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Immune Design Announces Multiple Presentations at CTOS and SITC Highlighting the Breadth of Existing & Future Product Candidates

SEATTLE and SOUTH SAN FRANCISCO, Calif., Nov. 07, 2017 (GLOBE NEWSWIRE) -- Immune Design (Nasdaq:IMDZ), a clinical-stage immunotherapy company focused on oncology, today announced seven presentations at the upcoming Connective Tissue Oncology Society (CTOS) and the Society for Immunotherapy of Cancer (SITC) Annual Meetings to be held in Maui, Hawaii from November 8-11 and in National Harbor, Maryland, from November 8-12, 2017 respectively.

Selected highlights from these presentations include:

CTOS

A Phase 2 study of CMB305 and Atezolizumab in NY-ESO-1+ soft tissue sarcoma: interim analysis of immunogenicity, tumor control and survival (Abstract ID #2785040, Presenter: Sant P. Chawla, M.D, Director of the Cancer Center of Southern California, medical oncologist at Cedars-Sinai Comprehensive Cancer Center, adjunct associate professor at Stanford University and the University of Texas, M.D. Anderson Cancer Center; Encore Presentation)

- Interim analysis (n=36) in the randomized Phase 2 study showed patients receiving the combination of CMB305 and atezolizumab experienced greater clinical benefit and immune response than those who received atezolizumab alone, notwithstanding that patients in the combination arm had more advanced disease.
- The trend of greater clinical benefit on the combination arm remained consistent in the full study population (n=88), including partial responses on the combination arm and none on the atezolizumab-only arm.

Association of NY-ESO-1 expression with baseline immunity and clinical outcomes in soft tissue sarcoma patients treated with LV305 or CMB305 (Abstract ID #2804760, Presenter: Seth M. Pollack, M.D, Fred Hutchinson Cancer Research Center, Assistant Professor, Division of Oncology, University of Washington)

- The cancer-testes antigen, NY-ESO-1, is highly expressed in certain soft tissue sarcoma subtypes. 48 soft tissue sarcoma patients receiving the NY-ESO-1-target cancer vaccine, CMB305 or its prime-only component, LV305, were pooled for analysis.
- Despite a poorer prognosis expected in patients with tumors with high levels of NY-ESO-1 expression, patients with high expression levels treated with either LV305 or CMB305 had a trend toward improved clinical outcomes as compared to those in the lower quartiles.

SITC

Anti-NY-ESO-1 immune response and survival benefit after LV305 therapy in patients with advanced sarcoma and other solid tumors (Poster #P109, Presenter: Jan H. ter Meulen, M.D., Dr. Habil., DTM&H, Immune Design)

- Immune response and long term overall survival data in 24 sarcoma patients, who have received multiple lines of therapy and have been followed for at least two years, shows a median progression free survival of 4.67 months and a median overall survival that has not yet been reached.
- Exploratory analysis of biomarker data demonstrates that patients with baseline anti-NY-ESO-1 antibodies or induced immune response on LV305 appear to have improved survival outcomes.

G100 and ZVex®-based combination immunotherapy induces near complete regression of established glioma tumors in mice (Poster #P256, Presenter: Tina Chang Albershardt, Ph.D., Immune Design)

- "Prime/pull" immunization consisting of systemic administration of ZVex vector with-antigen and intratumoral administration of G100, respectively, resulting in a >90% reduction of established gliomas.
- We believe these are among the best data showing control of glioma in the orthotopic mouse model using therapeutic cancer vaccines.

Transduction of MAGE-A1, A3, A4, A10 and IL-12 by ZVex®, a dendritic cell targeting platform induces robust multi-antigen T-cell immune responses without antigenic interference or immunodominance (Poster #P127, Presenter: Jardin Leleux, Ph.D., Immune Design)

- A multigenome ZVex vector expressing the cancer testis antigens MAGE-A1, 3, 4, 10 and the cytokine IL12 induces balanced T-cell responses against all four antigens.
- These data demonstrate that the multigenome vector platform can overcome antigenic competition, a common problem encountered with virally vectored vaccines.

Intratumoral expression of IL12 using the ZVex® dendritic cell-targeting lentiviral vector exerts potent anti-tumor effects via induction of multiple immune effectors, including CD8 T cell responses (Poster #P401, Presenter: Tina Chang Albershardt, Ph.D., Immune Design)

- Extending previously published observations, these data show that the potent intratumoral effects of ZVex-IL12 are mediated by multiple immune effector cells, including CD8 T-cells.
- These data provide further preclinical validation of the vector platform for intratumoral applications.

Public NY-ESO-1 specific TCRs as novel biomarkers for immune monitoring of NY-ESO-1 positive cancer patients (Poster #P58 and oral presentation, presenter: Hailing Lu, M.D., Ph.D., Immune Design)

- These data extend previously published observations of an association of NY-ESO-1- specific, shared TCR Vβ-CD3 sequences with survival in NY-ESO-1-expressing cancer patients.
- The findings may support use of public TCR as a vaccine response biomarker for NY-ESO-1 cancer patients that could augment or replace established, yet more cumbersome, T-cell ELISPOT assays.

About Immune Design

Immune Design is a clinical-stage immunotherapy company employing next-generation in vivo approaches to enable the body's immune system to fight disease. The company's technologies are engineered to activate the immune system's natural ability to generate and/or expand antigen-specific cytotoxic T cells, while also enhancing other immune effectors, to fight cancer and other chronic diseases. CMB305 and G100, the two leading product candidates focused in cancer immunotherapy, are the first products from Immune Design's two separate discovery platforms targeting dendritic cells in vivo, ZVex® and GLAAS®. Both ZVex and GLAAS also have potential applications in infectious disease and allergy as demonstrated by ongoing pharmaceutical collaborations. Immune Design has offices in Seattle and South San Francisco. For more information, please visit www.immunedesign.com.

Cautionary Note on Forward-Looking Statements

This press release contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. Words such as "may," "will," "expect," "plan," "intend", "believe", "appear", "trend" and similar expressions (as well as other words or expressions referencing future events, conditions or circumstances) are intended to identify forward-looking statements. These forward-looking statements are based on Immune Design's expectations and assumptions as of the date of this press release. Each of these forward-looking statements involves risks and uncertainties. Actual results may differ materially from these forward-looking statements. Forward-looking statements contained in this press release include, but are not limited to, statements about the timing, progress, scope and outcome of preclinical studies and clinical trials, the clinical application of Immune Design's product candidates and technology platforms and the association of data with treatment outcomes. Many factors may cause differences between current expectations and actual results including unexpected safety or efficacy data observed during preclinical or clinical studies. Success in preclinical testing and early clinical trials does not ensure that later clinical trials will be successful. Other factors that may cause Immune Design's actual results to differ from those expressed or implied in the forward-looking statements in this press release are discussed in Immune Design's filings with the U.S. Securities and Exchange Commission, including the "Risk Factors" sections contained therein. Except as required by law, Immune Design assumes no obligation to update any forward-looking statements contained herein to reflect any change in expectations, even as new information becomes available.

Media Contact
Julie Rathbun
Rathbun Communications
julie@rathbuncomm.com
206-769-9219

Investor Contact
Shari Annes
Annes Associates
sannes@annesassociates.com
650-888-0902