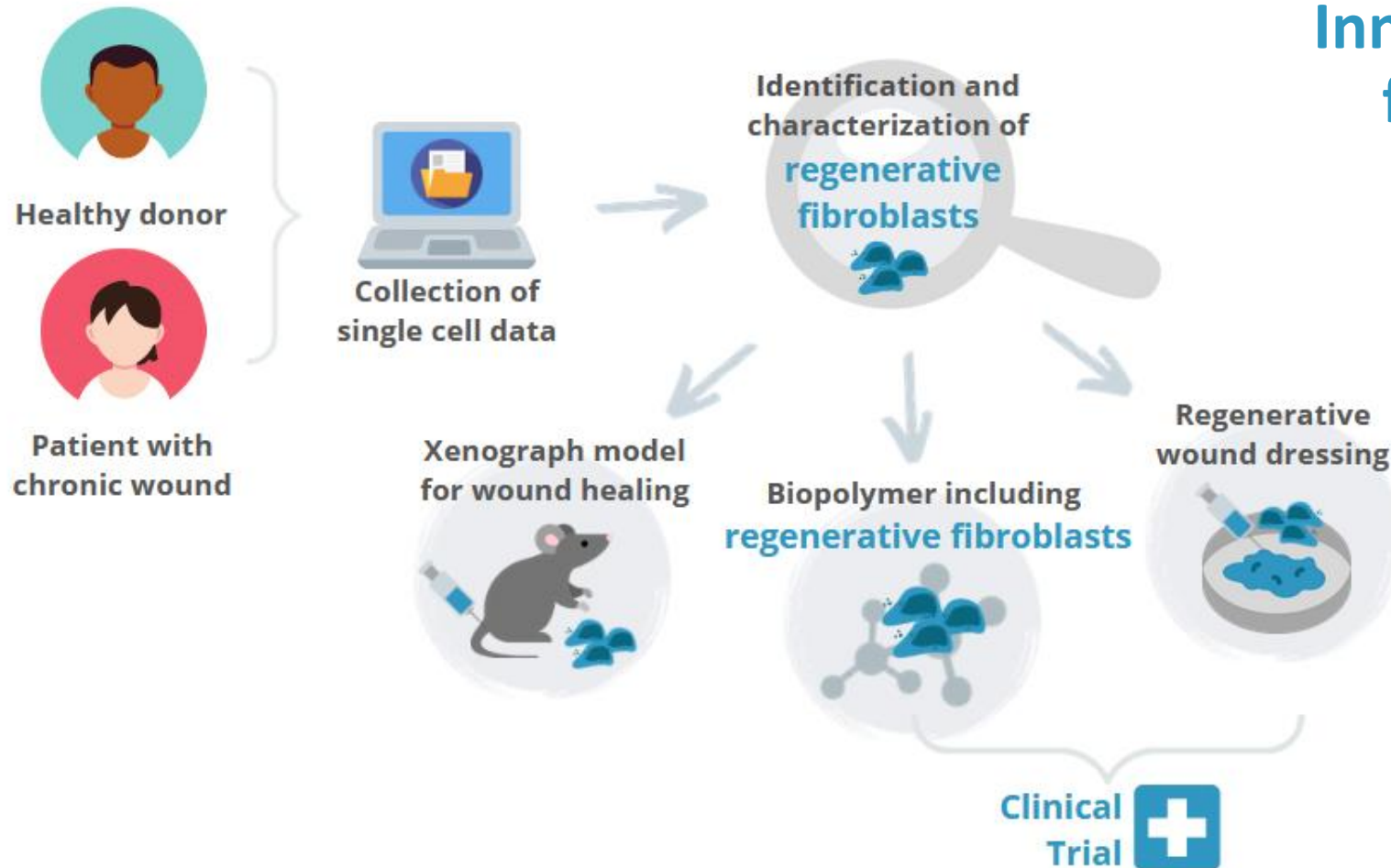
DKMS x
Life Science Lab



Universitätsklinikum
Carl Gustav Carus

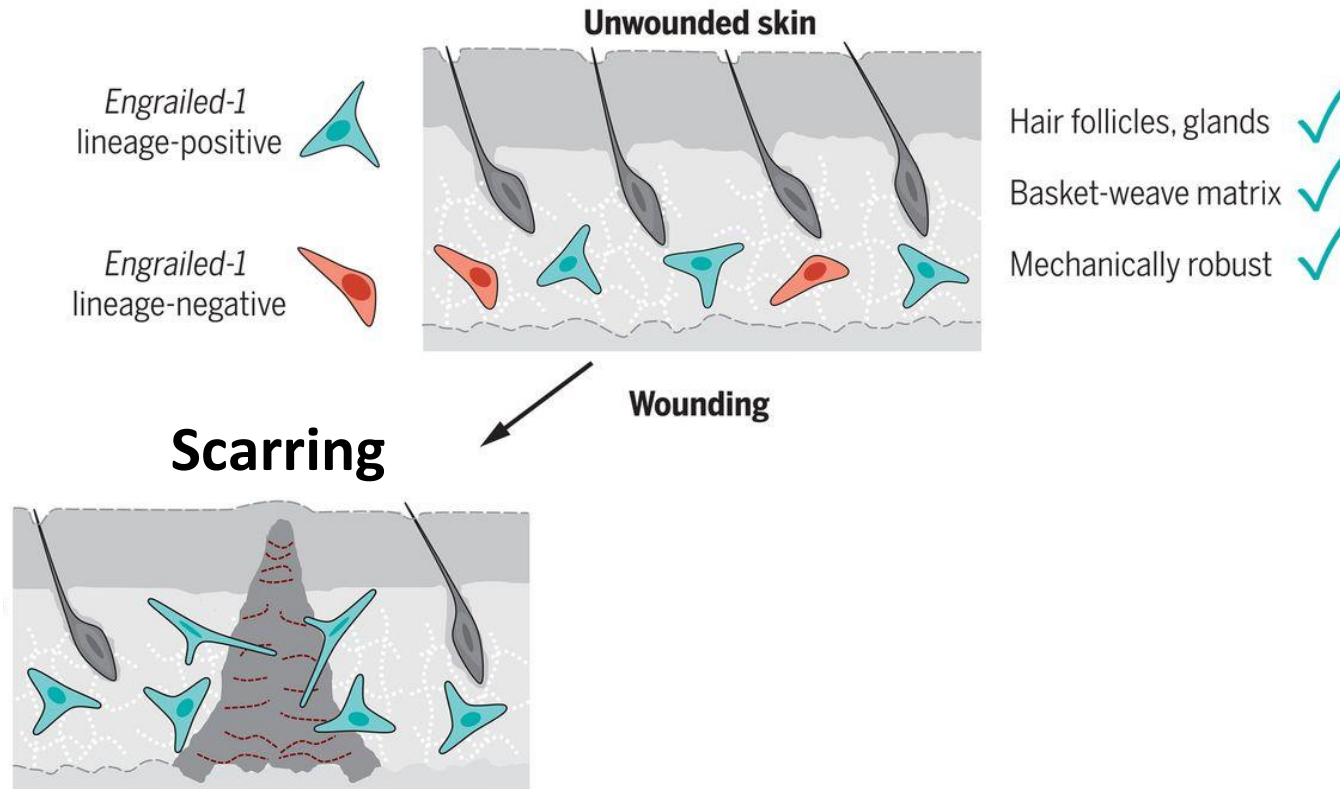


ZellWund – Project Overview

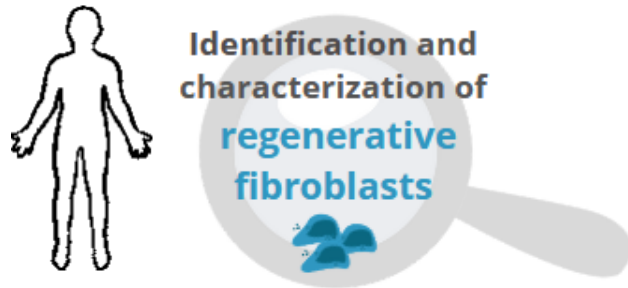


Innovative cell therapy
for human wound
repair

ZellTWund – Background



ZellTWund – Ongoing



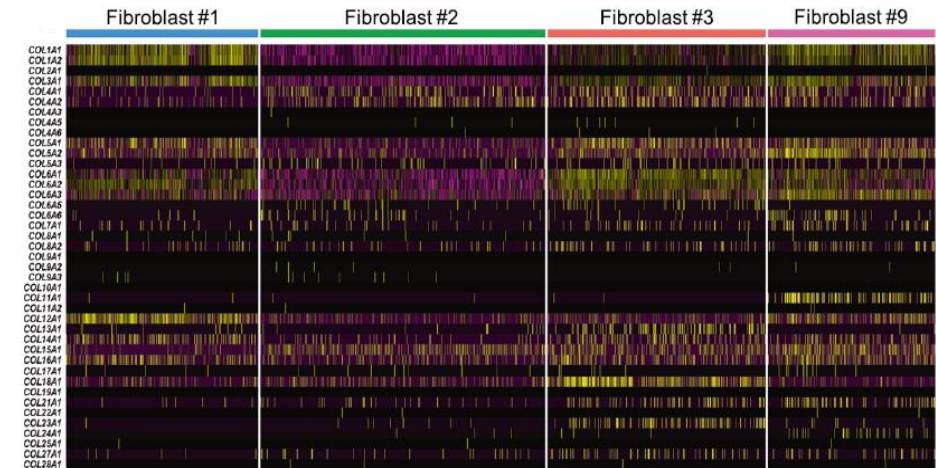
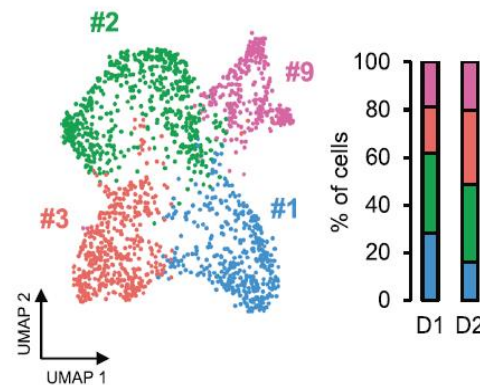
Identification and characterization of regenerative fibroblasts



Re-analyse existing single cells analysis human Data

Sole-Boldo et al., Communications biology, 2020
Ascension et al., JID, 2020
Vorstandlechner et al., The faseb Journal, 2019
Tabib et al., JID, 2018

In collaboration with
The Interdisciplinary centre for bioinformatics
University of Leipzig



ZellTWund – Ongoing

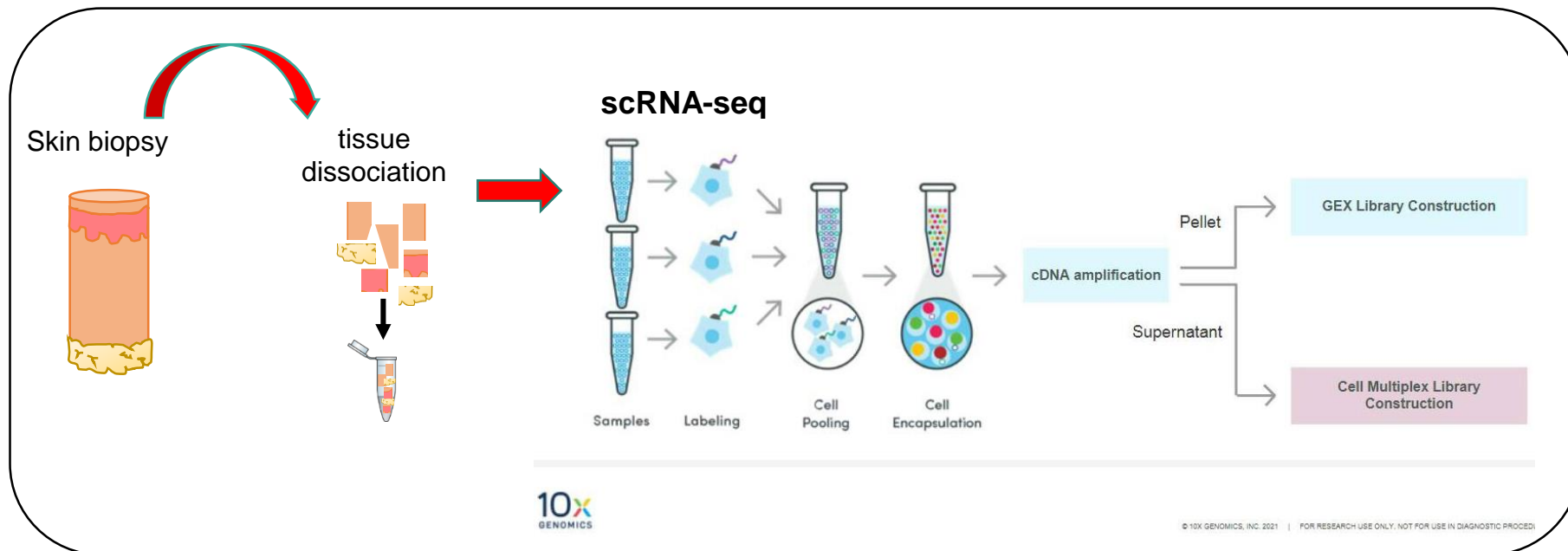


Identification and characterization of regenerative fibroblasts

Samples collection:

- Healthy skin
- Normal healing wounds
- Impaired healing wounds

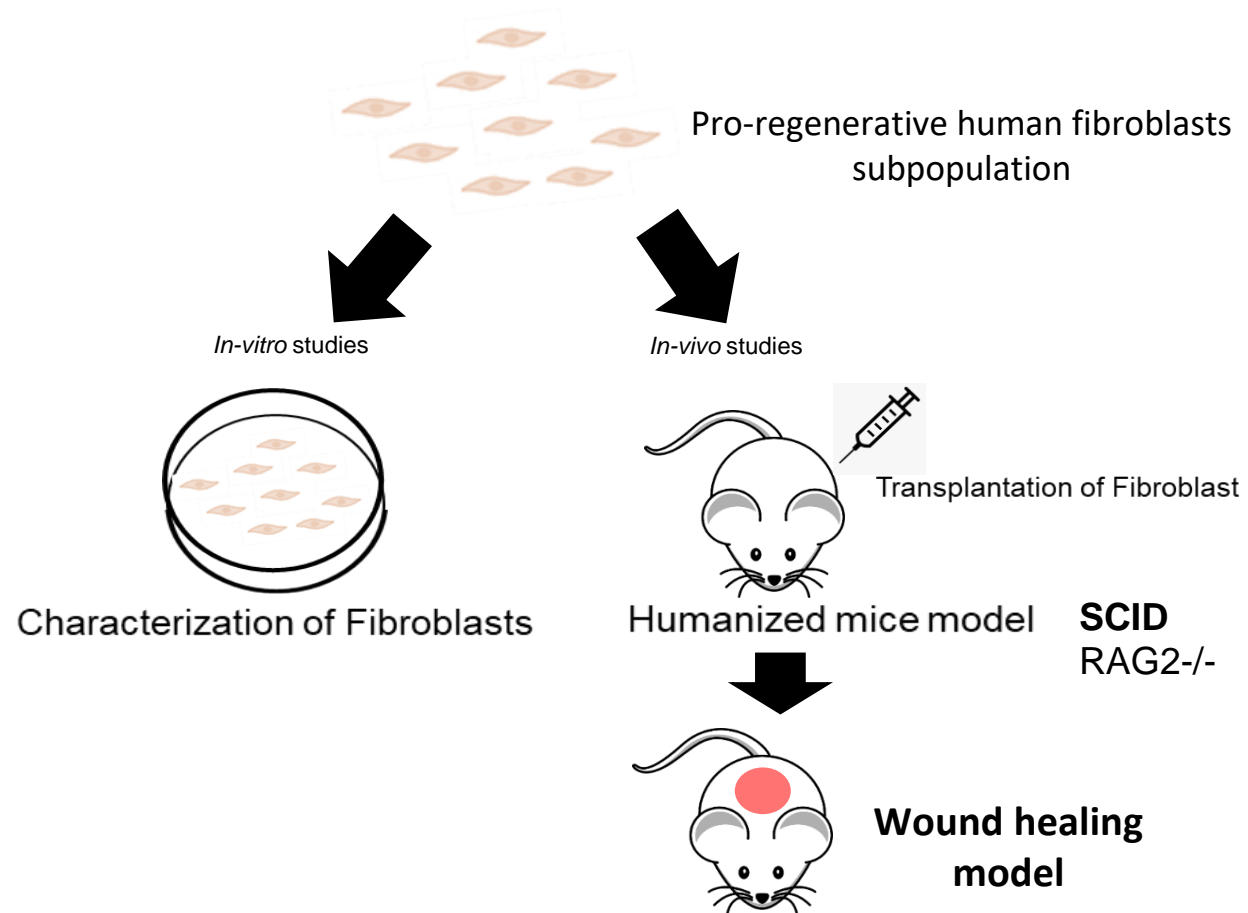
- Multiple body location
- Wide age range
- Gender (male and female)



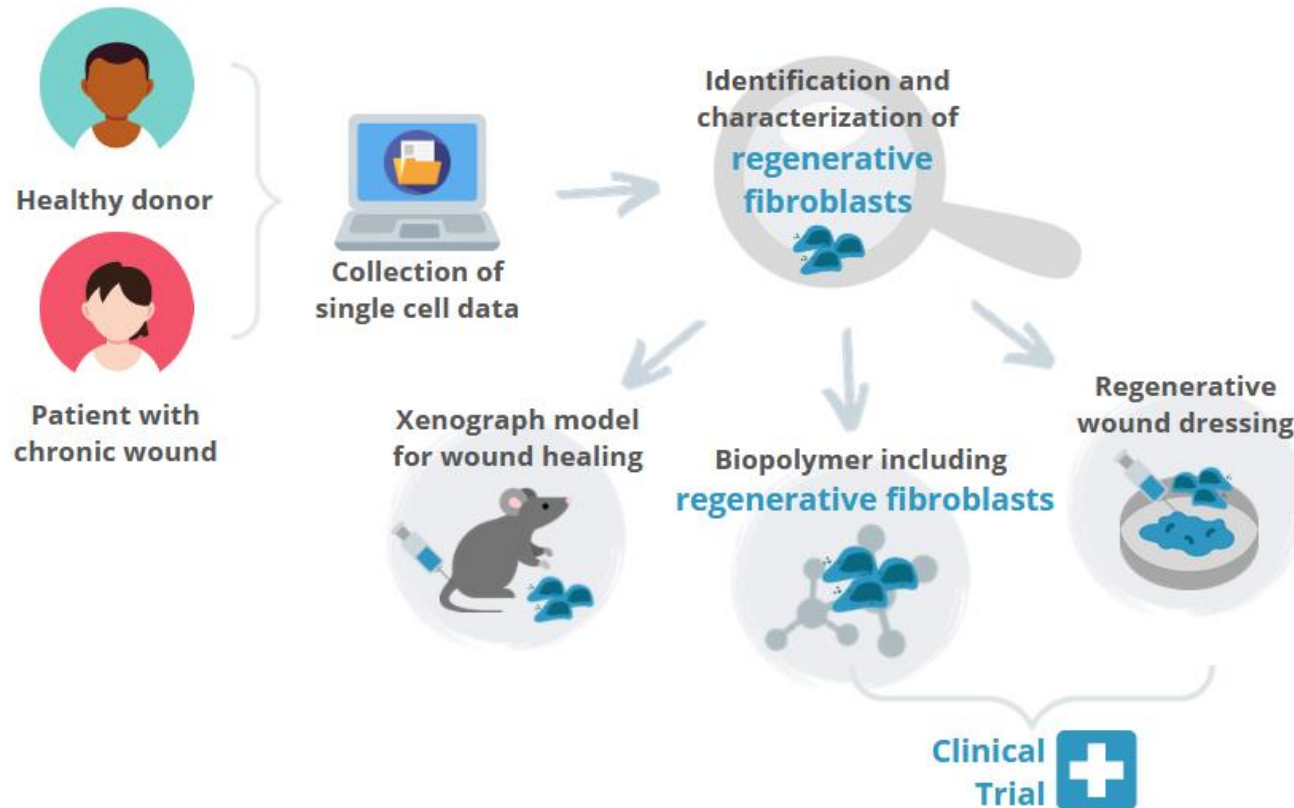
AREA 3 – ATMPS

ZellWund – Outlook

Xenograph model
for wound healing



ZellTWund – Thanks for your attention



UNIVERSITÄT
LEIPZIG



Marta Torregrossa

Dr. Sandra Franz

Prof. Dr. Jan-Christoph Simon

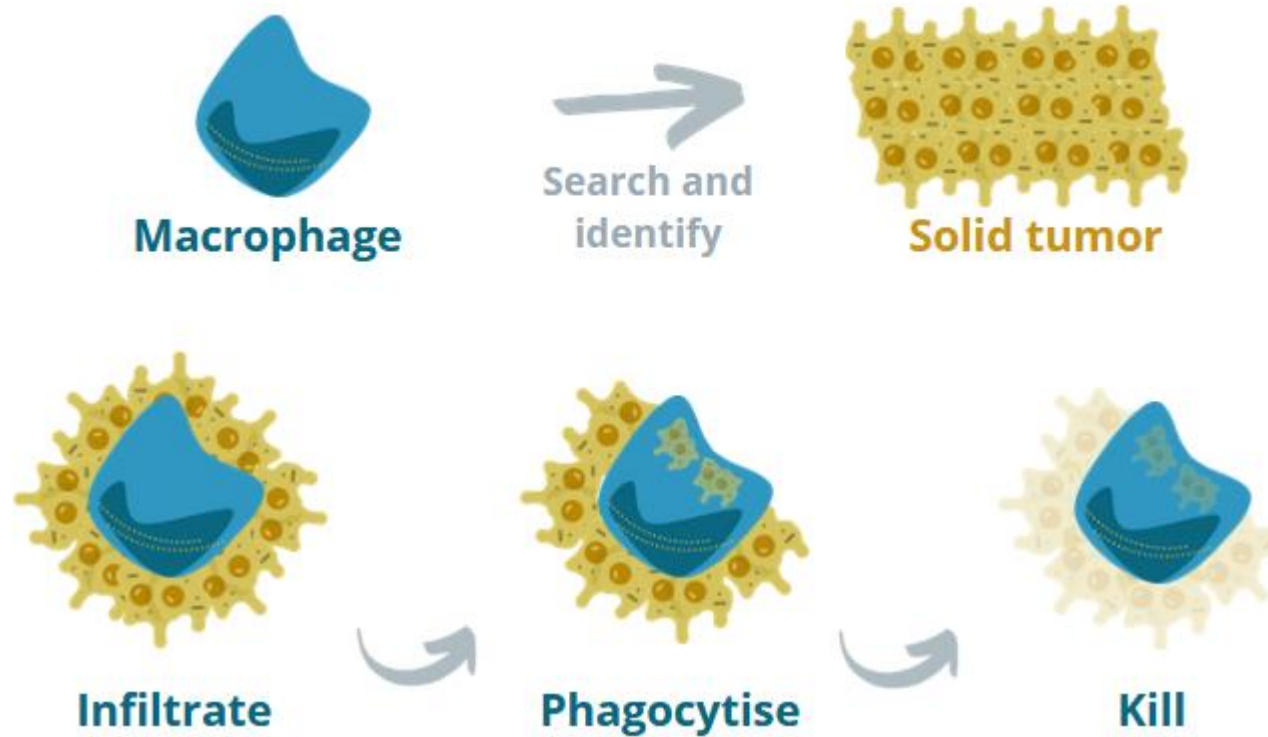
**HELMHOLTZ
MUNICH**



Ravinder Kandi

Dr. Yuval Rinkevich

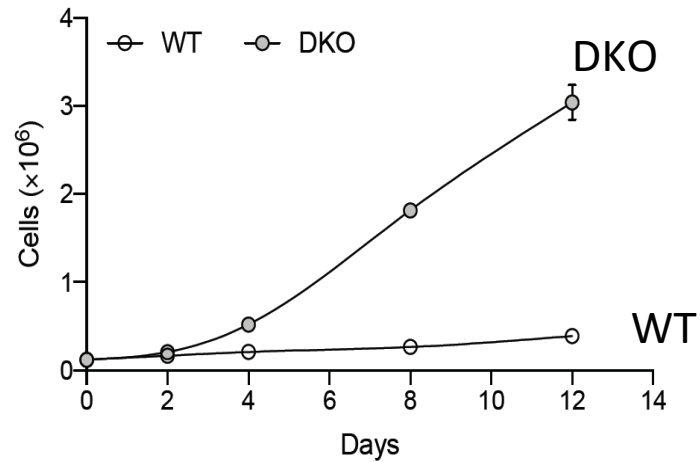
xMac – Project Overview



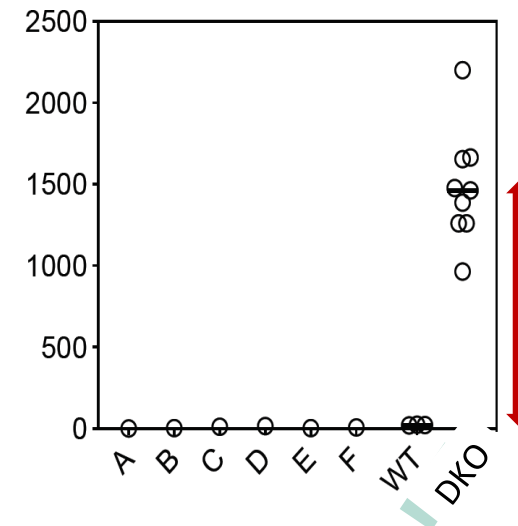
xMac – Results so far

Characterization of human iPSC-derived MAF/MAFB DKO Macrophages: expansion in cell culture

Growth curve
after differentiation



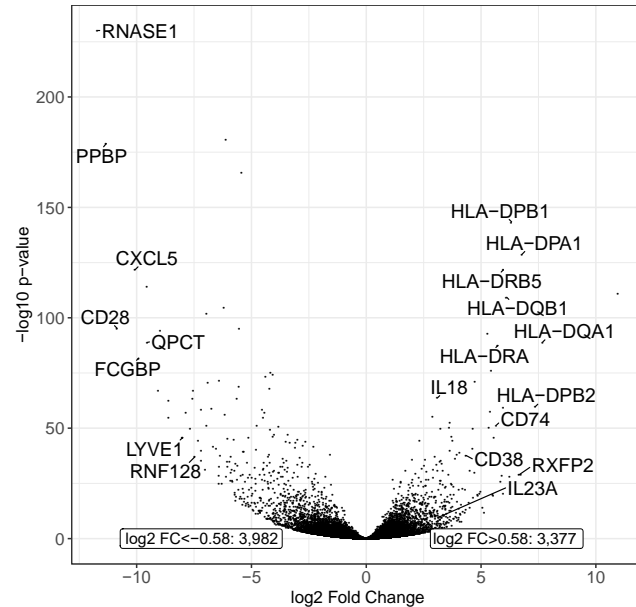
Yield comparison



A-F: competitor protocols

xMac – Results so far

Characterization of human iPSC-derived MAF/MAFB DKO Macrophages: resistant to M2 polarization



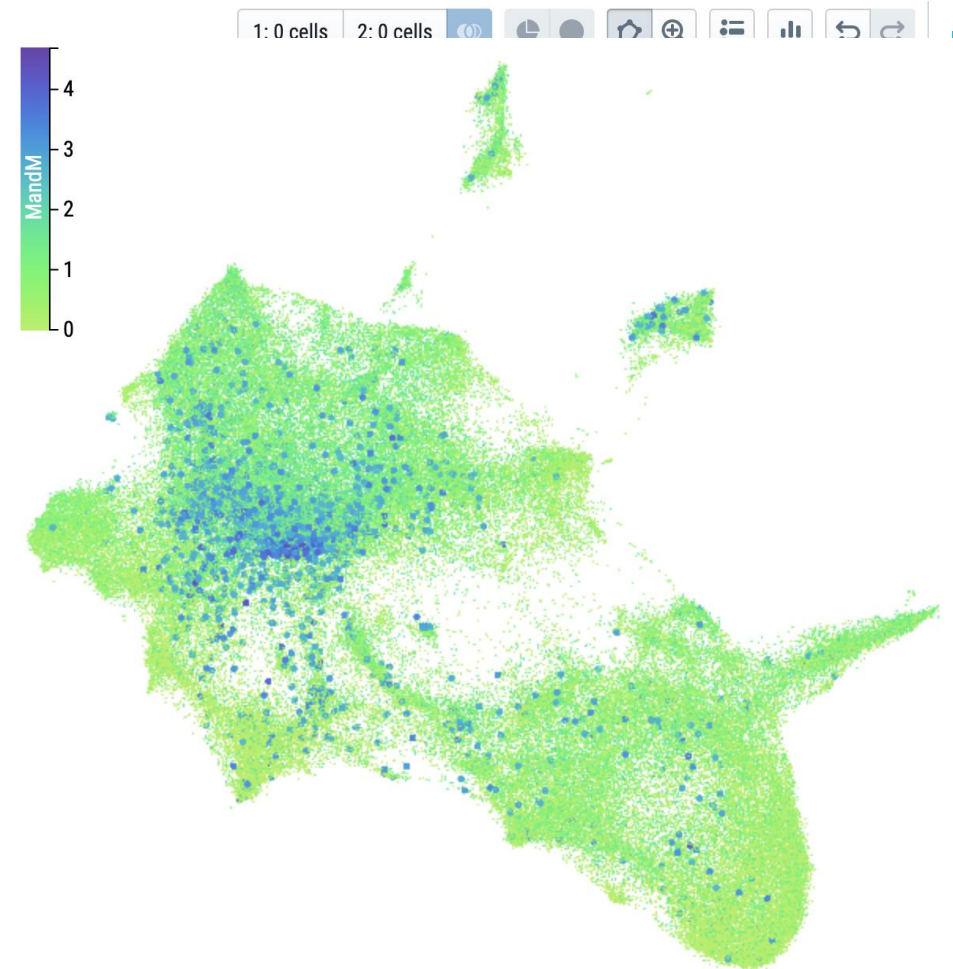
cellxgene 2021_MoMac_VERSE

Create new category

Clusters

- C1Q Macrophage -16 13598
- CD16+ Monocytes -1 4828
- CD16+ Monocytes -5 13809
- CD16- Monocytes -12 2586
- CD16- Monocytes -8 17144
- DC2/DC3 -14 4497
- FTL Macrophage -17 7634
- HES1 Macrophage -2 16795
- IL1B Monocytes -15 13515
- IL4I1 Macrophage -6 4471
- ISG Monocytes -4 2291
- Macrophage -11 3323
- Macrophage -13 1023
- Macrophage -7 12269
- Proliferating cells -10 3260
- Tcell Doublets -9 3154
- TREM2 Macrophage -3 16130

Patient Info



AREA 3 – ATMIPS

umap: 1439 out of 140327 cells

All saved

Scientific advice meeting with PEI on May 4. Road to FIH discussed.

Patent applications filed: the art of abstraction

Patent application 1

- ex vivo proliferating blabla cell

Patent application 2

- human blabla cell with mutations in both alleles of a chromosomal gene
- + its use in the treatment of cancer

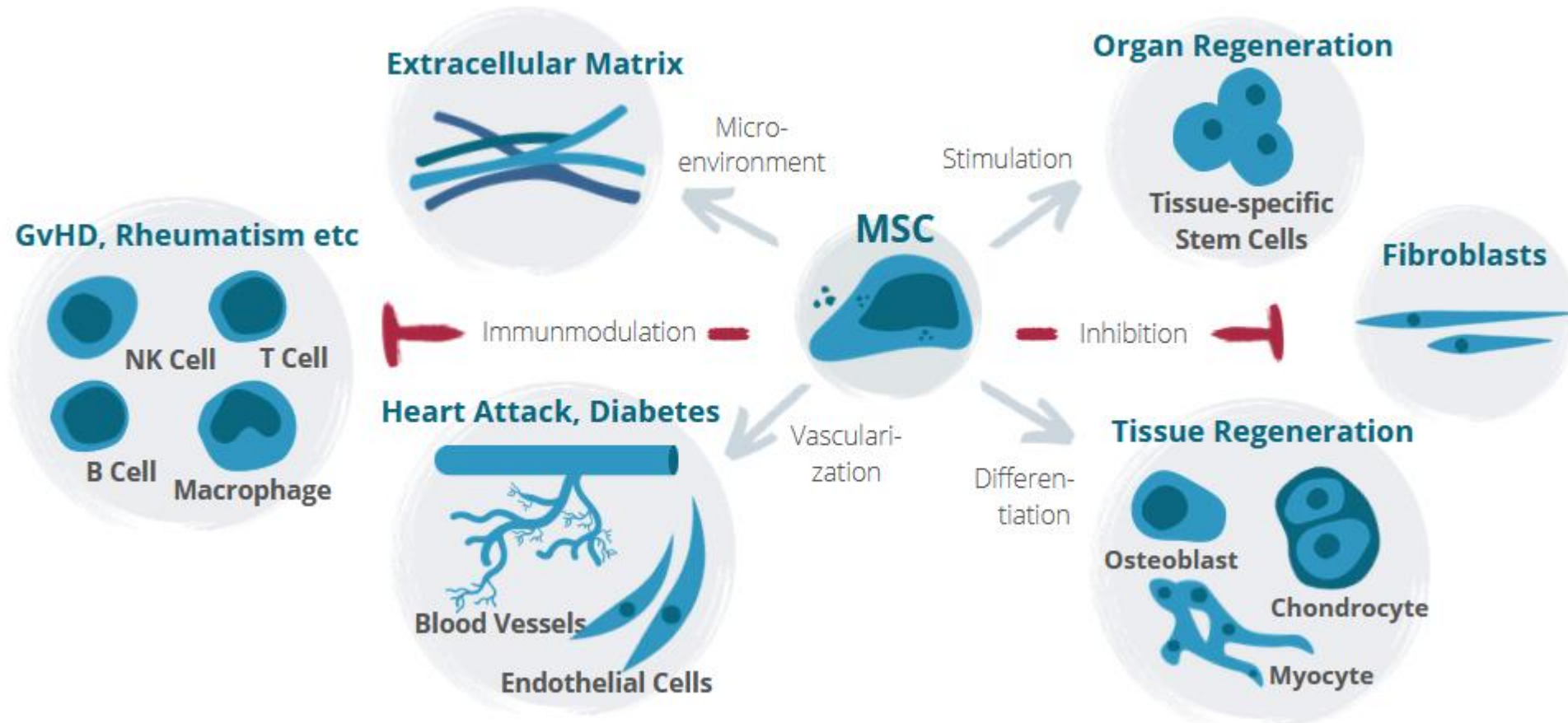
- Functional characterization of DKO Macrophages

- Production under GMP

-----> Phase I trial

- More elegant preparation of DKO

MSC-Prestige – Project Overview



MSC-Prestige – Results so far



- ✓ **Project progress on time**
- ✓ **Contracts in place**
- ✓ **AP 1.1: Preparation of the process transfer for MSC (M1-M6) done**
 - ✓ Lastenheft (all specifications and SOPs)
- ✓ **AP 1.2: Process transfer for MSC (M6-M18) ongoing**
- ✓ **AP 3: Characterization ongoing**
 - active profile of Desacell® and of recipients' immune profile

✓ Target Achievements

1) Industrial Transfer – high cell amounts

Manufacturing approach for MSC cell products into an industrial scaling environment

2) Clinical Translation progress – MSC for clinical trials

Therapy approach for MSC into clinical practice

✓ Work Programme

AP1) Industrial Value Chain

AP2) Process-Ramp for GvHD

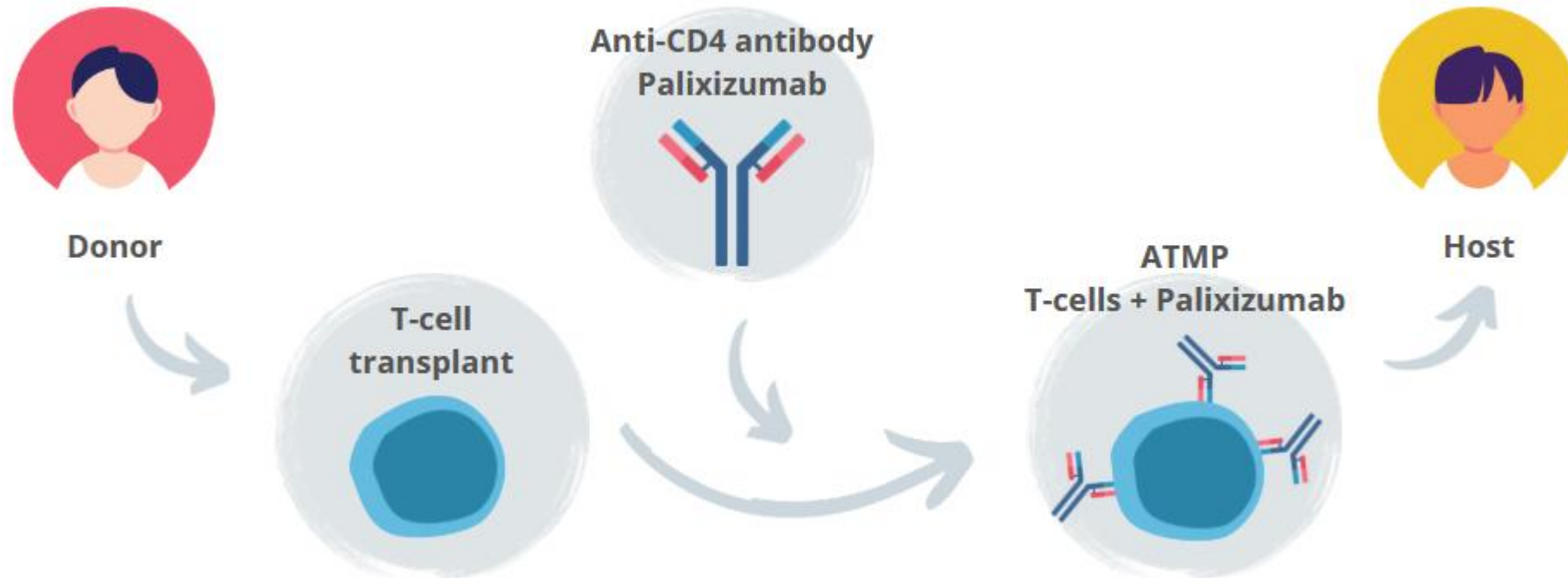
AP3) **Characterization** (active profile of Desacell® and of recipients' immune profile)

AP4) Internationalization

✓ Next Projects Phase II

- high scale cell production
- international trials

OPTIX – Project Overview



OPTIX – Results so far



Work Package 1 – Optimization of Palixizumab® production

- Research cell bank transferred to IZI, new master cell bank finished
- New head of production and new team
- Postponed for 6 months

Work Package 1 – Mode of action of Palixizumab®

- Reduced proliferation due to T cell tolerance induction
- Tolerance markers identified by RNA seq
- Verification of markers by qPCR

Work Package 1 – Biobanking of patient material

- Peripheral blood and bone marrow of patients with hematological cancers after hematopoietic cell transplantation (HCT) for research in WP2 and WP3 is stored (ongoing)

Work Package 2 – GMP process transfer of Palintra®

- Preliminary tests running to define process parameters
- Delay of 6 months because of delay in WP1

Work Package 2 – GMP process transfer of Palintra®

- Preliminary tests running to define process parameters
- Delay of 6 months because of delay in WP1

Work Package 2 – T cell fitness after HCT

Work Package 3 – Palixizumab® functionality after HCT

- Relevant cells were isolated from patient material
- Assays were established with healthy donors

Work Package 4 – Planning of GvHD prevention study

- First draft is work in progress

Work Package 3 – Submission of clinical trial documents

Work Package 3 – Quality control transfer of Palintra®

Work Package 4 – Automated data analysis

Work Package 4 – Sponsor oversight in clinical trials

Work Package 5 – Further applications of Palixizumab®

OPTIX – Outlook



Work Package 1 – Optimization of Palixizumab® production

- First GLP batch produced by 12/22
- Second batch under GMP-conditions

Work Package 1 – Mode of action of Palixizumab®

- Finishing of verification of markers by qPCR and publication

Work Package 1 – Biobanking of patient material

- Further collection of biomaterial

Work Package 2 – GMP process transfer of Palintra®

- Process ready to be pre-validated with GLP-antibody

Work Package 2 – GMP process transfer of Palintra®

- Process ready to be pre-validated with GLP-antibody

Work Package 2 – T cell fitness after HCT

Work Package 3 – Palixizumab® functionality after HCT

- Application of established assays on patient material of WP1

Work Package 3 – Submission of clinical trial documents

- Preparation of clinical trial

Work Package 3 – Quality control transfer of Palintra®

Work Package 4 – Automated data analysis

- Data collection for automated analysis

Work Package 4 – Planning of GvHD prevention study

Work Package 4 – Sponsor oversight in clinical trials

- Clinical trial conduct

Work Package 5 – Further applications of Palixizumab®

- First draft by the end of 2022

OPTIX – Contacts



leading level



Dipl.-Biochem. Lilly Stahl
l.stahl@tcell-tolerance.de



PD Dr. Stephan Fricke
stephan.fricke@izi.fraunhofer.de



ChA PD Dr. Mathias Hänel
m.haenel@skc.de

working level



Dipl.-Pharm. Florian Koch
f.koch@tcell-tolerance.de



Dr. Sandy Tretbar
sandy.tretbar@izi.fraunhofer.de

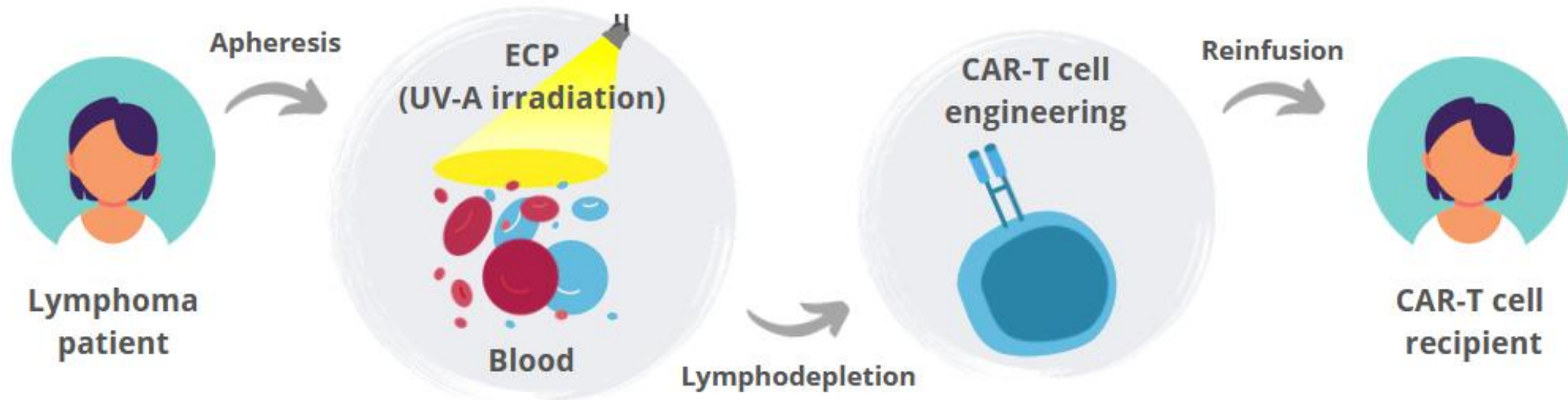


M.Sc. Nadine Heimer
n.heimer@skc.de

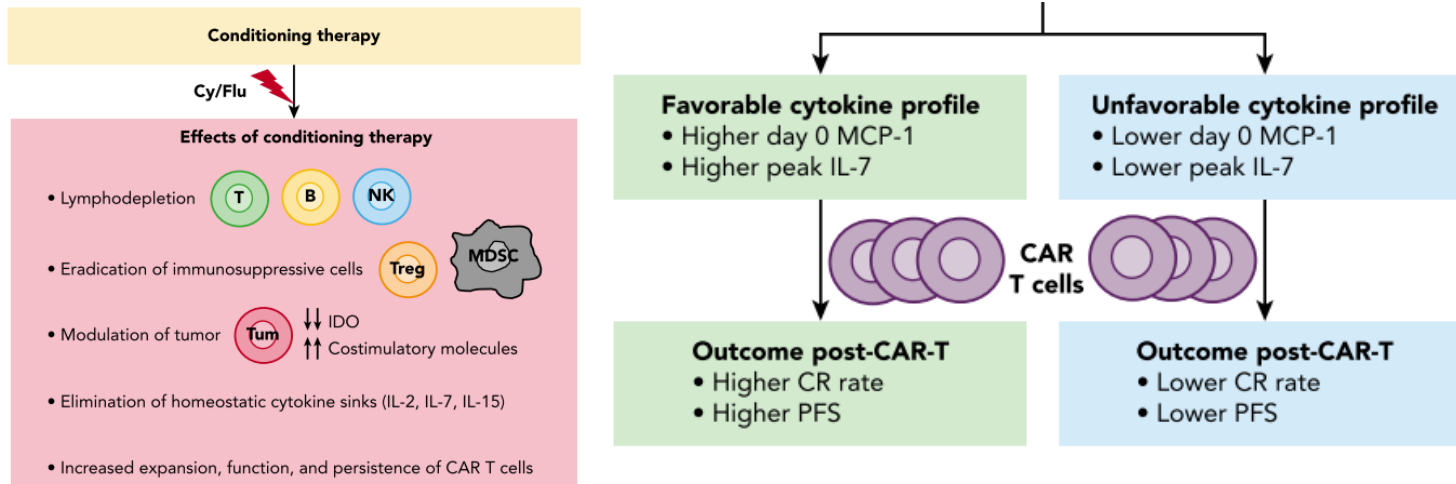


Dr. Paul Warncke
paul.warncke@skc.de

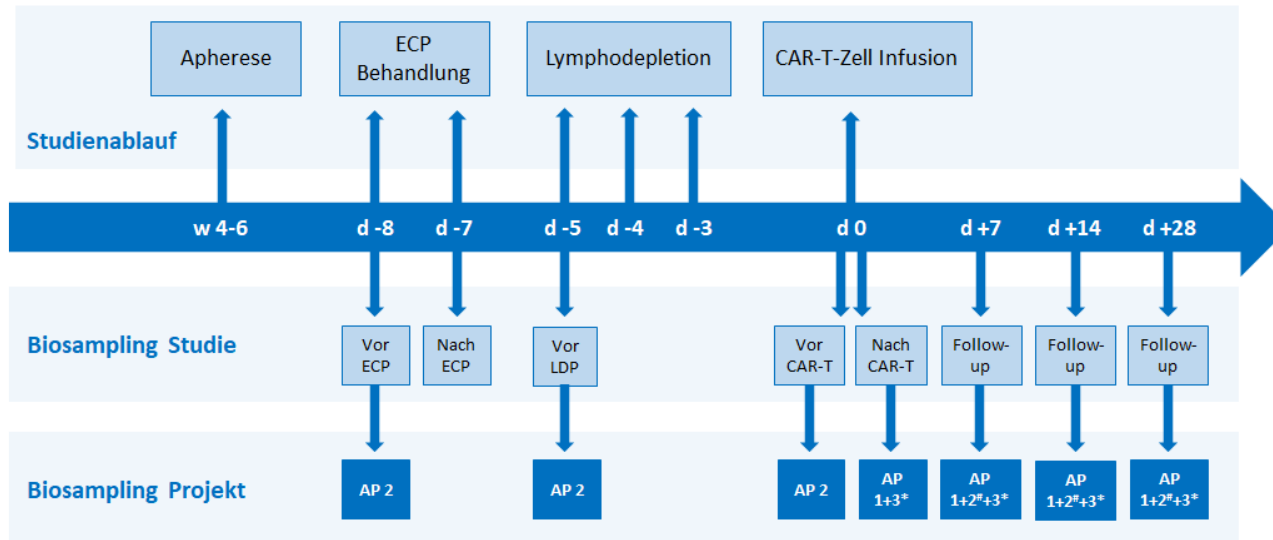
ECP-CAR – Project Overview



ECP-CAR – Project Overview (PhotoCAR clinical trial)



Hirayama, et al. *Blood* (2019)



Key inclusion criteria:

- age ≥ 18 years
- ECOG 0-2
- Diagnosis of DLBCL or PMBCL
- indication and planned treatment with licensed CAR T-cell therapies

ECP-CAR – Project Overview



Analyses of:

- patients' CAR-T cells (quantitative and qualitative)
- ECP induced modulation of cellular and humoral microenvironment
- dynamics of cytotoxic effector functions and transcriptome-profiles

ECP-CAR – Results so far



Current Status:

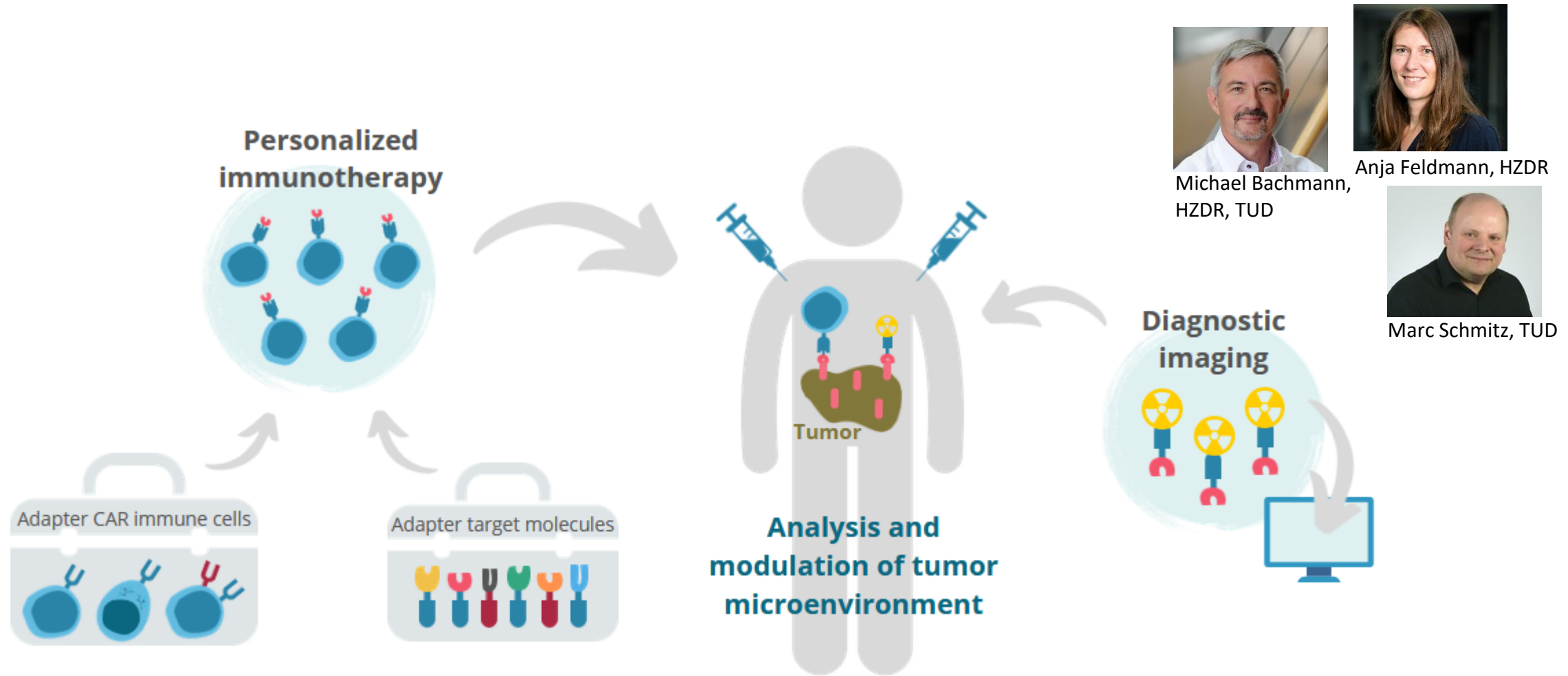
- Lab methodology (immunology) established
- Contract with Malinckrodt (PhotoCAR clinical trial) in discussion
- Manufacturing licence for ECP pending (discussion with local regulations and PEI) – expected Q3 2022

ECP-CAR – Outlook



- Clinical trial start expected Q4 2023

TheraSTAR – Project Overview



Michael Bachmann,
HZDR, TUD



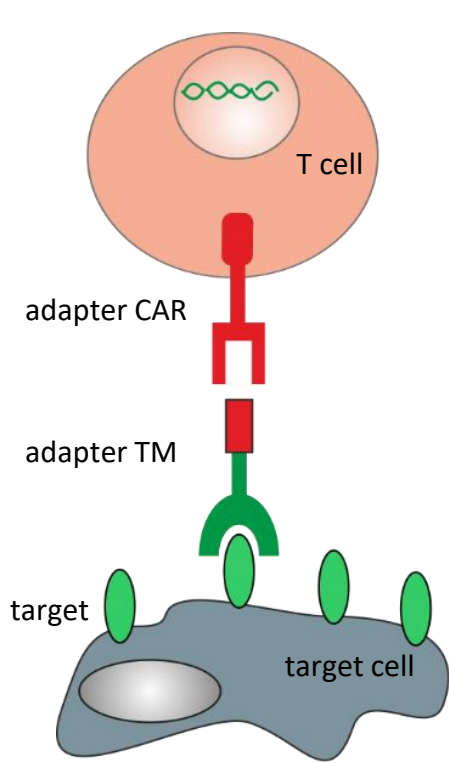
Anja Feldmann, HZDR



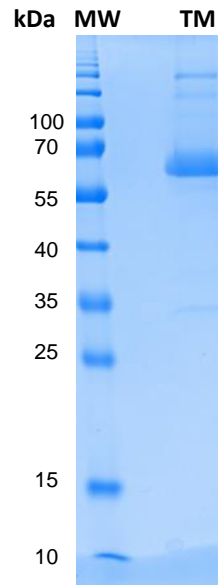
Marc Schmitz, TUD

TheraSTAR – Results so far

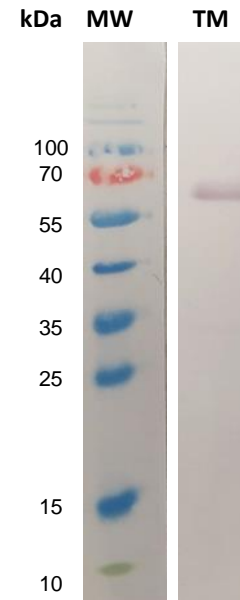
Design and production of novel adapter TM targeting immune checkpoint molecules



Coomassie staining

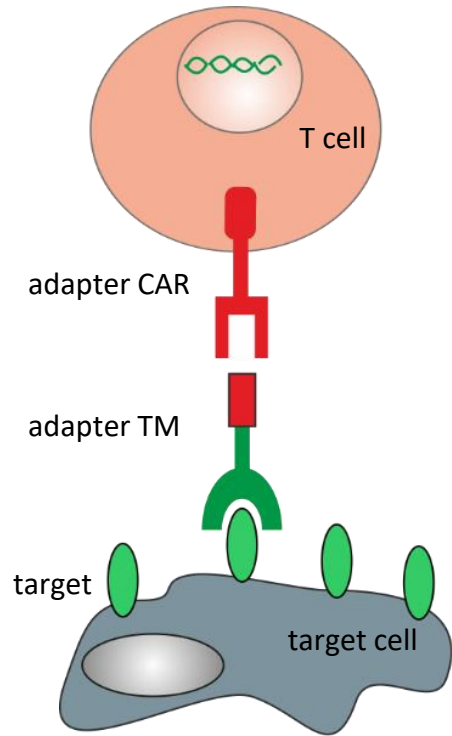


Western Blot anti-His

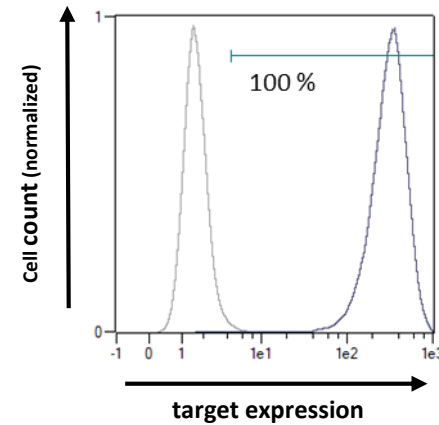


TheraSTAR – Results so far

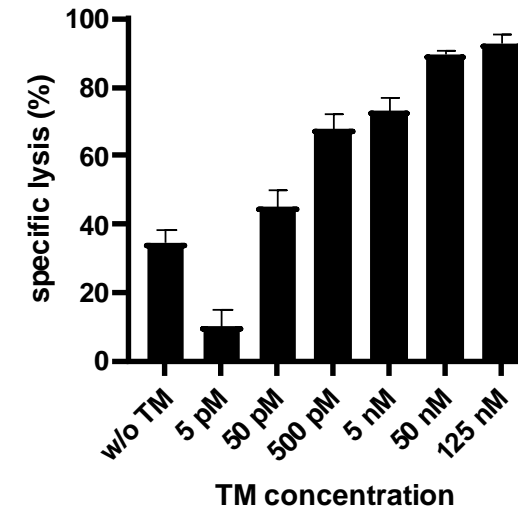
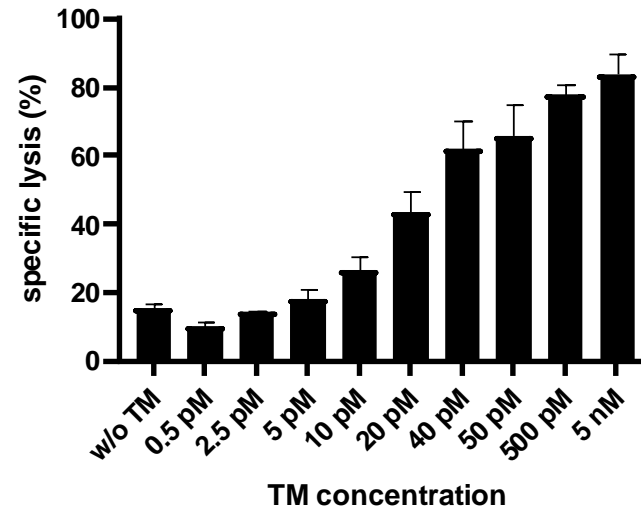
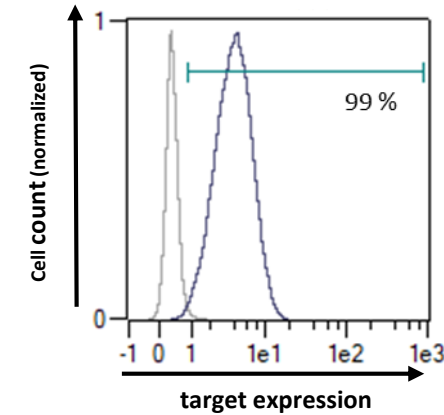
Redirection of adapter CAR T cells by novel adapter TM to kill target cells



PC3: recombinant target expression

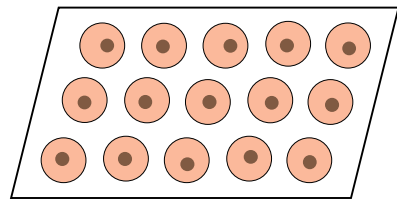


SCP-1: native target expression

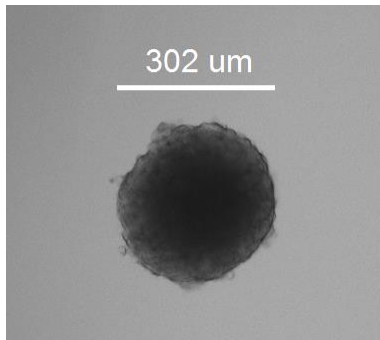


TheraSTAR – Results so far

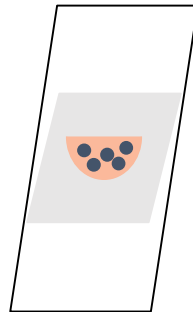
Spheroid formation and immunofluorescence staining



spheroid formation



target cells e.g. SCP-1



fixation, embedding, cutting

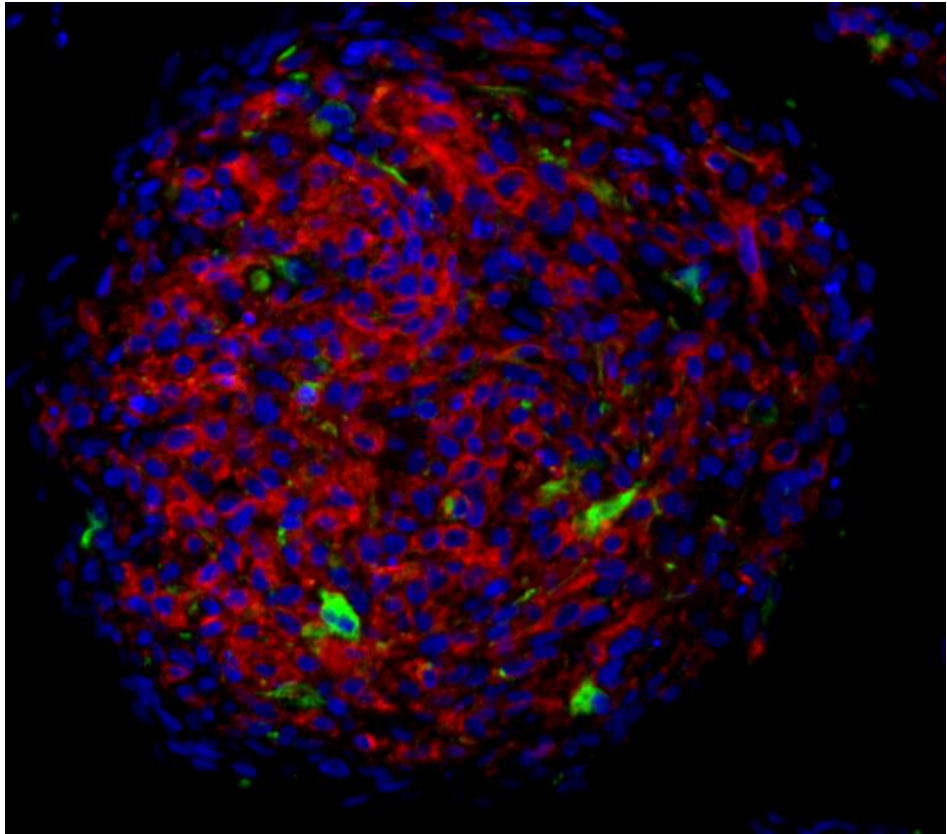


Autostainer Ventana discovery



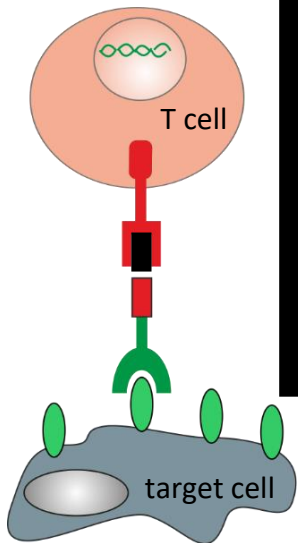
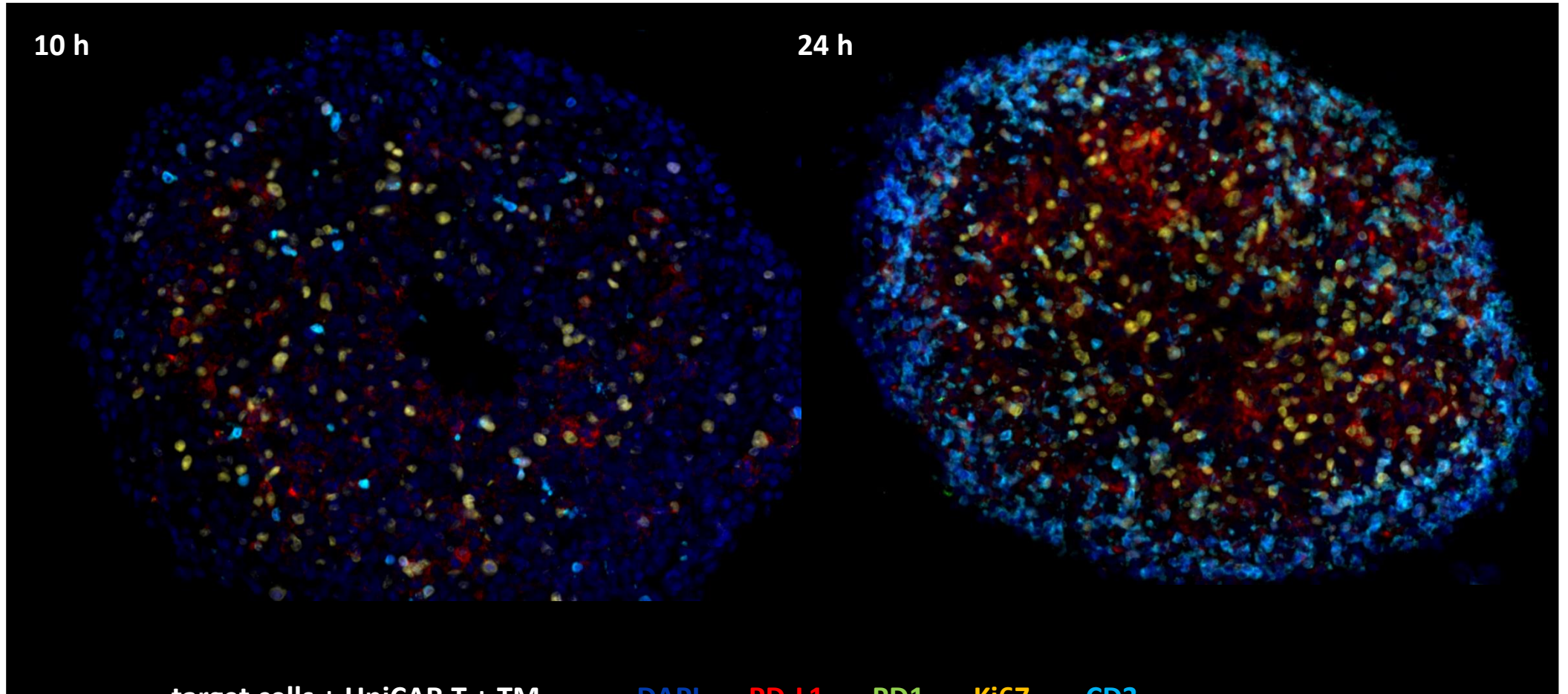
Vectra automated quantitative imaging system

TheraSTAR – Results so far

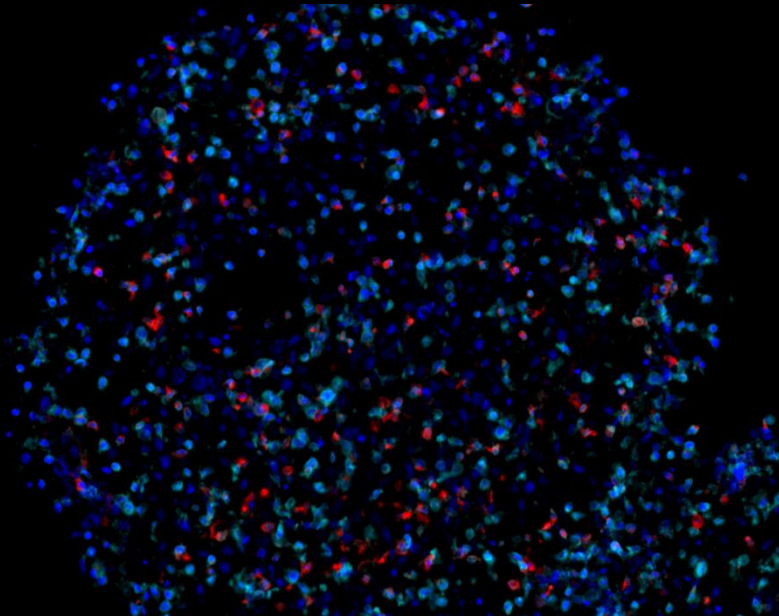


DAPI Target PanCK

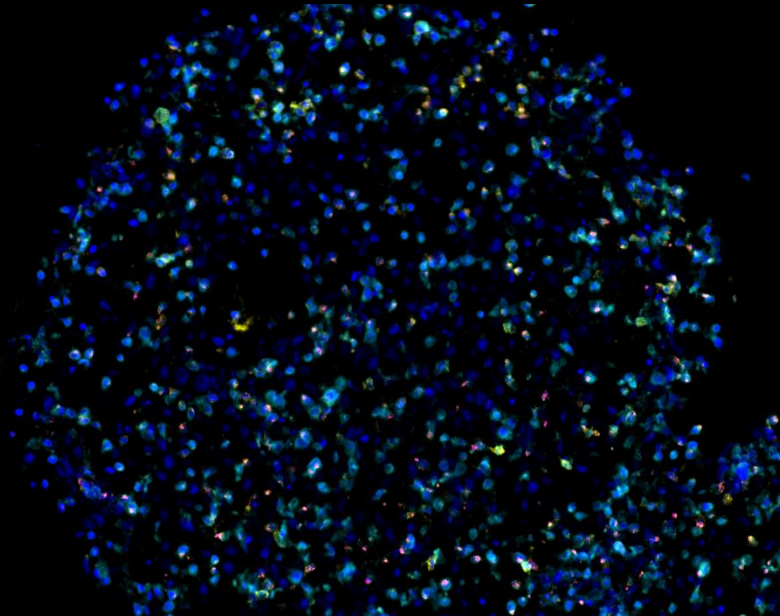
TheraSTAR – Results so far



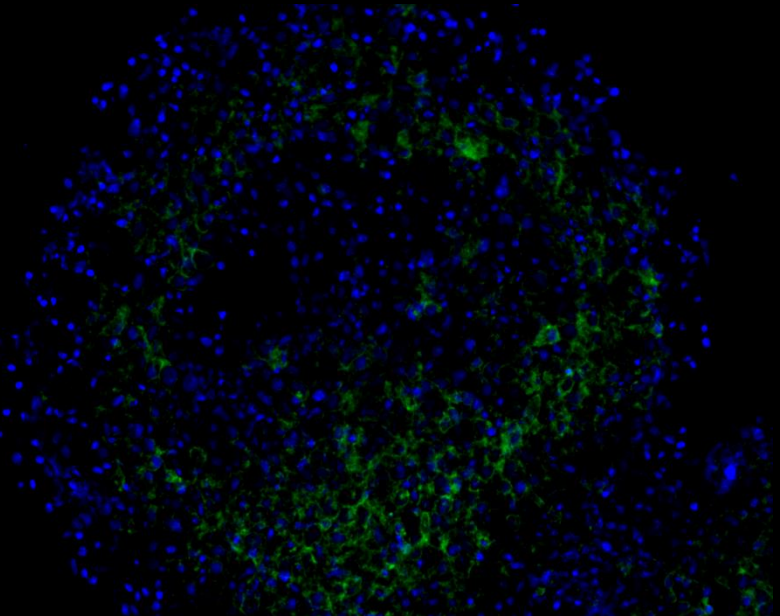
TheraSTAR – Results so far



DAPI CD3 LAG-3



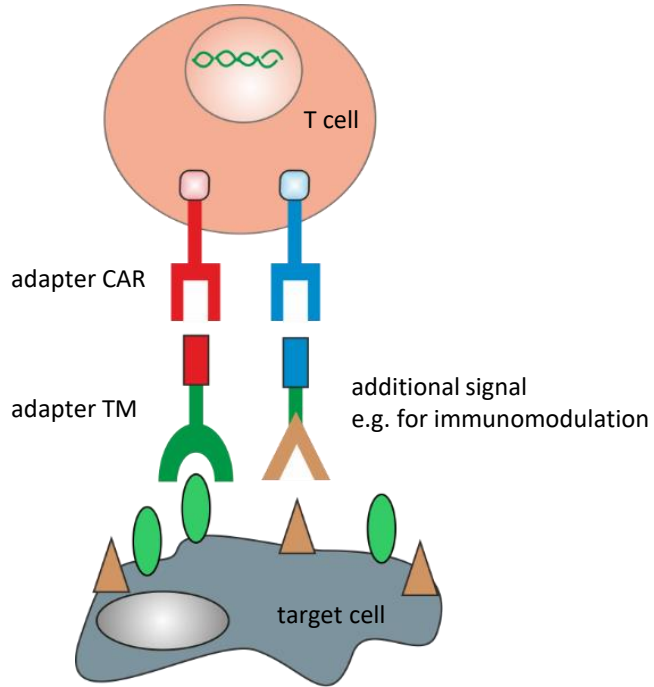
DAPI CD3 PD-1 GrzB



DAPI PD-L1

target cells + UniCAR T + TM

TheraSTAR – Outlook



Generation of adapter CAR T cells and TMs for immunotherapy, diagnostic imaging and immunomodulation

Preclinical validation of theranostic platform technology

Novel IP and clinical translation



Analysis of tumor microenvironment

Characterization of tumor cells

Characterization and quantification of tumor infiltrating (adapter CAR) immune cells

Lunch Break

Be ready for the SaxoCell group photo

Side activity: Create your own project poster

PLATFORM – OMICS

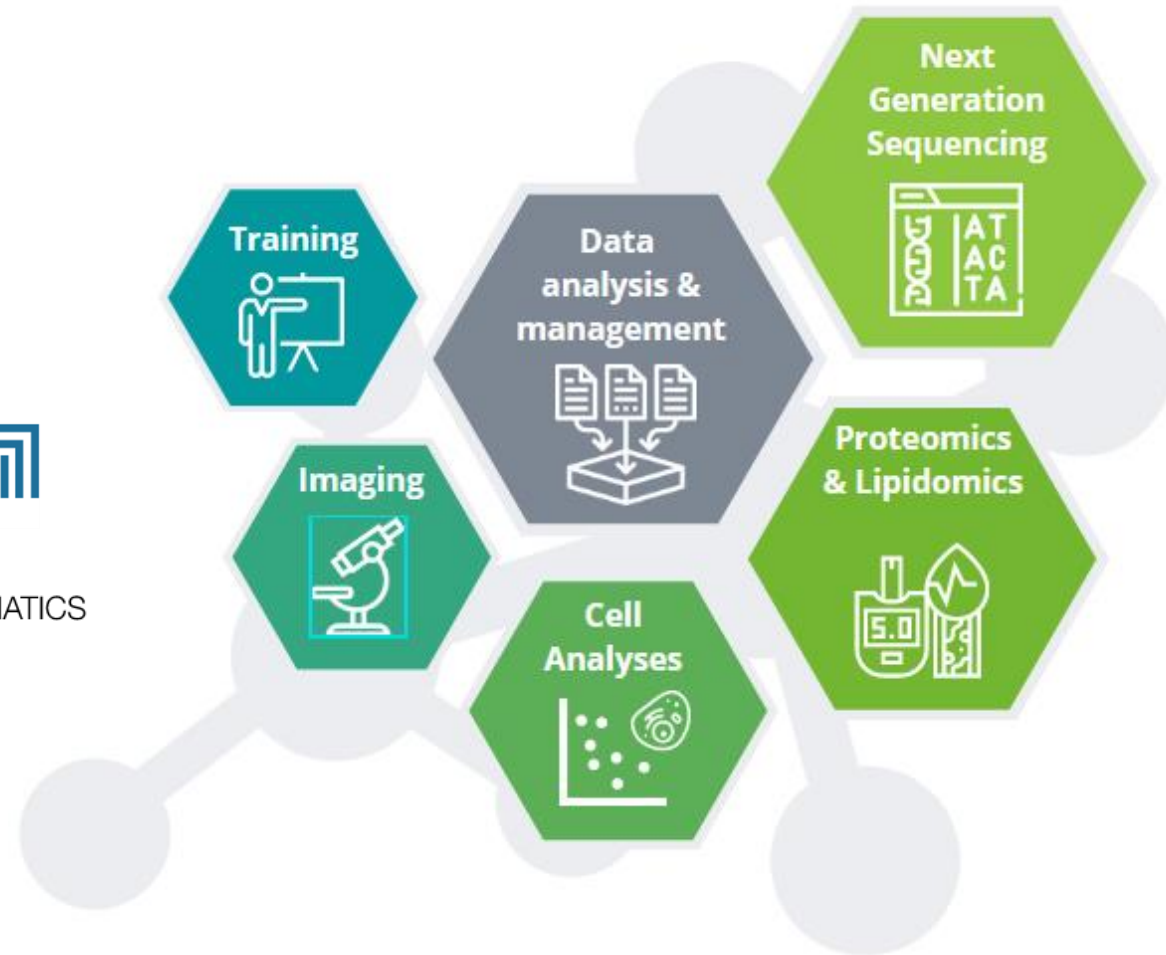


Dr. Kristin Reiche
Fraunhofer IZI / Leipzig University

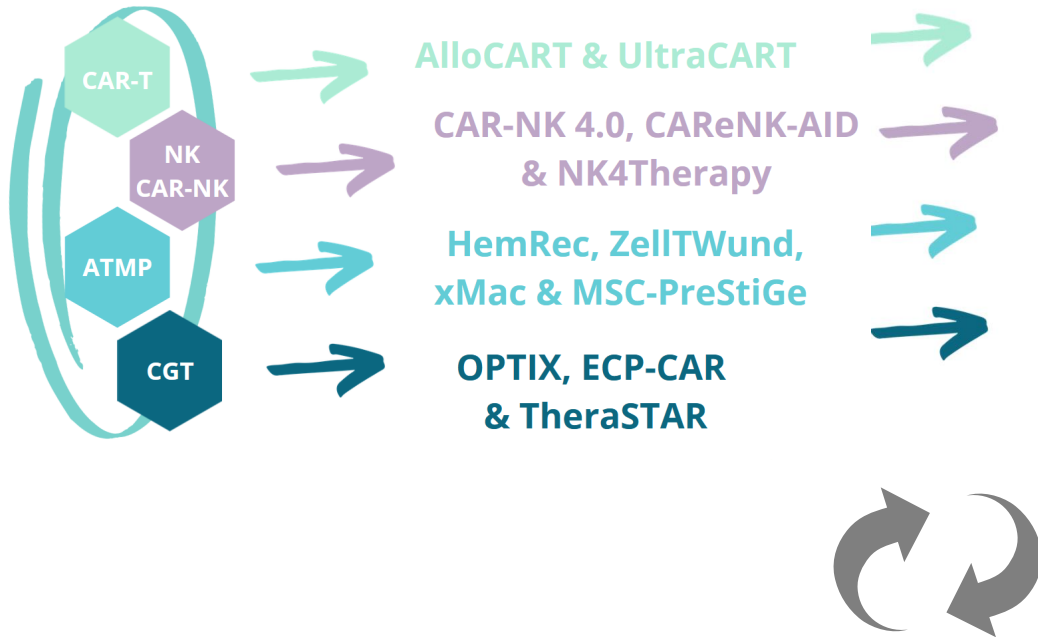


Prof. Dr. Ezio Bonifacio
CRTD / TU Dresden

Partners:



PLATFORM – OMICS



AlloCART & UltraCART

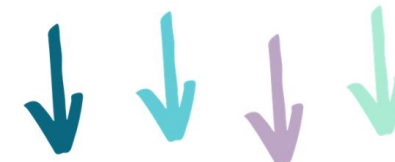
CAR-NK 4.0, CARENK-AID
& NK4Therapy

HemRec, ZellT Wund,
xMac & MSC-PreStiGe

OPTIX, ECP-CAR
& TheraSTAR

Specific needs of „Living drugs“

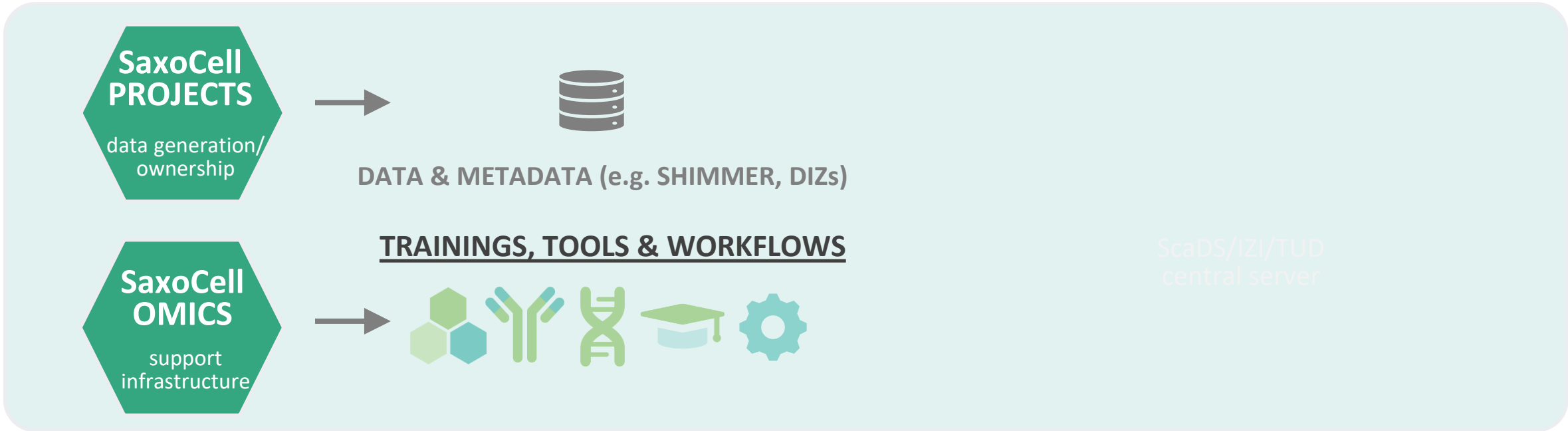
- ✘ Understand mechanisms of action, resistance and side effects (**molecular and cellular**)
- ✘ Assess quality of novel targets (e.g. **target-specificity**)
- ✘ Identify the right patient at the right time for treatment
- ✘ Characterize cells prior to manufacturing and final (cell) product



SaxoCell Omics

Improved evaluation of cell and gene therapies **through** standardized and documented **high-throughput measurements & cutting-edge ex-vivo tools**

PLATFORM – OMICS



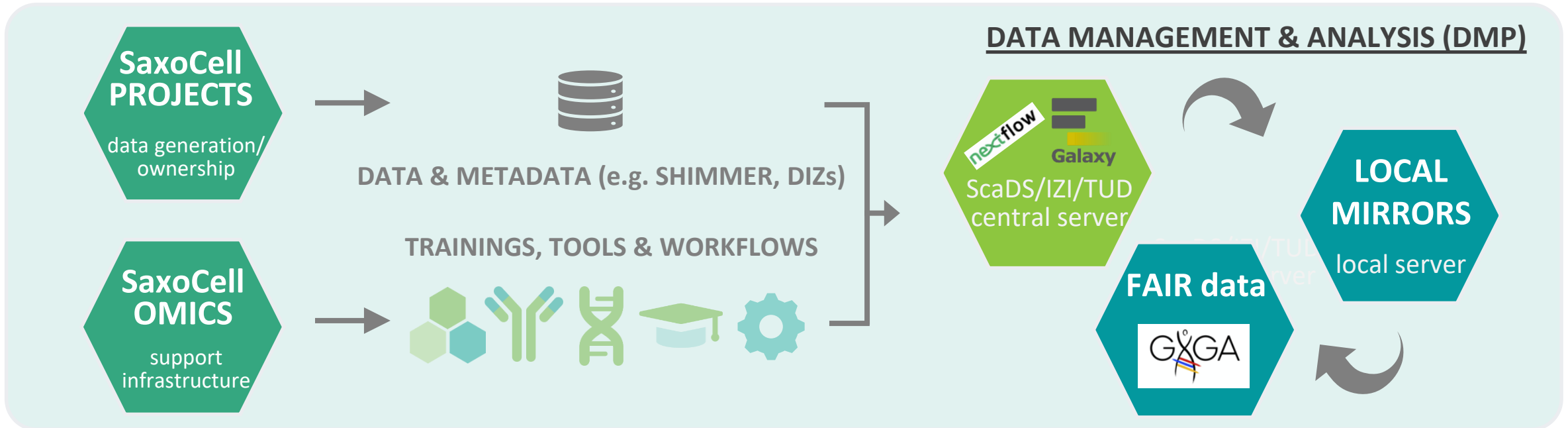
 CONSULTATION & GUIDANCE

 OPERATING PROCEDURES

 PROCESS STANDARDIZATION

- Support on experimental design, guidance on available technologies, and SOPs for sample collection and processing
- **Standardization of procedures** across sites guarantees:
 - ❖ **data quality and comparability**, and
 - ❖ paves the way for **multi-centric studies**

PLATFORM – OMICS



- **Versatile & scalable platform**, with plethora of tools & workflows for “living drugs” (centralized & de-centralized acc. to the needs of SaxoCell project)
- Data storage and management following **FAIR principles**; full **compliance with ethical and privacy** aspects; **infrastructure** for storage and analyses servers
- **Data analyses tailored to the needs of SaxoCell project:**
 - ❖ GUI-SUPPORTED ANALYSIS through graphical workflow manager for **non-expert users**
 - ❖ SCALABLE COMMAND-LINE bioinformatic pipelines **for advanced users**
 - ❖ DIRECT SUPPORT & COOPERATION (e.g. training of predictive models & algorithm development)

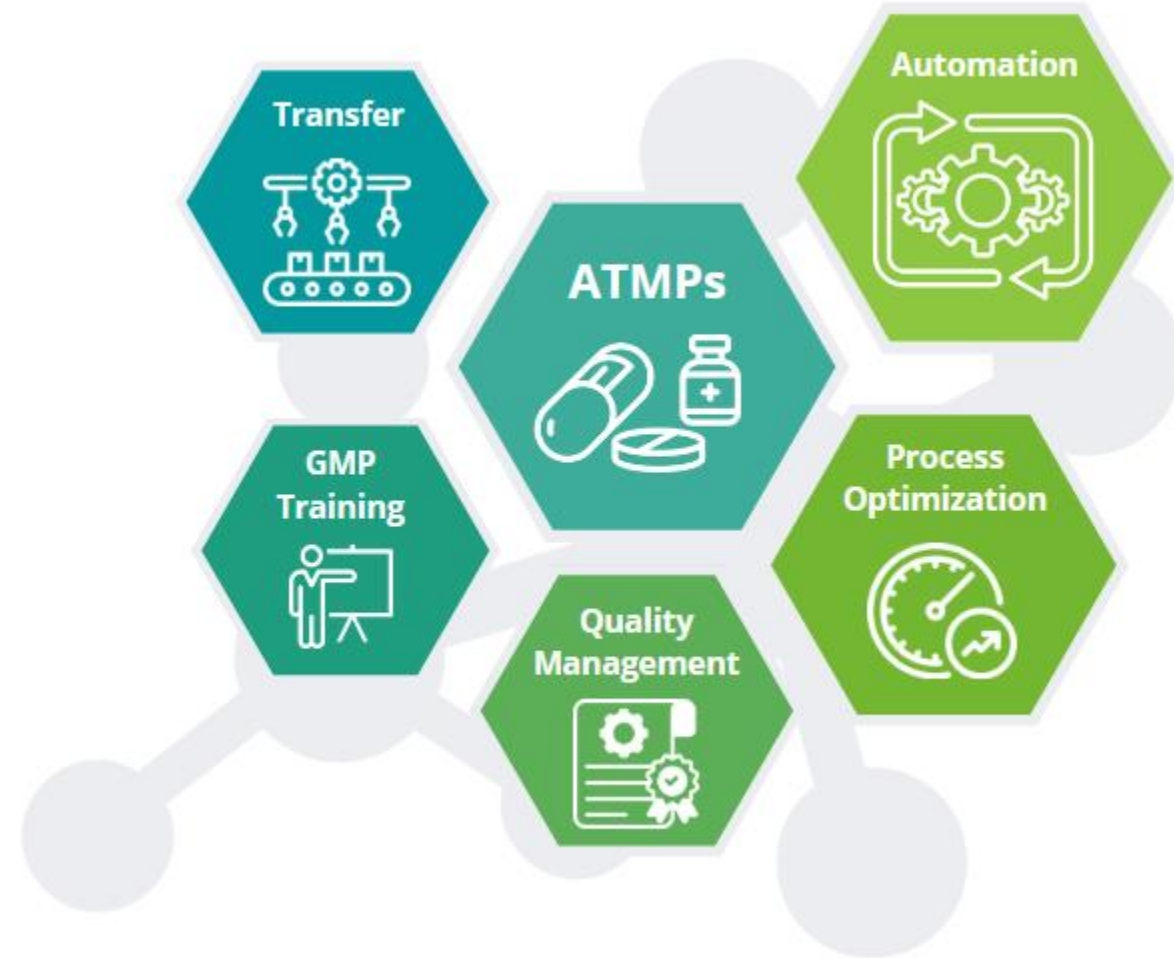
PLATFORM – SYSTEMS



PD Dr. Stephan Fricke
Fraunhofer IZI



Dr. Ulrich Blache
Fraunhofer IZI



PLATFORM – SYSTEMS

Prof. Dr. Rüdiger, Dr. Freund
TU Dresden

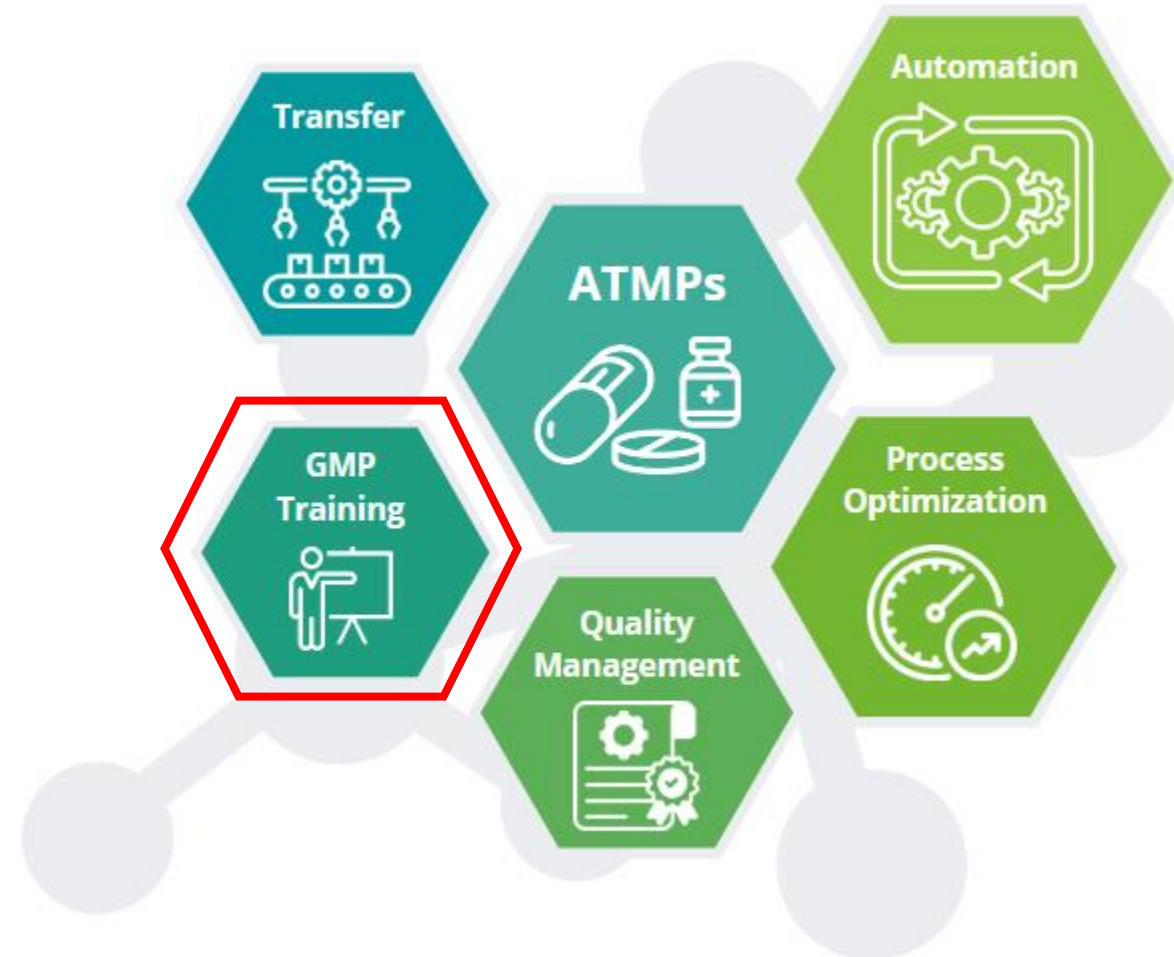
Prof. Dr. Neumuth
Uni Leipzig, ICCAS

Prof. Dr. Rahm
Uni Leipzig, ScaDA.AI

Prof. Dr. Henschler
Uni Leipzig, UKL

Prof. Dr. Pompe, Dr. Jahnke
Uni Leipzig, BBZ

PD Dr. Fricke, Dr. Blache
Fraunhofer IZI, Koordination



GMP Training: Für ATMPs

Grundkurs Theorie (3 Module)



Grundkurs Praxis (3 Module)
+ Automatisierung und KI



Online Trainingsmodul



Curriculum Theorie

MODUL 1

1. Einführung in Kursinhalte (2h)
2. Vorstellung Fraunhofer Gesellschaft (2h)
3. Grundlagen Zellbiologie (4h)
4. Grundlagen Biotechnologie (4h)
5. Grundlagen Arbeit im Labor (2h)
6. Grundlagen Laboranalytik (2h)

(Insgesamt: 16h)

MODUL 2

1. Einführung in pharmazeutische Produktion (2h)
 2. Grundlagen GMP (2h)
 3. Grundlagen ATMP (2h)
 4. Qualitätsmanagement im GMP-Bereich (2h)
 5. Herstellung / Produktion unter GMP (3h)
 6. Qualitätskontrolle unter GMP (3h)
- (Insgesamt: 14h)

MODUL 3

1. An- und Umkleiden im Reinraum (Gowning) (2h)
2. Verhalten im Reinraum (2h)
3. Mikrobiologisches und Partikel Monitoring (2h)
4. Produktion von Zelltherapeutika (ATMPs) (2h)
5. Arbeitssicherheit und Belehrung S2 (2h)

(Insgesamt: 10h)

MODUL 4

1. An-Um- und Auskleiden für Reinraumtätigkeit (Gowning)
2. Allgemeines Verhalten im Reinraum Produktionsbereich, allgemeine Geräteeinweisung, Waagen, Zentrifugen etc.
3. Aseptisches Arbeiten unter einer Sterilbox
4. Mikrobiologisches und partikuläres Monitoring
5. Mediafill

(Insgesamt: 30h)

MODUL 5

1. Allgemeine Einweisung in den Laborbereich Qualitätskontrolle
2. Einweisung in QK-Geräte
3. Messung exemplarischer Proben an QK-Geräten
4. Ein und Ausschleusen von Material und Inprozesskontrollen

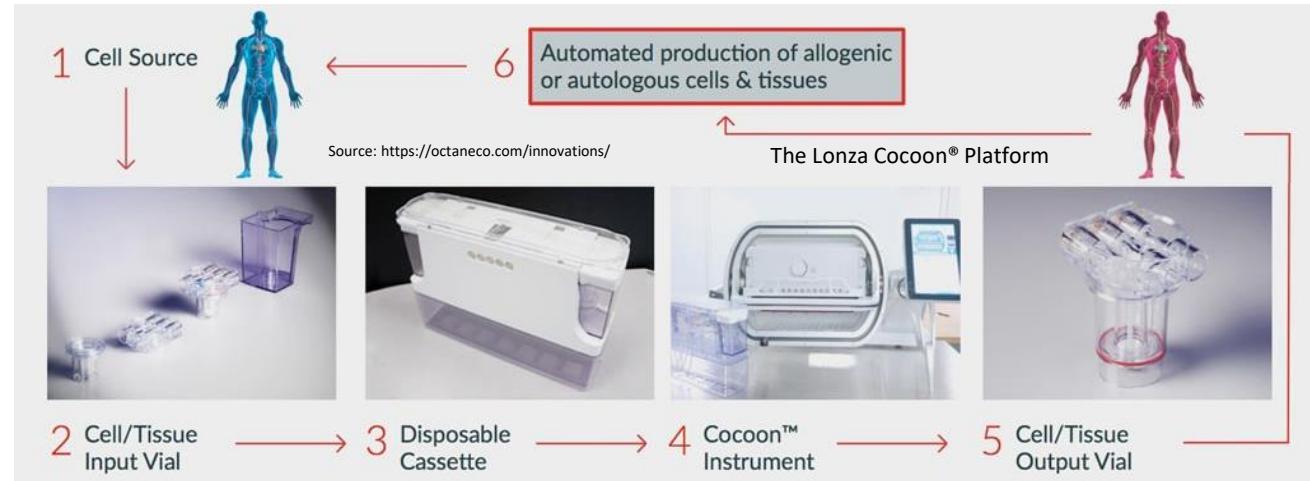
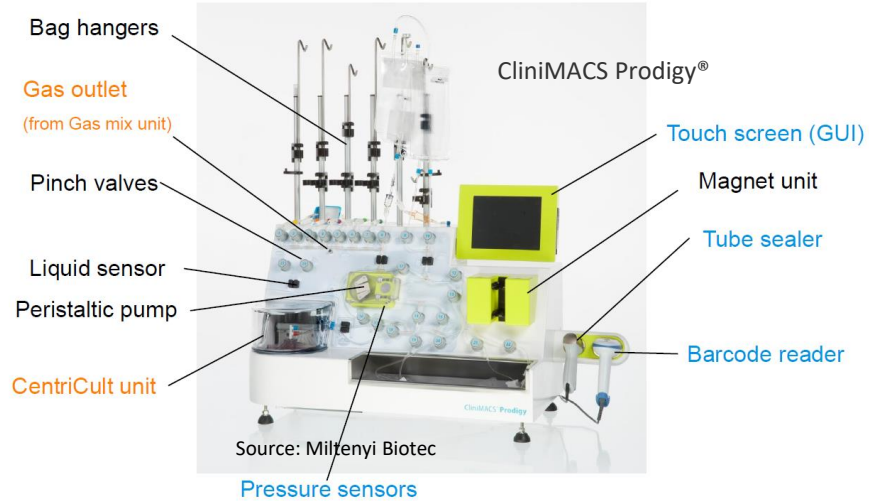
(Insgesamt: 30h)

MODUL 6

1. Produktion eines exemplarischen Zelltherapeutikums

(Insgesamt: 98h)

Automatisierung & KI



Theoretischer Kurs

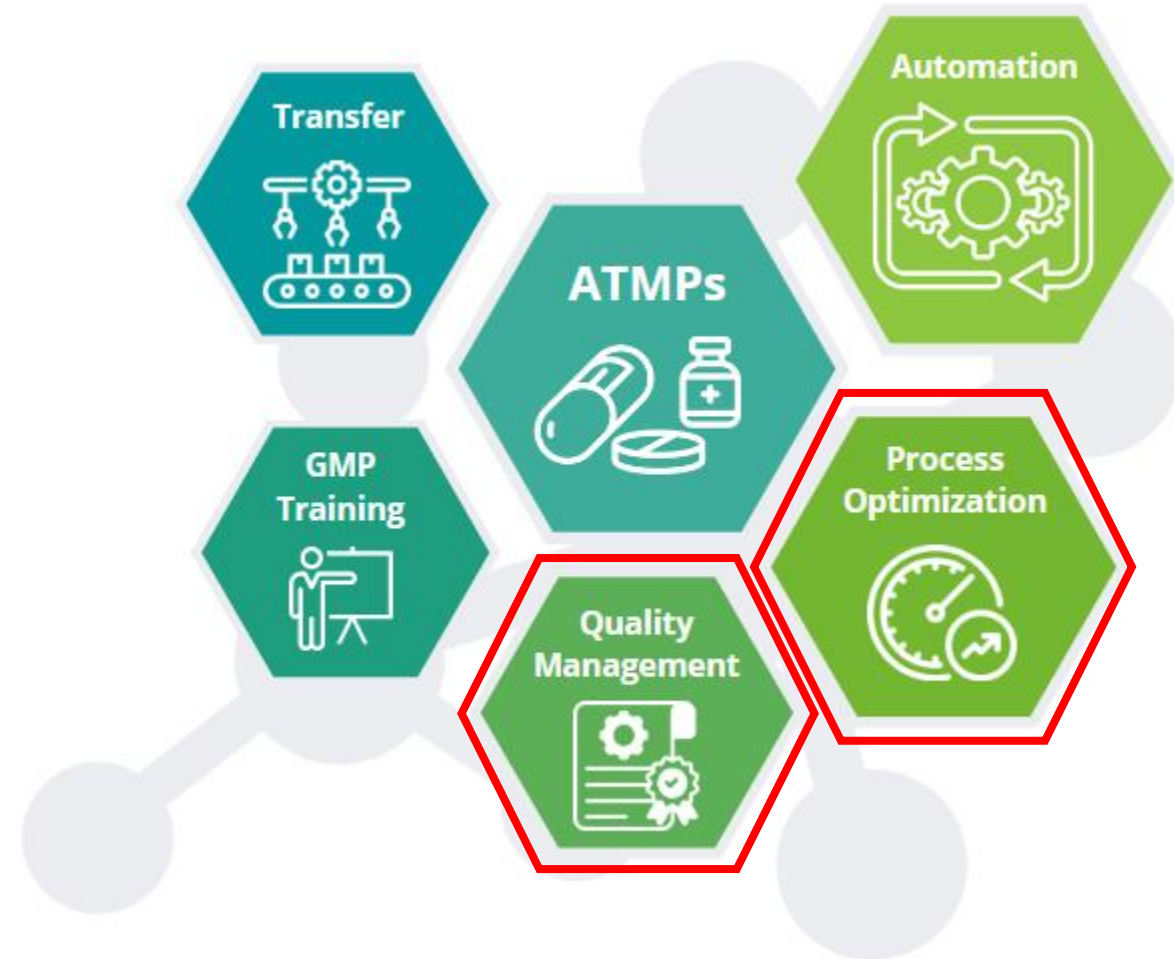
- Grundlagen GMP mit Schwerpunkt Automatisierung und künstliche Intelligenz
- GMP gerechter elektronischer Batch Record (eBR)

Praktischer Kurs

- Einführung in die automatisierte Herstellung von Zelltherapeutika
- Arbeit mit dem eBR

Nächster Impulsvortrag

Plattform-integriertes Monitoring
und Evaluation von Zellkulturen
und Prozessabläufen mittels KI
(Uni Leipzig, ICCAS und ScaDA.AI)



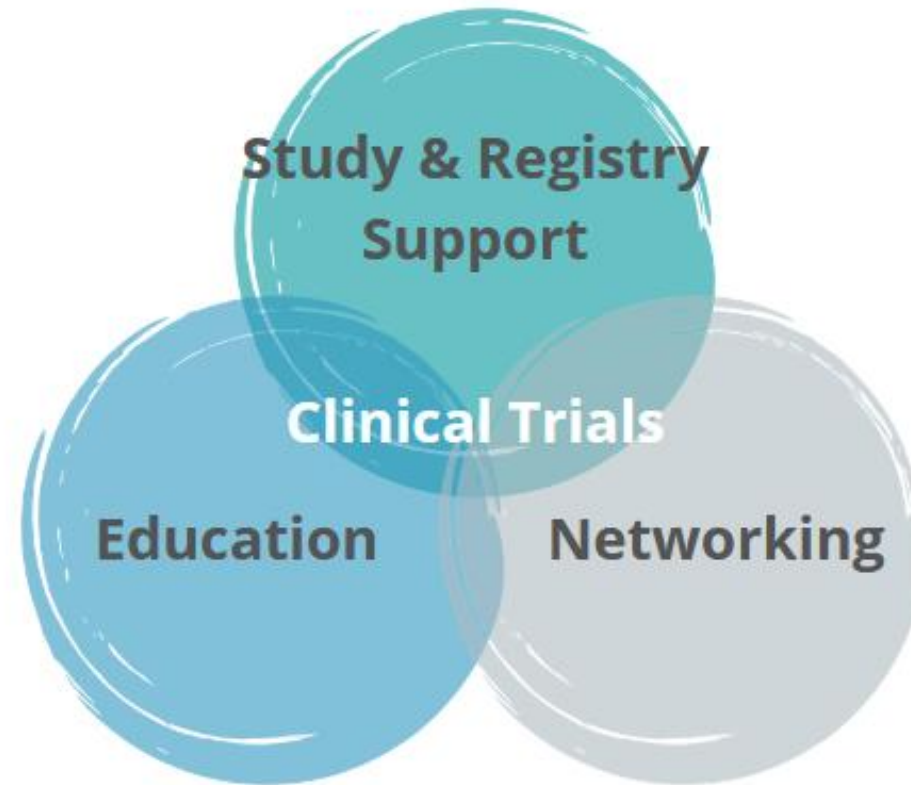
Clinics – Overview



Silke Gloaguen
University Hospital Leipzig



Prof. Dr. Uwe Platzbecker
University Hospital Leipzig



- **Current activities**

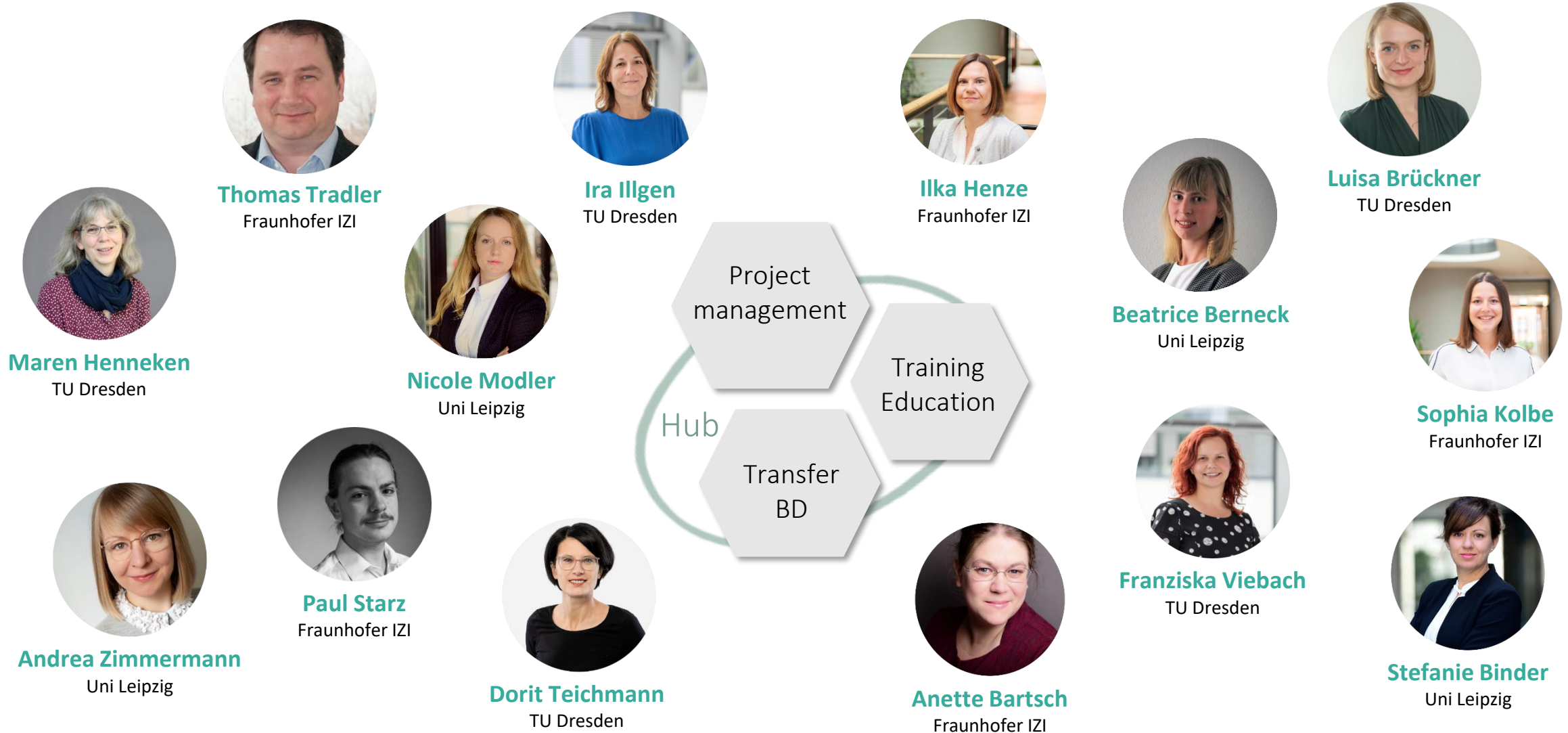
- Setting up educational workshop „clinical trials“
 - In collaboration with ZKS Leipzig and HUB
- Preparational activities and negotiations for PHOTOCAR trial
 - Regulatory challenges
- New strategy for CAR-NK4.0 / DoNCAR trial → funding
 - Meeting on 21st June with all partners
- Preparation of newsletter for SHIMMER registry
- Preparation of Working Paper
 - ATMPs and clinical trials

- **Task exemple – PHOTOCAR** (in collaboration with ZKS)
 - General brainstorm/discussion of project/protocol
 - Support in protocol writing
 - Build budget for the trial
 - Support in negotiations with Financier (i.e. in the case of industry financing)
 - Support in discussion with SponsorQM of University of Leipzig
 - Support in discussions/negotiations with local (Landesdirektion) or national (PEI) authorities
 - Link between clinicians and Sponsor/ZKS

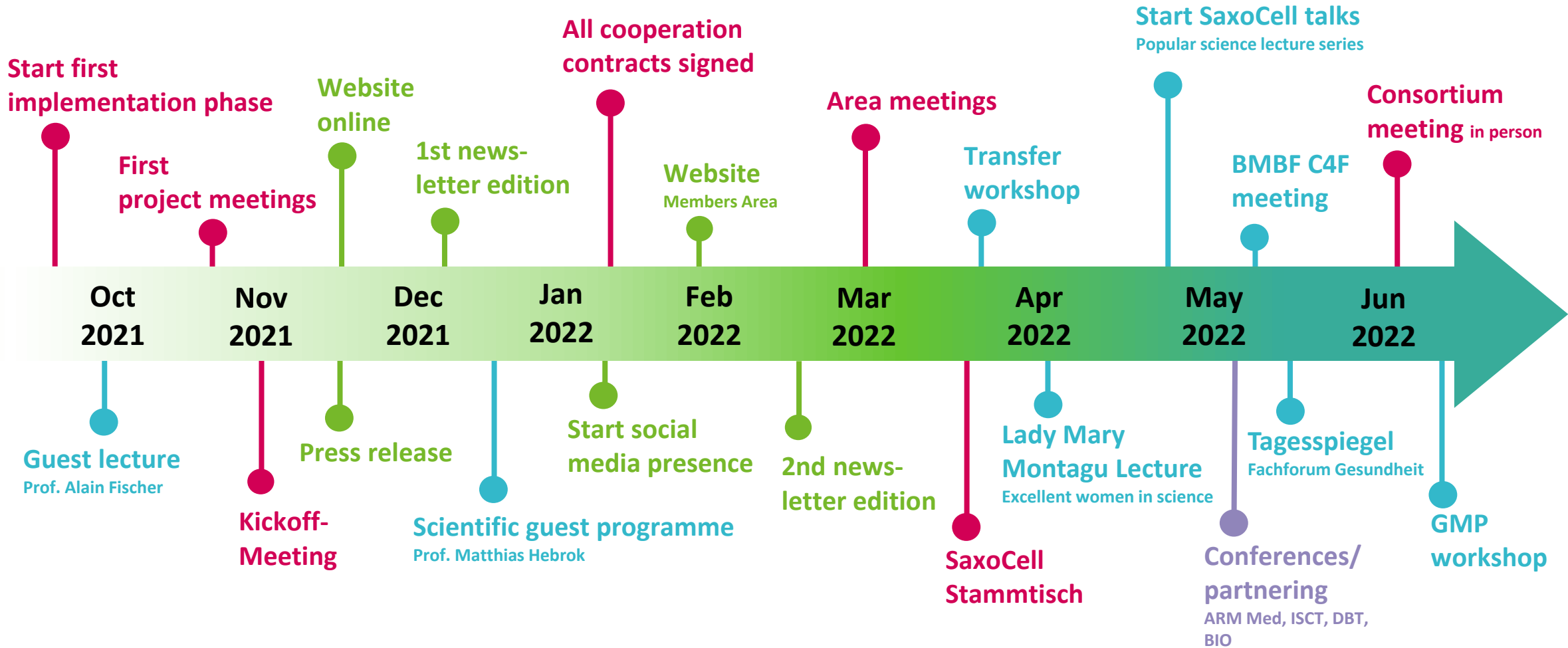
- **Task exemple – DoNCAR**

- SaxoCell had accompanied BMBF proposal in 2021
 - Study support unfortunately declined in last round of the call
- Tasks now → support clinician team in building new strategy for funding acquisition and corresponding adjustment of the project
 - Discussions are ongoing


Hub people



Hub activities so far



Use the opportunities!

 Calendar

Members

For downloading and exchanging documents and

Download of SaxoCell® templates

- Acknowledgement text module for publications
- Power Point Master
- Power Point Slide Collection
- RGB Color Code
- Video conference background
- Video conference background (mirrored)

*(Disclaimer:
All SaxoCell® materials provided are for scientific presentations only.
They may not be used for marketing or any other commercial purposes.)*

BMBF reporting guidelines and commitments

- BMBF guidelines and information
- BMBF template for progress report
- BMBF template for final report
- SaxoCell® summary on reporting commitments

(All documents are in German only.)

< > Heute Juni 2022 ▾

Mo	Di	Mi	Do	Fr	Sa	So
30	31 9:00 - 16:30 First gathering of BMBF Clusters4Future participants (Round 1)	1	2	3	4	5
6	7	8	9	10 13:00 - 14:00 EMA and EATRIS Present: Scientific Advice for ATMPs – How and When to ask?	11	12
13	14	15	16	17	18	19
2022 BIO International Convention						
20 10:00 - 17:00 SaxoCell® Consortium Meeting	21	22	23	24	25	26
27	28 16:00 - 18:00 SaxoCell® Stammtisch	29	30	1	2	3

Use the opportunities!

Calendar Logout

Members Area

For downloading and exchanging documents and for getting in contact with each other

- Download of SaxoCell templates**
 - Acknowledgement text module for publications
 - Power Point Master
 - Power Point Slide Collection
 - RGB Color Code
 - Video conference background
 - Video conference background (mirrored)

(Disclaimer: All SaxoCell® materials provided are for scientific presentations only. They may not be used for marketing or any other commercial purposes.)
- BMBF reporting guidelines and commitments**
 - BMBF guidelines and information
 - BMBF template for progress report
 - BMBF template for final report
 - SaxoCell® summary on reporting commitments

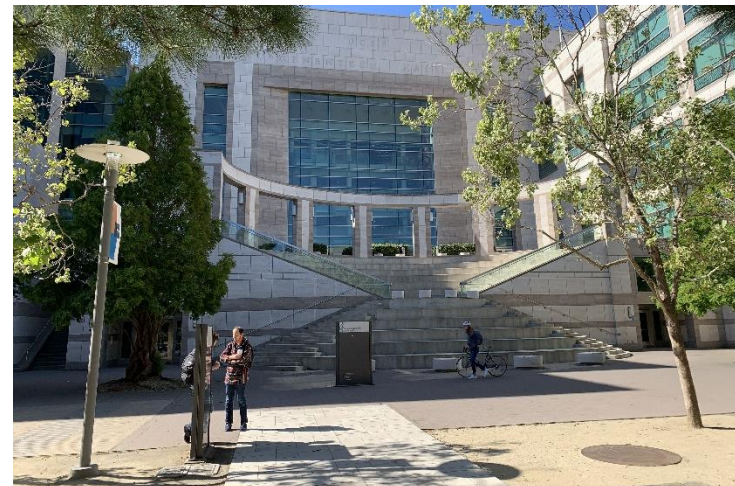
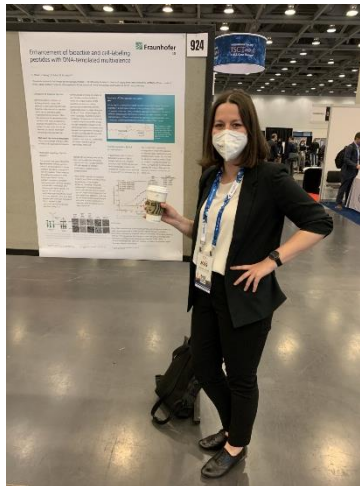
(All documents are in German only.)
- SaxoCell® training and qualification measures**
 - Workshop materials for download
 - (will be activated soon)

(Disclaimer: All SaxoCell® materials provided are for scientific presentations only. They may not be used for marketing or any other commercial purposes.)
- Industry contacts and technology offers**
 - Documents for download
 - (will be activated soon)

Additionally included:

- List of current publications
- Newsletter Archive
- Discussion Forum

We transfer!



- Deutsche Biotechnologietage 2022
- ARM-MED 2022
- ISCT 2022
- BIO 2022


BIO Europe 2022 in Leipzig!

BIO Europe 2022

Europe's largest life sciences partnering event - will take place in Leipzig
October 24th-26th

Supporting transfer efforts for R&D results of our cluster, SaxoCell will get comprehensively presented at this large conference:

- SaxoCell booth
- SaxoCell partnering
- SaxoCell symposium



3 days in-person. 3 days virtually.
October 24–26, 2022 | Leipzig, Germany,
November 2–4, 2022 | Virtual

BIO-EUROPE IS BACK IN PERSON!

Your gateway to the global biopharma community

Registration is now open!

BOOK NOW

Produced by
EBD GROUP

In collaboration with
Bio
Biotechnology

The banner features a night view of the Leipzig skyline with illuminated buildings and a prominent green dome. The text is overlaid on the image in white and red.

We support you!



Upcoming events!

SaxoCell Training Series



1st GMP basic course with certification

June 30th 2022 / 9:30 – 17:00 / CRTD Dresden



2nd Transfer workshop „How to start-up“

July 6th 2022 / 12:30 – 14:30 / online

SaxoCell Lecture Series



"Immuntherapie bei Blutkrebs - Status und Perspektiven"

By Uwe Platzbecker

July 11th 2022 / 13:00 – 14:00 / University Hospital Leipzig & online

Stay in touch!



Website + Members Area

<https://www.saxocell.de>



LinkedIn

<https://www.linkedin.com/company/saxocell-cluster/>



Twitter

<https://twitter.com/SaxoCell>



Instagram

<https://twitter.com/SaxoCell>



Next Newsletter

Mailed this week



Next Stammtisch

28.06.2022

16:00 - 18:00

Online (Wonder.me)

Area Sessions & Topics

AREA 1 CAR-T-Cells

Mechanisms of T cell transplantation failure

Mechanisms of 'failure' in T cell engraftment & persistence and strategies to overcome them.

AREA 2 NK/CAR-NK-Cells

NK cell therapy and animal models

Important factors for NK cell therapy (tumor entities, target antigens, KIR or HLA genotyping, NK cell cytotoxicity, type of CAR, Uni-CAR, technology platforms, protocols) and determination of suitable animal models.

AREA 3 ATMPs reg. Med.

Delivery Technologies and Industry Collaborations

AREA 4 CGT modulating

Dealing with regulatory authorities

ATMP research in Germany - Biggest obstacles with regulatory authorities and how to overcome them in the future.

Coffee Break

Time	Topic	Responsible
14:50 – 16:15	Area Meetings	All
16:15 – 16:35	Coffee Break	All
16:35 – 16:40	Results and Discussion Area 1	Area 1
16:40 – 16:45	Results and Discussion Area 2	Area 2
16:45 – 16:50	Results and Discussion Area 3	Area 3
16:50 – 16:55	Results and Discussion Area 4	Area 4
16:55 – 17:15	Discussion	All
17:15 – 17:30	Wrap up, outlook and Goodbye	All
17:30	Get together	All

Topic for Discussion:

Mechanisms of 'failure' for T cell
engraftment and persistence
(and strategies to overcome them)

AREA 1 – CAR-T – Session Results



T regs

Case study

- Unmodified ex vivo cultured T regs
- PK^{max} at day 1/week 1 post infusion
- TCR repertoire analysis
- Expect therapeutic window of weeks (>1)
- Address high risk GvHD patients (GI)

To do's / Open questions:

- Optimal source of T regs
- Metronomic activation with adaptor
- Epigenetic profile → Super donors
- PK analyses / Biodistribution (liquid biopsy?)

T effector

Case study

- CD19 CAR-T vs. CLL/lymphoma
- PK correlates with outcome
- Persistence for decade possible
- Same for BCMA CAR-T vs. Multiple Myeloma?

To do's / Open questions:

- T cell subsets
- T cell transcription factors
- Metabolic engineering
- Vaccination
- Epigenetic engineering



MARK YOUR AGENDA

2nd Translational Research Conference
Immune & Cellular Therapies:
Focus on Advanced Gene-Engineered Immune Cells

Berlin, Germany
September 12-14, 2022
#ESHIMMUNE2022

Chairs: Chiara Bonini, Michael Hudecek, Stan Riddell

DEADLINE FOR ABSTRACTS: JULY 10th, 2022

To register and for further information: www.esh.org - info@esh.org

- Share points: cell lines, protocols, expertise for such protocols, GMP issues (negative controls, ab validation)
-> lists (on membership area)
- NSG mice is convincing PEI
- Questionnaire for ethical votes
- DKMS for HLA/KIR genotyping?
- seminars with area 1 – inviting speaker of area 1 (every 6 weeks)
-> hybrid mode

- *Future Perspectives of the group*
- First in person meeting - Divers topics of joint interest identified
- Meetings quarterly, hybrid
- Further topics to be discussed
 - Future funding options
 - Experiences with PEI
 - Spin-out creation

AREA 4 – CGT – Session Results



ATMP approval

- Best time point to go to the PEI: preclinical investigations are done, your ATMP works efficiently
 - ask the „right“ and specific questions:
 - Is this assay sufficient as release assay?
BE AS PREPARED AS YOU CAN!
- Team is important for Scientific Advice meetings: Clinician, Researcher, a person who can write clinical trials...
(You can go with as many people as you like)

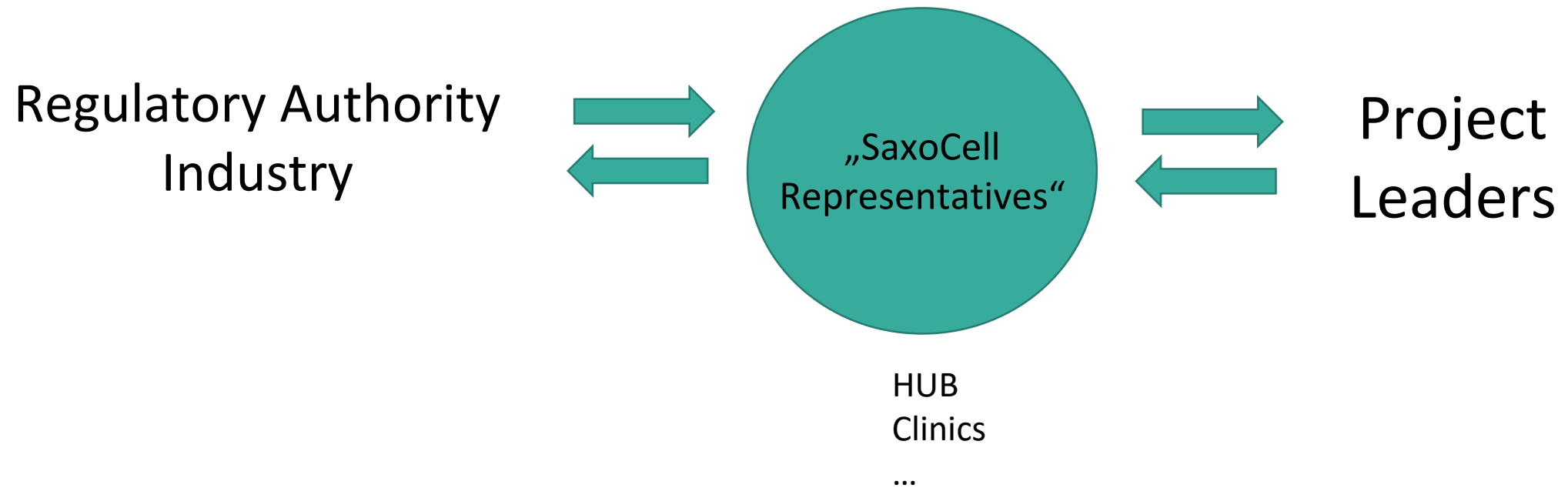
- Early SaxoCell platform interaction and communication is important
- → SaxoCell Hub could distribute calls and grant application topics
 - Preclinical
 - Clinical Topics
- List information to each call:
 - What is funded?
 - Funding volume?
 - Etc.
- List all applications and their outcome → Accepted? Rejected? Why?
- How were ATMP studies funded in the past?



Gather and combine the knowlegde that is
already there!

AREA 4 – CGT – Session Results

- SaxoCell Hub and Platform = „Representative“ for SaxoCell at the Regulatory Authority





Thank you for your attention!

For questions and further information please contact the Hub team!

saxocell@tu-dresden.de

Visit us on

