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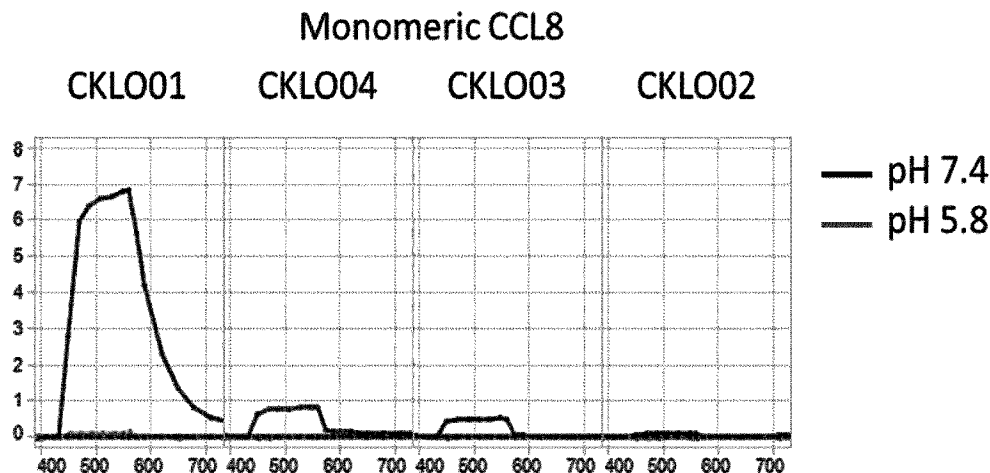
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Figure 6



(57) **Abrégé/Abstract:**

The present invention relates to bispecific anti-CCL2 antibodies binding to two different epitopes on human CCL2, pharmaceutical compositions thereof, their manufacture, and use as medicaments for the treatment of cancers, inflammatory, autoimmune and ophthalmologic diseases.

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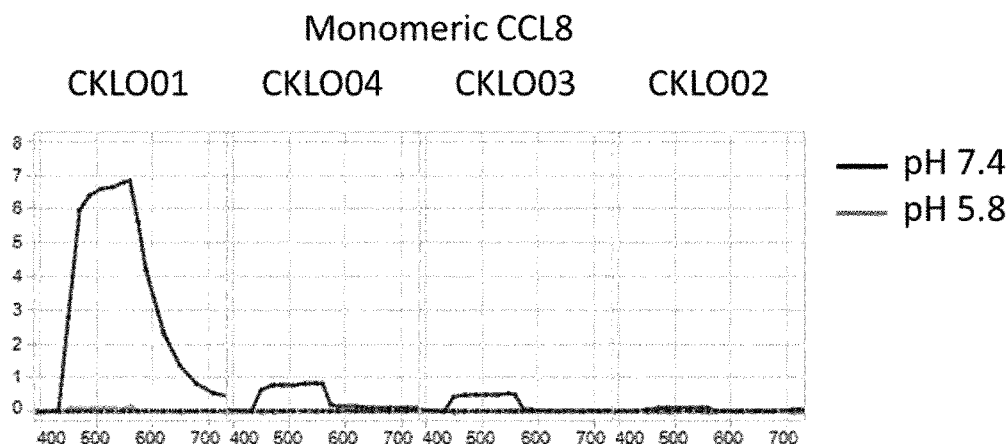
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Figure 6



(57) Abstract: The present invention relates to bispecific anti-CCL2 antibodies binding to two different epitopes on human CCL2, pharmaceutical compositions thereof, their manufacture, and use as medicaments for the treatment of cancers, inflammatory, autoimmune and ophthalmologic diseases.

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Bispecific anti-CCL2 antibodies

The present invention relates to bispecific anti-CCL2 antibodies binding to two different epitopes on human CCL2, pharmaceutical compositions thereof, their manufacture, and use as medicaments for the treatment of cancers, inflammatory, autoimmune and ophthalmologic diseases.

Background

The CCL2/CCR2 axis is the main mediator of immature myeloid cell recruitment into the tumor. CCL2 is overexpressed by malignant cells and binds to the extracellular matrix (ECM) building up a chemoattractant gradient. Once they reach the tumor, myeloid-derived suppressive cells (MDSCs) contribute to the pro-tumorigenic milieu by secreting/up-regulating anti-inflammatory cytokines/receptors that in turn inhibit the initiation of an anti-tumor T cell response. In this way, MDSCs may reduce or even impair the efficacy of any T cell-activating therapy (Meyer et al, 2014). Therefore, the specific inhibition of the recruitment of these immature myeloid cells will boost the efficacy of checkpoint inhibitors, T cell bispecific antibodies (TCBs) or other cancer immunotherapies (CITs). In addition, CCL2 has also been implicated in the promotion of angiogenesis, metastasis and tumor growth, suggesting that neutralizing CCL2 might contribute to several lines of anti-tumor intervention.

Targeting CCL2 –as opposed to its receptor- will specifically inhibit the undesired CCL2-mediated effects, sparing those that might signal through the same receptor (CCR2) but different ligands (e.g. CCL7, CCL8, CCL13) which are involved in the recruitment of other immune cell populations, like Th1 and NK cells.

Clinically, CCL2 has been a preferred antibody-target in several studies aiming at neutralizing its elevated levels caused by different inflammatory diseases, such as rheumatoid arthritis (Haringman et al, Arthritis Rheum. 2006 Aug;54(8):2387-92), idiopathic pulmonary fibrosis (Raghu et al, Eur Respir J. 2015 Dec;46(6):1740-50), diabetic nephropathy (Menne et al, Nephrol Dial Transplant (2017) 32: 307–315) and cancer (Sandhu et al, Cancer Chemother Pharmacol. 2013 Apr;71(4):1041-50). However, its high synthesis rate together with the observed high in vivo antibody-antigen dissociation constants (KD) have proven to be the main obstacles hindering the suppression of free CCL2 by conventional antibodies at clinically viable doses (Fetterly et al, J Clin Pharmacol. 2013 Oct;53(10):1020-7).

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CCL2 neutralization appears to be more obviously relevant in patients with elevated serum levels of CCL2, which has been observed in several types of cancers like breast cancer (BC), ovarian cancer (OvCa), colorectal cancer (CRC), pancreatic cancer and prostate cancer. However, even patients within these indications who do not present this serology but whose tumors are highly infiltrated with immune cells of the myeloid lineage might very well profit from this novel therapy due to the many roles that CCL2 plays in the tumor context as mentioned above.

Igawa et al, Immunological Reviews 270 (2016) 132–151 describes the Sweeping technology in which the generated antibody bears pH-dependent CDRs (for antibody-antigen dissociation within the acidic endosomes, leading to antigen degradation) and an engineered Fc moiety with an optimized isoelectric point (pI) and enhanced binding to FcγRIIb (favoring the cellular uptake of immune complexes), and a moderate affinity to the neonatal Fc receptor, to maintain an acceptable pharmacokinetic profile.

Summary of the invention

The present invention relates to certain bispecific anti-CCL2 antibodies binding to two different epitopes on human CCL2, pharmaceutical compositions thereof, their manufacture, and use as medicaments for the treatment of cancers, inflammatory, autoimmune and ophthalmologic diseases.

The present invention provides a bispecific antibody comprising a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and a second different antigen-binding site that (specifically) binds to a second different epitope on human CCL2,

wherein the bispecific antibody comprises

a) a first polypeptide chain comprising (from N-terminal to C-terminal direction) VH1-CH1-L1-Hinge-CH2-CH3-L2-VL1-CL wherein,

VH1 is a first heavy chain variable domain and VL1 is a first variable light chain domain (both forming together (associating together to form) the first antigen binding site),

CH1 is a constant heavy chain domain 1,

L1 is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 5 to 10 amino acids),

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Hinge is a heavy chain hinge region,
CH2 is a constant heavy chain domain 2,
CH3 is a constant heavy chain domain 3,
L2 is is a polypeptide linker with a length of 5 to 15 amino acids
(in one embodiment with a length of 10 to 15 amino acids),
CL is a constant light chain domain,

and

b) a second polypeptide chain comprising (from N-terminal to C-terminal
direction) VH2-CH1-L1-Hinge-CH2-CH3-L2-VL2-CL wherein,
VH2 is a second heavy chain variable domain and VL2 is a second
variable light chain domain (both forming together (associating
together to form) the second antigen binding site),
CH1 is a constant heavy chain domain 1,
L1 is a polypeptide linker with a length of 5 to 15 amino acids (in
one embodiment with a length of 5 to 10 amino acids),
Hinge is a heavy chain hinge region,
CH2 is a constant heavy chain domain 2,
CH3 is a constant heavy chain domain 3,
L2 is is a polypeptide linker with a length of 5 to 15 amino acids (in
one embodiment with a length of 10 to 15 amino acids),
CL is a constant light chain domain,

wherein

- A) i) the VH1 domain comprises the amino acid sequence of SEQ ID
NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID
NO:75; and
- ii) the VH2 domain comprises the amino acid sequence of SEQ ID
NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID
NO:93;

or

- B) i) the VH1 domain comprises the amino acid sequence of SEQ ID
NO:71;

- 4 -

and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;

5 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

C) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;

10 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;

15 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

D) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;

20 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;

and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

25 or

E) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;

and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

- 5 -

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

5 or

F) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

10 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

15 G) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

20 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

25 H) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

30 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

- 6 -

or

I) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

J) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

K) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

L) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

- 7 -

and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;

5 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

M) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

10 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;

15 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

N) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

20 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;

and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

25 or

O) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

- 8 -

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

5 or

P) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

10 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

15 One embodiment of the invention is the bispecific antibody described above,
wherein

i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

20 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93.

25 One embodiment of the invention is the bispecific antibody described above,
wherein

i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

30 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;

- 9 -

and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94.

In one embodiment of the invention the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG isotype, preferably of human IgG1 isotype.

5 In one embodiment of the invention the bispecific antibody

i) blocks binding of CCL2 to its receptor CCR2 *in vitro* (reporter assay, $IC_{50}=0.5nM$); and/or

ii) inhibits CCL2-mediated chemotaxis of myeloid cells *in vitro* ($IC_{50}=1.5nM$); and/or

10 iii) is cross-reactive to cyno and human CCL2.

In one embodiment of the invention the bispecific antibody

the bispecific antibody is not cross-reactive to other CCL homologs, (shows 100 time less binding to other CCL homologs (selected from the group of CCL8, CCL7, and CCL13) compared to the binding to CCL2

15 In one embodiment of the invention the bispecific antibody

the bispecific antibody binds to the first and second epitope on human CCL2 in ion-dependent manner.

In one embodiment of the invention the bispecific antibody

20 the bispecific antibody binds to human CCL2 in pH dependent manner and wherein the first antigen binding site and the second antigen binding site both bind to CCL2 with a higher affinity at neutral pH than at acidic pH.

In one embodiment of the invention the bispecific antibody

the bispecific antibody binds to human CCL2 with a 10 times higher affinity at pH 7.4, than at pH 5.8.

25 In one embodiment of the invention the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

- 10 -

i) Q311R, and/or P343R (suitable for increasing pI for enhancing uptake of antigen); and/or

ii) L235W, G236N, H268D, Q295L, K326T and/or A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and/or

iii) N434A (suitable for increasing affinity to FcRn for longer plasma half-life); and/or

iv) Q438R and/or S440E (suitable for suppressing rheumatoid factor binding).

In one embodiment of the invention the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

i) Q311R and/ P343R (suitable for increasing pI for enhancing uptake of antigen); and

ii) L234Y, P238D, T250V, V264I, T307V and A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and

iii) M428L, N434A and Y436T (suitable for increasing affinity to FcRn for longer plasma half-life); and/

iv) Q438R and S440E(suitable for suppressing rheumatoid factor binding).

The invention further provides an isolated nucleic acid encoding the bispecific antibody according to the invention as described herein.

The invention further provides a host cell comprising such nucleic acid .

The invention further provides a method of producing the bispecific antibody comprising culturing such host cell so that the bispecific antibody is produced.

The invention further provides a pharmaceutical formulation comprising the bispecific antibody according to the invention as described herein and a pharmaceutically acceptable carrier.

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The invention further provides the bispecific antibody according to the invention as described herein for use as a medicament.

The invention further provides the bispecific antibody according to the invention as described herein for use in treating cancer.

5 The invention further provides the bispecific antibody according to the invention as described herein for use in treating an inflammatory or autoimmune disease.

The invention further provides the use of the bispecific antibody according to the invention as described herein in the manufacture of a medicament.

10 In one aspect, the invention is based, in part, on the finding that the bispecific antibodies as described herein use different anti-CCL2 antigen binding sites as first and second antigen binding site/moiety. These bispecific anti-CCL2 antibodies bind to certain epitopes of CCL2 with high specificity, and have ability to specifically inhibit binding of CCL2 to its receptor CCR2. They show improved immune complex formation compared to monospecific antibodies and improved CCL2
15 abrogation in vivo. The specific bispecific anti-CCL2 antibodies in the contorsbody format described herein show in addition valuable properties like low viscosity (which allows e.g. high concentration solutions suitable e.g. for subcutaneous administration)

Description of the Figures

20 Figure 1: Surface plasmon resonance (Biacore®) sensorgrams showing binding of monospecific anti-CCL2 antibodies (CNTO888 (= CNTO), 1A5, 1G9 and humanized 11K2 (=11k2) to recombinant CCL2 and CCL2 homologs.

25 Figure 2a: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody CNTO888-SG1 (wild type IgG1) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody CNTO888-SG105 (Fc receptor binding silenced IgG1) into FcRn
30 transgenic mice.

Figure 2b: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human

CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody 11K2-SG1 (wild type IgG1) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody 11K2-SG105 (Fc receptor binding silenced IgG1) into FcRn transgenic mice.

5 Figure 2c: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody ABN912-SG1 (wild type IgG1) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody ABN912-SG105 (Fc receptor binding silenced IgG1) into FcRn transgenic mice.

10 Figure 2d: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody 1A4-SG1 (wild type IgG1) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody 1A4-SG105 (Fc receptor binding silenced IgG1) into FcRn transgenic mice.

15 Figure 2e: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody 1A5-SG1 (wild type IgG1) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody 1A5-SG105 (Fc receptor binding silenced IgG1) into FcRn transgenic mice.

20 Figure 2f: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody 1G9-SG1 (wild type IgG1) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody 1G9-SG105 (Fc receptor binding silenced IgG1) into FcRn transgenic mice.

25 Figure 2g: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg monospecific anti-CCL2 antibody 2F6-SG1 (wild type IgG1) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and monospecific anti-CCL2 antibody 20mg/kg 2F6-SG105 (Fc receptor binding silenced IgG1) into FcRn transgenic mice.

30

Figure 3: Shows the time course of serum total mouse CCL2 concentration (Figure°3a) and antibody-time profile (Figure°3b) after i.v. injection of a) solid line: 20 mg/kg monospecific anti-CCL2 antibodies 11K2-SG1 (wild type IgG1) and b) dotted line: 20 mg/kg monospecific anti-CCL2 antibodies 11K2-SG105 (Fc receptor binding silenced IgG1) in mice.

Figure 4a: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody 11K2//1G9-WT IgG1 (wild type IgG1 with intact Fc receptor binding) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody 11K2//1G9-PGLALA (Fc receptor binding silenced IgG1) into Balb/c mice.

Figure 4b: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody CNTO888//11K2-WT IgG1 (wild type IgG1 with intact Fc receptor binding) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody CNTO888//11K2-PGLALA (Fc receptor binding silenced IgG1) into Balb/c mice.

Figure 4c: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody CNTO888//1G9-WT IgG1 (wild type IgG1 with intact Fc receptor binding) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody 11K2//1G9-PGLALA (Fc receptor binding silenced IgG1) into Balb/c mice.

Figure 4d: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody CNTO888//1A5-WT IgG1 (wild type IgG1 with intact Fc receptor binding) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody CNTO888//1A5-PGLALA (Fc receptor binding silenced IgG1) into Balb/c mice.

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Figure 4e: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody 1A5//1G9-WT IgG1 (wild type IgG1 with intact Fc receptor binding) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody 1A5//1G9-PGLALA (Fc receptor binding silenced IgG1) into Balb/c mice.

Figure 4f: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody 11K2//2F6-WT IgG1 (wild type IgG1 with intact Fc receptor binding) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody 11K2//2F6-PGLALA (Fc receptor binding silenced IgG1) into Balb/c mice.

Figure 4g: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody ABN912//11K2-WT IgG1 (wild type IgG1 with intact Fc receptor binding) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody ABN912//11K2-PGLALA (Fc receptor binding silenced IgG1) into Balb/c mice.

Figure 4h: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody 1A4//2F6-WT IgG1 (wild type IgG1 with intact Fc receptor binding) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody 1A4//2F6-PGLALA (Fc receptor binding silenced IgG1) into Balb/c mice.

Figure 4i: Serum concentration of hCCL2 over time after i.v. injection of pre-formed immune complex consisting of a) solid line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-CCL2 antibody 1A5//2F6-WT IgG1 (wild type IgG1 with intact Fc receptor binding) or b) dotted line: 0.1mg/kg human CCL2 (hCCL2) and 20mg/kg bispecific anti-

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CCL2 antibody 1A5//2F6-PGLALA (Fc receptor binding silenced IgG1) into Balb/c mice.

Figure 5a: Biacore® sensorgrams showing binding profile to monomeric CCL2 at pH7.4 (black line) and pH5.8 (grey line) of the four modified 11K2 and four CNTO888 variants, and the 16 bispecific anti-CCL2 antibodies CKLO01 to CKLO16 resulting of the respective combination antigen binding moieties of the four modified 11K2 and four CNTO888 variants.

Figure 5b: Biacore® sensorgrams showing binding profile to monomeric CCL2, of the four modified 11K2 and four CNTO888 variants, and the 16 bispecific anti-CCL2 antibodies CKLO01 to CKLO16 resulting of the respective combination antigen binding moieties of the four modified 11K2 and four CNTO888 variants. An additional dissociation phase at pH5.8 was integrated into the BIACORE® assay immediately after the dissociation phase at pH 7.4.

Figure 6: Biacore® sensorgrams showing binding profile of bispecific anti-CCL2 antibodies CKLO01, CKLO02, CKLO03 and CKLO04 to monomeric CCL8 at pH7.4 (black line) and pH5.8 (grey line).

Figure 7a: Serum concentration of hCCL2 over time after injection of pre-formed immune complex consisting of hCCL2 and bispecific anti-CCL2 antibodies (parental CNTO//11K2 and pH dependent variants CKLO01, CKLO02, CKLO03 and CKLO04) into SCID mice.

Figure 7b: Serum concentration of hCCL2 over time after injection of pre-formed immune complex consisting of hCCL2 and CKLO03 (with IgG1 wild type Fc) or CKLO03-SG1099, (CKLO03 with enhanced pI Fc) into SCID mice.

Figure 8: Chemotaxis Assay: Bispecific anti-CCL2 antibodies with identical CDRs and variable regions VH/VL, namely CKLO2-IgG1 wild type and CKLO2-SG1095, but different Fc moieties, can inhibit the migration of THP-1 cells with identical potencies ($IC_{50} = 0.2 \mu\text{g/ml}$; Fig 8, left panel).

Similarly, CCL2-0048, the parent unmodified bispecific antibody CNTO888/11k2k2 IgG1 of CKLO2, which is non-pH dependent, also

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shows an IC₅₀ of 0,2 µg/ml, since pH-dependency is critical for antigen sweeping, a phenomenon that does not take place in this assay.

5 The corresponding monospecific antibodies CNTO888 IgG1 and humanized 11k2 IgG1 display IC₅₀ values of 0.3 and 0.7 µg/ml, respectively, while the huIgG1 isotype control shows no inhibition (Fig 8, right panel).

10 Figure 9: In vivo anti-tumor activity in a genetically-modified mouse model. Treatment of mouse tumor model with Mab CKLO2-IgG1 (Fc wild type IgG1) and CKLO2-SG1099 (= CKLO2 pI-enhanced). Tumor volumes (left), tumor weights (middle), and M-MDSC infiltrate (right) at end of study. (vehicle in black, CKLO2 wild type IgG1 in grey, and CKLO2pI-enhanced Fc (CKLO2-SG1099) in white bars/dotted line)

15 Figure 10: Serum total (left) and free (right) CCL2 levels during the in vivo anti-tumor activity study (see efficacy in Figure 9) under treatment with bispecific anti-CCL2 antibodies (vehicle in black, CKLO2 wild type IgG1 in grey, and pI-enhanced Fc (CKLO2-SG1099) in white bars/dotted line).

20 Figure 11: Proof of concept study of CCL2 sweeping efficiency in cynomolgus monkeys. Total antibody concentration-time profiles in serum of cynomolgus monkeys; left panel: average concentration-time profiles of the four antibodies is presented over seven days; Group 1: monospecific CNTO888-SG1 (= IgG1 wild type) anti-CCL2 antibody (n=3 animals) as control of maximal total CCL2 accumulation; group 2: a biparatopic anti-CCL2 antibody CKLO2-SG1 (IgG1 wild type) with pH dependent target binding but no Fc-modifications (n=3); group 3: a biparatopic anti-CCL2 antibody CKLO2-SG1100 with pH dependent target binding and Fc-pI and further modifications (n=4) and group 4: biparatopic anti-CCL2 antibody CKLO2-SG1095 with pH dependent target binding, Fc-pI and FcγRIIb affinity enhanced and further modifications (n=4).; right panel: individual concentration-time profile of individual 4 (group 2) is presented over the duration of the PK study (70 days).

Figure 12: Proof of concept study of CCL2 sweeping efficiency in cynomolgus monkeys. Total CCL2 concentration-time profiles in serum of cynomolgus monkeys; left panel: average total CCL2 concentration-time

profiles of the four antibodies is presented over seven days; right panel: individual total CCL2 concentration-time profile of individual 4 (group 2) is presented over the duration of the PK study (70 days).

5 Figure 13: Free CCL2 concentration-time profiles in serum of cynomolgus monkeys; left panel: average free CCL2 concentration-time profiles of the four antibodies is presented over seven days; right panel: individual free CCL2 concentration-time profile of individual 4 (group 2) is presented over the duration of the PK study (70 days); average profiles were calculated using a value of 0.01 ng/mL (lower limit of quantification) for samples that were below detection limit.

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Figure 14: PK/PD study of CCL2 sweeping efficiency in cynomolgus monkeys. Total CKL02-SG1095 concentration-time profiles in serum of cynomolgus monkeys (CKL02-SG1095 treatment with different concentrations (group 1-3)); left panel: average concentration-time profiles (n=4) for the three dose levels are presented over seven days; right panel: individual concentration-time profiles of two ADA-negative individual animals (25 mg/kg dose group) are presented over the duration of the study (98 days).

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Figure 15: PK/PD study of CCL2 sweeping efficiency in cynomolgus monkeys. Total CCL2 concentration-time profiles in serum of cynomolgus monkeys under CKL02-SG1095 treatment with different concentrations (group 1-3) and in comparison with CNTO888-SG1 treatment (group 4); left panel: average total CCL2 concentration-time profiles (error bars indicate SD) of the four study groups is presented over seven days; right panel: individual total CCL2 concentration-time profiles of ADA-negative animals from groups 3 (n=2, error bars indicate range) and 4 (n=3, error bars indicate SD) are presented over the duration of the PK study (98 days).

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Figure 16: PK/PD study of CCL2 sweeping efficiency in cynomolgus monkeys. Free CCL2 concentration-time profiles in serum of cynomolgus monkeys; left panel: average free CCL2 concentration-time profiles (error bars indicate SD) of the four study groups is presented over seven days (CKL02-SG1095 treatment with different concentrations (group 1-3) and in comparison with CNTO888-SG1 treatment (group 4)) ; right

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panel: average free CCL2 concentration-time profiles of ADA-negative animals from groups 3 (n=2, error bars indicate range) and 4 (n=3, error bars indicate SD) are presented over the duration of the PK study (70 days); average profiles were calculated using a value of 0.01 ng/mL (lower limit of quantification) for samples that were below detection limit.

Figure 17: Exemplary scheme of a bispecific anti-CCL2 antibody of the present invention (in the so-called contorsbody (CB) format.

Figure 18: SEC complex: SEC of CCL2 complex with the bi-paratopic antibodies P1AF8139 (abbreviated as 39) and P1AF8143 (abbreviated as 43)

Figures 19A-19C:

FcγIIa- Cellular uptake of CCL2 via FcγRIIa. Fig. 19A: Y-shape bi-paratopic antibodies with the reference antibody P1AD8325, Fig. 19B: contorsbodies P1AF8142 and P1AF8143 together with reference antibody P1AD8325, and Fig. 19C: antibody P1AD8325, Cnto888-IgG1, CKLO2 (= CKLO2-SG1 (= IgG1 wt), and absence of antibody as reference set.

Figures Fig.20A-20C:

FcγIIb- Cellular uptake of CCL2 via FcγRIIb. Fig. 20A: Y-shape bi-paratopic antibodies with the reference antibody P1AD8325, Fig. 20B: contorsbodies P1AF8142 and P1AF8143 together with reference antibody P1AD8325, and Fig. 20C: antibody P1AD8325, Cnto888-IgG1, CKLO2 (= CKLO2-SG1 (= IgG1 wt), and absence of antibody as reference set.

Detailed description of the invention

The present invention relates to bispecific anti-CCL2 antibodies binding to two different epitopes on human CCL2, pharmaceutical compositions thereof, their manufacture, and use as medicaments for the treatment of cancers, inflammatory, autoimmune and ophthalmologic diseases.

In one aspect of the invention bispecific anti-CCL2 antibodies comprises a first antigen-binding site that (specifically) binds to a first epitope on human CC2 and a

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second different antigen-binding site that (specifically) binds a different second epitope, wherein bispecific anti-CCL2 antibody comprises

a) a first polypeptide chain comprising (from N-terminal to C-terminal direction) VH1-CH1-L1-Hinge-CH2-CH3-L2-VL1-CL wherein,

5 VH1 is a first heavy chain variable domain and VL1 is a first variable light chain domain (both forming together (associating together to form) the first antigen binding site),
CH1 is a constant heavy chain domain 1,
L1 is a polypeptide linker with a length of 5 to 15 amino acids (in
10 one embodiment with a length of 5 to 10 amino acids),
Hinge is a heavy chain hinge region,
CH2 is a constant heavy chain domain 2,
CH3 is a constant heavy chain domain 3,
L2 is is a polypeptide linker with a length of 5 to 15 amino acids
15 (in one embodiment with a length of 10 to 15 amino acids),
CL is a constant light chain domain,

and

b) a second polypeptide chain comprising (from N-terminal to C-terminal direction) VH2-CH1-L1-Hinge-CH2-CH3-L2-VL2-CL wherein,

20 VH2 is a second heavy chain variable domain and VL2 is a second variable light chain domain (both forming together (associating together to form) the second antigen binding site),
CH1 is a constant heavy chain domain 1,
L1 is a polypeptide linker with a length of 5 to 15 amino acids (in
25 one embodiment with a length of 5 to 10 amino acids),
Hinge is a heavy chain hinge region,
CH2 is a constant heavy chain domain 2,
CH3 is a constant heavy chain domain 3,
L2 is is a polypeptide linker with a length of 5 to 15 amino acids (in
30 one embodiment with a length of 10 to 15 amino acids),
CL is a constant light chain domain.

When used herein, the term “CCL2”, “human CCL2”, which also called “MCP-1” is meant the 76 amino acid sequence referenced in NCBI record accession No.
35 NP_002973 and variously known as CCL2, MCP-1 (monocyte chemotactic protein 1), SMC-CF (smooth muscle cell chemotactic factor), LDCF (lymphocyte-derived

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chemotactic factor), GDCF (glioma-derived monocyte chemotactic factor), TDCF (tumor-derived chemotactic factors), HC11 (human cytokine 11), MCAF (monocyte chemotactic and activating factor). The gene symbol is SCYA2, the JE gene on human chromosome 17, and the new designation is CCL2 (Zlotnik, Yoshie 2000. Immunity 12: 121-127). JE is the mouse homolog of human MCP- 1/CCL2.

Handel and others (Biochemistry. 1996; 35:6569–6584) determined the solution structure of a CCL2 dimer. These studies indicated that the secondary structure of CCL2 consists of four β -sheets. Additionally, the residues responsible for the dimerization interface of CCL2 were described by Zhang and Rollins (Mol Cell Biol. 1995; 15:4851–4855). The protein complex appears elongated with the two monomers oriented in such a way that they form a large pocket. Structures of monomeric and dimeric CCL2 in two crystal forms, the so-called *I* and *P* forms, have also been determined (Lubkowski et al., Nat Struct Biol. 1997; 4:64–69). Paolini et al, (J Immunol. 1994 Sep 15;153(6):2704-17), described that MCP1/CCL2 exists as a monomer at physiologically relevant concentrations: By analysing rec. CCL2 protein (purchased from Peprotech) with size exclusion HPLC, sedimentation equilibrium ultracentrifugation and chemical cross-linking, they could show that the weight fraction of monomeric and dimeric forms of MCP-1 depends on the concentration in vitro. Finally, Seo and colleagues (J Am Chem Soc. 2013 Mar 20;135(11):4325-32) could show by ion mobility mass spectrometry the presence of injected CCL2 in both monomeric and dimeric forms under physiological conditions.

Thus “wild type CCL-2” (wt CCL2) can exist as monomer but actually can also form dimers at physiological concentrations. This monomer-dimer equilibrium is certainly different and has to be carefully taken into account for all *in vitro* experiments described where different concentrations might be used. To avoid any uncertainties, we generated point mutated CCL2 variants: The “P8A” variant of CCL2 carries a mutation in the dimerization interface resulting in an inability to form a dimer leading to a defined, pure CCL2 monomer. In contrast, the “T10C” variant of CCL2 results in a fixed dimer of CCL2 (J Am Chem Soc. 2013 Mar 20;135(11):4325-32).

The CCL2/CCR2 axis is the main mediator of immature myeloid cell recruitment into the tumor. CCL2 is overexpressed by malignant cells and binds to the extracellular matrix (ECM) building up a chemoattractant gradient. Once they reach the tumor, myeloid-derived suppressive cells (MDSCs) contribute to the pro-tumorigenic milieu by secreting/up-regulating anti-inflammatory cytokines/receptors that in turn inhibit the initiation of an anti-tumor T cell response.

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In this way, MDSCs may reduce or even impair the efficacy of any T cell-activating therapy (Meyer et al, 2014). Therefore, the specific inhibition of the recruitment of these immature myeloid cells will boost the efficacy of checkpoint inhibitors, T cell bispecific and cancer immune therapies. In addition, CCL2 has also been implicated in the promotion of angiogenesis, metastasis and tumor growth, suggesting that neutralizing CCL2 might contribute to several lines of anti-tumor intervention.

Targeting CCL2 – as opposed to its receptor - will specifically inhibit the undesired CCL2-mediated effects, sparing those that might signal through the same receptor (CCR2) but different ligands (e.g. CCL7, CCL8, CCL13) which are involved in the recruitment of other immune cell populations, like Th1 and NK cells.

Clinically, CCL2 has been a preferred antibody-target in several studies aiming at neutralizing its elevated levels caused by different inflammatory diseases, such as rheumatoid arthritis (Haringman et al, 2006), idiopathic pulmonary fibrosis (Raghu et al, 2015), diabetic nephropathy (Menne et al, 2016) and cancer (Sandhu et al, 2013). However, its high synthesis rate together with the observed high in vivo antibody-antigen dissociation constants (K_D) have proven to be the main obstacles hindering the suppression of free CCL2 by conventional antibodies at clinically viable doses (Fetterly et al, 2013).

CCL2 neutralization appears to be more obviously relevant in patients with elevated serum levels of CCL2, which has been observed in several types of cancers like breast cancer (BC), ovarian cancer (OvCa), colorectal cancer (CRC), pancreatic cancer and prostate cancer. However, even patients within these indications who do not present this serology but whose tumors are highly infiltrated with immune cells of the myeloid lineage might very well profit from this novel therapy due to the many roles that CCL2 plays in the tumor context as mentioned above.

As used herein, an antibody "binding to human CCL2", "specifically binding to human CCL2", "that binds to human CCL2" or "anti-CCL2 antibody" refers to an antibody specifically binding to the human CCL2 antigen with a binding affinity of a K_D -value of 5.0×10^{-8} mol/l or lower, in one embodiment of a K_D -value of 1.0×10^{-9} mol/l or lower, in one embodiment of a K_D -value of 5.0×10^{-8} mol/l to 1.0×10^{-13} mol/l.

The binding affinity is determined with a standard binding assay, such as surface plasmon resonance technique (BIAcore®, GE-Healthcare Uppsala, Sweden) e.g. using constructs comprising CCL2 extracellular domain (e.g. in its natural occurring

3 dimensional structure). In one embodiment binding affinity is determined with a standard binding assay using exemplary soluble CCL2.

Antibody specificity refers to selective recognition of the antibody for a particular epitope of an antigen. Natural antibodies, for example, are monospecific.

5 The term “monospecific” antibody as used herein denotes an antibody that has one or more binding sites each of which bind to the same epitope of the same antigen.

The term “bispecific antibody that binds to (human) CCL2”, “biparatopic antibody that binds to (human) CCL2”, “bispecific anti-CCL2 antibody”, “biparatopic anti-CCL2 antibody” as used herein means that the antibody is able to specifically bind
10 to at least two different epitopes on (human) CCL2. Typically, such bispecific antibody comprises two different antigen binding sites (two different paratopes), each of which is specific for a different epitope of (human) CCL2. In certain embodiments the bispecific antibody is capable of binding two different and non-overlapping epitopes on CCL2, which means that the two different antigen binding
15 sites do not compete for binding to CCL2.

An “acceptor human framework” for the purposes herein is a framework comprising the amino acid sequence of a light chain variable domain (VL) framework or a heavy chain variable domain (VH) framework derived from a human immunoglobulin framework or a human consensus framework, as defined below. An acceptor human
20 framework “derived from” a human immunoglobulin framework or a human consensus framework may comprise the same amino acid sequence thereof, or it may contain amino acid sequence changes. In some embodiments, the number of amino acid changes are 10 or less, 9 or less, 8 or less, 7 or less, 6 or less, 5 or less, 4 or less, 3 or less, or 2 or less. In some embodiments, the VL acceptor human framework is
25 identical in sequence to the VL human immunoglobulin framework sequence or human consensus framework sequence.

The term “antibody” herein is used in the broadest sense and encompasses various antibody structures, including but not limited to monoclonal antibodies, polyclonal antibodies, multispecific antibodies (e.g., bispecific antibodies), and antibody
30 fragments so long as they exhibit the desired antigen-binding activity.

An “antibody fragment” refers to a molecule other than an intact antibody that comprises a portion of an intact antibody that binds the antigen to which the intact antibody binds. Examples of antibody fragments include but are not limited to Fv,

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Fab, Fab', Fab'-SH, F(ab')₂; diabodies; linear antibodies; single-chain antibody molecules (e.g. scFv); and multispecific antibodies formed from antibody fragments.

5 The term "valent" as used herein denotes the presence of a specified number of antigen binding sites in an antibody. As such, the term "monovalent binding to an antigen" denotes the presence of one (and not more than one) antigen binding site specific for the antigen in the antibody.

10 The terms "antigen binding site" refers to the site or region, i.e. one or several amino acid residues, of an antibody which provides interaction with the antigen. For example, the antigen binding site of an antibody comprises amino acid residues from the complementarity determining regions (CDRs). In one embodiment the antigen binding site of an antibody comprises the comprises amino acid residues from the VH and VL. A native immunoglobulin molecule typically has two antigen binding sites; a Fab molecule typically has a single antigen binding site. "Antigen binding moiety" refers to a polypeptide molecule comprising an antigen binding site that
15 specifically binds to an antigenic determinant. Antigen binding moieties include antibodies and fragments thereof as further defined herein. Particular antigen binding moieties include an antigen binding domain of an antibody, comprising an antibody heavy chain variable region and an antibody light chain variable region. In certain embodiments, the antigen binding moieties may comprise antibody constant regions
20 as further defined herein and known in the art. Useful heavy chain constant regions include any of the five isotypes: α , δ , ϵ , γ , or μ . Useful light chain constant regions include any of the two isotypes: κ and λ .

25 As used herein, the term "antigenic determinant" or "antigen" refers to a site on a polypeptide macromolecule to which an antigen binding moiety/site binds, forming an antigen binding moiety-antigen complex. Useful antigenic determinants can be found, for example, on the surfaces of tumor cells, on the surfaces of virus-infected cells, on the surfaces of other diseased cells, on the surface of immune cells, free in blood serum, and/or in the extracellular matrix (ECM).

30 The term "chimeric" antibody refers to an antibody in which a portion of the heavy and/or light chain is derived from a particular source or species, while the remainder of the heavy and/or light chain is derived from a different source or species.

The "class" of an antibody refers to the type of constant domain or constant region possessed by its heavy chain. There are five major classes of antibodies: IgA, IgD, IgE, IgG, and IgM, and several of these may be further divided into subclasses

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(isotypes), e.g., IgG₁, IgG₂, IgG₃, IgG₄, IgA₁, and IgA₂. The heavy chain constant domains that correspond to the different classes of immunoglobulins are called α , δ , ϵ , γ , and μ , respectively. Preferably the bispecific antibodies of the invention are of human IgG isotype, more preferably of humans IgG₁ isotype. The terms IgG isotype and IgG₁ isotype as used herein refer to the human IgG isotype and human IgG₁ isotype. Typically the different IgG isotypes exist in the form of slightly different allotypes based on allelic variation among the IgG subclasses (see Vidarsson et al.; Front Immunol 5 (2014) Article 520, 1-17). An "effective amount" of an agent, e.g., a pharmaceutical formulation, refers to an amount effective, at dosages and for periods of time necessary, to achieve the desired therapeutic or prophylactic result.

The term "Fc domain" or "Fc region" herein is used to define a C-terminal region of an immunoglobulin heavy chain that contains at least a portion of the constant region. The term includes native sequence Fc regions and variant Fc regions. Although the boundaries of the Fc region of an IgG heavy chain might vary slightly, the human IgG heavy chain Fc region is usually defined to extend from Cys226, or from Pro230, to the carboxyl-terminus of the heavy chain. However, antibodies produced by host cells may undergo post-translational cleavage of one or more, particularly one or two, amino acids from the C-terminus of the heavy chain. Therefore, an antibody produced by a host cell by expression of a specific nucleic acid molecule encoding a full-length heavy chain may include the full-length heavy chain, or it may include a cleaved variant of the full-length heavy chain (also referred to herein as a "cleaved variant heavy chain"). This may be the case where the final two C-terminal amino acids of the heavy chain are glycine (G446) and lysine (K447, numbering according to Kabat EU index). Therefore, the C-terminal lysine (Lys447), or the C-terminal glycine (Gly446) and lysine (K447), of the Fc region may or may not be present. Amino acid sequences of heavy chains including Fc domains (or a subunit of an Fc domain as defined herein) are denoted herein without C-terminal glycine-lysine dipeptide if not indicated otherwise. In one embodiment of the invention, a heavy chain including a subunit of an Fc domain as specified herein, comprised in an antibody or bispecific antibody according to the invention, comprises an additional C-terminal glycine-lysine dipeptide (G446 and K447, numbering according to EU index of Kabat). In one embodiment of the invention, a heavy chain including a subunit of an Fc domain as specified herein, comprised in an antibody or bispecific antibody according to the invention, comprises an additional C-terminal glycine residue (G446, numbering according to EU index of Kabat). Compositions of the invention, such as the pharmaceutical compositions described herein, comprise a

population of antibodies or bispecific antibodies of the invention. The population of antibodies or bispecific antibodies may comprise molecules having a full-length heavy chain and molecules having a cleaved variant heavy chain. The population of antibodies or bispecific antibodies may consist of a mixture of molecules having a full-length heavy chain and molecules having a cleaved variant heavy chain, wherein at least 50%, at least 60%, at least 70%, at least 80% or at least 90% of the antibodies or bispecific antibodies have a cleaved variant heavy chain. In one embodiment of the invention a composition comprising a population of antibodies or bispecific antibodies of the invention comprises an antibody or bispecific antibody comprising a heavy chain including a subunit of an Fc domain as specified herein with an additional C-terminal glycine-lysine dipeptide (G446 and K447, numbering according to EU index of Kabat). In one embodiment of the invention a composition comprising a population of antibodies or bispecific antibodies of the invention comprises an antibody or bispecific antibody comprising a heavy chain including a subunit of an Fc domain as specified herein with an additional C-terminal glycine residue (G446, numbering according to EU index of Kabat). In one embodiment of the invention such a composition comprises a population of antibodies or bispecific antibodies comprised of molecules comprising a heavy chain including a subunit of an Fc domain as specified herein; molecules comprising a heavy chain including a subunit of a Fc domain as specified herein with an additional C-terminal glycine residue (G446, numbering according to EU index of Kabat); and molecules comprising a heavy chain including a subunit of an Fc domain as specified herein with an additional C-terminal glycine-lysine dipeptide (G446 and K447, numbering according to EU index of Kabat). In certain embodiments the lysine at Position 447 numbering according to EU index of Kabat) has been replaced by a glycine (K447G) mutation and the molecules comprise an additional C-terminal glycine-glycine dipeptide (G446 and G447, numbering according to EU index of Kabat). Unless otherwise specified herein, numbering of amino acid residues in the Fc region or constant region is “according to the EU numbering system”, also called “numbering according to the EU index of Kabat” or “Kabat EU numbering”, as described in Kabat et al., Sequences of Proteins of Immunological Interest, 5th Ed. Public Health Service, National Institutes of Health, Bethesda, MD, 1991 (see also above). A “subunit” of an Fc domain as used herein refers to one of the two polypeptides forming the dimeric Fc domain, i.e. a polypeptide comprising C-terminal constant regions of an immunoglobulin heavy chain, capable of stable self-association. For example, a subunit of an IgG Fc domain comprises an IgG CH2 and an IgG CH3 constant domain.

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"Framework" or "FR" refers to variable domain residues other than hypervariable region (HVR) residues. The FR of a variable domain generally consists of four FR domains: FR1, FR2, FR3, and FR4. Accordingly, the CDR and FR sequences generally appear in the following sequence in VH (or VL): FR-H1(L1)-CDR-H1(L1)-FR-H2(L2)-CDR-H2(L2)-FR-H3(L3)-CDR-H3(L3)-FR-H4(L4).

The terms "full length antibody", "intact antibody", and "whole antibody" are used herein interchangeably to refer to an antibody having a structure substantially similar to a native antibody structure or having heavy chains that contain an Fc region as defined herein.

A "human antibody" is one which possesses an amino acid sequence which corresponds to that of an antibody produced by a human or a human cell or derived from a non-human source that utilizes human antibody repertoires or other human antibody-encoding sequences. This definition of a human antibody specifically excludes a humanized antibody comprising non-human antigen-binding residues.

A "human consensus framework" is a framework which represents the most commonly occurring amino acid residues in a selection of human immunoglobulin VL or VH framework sequences. Generally, the selection of human immunoglobulin VL or VH sequences is from a subgroup of variable domain sequences. Generally, the subgroup of sequences is a subgroup as in Kabat, E.A. et al., Sequences of Proteins of Immunological Interest, 5th ed., Bethesda MD (1991), NIH Publication 91-3242, Vols. 1-3. In one embodiment, for the VL, the subgroup is subgroup kappa I as in Kabat et al., *supra*. In one embodiment, for the VH, the subgroup is subgroup III as in Kabat et al., *supra*.

A "humanized" antibody refers to a chimeric antibody comprising amino acid residues from non-human CDRs and amino acid residues from human FRs. In certain embodiments, a humanized antibody will comprise substantially all of at least one, and typically two, variable domains, in which all or substantially all of the CDRs correspond to those of a non-human antibody, and all or substantially all of the FRs correspond to those of a human antibody. A humanized antibody optionally may comprise at least a portion of an antibody constant region derived from a human antibody. A "humanized form" of an antibody, e.g., a non-human antibody, refers to an antibody that has undergone humanization.

The term "complementarity determining regions" or "CDRs" as used herein refers to each of the regions of an antibody variable domain which are hypervariable in

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sequence and/or form structurally defined loops (“hypervariable loops”) and/or contain the antigen-contacting residues (“antigen contacts”). Generally, antibodies comprise six CDRs: three in the VH (CDR-H1, CDR-H2, CDR-H3), and three in the VL (CDR-L1, CDR-L2, CDR-L3). Exemplary CDRs herein include:

- 5 (a) hypervariable loops occurring at amino acid residues 26-32 (CDR-L1), 50-52 (CDR-L2), 91-96 (CDR-L3), 26-32 (CDR-H1), 53-55 (CDR-H2), and 96-101 (CDR-H3) (Chothia and Lesk, *J. Mol. Biol.* 196:901-917 (1987));
- (b) CDRs occurring at amino acid residues 24-34 (CDR-L1), 50-56 (CDR-L2), 89-97 (CDR-L3), 31-35b (CDR-H1), 50-65 (CDR-H2), and 95-102 (CDR-H3) (Kabat et al., *Sequences of Proteins of Immunological Interest*, 5th Ed. Public Health Service, National Institutes of Health, Bethesda, MD (1991));
- 10 (c) antigen contacts occurring at amino acid residues 27c-36 (CDR-L1), 46-55 (CDR-L2), 89-96 (CDR-L3), 30-35b (CDR-H1), 47-58 (CDR-H2), and 93-101 (CDR-H3) (MacCallum et al. *J. Mol. Biol.* 262: 732-745 (1996)); and
- 15 (d) combinations of (a), (b), and/or (c), including CDR amino acid residues 24-34 (CDR-L1), 50-56 (CDR-L2), 89-97 (vL3), 31-35 (CDR-H1), 50-63 (CDR-H2), and 95-102 (CDR-H3).

Unless otherwise indicated, CDR-residues and other residues in the variable domain (e.g., FR residues) are numbered herein according to Kabat et al., Kabat et al.,
 20 *Sequences of Proteins of Immunological Interest*, 5th Ed. Public Health Service, National Institutes of Health, Bethesda, MD (1991).

An “individual” or “subject” is a mammal. Mammals include, but are not limited to, domesticated animals (e.g., cows, sheep, cats, dogs, and horses), primates (e.g., humans and non-human primates such as monkeys), rabbits, and rodents (e.g., mice
 25 and rats). In certain embodiments, the individual or subject is a human.

An “isolated” antibody is one which has been separated from a component of its natural environment. In some embodiments, an antibody is purified to greater than 95% or 99% purity as determined by, for example, electrophoretic (e.g., SDS-PAGE, isoelectric focusing (IEF), capillary electrophoresis) or chromatographic (e.g., ion
 30 exchange or reverse phase HPLC). For review of methods for assessment of antibody purity see, e.g., Flatman, S. et al., *J. Chromatogr. B* 848 (2007) 79-87.

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An "isolated" nucleic acid refers to a nucleic acid molecule that has been separated from a component of its natural environment. An isolated nucleic acid includes a nucleic acid molecule contained in cells that ordinarily contain the nucleic acid molecule, but the nucleic acid molecule is present extrachromosomally or at a chromosomal location that is different from its natural chromosomal location.

"Isolated nucleic acid encoding a mono-or bispecific anti-CCL2 antibody" refers to one or more nucleic acid molecules encoding antibody heavy and light chains (or fragments thereof), including such nucleic acid molecule(s) in a single vector or separate vectors, and such nucleic acid molecule(s) present at one or more locations in a host cell.

The term "monoclonal antibody" as used herein refers to an antibody obtained from a population of substantially homogeneous antibodies, i.e., the individual antibodies comprising the population are identical and/or bind the same epitope, except for possible variant antibodies, e.g., containing naturally occurring mutations or arising during production of a monoclonal antibody preparation, such variants generally being present in minor amounts. In contrast to polyclonal antibody preparations, which typically include different antibodies directed against different determinants (epitopes), each monoclonal antibody of a monoclonal antibody preparation is directed against a single determinant on an antigen. Thus, the modifier "monoclonal" indicates the character of the antibody as being obtained from a substantially homogeneous population of antibodies, and is not to be construed as requiring production of the antibody by any particular method. For example, the monoclonal antibodies to be used in accordance with the present invention may be made by a variety of techniques, including but not limited to the hybridoma method, recombinant DNA methods, phage-display methods, and methods utilizing transgenic animals containing all or part of the human immunoglobulin loci, such methods and other exemplary methods for making monoclonal antibodies being described herein.

"Native antibodies" refer to naturally occurring immunoglobulin molecules with varying structures. For example, native IgG antibodies are heterotetrameric glycoproteins of about 150,000 daltons, composed of two identical light chains and two identical heavy chains that are disulfide-bonded. From N- to C-terminus, each heavy chain has a variable region (VH), also called a variable heavy domain or a heavy chain variable domain, followed by three constant domains (CH1, CH2, and CH3). Similarly, from N- to C-terminus, each light chain has a variable region (VL),

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also called a variable light domain or a light chain variable domain, followed by a constant light (CL) domain. The light chain of an antibody may be assigned to one of two types, called kappa (κ) and lambda (λ), based on the amino acid sequence of its constant domain.

5 The term “package insert” is used to refer to instructions customarily included in commercial packages of therapeutic products, that contain information about the indications, usage, dosage, administration, combination therapy, contraindications and/or warnings concerning the use of such therapeutic products.

10 “Percent (%) amino acid sequence identity” with respect to a reference polypeptide sequence is defined as the percentage of amino acid residues in a candidate sequence that are identical with the amino acid residues in the reference polypeptide sequence, after aligning the sequences and introducing gaps, if necessary, to achieve the maximum percent sequence identity, and not considering any conservative substitutions as part of the sequence identity. Alignment for purposes of determining
15 percent amino acid sequence identity can be achieved in various ways that are within the skill in the art, for instance, using publicly available computer software such as BLAST, BLAST-2, ALIGN or Megalign (DNASTAR) software. Those skilled in the art can determine appropriate parameters for aligning sequences, including any algorithms needed to achieve maximal alignment over the full length of the
20 sequences being compared. For purposes herein, however, % amino acid sequence identity values are generated using the sequence comparison computer program ALIGN-2. The ALIGN-2 sequence comparison computer program was authored by Genentech, Inc., and the source code has been filed with user documentation in the U.S. Copyright Office, Washington D.C., 20559, where it is registered under U.S.
25 Copyright Registration No. TXU510087. The ALIGN-2 program is publicly available from Genentech, Inc., South San Francisco, California, or may be compiled from the source code. The ALIGN-2 program should be compiled for use on a UNIX operating system, including digital UNIX V4.0D. All sequence comparison parameters are set by the ALIGN-2 program and do not vary.

30 In situations where ALIGN-2 is employed for amino acid sequence comparisons, the % amino acid sequence identity of a given amino acid sequence A to, with, or against a given amino acid sequence B (which can alternatively be phrased as a given amino acid sequence A that has or comprises a certain % amino acid sequence identity to, with, or against a given amino acid sequence B) is calculated as follows:

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100 times the fraction X/Y

where X is the number of amino acid residues scored as identical matches by the sequence alignment program ALIGN-2 in that program's alignment of A and B, and where Y is the total number of amino acid residues in B. It will be appreciated that
5 where the length of amino acid sequence A is not equal to the length of amino acid sequence B, the % amino acid sequence identity of A to B will not equal the % amino acid sequence identity of B to A. Unless specifically stated otherwise, all % amino acid sequence identity values used herein are obtained as described in the immediately preceding paragraph using the ALIGN-2 computer program.

10 The term "pharmaceutical formulation" refers to a preparation which is in such form as to permit the biological activity of an active ingredient contained therein to be effective, and which contains no additional components which are unacceptably toxic to a subject to which the formulation would be administered.

15 A "pharmaceutically acceptable carrier" refers to an ingredient in a pharmaceutical formulation, other than an active ingredient, which is nontoxic to a subject. A pharmaceutically acceptable carrier includes, but is not limited to, a buffer, excipient, stabilizer, or preservative.

20 As used herein, "treatment" (and grammatical variations thereof such as "treat" or "treating") refers to clinical intervention in an attempt to alter the natural course of the individual being treated, and can be performed either for prophylaxis or during the course of clinical pathology. Desirable effects of treatment include, but are not limited to, preventing occurrence or recurrence of disease, alleviation of symptoms, diminishment of any direct or indirect pathological consequences of the disease, preventing metastasis, decreasing the rate of disease progression, amelioration or
25 palliation of the disease state, and remission or improved prognosis. In some embodiments, antibodies of the invention are used to delay development of a disease or to slow the progression of a disease.

30 The term "variable region" or "variable domain" refers to the domain of an antibody heavy or light chain that is involved in binding the antibody to antigen. The variable domains of the heavy chain and light chain (VH and VL, respectively) of a native antibody generally have similar structures, with each domain comprising four conserved framework regions (FRs) and three hypervariable regions (CDRs). (See, e.g., Kindt, T.J. et al. Kuby Immunology, 6th ed., W.H. Freeman and Co., N.Y. (2007), page 91) A single VH or VL domain may be sufficient to confer antigen-

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binding specificity. Furthermore, antibodies that bind a particular antigen may be isolated using a VH or VL domain from an antibody that binds the antigen to screen a library of complementary VL or VH domains, respectively. See e.g., Portolano, S. et al., J. Immunol. 150 (1993) 880-887; Clackson, T. et al., Nature 352 (1991) 624-628).

The term "vector," as used herein, refers to a nucleic acid molecule capable of propagating another nucleic acid to which it is linked. The term includes the vector as a self-replicating nucleic acid structure as well as the vector incorporated into the genome of a host cell into which it has been introduced. Certain vectors are capable of directing the expression of nucleic acids to which they are operatively linked. Such vectors are referred to herein as "expression vectors".

I. COMPOSITIONS AND METHODS

In one aspect, the invention is based, in part, on the finding that the bispecific antibodies as described herein use different anti-CCL2 antigen binding sites as first and second antigen binding site/moiety. These bispecific anti-CCL2 antibodies bind to certain epitopes of CCL2 with high specificity, and have ability to specifically inhibit binding of CCL2 to its receptor CCR2. They show improved immune complex formation compared to monospecific antibodies and improved CCL2 abrogation in vivo. The specific bispecific anti-CCL2 antibodies in the contorsbody format described herein show in addition valuable properties like low viscosity (which allows e.g. high concentration solutions suitable e.g. for subcutaneous administration)

Bispecific-anti-CCL2 Antibodies

Bispecific antibodies

Bispecific antibodies as described herein are monoclonal antibodies that have different binding specificities for at least two different epitopes on CCL2.

Techniques for making multi- and bispecific antibodies include, but are not limited to, recombinant co-expression of two immunoglobulin heavy chain-light chain pairs having different specificities (see Milstein and Cuello, *Nature* 305: 537 (1983)) and "knob-in-hole" engineering (see, e.g., U.S. Patent No. 5,731,168, and Atwell et al., J. Mol. Biol. 270:26 (1997)). Multi-specific antibodies may also be made by

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engineering electrostatic steering effects for making antibody Fc-heterodimeric molecules (see, e.g., WO 2009/089004); cross-linking two or more antibodies or fragments (see, e.g., US Patent No. 4,676,980, and Brennan et al., *Science*, 229: 81 (1985)); using leucine zippers to produce bi-specific antibodies (see, e.g., Kostelny et al., *J. Immunol.*, 148(5):1547-1553 (1992) and WO 2011/034605); using the common light chain technology for circumventing the light chain mis-pairing problem (see, e.g., WO 98/50431); using "diabody" technology for making bispecific antibody fragments (see, e.g., Hollinger et al., *Proc. Natl. Acad. Sci. USA*, 90:6444-6448 (1993)); and using single-chain Fv (sFv) dimers (see, e.g. Gruber et al., *J. Immunol.*, 152:5368 (1994)); and preparing trispecific antibodies as described, e.g., in Tutt et al. *J. Immunol.* 147: 60 (1991).

Engineered antibodies with three or more antigen binding sites, including for example, "Octopus antibodies," or DVD-Ig are also included herein (see, e.g. WO 2001/77342 and WO 2008/024715). Other examples of multispecific antibodies with three or more antigen binding sites can be found in WO 2010/115589, WO 2010/112193, WO 2010/136172, WO2010/145792, and WO 2013/026831. The bispecific antibody or antigen binding fragment thereof also includes a "Dual Acting FAb" or "DAF" comprising an antigen binding site that binds to CCL2 as well as another different antigen, or two different epitopes of CCL2 (see, e.g., US 2008/0069820 and WO 2015/095539).

Multi-specific antibodies may also be provided in an asymmetric form with a domain crossover in one or more binding arms of the same antigen specificity, i.e. by exchanging the VH/VL domains (see e.g., WO 2009/080252 and WO 2015/150447), the CH1/CL domains (see e.g., WO 2009/080253) or the complete Fab arms (see e.g., WO 2009/080251, WO 2016/016299, also see Schaefer et al, PNAS, 108 (2011) 1187-1191, and Klein et al., MAbs 8 (2016) 1010-20), also called CrossMabs. Asymmetrical binding arms can also be engineered by introducing charged or non-charged amino acid mutations into domain interfaces to direct correct Fab pairing. See e.g., WO 2016/172485.

Various further molecular formats for multispecific antibodies are known in the art and are included herein (see e.g., Spiess et al., Mol Immunol 67 (2015) 95-106).

Bispecific antibody formats of the present invention:

The preferred bispecific antibodies of the present invention are of the following formats:

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The bispecific antibody comprises

a) a first polypeptide chain comprising (from N-terminal to C-terminal direction) VH1-CH1-L1-Hinge-CH2-CH3-L2-VL1-CL wherein,

5 VH1 is a first heavy chain variable domain and VL1 is a first variable light chain domain (both forming together (associating together to form) the first antigen binding site),
CH1 is a constant heavy chain domain 1,
L1 is a polypeptide linker with a length of 5 to 15 amino acids (in
10 one embodiment with a length of 5 to 10 amino acids),
Hinge is a heavy chain hinge region,
CH2 is a constant heavy chain domain 2,
CH3 is a constant heavy chain domain 3,
L2 is is a polypeptide linker with a length of 5 to 15 amino acids
15 (in one embodiment with a length of 10 to 15 amino acids),
CL is a constant light chain domain,

and

b) a second polypeptide chain comprising (from N-terminal to C-terminal direction) VH2-CH1-L1-Hinge-CH2-CH3-L2-VL2-CL wherein,

20 VH2 is a second heavy chain variable domain and VL2 is a second variable light chain domain (both forming together (associating together to form) the second antigen binding site),
CH1 is a constant heavy chain domain 1,
L1 is a polypeptide linker with a length of 5 to 15 amino acids (in
25 one embodiment with a length of 5 to 10 amino acids),
Hinge is a heavy chain hinge region,
CH2 is a constant heavy chain domain 2,
CH3 is a constant heavy chain domain 3,
L2 is is a polypeptide linker with a length of 5 to 15 amino acids (in
30 one embodiment with a length of 10 to 15 amino acids),
CL is a constant light chain domain.

This basic antibody Fc domain comprising format, the “contorsbody” (CB), is described e.g. in Guy J.Georges et al, Computational and Structural Biotechnology
35 Journal Volume 18, 2020, Pages 1210-1220. See also the scheme in Figure 17, where an example of a bispecific contorsbody format is shown with the different regions and components. The filled circle between the CH3 domains is an optional

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heterodimerization promoting modification/mutation of the CH3 domains (e.g. knobs into holes, further details described below in the section referring to the heterodimerization promoting FC modifications)

5 The term "polypeptide linker" denotes a linker of natural and/or synthetic origin. A polypeptide linker consists of a linear chain of amino acids wherein the 20 naturally occurring amino acids are the monomeric building blocks which are connected by peptide bonds. The chain has a length of from 1 to 15 amino acid residues. The polypeptide linker may contain repetitive amino acid sequences or sequences of naturally occurring polypeptides. The polypeptide linker has the function to ensure
10 that the antibody domains of the bispecific contorsbody can perform their biological activity by allowing the domains to fold correctly and to be presented properly. Preferably the polypeptide linker is a "synthetic peptidic linker" that is designated to be rich in glycine and/or serine residues. These residues are arranged e.g. in small repetitive units of up to five amino acids.

15 Linker L1 and L2 are preferably Glycine-serine linkers; the serine residue is bringing some polarity in the chain to provide solubility to the linker. As described in WO2019233842, transition between linker segment and fused protein fragment should preferably not involve a GS motif because there is the potential of a post-translational modification, i.e. O-glycation. The contorsbodies described in this
20 application are then constituted of a terminal glycine. Variations in Length / composition has been tested. Any combination of L1 and L2 can be considered. Repetitive glycines are limited to a maximum of 4 consecutive glycines. If the C-terminal segment of the domain to be fused to another one via a linker is made of e.g. of one or two glycines (e.g if C-terminus of the CH3 domains ends with a glycine
25 or is modiefied to end with two glycines) then these one or two glycines have to have to takeninnto account for the limit of a maximum of 4 consecutive glycines. At the amino- and/or carboxy-terminal ends of the multimeric unit up to six additional arbitrary, naturally occurring amino acids may be added. Exemplary linkers with a length of 10 amino acids are e.g. selected from the group: GSGGSGGSGG (SEQ ID
30 NO: 183), GSGGGSGGGG (SEQ ID NO: 184), GSGGGSGGGG (SEQ ID NO: 185); GSGGGSGGGG (SEQ ID NO: 186), GSGGGSGGGG (SEQ ID NO: 187), GSGGGSGGGG (SEQ ID NO: 188), GSGGGSGGGG (SEQ ID NO: 189), GSGGGSGGGG (SEQ ID NO: 190), GSGGGSGGGG (SEQ ID NO: 191), preferably GSGGGSGGGG (SEQ ID NO: 188). Analogously further linkers having
35 a length of 5 to 9 or a length of 11 to 15 amino acids can be constructed.

Fc domains and modifications

In particular embodiments, the bispecific antibody of the invention comprises an Fc domain composed of a first and a second subunit. It is understood, that the features of the Fc domain described herein in relation to the bispecific antibody can equally apply to an Fc domain comprised in an antibody of the invention.

The Fc domain of the bispecific antibody consists of a pair of polypeptide chains comprising heavy chain domains of an immunoglobulin molecule. For example, the Fc domain of an immunoglobulin G (IgG) molecule is a dimer, each subunit of which comprises the CH2 and CH3 IgG heavy chain constant domains. The two subunits of the Fc domain are capable of stable association with each other. In one embodiment, the bispecific antibody of the invention comprises not more than one Fc domain.

In one embodiment, the Fc domain of the bispecific antibody is an IgG Fc domain. In a particular embodiment, the Fc domain is an IgG₁ Fc domain. In another embodiment the Fc domain is an IgG₄ Fc domain. In a more specific embodiment, the Fc domain is an IgG₄ Fc domain comprising an amino acid substitution at position S228 (Kabat EU numbering), particularly the amino acid substitution S228P. This amino acid substitution reduces *in vivo* Fab arm exchange of IgG₄ antibodies (see Stubenrauch et al., Drug Metabolism and Disposition 38, 84-91 (2010)). In a further particular embodiment, the Fc domain is a human Fc domain. In an even more particular embodiment, the Fc domain is a human IgG₁ Fc domain.

The Fc domains of IgG isotype are characterized by various properties based e.g. on their interaction with the Fc gamma Receptors or with the neonatal Fc receptor (FcRn) (see e.g. see Vidarsson et al.; Front Immunol 5 (2014) Article 520, 1-17).

Fc domain modifications promoting heterodimerization

Bispecific antibodies according to the invention comprise different antigen binding moieties, which may be fused to one or the other of the two subunits of the Fc domain, thus the two subunits of the Fc domain are typically comprised in two non-identical polypeptide chains. Recombinant co-expression of these polypeptides and subsequent dimerization leads to several possible combinations of the two polypeptides. To improve the yield and purity of bispecific antibodies in recombinant production, it will thus be advantageous to introduce in the Fc domain of the

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bispecific antibody a modification promoting the association of the desired polypeptides.

Accordingly, in particular embodiments, the Fc domain of the bispecific antibody according to the invention comprises a modification promoting the association of the first and the second subunit of the Fc domain. The site of most extensive protein-protein interaction between the two subunits of a human IgG Fc domain is in the CH3 domain of the Fc domain. Thus, in one embodiment said modification is in the CH3 domain of the Fc domain.

There exist several approaches for modifications in the CH3 domain of the Fc domain in order to enforce heterodimerization, which are well described e.g. in WO 96/27011, WO 98/050431, EP 1870459, WO 2007/110205, WO 2007/147901, WO 2009/089004, WO 2010/129304, WO 2011/90754, WO 2011/143545, WO 2012058768, WO 2013157954, WO 2013096291. Typically, in all such approaches the CH3 domain of the first subunit of the Fc domain and the CH3 domain of the second subunit of the Fc domain are both engineered in a complementary manner so that each CH3 domain (or the heavy chain comprising it) can no longer homodimerize with itself but is forced to heterodimerize with the complementarily engineered other CH3 domain (so that the first and second CH3 domain heterodimerize and no homodimers between the two first or the two second CH3 domains are formed). These different approaches for improved heavy chain heterodimerization are contemplated as different alternatives in combination with the heavy-light chain modifications (e.g. VH and VL exchange/replacement in one binding arm and the introduction of substitutions of charged amino acids with opposite charges in the CH1/CL interface) in the bispecific antibody which reduce heavy/light chain mispairing and Bence Jones-type side products.

In a specific embodiment said modification promoting the association of the first and the second subunit of the Fc domain is a so-called “knob-into-hole” modification, comprising a “knob” modification in one of the two subunits of the Fc domain and a “hole” modification in the other one of the two subunits of the Fc domain.

The knob-into-hole technology is described e.g. in US 5,731,168; US 7,695,936; Ridgway et al., Prot Eng 9, 617-621 (1996) and Carter, J Immunol Meth 248, 7-15 (2001). Generally, the method involves introducing a protuberance (“knob”) at the interface of a first polypeptide and a corresponding cavity (“hole”) in the interface of a second polypeptide, such that the protuberance can be positioned in the cavity

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so as to promote heterodimer formation and hinder homodimer formation. Protuberances are constructed by replacing small amino acid side chains from the interface of the first polypeptide with larger side chains (e.g. tyrosine or tryptophan). Compensatory cavities of identical or similar size to the protuberances are created in the interface of the second polypeptide by replacing large amino acid side chains with smaller ones (e.g. alanine or threonine).

Accordingly, in a particular embodiment, in the CH3 domain of the first subunit of the Fc domain of the bispecific antibody an amino acid residue is replaced with an amino acid residue having a larger side chain volume, thereby generating a protuberance within the CH3 domain of the first subunit which is positionable in a cavity within the CH3 domain of the second subunit, and in the CH3 domain of the second subunit of the Fc domain an amino acid residue is replaced with an amino acid residue having a smaller side chain volume, thereby generating a cavity within the CH3 domain of the second subunit within which the protuberance within the CH3 domain of the first subunit is positionable.

Preferably said amino acid residue having a larger side chain volume is selected from the group consisting of arginine (R), phenylalanine (F), tyrosine (Y), and tryptophan (W).

Preferably said amino acid residue having a smaller side chain volume is selected from the group consisting of alanine (A), serine (S), threonine (T), and valine (V).

The protuberance and cavity can be made by altering the nucleic acid encoding the polypeptides, e.g. by site-specific mutagenesis, or by peptide synthesis.

In a specific embodiment, in (the CH3 domain of) the first subunit of the Fc domain (the “knobs” subunit) the threonine residue at position 366 is replaced with a tryptophan residue (T366W), and in (the CH3 domain of) the second subunit of the Fc domain (the “hole” subunit) the tyrosine residue at position 407 is replaced with a valine residue (Y407V). In one embodiment, in the second subunit of the Fc domain additionally the threonine residue at position 366 is replaced with a serine residue (T366S) and the leucine residue at position 368 is replaced with an alanine residue (L368A) (numberings according to Kabat EU index).

In yet a further embodiment, in the first subunit of the Fc domain additionally the serine residue at position 354 is replaced with a cysteine residue (S354C) or the glutamic acid residue at position 356 is replaced with a cysteine residue (E356C)

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(particularly the serine residue at position 354 is replaced with a cysteine residue), and in the second subunit of the Fc domain additionally the tyrosine residue at position 349 is replaced by a cysteine residue (Y349C) (numberings according to Kabat EU index). Introduction of these two cysteine residues results in formation of a disulfide bridge between the two subunits of the Fc domain, further stabilizing the dimer (Carter, J Immunol Methods 248, 7-15 (2001)).

In a particular embodiment, the first subunit of the Fc domain comprises the amino acid substitutions S354C and T366W, and the second subunit of the Fc domain comprises the amino acid substitutions Y349C, T366S, L368A and Y407V (numbering according to Kabat EU index).

In a particular embodiment the antigen binding moiety that binds to the second antigen is fused (optionally via the first antigen binding moiety, which binds to CCL2, and/or a peptide linker) to the first subunit of the Fc domain (comprising the “knob” modification). Without wishing to be bound by theory, fusion of the antigen binding moiety that binds a second antigen, such as an activating T cell antigen, to the knob-containing subunit of the Fc domain will (further) minimize the generation of antibodies comprising two antigen binding moieties that bind to an activating T cell antigen (steric clash of two knob-containing polypeptides).

Other techniques of CH3-modification for enforcing the heterodimerization are contemplated as alternatives according to the invention and are described e.g. in WO 96/27011, WO 98/050431, EP 1870459, WO 2007/110205, WO 2007/147901, WO 2009/089004, WO 2010/129304, WO 2011/90754, WO 2011/143545, WO 2012/058768, WO 2013/157954, WO 2013/096291.

In one embodiment, the heterodimerization approach described in EP 1870459, is used alternatively. This approach is based on the introduction of charged amino acids with opposite charges at specific amino acid positions in the CH3/CH3 domain interface between the two subunits of the Fc domain. One preferred embodiment for the bispecific antibody of the invention are amino acid mutations R409D; K370E in one of the two CH3 domains (of the Fc domain) and amino acid mutations D399K; E357K in the other one of the CH3 domains of the Fc domain (numbering according to Kabat EU index).

In another embodiment, the bispecific antibody of the invention comprises amino acid mutation T366W in the CH3 domain of the first subunit of the Fc domain and amino acid mutations T366S, L368A, Y407V in the CH3 domain of the second

subunit of the Fc domain, and additionally amino acid mutations R409D; K370E in the CH3 domain of the first subunit of the Fc domain and amino acid mutations D399K; E357K in the CH3 domain of the second subunit of the Fc domain (numberings according to Kabat EU index).

5 In another embodiment, the bispecific antibody of the invention comprises amino acid mutations S354C, T366W in the CH3 domain of the first subunit of the Fc domain and amino acid mutations Y349C, T366S, L368A, Y407V in the CH3 domain of the second subunit of the Fc domain, or said bispecific antibody comprises amino acid mutations Y349C, T366W in the CH3 domain of the first subunit of the
10 Fc domain and amino acid mutations S354C, T366S, L368A, Y407V in the CH3 domains of the second subunit of the Fc domain and additionally amino acid mutations R409D; K370E in the CH3 domain of the first subunit of the Fc domain and amino acid mutations D399K; E357K in the CH3 domain of the second subunit of the Fc domain (all numberings according to Kabat EU index).

15 In one embodiment, the heterodimerization approach described in WO 2013/157953 is used alternatively. In one embodiment, a first CH3 domain comprises amino acid mutation T366K and a second CH3 domain comprises amino acid mutation L351D (numberings according to Kabat EU index). In a further embodiment, the first CH3 domain comprises further amino acid mutation L351K. In a further embodiment, the
20 second CH3 domain comprises further an amino acid mutation selected from Y349E, Y349D and L368E (preferably L368E) (numberings according to Kabat EU index).

In one embodiment, the heterodimerization approach described in WO 2012/058768 is used alternatively. In one embodiment a first CH3 domain comprises amino acid mutations L351Y, Y407A and a second CH3 domain comprises amino acid
25 mutations T366A, K409F. In a further embodiment the second CH3 domain comprises a further amino acid mutation at position T411, D399, S400, F405, N390, or K392, e.g. selected from a) T411N, T411R, T411Q, T411K, T411D, T411E or T411W, b) D399R, D399W, D399Y or D399K, c) S400E, S400D, S400R, or S400K, d) F405I, F405M, F405T, F405S, F405V or F405W, e) N390R, N390K or N390D,
30 f) K392V, K392M, K392R, K392L, K392F or K392E (numberings according to Kabat EU index). In a further embodiment a first CH3 domain comprises amino acid mutations L351Y, Y407A and a second CH3 domain comprises amino acid mutations T366V, K409F. In a further embodiment, a first CH3 domain comprises amino acid mutation Y407A and a second CH3 domain comprises amino acid
35 mutations T366A, K409F. In a further embodiment, the second CH3 domain further

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comprises amino acid mutations K392E, T411E, D399R and S400R (numberings according to Kabat EU index).

5 In one embodiment, the heterodimerization approach described in WO 2011/143545 is used alternatively, e.g. with the amino acid modification at a position selected from the group consisting of 368 and 409 (numbering according to Kabat EU index).

10 In one embodiment, the heterodimerization approach described in WO 2011/090762, which also uses the knobs-into-holes technology described above, is used alternatively. In one embodiment a first CH3 domain comprises amino acid mutation T366W and a second CH3 domain comprises amino acid mutation Y407A. In one embodiment, a first CH3 domain comprises amino acid mutation T366Y and a second CH3 domain comprises amino acid mutation Y407T (numberings according to Kabat EU index).

In one embodiment, the bispecific antibody or its Fc domain is of IgG₂ subclass and the heterodimerization approach described in WO 2010/129304 is used alternatively.

15 In an alternative embodiment, a modification promoting association of the first and the second subunit of the Fc domain comprises a modification mediating electrostatic steering effects, e.g. as described in PCT publication WO 2009/089004. Generally, this method involves replacement of one or more amino acid residues at the interface of the two Fc domain subunits by charged amino acid residues so that homodimer formation becomes electrostatically unfavorable but heterodimerization electrostatically favorable. In one such embodiment, a first CH3 domain comprises amino acid substitution of K392 or N392 with a negatively charged amino acid (e.g. glutamic acid (E), or aspartic acid (D), preferably K392D or N392D) and a second CH3 domain comprises amino acid substitution of D399, E356, D356, or E357 with a positively charged amino acid (e.g. lysine (K) or arginine (R), preferably D399K, E356K, D356K, or E357K, and more preferably D399K and E356K). In a further embodiment, the first CH3 domain further comprises amino acid substitution of K409 or R409 with a negatively charged amino acid (e.g. glutamic acid (E), or aspartic acid (D), preferably K409D or R409D). In a further embodiment the first CH3 domain further or alternatively comprises amino acid substitution of K439 and/or K370 with a negatively charged amino acid (e.g. glutamic acid (E), or aspartic acid (D)) (all numberings according to Kabat EU index).

In yet a further embodiment, the heterodimerization approach described in WO 2007/147901 is used alternatively. In one embodiment, a first CH3 domain

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comprises amino acid mutations K253E, D282K, and K322D and a second CH3 domain comprises amino acid mutations D239K, E240K, and K292D (numberings according to Kabat EU index).

5 In still another embodiment, the heterodimerization approach described in WO 2007/110205 can be used alternatively.

In one embodiment, the first subunit of the Fc domain comprises amino acid substitutions K392D and K409D, and the second subunit of the Fc domain comprises amino acid substitutions D356K and D399K (numbering according to Kabat EU index).

10 The term “wild type (WT) IgG or IgG1” as used herein for the bispecific anti-CCL2 antibodies refers to a bispecific antibody which comprises an IgG or IgG1 constant heavy chain which may comprise the above described modifications/mutations promoting heterodimerization but which does not comprise further Fc domain modifications/mutations increasing or reducing Fc receptor binding and/or effector
15 function as described below.

Fc domain modifications/mutations increasing or reducing Fc receptor binding and/or effector function:

Modification of the bispecific anti-CCL2 antibodies via sweeping technology

20 The bispecific anti-CCL2 antibodies were modified using the sweeping technology to enable the bispecific anti-CCL2 antibodies to abrogate free CCL2 over longer time periods to enable sustained a biological effect like anti-cancer efficacy in vivo.

The Sweeping concept is described e.g. in Igawa et al, Immunological Reviews 270 (2016) 132–151, WO2012/122011, WO2016/098357, and WO2013/081143 which are incorporated herein by reference.

25 The present invention provides methods for facilitating antibody mediated antigen uptake into cells, by reducing the antigen-binding activity (binding ability) in the acidic pH range of the above-described antibody to less than its antigen-binding activity in the neutral pH range; and this facilitates antigen uptake into cells. The present invention also provides methods for facilitating antibody-mediated antigen
30 uptake into cells, which are based on altering at least one amino acid in the antigen-binding domain of the above-described antibody which facilitates antigen uptake into cells. The present invention also provides methods for facilitating antibody-mediated

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antigen uptake into cells, which are based on substituting histidine for at least one amino acid or inserting at least one histidine into the antigen-binding domain of the above-described antibody which facilitates antigen uptake into cells.

5 Herein, "antigen uptake into cells" mediated by an antibody means that antigens are taken up into cells by endocytosis. Meanwhile, herein, "facilitate the uptake into cells" means that the rate of intracellular uptake of antibody bound to an antigen in plasma is enhanced, and/or the quantity of recycling of uptaken antigen to the plasma is reduced. This means that the rate of uptake into cells is facilitated as compared to the antibody before increasing the human FcRn-binding activity of the antibody in
10 the neutral pH range, or before increasing the human FcRn-binding activity and reducing the antigen-binding activity (binding ability) of the antibody in the acidic pH range to less than its antigen-binding activity in the neutral pH range. The rate is improved preferably as compared to intact human IgG, and more preferably as compared to intact human IgG. Thus, in the present invention, whether antigen uptake into cells is facilitated by an antibody can be assessed based on an increase
15 in the rate of antigen uptake into cells. The rate of antigen uptake into cells can be calculated, for example, by monitoring over time reduction in the antigen concentration in the culture medium containing human FcRn-expressing cells after adding the antigen and antibody to the medium, or monitoring over time the amount of antigen uptake into human FcRn-expressing cells. Using methods of the present invention for facilitating the rate of antibody-mediated antigen uptake into cells, for example, the rate of antigen elimination from the plasma can be enhanced by administering antibodies. Thus, whether antibody-mediated antigen uptake into cells is facilitated can also be assessed, for example, by testing whether the rate of antigen
20 elimination from the plasma is accelerated or whether the total antigen concentration in plasma is reduced by administering an antibody.

Herein, "total antigen concentration in plasma" means the sum of antibody bound antigen and non-bound antigen concentration, or "free antigen concentration in plasma" which is antibody non-bound antigen concentration. Various methods to
30 measure "total antigen concentration in plasma" or "free antigen concentration in plasma" is well known in the art as described hereinafter.

"Intact human IgG" (or "wild type (WT) human IgG) as used herein is meant an unmodified (except with respect to the potential modifications for heterodimerization above) human IgG and is not limited to a specific class of IgG .
35 This means that human IgG1, IgG2, IgG3 or IgG4 can be used as "intact human IgG"

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as long as it can bind to the human FcRn in the acidic pH range. Preferably, "intact human IgG" can be human IgG1.

5 The present invention also provides methods for increasing the number of antigens to which a single antibody can bind. More specifically, the present invention provides methods for increasing the number of antigens to which a single antibody having human FcRn-binding activity in the acidic pH range can bind, by increasing the human FcRn-binding activity of the antibody in the neutral pH range. The present invention also provides methods for increasing the number of antigens to which a single antibody having human FcRn-binding activity in the acidic pH range can bind, 10 by altering at least one amino acid in the human FcRn-binding domain of the antibody.

The present invention provides methods for facilitating antibody-mediated antigen uptake into cells. More specifically, the present invention provides methods for facilitating the antigen uptake into cells by an antibody having human FcRn-binding activity in the acidic pH range, which are based on increasing the human FcRn-binding activity of the antibody in the neutral pH range. The present invention also provides methods for improving antigen uptake into cells by an antibody having human FcRn-binding activity in the acidic pH range, which are based on altering at least one amino acid in the human FcRn-binding domain of the antibody. 15

20 The present invention also provides methods for facilitating antigen uptake into cells by an antibody having human FcRn-binding activity in the acidic pH range, which are based on using a human FcRn-binding domain comprising an amino acid sequence with a substitution of a different amino acid for at least one amino acid selected from those of positions 237, 238, 239, 248, 250, 252, 254, 255, 256, 257, 258, 265, 270, 286, 289, 297, 298, 303, 305, 307, 308, 309, 311, 312, 314, 315, 317, 25 325, 332, 334, 360, 376, 380, 382, 384, 385, 386, 387, 389, 424, 428, 433, 434, and 436 (EU numbering) in the parent IgG Fc domain of the human FcRn-binding domain comprising the Fc domain of parent IgG.

30 The present invention also provides methods for facilitating antibody-mediated antigen uptake into cells, by reducing the antigen-binding activity (binding ability) in the acidic pH range of the above-described antibody to less than its antigen-binding activity in the neutral pH range; and this facilitates antigen uptake into cells. The present invention also provides methods for facilitating antibody-mediated antigen uptake into cells, which are based on altering at least one amino acid in the

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antigen-binding domain of the above-described antibody which facilitates antigen uptake into cells. The present invention also provides methods for facilitating antibody-mediated antigen uptake into cells, which are based on substituting histidine for at least one amino acid or inserting at least one histidine into the antigen-binding domain of the above-described antibody which facilitates antigen uptake into cells.

Herein, "antigen uptake into cells" mediated by an antibody means that antigens are taken up into cells by endocytosis. Meanwhile, herein, "facilitate the uptake into cells" means that the rate of intracellular uptake of antibody bound to an antigen in plasma is enhanced, and/or the quantity of recycling of uptaken antigen to the plasma is reduced. This means that the rate of uptake into cells is facilitated as compared to the antibody before increasing the human FcRn-binding activity of the antibody in the neutral pH range, or before increasing the human FcRn-binding activity and reducing the antigen-binding activity (binding ability) of the antibody in the acidic pH range to less than its antigen-binding activity in the neutral pH range. The rate is improved preferably as compared to intact human IgG, and more preferably as compared to intact human IgG. Thus, in the present invention, whether antigen uptake into cells is facilitated by an antibody can be assessed based on an increase in the rate of antigen uptake into cells. The rate of antigen uptake into cells can be calculated, for example, by monitoring over time reduction in the antigen concentration in the culture medium containing human FcRn-expressing cells after adding the antigen and antibody to the medium, or monitoring over time the amount of antigen uptake into human FcRn-expressing cells. Using methods of the present invention for facilitating the rate of antibody-mediated antigen uptake into cells, for example, the rate of antigen elimination from the plasma can be enhanced by administering antibodies. Thus, whether antibody-mediated antigen uptake into cells is facilitated can also be assessed, for example, by testing whether the rate of antigen elimination from the plasma is accelerated or whether the total antigen concentration in plasma is reduced by administering an antibody.

Herein, "total antigen concentration in plasma" means the sum of antibody bound antigen and non-bound antigen concentration, or "free antigen concentration in plasma" which is antibody non-bound antigen concentration. Various methods to measure "total antigen concentration in plasma" or "free antigen concentration in plasma" is well known in the art as described hereinafter.

"Intact human IgG" (or "wild type IgG") as used herein is meant an unmodified human IgG ((except with respect to the potential modifications for heterodimerization above) and is not limited to a specific class of IgG. This means that human IgG1, IgG2, IgG3 or IgG4 can be used as "intact human IgG" as long as it can bind to the human FcRn in the acidic pH range. Preferably, "intact human IgG" can be human IgG1.

"Parent IgG" as used herein means an unmodified IgG that is subsequently modified to generate a variant as long as a modified variant of parent IgG can bind to human FcRn in the acidic pH range (therefore, parent IgG does not necessarily requires binding activity to human FcRn in the acidic condition). The parent IgG may be a naturally occurring IgG, or a variant or engineered version of a naturally occurring IgG. Parent IgG may refer to the polypeptide itself, compositions that comprise the parent IgG, or the amino acid sequence that encodes it. It should be noted that "parent IgG" includes known commercial, recombinantly produced IgG as outlined below. The origin of "parent IgG" is not limited and may be obtained from any organisms of non-human animals or human. Preferably, organism is selected from mouse, rat, guinea pig, hamster, gerbil, cat, rabbit, dog, goat, sheep, cow, horse, camel, and non-human primate. In another embodiment, "parent IgG" can also be obtained from cynomolgus, marmoset, rhesus, chimpanzee or human. Preferably, "parent IgG" is obtained from human IgG1 but not limited to a specific class of IgG. This means that human IgG1, IgG2, IgG3, or IgG4 can be appropriately used as "parent IgG". In the similar manner, any class or subclass of IgGs from any organisms hereinbefore can be preferably used as "parent IgG". Example of variant or engineered version of a naturally occurring IgG is described in Curr Opin Biotechnol. 2009 Dec; 20(6): 685-91, Curr Opin Immunol. 2008 Aug; 20(4): 460-70, Protein Eng Des Sel. 2010 Apr; 23(4): 195-202, WO 2009/086320, WO 2008/092117, WO 2007/041635 and WO 2006/105338, but not limited thereto.

The present invention also provides methods for increasing the ability to eliminate plasma antigen by administering antibodies. In the present invention, "methods for increasing the ability to eliminate plasma antigen" is synonymous to "methods for augmenting the ability of an antibody to eliminate antigen from plasma". More specifically, the present invention provides methods for increasing the ability to eliminate plasma antigen by an antibody having human FcRn-binding activity in the acidic pH range, by increasing the human FcRn-binding activity of the antibody in the neutral pH range. The present invention also provides methods for increasing the ability to eliminate plasma antigen by an antibody having human FcRn-binding

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activity in the acidic pH range, which are based on altering at least one amino acid in the human FcRn-binding domain of the antibody.

5 The present invention also provides methods for increasing the ability to eliminate plasma antigen by an antibody having human FcRn-binding activity in the acidic pH range, by using a human FcRn-binding domain comprising an amino acid sequence with a substitution of at least one amino acid selected from those of positions 237, 238, 239, 248, 250, 252, 254, 255, 256, 257, 258, 265, 270, 286, 289, 297, 298, 303, 305, 307, 308, 309, 311, 312, 314, 315, 317, 325, 332, 334, 360, 376, 380, 382, 384, 385, 386, 387, 389, 424, 428, 433, 434, and 436 (EU numbering) in the parent IgG
10 Fc domain of the human FcRn-binding domain comprising the Fc domain of parent IgG with a different amino acid.

The present invention also provides methods for increasing the ability to eliminate plasma antigen by an antibody, by reducing the antigen-binding activity in the acidic pH range of the above-described antibody with improved ability to eliminate plasma
15 antigen as compared to the antigen-binding activity in the neutral pH range. The present invention also provides methods for increasing the ability to eliminate plasma antigen by an antibody, by altering at least one amino acid in the antigen-binding domain of the above-described antibody with improved ability to eliminate plasma antigen. The present invention also provides methods for increasing the
20 ability to eliminate plasma antigen by administering an antibody, by substituting histidine for at least one amino acid or inserting at least one histidine into the antigen-binding domain of the above-described antibody with improved ability to eliminate plasma antigen.

Herein, the "ability to eliminate plasma antigen" means the ability to eliminate
25 antigen from the plasma when antibodies are administered or secreted in vivo. Thus, "increase in the ability of antibody to eliminate plasma antigen" herein means that the rate of antigen elimination from the plasma is accelerated upon administration of the antibody as compared to before increasing the human FcRn-binding activity of the antibody in the neutral pH range or before increasing the human FcRn-binding
30 activity and simultaneously reducing its antigen-binding activity in the acidic pH range to less than that in the neutral pH range. Increase in the activity of an antibody to eliminate antigen from the plasma can be assessed, for example, by administering a soluble antigen and an antibody in vivo, and measuring the concentration of the soluble antigen in plasma after administration. When the concentration of soluble
35 antigen in plasma after administration of the soluble antigen and antibody is reduced

by increasing the human FcRn-binding activity of the antibody in the neutral pH range, or by increasing its human FcRn-binding activity and simultaneously reducing its antigen-binding activity in the acidic pH range to less than that in the neutral pH range, the ability of antibody to eliminate plasma antigen can be judged to be increased. A form of soluble antigen can be antibody bound antigen or antibody non-bound antigen whose concentration can be determined as "antibody bound antigen concentration in plasma" and "antibody non-bound antigen concentration in plasma" respectively (The latter is synonymous to "free antigen concentration in plasma". Since "total antigen concentration in plasma" means the sum of antibody bound antigen and non-bound antigen concentration, or "free antigen concentration in plasma" which is antibody non-bound antigen concentration, the concentration of soluble antigen can be determined as "total antigen concentration in plasma". Various methods for measuring "total antigen concentration in plasma" or "free antigen concentration in plasma" are well known in the art as described hereinafter.

The present invention also provides methods for improving the pharmacokinetics of antibodies. More specifically, the present invention provides methods for improving the pharmacokinetics of the antibody having human FcRn-binding activity in the acidic pH range by increasing the human FcRn-binding activity of the antibody in the neutral pH range. Furthermore, the present invention provides methods for improving the pharmacokinetics of an antibody having human FcRn-binding activity in the acidic pH range by altering at least one amino acid in the human FcRn-binding domain of the antibody.

The present invention also provides methods for improving the pharmacokinetics of an antibody having human FcRn-binding activity in the acidic pH range by using a human FcRn-binding domain comprising an amino acid sequence with a substitution of different amino acid for at least one amino acid selected from those of positions 237, 238, 239, 248, 250, 252, 254, 255, 256, 257, 258, 265, 270, 286, 289, 297, 298, 303, 305, 307, 308, 309, 311, 312, 314, 315, 317, 325, 332, 334, 360, 376, 380, 382, 384, 385, 386, 387, 389, 424, 428, 433, 434, and 436 (EU numbering) in the parent IgG Fc domain of the human FcRn-binding domain comprising the Fc domain of IgG.

The plasma concentration of free antigen not bound to the antibody or the ratio of free antigen concentration to the total concentration can be determined by methods known to those skilled in the art, for example, by the method described in Pharm Res. 2006 Jan; 23 (1): 95-103. Alternatively, when an antigen exhibits a particular

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function in vivo, whether the antigen is bound to an antibody that neutralizes the antigen function (antagonistic molecule) can be assessed by testing whether the antigen function is neutralized. Whether the antigen function is neutralized can be assessed by assaying an in vivo marker that reflects the antigen function. Whether the antigen is bound to an antibody that activates the antigen function (agonistic molecule) can be assessed by assaying an in vivo marker that reflects the antigen function.

Determination of the plasma concentration of free antigen and ratio of the amount of free antigen in plasma to the amount of total antigen in plasma, in vivo marker assay, and such measurements are not particularly limited; however, the assays are preferably carried out after a certain period of time has passed after administration of the antibody. In the present invention, the period after administration of the antibody is not particularly limited; those skilled in the art can determine the appropriate period depending on the properties and the like of the administered antibody. Such periods include, for example, one day after administration of the antibody, three days after administration of the antibody, seven days after administration of the antibody, 14 days after administration of the antibody, and 28 days after administration of the antibody. Herein, "plasma antigen concentration" means either "total antigen concentration in plasma" which is the sum of antibody bound antigen and non-bound antigen concentration or "free antigen concentration in plasma" which is antibody non-bound antigen concentration.

Total antigen concentration in plasma can be lowered by administration of antibody of the present invention by 2-fold, 5-fold, 10-fold, 20-fold, 50-fold, 100-fold, 200-fold, 500-fold, 1,000-fold, or even higher compared to the administration of a reference antibody comprising the intact human IgG Fc domain as a human FcRn-binding domain or compared to when antigen-binding domain molecule of the present invention is not administered.

In another aspect, the invention provides bispecific anti-CCL2 antibodies that exhibit pH-dependent binding characteristics. As used herein, the expression "pH-dependent binding" means that the antibody exhibits "reduced binding to CCL2 at acidic pH as compared to its binding at neutral pH" (for purposes of the present disclosure, both expressions may be used interchangeably). For example, antibodies "with pH-dependent binding characteristics" include antibodies that bind to CCL2 with higher affinity at neutral pH than at acidic pH. In certain embodiments, the bispecific antibodies of the present invention bind to CCL2 with at least 2, 3, 5, 10, 15, 20, 25,

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30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 200, 400, 1000, 10000, or more times higher affinity at neutral pH than at acidic pH. In some embodiments, the antibodies bind to CCL2 with higher affinity at pH7.4 than at pH5.8. In further embodiments, the antibodies bind to CCL2 with at least 2, 3, 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 200, 400, 1000, 10000, or more times higher affinity at pH7.4 than at pH5.8.

When an antigen is a soluble protein, the binding of an antibody to the antigen can result in an extended half-life of the antigen in plasma (i.e., reduced clearance of the antigen from plasma), since the antibody can have a longer half-life in plasma than the antigen itself and may serve as a carrier for the antigen. This is due to the recycling of the antigen-antibody complex by FcRn through the endosomal pathway in cell (Roopenian, Nat. Rev. Immunol. 7(9): 715-725 (2007)). However, an antibody with pH-dependent binding characteristics, which binds to its antigen in neutral extracellular environment while releasing the antigen into acidic endosomal compartments following its entry into cells, is expected to have superior properties in terms of antigen neutralization and clearance relative to its counterpart that binds in a pH-independent manner (Igawa et al., Nature Biotechnol. 28(11):1203-1207 (2010); Devanaboyina et al., mAbs 5(6):851-859 (2013); WO 2009/125825).

The "affinity" of an antibody for CCL2, for purposes of the present disclosure, is expressed in terms of the KD of the antibody. The KD of an antibody refers to the equilibrium dissociation constant of an antibody-antigen interaction. The greater the KD value is for an antibody binding to its antigen, the weaker its binding affinity is for that particular antigen. Accordingly, as used herein, the expression "higher affinity at neutral pH than at acidic pH" (or the equivalent expression "pH-dependent binding") means that the KD of the antibody binding to CCL2 at acidic pH is greater than the KD of the antibody binding to CCL2 at neutral pH. For example, in the context of the present invention, an antibody is considered to bind to CCL2 with higher affinity at neutral pH than at acidic pH if the KD of the antibody binding to CCL2 at acidic pH is at least 2 times greater than the KD of the antibody binding to CCL2 at neutral pH. Thus, the present invention includes antibodies that bind to CCL2 at acidic pH with a KD that is at least 2, 3, 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 200, 400, 1000, 10000, or more times greater than the KD of the antibody binding to CCL2 at neutral pH. In another embodiment, the KD value of the antibody at neutral pH can be 10⁻⁷ M, 10⁻⁸ M, 10⁻⁹ M, 10⁻¹⁰ M, 10⁻¹¹ M, 10⁻¹² M, or less. In another embodiment, the KD value of the antibody at acidic pH can be 10⁻⁹ M, 10⁻⁸ M, 10⁻⁷ M, 10⁻⁶ M, or greater.

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In further embodiments an antibody is considered to bind to with a higher affinity at neutral pH than at acidic pH if the K_D of the antibody binding to CCL2 at pH5.8 is at least 2 times greater than the K_D of the antibody binding to CCL2 at pH7.4. In some embodiments the provided antibodies bind to CCL2 at pH5.8 with a K_D that is at least 3, 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 200, 400, 1000, 10000, or more times greater than the K_D of the antibody binding to CCL2 at pH7.4. In another embodiment, the K_D value of the antibody at pH7.4 can be 10-7 M, 10-8 M, 10-9 M, 10-10 M, 10-11 M, 10-12 M, or less. In another embodiment, the K_D value of the antibody at pH5.8 can be 10-9 M, 10-8 M, 10-7 M, 10-6 M, or greater.

The binding properties of an antibody for a particular antigen may also be expressed in terms of the k_d of the antibody. The k_d of an antibody refers to the dissociation rate constant of the antibody with respect to a particular antigen and is expressed in terms of reciprocal seconds (i.e., sec-1). An increase in k_d value signifies weaker binding of an antibody to its antigen. The present invention therefore includes antibodies that bind to CCL2 with a higher k_d value at acidic pH than at neutral pH. The present invention includes antibodies that bind to CCL2 at acidic pH with a k_d that is at least 2, 3, 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 200, 400, 1000, 10000, or more times greater than the k_d of the antibody binding to CCL2 at neutral pH. In another embodiment, the k_d value of the antibody at neutral pH can be 10-2 1/s, 10-3 1/s, 10-4 1/s, 10-5 1/s, 10-6 1/s, or less. In another embodiment, the k_d value of the antibody at acidic pH can be 10-3 1/s, 10-2 1/s, 10-1 1/s, or greater. The invention also includes antibodies that bind to CCL2 with a higher k_d value at pH5.8 than at pH7.4. The invention includes antibodies that bind to CCL2 at pH5.8 with a k_d that is at least 3, 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 200, 400, 1000, 10000, or more times greater than the k_d of the antibody binding to CCL2 at pH7.4. In another embodiment, the k_d value of the antibody at pH7.4 can be 10-2 1/s, 10-3 1/s, 10-4 1/s, 10-5 1/s, 10-6 1/s, or less. In another embodiment, the k_d value of the antibody at pH5.8 can be 10-3 1/s, 10-2 1/s, 10-1 1/s, or greater.

In certain instances, a "reduced binding to CCL2 at acidic pH as compared to its binding at neutral pH" is expressed in terms of the ratio of the K_D value of the antibody binding to CCL2 at acidic pH to the K_D value of the antibody binding to CCL2 at neutral pH (or vice versa). For example, an antibody may be regarded as exhibiting "reduced binding to CCL2 at acidic pH as compared to its binding at neutral pH", for purposes of the present invention, if the antibody exhibits an

acidic/neutral KD ratio of 2 or greater. In certain embodiments, the pH5.8/pH7.4 KD ratio for an anti-CCL2 antibody of the present invention is 2 or greater. In certain exemplary embodiments, the acidic/neutral KD ratio for an antibody of the present invention can be 2, 3, 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 200, 400, 1000, 10000, or greater. In another embodiment, the KD value of the antibody at neutral pH can be 10⁻⁷ M, 10⁻⁸ M, 10⁻⁹ M, 10⁻¹⁰ M, 10⁻¹¹ M, 10⁻¹² M, or less. In another embodiment, the KD value of the antibody at acidic pH can be 10⁻⁹ M, 10⁻⁸ M, 10⁻⁷ M, 10⁻⁶ M, or greater. In further instances an antibody may be regarded as exhibiting "reduced binding to CCL2 at acidic pH as compared to its binding at neutral pH", if the antibody exhibits an pH5.8/pH7.4 KD ratio of 2 or greater. In certain exemplary embodiments, the pH5.8/pH7.4 KD ratio for the antibody can be 3, 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 200, 400, 1000, 10000, or greater. In another embodiment, the KD value of the antibody at pH7.4 can be 10⁻⁷ M, 10⁻⁸ M, 10⁻⁹ M, 10⁻¹⁰ M, 10⁻¹¹ M, 10⁻¹² M, or less. In another embodiment, the KD value of the antibody at pH5.8 can be 10⁻⁹ M, 10⁻⁸ M, 10⁻⁷ M, 10⁻⁶ M, or greater.

In certain instances, a "reduced binding to CCL2 at acidic pH as compared to its binding at neutral pH" is expressed in terms of the ratio of the kd value of the antibody binding to CCL2 at acidic pH to the kd value of the antibody binding to CCL2 at neutral pH (or vice versa). For example, an antibody may be regarded as exhibiting "reduced binding to CCL2 at acidic pH as compared to its binding at neutral pH", for purposes of the present invention, if the antibody exhibits an acidic/neutral kd ratio of 2 or greater. In certain exemplary embodiments, the pH5.8/pH7.4 kd ratio for an antibody of the present invention is 2 or greater. In certain exemplary embodiments, the acidic/neutral kd ratio for an antibody of the present invention can be 2, 3, 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 200, 400, 1000, 10000, or greater. In another embodiment, the kd value of the antibody at neutral pH can be 10⁻² 1/s, 10⁻³ 1/s, 10⁻⁴ 1/s, 10⁻⁵ 1/s, 10⁻⁶ 1/s, or less. In another embodiment, the kd value of the antibody at acidic pH can be 10⁻³ 1/s, 10⁻² 1/s, 10⁻¹ 1/s, or greater. In certain exemplary embodiments, the pH5.8/pH7.4 kd ratio for an antibody of the present invention can be 2, 3, 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 200, 400, 1000, 10000, or greater. In another embodiment, the kd value of the antibody at pH7.4 can be 10⁻² 1/s, 10⁻³ 1/s, 10⁻⁴ 1/s, 10⁻⁵ 1/s, 10⁻⁶ 1/s, or less. In another embodiment, the kd value of the antibody at pH5.8 can be 10⁻³ 1/s, 10⁻² 1/s, 10⁻¹ 1/s, or greater.

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As used herein, the expression "acidic pH" means a pH of 4.0 to 6.5. The expression "acidic pH" includes pH values of any one of 4.0, 4.1, 4.2, 4.3, 4.4, 4.5, 4.6, 4.7, 4.8, 4.9, 5.0, 5.1, 5.2, 5.3, 5.4, 5.5, 5.6, 5.7, 5.8, 5.9, 6.0, 6.1, 6.2, 6.3, 6.4, and 6.5. In particular aspects, the "acidic pH" is 5.8.

5 As used herein, the expression "neutral pH" means a pH of 6.7 to about 10.0. The expression "neutral pH" includes pH values of any one of 6.7, 6.8, 6.9, 7.0, 7.1, 7.2, 7.3, 7.4, 7.5, 7.6, 7.7, 7.8, 7.9, 8.0, 8.1, 8.2, 8.3, 8.4, 8.5, 8.6, 8.7, 8.8, 8.9, 9.0, 9.1, 9.2, 9.3, 9.4, 9.5, 9.6, 9.7, 9.8, 9.9, and 10.0. In particular aspects, the "neutral pH" is 7.4.

10 KD values, and kd values, as expressed herein, may be determined using a surface plasmon resonance-based biosensor to characterize antibody-antigen interactions. KD values, and kd values can be determined at 25 degrees C or 37 degrees C.

In a further aspect, the invention provides a bispecific anti-CCL2 antibody that forms an immune complex (i.e. antigen-antibody complex) with CCL2. In certain
15 embodiments, two or more bispecific anti-CCL2 antibodies bind to two or more CCL2 molecules to form an immune complex. This is possible because CCL2 exists as a homodimer containing two CCL2 molecules while an antibody has two antigen-binding sites.

Generally speaking, when two or more antibodies form an immune complex with
20 two or more antigens, the resulting immune complex can strongly bind to Fc receptors existing on cell surfaces due to avidity effects through the Fc regions of the antibodies in the complex and can then be taken up into the cell with high efficiency. Thus, the above-mentioned anti-CCL2 antibody capable of forming an immune complex containing two or more anti-CCL2 antibodies and two or more CCL2
25 molecules can lead to a rapid clearance of CCL2 from plasma in a living body, via the strong binding to Fc receptors due to avidity effects.

Furthermore, an antibody with pH-dependent binding characteristics is thought to have superior properties in terms of antigen neutralization and clearance relative to its counterpart that binds in a pH-independent manner (Igawa et al., Nature Biotech.
30 28(11):1203-1207 (2010); Devanaboyina et al. mAbs 5(6):851-859 (2013); WO 2009/125825). Therefore, an antibody having both properties above, that is, an antibody which has pH-dependent binding characteristics and which forms an immune complex containing two or more antibodies with two or more antigens, is

expected to have even more superior properties for highly accelerated elimination of antigens from plasma (WO 2013/081143).

In one aspect, the invention provides polypeptides comprising variant Fc regions with enhanced FcγRIIb-binding activity comprising at least two amino acid alterations comprising: (a) one amino acid alteration at position 236, and (b) at least one amino acid alteration of at least one position selected from the group consisting of: 231, 232, 233, 234, 235, 237, 238, 239, 264, 266, 267, 268, 271, 295, 298, 325, 326, 327, 328, 330, 331, 332, 334, and 396, according to EU numbering.

In one aspect, the invention provides polypeptides comprising a variant Fc region with enhanced FcγRIIb-binding activity comprising an amino acid alteration at position 236 according to EU numbering.

In one aspect, the invention provides polypeptides comprising a variant Fc region with enhanced FcγRIIb-binding activity comprising at least two amino acid alterations comprising: (a) one amino acid alteration at position 236, and (b) at least one amino acid alteration of at least one position selected from the group consisting of: 231, 232, 235, 239, 268, 295, 298, 326, 330, and 396, according to EU numbering. In a further embodiment, the variant Fc region comprises an amino acid alteration of at least one position selected from the group consisting of: 231, 232, 235, 239, 268, 295, 298, 326, 330, and 396, according to EU numbering. In a further embodiment, the variant Fc region comprises an amino acid alteration of at least one position selected from the group consisting of: 268, 295, 326, and 330, according to EU numbering.

In another aspect, the invention provides polypeptides comprising variant Fc regions with enhanced FcγRIIb-binding activity comprising amino acid alterations of any one of the following (1)-(37): (1) positions 231, 236, 239, 268 and 330; (2) positions 231, 236, 239, 268, 295 and 330; (3) positions 231, 236, 268 and 330; (4) positions 231, 236, 268, 295 and 330; (5) positions 232, 236, 239, 268, 295 and 330; (6) positions 232, 236, 268, 295 and 330; (7) positions 232, 236, 268 and 330; (8) positions 235, 236, 268, 295, 326 and 330; (9) positions 235, 236, 268, 295 and 330; (10) positions 235, 236, 268 and 330; (11) positions 235, 236, 268, 330 and 396; (12) positions 235, 236, 268 and 396; (13) positions 236, 239, 268, 295, 298 and 330; (14) positions 236, 239, 268, 295, 326 and 330; (15) positions 236, 239, 268, 295 and 330; (16) positions 236, 239, 268, 298 and 330; (17) positions 236, 239, 268, 326 and 330; (18) positions 236, 239, 268 and 330; (19) positions 236, 239, 268, 330

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and 396; (20) positions 236, 239, 268 and 396; (21) positions 236 and 268; (22) positions 236, 268 and 295; (23) positions 236, 268, 295, 298 and 330; (24) positions 236, 268, 295, 326 and 330; (25) positions 236, 268, 295, 326, 330 and 396; (26) positions 236, 268, 295 and 330; (27) positions 236, 268, 295, 330 and 396; (28) positions 236, 268, 298 and 330; (29) positions 236, 268, 298 and 396; (30) positions 236, 268, 326 and 330; (31) positions 236, 268, 326, 330 and 396; (32) positions 236, 268 and 330; (33) positions 236, 268, 330 and 396; (34) positions 236, 268 and 396; (35) positions 236 and 295; (36) positions 236, 330 and 396; and (37) positions 236 and 396, according to EU numbering.

In a further embodiment, the variant Fc region with enhanced FcγRIIb-binding activity comprises at least one amino acid selected from the group consisting of: (a) Asp, Glu, Phe, Gly, His, Ile, Lys, Leu, Met, Asn, Pro, Gln, Arg, Ser, Thr, Val, Trp, Tyr at position 231; (b) Ala, Asp, Glu, Phe, Gly, His, Ile, Lys, Leu, Met, Asn, Gln, Arg, Ser, Thr, Val, Trp, Tyr at position 232; (c) Asp at position 233; (d) Trp, Tyr at position 234; (e) Trp at position 235; (f) Ala, Asp, Glu, His, Ile, Leu, Met, Asn, Gln, Ser, Thr, Val at position 236; (g) Asp, Tyr at position 237; (h) Glu, Ile, Met, Gln, Tyr at position 238; (i) Ile, Leu, Asn, Pro, Val at position 239; (j) Ile at position 264; (k) Phe at position 266; (l) Ala, His, Leu at position 267; (m) Asp, Glu at position 268; (n) Asp, Glu, Gly at position 271; (o) Leu at position 295; (p) Leu at position 298; (q) Glu, Phe, Ile, Leu at position 325; (r) Thr at position 326; (s) Ile, Asn at position 327; (t) Thr at position 328; (u) Lys, Arg at position 330; (v) Glu at position 331; (w) Asp at position 332; (x) Asp, Ile, Met, Val, Tyr at position 334; and (y) Ala, Asp, Glu, Phe, Gly, His, Ile, Lys, Leu, Met, Asn, Gln, Arg, Ser, Thr, Val, Trp, Tyr at position 396; according to EU numbering.

In a further embodiment, the variant Fc region with enhanced FcγRIIb-binding activity comprises at least one amino acid alteration (e.g., substitution) selected from the group consisting of: (a) Gly, Thr at position 231; (b) Asp at position 232; (c) Trp at position 235; (d) Asn, Thr at position 236; (e) Val at position 239; (f) Asp, Glu at position 268; (g) Leu at position 295; (h) Leu at position 298; (i) Thr at position 326; (j) Lys, Arg at position 330; and (k) Lys, Met at position 396; according to EU numbering. In a further embodiment, the variant Fc region with enhanced FcγRIIb-binding activity comprises amino acid alterations (e.g., substitutions) of: Asn at position 236, Glu at position 268, Lys at position 330, and Met at position 396; according to EU numbering. In a further embodiment, the variant Fc region with enhanced FcγRIIb-binding activity comprises amino acid alterations (e.g., substitutions) of: Asn at position 236, Asp at position 268, and Lys at position 330;

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according to EU numbering. In a further embodiment, the variant Fc region with enhanced FcγRIIb-binding activity comprises amino acid alterations (e.g., substitutions) of: Asn at position 236, Asp at position 268, Leu at position 295, and Lys at position 330; according to EU numbering. In a further embodiment, the variant Fc region with enhanced FcγRIIb-binding activity comprises amino acid alterations (e.g., substitutions) of: Thr at position 236, Asp at position 268, and Lys at position 330; according to EU numbering. In a further embodiment, the variant Fc region with enhanced FcγRIIb-binding activity comprises amino acid alterations (e.g., substitutions) of: Asn at position 236, Asp at position 268, Leu at position 295, Thr at position 326, and Lys at position 330; according to EU numbering. In a further embodiment, the variant Fc region with enhanced FcγRIIb-binding activity comprises amino acid alterations (e.g., substitutions) of: Trp at position 235, Asn at position 236, Asp at position 268, Leu at position 295, Thr at position 326, and Lys at position 330; according to EU numbering.

In another aspect, the invention provides isolated polypeptides comprising variant Fc regions with increased isoelectric point (pI). In certain embodiments, a variant Fc region described herein comprises at least two amino acid alterations in a parent Fc region. In certain embodiments, each of the amino acid alterations increases the isoelectric point (pI) of the variant Fc region compared with that of the parent Fc region. They are based on the findings that antigen elimination from plasma can be promoted with an antibody whose pI has been increased by modification of at least two amino acid residues, for example when the antibody is administered in vivo.

In the present invention, pI may be either a theoretical or an experimentally determined pI. The value of pI can be determined, for example, by isoelectric focusing known to those skilled in the art. The value of a theoretical pI can be calculated, for example, using gene and amino acid sequence analysis software (Genetyx, etc.).

In one embodiment, the pI value may be increased, for example, at least by 0.01, 0.03, 0.05, 0.1, 0.2, 0.3, 0.4, 0.5, or more, at least by 0.6, 0.7, 0.8, 0.9, or more, at least by 1.0, 1.1, 1.2, 1.3, 1.4, 1.5, or more, or at least by 1.6, 1.7, 1.8, 1.9, 2.0, 2.1, 2.2, 2.3, 2.4, 2.5, 3.0 or more, as compared to before modification.

In certain embodiments, the amino acid for increased pI can be exposed on the surface of the variant Fc region. In the present invention, an amino acid that can be exposed on the surface generally refers to an amino acid residue located on the

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surface of a polypeptide constituting a variant Fc region. An amino acid residue located on the surface of a polypeptide refers to an amino acid residue whose side chain can be in contact with solvent molecules (which in general are mostly water molecules). However, the side chain does not necessarily have to be wholly in contact with solvent molecules, and when even a portion of the side chain is in contact with the solvent molecules, the amino acid is defined as an "amino acid residue located on the surface". The amino acid residues located on the surface of a polypeptide also include amino acid residues located close to the surface and thereby can have an electric charge influence from another amino acid residue whose side chain, even partly, is in contact with the solvent molecules. Those skilled in the art can prepare a homology model of a polypeptide for example, using commercially available softwares. Alternatively, it is possible to use methods known to those skilled in the art, such as X-ray crystallography. The amino acid residues that can be exposed on the surface are determined, for example, using coordinates from a three-dimensional model using a computer program such as InsightII program (Accelrys). Surface-exposable sites may be determined using algorithms known in the technical field (for example, Lee and Richards (J. Mol. Biol. 55:379-400 (1971)); Connolly (J. Appl. Cryst. 16:548-558 (1983)). Surface-exposable sites can be determined using software suitable for protein modeling and three-dimensional structure information. Software available for such purposes includes, for example, the SYBYL Biopolymer Module software (Tripos Associates). When an algorithm requires a user input size parameter, the "size" of a probe which is used in the calculation may be set to about 1.4 Angstrom or less in radius. Furthermore, methods for determining surface-exposable regions using software for personal computers have been described by Pacios (Comput. Chem. 18(4):377-386 (1994); J. Mol. Model. 1:46-53 (1995)). Based on such information as described above, appropriate amino acid residues located on the surface of a polypeptide that constitutes a variant Fc region can be selected.

In certain embodiments, a polypeptide comprises both the variant Fc region and an antigen-binding domain. In further embodiments, the antigen is a soluble antigen. In one embodiment, the antigen is present in biological fluids (for example, plasma, interstitial fluid, lymphatic fluid, ascitic fluid, and pleural fluid) of subjects. The antigen may also be a membrane antigen.

In further embodiments, antigen-binding activity of the antigen-binding domain changes according to ion concentration conditions. In one embodiment, ion concentration is not particularly limited and refers to hydrogen ion concentration

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(pH) or metal ion concentration. Herein, metal ions refer to ions of group I elements except hydrogen, such as alkaline metals and the copper group elements, group II elements such as alkaline earth metals and zinc group elements, group III elements except boron, group IV elements except carbon and silicon, group VIII elements such as iron group and platinum group elements, elements belonging to subgroup A of groups V, VI, and VII, and metal elements such as antimony, bismuth, and polonium. In the present invention, metal ions include, for example, calcium ion, as described in WO 2012/073992 and WO 2013/125667. In one embodiment, "ion concentration condition" may be a condition that focuses on differences in the biological behavior of an antigen-binding domain between a low ion concentration and a high ion concentration. Furthermore, "antigen-binding activity of an antigen-binding domain changes according to ion concentration conditions" means that the antigen-binding activity of an antigen-binding domain changes between a low ion concentration and a high ion concentration (such an antigen-binding domain is referred to herein as "ion concentration-dependent antigen-binding domain"). The antigen-binding activity of an antigen-binding domain under a high ion concentration condition may be higher (stronger) or lower (weaker) than that under a low ion concentration condition. In one embodiment, ion concentration-dependent antigen-binding domains (such as pH-dependent antigen-binding domains or calcium ion concentration-dependent antigen-binding domains) can be obtained by known methods, for example, described in WO 2009/125825, WO 2012/073992, and WO 2013/046722.

In the present invention, the antigen-binding activity of an antigen-binding domain under a high calcium ion concentration condition may be higher than under a low calcium ion concentration condition. The high calcium ion concentration is not particularly limited to but may be a concentration selected between 100 micro M and 10 mM, between 200 micro M and 5 mM, between 400 micro M and 3 mM, between 200 micro M and 2 mM, between 400 micro M and 1 mM, or between 500 micro M and 2.5 mM, which is preferable to be close to the plasma (blood) concentration of calcium ion in vivo. Meanwhile, the low calcium ion concentration is not particularly limited to but may be a concentration selected between 0.1 micro M and 30 micro M, between 0.2 micro M and 20 micro M, between 0.5 micro M and 10 micro M, between 1 micro M and 5 micro M, or between 2 micro M and 4 micro M, which is preferable to be close to the concentration of calcium ion in early endosomes in vivo.

In one embodiment, the ratio between the antigen-binding activities under a low calcium ion concentration condition and a high calcium ion concentration condition

is not limited but the ratio of the dissociation constant (KD) under a low calcium ion concentration condition to the KD under a high calcium ion concentration condition, i.e., $KD(\text{low calcium ion concentration condition})/KD(\text{high calcium ion concentration condition})$, is 2 or more, 10 or more, or 40 or more. The upper limit of the ratio may be 400, 1000, or 10000, as long as such an antigen-binding domain can be produced by techniques known to those skilled in the art. Alternatively, for example, the dissociation rate constant (kd) can be used instead of the KD. In this case, the ratio of the kd under a low calcium ion concentration condition to the kd under a high calcium ion concentration condition, i.e., $kd(\text{low calcium ion concentration condition})/kd(\text{high calcium ion concentration condition})$, is 2 or more, 5 or more, 10 or more, or 30 or more. The upper limit of the ratio may be 50, 100, or 200, as long as the antigen-binding domain can be produced based on the common technical knowledge of those skilled in the art.

In the present invention, the antigen-binding activity of an antigen-binding domain under a low hydrogen ion concentration (neutral pH) may be higher than under a high hydrogen ion concentration (acidic pH). The acidic pH may be, for example, a pH selected from pH4.0 to pH6.5, selected from pH4.5 to pH6.5, selected from pH5.0 to pH6.5, or selected from pH5.5 to pH6.5, which is preferable to be close to the in vivo pH in early endosomes. The acidic pH may also be, for example, pH5.8 or pH6.0. In particular embodiments, the acidic pH is pH5.8. Meanwhile, the neutral pH may be, for example, a pH selected from pH6.7 to pH10.0, selected from pH6.7 to pH9.5, selected from pH7.0 to pH9.0, or selected from pH7.0 to pH8.0, which is preferable to be close to the in vivo pH in plasma (blood). The neutral pH may also be, for example, pH7.4 or pH7.0. In particular embodiments, the neutral pH is pH7.4.

In one embodiment, the ratio between the antigen-binding activities under an acidic pH condition and a neutral pH condition is not limited but the ratio of the dissociation constant (KD) under an acidic pH condition to the KD under a neutral pH condition, i.e., $KD(\text{acidic pH condition})/KD(\text{neutral pH condition})$, is 2 or more, 10 or more, or 40 or more. The upper limit of the ratio may be 400, 1000, or 10000, as long as such an antigen-binding domain can be produced by techniques known to those skilled in the art. Alternatively, for example, the dissociation rate constant (kd) can be used instead of the KD. In this case, the ratio of the kd under an acidic pH condition to the kd under a neutral pH condition, i.e., $kd(\text{acidic pH condition})/kd(\text{neutral pH condition})$ is 2 or more, 5 or more, 10 or more, or 30 or more. The upper limit of the ratio may be 50, 100, or 200, as long as the antigen-binding domain can be produced based on the common technical knowledge of those skilled in the art.

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In one embodiment, for example, at least one amino acid residue is substituted with an amino acid residue with a side-chain pKa of 4.0-8.0, and/or at least one amino acid with a side-chain pKa of 4.0-8.0 is inserted in the antigen-binding domain, as described in WO 2009/125825. The amino acid may be substituted and/or inserted at any site as long as the antigen-binding activity of the antigen-binding domain becomes weaker under an acidic pH condition than under a neutral pH condition as compared to before the substitution or insertion. When the antigen-binding domain has a variable region or CDR, the site may be within the variable region or CDR. The number of amino acids that are substituted or inserted can be appropriately determined by those skilled in the art; and the number may be one or more. Amino acids with a side-chain pKa of 4.0-8.0 can be used to change the antigen-binding activity of the antigen-binding domain according to the hydrogen ion concentration condition. Such amino acids include, for example, natural amino acids such as His (H) and Glu (E), and unnatural amino acids such as histidine analogs (US2009/0035836), m-NO₂-Tyr (pKa 7.45), 3,5-Br₂-Tyr (pKa 7.21), and 3,5-I₂-Tyr (pKa 7.38) (Heyl et al., Bioorg. Med. Chem. 11(17):3761-3768 (2003)). Amino acids with a side-chain pKa of 6.0-7.0 can also be used, which include, e.g., His (H).

In another embodiment, preferable antigen-binding domains for the variant Fc region with increased pI are described and can be obtained by methods described in WO2016/125495 and WO2017/046994.

In certain embodiments, the variant Fc region with increased pI comprises at least two amino acid alterations of at least two positions selected from the group consisting of: 285, 311, 312, 315, 318, 333, 335, 337, 341, 342, 343, 384, 385, 388, 390, 399, 400, 401, 402, 413, 420, 422, and 431, according to EU numbering.

In further embodiments, the variant Fc region with increased pI comprises at least two amino acid alterations of at least two positions selected from the group consisting of: 311, 341, 343, 384, 399, 400, 401, 402, and 413, according to EU numbering.

In another aspect, the invention provides polypeptides comprising variant Fc regions with increased pI comprising amino acid alterations of any one of the following (1)-(10): (1) positions 311 and 341; (2) positions 311 and 343; (3) positions 311, 343 and 413; (4) positions 311, 384 and 413; (5) positions 311 and 399; (6) positions 311 and 401; (7) positions 311 and 413; (8) positions 400 and 413; (9) positions 401 and 413; and (10) positions 402 and 413; according to EU numbering.

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In one aspect, the invention provides polypeptides comprising variant Fc regions with enhanced FcγRIIb-binding activity and increased pI comprising at least three amino acid alterations comprising: (a) at least one amino acid alteration of at least one position selected from the group consisting of: 231, 232, 233, 234, 235, 236, 237, 238, 239, 264, 266, 267, 268, 271, 295, 298, 325, 326, 327, 328, 330, 331, 332, 334, and 396, according to EU numbering, and (b) at least two amino acid alterations of at least two positions selected from the group consisting of: 285, 311, 312, 315, 318, 333, 335, 337, 341, 342, 343, 384, 385, 388, 390, 399, 400, 401, 402, 413, 420, 422, and 431, according to EU numbering.

In one aspect, the invention provides polypeptides comprising variant Fc regions with enhanced FcγRIIb-binding activity and increased pI, and that comprise at least three amino acid alterations comprising: (a) at least one amino acid alteration of at least one position selected from the group consisting of: 231, 232, 235, 236, 239, 268, 295, 298, 326, 330, and 396, according to EU numbering, and (b) at least two amino acid alterations of at least two positions selected from the group consisting of: 311, 341, 343, 384, 399, 400, 401, 402, and 413, according to EU numbering.

In another aspect, the invention provides polypeptides comprising variant Fc regions with enhanced FcγRIIb-binding activity and increased pI comprising amino acid alterations of any one of the following (1)-(9): (1) positions 235, 236, 268, 295, 311, 326, 330 and 343; (2) positions 236, 268, 295, 311, 326, 330 and 343; (3) positions 236, 268, 295, 311, 330 and 413; (4) positions 236, 268, 311, 330, 396 and 399; (5) positions 236, 268, 311, 330 and 343; (6) positions 236, 268, 311, 330, 343 and 413; (7) positions 236, 268, 311, 330, 384 and 413; (8) positions 236, 268, 311, 330 and 413; and (9) positions 236, 268, 330, 396, 400 and 413; according to EU numbering.

In one aspect, the invention provides polypeptides comprising variant Fc regions with enhanced FcγRIIb-binding activity and increased pI comprising at least three amino acid alterations comprising: (a) at least one amino acid alteration of at least one position selected from the group consisting of: 234, 238, 250, 264, 267, 307, and 330, and (b) at least two amino acid alterations of at least two positions selected from the group consisting of: 285, 311, 312, 315, 318, 333, 335, 337, 341, 342, 343, 384, 385, 388, 390, 399, 400, 401, 402, 413, 420, 422, and 431, according to EU numbering. In further embodiments, the polypeptides comprise at least two amino acid alterations of at least two positions selected from the group consisting of: 311, 341, 343, 384, 399, 400, 401, 402, and 413, according to EU numbering.

In another aspect, the invention provides polypeptides comprising variant Fc regions with enhanced FcγRIIb-binding activity and increased pI comprising amino acid alterations of any one of the following (1)-(16): (1) positions 234, 238, 250, 264, 307, 311, 330 and 343; (2) positions 234, 238, 250, 264, 307, 311, 330 and 413; (3) positions 234, 238, 250, 264, 267, 307, 311, 330 and 343; (4) positions 234, 238, 250, 264, 267, 307, 311, 330 and 413; (5) positions 234, 238, 250, 267, 307, 311, 330 and 343; (6) positions 234, 238, 250, 267, 307, 311, 330 and 413; (7) positions 234, 238, 250, 307, 311, 330 and 343; (8) positions 234, 238, 250, 307, 311, 330 and 413; (9) positions 238, 250, 264, 267, 307, 311, 330 and 343; (10) positions 238, 250, 264, 267, 307, 311, 330 and 413; (11) positions 238, 250, 264, 307, 311, 330 and 343; (12) positions 238, 250, 264, 307, 311, 330 and 413; (13) positions 238, 250, 267, 307, 311, 330 and 343; (14) positions 238, 250, 267, 307, 311, 330 and 413; (15) positions 238, 250, 307, 311, 330 and 343; and (16) positions 238, 250, 307, 311, 330 and 413; according to EU numbering.

In addition, amino acid alterations performed for other purpose(s) can be combined in a variant Fc region described herein. For example, amino acid substitutions that improve FcRn-binding activity (Hinton et al., *J. Immunol.* 176(1):346-356 (2006); Dall'Acqua et al., *J. Biol. Chem.* 281(33):23514-23524 (2006); Petkova et al., *Intl. Immunol.* 18(12):1759-1769 (2006); Zalevsky et al., *Nat. Biotechnol.* 28(2):157-159 (2010); WO 2006/019447; WO 2006/053301; and WO 2009/086320), and amino acid substitutions for improving antibody heterogeneity or stability (WO 2009/041613) may be added. Alternatively, polypeptides with the property of promoting antigen clearance, which are described in WO 2011/122011, WO 2012/132067, WO 2013/046704 or WO 2013/180201, polypeptides with the property of specific binding to a target tissue, which are described in WO 2013/180200, polypeptides with the property for repeated binding to a plurality of antigen molecules, which are described in WO 2009/125825, WO 2012/073992 or WO 2013/047752, can be combined with a variant Fc region described herein. Alternatively, with the objective of conferring binding ability to other antigens, the amino acid alterations disclosed in EP1752471 and EP1772465 may be combined in CH3 of a variant Fc region described herein. Alternatively, with the objective of increasing plasma retention, amino acid alterations that decrease the pI of the constant region (WO 2012/016227) may be combined in a variant Fc region described herein. Alternatively, with the objective of promoting uptake into cells, amino acid alterations that increase the pI of the constant region (WO 2014/145159) may be combined in a variant Fc region described herein. Alternatively, with the

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objective of promoting elimination of a target molecule from plasma, amino acid alterations that increase the pI of the constant region (WO2016/125495) may be combined in a variant Fc region described herein. In one embodiment, such alteration may include, for example, substitution at at least one position selected from the group consisting of 311, 343, 384, 399, 400, and 413 according to EU numbering. In a further embodiment, such substitution may be a replacement of an amino acid with Lys or Arg at each position.

Amino acid alterations of enhancing human FcRn-binding activity under acidic pH can also be combined in a variant Fc region described herein. Specifically, such alterations may include, for example, substitution of Leu for Met at position 428 and substitution of Ser for Asn at position 434, according to EU numbering (Zalevsky et al., Nat. Biotechnol. 28:157-159 (2010)); substitution of Ala for Asn at position 434 (Deng et al., Metab. Dispos. 38(4):600-605 (2010)); substitution of Tyr for Met at position 252, substitution of Thr for Ser at position 254 and substitution of Glu for Thr at position 256 (Dall'Acqua et al., J. Biol. Chem. 281:23514-23524 (2006)); substitution of Gln for Thr at position 250 and substitution of Leu for Met at position 428 (Hinton et al., J. Immunol. 176(1):346-356 (2006)); substitution of His for Asn at position 434 (Zheng et al., Clin. Pharmacol. Ther. 89(2):283-290 (2011), and alterations described in WO 2010/106180, WO 2010/045193, WO 2009/058492, WO 2008/022152, WO 2006/050166, WO 2006/053301, WO 2006/031370, WO 2005/123780, WO 2005/047327, WO 2005/037867, WO 2004/035752, or WO 2002/060919. Such alterations may include, for example, at least one alteration selected from the group consisting of substitution of Leu for Met at position 428, substitution of Ala for Asn at position 434 and substitution of Thr for Tyr at position 436. Those alterations may further include substitution of Arg for Gln at position 438 and/or substitution of Glu for Ser at position 440 (WO2016/125495).

Exemplary bispecific-anti-CCL2 Antibodies

One embodiment of the invention is a bispecific antibody comprising a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and a second different antigen-binding site that (specifically) binds to a second different epitope on human CCL2,

wherein the bispecific antibody comprises

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a) a first polypeptide chain comprising (from N-terminal to C-terminal direction) VH1-CH1-L1-Hinge-CH2-CH3-L2-VL1-CL wherein,
 VH1 is a first heavy chain variable domain and VL1 is a first variable light chain domain (both forming together (associating together to form) the first antigen binding site),
 CH1 is a constant heavy chain domain 1,
 L1 is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 5 to 10 amino acids),
 Hinge is a heavy chain hinge region,
 CH2 is a constant heavy chain domain 2,
 CH3 is a constant heavy chain domain 3,
 L2 is is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 10 to 15 amino acids),
 CL is a constant light chain domain,

and

b) a second polypeptide chain comprising (from N-terminal to C-terminal direction) VH2-CH1-L1-Hinge-CH2-CH3-L2-VL2-CL wherein,
 VH2 is a second heavy chain variable domain and VL2 is a second variable light chain domain (both forming together (associating together to form) the second antigen binding site),
 CH1 is a constant heavy chain domain 1,
 L1 is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 5 to 10 amino acids),
 Hinge is a heavy chain hinge region,
 CH2 is a constant heavy chain domain 2,
 CH3 is a constant heavy chain domain 3,
 L2 is is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 10 to 15 amino acids),
 CL is a constant light chain domain,

wherein

A) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

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ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

5 or

B) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

10 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

15 C) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

20 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

25 D) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

30 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

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or

E) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

F) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

G) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

H) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;

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and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;

5 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

I) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;

10 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;

15 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

J) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;

20 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;

and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

25 or

K) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;

and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

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ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;

and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

5 or

L) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

10 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;

and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

15 M) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

20 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;

and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

25 N) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;

30 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

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or

O) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

P) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93.

One embodiment of the invention is a bispecific antibody comprising a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and a second different antigen-binding site that (specifically) binds to a second different epitope on human CCL2,

wherein the bispecific antibody comprises

a) a first polypeptide chain comprising (from N-terminal to C-terminal direction) VH1-CH1-L1-Hinge-CH2-CH3-L2-VL1-CL wherein,
VH1 is a first heavy chain variable domain and VL1 is a first variable light chain domain (both forming together (associating together to form) the first antigen binding site),
CH1 is a constant heavy chain domain 1,
L1 is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 5 to 10 amino acids),

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Hinge is a heavy chain hinge region,
 CH2 is a constant heavy chain domain 2,
 CH3 is a constant heavy chain domain 3,
 L2 is is a polypeptide linker with a length of 5 to 15 amino acids
 (in one embodiment with a length of 10 to 15 amino acids),
 CL is a constant light chain domain,

and

b) a second polypeptide chain comprising (from N-terminal to C-terminal
 direction) VH2-CH1-L1-Hinge-CH2-CH3-L2-VL2-CL wherein,
 VH2 is a second heavy chain variable domain and VL2 is a second
 variable light chain domain (both forming together (associating
 together to form) the second antigen binding site),
 CH1 is a constant heavy chain domain 1,
 L1 is a polypeptide linker with a length of 5 to 15 amino acids (in
 one embodiment with a length of 5 to 10 amino acids),
 Hinge is a heavy chain hinge region,
 CH2 is a constant heavy chain domain 2,
 CH3 is a constant heavy chain domain 3,
 L2 is is a polypeptide linker with a length of 5 to 15 amino acids (in
 one embodiment with a length of 10 to 15 amino acids),
 CL is a constant light chain domain,

wherein

i) said first antigen-binding site comprises
 a VH domain comprising (a) a CDR-H1 comprising the amino acid
 sequence SHYGXS of SEQ ID NO: 57 wherein X is I, (b) a CDR-H2
 comprising the amino acid sequence GX¹IX²IFX³TANYAQKFQG of
 SEQ ID NO: 58 wherein X¹ is V, X² is P, and X³ is H, and (c) a CDR-
 H3 comprising the amino acid sequence YDAHYGELDF of SEQ ID
 NO: 59;
 and
 a VL domain comprising (d) a CDR-L1 comprising the amino acid
 sequence RASQHVSDAYLA of SEQ ID NO: 60; (e) a CDR-L2
 comprising the amino acid sequence DASDRAE of SEQ ID NO: 61,
 and (f) a CDR-L3 comprising the amino acid sequence HQYIHLHSFT

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of SEQ ID NO: 62;
and

- ii) said second antigen-binding site comprises
a VH domain comprising (a) a CDR-H1 comprising the amino acid
sequence HTYMH of SEQ ID NO: 76, (b) a CDR-H2 comprising the
amino acid sequence RIDPXNHNTKFDPKFQG of SEQ ID NO: 77
wherein X is D, and (c) a CDR-H3 comprising the amino acid
sequences GVFGFFXH of SEQ ID NO: 78 wherein X is E;
and
a VL domain comprising (d) a CDR-L1 comprising the amino acid
sequence KAX¹EDIYNRX²A of SEQ ID NO: 79 wherein X¹ is F and
X² is R, (e) a CDR-L2 comprising the amino acid sequence GATSLEH
of SEQ ID NO: 80, and (f) a CDR-L3 comprising the amino acid
sequence QQFXSAPYT of SEQ ID NO: 81 wherein X is R.

One embodiment of the invention is a bispecific antibody comprising a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and a second different antigen-binding site that (specifically) binds to a second different epitope on human CCL2,

wherein the bispecific antibody comprises

- a) a first polypeptide chain comprising (from N-terminal to C-terminal direction) VH1-CH1-L1-Hinge-CH2-CH3-L2-VL1-CL wherein,
VH1 is a first heavy chain variable domain and VL1 is a first
variable light chain domain (both forming together (associating together to form) the first antigen binding site),
CH1 is a constant heavy chain domain 1,
L1 is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 5 to 10 amino acids),
Hinge is a heavy chain hinge region,
CH2 is a constant heavy chain domain 2,
CH3 is a constant heavy chain domain 3,
L2 is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 10 to 15 amino acids),
CL is a constant light chain domain,

and

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b) a second polypeptide chain comprising (from N-terminal to C-terminal direction) VH2-CH1-L1-Hinge-CH2-CH3-L2-VL2-CL wherein, VH2 is a second heavy chain variable domain and VL2 is a second variable light chain domain (both forming together (associating together to form) the second antigen binding site),

CH1 is a constant heavy chain domain 1,

L1 is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 5 to 10 amino acids),

Hinge is a heavy chain hinge region,

CH2 is a constant heavy chain domain 2,

CH3 is a constant heavy chain domain 3,

L2 is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 10 to 15 amino acids),

CL is a constant light chain domain,

wherein

- i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
- and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and
- ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
- and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93.

In one embodiment L1 and L2 are polypeptide linkers comprising the amino acids glycine and serine wherein repetitive glycines are limited to a maximum of 4 consecutive glycines and no serine is directly connected to another serine.

In one embodiment L1 is a polypeptide linker with a length of 9 to 11 amino acids, and L2 is a polypeptide linker with a length of 9 to 11 amino acids.

In one embodiment L1 and L2 are polypeptide linkers selected from the group of : GSGGSGGSGG (SEQ ID NO: 183), GSGGGSGGGG (SEQ ID NO: 184), GSGGGGSGGG (SEQ ID NO: 185); GSGGSGGGG (SEQ ID NO: 186), GSGGGGSGGG (SEQ ID NO: 187), GSGGGGSGG (SEQ ID NO: 188),

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GGGSGGGSGG (SEQ ID NO: 189), GGGSGGGSGG (SEQ ID NO: 190),
and GGGSGGGSGG (SEQ ID NO: 191).

5 In one embodiment L1 is a polypeptide linker comprising the amino acid sequence
of GGS GGGGSGG (SEQ ID NO: 188), and L2 is a polypeptide linker
comprising the amino acid sequence of GGS GGGGSGG (SEQ ID NO:
188).

In one embodiment the constant heavy chain domains CH1, Hinge, CH2 and CH3
are of human IgG isotype, preferably of human IgG1 isotype.

10 In one embodiment the bispecific antibody described herein is not cross-reactive to
other human CCL homologs in particular it shows 100 time less binding to
other CCL homologs (selected from the group of CCL8, CCL7, and CCL13)
compared to the binding to CCL2

In one embodiment the bispecific antibody described herein binds to the first and
second epitope on human CCL2 in ion-dependent manner.

15 In one embodiment the bispecific antibody described herein binds to human CCL2
in pH dependent manner and wherein the first antigen binding site and the
second antigen binding site both bind to CCL2 with a higher affinity at neutral
pH than at acidic pH.

20 In one embodiment the bispecific antibody described herein binds to human CCL2
with a 10 times higher affinity at pH 7.4, than at pH 5.8

25 In one embodiment the in vivo clearance rate for human CCL2 (ml/day/kg) after
administration of the bispecific antibody comprising a constant heavy chain domain
of human wild type IgG1 isotype (or the Fc domain thereof) is at least 15 fold higher,
in particular at least 20 fold higher, compared to the in vivo clearance rate for human
CCL2 (ml/day/kg) after administration of a bispecific antibody comprising a Fc
gamma receptor silenced constant heavy chain domain of human IgG1 isotype (or
the Fc domain thereof) comprising the mutations L234A, L235A, P329G (Kabat EU
numbering), when a pre-formed immune complex consisting of 20mg/kg of each
bispecific antibody and 0.1mg/kg human CCL2 was administered at a single dose of
30 10 ml/kg into FcRn transgenic mice.

In one embodiment the in vivo clearance rate for human CCL2 (ml/day/kg) after
administration of the bispecific antibody comprising a constant heavy chain domain

of human wild type IgG1 isotype (or the Fc domain thereof) is at least two fold higher (in one embodiment at least 5 fold higher, in one embodiment at least 10 fold higher, in one embodiment at least 20 fold higher) compared to the in vivo clearance rate for human CCL2 (ml/day/kg) after administration of a bispecific antibody comprising a Fc gamma receptor silenced constant heavy chain domain of human IgG1 isotype (or the Fc domain thereof) comprising the mutations L234A, L235A, P329G (Kabat EU numbering), when a pre-formed immune complex consisting of 20mg/kg of each bispecific antibody and 0.1mg/kg human CCL2 was administered at a single dose of 10 ml/kg into FcRn transgenic mice.

10

In one embodiment the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

i) Q311R and/or P343R (suitable for increasing pI for enhancing uptake of antigen); and/or

ii) L234Y, L235W, G236N, P238D, T250V, V264I, H268D, Q295L, T307P, K326T and/or A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and/or

iii) M428L, N434A and/or Y436T (suitable for increasing affinity to FcRn for longer plasma half-life); and/or

iv) Q438R and/or S440E (suitable for suppressing rheumatoid factor binding).

In one embodiment the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

i) Q311R, and/or P343R (suitable for increasing pI for enhancing uptake of antigen); and/or

ii) L235W, G236N, H268D, Q295L, K326T and/or A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and/or

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iii) N434A (suitable for increasing affinity to FcRn for longer plasma half-life); and/or

iv) Q438R and/or S440E (suitable for suppressing rheumatoid factor binding).

5 In one embodiment the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

i) Q311R and P343R (suitable for increasing pI for enhancing uptake of antigen); and

10 ii) L235W, G236N, H268D, Q295L, K326T and A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and

iii) N434A (suitable for increasing affinity to FcRn for longer plasma half-life); and

iv) Q438R and S440E (suitable for suppressing rheumatoid factor binding).

15 In one embodiment the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

i) Q311R and P343R (suitable for increasing pI for enhancing uptake of antigen); and

20 ii) N434A (suitable for increasing affinity to FcRn for longer plasma half-life); and

iii) Q438R and S440E (suitable for suppressing rheumatoid factor binding).

25 In one embodiment the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

Q311R and P343R (suitable for increasing pI for enhancing uptake of antigen).

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In one embodiment the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

- 5 i) Q311R and/or P343R (suitable for increasing pI for enhancing uptake of antigen); and/or
- ii) L234Y, P238D, T250V, V264I, T307P and/or A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and/or
- 10 iii) M428L, N434A and/or Y436T (suitable for increasing affinity to FcRn for longer plasma half-life); and/or
- iv) Q438R and/or S440E (suitable for suppressing rheumatoid factor binding).

In one embodiment the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

- 15 i) Q311R and P343R (suitable for increasing pI for enhancing uptake of antigen); and
- ii) L234Y, P238D, T250V, V264I, T307P and A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and
- 20 iii) M428L, N434A and Y436T (suitable for increasing affinity to FcRn for longer plasma half-life); and
- iv) Q438R and S440E (suitable for suppressing rheumatoid factor binding).

In one embodiment the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

- 25 i) Q311R and P343R (suitable for increasing pI for enhancing uptake of antigen); and
- ii) L234Y, P238D, T250V, V264I, T307P and A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and

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iii) N434A and (suitable for increasing affinity to FcRn for longer plasma half-life); and

iv) Q438R and S440E (suitable for suppressing rheumatoid factor binding)

5 In one embodiment such bispecific antibody comprises comprising (independently or in addition to the above described mutations) the following mutations (Kabat EU numbering)

i) S354C and T366W in one of the heavy chain constant CH3 domains

ii) Y349C, T366S, L368A, Y407V in the other of the heavy chain constant CH3 domains.

10 In one embodiment other heterodimerization promoting mutations as described above in the section of Fc domain modifications promoting heterodimerization can used instead of the exemplary knob into holes modifications above.

A specific embodiment of the invention is an (isolated) bispecific antibody comprising a) a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and b) a second (different) antigen-binding site that (specifically) binds a second (different) epitope on human CCL2 wherein the bispecific antibody comprises a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 175, and a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 176.

A specific embodiment of the invention is an (isolated) bispecific antibody comprising a) a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and b) a second (different) antigen-binding site that (specifically) binds a second (different) epitope on human CCL2 wherein the bispecific antibody comprises a polypeptide comprising the amino acid sequence of sequence of SEQ ID NO: 175, and a polypeptide comprising the amino acid sequence of SEQ ID NO: 176.

A specific embodiment of the invention is an (isolated) bispecific antibody comprising a) a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and b) a second (different) antigen-binding site that (specifically) binds a second (different) epitope on human CCL2 wherein the bispecific antibody comprises a polypeptide comprising an amino acid sequence that is at least 98%, or

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99% identical to the sequence of SEQ ID NO: 177, and a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 178.

5 A specific embodiment of the invention is an (isolated) bispecific antibody comprising a) a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and b) a second (different) antigen-binding site that (specifically) binds a second (different) epitope on human CCL2 wherein the bispecific antibody comprises a polypeptide comprising the amino acid sequence of sequence of SEQ ID NO: 177, and a polypeptide comprising the amino acid sequence of SEQ ID NO: 10 178.

A specific embodiment of the invention is an (isolated) bispecific antibody comprising a) a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and b) a second (different) antigen-binding site that (specifically) binds a second (different) epitope on human CCL2 wherein the bispecific antibody 15 comprises a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 179, and a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 180.

20 A specific embodiment of the invention is an (isolated) bispecific antibody comprising a) a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and b) a second (different) antigen-binding site that (specifically) binds a second (different) epitope on human CCL2 wherein the bispecific antibody comprises a polypeptide comprising the amino acid sequence of sequence of SEQ ID NO: 179, and a polypeptide comprising the amino acid sequence of SEQ ID NO: 25 180.

A specific embodiment of the invention is an (isolated) bispecific antibody comprising a) a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and b) a second (different) antigen-binding site that (specifically) binds a second (different) epitope on human CCL2 wherein the bispecific antibody 30 comprises a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 181, and a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 182.

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A specific embodiment of the invention is an (isolated) bispecific antibody comprising a) a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and b) a second (different) antigen-binding site that (specifically) binds a second (different) epitope on human CCL2 wherein the bispecific antibody comprises a polypeptide comprising the amino acid sequence of sequence of SEQ ID NO: 181, and a polypeptide comprising the amino acid sequence of SEQ ID NO: 182.

Recombinant Methods and Compositions

Antibodies may be produced using recombinant methods and compositions, e.g., as described in U.S. Patent No. 4,816,567. In one embodiment, isolated nucleic acid encoding an anti-CCL2 antibody (either bispecific or monospecific) as described herein is provided. Such nucleic acid may encode an amino acid sequence comprising one or all VL and/or an amino acid sequence comprising one or all VH of the mono- or bispecific antibody (e.g., the light and/or heavy chains of the antibody). In a further embodiment, one or more vectors (e.g., expression vectors) comprising such nucleic acid are provided. In a further embodiment, a host cell comprising such nucleic acid is provided. In one such embodiment, a host cell comprises (e.g., has been transformed with): (1) a vector comprising a nucleic acid that encodes an amino acid sequence comprising the VL of the antibody and an amino acid sequence comprising the VH of the antibody, or (2) a first vector comprising a nucleic acid that encodes an amino acid sequence comprising the VL of the antibody and a second vector comprising a nucleic acid that encodes an amino acid sequence comprising the VH of the antibody. In one embodiment, the host cell is eukaryotic, e.g. a Chinese Hamster Ovary (CHO) cell, a HEK293 cell or lymphoid cell (e.g., Y0, NS0, Sp20 cell). In one embodiment, a method of making an anti-CCL2 antibody is provided, wherein the method comprises culturing a host cell comprising a nucleic acid encoding the antibody, as provided above, under conditions suitable for expression of the antibody, and optionally recovering the antibody from the host cell (or host cell culture medium).

For recombinant production of an anti-CCL2 cell, such nucleic acid may be readily isolated and sequenced using conventional procedures (e.g., by using oligonucleotide probes that are capable of binding specifically to genes encoding the heavy and light chains of the antibody).

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Suitable host cells for cloning or expression of antibody-encoding vectors include prokaryotic or eukaryotic cells described herein. For example, antibodies may be produced in bacteria, in particular when glycosylation and Fc effector function are not needed. For expression of antibody fragments and polypeptides in bacteria, see, e.g., US 5,648,237, US 5,789,199, and US 5,840,523. (See also Charlton, K.A., In: Methods in Molecular Biology, Vol. 248, Lo, B.K.C. (ed.), Humana Press, Totowa, NJ (2003), pp. 245-254, describing expression of antibody fragments in *E. coli*.) After expression, the antibody may be isolated from the bacterial cell paste in a soluble fraction and can be further purified.

In addition to prokaryotes, eukaryotic microbes such as filamentous fungi or yeast are suitable cloning or expression hosts for antibody-encoding vectors, including fungi and yeast strains whose glycosylation pathways have been “humanized,” resulting in the production of an antibody with a partially or fully human glycosylation pattern. See Gerngross, T.U., Nat. Biotech. 22 (2004) 1409-1414; and Li, H. et al., Nat. Biotech. 24 (2006) 210-215.

Suitable host cells for the expression of glycosylated antibody are also derived from multicellular organisms (invertebrates and vertebrates). Examples of invertebrate cells include plant and insect cells. Numerous baculoviral strains have been identified which may be used in conjunction with insect cells, particularly for transfection of *Spodoptera frugiperda* cells.

Plant cell cultures can also be utilized as hosts. See, e.g., US Patent Nos. 5,959,177, 6,040,498, 6,420,548, 7,125,978, and 6,417,429 (describing PLANTIBODIES™ technology for producing antibodies in transgenic plants).

Vertebrate cells may also be used as hosts. For example, mammalian cell lines that are adapted to grow in suspension may be useful. Other examples of useful mammalian host cell lines are monkey kidney CV1 line transformed by SV40 (COS-7); human embryonic kidney line (293 or 293 cells as described, e.g., in Graham, F.L. et al., J. Gen Virol. 36 (1977) 59-74); baby hamster kidney cells (BHK); mouse sertoli cells (TM4 cells as described, e.g., in Mather, J.P., Biol. Reprod. 23 (1980) 243-252); monkey kidney cells (CV1); African green monkey kidney cells (VERO-76); human cervical carcinoma cells (HELA); canine kidney cells (MDCK; buffalo rat liver cells (BRL 3A); human lung cells (W138); human liver cells (Hep G2); mouse mammary tumor (MMT 060562); TRI cells, as described, e.g., in Mather, J.P. et al., Annals N.Y. Acad. Sci. 383 (1982) 44-68; MRC 5 cells; and FS4 cells. Other

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useful mammalian host cell lines include Chinese hamster ovary (CHO) cells, including DHFR⁺ CHO cells (Urlaub, G. et al., Proc. Natl. Acad. Sci. USA 77 (1980) 4216-4220); and myeloma cell lines such as Y0, NS0 and Sp2/0. For a review of certain mammalian host cell lines suitable for antibody production, see, e.g., Yazaki, P. and Wu, A.M., Methods in Molecular Biology, Vol. 248, Lo, B.K.C. (ed.), Humana Press, Totowa, NJ (2004), pp. 255-268.

In another aspect, the invention is based, in part, on the finding that the modified monospecific antibodies as described herein show improved pH dependent binding properties and are therefore especially useful for the generation of the bispecific antibodies of the invention

Methods and Compositions for Diagnostics and Detection

In certain embodiments, any of the bispecific anti-CCL2 antibodies provided herein is useful for detecting the presence of CCL2 in a biological sample. The term “detecting” as used herein encompasses quantitative or qualitative detection. In certain embodiments, a biological sample comprises a cell or tissue, such as immune cell or T cell infiltrates and or tumor cells.

In one embodiment, a bispecific anti-CCL2 antibody for use in a method of diagnosis or detection is provided. In a further aspect, a method of detecting the presence of CCL2 in a biological sample is provided. In certain embodiments, the method comprises contacting the biological sample with a bispecific anti-CCL2 antibody as described herein under conditions permissive for binding of the bispecific anti-CCL2 antibody to CCL2, and detecting whether a complex is formed between the bispecific anti-CCL2 antibody and CCL2. Such method may be an *in vitro* or *in vivo* method. In one embodiment, a bispecific anti-CCL2 antibody is used to select subjects eligible for therapy with a bispecific anti-CCL2 antibody, e.g. where CCL2 is a biomarker for selection of patients.

In certain embodiments, labeled bispecific anti-CCL2 antibodies are provided. Labels include, but are not limited to, labels or moieties that are detected directly (such as fluorescent, chromophoric, electron-dense, chemiluminescent, and radioactive labels), as well as moieties, such as enzymes or ligands, that are detected indirectly, e.g., through an enzymatic reaction or molecular interaction. Exemplary labels include, but are not limited to, the radioisotopes ³²P, ¹⁴C, ¹²⁵I, ³H, and ¹³¹I, fluorophores such as rare earth chelates or fluorescein and its derivatives, rhodamine and its derivatives, dansyl, umbelliferone, luciferases, e.g., firefly luciferase and

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bacterial luciferase (U.S. Patent No. 4,737,456), luciferin, 2,3-dihydrophthalazinediones, horseradish peroxidase (HRP), alkaline phosphatase, β -galactosidase, glucoamylase, lysozyme, saccharide oxidases, e.g., glucose oxidase, galactose oxidase, and glucose-6-phosphate dehydrogenase, heterocyclic oxidases such as uricase and xanthine oxidase, coupled with an enzyme that employs hydrogen peroxide to oxidize a dye precursor such as HRP, lactoperoxidase, or microperoxidase, biotin/avidin, spin labels, bacteriophage labels, stable free radicals, and the like.

Pharmaceutical Formulations

Pharmaceutical formulations of a bispecific anti-CCL2 antibody as described herein are prepared by mixing such antibody having the desired degree of purity with one or more optional pharmaceutically acceptable carriers (Remington's Pharmaceutical Sciences, 16th edition, Osol, A. (ed.) (1980)), in the form of lyophilized formulations or aqueous solutions. Pharmaceutically acceptable carriers are generally nontoxic to recipients at the dosages and concentrations employed, and include, but are not limited to: buffers such as phosphate, citrate, and other organic acids; antioxidants including ascorbic acid and methionine; preservatives (such as octadecyl dimethylbenzyl ammonium chloride; hexamethonium chloride; benzalkonium chloride; benzethonium chloride; phenol, butyl or benzyl alcohol; alkyl parabens such as methyl or propyl paraben; catechol; resorcinol; cyclohexanol; 3-pentanol; and m-cresol); low molecular weight (less than about 10 residues) polypeptides; proteins, such as serum albumin, gelatin, or immunoglobulins; hydrophilic polymers such as poly(vinylpyrrolidone); amino acids such as glycine, glutamine, asparagine, histidine, arginine, or lysine; monosaccharides, disaccharides, and other carbohydrates including glucose, mannose, or dextrans; chelating agents such as EDTA; sugars such as sucrose, mannitol, trehalose or sorbitol; salt-forming counterions such as sodium; metal complexes (e.g. Zn-protein complexes); and/or non-ionic surfactants such as polyethylene glycol (PEG). Exemplary pharmaceutically acceptable carriers herein further include interstitial drug dispersion agents such as soluble neutral-active hyaluronidase glycoproteins (sHASEGP), for example, human soluble PH-20 hyaluronidase glycoproteins, such as rhuPH20 (HYLENEX[®], Baxter International, Inc.). Certain exemplary sHASEGPs and methods of use, including rhuPH20, are described in US Patent Publication Nos. 2005/0260186 and 2006/0104968. In one aspect, a sHASEGP is combined with one or more additional glycosaminoglycanases such as chondroitinases.

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Exemplary lyophilized antibody formulations are described in US Patent No. 6,267,958. Aqueous antibody formulations include those described in US Patent No. 6,171,586 and WO 2006/044908, the latter formulations including a histidine-acetate buffer.

5 The formulation herein may also contain more than one active ingredients as necessary for the particular indication being treated, preferably those with complementary activities that do not adversely affect each other. For example, it may be desirable to further provide. Such active ingredients are suitably present in combination in amounts that are effective for the purpose intended.

10 Active ingredients may be entrapped in microcapsules prepared, for example, by coacervation techniques or by interfacial polymerization, for example, hydroxymethylcellulose or gelatin-microcapsules and poly- (methyl methacrylate) microcapsules, respectively, in colloidal drug delivery systems (for example, liposomes, albumin microspheres, microemulsions, nano-particles and
15 nanocapsules) or in macroemulsions. Such techniques are disclosed in Remington's Pharmaceutical Sciences, 16th edition, Osol, A. (ed.) (1980).

Sustained-release preparations may be prepared. Suitable examples of sustained-release preparations include semi-permeable matrices of solid hydrophobic polymers containing the antibody, which matrices are in the form of shaped articles, *e.g.* films,
20 or microcapsules.

The formulations to be used for *in vivo* administration are generally sterile. Sterility may be readily accomplished, *e.g.*, by filtration through sterile filtration membranes.

Therapeutic Methods and Compositions

25 Any of the bispecific anti-CCL2 antibodies provided herein may be used in therapeutic methods.

In one aspect, a bispecific anti-CCL2 antibody for use as a medicament is provided. In further aspects, a bispecific anti-CCL2 antibody or use in treating cancer is provided. In certain embodiments, a bispecific anti-CCL2 antibody for use in a method of treatment is provided. In certain embodiments, the invention provides a
30 bispecific anti-CCL2 antibody for use in a method of treating an individual having cancer comprising administering to the individual an effective amount of the bispecific anti-CCL2 antibody.

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In further embodiments, the invention provides a bispecific anti-CCL2 antibody inhibits immunosuppression in tumors and thus makes tumor susceptible for immunostimulatory agent like anti-PD1, anti-PDL-1 antagonists and the like.

5 Therefore one aspect of the is the combination of the bispecific anti-CCL2 antibodies described here with a cancer immunotherapy like anti-PD1, anti-PDL-1 antagonists and the like.

The term “cancer” as used herein may be, for example, lung cancer, non small cell lung (NSCL) cancer, bronchioloalveolar cell lung cancer, bone cancer, pancreatic cancer, skin cancer, cancer of the head or neck, cutaneous or intraocular melanoma, 10 uterine cancer, ovarian cancer, rectal cancer, cancer of the anal region, stomach cancer, gastric cancer, colon cancer, breast cancer, uterine cancer, carcinoma of the fallopian tubes, carcinoma of the endometrium, carcinoma of the cervix, carcinoma of the vagina, carcinoma of the vulva, Hodgkin's Disease, cancer of the esophagus, cancer of the small intestine, cancer of the endocrine system, cancer of the thyroid 15 gland, cancer of the parathyroid gland, cancer of the adrenal gland, sarcoma of soft tissue, cancer of the urethra, cancer of the penis, prostate cancer, cancer of the bladder, cancer of the kidney or ureter, renal cell carcinoma, carcinoma of the renal pelvis, mesothelioma, hepatocellular cancer, biliary cancer, neoplasms of the central nervous system (CNS), spinal axis tumors, brain stem glioma, glioblastoma 20 multiforme, astrocytomas, schwannomas, ependymomas, medulloblastomas, meningiomas, squamous cell carcinomas, pituitary adenoma, lymphoma, lymphocytic leukemia, including refractory versions of any of the above cancers, or a combination of one or more of the above cancers.

An “individual” according to any of the above embodiments is preferably a human. 25 In a further aspect, the invention provides for the use of a bispecific anti-CCL2 antibody in the manufacture or preparation of a medicament. In one embodiment, the medicament is for treatment of cancer. In a further embodiment, the medicament is for use in a method of treating cancer comprising administering to an individual having cancer an effective amount of the medicament. In a further embodiment, the 30 medicament is for inducing cell mediated lysis of cancer cells. In a further embodiment, the medicament is for use in a method of inducing cell mediated lysis of cancer cells in an individual suffering from cancer comprising administering to the individual an amount effective of the medicament to induce apoptosis in a cancer cell/ or to inhibit cancer cell proliferation. An “individual” according to any of the 35 above embodiments may be a human.

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In a further aspect, the invention provides a method for treating cancer. In one embodiment, the method comprises administering to an individual having cancer an effective amount of bispecific anti-CCL2 antibody. An “individual” according to any of the above embodiments may be a human.

5 In a further aspect, the invention provides a method for inducing cell mediated lysis of cancer cells in an individual suffering from cancer. In one embodiment, the method comprises administering to the individual an effective amount of a bispecific anti-CCL2 antibody to induce cell mediated lysis of cancer cells in the individual suffering from cancer. In one embodiment, an “individual” is a human.

10 In another aspect of the invention, a bispecific anti-CCL2 antibody for use in treating inflammatory diseases or autoimmune diseases is provided. In certain embodiments, the invention provides a bispecific anti-CCL2 antibody for use in a method of treating an individual having an inflammatory disease or autoimmune disease comprising administering to the individual an effective amount of the bispecific anti-
15 CCL2 antibody.

In some embodiments, the inflammatory diseases or autoimmune disease is an autoimmune disorder, inflammatory disorder, fibrotic disorder, granulocytic (neutrophilic or eosinophilic) disorder, monocytic disorder, or lymphocytic disorder, or a disorder associated with increased numbers or distribution of normal or aberrant
20 tissue resident cells (such as mast cells, macrophages, or lymphocytes) or stromal cells (such as fibroblasts, myofibroblasts, smooth muscle cells, epithelia, or endothelia). In some embodiments, the disorder is a pulmonary disorder. In some embodiments the pulmonary disorder is associated with granulocytic (eosinophilic and/or neutrophilic) pulmonary inflammation, infection-induced pulmonary
25 conditions (including those associated with viral (e.g., influenza, parainfluenza, rhinovirus, human metapneumovirus, and respiratory syncytial virus), bacterial, or fungal (e.g., Aspergillus) triggers. In some embodiments, the disorder is an allergen-induced pulmonary condition, a toxic environmental pollutant-induced pulmonary condition (e.g., asbestosis, silicosis, or berylliosis), a gastric aspiration-induced
30 pulmonary condition, or associated with immune dysregulation or an inflammatory condition with genetic predisposition such as cystic fibrosis. In some embodiments, the disorder is a physical trauma-induced pulmonary condition (e.g., ventilator injury), emphysema, cigarette-induced emphysema, bronchitis, sarcoidosis, histiocytosis, lymphangiomyomatosis, acute lung injury, acute respiratory distress
35 syndrome, chronic lung disease, bronchopulmonary dysplasia, pneumonia (e.g.,

community-acquired pneumonia, nosocomial pneumonia, ventilator-associated pneumonia, viral pneumonia, bacterial pneumonia, and severe pneumonia), airway exacerbations, and acute respiratory distress syndrome (ARDS)). In some embodiments, the inflammatory pulmonary disorder is COPD.

5 In some embodiments, the inflammatory pulmonary disorder is asthma. In some embodiments, the asthma is persistent chronic severe asthma with acute events of worsening symptoms (exacerbations or flares) that can be life threatening. In some
10 embodiments, the asthma is atopic (also known as allergic) asthma, non-allergic asthma (e.g., often triggered by infection with a respiratory virus (e.g., influenza, parainfluenza, rhinovirus, human metapneumovirus, and respiratory syncytial virus) or inhaled irritant (air pollutants, smog, diesel particles, volatile chemicals and gases indoors or outdoors, or even by cold dry air),

In some embodiments, the asthma is intermittent or exercise-induced, asthma due to acute or chronic primary or second-hand exposure to “smoke” (typically cigarettes,
15 cigars, pipes), inhaling or “vaping” (tobacco, marijuana or other such substances), or asthma triggered by recent ingestion of aspirin or related NSAIDS. In some embodiments, the asthma is mild, or corticosteroid naïve asthma, newly diagnosed and untreated asthma, or not previously requiring chronic use of inhaled topical or systemic steroids to control the symptoms (cough, wheeze, shortness of
20 breath/breathlessness, or chest pain). IN some embodiments, the asthma is chronic, corticosteroid resistant asthma, corticosteroid refractory asthma, asthma uncontrolled on corticosteroids or other chronic asthma controller medications. In some embodiments, the autoimmune disorder, inflammatory disorder, fibrotic disorder, neutrophilic disorder, or eosinophilic disorder is pulmonary fibrosis. In
25 some embodiments, the pulmonary fibrosis is idiopathic pulmonary fibrosis (IPF). In some embodiments, the autoimmune disorder, inflammatory disorder, fibrotic disorder, granulocytic (neutrophilic or eosinophilic) disorder, monocytic disorder, or lymphocytic disorder is esophagitis, allergic rhinitis, non-allergic rhinitis, rhinosinusitis with polyps, nasal polyposis, bronchitis, chronic pneumonia, allergic
30 bronchopulmonary aspergillosis, airway inflammation, allergic rhinitis, bronchiectasis, and/or chronic bronchitis.

In some embodiments, the autoimmune disorder, inflammatory disorder, fibrotic disorder, granulocytic (neutrophilic or eosinophilic) disorder, monocytic disorder, or lymphocytic disorder, is arthritis. In some embodiments, the arthritis is rheumatoid
35 arthritis. In some embodiments, the arthritis is osteoarthritis, rheumatoid arthritis,

juvenile arthritis, juvenile rheumatoid arthritis, early arthritis, polyarticular rheumatoid arthritis, systemic-onset rheumatoid arthritis, enteropathic arthritis, reactive arthritis, psoriatic arthritis, and/or arthritis as a result of injury.

5 In some embodiments, the autoimmune disorder, inflammatory disorder, fibrotic disorder, granulocytic (neutrophilic or eosinophilic) disorder, monocytic disorder, or lymphocytic disorder is a gastrointestinal inflammatory condition. In some
embodiments, the gastrointestinal inflammatory condition is IBD (inflammatory
bowel disease), ulcerative colitis (UC), Crohn's disease (CD), colitis (e.g., colitis
caused by environmental insults (e.g., caused by or associated with a therapeutic
10 regimen, such as chemotherapy, radiation therapy, etc.), infectious colitis, ischemic
colitis, collagenous or lymphocytic colitis, necrotizing enterocolitis, colitis in
conditions such as chronic granulomatous disease or celiac disease, food allergies,
gastritis, gastroenteritis, infectious gastritis or enterocolitis (e.g., *Helicobacter*
pylori-infected chronic active gastritis), and other forms of gastrointestinal
15 inflammation caused by an infectious agent, or indeterminate colitis.

In some embodiments, the autoimmune disorder, inflammatory disorder, fibrotic
disorder, granulocytic (neutrophilic or eosinophilic) disorder, monocytic disorder, or
lymphocytic disorder, or disorder associated with increased numbers or distribution
of normal or aberrant tissue resident cells (such as mast cells, macrophages, or
20 lymphocytes) or stromal cells (such as fibroblasts, myofibroblasts, smooth muscle
cells, epithelia, or endothelia) is lupus or Systemic Lupus Erythematosus (SLE), or
one or more organ-specific manifestations of lupus (e.g., lupus nephritis (LN)
affecting the kidney, or extra-renal lupus (ERL) affecting the blood and/or lymphoid
organs (lymph nodes, spleen, thymus, and associated lymphatic vessels), and/or
25 joints and/or other organs, but not necessarily the kidney). In some embodiments,
the autoimmune disorder, inflammatory disorder, or fibrotic disorder is related to
sepsis and/or trauma, HIV infection, or idiopathic (of unknown etiology) such as
ANCA-associated vasculitides (AAV), granulomatosis with polyangiitis (formerly
known as Wegener's granulomatosis), Behcet's disease, cardiovascular disease,
30 eosinophilic bronchitis, Reiter's Syndrome, SEA Syndrome (Seronegativity,
Enthesopathy, Arthropathy Syndrome), ankylosing spondylitis, dermatomyositis,
scleroderma, e.g., systemic scleroderma also called systemic sclerosis, vasculitis
(e.g., Giant Cell Arteritis (GCA), also called temporal arteritis, cranial arteritis or
Horton disease), myositis, polymyositis, dermatomyositis, polyarteritis nodosa,
35 arteritis, polymyalgia rheumatica, sarcoidosis, primary biliary sclerosis, sclerosing
cholangitis, Sjogren's syndrome, psoriasis, plaque psoriasis, guttate psoriasis, inverse

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psoriasis, pustular psoriasis, erythrodermic psoriasis, dermatitis, atopic dermatitis, pemphigus, e.g., pemphigus vulgaris, atherosclerosis, lupus, Still's disease, myasthenia gravis, celiac disease, multiple sclerosis (MS) of the relapsing-remitting (RRMS) or primary progressive (PPMS) or secondary progressive (SPMS) subtypes, 5 Guillain-Barre disease, Type I diabetes mellitus (T1DM) or insulin-dependent (IDDM) or juvenile onset DM type, thyroiditis (e.g., Graves' disease), coeliac disease, Churg-Strauss syndrome, myalgia syndrome, hypereosinophilic syndrome, oedematous reactions including episodic angioedema, helminth infections, onchocercal dermatitis eosinophilic oesophagitis, eosinophilic enteritis, eosinophilic 10 colitis, obstructive sleep apnea, endomyocardial fibrosis, Addison's disease, Raynaud's disease or phenomenon, autoimmune hepatitis, graft versus host disease (GVHD), or organ transplant rejection.

In a further aspect, the invention provides pharmaceutical formulations comprising any of the bispecific anti-CCL2 antibodies provided herein, e.g., for use in any of the 15 above therapeutic methods. In one embodiment, a pharmaceutical formulation comprises any of the bispecific anti-CCL2 antibodies provided herein and a pharmaceutically acceptable carrier.

An antibody of the invention (and any additional therapeutic agent) can be administered by any suitable means, including parenteral, intrapulmonary, and 20 intranasal, and, if desired for local treatment, intralesional administration. Parenteral infusions include intramuscular, intravenous, intra-arterial, intraperitoneal, or subcutaneous administration. Dosing can be by any suitable route, e.g. by injections, such as intravenous or subcutaneous injections, depending in part on whether the administration is brief or chronic. Various dosing schedules including but not limited 25 to single or multiple administrations over various time-points, bolus administration, and pulse infusion are contemplated herein.

Antibodies of the invention would be formulated, dosed, and administered in a fashion consistent with good medical practice. Factors for consideration in this context include the particular disorder being treated, the particular mammal being 30 treated, the clinical condition of the individual patient, the cause of the disorder, the site of delivery of the agent, the method of administration, the scheduling of administration, and other factors known to medical practitioners. The antibody need not be, but is optionally formulated with one or more agents currently used to prevent or treat the disorder in question. The effective amount of such other agents depends 35 on the amount of antibody present in the formulation, the type of disorder or

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treatment, and other factors discussed above. These are generally used in the same dosages and with administration routes as described herein, or about from 1 to 99% of the dosages described herein, or in any dosage and by any route that is empirically/clinically determined to be appropriate.

5 For the prevention or treatment of disease, the appropriate dosage of an antibody of the invention (when used alone or in combination with one or more other additional therapeutic agents) will depend on the type of disease to be treated, the type of antibody, the severity and course of the disease, whether the antibody is administered for preventive or therapeutic purposes, previous therapy, the patient's clinical history
10 and response to the antibody, and the discretion of the attending physician. The antibody is suitably administered to the patient at one time or over a series of treatments. Depending on the type and severity of the disease, about 1 µg/kg to 15 mg/kg (e.g. 0.5mg/kg - 10 mg/kg) of antibody can be an initial candidate dosage for administration to the patient, whether, for example, by one or more separate
15 administrations, or by continuous infusion. One typical daily dosage might range from about 1 µg/kg to 100 mg/kg or more, depending on the factors mentioned above. For repeated administrations over several days or longer, depending on the condition, the treatment would generally be sustained until a desired suppression of disease symptoms occurs. One exemplary dosage of the antibody would be in the range from
20 about 0.05 mg/kg to about 10 mg/kg. Thus, one or more doses of about 0.5 mg/kg, 2.0 mg/kg, 4.0 mg/kg or 10 mg/kg (or any combination thereof) may be administered to the patient. Such doses may be administered intermittently, e.g. every week or every three weeks (e.g. such that the patient receives from about two to about twenty, or e.g. about six doses of the antibody). An initial higher loading dose, followed by
25 one or more lower doses may be administered. An exemplary dosing regimen comprises administering an initial loading dose of about 4 mg/kg, followed by a weekly maintenance dose of about 2 mg/kg of the antibody. However, other dosage regimens may be useful. The progress of this therapy is easily monitored by conventional techniques and assays.

30 II. Articles of Manufacture

In another aspect of the invention, an article of manufacture containing materials useful for the treatment, prevention and/or diagnosis of the disorders described above is provided. The article of manufacture comprises a container and a label or package insert on or associated with the container. Suitable containers include, for example,
35 bottles, vials, syringes, IV solution bags, etc. The containers may be formed from

a variety of materials such as glass or plastic. The container holds a composition which is by itself or combined with another composition effective for treating, preventing and/or diagnosing the condition and may have a sterile access port (for example the container may be an intravenous solution bag or a vial having a stopper pierceable by a hypodermic injection needle). At least one active agent in the composition is an antibody of the invention. The label or package insert indicates that the composition is used for treating the condition of choice. Moreover, the article of manufacture may comprise (a) a first container with a composition contained therein, wherein the composition comprises an antibody of the invention; and (b) a second container with a composition contained therein, wherein the composition comprises a further cytotoxic or otherwise therapeutic agent. The article of manufacture in this embodiment of the invention may further comprise a package insert indicating that the compositions can be used to treat a particular condition. Alternatively, or additionally, the article of manufacture may further comprise a second (or third) container comprising a pharmaceutically-acceptable buffer, such as bacteriostatic water for injection (BWI), phosphate-buffered saline, Ringer's solution and dextrose solution. It may further include other materials desirable from a commercial and user standpoint, including other buffers, diluents, filters, needles, and syringes.

In the following specific embodiments of the invention are listed:

1. A bispecific antibody comprising a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and a second different antigen-binding site that (specifically) binds to a second different epitope on human CCL2,

wherein the bispecific antibody comprises

- a) a first polypeptide chain comprising (from N-terminal to C-terminal direction) VH1-CH1-L1-Hinge-CH2-CH3-L2-VL1-CL wherein,
 - VH1 is a first heavy chain variable domain and VL1 is a first variable light chain domain (both forming together (associating together to form) the first antigen binding site),
 - CH1 is a constant heavy chain domain 1,

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L1 is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 5 to 10 amino acids),

Hinge is a heavy chain hinge region,

CH2 is a constant heavy chain domain 2,

5 CH3 is a constant heavy chain domain 3,

L2 is is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 10 to 15 amino acids),

CL is a constant light chain domain,

and

10 b) a second polypeptide chain comprising (from N-terminal to C-terminal direction) VH2-CH1-L1-Hinge-CH2-CH3-L2-VL2-CL wherein, VH2 is a second heavy chain variable domain and VL2 is a second variable light chain domain (both forming together (associating together to form) the second antigen binding site),

15 CH1 is a constant heavy chain domain 1,

L1 is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 5 to 10 amino acids),

Hinge is a heavy chain hinge region,

CH2 is a constant heavy chain domain 2,

20 CH3 is a constant heavy chain domain 3,

L2 is is a polypeptide linker with a length of 5 to 15 amino acids (in one embodiment with a length of 10 to 15 amino acids),

CL is a constant light chain domain,

25 wherein

A) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

30 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

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B) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

5 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

10 C) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

15 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

20 D) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

25 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

30 E) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

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ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

5 or

F) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

10 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

15 G) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

20 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

25 H) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

30 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

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or

I) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

J) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

K) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

L) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

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and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;

5 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

M) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

10 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;

15 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

N) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

20 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;

and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

25 or

O) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

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ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

5 or

P) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

10 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

2. The bispecific antibody according to embodiment 1, wherein

15 i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

20 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93.

3. The bispecific antibody according to embodiment 1, wherein

25 i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

30 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94.

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4. The bispecific antibody according to anyone of the embodiments 1 to 3, wherein

L1 is a polypeptide linker with a length of 9 to 11 amino acids, and

L2 is a polypeptide linker with a length of 9 to 11 amino acids.

5

5. The bispecific antibody according to embodiment 4, wherein

L1 and L2 are polypeptide linkers selected from the group of :

GSGGSGGSGG (SEQ ID NO: 183), GSGGGSGGGG (SEQ ID NO: 184),

GSGGGGSGGG (SEQ ID NO: 185); GSGGGSGGGG (SEQ ID NO: 186),

10 GSGGGGSGGG (SEQ ID NO: 187), GSGGGGSGG (SEQ ID NO: 188),

GGGSGGSGGG (SEQ ID NO: 189), GGGSGGGSGG (SEQ ID NO: 190),

and GGGSGGGSGG (SEQ ID NO: 191).

6. The bispecific antibody according to embodiment 4, wherein

15 L1 is a polypeptide linker comprising the amino acid sequence of GSGGGGSGG (SEQ ID NO: 188), and

L2 is a polypeptide linker comprising the amino acid sequence of GSGGGGSGG (SEQ ID NO: 188).

7. The bispecific antibody according to anyone of the embodiments 1 to 6, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG isotype, preferably of human IgG1 isotype.

20

8. The bispecific antibody according to anyone of the preceding embodiments, wherein the bispecific antibody

i) blocks binding of CCL2 to its receptor CCR2 *in vitro* (reporter assay, $IC_{50}=0.5nM$); and/or

25

ii) inhibits CCL2-mediated chemotaxis of myeloid cells *in vitro* ($IC_{50}=1.5nM$); and/or

iii) is cross-reactive to cyno and human CCL2.

9. The bispecific antibody according to anyone of the preceding embodiments, wherein the bispecific antibody is not cross-reactive to other CCL homologs,

30

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(shows 100 time less binding to other CCL homologs (selected from the group of CCL8, CCL7, and CCL13) compared to the binding to CCL2

10. The bispecific antibody according to anyone of the preceding embodiments, wherein the bispecific antibody binds to the first and second epitope on human CCL2 in ion-dependent manner.
11. The bispecific antibody according to anyone of the preceding embodiments, wherein the bispecific antibody binds to human CCL2 in pH dependent manner and wherein the first antigen binding site and the second antigen binding site both bind to CCL2 with a higher affinity at neutral pH than at acidic pH.
12. The bispecific antibody according to anyone of the preceding embodiments, wherein the bispecific antibody binds to human CCL2 with a 10 times higher affinity at pH 7.4, than at pH 5.8.
13. The bispecific antibody according to anyone of claims 1 to 12, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)
 - i) Q311R and/or P343R (suitable for increasing pI for enhancing uptake of antigen); and/or
 - ii) L234Y, L235W, G236N, P238D, T250V, V264I, H268D, Q295L, T307P, K326T and/or A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and/or
 - iii) M428L, N434A and/or Y436T (suitable for increasing affinity to FcRn for longer plasma half-life); and/or
 - iv) Q438R and/or S440E (suitable for suppressing rheumatoid factor binding).
14. The bispecific antibody according to anyone of of claims 1 to 12, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)
 - i) Q311R, and/or P343R (suitable for increasing pI for enhancing uptake of antigen); and/or

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- ii) L235W, G236N, H268D, Q295L, K326T and/or A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and/or
- iii) N434A (suitable for increasing affinity to FcRn for longer plasma half-life); and/or
- iv) Q438R and/or S440E (suitable for suppressing rheumatoid factor binding).
15. The bispecific antibody according to anyone of of claims 1 to 12, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)
- i) Q311R and P343R (suitable for increasing pI for enhancing uptake of antigen); and
- ii) L235W, G236N, H268D, Q295L, K326T and A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and
- iii) N434A (suitable for increasing affinity to FcRn for longer plasma half-life); and
- iv) Q438R and S440E (suitable for suppressing rheumatoid factor binding).
16. The bispecific antibody according to anyone of of claims 1 to 12, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)
- i) Q311R and/or P343R (suitable for increasing pI for enhancing uptake of antigen); and/or
- ii) L234Y, P238D, T250V, V264I, T307V and/or A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and/or
- iii) M428L, N434A and/or Y436T (suitable for increasing affinity to FcRn for longer plasma half-life); and/or

iv) Q438R and/or S440E (suitable for suppressing rheumatoid factor binding).

- 5 17. The bispecific antibody according to anyone of of claims 1 to 12, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

i) Q311R and/ P343R (suitable for increasing pI for enhancing uptake of antigen); and

- 10 ii) L234Y, P238D, T250V, V264I, T307V and A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and

iii) M428L, N434A and Y436T (suitable for increasing affinity to FcRn for longer plasma half-life); and/

iv) Q438R and S440E(suitable for suppressing rheumatoid factor binding).

- 15 18. The bispecific antibody according to anyone of of claims 1 to 12, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)

i) Q311R and/ P343R (suitable for increasing pI for enhancing uptake of antigen); and

- 20 ii) L234Y, P238D, T250V, V264I, T307V and A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR); and

iii) N434A (suitable for increasing affinity to FcRn for longer plasma half-life); and/

iv) Q438R and S440E (suitable for suppressing rheumatoid factor binding).

- 25 19. The bispecific antibody according to anyone of claims 13 to 18, wherein the constant heavy chain domains CH3 comprise the following mutations (Kabat EU numbering)

i) S354C and T366W in one of the heavy chain constant domains CH3; and

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ii) Y349C, T366S, L368A, Y407V in the other of the heavy chain constant domains CH3.

20. The bispecific antibody according to anyone of claims 13 to 19, wherein the constant heavy chain domains CH3 comprise the following mutation (Kabat EU numbering)

K447G.

21. The bispecific antibody according to anyone of the embodiments 1 to 2 and 4 to 7, wherein the bispecific antibody comprises a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 175, and a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 176.

22. The bispecific antibody according to anyone of the embodiments 1 to 2 and 4 to 7, wherein the bispecific antibody comprises a polypeptide comprising the amino acid sequence of sequence of SEQ ID NO: 175, and a polypeptide comprising the amino acid sequence of SEQ ID NO: 176.

23. The bispecific antibody according to anyone of the embodiments 1 to 7, embodiments 1 to 2 and 4 to 7, wherein the bispecific antibody comprises a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 177, and a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 178.

24. The bispecific antibody according to anyone of the embodiments 1 to 2 and 4 to 7, wherein the bispecific antibody comprises a polypeptide comprising the amino acid sequence of sequence of SEQ ID NO: 177, and a polypeptide comprising the amino acid sequence of SEQ ID NO: 178.

25. The bispecific antibody according to anyone of the embodiments 1 to 2 and 4 to 7, wherein the bispecific antibody comprises a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 179, and a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 180.

26. The bispecific antibody according to anyone of the embodiments 1 to 2 and 4 to 7, wherein the bispecific antibody comprises a polypeptide comprising the

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amino acid sequence of sequence of SEQ ID NO: 179, and a polypeptide comprising the amino acid sequence of SEQ ID NO: 180.

- 5 27. The bispecific antibody according to anyone of the embodiments 1 to 2 and 4 to 7, wherein the bispecific antibody comprises a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 179, and a polypeptide comprising an amino acid sequence that is at least 98%, or 99% identical to the sequence of SEQ ID NO: 180.
- 10 28. The bispecific antibody according to anyone of the embodiments 1 to 2 and 4 to 7, wherein the bispecific antibody comprises a polypeptide comprising the amino acid sequence of sequence of SEQ ID NO: 181, and a polypeptide comprising the amino acid sequence of SEQ ID NO: 182.
29. Isolated nucleic acid encoding the antibody according to any one of the preceding embodiments.
30. A host cell comprising the nucleic acid of embodiment 29.
- 15 31. A method of producing an antibody comprising culturing the host cell of embodiment 30 so that the antibody is produced.
32. The method of embodiment 32, further comprising recovering the antibody from the host cell.
- 20 33. A pharmaceutical formulation comprising the bispecific antibody according any one of embodiments 1 to 28 and a pharmaceutically acceptable carrier.
34. The bispecific antibody according any one of embodiments 1 to 28 for use as a medicament.
35. The bispecific antibody according any one of embodiments 1 to 28 for use in treating cancer.
- 25 36. The bispecific antibody according any one of embodiments 1 to 28 for use in treating an inflammatory or autoimmune disease.
37. Use of the bispecific antibody according any one of embodiments 1 to 28 in the manufacture of a medicament.
38. The use of embodiment 37, wherein the medicament is for treatment of cancer.

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39. The use of embodiment 37, wherein the medicament is for treatment of an inflammatory or autoimmune disease.
40. A method of treating an individual having cancer comprising administering to the individual an effective amount of the bispecific antibody according any one of embodiments 1 to 28.
41. A method of treating an individual having an inflammatory or autoimmune disease comprising administering to the individual an effective amount of the bispecific antibody according any one of embodiments 1 to 28.

The following examples and figures are provided to aid the understanding of the present invention, the true scope of which is set forth in the appended claims. It is understood that modifications can be made in the procedures set forth without departing from the spirit of the invention.

Description of the amino acid sequences

Anti-CCL2 antigen binding moieties (variable regions and hypervariable regions (CDRs)) binding to different epitopes:

SEQ ID NO:	33	heavy chain CDR-H1	CNT O888	SYGIS
SEQ ID NO:	34	heavy chain CDR-H2	CNT O888	GIPIFGTANYAQKFQG
SEQ ID NO:	35	heavy chain CDR-H3	CNT O888	YDGIYGELDF
SEQ ID NO:	36	light chain CDR-L1	CNT O888	RASQSVSDAYLA
SEQ ID NO:	37	light chain CDR-L2	CNT O888	DASSRAT
SEQ ID NO:	38	light chain CDR-L3	CNT O888	HQYIQLHSFT
SEQ ID NO:	39	heavy chain variable	CNT O888	QVQLVQSGAEVKKPGSSVKV SCKASG GTFSSYGISWVRQAPGQGLEWMGGIPI FGTANYAQKFQGRVTITADESTSTAYM

		domain VH		ELSSLRSEDТАVYYCARYDGIYGELDF WGQGTЛTVSS
SEQ ID NO:	40	light chain variable domain VL	CNT O888	EIVLTQSPATLSLSPGERATLSCRASQS VSDAYLAWYQQKPGQAPRLLIYDASS RATGVPARFSGSGSGTDFTLTISSELEPE DFAVYYCHQYIQLHSFTFGQGTKVEIK
SEQ ID NO:	41	heavy chain CDR-H1	Huma nized 11K2 (= 11K2)	DTYMH
SEQ ID NO:	42	heavy chain CDR-H2	Huma nized 11K2 (= 11K2)	RIDPANGNTKFDPKFQG
SEQ ID NO:	43	heavy chain CDR-H3	Huma nized 11K2 (= 11K2)	GVFGFFDY
SEQ ID NO:	44	light chain CDR-L1	Huma nized 11K2 (= 11K2)	KATEDIYNRLA
SEQ ID NO:	45	light chain CDR-L2	Huma nized 11K2 (= 11K2)	GATSLET
SEQ ID NO:	46	light chain CDR-L3	Huma nized 11K2 (= 11K2)	QQFWSAPYT
SEQ ID NO:	47	heavy chain variable domain VH	Huma nized 11K2 (= 11K2)	QVQLVQSGAEVKKPGSSVKVSCKASG LTISDTYMHWRQAPGGLEWMGRID PANGNTKFDPKFQGRVTITADTSTSTA YMEISSLRSEDТАVYYCARGVFGFFDY WGQGTTTVSS
SEQ ID NO:	48	light chain variable domain VL	Huma nized 11K2 (= 11K2)	DIQMTQSPSSLSASVGDRVTITCKATED IYNRLAWYQQKPGKAPKLLISGATSLE TGVPSRFSGSGSGTDYTLTISLQPEDF ATYYCQQFWSAPYTFGGGTKVEIK

CDR modified anti-CCL2 antigen binding moieties (variable regions and hypervariable regions (CDRs)):

Modified CNTO888

SEQ ID NO:	57	heavy chain CDR-H1	mutated variant CNTO888	SHYGXS wherein X is I or T
SEQ ID NO:	58	heavy chain CDR-H2	mutated variant CNTO888	GX ¹ IX ² IFX ³ TANYAQKFQG wherein X ¹ is V, I, or H, X ² is P or H, and X ³ is H or G
SEQ ID NO:	59	heavy chain CDR-H3	mutated variant CNTO888	YDAHYGELDF
SEQ ID NO:	60	light chain CDR-L1	mutated variant CNTO888	RASQHVSDAYLA
SEQ ID NO:	61	light chain CDR-L2	mutated variant CNTO888	DASDRAE
SEQ ID NO:	62	light chain CDR-L3	mutated variant CNTO888	HQYIHLHSFT
SEQ ID NO:	63	heavy chain FR-H1	mutated variant CNTO888	QVQLVQSGAEVKKPGSSVKVSCKA SGGTF
SEQ ID NO:	64	heavy chain FR-H2	mutated variant CNTO888	WVRQAPGQGLEWMG
SEQ ID NO:	65	heavy chain FR-H3	mutated variant CNTO888	RVTITADESTSTAYMELSSLRSED AVYYCAR
SEQ ID NO:	66	heavy chain FR-H4	mutated variant CNTO888	WGQGTLVTVSS
SEQ ID NO:	67	light chain FR-L1	mutated variant CNTO888	EIVLTQSPATLSLSPGERATLSC
SEQ ID NO:	68	light chain FR-L2	mutated variant CNTO888	WYQQKPGQAPRLLIY
SEQ ID NO:	69	light chain FR-L3	mutated variant CNTO888	GVPARFSGSGSGTDFTLTISSEPED FAVYYC
SEQ ID NO:	70	light chain FR-L4	mutated variant CNTO888	GQGTKVEIK

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SEQ ID NO:	71	heavy chain variable domain VH	mutated variant CNT0888 H0695	QVQLVQSGAEVKKPGSSVKVSCA SGGTFSHYGISWVRQAPGQGLEW MGGVPIFHTANYAQKFQGRVTITA DESTSTAYMELSSLRSED TAVYYC ARYDAHYGELDFWGQGTLVTVSS
SEQ ID NO:	72	heavy chain variable domain VH	mutated variant CNT0888 H0625	QVQLVQSGAEVKKPGSSVKVSCA SGGTFSHYGISWVRQAPGQGLEW MGGIIHIFHTANYAQKFQGRVTITA DESTSTAYMELSSLRSED TAVYYC ARYDAHYGELDFWGQGTLVTVSS
SEQ ID NO:	73	heavy chain variable domain VH	mutated variant CNT0888 H0634	QVQLVQSGAEVKKPGSSVKVSCA SGGTFSHYGTWVRQAPGQGLEW MGGIIHIFGTANYAQKFQGRVTITA DESTSTAYMELSSLRSED TAVYYC ARYDAHYGELDFWGQGTLVTVSS
SEQ ID NO:	74	heavy chain variable domain VH	mutated variant CNT0888 H0635	QVQLVQSGAEVKKPGSSVKVSCA SGGTFSHYGISWVRQAPGQGLEW MGGIIHIFGTANYAQKFQGRVTIT ADESTSTAYMELSSLRSED TAVYY CARYDAHYGELDFWGQGTLVTVS S
SEQ ID NO:	75	light chain variable domain VL	mutated variant CNT0888 L0616	EIVLTQSPATLSLSPGERATLSCRAS QHVSDAYLAWYQQKPGQAPRLLI YDASDRAEGVPARFSGSGSGTDFT LTISLEPEDFAVYYCHQYIHLHSFT FGQGTEVEIK

Modified humanized 11K2

SEQ ID NO:	76	heavy chain CDR-H1	mutated variant humanized 11K2	HTYMH
SEQ ID NO:	77	heavy chain CDR-H2	mutated variant humanized 11K2	RIDPXNHNTKFDPKFQG wherein X is D or E
SEQ ID NO:	78	heavy chain CDR-H3	mutated variant humanized 11K2	GVFGFFXH wherein X is D or E
SEQ ID NO:	79	light chain CDR-L1	mutated variant humanized 11K2	KAX ¹ EDIYNRX ² A wherein X ¹ is F or T and X ² is R or L

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SEQ ID NO:	80	light chain CDR-L2	mutated variant humanized 11K2	GATSLEH
SEQ ID NO:	81	light chain CDR-L3	mutated variant humanized 11K2	QQFXSAPYT wherein X is W or R
SEQ ID NO:	82	heavy chain FR-H1	mutated variant humanized 11K2	QVQLVQSGAEVKKPGSSVKVSCA SGLTIS
SEQ ID NO:	83	heavy chain FR-H2	mutated variant humanized 11K2	WVRQAPGQGLEWMG
SEQ ID NO:	84	heavy chain FR-H3	mutated variant humanized 11K2	RVTITADTSTSTAYMELSSLRSEDV AVYYCAR
SEQ ID NO:	85	heavy chain FR-H4	mutated variant humanized 11K2	WGQGTTVTVSS
SEQ ID NO:	86	light chain FR-L1	mutated variant 11K2	DIQMTQSPSSLSASVGDRVTITC
SEQ ID NO:	87	light chain FR-L2	mutated variant humanized 11K2	WYQQKPGKAPKLLIH
SEQ ID NO:	88	light chain FR-L3	mutated variant humanized 11K2	GVPSRFSGSGSGTDYTLTISSLQPED FATYYC
SEQ ID NO:	89	light chain FR-L4	mutated variant humanized 11K2	FGGGTKVEIK
SEQ ID NO:	90	heavy chain variable domain VH	mutated variant humanized 11K2 H1503	QVQLVQSGAEVKKPGSSVKVSCA SGLTISHTYMHWRQAPGQGLEW MGRIDPDNHNTKFDPKFQGRVTIT ADTSTSTAYMELSSLRSEDVAVYY CARGVFGFFDHWGQGTTVTVSS
SEQ ID NO:	91	heavy chain variable	mutated variant humanized	QVQLVQSGAEVKKPGSSVKVSCA SGLTISHTYMHWRQAPGQGLEW MGRIDPDNHNTKFDPKFQGRVTIT

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		domain VH	11K2 H1510	ADTSTSTAYMELSSLRSEDNAVYY CARGVFGFFEHWGQGTTVTVSS
SEQ ID NO:	92	heavy chain variable domain VH	mutated variant humanized 11K2 H1514	QVQLVQSGAEVKKPGSSVKVSCKA SGLTISHTYMHWRQAPGQGLEW MGRIDPENHNTKFDPKFQGRVTITA DTSTSTAYMELSSLRSEDNAVYYC ARGVFGFFEHWGQGTTVTVSS
SEQ ID NO:	93	light chain variable domain VL	mutated variant humanized 11K2 L1338	DIQMTQSPSSLSASVGDRVTITCKA FEDIYNRRAWYQQKPGKAPKLLIH GATSLEHGVPSRFSGSGSGTDYTLT ISSLQPEDFATYYCQQFWSAPYTFG GGTKVEIK
SEQ ID NO:	94	light chain variable domain VL	mutated variant humanized 11K2 L1201	DIQMTQSPSSLSASVGDRVTITCKA TEDIYNRLAWYQQKPGKAPKLLIH GATSLEHGVPSRFSGSGSGTDYTLT ISSLQPEDFATYYCQQFRSAPYTFG GGTKVEIK

Exemplary constant light chain regions:

SEQ ID NO: 95 exemplary human kappa light chain constant region

SEQ ID NO: 96 exemplary human lambda light chain constant region

5 Exemplary constant heavy chain regions:SEQ ID NO: 97 exemplary human heavy chain constant region derived from
IgG110 SEQ ID NO: 98 exemplary human heavy chain constant region derived from
IgG1 with mutations L234A, L235A and P329G (Fcγ receptor silenced)SEQ ID NO: 99 exemplary human heavy chain constant region derived from
IgG1 (SG1 -IgG1 allotype)15 SEQ ID NO: 100 exemplary human heavy chain constant region derived from
IgG1 with mutations (SG105-IgG1 allotype - Fcγ receptor silenced)SEQ ID NO: 101 SG1095-exemplary human heavy chain constant region
derived from IgG1 including the mutations (Kabat EU
numbering):

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- L235W/G236N/H268D/Q295L/A330K/K326T (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR);
- Q311R/P343R (suitable for increasing isoelectric point (pI) for enhancing uptake of antigen;
- N434A (suitable for increasing affinity to FcRn for longer plasma half-life of antibody; and
- Q438R/S440E (suitable for suppressing rheumatoid factor binding
- 10 SEQ ID NO: 102 SG1099-exemplary human heavy chain constant region derived from IgG1 including mutations (Kabat EU numbering):
Q311R/P343R (suitable for increasing pI for enhancing uptake of antigen)
- 15 SEQ ID NO: 103 SG1100-exemplary human heavy chain constant region derived from IgG1 including the mutations (Kabat EU numbering):
-Q311R/P343R (suitable for increasing pI for enhancing uptake of antigen);
- 20 -N434A (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and
-Q438R/S440E (suitable for suppressing rheumatoid factor binding)
- 25 CNTO888//11K2-WT IgG1 (exemplary bispecific CNTO888//11K2-WT IgG1 Crossmab)
- SEQ ID NO: 104 heavy chain 1- CNTO888//11K2-WT IgG1
- SEQ ID NO: 105 heavy chain 2- CNTO888//11K2-WT IgG1
- SEQ ID NO: 106 light chain 1- CNTO888//11K2-WT IgG1
- SEQ ID NO: 107 light chain 2- CNTO888//11K2-WT IgG1
- 30 CKLO2 – IgG1 (exemplary bispecific CKLO2 IgG1 Crossmab)
- SEQ ID NO: 108 heavy chain 1- CKLO2 IgG1
- SEQ ID NO: 109 heavy chain 2- CKLO2 IgG1
- SEQ ID NO: 110 light chain 1- CKLO2 IgG1

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SEQ ID NO: 111 light chain 2- CKLO2 IgG1

CKLO2 – SG1095 (= **P1AD8325**) (exemplary bispecific CLOK2 Crossmab including SG1095 Fc mutations)

5 SEQ ID NO: 112 heavy chain 1- CKLO2 – SG1095
 SEQ ID NO: 113 heavy chain 2- CKLO2 – SG1095
 SEQ ID NO: 114 light chain 1- CKLO2 – SG1095
 SEQ ID NO: 115 light chain 2- CKLO2 – SG1095

CKLO2 – SG1099 (exemplary bispecific CKLO2 Crossmab including SG1099 Fc mutations)

10 SEQ ID NO: 116 heavy chain 1- CKLO2 – SG1099
 SEQ ID NO: 117 heavy chain 2- CKLO2 – SG1099
 SEQ ID NO: 118 light chain 1- CKLO2 – SG1099
 SEQ ID NO: 119 light chain 2- CKLO2 – SG1099

15 CKLO2 – SG1100 (exemplary bispecific CKLO2 Crossmab including SG1100 Fc mutations)

SEQ ID NO: 120 heavy chain 1- CKLO2 – SG1100
 SEQ ID NO: 121 heavy chain 2- CKLO2 – SG1100
 SEQ ID NO: 122 light chain 1- CKLO2 – SG1100
 SEQ ID NO: 123 light chain 2- CKLO2 – SG1100

20 CKLO3 – SG1095 (exemplary bispecific CLOK3 Crossmab including SG1095 Fc mutations)

25 SEQ ID NO: 124 heavy chain 1- CKLO3 – SG1095
 SEQ ID NO: 125 heavy chain 2- CKLO3 – SG1095
 SEQ ID NO: 126 light chain 1- CKLO3 – SG1095
 SEQ ID NO: 127 light chain 2- CKLO3 – SG1095

CKLO3 – SG1099 (exemplary bispecific CKLO3 Crossmab including SG1099 Fc mutations)

30 SEQ ID NO: 128 heavy chain 1- CKLO3 – SG1099
 SEQ ID NO: 129 heavy chain 2- CKLO3 – SG1099
 SEQ ID NO: 130 light chain 1- CKLO3 – SG1099

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SEQ ID NO: 131 light chain 2- CKLO3 – SG1099

CKLO3 – SG1100 (exemplary bispecific CKLO3 Crossmab including SG1100 Fc mutations)

5 SEQ ID NO: 132 heavy chain 1- CKLO3 – SG1100
 SEQ ID NO: 133 heavy chain 2- CKLO3 – SG1100
 SEQ ID NO: 134 light chain 1- CKLO3 – SG1100
 SEQ ID NO: 135 light chain 2- CKLO3 – SG1100

Further anti-CCL2 antigen binding moieties:

10 SEQ ID NO: 136 heavy chain variable domain VH 2F2
 SEQ ID NO: 137 light chain variable domain VL 2F2
 SEQ ID NO: 138 heavy chain variable domain VH murine 11K2 (=11K2m)
 SEQ ID NO: 139 light chain variable domain VL murine 11K2 (=11K2m)
 SEQ ID NO: 140 heavy chain variable domain VH 1H11
 15 SEQ ID NO: 141 light chain variable domain VL 1H11

Exemplary CCL2 and homologs (without signal peptide):

SEQ ID NO: 142 exemplary human CCL2 (MCP1) - wild type (wt)
 SEQ ID NO: 143 exemplary human CCL2 (MCP1) – P8A variant
 SEQ ID NO: 144 exemplary human CCL2 (MCP1) – T10C variant
 20 SEQ ID NO: 145 exemplary human CCL8 (MCP2) – wild type (wt)
 SEQ ID NO: 146 exemplary human CCL8 (MCP2) – P8A variant
 SEQ ID NO: 147 exemplary human CCL7 (MCP3) - wild type (wt)
 SEQ ID NO: 148 exemplary human CCL13 (MCP4)- wild type (wt)
 SEQ ID NO: 149 exemplary cynomolgus CCL2 - wild type (wt)
 25 SEQ ID NO: 150 exemplary mouse CCL2- wild type (wt)

Further Exemplary constant heavy chain regions:

SEQ ID NO: 151 GG01 - exemplary human heavy chain constant region derived from IgG1 including the mutations (Kabat EU numbering):

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- L234Y/P238D/ T250V/V264I/T307P/A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR);
- Q311R/P343R (suitable for increasing isoelectric point (pI) for enhancing uptake of antigen);
- N434A (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and
- Q438R/S440E (suitable for suppressing rheumatoid factor binding)
- 10 SEQ ID NO: 152 GG02 - exemplary human heavy chain constant region derived from IgG1 including mutations (Kabat EU numbering):
- L234Y/P238D/T250V/V264I/T307P/A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR);
- Q311R/P343R (suitable for increasing isoelectric point (pI) for enhancing uptake of antigen);
- M428L/N434A/Y436T (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and
- Q438R/S440E (suitable for suppressing rheumatoid factor binding)
- SEQ ID NO: 153 GG03 -exemplary human heavy chain constant region derived from IgG1 (comprising-IgG1 allotype sequences) including the mutations (Kabat EU numbering):
- L234Y/P238D/T250V/V264I/T307P/A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR);
- Q311R/P343R (suitable for increasing isoelectric point (pI) for enhancing uptake of antigen);
- N434A (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and
- Q438R/S440E (suitable for suppressing rheumatoid factor binding)
- SEQ ID NO: 154 GG04 -exemplary human heavy chain constant region derived from IgG1 (comprising-IgG1 allotype sequences)

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including mutations (Kabat EU numbering):

-L234Y/P238D/T250V/V264I/T307P/A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR);

5 -Q311R/P343R (suitable for increasing isoelectric point (pI) for enhancing uptake of antigen);

-M428L/N434A/Y436T (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and

10 -Q438R/S440E (suitable for suppressing rheumatoid factor binding)

CKLO2 – GG01 (= **P1AF8137**) (exemplary bispecific CLOK2 Crossmab including GG01 Fc mutations)

SEQ ID NO: 155 heavy chain 1- CKLO2 – GG01

SEQ ID NO: 156 heavy chain 2- CKLO2 – GG01

15 SEQ ID NO: 157 light chain 1- CKLO2 – GG01

SEQ ID NO: 158 light chain 2- CKLO2 – GG01

CKLO2 – GG02 (= **P1AF8139**) (exemplary bispecific CLOK2 Crossmab including GG02 Fc mutations)

SEQ ID NO: 159 heavy chain 1- CKLO2 GG02

20 SEQ ID NO: 160 heavy chain 2- CKLO2 GG02

SEQ ID NO: 161 light chain 1- CKLO2 GG02

SEQ ID NO: 162 light chain 2- CKLO2 GG02

CKLO2 – GG03 (exemplary bispecific CLOK2 Crossmab including GG03 Fc mutations)

25 SEQ ID NO: 163 heavy chain 1- CKLO2 – GG03

SEQ ID NO: 164 heavy chain 2- CKLO2 – GG03

SEQ ID NO: 165 light chain 1- CKLO2 – GG03

SEQ ID NO: 166 light chain 2- CKLO2 – GG03

CKLO2 – GG04 (exemplary bispecific CKLO2 Crossmab including GG04 Fc mutations)

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SEQ ID NO: 167 heavy chain 1- CKLO2 – GG04

SEQ ID NO: 168 heavy chain 2- CKLO2 – GG04

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SEQ ID NO: 169 light chain 1- CKLO2 – GG04

SEQ ID NO: 170 light chain 2- CKLO2 – GG04

5 CKLO2 – GG03/GG04 (= **P1AF8140**) (exemplary bispecific CKLO2 Crossmab including GG03 Fc mutations in the Knob chain and including GG04 Fc mutations in Hole chain)

SEQ ID NO: 171 heavy chain 1- CKLO2 – GG03/GG04

SEQ ID NO: 172 heavy chain 2- CKLO2 – GG03/GG04

SEQ ID NO: 173 light chain 1- CKLO2 – GG03/GG04

SEQ ID NO: 174 light chain 2- CKLO2 – GG03/GG04

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P1AF8142 (CKLO2 – CB- SG1095) - (exemplary bispecific CKLO2 Contorsbody (CB) comprising only 2 polypeptide chains including SG1095 Fc mutations)

15 SEQ ID NO: 175 polypeptide chain 1- CKLO2 – CB- SG1095

SEQ ID NO: 176 polypeptide chain 2- CKLO2 – CB- SG1095

P1AF8143 (CKLO2 – CB- GG02)- (exemplary bispecific CKLO2 Contorsbody (CB) comprising only 2 polypeptide chains including GG02 Fc mutations)

20 SEQ ID NO: 177 polypeptide chain 1- CKLO2 – CB- GG02

SEQ ID NO: 178 polypeptide chain 2- CKLO2 – CB- GG02

25 **P1AG5853** (CKLO2 – CB- GG02-K447G) - (exemplary bispecific CKLO2 Contorsbody (CB) comprising only 2 polypeptide chains including GG02 Fc mutations and the mutation K447G)

SEQ ID NO: 179 polypeptide chain 1- CKLO2 – CB- GG02-KG

SEQ ID NO: 180 polypeptide chain 2- CKLO2 – CB- GG02-KG

30 **P1AG8317** (CKLO2 – CB- SG1095-K447G) - (exemplary bispecific CKLO2 Contorsbody (CB) comprising only 2 polypeptide chains including SG1095 Fc mutations and the mutation K447G)

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SEQ ID NO: 181 polypeptide chain 1- CKLO2 – CB- SG1095-KG

SEQ ID NO: 182 polypeptide chain 2- CKLO2 – CB- SG1095-KG

Exemplary Glycine-Serine Polypeptide linkers with a length of 10 amino acids:

5

SEQ ID NO: 183 polypeptide linker GSGGSGGSGG

SEQ ID NO: 184 polypeptide linker GSGGGSGGGG

SEQ ID NO: 185 polypeptide linker GSGGGGSGGG

SEQ ID NO: 186 polypeptide linker GSGGGSGGGG

10

SEQ ID NO: 187 polypeptide linker GSGGGGSGGG

SEQ ID NO: 188 polypeptide linker GSGGGGSGGG

SEQ ID NO: 189 polypeptide linker GGGSGGSGGG

SEQ ID NO: 190 polypeptide linker GGGSGGSGGG

SEQ ID NO: 191 polypeptide linker GGGSGGSGGG

15

Designation monospecific unmodified anti-CCL2 antibodies/antigen binding moieties which were used for the anti-CCL2 bispecific antibodies described herein

Antibody/antigen binding site	Alias	VH/VL
1A4	CCL2-0008	SEQ ID NO:8/ SEQ ID NO:9
1A5	CCL2-0009	SEQ ID NO:15/ SEQ ID NO:16
1G9	CCL2-0010	SEQ ID NO:23/ SEQ ID NO:24
2F6	CCL2-0014	SEQ ID NO:31/ SEQ ID NO:32
CNT0888	CCL2-0004	SEQ ID NO:39/ SEQ ID NO:40
Humanized 11K2 (=11K2)	CCL2-0002	SEQ ID NO:47/ SEQ ID NO:48
ABN912	CCL2-0003	SEQ ID NO:55/ SEQ ID NO:56

20

Designation bispecific anti-CCL2 with *unmodified VH/VL* as Crossmabs (see WO 2016/016299) with either IgG1 or IgG1 including mutations L234A, L235A and P329G (PGLALA)

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Bispecific anti-CCL2 Antibodies	Alias
11K2//1G9-WT IgG1	CCL2-0049
11K2//1G9-PGLALA	CCL2-0043
CNTO888//11K2-WT IgG1	CCL2-0048
CNTO888//11K2-PGLALA	CCL2-0042
CNTO888//1G9-WT IgG1	CCL2-0051
CNTO888//1G9-PGLALA	CCL2-0045
CNTO888//1A5-WT IgG1	CCL2-0050
CNTO888//1A5-PGLALA	CCL2-0044
1A5//1G9-WT IgG1	CCL2-0052
1A5//1G9-PGLALA	CCL2-0046
11K2//2F6-WT IgG1	CCL2-0056
11K2//2F6-PGLALA	CCL2-0053
ABN912//11K2-WT IgG1	CCL2-0047
ABN912//11K2-PGLALA	CCL2-0041
1A4//2F6-WT IgG1	CCL2-0057
1A4//2F6-PGLALA	CCL2-0054
1A5//2F6-WT IgG1	CCL2-0058
1A5//2F6-PGLALA	CCL2-0055

Designation bispecific antibodies with modified VH/VL as Crossmabs (see WO 2016/016299). Depending on the heavy chain constant domain used (e.g. IgG1 wild type, PGLALA, SG1095, SG1099, SG1100, GG01, GG02, GG03, GG04, GG02-KG), the suffixes IgG1 wild type, PGLALA, SG1095, SG1099, 1100, GG01, GG02, GG03, GG04, GG02-KG) are added

5

Bispecific CCL2 antibody (and parental monospecific)	Name of variable region (VHs/VLs)	VH (SEQ ID NO)	VL (SEQ ID NO)	VH (SEQ ID NO)	VL (SEQ ID NO)
Humanized 11K2 parental	11K2 VH/11K2 VL	47	48	-	-
CNTO888 parental	CNTO888 VH /CNTO888VL			39	40
CKLO01	11K2H1503/11K2L1338//CNTO888H0695/CNTO888L0616	90	93	71	75

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Bispecific CCL2 antibody (and parental monospecific)	Name of variable region (VHs/VLs)	VH (SEQ ID NO)	VL (SEQ ID NO)	VH (SEQ ID NO)	VL (SEQ ID NO)
CKLO02	11K2H1510/11K2L1338//CNT0888H0695/CNT0888L0616	91	93	71	75
CKLO03	11K2H1503/11K2L1201//CNT0888H0695/CNT0888L0616	90	94	71	75
CKLO04	11K2H1503/11K2L1201//CNT0888H0625/CNT0888L0616	90	94	72	75
CKLO05	11K2H1503/11K2L1338//CNT0888H0634/CNT0888L0616	90	93	73	75
CKLO06	11K2H1503/11K2L1201//CNT0888H0634/CNT0888L0616	90	94	73	75
CKLO07	11K2H1514/11K2L1338//CNT0888H0634/CNT0888L0616	92	93	73	75
CKLO08	11K2H1510/11K2L1338//CNT0888H0634/CNT0888L0616	91	93	73	75
CKLO09	11K2H1503/11K2L1338//CNT0888H0625/CNT0888L0616	90	93	72	75
CKLO10	11K2H1514/11K2L1338//CNT0888H0625/CNT0888L0616	92	93	72	75
CKLO11	11K2H1510/11K2L1338//CNT0888H0625/CNT0888L0616	91	93	72	75
CKLO12	11K2H1503/11K2L1338//CNT0888H0635/CNT0888L0616	90	93	74	75
CKLO13	11K2H1503/11K2L1201//CNT0888H0635/CNT0888L0616	90	94	74	75
CKLO14	11K2H1514/11K2L1338//CNT0888H0635/CNT0888L0616	92	93	74	75
CKLO15	11K2H1510/11K2L1338//CNT0888H0635/CNT0888L0616	91	93	74	75

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Bispecific CCL2 antibody (and parental monospecific)	Name of variable region (VHs/VLs)	VH (SEQ ID NO)	VL (SEQ ID NO)	VH (SEQ ID NO)	VL (SEQ ID NO)
CKLO16	11K2H1514/11K2L1338//CNT0888H0695/CNT0888L0616	92	93	71	75

Examples:**Example A-1 monospecific anti-CCL2 antibodies**

Generation of monospecific anti-CCL2 antibodies and CCL2 antigen

5 **Recombinant DNA techniques**

Standard methods were used to manipulate DNA as described in Sambrook, J. et al., Molecular cloning: A laboratory manual; Cold Spring Harbor Laboratory Press, Cold Spring Harbor, New York, 1989. The molecular biological reagents were used according to the manufacturer's instructions.

10 **Gene and oligonucleotide synthesis**

Desired gene segments were prepared by chemical synthesis at Geneart GmbH (Regensburg, Germany). The synthesized gene fragments were cloned into an E. coli plasmid for propagation/amplification. The DNA sequences of subcloned gene fragments were verified by DNA sequencing. Alternatively, short synthetic DNA fragments were assembled by annealing chemically synthesized oligonucleotides or via PCR. The respective oligonucleotides were prepared by metabion GmbH (Planegg-Martinsried, Germany)

15

Description of the basic/standard mammalian expression plasmid

For the expression of a desired gene/protein (e.g. full length antibody heavy chain, full length antibody light chain, or a CCL-2 molecule, a transcription unit comprising the following functional elements is used:

20

- the immediate early enhancer and promoter from the human cytomegalovirus (P-CMV) including intron A,

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- a human heavy chain immunoglobulin 5'-untranslated region (5'UTR),
 - a murine immunoglobulin heavy chain signal sequence,
 - a gene/protein to be expressed (e.g. full length antibody heavy chain or antibody light chain or CCL-2 molecule), and
- 5 - the bovine growth hormone polyadenylation sequence (BGH pA).

Beside the expression unit/cassette including the desired gene to be expressed the basic/standard mammalian expression plasmid contains

an origin of replication from the vector pUC18 which allows replication of this plasmid in E. coli, and

- 10 a beta-lactamase gene which confers ampicillin resistance in E. coli.

Generation of expression plasmids for recombinant monoclonal antibodies and CCL-2 molecules

- 15 The expression plasmids for the transient expression of monoclonal antibodies and CCL-2 antigens comprised besides the respective expression cassettes an origin of replication from the vector pUC18, which allows replication of this plasmid in E. coli, and a beta-lactamase gene which confers ampicillin resistance in E. coli.

The transcription unit of the respective immunoglobulin HC or LC or CCL-2 molecule comprised the following functional elements:

- 20 - the immediate early enhancer and promoter from the human cytomegalovirus (P-CMV) including intron A,
- a human heavy chain immunoglobulin 5'-untranslated region (5'UTR),
 - a murine immunoglobulin heavy chain signal sequence, and
 - the bovine growth hormone polyadenylation sequence (BGH pA).

The respective antibodies 1A4, 1A5, 1G9, 2F6, CNTO888, murine and humanized 11K2, ABN912, based on their VH and VL were generated as IgG1 wild type and as IgG1 PGLALA/effector silent Fc with kappa light chain

Transient expression and purification

5 The recombinant production was performed by transient transfection of HEK293 cells (human embryonic kidney cell line 293-derived) cultivated in F17 Medium (Invitrogen Corp.). For the production of monoclonal antibodies, cells were co-transfected with plasmids containing the respective immunoglobulin heavy- and light chain. For transfection "293-Fectin" Transfection Reagent (Invitrogen) was
10 used. Transfection was performed as specified in the manufacturer's instructions. Cell culture supernatants were harvested three to seven (3-7) days after transfection. Supernatants were stored at reduced temperature (e.g. -80°C).

General information regarding the recombinant expression of human immunoglobulins in e.g. HEK293 cells is given in: Meissner, P. et al., Biotechnol.
15 Bioeng. 75 (2001) 197-203.

Antibodies were purified from cell culture supernatants by affinity chromatography using MabSelectSure-Sepharose™ (GE Healthcare, Sweden) and Superdex 200 size exclusion (GE Healthcare, Sweden) chromatography. Briefly, sterile filtered cell culture supernatants were captured on a MabSelect SuRe resin equilibrated with PBS
20 buffer (10 mM Na₂HPO₄, 1 mM KH₂PO₄, 137 mM NaCl and 2.7 mM KCl, pH 7.4), washed with equilibration buffer and eluted with 25 mM sodium citrate at pH 3.0. The eluted protein fractions were pooled, neutralized with 2M Tris, pH 9.0 and further purified by size exclusion chromatography using a Superdex 200 26/60 GL (GE Healthcare, Sweden) column equilibrated with 20 mM histidine, 140 mM NaCl,
25 pH 6.0. Size exclusion chromatography fractions were analysed by CE-SDS (Caliper Life Science, USA) and antibody containing fractions were pooled and stored at -80°C.

Generation of recombinant CCL2

Wild type CCL2 can exist as monomer but actually can also form dimers at
30 physiological concentrations. This monomer-dimer equilibrium might be different and has to be carefully taken into account for all *in vitro* experiments described where different concentrations might be used. To avoid any uncertainties, we generated point mutated CCL2 variants: The P8A variant of CCL2 carries a mutation in the

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dimerization interface resulting in an inability to form a dimer leading to a defined, pure CCL2 monomer. In contrast, the T10C variant of CCL2 results in a fixed dimer of CCL2 (J Am Chem Soc. 2013 Mar 20;135(11):4325-32).

5 The respective soluble CCL2 protein (wild type, P8A or T10C variants) was purified from cell culture supernatants by cation exchange chromatography using SP-Sepharose HP (GE Healthcare, Sweden) and Superdex 200 size exclusion (GE Healthcare, Sweden) chromatography. Briefly, sterile filtered cell culture supernatants were diluted with 10 mM KH₂PO₄, pH 5.0 to adjust conductivity < 4 mS/cm. The diluted supernatant was loaded on SP-Sepharose resin equilibrated with
10 10 mM KH₂PO₄, pH 5.0, washed with equilibration buffer and eluted using a gradient to 10 mM KH₂PO₄, 1 M NaCl, pH 5.0. The eluted protein fractions were pooled and further purified by size exclusion chromatography using a Superdex 200 16/60 GL (GE Healthcare, Sweden) column equilibrated with 20 mM histidine, 140 mM NaCl, pH 6.0. Size exclusion chromatography fractions were analyzed by SDS-
15 PAGE and analytical high performance size exclusion chromatography. CCL2 containing fractions were pooled and stored at -80°C.

Functional characterization (binding)

A T200 instrument was mounted with a Biacore Series S Sensor Chip CM5. The system buffer was HBS-ET (10 mM HEPES (pH 7.4), 150 mM NaCl, 1 mM EDTA,
20 0.05 % (w/v) P20). The system was set to 37 °C. For each measurement the sample buffer was the system buffer, additionally supplemented with 1 mg/ml CMD (Carboxymethyl dextran, Fluka).

An antibody capture system was established. 14000 GARFcγ (goat anti rabbit Fcγ, 111-005-046, Jackson ImmunoResearch) were immobilized at 25 °C at 25 µg/ml in
25 10 mM sodium acetate buffer pH 5.0, by EDC/NHS coupling as described by the manufacturer. The capture system was regenerated at 20 µl/min by a 15 sec injection with HBS buffer (100 mM HEPES pH 7.4, 1.5 M NaCl, 0.05 % (w/v) Tween 20), a 1 min injection with 10 mM glycine buffer pH 2.0 followed by two injections for 1 min with 10 mM glycine buffer pH 2.25. In another embodiment murine monoclonal
30 antibodies were captured on the biosensor by immobilizing 12700 RU polyclonal rabbit anti mouse (RAMIgG, GE Healthcare) antibodies on a Biacore Series CM5 sensor like described above. The sensor was regenerated by a 3 min injection of 10 mM glycine buffer pH 1.7.

Antibody clone supernatants were diluted 1:2 in system buffer and were captured for 1 min at 5 μ l/min. After antibody capturing the system was washed by 2.5-fold concentrated system buffer for 30 sec at 80 μ l/min followed by 2 min baseline stabilization. Analyte kinetics were performed at 30 μ l/min. As analyte in solution wt human CCL2 or monomeric CCL2 P8A variant CCL2 were used. Analytes were injected at 90 nM highest concentration. The analyte contact time was 3 min and the dissociation time was 10 min. The Biaevaluation software V.3.0 was used according to the instructions of the manufacturer GEHC. A 1:1 binding model with RMAX local was applied to apparently estimate kinetic rates.

Binding of antibodies to wild type (wt) human CCL2 and human CCL2 P8A variant (monomer)

Antibody	alias	KD [nM] wt human CCL2	T1/2 [min]	KD [nM] monomeric human CCL2	T1/2 [min]
1A4	CCL2-0008	0.073	100	0.059	174
1A5	CCL2-0009	0.024	160	0.046	137
1G9	CCL2-0010	0.062	177	0.051	218
2F6	CCL2-0014	0.059	52	0.091	47
murine 11K2	X-0048	0.35	19	0.011	518
humanized 11K2 (=11K2)	CCL2-0002	0.028	118	0.035	116
AB912	CCL2-0003	0.036	33	0.046	25
CNT0888	CCL2-0004	0.026	94	0.054	44

Summary pH dependent CCL2 binding kinetics obtained from SPR analysis I

A T200 instrument was mounted with a Biacore Series S Sensor Chip CM5. The system buffer was HBS-ET (10 mM HEPES (pH 7.4), 150 mM NaCl, 1 mM EDTA, 0.05 % (w/v) P20). In other embodiments the pH of the system buffers was set to pH 8.3, pH 7.9, pH 7.4, pH 7.1, pH 6.7, pH 6.3, pH 5.9, pH 5.5. The system was set to 25 °C. For each measurement the sample buffer was the system buffer, additionally supplemented with 1 mg/ml CMD (Carboxymethyldextran, Fluka).

An antibody capture system was established. 13000 MAb<h-Fc-pan>M-R10Z8E9-IgG (Roche) were immobilized at 25 °C at 18 μ g/ml in 10 mM sodium acetate buffer pH 5.0, by EDC/NHS coupling as described by the manufacturer. The capture system was regenerated by an injection at 20 μ l/min with HBS buffer (100 mM HEPES pH 7.4, 1.5 M NaCl, 0.05 % (w/v) Tween 20), followed by a 1 min 15 sec injection with

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10 mM NaOH and two 10 mM glycine buffer pH 2.5 injections for 1 min. Antibodies were captured were injected for 30 sec at 10 μ l/min at 80 nM concentration diluted in the respective system buffer. After antibody capturing the system was washed by 2.5-fold concentrated system buffer for 30 sec at 50 μ l/min followed by 2 min baseline stabilization. Concentration-dependent analyte series were injected in 1:3 dilution steps, from 0 nM (buffer control) 0.4 nM, 1.1 nM, two injections at 3.3 nM, 30 nM. The analyte contact time was 3 min and the dissociation time was 10 min. Analyte kinetics were performed at 50 μ l/min.

Human antibodies were captured as ligands on the sensor surface:

- Human normal IgG as positive control (H-N-IgG, Id.: 11717570, Roche),
- anti-human CCL2 mAb (humanized 11k2: CCL2-0002),
- anti-human CCL2 mAb (AB912, CCL2-0003), and
- anti-human CCL2 mAb (CNTO888, CCL2-0004);
- system buffer as negative control.

The Biaevaluation software V.3.0 was used according to the instructions of the manufacturer GEHC. A 1:1 binding model with R_{MAX} local was applied to determine kinetic rates.

	humanized 11K2 CCL2-0002		ABN912 CCL2-0003		CNTO888 CCL2-0004	
pH	KD [nM]	t $\frac{1}{2}$- diss. [min]	KD [nM]	t $\frac{1}{2}$- diss. [min]	KD [nM]	t $\frac{1}{2}$- diss. [min]
8.3	0.003	1155	0.004	35	0.01	135
7.9	0.02	165	0.004	25	0.01	138
7.4	0.02	163	0.01	33	0.02	130
7.1	0.01	215	0.02	20	0.02	124
6.7	0.01	292	0.2	8	0.03	103

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	humanized 11K2 CCL2-0002		ABN912 CCL2-0003		CNTO888 CCL2-0004	
6.3	0.003	1155	1	3	0.02	128
5.9	0.01	287	13	1	0.04	61
5.5	0.01	118	2000	0.03	0.06	31

Crossreactivity CCL homologs

As CCL2 (MCP-1) has high homology to CCL7 (MCP-3), CCL8 (MCP-2), CCL13 (MCP-4), and these CCL chemokines are able to bind to CCR2, the binding of anti-CCL2 antibodies to these homologs was assessed. Results are shown in Figure 1. With the exception of CNTO888 which was described to have selectivity to CCL2 (Mol Immunol. 2012 Jun;51(2):227-33), the other antibodies tested bound to either CCL7 or CCL8 (showed cross-reactivity to either CCL7 or CCL8).

Biacore assay method: The binding of anti-CCL2 antibodies to the CCL homologs e.g. CCL2 (MCP-1), CCL8 (MCP-2), CCL7 (MCP-3), and CCL13 (MCP-4) were assessed at 25°C using Biacore T200 instrument (GE Healthcare). Mouse anti-human IgG (Fc) (GE Healthcare) was immobilized on each flow cells of a CM4 sensor chip using amine coupling kit (GE Healthcare) according to the recommended settings by the manufacturer. Antibodies and analytes were diluted into ACES pH 7.4 buffer (20 mM ACES, 150 mM NaCl, 1 mg/ml BSA, 0.05% Tween 20, 0.005% NaN₃). Antibodies were captured onto the anti-Fc sensor surfaces, then recombinant human CCL homologs proteins was injected over the flow cell at 5 nM and 20 nM. Wild type CCL2 (MCP-1), CCL8 (MCP-2), CCL7 (MCP-3), and CCL13 (MCP-4) were commercially available from R&D Systems, whereas monomer CCL2 (P8A variant) was in-house generated antigen. Sensor surface was regenerated each cycle with 3M MgCl₂. Binding sensorgram was processed using Biacore T200 Evaluation software, version 2.0 (GE Healthcare).

Functional characterization (biological)**CCR2 signaling I – Calcium flux assay**

THP-1 (human acute monocytic leukemia cell line; ATCC TIB-202) cells were cultivated in RPMI 1640, 10% FBS, 1 mM sodium pyruvate, 10 mM HEPES, 50 μ M β -mercaptoethanol (supplier Thermo Fisher Scientific). On the assay day the cell density was adjusted to 8.33×10^5 cells/ml in 25.8 ml assay medium (RPMI 1640 w/o FBS). FLIPR® Calcium Calcium 4 Assay Kit, Cat# R8142,

A dye loading solution was prepared by mixing two vials of component A with 20 ml component B (HBSS buffer plus 20 mM HEPES, pH 7.4) according to the instructions of the manufacturer Molecular Devices. 516 μ l 1 M Hepes (final assay concentration: 10 mM) is added followed by 516 μ l 250 mM probenecid (final assay concentration: 2.5 mM). For the stock solution dissolve 65.4 mg probenecid (Sigma P8761) in 465 μ l 1 N NaOH and add 465 μ l 1x HBSS (Thermo Fisher Scientific). 25.8 ml loading buffer was mixed with 25.8 ml assay medium with cells sufficient for e.g. four microtiter plates (52.6 ml volume is needed; 10^6 THP-1/ml). 120 μ l cell suspension in loading buffer was transferred to each well of a black F-bottom 96-well cell culture plate. The plates were incubated at room temperature for 3 – 4 hours.

In the meantime, the antibody and the ligand solution were prepared. Eight concentrations of each antibody from 30 μ g/ml to 0.025 μ g/ml (no serial dilution, final concentration in wells) have been tested. Each concentration was tested on two plates. All dilutions were prepared in assay medium as 10-fold concentrated solution. As reference antibody human CCL2/JE/MCP-1 Antibody (R&D Systems Cat# MAB279) was used. Ligand CCL2 (R&D Systems Cat#279-MC-10) was prepared by dissolving 50 μ g CCL2 lyophilisate in 500 μ l RPMI 1640 (100 μ g/ml) and transferring 400 μ l into 10 ml assay medium (4 μ g/ml stock solution). As stimulation control ionomycin (Sigma Cat# I-0634) was used (1 mg ionomycin dissolved in 1340 μ l DMSO (Sigma Cat# D-8779), 1 mM). 10 μ l of the 1mM stock solution was diluted in 1990 μ l assay medium (5 μ M, final assay concentration 500 nM). 100 μ l was pipetted in the corresponding control wells of the polypropylene MTP.

The antibody dilutions and CCL2 were preincubated in two V-shape polypropylene 96 well plates. 50 μ l of the 4 μ g/ml stock solution CCL2 (final 400 ng/ml CCL2) and 50 μ l of the 10-fold concentrated antibody dilution were pipetted into the well. Plates were incubated for 30 - 60 min at room temperature.

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After incubation, the cell plate and the compound plate were transferred directly to the FlexStation® 3 (Molecular Devices) read position and the calcium assay was performed as described in the system manual (excitation 485 nm, emission 525 nm). The read out was done at several seconds interval.

5 **Results:**

Table 1: 40 ng/ml PMA and 4 μ M ionomycin were used as positive controls. The table includes mean of EC₅₀ of n=2.

Anti-CCL2 antibodies		Inhibition of CCR2 signaling	
Antibody	Alias	EC ₅₀ [μ g/ml]	EC ₅₀ [nM]
1A4	CCL2-0008	4.2	28.0
1A5	CCL2-0009	2.2	14.6
1G9	CCL2-0010	2.4	16
2F6	CCL2-0014	8.7	3.9
Mab279 (R&D)	Commercial reference	2.6	17.4
murine 11K2 (11K2m)	X-0048	4.5	30.0
Humanized 11K2 (11K2)	CCL2-0002	2.1	14.0
AB912	CCL2-0003	1.9	12.7
CNT0888	CCL2-0004	2.7	18

Potency of anti-CCL2 antibodies to inhibit CCL2-induced internalization of the CCR2 receptor expressed on monocytes

To prevent the ligand-induced CCR2 internalization on myeloid cells we set up an in vitro assay and characterized anti-CCL2 antibodies. Monocytes were isolated from peripheral blood of healthy donors by magnetic separation using a commercial

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kit (Stemcell, cat no. #15068). For blocking of FcγRs, monocytes were pre-incubated with normal human IgG (*Privigen*, CSL Behring) at a final concentration of 500µg/ml on ice for 50 min in FACS buffer (PBS + 0.2%BSA). Cells were then centrifuged for 10 min (300xg, 4°C), washed one more time with FACS buffer and stored on ice. Anti-CCL2 antibody dilutions (50µl each) were prepared (in parallel approaches at 4°C and 37°C) in 96 U-bottom wells (BD). Monocytes were split, re-suspended in medium (RPMI 1640; 10%FCS; 2mM L-Glutamine) and incubated at 4°C and 37°C, respectively, until further usage. Recombinant CCL2 (50µl; at a final concentration of 100ng/ml) was added to the prepared antibody dilutions (at variable concentrations) both at 4°C and 37°C. 100µl monocyte suspension (2x10⁵ cells/well) was added to the CCL2/anti-CCL2 mixes at a total volume of 200µl and cells were incubated at 4°C and 37°C for 1 h 30min before centrifugation at 300xg, 4°C. From now on all steps were conducted with pre-cooled buffers: cells were washed with 250µl FACS buffer and additionally, cells were stained against CCR2 receptor (using a commercial CCR2-APC conjugate or appropriate isotype ctrl-APC according standard FACS protocols: Aliquots were stained with 5µl/10⁶cell with CD192 (CCR2) APC (BioLegend, #357208, clone K036C2/ mIgG2a κ) as well as an appropriate isotype ctrl antibody: 20µl/10⁶cell mIgG2a k APC BD Biosciences, #400222, clone MOPC-173).

Then the receptor expression was analyzed on a FACS Canto II and the CCR2 internalization was calculated as follows:

- No internalization: Cells analyzed in the absence of ligand (rec. CCL2) incubation.
- 100 % internalization: Maximally reduced CCR2 expression level on cells previously incubated with rec. CCL2

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Anti-CCL2 antibodies		Inhibition of CCR2 internalization	
Antibody	Alias	EC50 [$\mu\text{g/ml}$]	EC50 [nM]
1A4	CCL2-0008	2.52	16.81
1A5	CCL2-0009	2.37	15.77
1G9	CCL2-0010	2.16	14.42
2F6	CCL2-0014	2.41	1.09
11K2 (murine)	X-0048	1.98	13.19
AB912	CCL2-0003	1.99	13.25
CNTO888	CCL2-0004	2.00	13.36
Mab279 (R&D)	Commercial reference	1.98	13.22

Inhibition of CCL2-mediated chemotaxis on human THP-1 cells

- The migration of CCR2⁺ THP1 cells towards a CCL2 gradient was tested as follows. Monocytic THP1 cells (ATCC® TIB-202™) were cultured in RPMI 1640 medium (PAN, cat.no. # P04-17500) supplemented with FCS and L-Glutamine. Cells were normally passaged two to three times prior to use in the migration assay and then starved overnight in media with reduced FCS content (1.5% instead of 10% FCS). Cells were counted and incubated with 10 $\mu\text{g/ml}$ normal human IgG (Invitrogen, cat.no.# 12000; to block Fc γ R_s) for 15 minutes at room temperature.
- In the meantime, anti-CCL2 antibodies (and/or controls) were added to the lower chamber of a HTS Transwell 96well plate system (Corning, cat.no. #3386; 3 μm pore size) containing serum-free media with 25 ng/ml rhCCL-2 (R&D Systems, cat.no. #279-MC). Then the insert-plates were stuck into the lower-chamber-plate and 75 μl (1.5×10^5 cells) of the above mentioned cell-suspension (including the IgG-block) were added with or without 5 $\mu\text{g/ml}$ antibody/isotype into each insert. Plates were covered and incubated over night at 37°C in an CO₂ incubator (5% CO₂).

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The insert-plate was removed and Cell-titer-glo substrate (Promega, cat.no. # G758) was added to each well of lower-chamber-plate to measure viability of migrated cells. After incubation for 1 hour on a shaker with 300 rpm (cover plate sealed), 200 µl of each well were transferred to a Microfluor black 96well-plate (VWR, cat.no.# 735-0527) and luminescence was measured (luminescence-reader e.g. Bio-Tek, Tecan). Fold change was calculated as the ratio between number of migrated cells (Cell Titer Glo, RLU) with IgG control antibody and anti-CCL2 antibodies. Shown in the following Table 2 are the results of 5-10 replicates per condition:

Table 2

Antibody	Alias	THP1 chemotaxis [fold change compared to IgG control]
1A4	CCL2-0008	4.5
1A5	CCL2-0009	3.6
1G9	CCL2-0010	0.9
2F6	CCL2-0014	6.7
Mab279 (R&D)	-	3.7
Murine 11K2 (11K2m)	X-0048	6.9
Humanized 11K2 (11K2)	CCL2-0002	7.2
ABN912	CCL2-0003	6.5
CNT0888	CCL2-0004	4.9

Evaluation of human CCL2 immune complex sweeping with monospecific (monoparatopic) anti-CCL2 antibodies in mice

To evaluate the ability of monoparatopic antibodies to form immune complex with wild type human CCL2, pre-formed immune complexes consisting of anti-CCL2 monoparatopic antibody (20mg/kg) and wild type human CCL2 (0.1mg/kg) were

administered at a single dose of 10 ml/kg into the caudal vein of human FcRn transgenic mice (B6.Cg-*Fcgrt*^{tm1Dcr}Tg(FCGRT)32Dcr/DcrJ, Jackson Laboratory). Blood was collected 5 minutes, 7 hours, 1 day, 2 days, 3 days and 7 days after administration. Serum was prepared by centrifuging the blood immediately at 14,000 rpm for 10 minutes in 4°C. The serum was stored at or below -80°C until measurement. The monoparatopic antibodies tested are listed in the Table 3 below. Antibodies with SG1 Fc have Fc gamma receptor binding similar to wild-type while antibodies with SG105 Fc are Fc gamma receptor binding silent.

The effect of immune complex sweeping of each anti-CCL2 monoparatopic antibody on hCCL2 clearance *in vivo* were assessed by comparing anti-CCL2 antibody with Fc gamma receptor binding (SG1, = IgG1 wild type with intact Fc gamma receptor binding; solid line) and anti-CCL2 antibody with Fc gamma receptor binding silent (SG105, = IgG1 with no Fc gamma receptor binding; dotted line), as shown in Figure². The respective figures 2a to 2g show the serum concentration of hCCL2 over time after injection of the pre-formed immune complexes consisting of hCCL2 and the respective anti-CCL2 antibody (with the two different Fc parts: SG1 = IgG1 wild type with intact Fc gamma receptor binding and SG105 = IgG1 with no Fc gamma receptor binding) into FcRn transgenic mice. The antibody profiles were analyzed by non-compartmental analysis using Phoenix 64 (Pharsight/ Certara). The AUCinf was estimated by linear-log trapezoidal rule extrapolated to infinity. Clearance values are defined as Dose/AUCinf. This difference in clearance was also expressed as fold change, which is calculated by dividing the hCCL2 clearance of antibodies with Fc gamma receptor binding (SG1) by the hCCL2 clearance of antibodies with Fc gamma receptor binding silent (SG105) (Table 3 below). The data in the Table 3 below indicates that the clearance of human CCL2 by Fc gamma receptor binding antibodies (SG1 = IgG1 wild type with intact Fc gamma receptor binding) was similar to that by Fc gamma receptor binding silent antibodies (SG105, with no Fc gamma receptor binding) for all the monoparatopic antibodies tested. This suggests that immune complex-mediated sweeping of CCL2 by the tested monoparatopic antibodies was not efficient.

Table 3: Clearance values of wild type CCL2 after administration of pre-formed immune complex of anti-CCL2 monospecific antibody (20mg/kg) and wild type human CCL2 (0.1mg/kg) (either IgG1 wild type (SG1) or IgG1 Fc receptor silenced (SG105))

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	Clearance (ml/day/kg)	Fold Change (wild type IgG1 (SG1) vs Fc receptor silenced IgG1 (SG105))
CNTO888-SG1	14.05	1.60
CNTO888-SG105	8.80	
11K2-SG1	80.60	1.69
11K2-SG105	47.83	
ABN912-SG1	67.06	0.99
ABN912-SG105	67.84	
1A4-SG1	38.93	1.66
1A4-SG105	23.39	
1A5-SG1	20.08	0.95
1A5-SG105	21.14	
1G9-SG1	14.02	0.87
1G9-SG105	16.07	
2F6-SG1	21.49	1.03
2F6-SG105	20.94	

Measurement of total human CCL2 concentration in serum by electrochemiluminescence (ECL)

The concentration of total human CCL2 in mouse serum was measured by ECL. 3ug/mL of anti-CCL2 antibody (F7 (Biolegend) or clone MAB679 (R&D Systems)) was immobilized onto a MULTI-ARRAY 96-well plate (Meso Scale Discovery) overnight before incubating in blocking buffer for 2 hours at 30°C. Anti-CCL2 MAB679 was used as capture antibody for samples containing humanized 11K2, 1A4 or 1A5 antibodies. Anti-CCL2 clone 5D3-F7 was used for samples containing ABN912, CNTO888, 1G9, 2F6H antibodies. Human CCL2 calibration curve samples, quality control samples and mouse serum samples were prepared by diluting in dilution buffer and incubating with excess drug for 30 minutes at 37°C. After that, the samples were added onto anti-CCL2-immobilized plate, and allowed to bind for 1 hour at 30°C before washing. Next, SULFO TAG NHS-ester (Meso Scale Discovery) labelled anti-human Fc (clone: JDC-10, SouthernBiotech) was added and the plate was incubated for 1 hour at 30°C before washing. Read Buffer T (x4) (Meso Scale Discovery) was immediately added to the plate and signal was detected by SECTOR Imager 2400 (Meso Scale Discovery). The human CCL2 concentration was calculated based on the response of the calibration curve using the analytical software SOFTmax PRO (Molecular Devices).

Measurement of anti-CCL2 antibody concentration in serum by enzyme-linked immunosorbent assay (ELISA)

The concentration of anti-CCL2 antibody in mouse serum was measured by ELISA. Anti-human IgG kappa-chain (Antibody Solutions) was dispensed onto a Nunc MaxiSorp plate (Thermofisher) and allowed to stand overnight at 4 degrees C to
5 prepare anti-human IgG-immobilized plates. Calibration curve and samples were prepared with 1% pooled mouse serum. Then, the samples were dispensed onto the anti-human IgG-immobilized plates, and allowed to stand for 1 hour at 30 degrees C. Subsequently, goat anti-human IgG (gamma-chain specific) with HRP conjugate
10 (Southern Biotech) was added to react for 1 hour at 30 degrees C. Chromogenic reaction was carried out using TMB substrate (Life Technologies) as a substrate. After stopping the reaction with 1 N sulfuric acid (Wako), the absorbance at 450 nm was measured by a microplate reader. The concentration in mouse plasma was calculated from the absorbance of the calibration curve using the analytical software
15 SOFTmax PRO (Molecular Devices).

Evaluation of endogenous mouse CCL2 immune complex sweeping with monoparatopic antibody in mice

In addition to the results above (which suggests that immune complex-mediated sweeping of CCL2 by the tested monoparatopic antibodies was not efficient) a
20 further evaluation was conducted.

To evaluate the ability of monoparatopic antibodies to form and clear immune complex with endogenous mouse CCL2, mouse cross-reactive 11K2 anti-CCL2 monoparatopic antibodies was administered to mice. Humanized 11K2H2-SG1 (IgG1 wild type = Fc gamma receptor binding) or humanized 11K2-SG105 (Fc
25 gamma receptor binding silent) antibodies were intravenously administered at a single dose of 20mg/kg at a single dose of 10 ml/kg into the caudal vein of Balb/c mice. Blood was collected pre-administration, 5 minutes, 7 hours, 1 day, 2 days, 3 days and 7 days after administration. Serum was prepared by centrifuging the blood immediately at 14,000 rpm for 10 minutes in 4°C. The serum was stored at or below
30 -80°C until measurement.

Figure 3 shows the time course of serum total mouse CCL2 concentration and antibody-time profile for humanized 11K2-SG1 and 11K2-SG105 in mice.

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As seen in Figure 3, the levels of accumulated mouse CCL2 was not different between 11K2-SG105 (Fc gamma receptor binding silent Fc) and 11K2-SG1 (IgG1 wild type =Fc gamma receptor binding Fc). This indicates that there was no or little Fc gamma receptor-mediated clearance of endogenous mouse CCL2 by the injected antibodies. As antigens in immune complexes are cleared more rapidly than uncomplexed antigens via multimeric engagement of Fc gamma receptors, this suggests that the 11K2 antibody was not able to form immune-complexes with endogenous mouse CCL2.

Measurement of mouse CCL2 concentration in mouse serum by enzyme-linked immunosorbent assay (ELISA)

The concentration of mouse CCL2 in mouse serum was measured by adapting the reagents from a commercially available mouse CCL2 ELISA kit (R&D Systems). The manufacturer's protocol was followed except for preparation of calibration curve samples. Purified recombinant mouse CCL2 was substituted as the standard instead of the manufacturer's protein. For samples taken after antibody was injected, calibration curve samples and samples were prepared with 2.5% mouse serum injected antibody spiked in at a concentration of 40 microgram/ml, and incubated for 30 minutes at 37 degrees C. Subsequently, the samples were dispensed onto the anti-human CCL2-immobilized plates, and incubated at 30 degrees C for 2 hours. Detection by adding mouse MCP-1 conjugate and incubating for 30 degrees C for 2 hours, followed by substrate and stop solution.

For samples taken before antibody was injected, Mouse MCP-1 Ultra-Sensitive Kit (Meso Scale Discovery) was used according to the manufacturer's instructions. No antibody was spiked into the sample before addition to the plate.

Measurement of anti-CCL2 antibody concentration in serum by enzyme-linked immunosorbent assay (ELISA)

The concentration of anti-CCL2 antibody in mouse serum was measured by ELISA. Anti-human IgG kappa-chain (Antibody Solutions) was dispensed onto a Nunc MaxiSorp plate (Thermofisher) and allowed to stand overnight at 4 degrees C to prepare anti-human IgG-immobilized plates. Calibration curve and samples were prepared with 1% pooled mouse serum. Then, the samples were dispensed onto the anti-human IgG-immobilized plates, and allowed to stand for 1 hour at room temperature. Subsequently, mouse anti-human IgG HRP (clone JDC-10, Southern Biotech) was added to react for 30 minutes at room temperature. Chromogenic

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reaction was carried out using ABTS substrate (KPL) as a substrate and the absorbance at 405 nm was measured by a microplate reader. The concentration in mouse plasma was calculated from the absorbance of the calibration curve using the analytical software SOFTmax PRO (Molecular Devices)

5 Conclusion of the different Mouse PK studies with monospecific (monoparatopic) anti-CCL2 antibodies

To summarize the results of the mouse PK studies, none of the monoparatopic antibodies tested did show efficient clearance of CCL2 from the circulation. These data suggest that monoparatopic antibodies are not able to form immune complexes
10 with CCL2 to efficiently clear it from the circulation.

In contrast, as described below, bispecific anti-CCL2 antibodies with two different antigen binding moieties/sites (biparatopic anti-CCL2 antibodies) were able to efficiently form immune complexes with CCL2 and clear it from the circulation.

Example B-1

15 **Bispecific (biparatopic) anti-CCL2 antibodies**

Several bispecific anti-CCL2 antibodies with two different antigen bindings moieties (paratopes) binding to two different specific epitopes on human CCL2 were generated

Introduction

20 To test whether single binding or cross-linking of the antigen has a significant impact on the *in vivo* CCL2 clearance, we generated bispecific anti-CCL2 antibodies with 2 different antigen-binding moieties/sites that bind to 2 different epitopes on CCL2 using the bispecific CrossMab Technology (see e.g., WO 2009/080252, WO 2015/150447), WO 2009/080253, WO 2009/080251, WO 2016/016299, Schaefer et al, PNAS, 108 (2011) 1187-1191, and Klein et al., MAbs 8 (2016) 1010-20)
25 (bispecific (=biparatopic) CrossMabs). These molecules were first characterized *in vitro* for their biochemical and functional properties but they also served as tools for an *in vivo* CCL2 clearance evaluation in a mouse co-injection study. To evaluate the clearance potential based on Fcγ Receptor (FcγR) binding mediated sweeping
30 (e.g. in Igawa et al, Immunological Reviews 270 (2016) 132–151, WO2012/122011 and WO2016/098357 and WO2013/081143) we generated all Crossmabs as wild type hIgG1 which bind to FcγR and with modified human IgG1 constant chain

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which have reduced/ abolished binding to FcγR effector silent molecules (e.g. IgG1 with mutations L234A, L235A, P329G (Kabat EU numbering)).

Identification of suitable anti-CCL2 antibody pairs

-Selection of biparatopic antibody arms by Sandwich ELISA.

- 5 Sandwich ELISA was performed to identify antibody pairs that do not compete for binding to human CCL2. 384-well MAXISORP (NUNC) plates were coated with 1μg/mL of the 7 indicated capture antibodies (Arm 1) and blocked with 2% BSA. Biotinylated (NHS-PEO₄-Biotin, Pierce) WT human CCL2 (20ng/mL) was incubated with excess amount of the same 7 antibodies (Arm 2) at 1μg/mL or block
- 10 buffer for 1 hour at 37 degrees Celsius. After incubation, the mixtures were added to the blocked ELISA plate and incubated for 1 hour at room temperature. Detection of plate bound CCL2 was performed using streptavidin HRP followed by TMB One Component substrate (Lifetech). Signal development was stopped by 1N HCl acid (Wako). The O.D. of wells with no competing antibody was set as 100% signal for
- 15 each capture antibody. The O.D. of blank wells with no CCL2 added was set as 0% signal. Nine antibody pairs that did not show strong competition for CCL2 binding in both directions were selected as candidates for generation of bispecific Crossmab antibodies.

		Antibody Arm 2						
		ABN 912	CNTO 888	11K2	1A4	1A5	1G9	2F6
Antibody Arm 1	ABN912			selected		selected		
	CNTO888			selected			selected	
	11K2						selected	selected
	1A4							selected
	1A5						selected	selected
	1G9							
	2F6							

Generation and Characterization of biparatopic anti-CCL2 antibodies and Immune complexes

Generation of biparatopic anti-CCL2 antibodies in bispecific CrossMab format Recombinant DNA techniques

5 Standard methods were used to manipulate DNA as described in Sambrook, J. et al., Molecular cloning: A laboratory manual; Cold Spring Harbor Laboratory Press, Cold Spring Harbor, New York, 1989. The molecular biological reagents were used according to the manufacturer's instructions.

Gene and oligonucleotide synthesis

10 Desired gene segments were prepared by chemical synthesis at Geneart GmbH (Regensburg, Germany). The synthesized gene fragments were cloned into an E. coli plasmid for propagation/amplification. The DNA sequences of subcloned gene fragments were verified by DNA sequencing. Alternatively, short synthetic DNA fragments were assembled by annealing chemically synthesized oligonucleotides or
15 via PCR. The respective oligonucleotides were prepared by metabion GmbH (Planegg-Martinsried, Germany)

Description of the basic/standard mammalian expression plasmid

For the expression of a desired gene/protein (e.g. antibody heavy chain or antibody light chain) a transcription unit comprising the following functional elements is used:

- 20
 - the immediate early enhancer and promoter from the human cytomegalovirus (P-CMV) including intron A,
 - a human heavy chain immunoglobulin 5'-untranslated region (5'UTR),
 - a murine immunoglobulin heavy chain signal sequence,
 - a gene/protein to be expressed (e.g. full length antibody heavy chain or MHC
- 25
 - class I molecule), and
 - the bovine growth hormone polyadenylation sequence (BGH pA).
 - Beside the expression unit/cassette including the desired gene to be expressed the basic/standard mammalian expression plasmid contains
 - an origin of replication from the vector pUC18 which allows replication of
- 30
 - this plasmid in E. coli, and
 - a beta-lactamase gene which confers ampicillin resistance in E. coli.

Generation of expression plasmids for recombinant monoclonal antibodies

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The recombinant monoclonal antibody genes encode the respective immunoglobulin heavy and light chains.

5 The expression plasmids for the transient expression monoclonal antibody molecules comprised besides the immunoglobulin heavy or light chain expression cassette an origin of replication from the vector pUC18, which allows replication of this plasmid in *E. coli*, and a beta-lactamase gene which confers ampicillin resistance in *E. coli*.

The transcription unit of a respective antibody heavy or light chain comprised the following functional elements:

- 10 • the immediate early enhancer and promoter from the human cytomegalovirus (P-CMV) including intron A,
- a human heavy chain immunoglobulin 5'-untranslated region (5'UTR),
- a murine immunoglobulin heavy chain signal sequence,
- the respective antibody heavy or light chain cDNA sequence and
- the bovine growth hormone polyadenylation sequence (BGH pA).

15

Transient expression and analytical characterization

20 The recombinant production was performed by transient transfection of HEK293 cells (human embryonic kidney cell line 293-derived) cultivated in F17 Medium (Invitrogen Corp.). For the production of monoclonal antibodies, cells were co-transfected with plasmids containing the respective immunoglobulin heavy and light chain. For transfection "293-Fectin" Transfection Reagent (Invitrogen) was used. Transfection was performed as specified in the manufacturer's instructions. Cell culture supernatants were harvested three to seven (3-7) days after transfection. Supernatants were stored at reduced temperature (e.g. -80°C).

25 General information regarding the recombinant expression of human immunoglobulins in e.g. HEK293 cells is given in: Meissner, P. et al., Biotechnol. Bioeng. 75 (2001) 197-203. To generate the following bispecific antibodies, the CrossMab technology described in WO 2016/016299 was used, in which VH/VL have been exchanged in one antibody arm and the CH1/CL interface of the other
30 antibody arm has been modified by charge modifications, in combination with the knobs-into-holes technology in the CH3/CH3 interface to foster heterodimerization. An exemplary sequence for all four antibody chains where this technology was

applied is given for CNTO888//11K2-WT IgG1 (see SEQ ID NO: 104 to SEQ ID NO:107)

- 5 **List of generated bispecific (biparatopic) anti-CCL2 Crossmab antibodies with wild type IgG1 (WT IgG1) (wild type IgG1 means without modifications/mutations which influence Fc receptor binding, however heterodimerization technology like knobs into holes is included)**

<u>Bispecific antibody</u> <u>IgG1</u>	<u>Alias 1</u>	<u>Alias 2</u>	<u>First antigen binding site</u> VH/VL_crossed	<u>Second antigen binding site</u> VH/VL normal structure (non-crossed)
ABN912//11K2-WT IgG1	CCL2-0047	P1AA3447	humanized 11K2	ABN912
CNTO888//11K2-WT IgG1	CCL2-0048	P1AA3429	humanized 11K2	CNTO888
11K2//1G9-WT IgG1	CCL2-0049	P1AA3461	humanized 11K2	1G9
11K2//2F6-WT IgG1	CCL2-0056	P1AA3392	humanized 11K2	2F6
CNTO888//1A5-WT IgG1	CCL2-0050	P1AA3419	CNTO888	1A5
CNTO888//1G9-WT IgG1	CCL2-0051	P1AA3439	CNTO888	1G9
1A4//2F6-WT IgG1	CCL2-0057	P1AA3400	1A4	2F6
1A5//2F6-WT IgG1	CCL2-0058	P1AA3427	1A5	2F6
1A5//1G9-WT IgG1	CCL2-0052	P1AA3446	1A5	1G9

List of bispecific (biparatopic) anti-CCL2 Crossmab antibodies with IgG1 including the Fc gamma receptor silencing mutations L234A, L235A, P329G (Kabat EU numbering) (IgG1-PGLALA)

<u>Bispecific antibody</u> <u>IgG1 PGLALA</u>	<u>Alias 1</u>	<u>Alias 2</u>	<u>First antigen binding site</u> VH/VL_crossed	<u>Second antigen binding site</u> VH/VL normal structure (non-crossed)
ABN912//11K2-PGLALA	CCL2-0041	P1AA3411	humanized 11K2	ABN912
CNT0888//11K2-PGLALA	CCL2-0042	P1AA3452	humanized 11K2	CNT0888
11K2//1G9-PGLALA	CCL2-0043	P1AA3463	humanized 11K2	1G9
11K2//2F6-PGLALA	CCL2-0053	P1AA3450	humanized 11K2	2F6
CNT0888//1A5-PGLALA	CCL2-0044	P1AA3448	CNT0888	1A5
CNT0888//1G9-PGLALA	CCL2-0045	P1AA3455	CNT0888	1G9
1A4//2F6-PGLALA	CCL2-0054	P1AA3459	1A4	2F6
1A5//2F6-PGLALA	CCL2-0055	P1AA3402	1A5	2F6
1A5//1G9-PGLALA	CCL2-0046	P1AA3444	1A5	1G9

5 **Purification of the biparatopic anti-CCL2 antibodies**

Biparatopic anti-CCL2 antibodies containing cell culture supernatants were filtered and purified by up to three chromatographic steps. Depending on the purity of the capture step eluate an ion exchange chromatography step was optionally implemented between capture and polishing step.

- 10 Biparatopic anti-CCL2 antibodies were purified from cell culture supernatants by affinity chromatography using MabSelectSure-Sepharose™ (GE Healthcare, Sweden), POROS 50 HS (Thermofisher Scientific) and Superdex 200 size exclusion (GE Healthcare, Sweden) chromatography. Briefly, sterile filtered cell culture

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supernatants were captured on a MabSelect SuRe resin equilibrated with PBS buffer (10 mM Na₂HPO₄, 1 mM KH₂PO₄, 137 mM NaCl and 2.7 mM KCl, pH 7.4), washed with equilibration buffer and eluted with 25 mM sodium citrate at pH 3.0. The eluted protein fractions were pooled and neutralized with 2M Tris, pH 9.0.

5 Ion exchange chromatography as optional second purification step was performed with POROS 50 HS (ThermoFisher Scientific), equilibration and wash with 20 mM histidine pH 5.6 and load of diluted capture step eluate a gradient chromatography was done with 20 mM histidine, 0.5M NaCl at pH 5.6. ion exchange chromatography fractions were analyzed by CE-SDS LabChip GX II (PerkinElmer) and Crossmob
10 containing fractions were pooled.

Size exclusion chromatography on Superdex 200 (GE Healthcare) was used as second or third purification step. The size exclusion chromatography was performed in 20 mM histidine buffer, 0.14 M NaCl, pH 6.0. Size exclusion chromatography fractions were analyzed by CE-SDS LabChip GX II (PerkinElmer) and Crossmob
15 containing fractions were pooled and stored at -80°C.

In case of a satisfying product quality after the POROS 50 HS (ThermoFisher Scientific) size exclusion chromatography on Superdex 200 (GE Healthcare) replaced by desalting chromatography on HiPrep 26/10 Desalting (GE Healthcare) in 20 mM histidine buffer, 0.14 M NaCl, pH 6.0.

20 The protein concentration of antibody preparations was determined by measuring the optical density (OD) at 280 nm, using the molar extinction coefficient calculated on the basis of the amino acid sequence.

Purity and integrity of the antibodies were analyzed by CE-SDS using a LabChip GX II (PerkinElmer) with Protein Express Chip and HT Protein Express Reagents
25 Kit. Aggregate content of antibody preparations was determined by high-performance SEC using a Biosuite High Resolution SEC, 250 Å, 5 µm analytical size-exclusion column (Waters GmbH) using 200 mM K₂HPO₄/KH₂PO₄, 250 mM KCl, pH 7.0 as running buffer. Average purities were between 94-100% as analyzed by CE-SDS and monomer content >95% (SEC).

30 **Functional Characterization of the bispecific (biparatopic) anti-CCL2 antibodies**

Affinity measurement (Binding)

Around 1200 resonance units (RU) of the capturing system (20 µg/ml goat anti human IgG Fc; Order Code: 109-005-098; Jackson Immuno Research) were coupled
35 on a C1 chip (GE Healthcare BR-1005-35) at pH 5.0 by using an amine coupling kit

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supplied by GE Healthcare. The sample and system buffer was PBS-T (10 mM phosphate buffered saline including 0.05% Tween20) pH 7.4. The flow cell was set to 25 °C - and the sample block set to 12 °C - and primed with running buffer twice. The bispecific antibody was captured by injecting a 2 µg/ml solution for 60 sec at a flow rate of 10 µl/min. Association was measured by injection of human CCL2 (wt) in various concentrations in solution for 150 sec at a flow rate of 30 µl/min starting with 30 nM in 1:10 dilutions. The dissociation phase was monitored for up to 1200 sec and triggered by switching from the sample solution to running buffer. The surface was regenerated by 60 sec washing with a 0.85% H₃PO₄ solution at a flow rate of 10 µl/min. Bulk refractive index differences were corrected by subtracting the response obtained from a goat anti human IgG Fc surface. Blank injections are also subtracted (= double referencing). For calculation of kinetic parameters, the Langmuir 1:1 model was used.

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Mono and bispecific anti-CCL2 antibodies	Alias	t 1/2* (min)	Ligand Level (RU)	Rmax (RU)
Humanized 11K2 (=11K2)	CCL2-0002	no dissociation	293.5	39.3
ABN912	CCL2-0003	27	307.0	33.6
CNT0888	CCL2-0004	no dissociation	272.8	31.9
ABN912//11K2-PGLALA	CCL2-0041	no dissociation	212.2	21.1
CNT0888//11K2-PGLALA	CCL2-0042	no dissociation	211.8	22.0
11K2//1G9-PGLALA	CCL2-0043	no dissociation	204.9	21.2
CNT0888//1A5-PGLALA	CCL2-0044	no dissociation	207.3	20.0
CNT0888//1G9-PGLALA	CCL2-0045	no dissociation	213.0	19.0
1A5//1G9-PGLALA	CCL2-0046	no dissociation	203.1	20.0
ABN912//11K2-WT IgG1	CCL2-0047	no dissociation	209.3	20.2
CNT0888//11K2-WT IgG1	CCL2-0048	no dissociation	226.1	22.9
11K2//1G9-WT IgG1	CCL2-0049	no dissociation	206.1	21.1
CNT0888//1A5-WT IgG1	CCL2-0050	no dissociation	214.4	20.3
CNT0888//1G9-WT IgG1	CCL2-0051	no dissociation	215.8	20.7
1A5//1G9-WT IgG1	CCL2-0052	no dissociation	211.7	21.0
11K2//2F6-PGLALA	CCL2-0053	no dissociation	201.9	19.8
1A4//2F6-PGLALA	CCL2-0054	no dissociation	194.7	18.8
1A5//2F6-PGLALA	CCL2-0055	no dissociation	203.5	20.1
11K2//2F6-WT IgG1	CCL2-0056	no dissociation	205.3	20.2
1A4//2F6-WT IgG1	CCL2-0057	no dissociation	199.0	19.5
1A5//2F6-WT IgG1	CCL2-0058	no dissociation	202.8	19.8

Natural immune complex formation in the presence of wild type antigen.

All protein samples (bispecific anti-CCL2 CrossMab antibodies and antigens) were re-buffered in 1x PBS, pH 7.4, using dialysis or centrifugal ultrafiltration devices.

A dilution series of the CrossMab samples from 2.0 to 0.1 mg/mL was prepared. Likewise, antigen solutions in PBS were prepared with concentrations ranging from 0.012 to 0.23 mg/mL. Concentrations were chosen to allow mixing of equivalent volumes to achieve a constant molar ratio of 1:1 (antibody:CCL2 complex). The following antigen was used in this study: wild type CCL2.

Equivalent volumes of the pre-diluted CrossMab and CCL2 preparation were mixed and incubated at 37°C for 1 hour before samples were applied on a Superose6 (GE Healthcare #2039) column, pre-equilibrated with PBS and eluted at a flow rate of 0.5 mL/min. A total of 100 µg or the maximal possible volume of 250 µL was applied and the antibodies and antigens alone were used as a control.

SEC-MALLS data were recorded with an OptiLab rEX refractive index detector and with a miniDAWN Treos MALLS detector (both from Wyatt inc.). SEC-MALLS signals were processed using the Astra V5 software (Wyatt).

Bispecific anti-CCL2 antibody	Alias	Interaction with CCL2wt (low conc.)
ABN912//11K2-WT IgG1	CCL2-0047	+
CNT0888//11K2-WT IgG1	CCL2-0048	+++
11K2//1G9-WT IgG1	CCL2-0049	++
CNT0888//1A5-WT IgG1	CCL2-0050	+
CNT0888//1G9-WT IgG1	CCL2-0051	+
1A5//1G9-WT IgG1	CCL2-0052	++
11K2//2F6-WT IgG1	CCL2-0056	++
1A4//2F6-WT IgG1	CCL2-0057	+
1A5//2F6-WT IgG1	CCL2-0058	+

Legend

+++ large quantity of multi-/oligomers
 ++ medium quantity of multi-/oligomers
 + low quantity of multi-/oligomers
 0 only dimers or less

CCR2 Reporter assay to study the neutralizing characteristics of anti-CCL2 antibodies

Tango™ CCR2-bla U2OS cells were purchased from Invitrogen, Germany, to study the impact of CCL2 neutralizing antibody constructs. Those reporter cells contain the human Chemokine (C-C Motif) Receptor 2 (CCR2) linked to a TEV protease site and a Gal4-VP16 transcription factor stably integrated into the Tango™ GPCR-bla U2OS parental cell line. This parental cell line stably expresses a beta-arrestin/TEV protease fusion protein and the beta-lactamase (*bla*) reporter gene under the control of a UAS response element. Adding the natural ligands MCP1 = CCL2 resulted in an indication of the activity of the reporter gene, which can be measured by the cleavage of a FRET-enabled substrate.

Principally, assay and cell handling procedures were according the providers manual. In brief, CCR2-U2OS cells were seeded at a density of 2×10^4 cells/well (96er black clear bottom plate, cat.no. # 655090, Greiner Bio-one) in 50µl assay medium (Freestyle 293 Expression Medium, cat.no. #12338-018, Invitrogen). In parallel, serial dilutions of different test antibodies as well as the CCL2-antigen solution were prepared at $c = 4 \times$ final concentration. Then, CCL2-antigen/antibody mixtures were prepared and pre-incubated for two to three hours (hrs) at RT. 50µl of indicated CCL2/antibody solutions were transferred to the CCR2 expressing U2OS cells and incubated for 18 hrs in a humidified incubator at 37°C and 5%CO₂. As control only assay medium was used.

On the next day, the CCF4 substrate (cat.no. #K1089, Invitrogen) was prepared with β-lactamase loading solution (cat.no.# K1085, Invitrogen) and 20µl/well thereof were added to the cells. The substrate solution was incubated for two hrs at RT in the dark.

Finally, the fluorescence wavelengths were determined with a Spectra Max (M4) reader (Molecular devices) at the following wavelengths (Ex/Em = 409nm/460nm = blue*; Ex/Em = 409nm/530nm = green**) and the ratio of blue/green fluorescence after subtracting assay medium control was calculated according to the following equation: $\text{ratio} = (\text{sample-blue*} - \text{control-blue*}) / (\text{sample-green**} - \text{control-green**})$.

After the pH-engineering we characterized the final LO candidates (CKLO1-4) for their ability to inhibit CCL2-induced CCR2 signaling. In this case the neutralizing property was assessed by only the monomeric variant of the rec. CCL2 protein, which was used at a final concentration of approx. 15ng/ml.

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Bispecific Antibody	Alias	IC50 [ng/ml]		
		Exp 1	Exp 2	Exp3
ABN912//11K2-PGLALA	CCL2-0041		80.2	
CNT0888//11K2-PGLALA	CCL2-0042		84	
11K2//1G9-PGLALA	CCL2-0043		57	
CNT0888//1A5-PGLALA	CCL2-0044		77.7	88
CNT0888//1G9-PGLALA	CCL2-0045		86.4	81.3
1A5//1G9-PGLALA	CCL2-0046		75.8	
ABN912//11K2-WT IgG1	CCL2-0047	84.4		
CNT0888//11K2-WT IgG1	CCL2-0048	92.9		
11K2//1G9-WT IgG1	CCL2-0049	82.2		
CNT0888//1A5-WT IgG1	CCL2-0050	89.2		
CNT0888//1G9-WT IgG1	CCL2-0051		89.6	52.7 / 67.9
1A5//1G9-WT IgG1	CCL2-0052	86.2		
11K2//2F6-PGLALA	CCL2-0053		26.3	49.6 / 70
1A4//2F6-PGLALA	CCL2-0054		78.2	
1A5//2F6-PGLALA	CCL2-0055		48.7	
11K2//2F6-WT IgG1	CCL2-0056	93.9		
1A4//2F6-WT IgG1	CCL2-0057		58.2	
1A5//2F6-WT IgG1	CCL2-0058	93		
Monospecific control	CCL2-0002	76.1	79.1	56.9 / 58

Evaluation of human CCL2 immune complex sweeping with biparatopic antibody in mice

5 To evaluate the ability of biparatopic antibodies to form immune complex with wild type human CCL2, pre-formed immune complexes consisting of anti-CCL2 biparatopic antibody (20mg/kg) and wild type human CCL2 (0.1mg/kg) were

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administered at a single dose of 10 ml/kg into the caudal vein of Balb/c mice. Blood was collected 5 minutes, 7 hours, 1 day, 3 days and 7 days after administration. Serum was prepared by centrifuging the blood immediately at 14,000 rpm for 10 minutes in 4°C. The serum was stored at or below -80°C until measurement. The biparatopic antibodies tested are listed in the Table 4 below. Antibodies with WT IgG1 Fc have Fc gamma receptor binding similar to wild-type while antibodies with PGLALA Fc are Fc gamma receptor binding silent. Results are shown in Figure 4a to 4i.

The effect of immune complex sweeping of each anti-CCL2 biparatopic antibody on hCCL2 clearance *in vivo* were assessed by comparing anti-CCL2 antibody with Fc gamma receptor binding (solid line) and anti-CCL2 antibody with Fc gamma receptor binding silent (PGLALA, dotted line), as shown in Figures 4a-4i. The antibody profiles were analyzed by non-compartmental analysis using Phoenix 64 (Pharsight/ Certara). The AUCinf was estimated by linear-log trapezoidal rule extrapolated to infinity. Clearance values are defined as Dose/AUCinf. This difference in clearance was also expressed as fold change, which is calculated by dividing the hCCL2 clearance of antibodies with Fc gamma receptor binding (SG1) by the hCCL2 clearance of antibodies with Fc gamma receptor binding silent (PGLALA) (Table 4 below). The data in the Table 4 below indicates that the clearance of human CCL2 by Fc gamma receptor (FcγR) binding antibodies (WT IgG1) was superior to that by Fc gamma receptor binding silent antibodies (PGLALA, with an IgG1 Fc domain comprising mutation L234A, L235A, P329G mutations (Kabat EU numbering)) for all the biparatopic antibodies tested. This suggests that immune complex-mediated sweeping of CCL2 achieved by the tested biparatopic antibodies was more efficient. Moreover, several biparatopic antibodies showed large fold change in clearance values, for example, CNTO//humanized 11K2 (CNTO//11K2).

Fold change is calculated by dividing the hCCL2 clearance of antibodies with WT FcγR (FcγR) binding with hCCL2 clearance of antibodies with PGLALA. As shown in figure 4a -4i and the Table 4 below, CNTO//11k2 shows the largest fold change of 21.5 between the antibody with IgG1 wild type (WT) which has FcγR binding and antibody which is FcγR binding silent (PGLALA). This suggests that immune complex-mediated sweeping by CNTO//11k2-WT IgG1 is the most efficient among all variants.

Table 4: Clearance values of wild type CCL2 after administration of pre-formed immune complex of anti-CCL2 biparatopic antibody (20mg/kg) and wild type human CCL2 (0.1mg/kg)

Antibodies	Alias	Clearance (ml/day/kg)	Fold change
11K2//1G9-WT IgG1	CCL2-0049	101.761	6.1
11K2//1G9-PGLALA	CCL2-0043	16.713	
CNT0888//11K2-WT IgG1	CCL2-0048	244.705	21.5
CNT0888//11K2-PGLALA	CCL2-0042	11.374	
CNT0888//1G9-WT IgG1	CCL2-0051	31.085	7.8
CNT0888//1G9-PGLALA	CCL2-0045	3.999	
CNT0888//1A5-WT IgG1	CCL2-0050	7.098	3.8
CNT0888//1A5-PGLALA	CCL2-0044	1.892	
1A5//1G9-WT IgG1	CCL2-0052	194.481	11.4
1A5//1G9-PGLALA	CCL2-0046	17.073	
11K2//2F6-WT IgG1	CCL2-0056	14.442	4.9
11K2//2F6-PGLALA	CCL2-0053	2.964	
ABN912//11K2-WT IgG1	CCL2-0047	20.935	4.2
ABN912//11K2-PGLALA	CCL2-0041	4.988	
1A4//2F6-WT IgG1	CCL2-0057	19.606	3.3
1A4//2F6-PGLALA	CCL2-0054	5.933	
1A5//2F6-WT IgG1	CCL2-0058	10.254	2.7
1A5//2F6-PGLALA	CCL2-0055	3.825	

5 Measurement of total human CCL2 concentration in serum by electrochemiluminescence (ECL)

The concentration of total human CCL2 in mouse serum was measured by ECL. 3ug/mL of anti-CCL2 antibody 2F2-SG1 was immobilized onto a MULTI-ARRAY 96-well plate (Meso Scale Discovery) overnight before incubating in blocking buffer for 2 hours at 30°C. Human CCL2 calibration curve samples, quality control samples and diluted mouse serum samples were incubated with denaturing buffer consisting of either 9% SDS for 30 minutes at 37°C, or pH2.0-2.5 Glycine HCl buffer for 10 minutes at 37°C. The purpose of the denaturing buffer is to dissociate human CCL2 from the biparatopic antibody. After that, the samples were diluted 10-fold and added onto anti-CCL2-immobilized plate, and allowed to bind for 1 hour at 30°C before washing. Next, SULFO TAG labelled MCP-1 antibody was added and the plate was

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incubated for 1 hour at 30°C before washing. Read Buffer T (x4) (Meso Scale Discovery) was immediately added to the plate and signal was detected by SECTOR Imager 2400 (Meso Scale Discovery). The human CCL2 concentration was calculated based on the response of the calibration curve using the analytical software SOFTmax PRO (Molecular Devices).

Measurement of anti-CCL2 antibody concentration in serum by enzyme-linked immunosorbent assay (ELISA)

The concentration of anti-CCL2 antibody in mouse serum was measured by ELISA. Anti-human IgG kappa-chain (Antibody Solutions) was dispensed onto a Nunc MaxiSorp plate (Thermofisher) and allowed to stand overnight at 4 degrees C to prepare anti-human IgG-immobilized plates. Calibration curve and samples were prepared with 1% pooled mouse serum. Then, the samples were dispensed onto the anti-human IgG-immobilized plates, and allowed to stand for 1 hour at 30 degrees C. Subsequently, goat anti-human IgG (gamma-chain specific) with HRP conjugate (Southern Biotech) was added to react for 1 hour at 30 degrees C. Chromogenic reaction was carried out using ABTS substrate (KPL) as a substrate and absorbance at 450 nm was measured by a microplate reader. The concentration in mouse plasma was calculated from the absorbance of the calibration curve using the analytical software SOFTmax PRO (Molecular Devices).

Summary of the studies

To summarize the mouse PK study data, sweeping of human CCL2 by the tested biparatopic antibodies was more efficient compared to monoparatopic antibodies at the same dose. With the monoparatopic antibodies, there were minimal difference in antigen clearance between antibodies with WT FcγR binding and FcγR binding silent (Table 3). In contrast, large difference in antigen clearance between biparatopic antibodies with WT FcγR binding and FcγR binding silent were obtained (Table 4), suggesting that the tested biparatopic antibodies could sweep human CCL2 efficiently. The combination of CNTO888//11K2 was chosen for further antibody engineering as it demonstrated the largest fold change in clearance.

Example B-2 Anti-CCL2 antibodies with modified variable domains and CDRs (ion dependent/ pH dependent binding)

Modification leading to ion dependent /pH dependent binding

To generate pH-dependent anti-CCL2 antibodies, histidine scanning mutagenesis was conducted for all CDRs of mAbs CNTO888 and humanized 11K2. Each amino acid in the CDRs was individually mutated to histidine using In-Fusion HD Cloning Kit (Clontech Inc. or Takara Bio company) according to the manufacturer's instructions. After confirming through sequencing that each variant was mutated correctly, variants were transiently expressed and purified by the following method: Recombinant antibodies were expressed transiently using Freestyle FS293-F cells and 293Fectin (Life technologies), according to the manufacturer's instructions. Recombinant antibodies were purified with protein A (GE Healthcare) and eluted in D-PBS or His buffer (20 mM Histidine, 150 mM NaCl, pH6.0). For antibodies difficult to purify with protein A, e.g. kappaSelect or LambdaFABselect (GE Healthcare) or CaptureSelect IgG-CH1 Affinity Matrix (ThermoFisher Scientific) could be used. Size exclusion chromatography was further conducted to remove high molecular weight and/or low molecular weight component, if necessary. All histidine-substituted variants were evaluated by a modified BIACORE® assay as compared to that described above. Briefly, an additional dissociation phase at pH5.8 was integrated into the BIACORE® assay immediately after the dissociation phase at pH7.4. This is to assess the pH-dependent dissociation between antibody (Ab) and antigen (Ag) from the complexes formed at pH7.4 as opposed to the corresponding dissociation at pH5.8. The dissociation rate at pH5.8 buffer was determined by processing and fitting data using the Scrubber 2.0 (BioLogic Software) curve fitting software.

Single histidine substitutions which resulted in reduction in binding response at pH5.8 compared to the pH7.4 dissociation phase were selected and combined. To identify mutations which improve affinity at pH7.4, more than 500 variants were generated for heavy and light chain respectively, using at least one variant generated during the histidine substitution step. These variants had each amino acid in the CDRs substituted with 18 other amino acids, excluding the original amino acid and Cysteine. The binding ability of variants to human CCL2 was assessed at 37 degrees C. under pH7.4 using BIACORE® 4000 instrument (GE Healthcare). As before, an additional dissociation phase at pH5.8 was integrated into the BIACORE® assay immediately after the dissociation phase at pH7.4. The dissociation rate at pH5.8

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buffer was determined by processing and fitting data using the Scrubber 2.0 (BioLogic Software) curve fitting software.

5 Variants which improved affinity at pH7.4 and improved pH dependency were selected, and these mutations were combined. This is exemplified in four 11K2 variants and four CNTO888 variants in the following Table.

Table: Four modified 11K2 and four CNTO888 variants engineered for pH-dependent binding

Modified 11K2 variants (VH/VL)	Modified CNTO888 variants (VH/VL)
11K2H1503/11K2L1338	CNTO888H0625/CNTO888L0616
11K2H1510/11K2L1338	CNTO888H0634/CNTO888L0616
11K2H1503/11K2L1201	CNTO888H0635/CNTO888L0616
11K2H1514/11K2L1338	CNTO888H0695/CNTO888L0616

10 To evaluate the combination effect of modified 11K2 and CNTO888 variants, each 11K2 variant was combined with the four modified CNTO888 variants, and expressed as a biparatopic CCL2 antibody in CrossMab format. This is exemplified in the following Table, where the 4 x 4 combination results in the generation of 16 biparatopic antibodies, designated as CKLO01 to CKLO16.

15 Table: Combination of four modified 11K2 and four modified CNTO888 variants to generate 16 bispecific (biparatopic) antibodies.

Bispecific anti-CCL2 antibody	Based on variable domains of
CKLO01	11K2H1503/11K2L1338//CNTO888H0695/CNTO888L0616
CKLO02	11K2H1510/11K2L1338//CNTO888H0695/CNTO888L0616
CKLO03	11K2H1503/11K2L1201//CNTO888H0695/CNTO888L0616
CKLO04	11K2H1503/11K2L1201//CNTO888H0625/CNTO888L0616
CKLO05	11K2H1503/11K2L1338//CNTO888H0634/CNTO888L0616
CKLO06	11K2H1503/11K2L1201//CNTO888H0634/CNTO888L0616
CKLO07	11K2H1514/11K2L1338//CNTO888H0634/CNTO888L0616
CKLO08	11K2H1510/11K2L1338//CNTO888H0634/CNTO888L0616
CKLO09	11K2H1503/11K2L1338//CNTO888H0625/CNTO888L0616
CKLO10	11K2H1514/11K2L1338//CNTO888H0625/CNTO888L0616
CKLO11	11K2H1510/11K2L1338//CNTO888H0625/CNTO888L0616
CKLO12	11K2H1503/11K2L1338//CNTO888H0635/CNTO888L0616

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CKLO13	11K2H1503/11K2L1201//CNTO888H0635/CNTO888L0616
CKLO14	11K2H1514/11K2L1338//CNTO888H0635/CNTO888L0616
CKLO15	11K2H1510/11K2L1338//CNTO888H0635/CNTO888L0616
CKLO16	11K2H1514/11K2L1338//CNTO888H0695/CNTO888L0616

To generate the bispecific antibodies, the CrossMab technology described in WO 2016/016299 was used, in which VH/VL have been exchanged in one antibody arm and the CH1/CL interface of the other antibody arm has been modified by charge modifications, in combination with the knobs-into holes technology in the CH3/CH3 interface to foster heterodimerization. An exemplary sequence for all four antibody chains where this technology was applied is given for CKLO2 IgG1 (see SEQ ID NO: 108 to SEQ ID NO:111). Depending on the heavy chain constant domain used (e.g. IgG1 wild type (without Fc receptor binding silencing mutations), PGLALA, SG1095, SG1099, 1100 – for SG1095, SG1099, 1100 see description below or sequence description) the suffixes IgG1, PGLALA, SG1095, SG1099, 1100 are added

Functional Characterization of the biparatopic anti-CCL2 antibodies with modified variable domains and CDRs (ion dependent/ pH dependent binding)

Affinity measurements (see methods above)

For all 16 generated bispecific anti-CCL2 antibodies as IgG1 wild type their pH dependent binding human CCL2 was determined.

Figure 5a shows Biacore® sensorgrams showing binding profile to monomeric CCL2 at pH7.4 (black line) and pH5.8 (grey line) of the four modified 11K2 and four CNTO888 variants, and the 16 Crossmabs after combination.

Figure 5b shows Biacore® sensorgrams showing binding profile of the four modified 11K2 and four CNTO888 variants, and the 16 Crossmabs after combination to monomeric CCL2, where an additional dissociation phase at pH5.8 was integrated into the BIACORE® assay immediately after the dissociation phase at pH7.4.

Cross-reactivity binding to CCL8

pH dependency binding to recombinant monomeric human CCL2 and recombinant monomeric human CCL8 were assessed at 37°C using Biacore T200 instrument (GE Healthcare). Anti-human Fc (GE Healthcare) was immobilized on each flow cells of

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- a CM4 sensor chip using amine coupling kit (GE Healthcare) according to the recommended settings by the manufacturer. Antibodies and analytes were diluted into ACES pH 7.4 or pH 5.8 buffer (20 mM ACES, 150 mM NaCl, 1 mg/ml BSA, 0.05% Tween 20, 0.005% NaN₃). Antibodies were captured onto the anti-Fc sensor surfaces, then recombinant monomeric human CCL2 was injected over the flow cell at 8 nM concentration. Association phase of analytes to antibodies was monitored for 120s, followed by 180s dissociation phase. Sensor surface was regenerated each cycle with 3M MgCl₂. Binding sensorgram was processed by TIBCO Spofire by normalization of binding response to the capture level.
- Assessment of pH-dependent dissociation for antibody/antigen complexes formed at pH 7.4 was checked by a modified Biacore assay. Briefly, an additional dissociation phase at pH 5.8 was integrated into the Biacore assay immediately after dissociation phase at pH 7.4. Binding sensorgram was processed by TIBCO Spofire by normalization of binding response to the capture level.
- Expression and purification of recombinant human CCL8 P8A monomer: The sequence for wild type human CCL8 was obtained from Genbank (NCBI: NP_005614.2). To make monomeric CCL8, proline at position 8 of the mature CCL8 protein was mutated to alanine. Expi 293 cells (Lifetech) were transfected according to the manufacturer's instructions. CCL8 wild type and P8A monomer protein were purified using the same method from cell culture supernatants by cation exchange chromatography using SP-Sepharose HP (GE Healthcare) and Superose 200 size exclusion (GE Healthcare) chromatography. Briefly, cell culture supernatants were diluted 2.5-fold with MilliQ water (Millipore), loaded on a Hi-Trap SP-HP column equilibrated with PBS, washed with equilibration buffer and eluted using a gradient of 0-2M NaCl. The eluted protein fractions were pooled and further purified by size exclusion chromatography using a HiLoad 16/600 Superose 200 (GE Healthcare) column equilibrated with 20 mM histidine, 150 mM NaCl, pH 6.0. Fractions were analyzed by size exclusion chromatography and SDS-PAGE. Fractions containing CCL8 protein were pooled, concentrated and stored at -80°C
- Human CCL8 shares a high degree of homology with CCL2 and is able bind to CCR2 as well. As the 11K2 arm is able to bind CCL8 (see Figure 1), it was necessary to identify mutations to reduce this binding to avoid possible off-target effects of neutralizing CCL8. In addition, removal of CCL8 binding on the 11K2 arm is important for efficient formation of immune complex with CCL2. As the CNTO arm does not bind CCL8, binding of CCL8 to the 11K2 arm will interfere with immune

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complex formation with CCL2, which may reduce the clearance rate of CCL2 from plasma.

To identify mutations which reduce binding of 11K2 to human CCL8 and confer selectivity to human CCL2, some CDR positions were substituted like e.g. D101E in the 11K2 VH of CKLO02 or W92R in the 11K2 VL of CKLO03 to remove cross-reactivity to huCCL8. As shown in Figure 6, CCL8 binding in the biparatopic Crossmab could be markedly reduced by engineering 11K2. The CKLO01 variant was not optimized to reduce CCL8 binding, whereas CKLO04, CKLO03, and CKLO02, contain mutations to reduce CCL8 binding. All four Crossmabs have pH-dependent binding to CCL8.

Binding affinity of anti-CCL2 antibodies to recombinant CCL2 and CCL8 at pH 7.4 & pH 5.8

To determine the affinity and pH dependent binding of parental CNTO888H/11K2H2, CKLO1, CKLO2 and CKLO3 to human CCL2 and CCL8 was assessed at 37°C using Biacore T200 instrument (GE Healthcare). Anti-human Fc (GE Healthcare) was immobilized on each flow cells of a CM4 sensor chip using amine coupling kit (GE Healthcare) according to the recommended settings by the manufacturer. Antibodies and analytes were diluted into ACES pH 7.4 or pH 5.8 buffer (20 mM ACES, 150 mM NaCl, 1 mg/ml BSA, 0.05% Tween 20, 0.005% NaN₃). Antibodies were captured onto the anti-Fc sensor surfaces, then recombinant human CCL2 P8A variant (monomer) or CCL8 P8A variant (monomer) was injected over the flow cell at 1.25 nM to 20 nM prepared by two-fold serial dilution. Sensor surface was regenerated each cycle with 3M MgCl₂. Binding affinity were determined by processing and fitting the data to 1:1 binding model using Biacore T200 Evaluation software, version 2.0 (GE Healthcare). The binding affinity of anti-CCL2 antibodies to recombinant CCL2 and CCL8 at pH 7.4 & pH 5.8 are shown in the Table 5 below.

Table 5: Binding affinity of anti-CCL2 antibodies to recombinant CCL2 and CCL8 at pH 7.4 & pH 5.8

Bispecific anti-CCL2 antibody	KD to human CCL2		KD to human CCL8	
	pH 7.4	pH 5.8	pH 7.4	pH 5.8
CNTO8888/11k2	1.28E-11	2.35E-13	1.47E-09	1.75E-09
CKLO1	7.39E-12	9.32E-09	2.33E-08	n.d.

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CKLO2	4.32E-12	n.d.	n.d.	n.d.
CKLO3	6.85E-12	2.17E-08	n.d.	n.d.

Note: n.d. KD cannot be determined due to low binding response.

The data in the Table 5 show that binding to CCL8 at pH7.4 was abolished for CKLO2 and CKLO3, while maintaining strong affinity at pH7.4 and pH-dependent binding for CCL2. The results show the different modifications introduced in the variable regions and CDRs of the parental bispecific antibody based on CNTO888 and 11K2 successfully generated affinity matured variants, CKLO1, CKLO2, CKLO3 with enhanced binding affinity to CCL2 compared to parental Ab at pH 7.4. At the same time CKLO1, CKLO2, CKLO3 showed strong pH dependent binding to CCL2. A more than 1000-fold weaker KD of the binding affinity to CCL2 was observed at pH 5.8 compared to the KD value at pH 7.4

Clearance of wild type human CCL2

To evaluate the ability of pH-dependent bispecific antibodies to enhance the clearance of wild type human CCL2, pre-formed immune complexes consisting of anti-CCL2 monoparatopic antibody (20mg/kg) and wild type human CCL2 (0.1mg/kg) were administered at a single dose of 10 ml/kg into the caudal vein of SCID mice. Blood was collected 5 minutes, 1 hour, 4 hours, 7 hours, 1 day, and 7 days after administration. The serum was stored at or below -80°C until measurement. The Crossmab antibodies tested were parental CNTO//11K2, and four pH-engineered variants, CKLO01, CKLO02, CKLO03, and CKLO04. All antibodies had an IgG1 wild type Fc part (without mutations silencing/abolishing Fc (gamma) receptor binding). Measurement of total human CCL2 and anti-CCL2 antibody concentration in mouse serum was done as described above (under "Evaluation of human CCL2 immune complex sweeping with biparatopic antibody in mice" following Table 4).

Results are shown in Figure 7a: Serum concentration of hCCL2 over time after injection of pre-formed immune complex consisting of hCCL2 and bispecific anti-CCL2 antibodies (parental CNTO//11K2 and pH dependent variants CKLO01, CKLO02, CKLO03 and CKLO04) into SCID mice. All four pH-engineered variants showed rapid clearance of human CCL2. For CKLO02, CKLO03, human CCL2 was below the detection limit by day 1. For the parental CNTO//11K2, rapid clearance of human CCL2 was initially observed till day 1, but thereafter, clearance of human CCL2 was slow.

Example B-3 Anti-CCL2 antibodies with modified variable domains and CDRs (ion dependent/ pH dependent binding) and Fc mediated sweeping

Modification of the bispecific anti-CCL2 antibodies via sweeping technology

5 The bispecific anti-CCL2 antibodies were modified using the sweeping technology to enable the bispecific anti-CCL2 antibodies to abrogate free CCL2 over longer time periods to enable sustained a biological effect like anti-cancer efficacy or anti-inflammatory efficacy *in vivo*.

10 The Sweeping concept is described e.g. in Igawa et al, Immunological Reviews 270 (2016) 132–151, WO2012/122011, WO2016/098357, and WO2013/081143 which are incorporated herein by reference.

pI Fc mediated sweeping

15 Having demonstrated the pH-engineered biparatopic antibodies can accelerate CCL2 clearance *in vivo*, we next evaluated the ability of antibodies with pI-increasing substitutions to enhance the clearance of wild type human CCL2. Pre-formed immune complexes consisting of anti-CCL2 monoparatopic antibody (20mg/kg) and wild type human CCL2 (0.1mg/kg) were administered at a single dose of 10 ml/kg into the caudal vein of SCID mice. Blood was collected 5 minutes, 30 minutes, 1 hour, 2 hours, 4 hours, and 7 days after administration. The serum was stored at or below -80°C until measurement. The Crossmab antibodies tested were parental CKLO03 with IgG1, and CKLO03 with pI enhanced Fc, CKLO03-SG1099. Measurement of total human CCL2 and anti-CCL2 antibody concentration in mouse serum was done as described above (under “Evaluation of human CCL2 immune complex sweeping with biparatopic antibody in mice” following Table 4).

25 Results are shown in Figure 7b: Serum concentration of hCCL2 over time after injection of pre-formed immune complex consisting of hCCL2 and CKLO03 (with IgG1 wild type Fc) or CKLO03-SG1099, (CKLO03 with enhanced pI Fc) into SCID mice. CKLO03-SG1099, which contain Fc substitutions Q311R/P343R (EU Kabat numb.) showed faster clearance/reduction of human CCL2 compared to CKLO03 with IgG1. This demonstrates that pH-dependent biparatopic antibody with pI-increasing mutations can accelerate the clearance of CCL2.

30

Generation of biparatopic anti-CCL2 antibodies with FcgammaRIIb-enhanced Fc variants and further Fc modifications

In this example, Fc engineering to enhance CCL2 clearance is illustrated.

5 It has been demonstrated in WO 2013/125667 that clearance of a soluble antigen can be enhanced by its administration of antigen-binding molecules (e.g. antibodies) comprising an Fc domain displaying an increased affinity for FcgammaRIIb. Furthermore, Fc variants that can show enhanced binding to human FcgammaRIIb have been illustrated in WO 2012/115241 and WO 2014/030728. It has been also illustrated that these Fc variants can show selectively enhanced binding to human
10 FcgammaRIIb and decreased binding to other active Fc gamma Receptors (Fc gamma Rs). This selective enhancement of FcgammaRIIb binding can be favorable not only for clearance of soluble antigen but also for decreasing the risk of undesired effector functions and immune response.

15 For development of an antibody drug, efficacy, pharmacokinetics, and safety should be evaluated in non-human animals in which the drug is pharmacologically active. If it is active only in human, alternative approaches such as the use of a surrogate antibody must be considered (Int. J. Tox. 28: 230-253 (2009)). However, it would not be easy to precisely predict the effects of the interaction between the Fc region and Fc gamma Rs in human using a surrogate antibody, because the expression
20 patterns and/or functions of Fc gamma Rs in non-human animals are not always the same as in human. It would be preferable that the Fc regions of antibody drugs should have cross-reactivity to non-human animals, especially to cynomolgus monkey which has close expression patterns and functions of Fc gamma Rs to human, so that the results obtained in non-human animals could be extrapolated into human.

25 The following IgG1 constant domain/Fc variants of the bispecific anti-CCL2 antibodies were generated with mutations at positions of the Fc part (EU Kabat numbering) (as Crossmabs)

SG1095- derived from IgG1 including the mutations (Kabat EU numbering):

30 -L235W/G236N/H268D/Q295L/A330K/K326T (suitable for increase affinity to human FcγRIIb and decreasing affinity to other human FcγR);
-Q311R/P343R (suitable for increasing isoelectric point (pI) for enhancing uptake of antigen);

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-N434A (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and

-Q438R/S440E (suitable for suppressing rheumatoid factor binding)

5 SG1099- derived from IgG1 including mutations (Kabat EU numbering):

Q311R/P343R (suitable for increasing pI for enhancing uptake of antigen)

SG1100- derived from IgG1 including the mutations (Kabat EU numbering):

10 -Q311R/P343R(suitable for increasing pI for enhancing uptake of antigen);

-N434A (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and

-Q438R/S440E (suitable for suppressing rheumatoid factor binding)

15 GG01 - derived from IgG1 including the mutations (Kabat EU numbering):

-L234Y/P238D/T250V/V264I/T307P/A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR);

20 -Q311R/P343R (suitable for increasing isoelectric point (pI) for enhancing uptake of antigen);

-N434A (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and

-Q438R/S440E (suitable for suppressing rheumatoid factor binding)

25 GG02 - derived from IgG1 including mutations (Kabat EU numbering):

-L234Y/P238D/T250V/V264I/T307P/A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR);

30 -Q311R/P343R (suitable for increasing isoelectric point (pI) for enhancing uptake of antigen);

-M428L/N434A/Y436T (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and

-Q438R/S440E (suitable for suppressing rheumatoid factor binding)

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GG03 - derived from IgG1 (SG1 -IgG1 allotype) including the mutations (Kabat EU numbering):

-L234Y/P238D/T250V/V264I/T307P/A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR);

-Q311R/P343R (suitable for increasing isoelectric point (pI) for enhancing uptake of antigen);

-N434A (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and

-Q438R/S440E (suitable for suppressing rheumatoid factor binding)

GG04 - derived from IgG1 (SG1 -IgG1 allotype) including mutations (Kabat EU numbering):

-L234Y/P238D/T250V/V264I/T307P/A330K (suitable for increasing affinity to human FcγRIIb and decreasing affinity to other human FcγR);

-Q311R/P343R (suitable for increasing isoelectric point (pI) for enhancing uptake of antigen);

-M428L/N434A/Y436T (suitable for increasing affinity to FcRn for longer plasma half-life of antibody); and

-Q438R/S440E (suitable for suppressing rheumatoid factor binding)

Functional Characterization of the bispecific anti-CCL2 antibodies with modified variable domains and CDRs (ion dependent/ pH dependent binding) and with or without Fc mediated sweeping

SPR binding of Fc variants SG1095, GG01, GG02,GG03/04 of CKLO2 in Crossmab format

In an SPR assay at a Biacore 8K instrument, binding of monomeric human and cyno CCL2 to the 4 different antibodies P1AD8325 (CKLO2-SG1095), P1AF8137 (CKLO2-GG01), P1AF8139 (CKLO2-GG02), and P1AF8140 (CKLO2-GG03/04) at pH 7.4 and 5.8 was investigated.

In this set-up, CaptureSelect™ Human Fab-kappa (ThermoFisher Scientific) was immobilized on a CM3 sensor chip using the amine coupling method, the diverse antibodies were captured as ligands, and measurements were performed with 0, 10,

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100 and 1000 nM monomeric human or cyno CCL2 as an analyte at two different pH values.

5 CKLO2-SG1095, CKLO2-GG01, CKLO2-GG02, CKLO2-GG03/04 show almost identical binding profiles to monomeric human and cyno CCL2 which bind at 10, 100 and 1000 nM and dissociate equally fast at pH 7.4, whereas no stable binding was observed at pH 5.8. Results are shown in the table below.

Table: Binding to monomeric human and cyno CCL2 of CKLO2-SG1095, CKLO2-GG01, CKLO2-GG02, CKLO2-GG03/04 show almost identical binding profiles to monomeric human and cyno CCL2

Antibody	Antigen	Rmax (RU) @ pH 7.4	t 1/2 (s) @ pH 7.4	Rmax (RU) @ pH 5.8	t 1/2 (s) @ pH 5.8
CKLO2-GG01	Monomeric human CCL2	15.9	6.18	29.8	3.29
CKLO2-GG02	Monomeric human CCL2	16.8	4.04	28.8	3.29
CKLO2-GG03/04	Monomeric human CCL2	17.6	5.90	29.6	3.24
CKLO2-SG1095	Monomeric human CCL2	19.0	5.49	35.3	3.51
CKLO2-GG01,	Monomeric cyno CCL2	16.5	7.10	30.7	3.22
CKLO2-GG02,	Monomeric cyno CCL2	17.2	5.97	29.5	3.14
CKLO2-GG03/04	Monomeric cyno CCL2	17.9	6.48	30.4	3.12
CKLO2-SG1095	Monomeric cyno CCL2	19.5	6.07	36.0	3.41

Chemotaxis Assay

Description of Method

THP-1 cells were cultured for 3 days up to 8×10^5 cells/ml. A total cell number of 5000 cells/well were seeded in the upper chamber of a microtiter plate and let settle at 37°C . Recombinant huCCL2 was pipetted in the bottom chamber at a final concentration of 50 ng/ml in the presence or not of anti-CCL2 antibodies (when the assay was performed to test surrogate antibodies, recombinant muCCL2 was used instead, at 100 ng/ml). Upper and bottom chambers were brought together avoiding the formation of air bubbles and the plate was then incubated at 37°C for 24 h. Migrated cells were quantified by the Cell Titer Glo method according to manufacturer's recommendation, and luminescence measured with the Tecan Infinite 200 Reader.

Results are shown in Figure 8: Chemotaxis Assay: Bispecific anti-CCL2 antibodies with identical CDRs and variable regions VH/VL, namely CKLO2-IgG1 wild type and CKLO2-SG1095, but different Fc moieties, can inhibit the migration of THP-1 cells with identical potencies ($\text{IC}_{50} = 0.2 \mu\text{g/ml}$; Fig 8, left panel).

Similarly, CCL2-0048, the parent VH/VL-unmodified bispecific antibody CNTO888/11k2 of CKLO2, which is non-pH dependent, also shows an IC_{50} of $0.2 \mu\text{g/ml}$, since pH-dependency is critical for antigen sweeping, a phenomenon that does not take place in this assay.

The corresponding monoparatopic antibodies CNTO888 IgG1 and humanized 11k2 IgG1 display IC_{50} values of 0.3 and $0.7 \mu\text{g/ml}$, respectively, while the huIgG1 isotype control shows no inhibition (Fig 8, right panel).

In additional analogous experiments the IC_{50} values of CKLO2-GG01 ($0.2 \mu\text{g/ml}$), CKLO2-GG02 ($0.2 \mu\text{g/ml}$), and GG03/GG04 ($0.3 \mu\text{g/ml}$), were determined.

In vivo biological activity in a genetically-modified mouse model

Material and methods

B16-huCCL2/CCL2-null model

The present model was generated with the aim of testing anti-human CCL2 antibodies without the interference of mouse CCL2 in, otherwise, immune competent

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tumor-bearing mice. For this, the mouse tumor cell line B16-F10 was chosen since it does not secrete mCCL2 and is known to grow in vivo in mice of the C57/Bl6 strain, which is the genetic background of the CCL2 knock-out mice.

5 To generate stable pools of B16F10 tumor cells expressing huCCL2 they were transfected with plasmid DNA encoding for huCCL2 and a Hygromycin-B selection cassette. Therefore, cells were seeded into 6-well plates with 2.0×10^5 cells/well in growth medium (DMEM + 10% FCS + 2mM L-glutamine). After 24 h a transfection mix composed of 1 μ g DNA per well and Lipofectamine 2000 in Opti-MEM medium was added to the cells. Subsequently, the cells were put under selection with medium
10 containing Hygromycin-B (0.5 mg/ml). After 20 days of culture living single cells were sorted based on FSC/SSC-scatter using a BD FACS Aria III. Twelve days later, cell culture supernatants from single cell clones were screened for expression of human CCL2 using the ELISA Ready-SET-Go from ebioscience (Cat# 88-7399-86) in comparison to wild type B16F10 cells (data not shown).

15 The selected B16-F10_HOMSA_CCL2 tumor cell clones 1A5, 2A3 and 2B2 were routinely cultured in DMEM containing 10% FCS and 2 mM L-Glutamine (PAN Biotech GmbH, Germany) at 37 °C in a water-saturated atmosphere at 5 % CO₂. Culture passage was performed with trypsin/EDTA 1x (PAN Biotech GmbH, Germany) splitting twice/week.

20 Female B6.129S4-Ccl2tm1Rol/J mice (Jackson Laboratories), age 7-10 weeks at arrival, were inoculated with the B16-F10_HOMSA_CCL2 tumor cell clones: on that day (study day 0), tumor cells were harvested from culture flasks and transferred into culture medium, washed once and resuspended in PBS. Cell numbers were determined using a cell counter and analyzer system (Vi-CELL, Beckman Coulter).

25 For s.c. injection cell titer was adjusted to 1×10^7 cells/ml and 100 μ l were injected subcutaneously into the right flank of mice using a cooled

1.0ml tuberculin syringe (Dispomed, Germany) and a small needle (0.45x12mm). Cell inoculation was performed under general anesthesia by isoflurane (CP Pharma, Germany) in an inhalation unit for small animals.

30 Tumor growth was monitored daily and mice were sacrificed on study day 15, when tumors reached about 1000 mm³ for B16-F10_HOMSA_CCL2 tumor cell clones 1A5 and 2A3 (at this time point 2B2 tumors were about 600 mm³ due to a slower growth rate). At endpoint, blood samples were taken for CCL2 measurement and tumors were explanted and analyzed by flow cytometry, as described in above.

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Mouse immune cells were found to infiltrate all tumors, confirming the notion that human CCL2 is able to attract mouse CCR2+ cells. B16-F10_HOMSA_CCL2 tumor cell clone 1A5 displayed the highest CD45+ total infiltrate with the highest relative mMDSC (monocytic myeloid-derived suppressor cells) composition (Fig. 2). Clones 2A3 and 2B2 had lower frequencies of immune cells in the tumor even though 2A3 cells led to similar levels of serum total CCL2 like 1A5 cells, while the 2B2 clone showed a significantly lower CCL2 serum concentration (data not shown).

Female B6.129S4-Ccl2tm1Rol/J mice were inoculated with the B16-F10_HOMSA_CCL2 tumor cell clone 1A5, as described in above.

Treatment of study groups started 5 days after cell inoculation. Group 1 received human IgG vehicle control treatment whereas groups 2 and 3 were treated i.p. with Mab CKLO2-IgG1 (Fc wild type IgG1) and CKLO2-SG1099 ((CKLO2 pI-enhanced Fc based on IgG1 with mutations Q311R/P343R (Kabat EU numbering)), respectively, at 3,7 mg/kg daily for 9 days. On study day 14, mice were sacrificed and tumors were explanted. Enzymatic digestions and cell strainers were used to generate single cell suspensions from each tumor mass to be analyzed non-pooled by flow cytometry. For the detection of immune cell populations of interest following markers and fluorochromes were used: CD45-BUV395, CD11b-BUV737, F4/80-BV421, CD11c-BV605, Ly6C-AF488, Ly6G-PerCP-Cy5.5, CD206-BV711, CD4-BV510, CD8a-APC-H7, NK1.1-PE-Cy7, CD279-APC and CD274-PE. Samples were acquired with a BD LSR-Fortessa flow cytometer and analyze using the BD Diva Software.

Serum samples were withdrawn on study days 6, 8 11 and 14 to measure total and free huCCL2.

The method to detect free CCL2 is described in detail under “Proof of concept study of CCL2 sweeping efficiency in cynomolgus monkeys” below. For analysis of free human CCL2 in this study recombinant cynomolgus CCL2 was replaced by recombinant human CCL2 to prepare the calibrators and QCs.

Total CCL2 serum samples were analyzed with a non-validated, but qualified, specific sandwich ELISA. Briefly, biotinylated anti-CCL2 capture antibody (CNT0888 CCL2-0004), blocking buffer, pretreated test sample and detection reagent (digoxigenylated anti-CCL2 antibody (M-1H11-IgG)), were added stepwise to 384-well streptavidin-coated microtiter plate and incubated on a non-vigorous shaker for 1 hour in each step. To dissociate CCL2-drug complexes in the pre-

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treatment step samples, calibrators or QCs were acidified in pH 5.5 at 37°C for 10 minutes. Acidified samples were added to the SA-MTP. For detection of immobilized immune complexes, a polyclonal anti-digoxigenin-POD conjugate was added and the plate was incubated for 60 minutes. The plate was washed three times after each step to remove unbound substances.

ABTS was added to the plate and incubated at room temperature with shaking. Absorption was measured at 405/490 nm wavelength. The human CCL2 concentrations were calculated based on the response of the calibration curve using the analytical software XLFit (IDBS).

Depending on the data sets being analyzed statistically a t-test or one-way ANOVA with Tukey's test for multiple comparisons were applied, accordingly.

Results

At end of the study, tumor volumes and tumor weights were significantly reduced in those mice receiving CKLO2-SG1099 (CKLO2 pI-enhanced Fc) (Figure 9). A closer look at the tumor infiltrate revealed a decreased tumor infiltrate of monocytic myeloid-derived suppressor cells (M-MDSCs), as expected upon CCL2 blockade (Figure 9).

Furthermore, serum analytics confirmed the efficacy of the therapy: pI optimization leads indeed to a reduction in the accumulation of total CCL2 as compared to the IgG1 wild type Fc CKLO2 molecule, while free-CCL2 (not bound to antibody) is completely suppressed under limit of detection (Figure 10). Therefore, the present model is suited to investigate the effects of CCL2 blockade in a tumor context, using anti-huCCL2 biparatopic sweeping antibody CKLO2-SG1099 (CKLO2 pI-enhanced Fc). In subsequent studies the optimal dose regimen is investigated in which CKLO2-SG1099 (CKLO2 pI-enhanced Fc) is given at a lower dose once or twice per week and the extension of free-CCL2 suppression is monitored over weeks. Furthermore, combination with T cell activating therapies (i.e. T cell bispecifics, PD-L1 blockade) is also explored in this model.

In additional analogous experiments other variants like CKLO2-SG1095, CKLO2-GG01, GG02 and GG03/GG04 are analyzed.

Proof of concept (POC) study of CCL2 sweeping efficiency in cynomolgus monkeys

Methods. The main objective of this study was to evaluate the extend of CCL2 suppression and sweeping efficiency of four anti-CCL2 (MCP-1) antibodies in cynomolgus monkeys. The secondary objective was to evaluate the pharmacokinetic (PK) properties of these antibodies. All antibodies were administered as single IV infusions of 25 mg/kg over a period of 30 minutes to 3-4-year-old male animals and total CCL2 and antibody concentrations were measured in serum over 70 days. The anti-CCL2 antibodies studied comprised of control antibodies (groups 1 and 2) as well as antibodies specifically engineered to provide enhanced elimination of CCL2-drug complexes (referred to hereafter as antigen sweeping or simply sweeping). Group 1: CNTO888-SG1 (= IgG1 wild type) anti-CCL2 antibody (n=3 animals) as control of maximal total CCL2 accumulation; group 2: a biparatopic anti-CCL2 antibody CKLO2-SG1 (IgG1 wild type) with pH dependent target binding but no Fc-modifications (n=3); group 3: a biparatopic anti-CCL2 antibody CKLO2-SG1100 with pH dependent target binding and Fc-pI and further modifications (n=4) and group 4: biparatopic anti-CCL2 antibody CKLO2-SG1095 with pH dependent target binding, Fc-pI and Fc γ RII and further modifications (n=4).

In this study, the total serum concentrations of the antibodies, the total (free and antibody-bound CCL2) and free target were quantified. Furthermore, presence of anti-drug antibodies (ADA) was assessed. The antibody, total and free CCL2 profiles were analyzed by non-compartmental analysis using Phoenix 64 (Pharsight/Certara); data were illustrated using GraphPad Prism v. 6.07 (GraphPad Software).

For the antibodies, serum samples were analyzed using a generic human sandwich ELISA method. The concentrations of total antibody in monkey serum were measured by ELISA. 2 μ g/mL of anti-human kappa chain antibody was immobilized onto maxisorp 96-well plate overnight before incubating in blocking buffer for 2 hours at 30°C. Antibody calibration curve samples, quality control samples and monkey serum samples were incubated on plate for 1 hour at 30°C before washing. Next, anti-human IgG-HRP was added and incubated for 1 hour at 30°C before washing. ABTS substrate was incubated for 10, 20 and 30 minutes before detection with microplate reader at 405 nm. The antibody concentrations were calculated based on the response of the calibration curve using the analytical software SOFTmax PRO (Molecular Devices).

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Total CCL2 serum samples were analyzed with a non-validated, but qualified, specific sandwich ECL method assay. 3 µg/mL of anti-CCL2 antibody (r2F2-SG1) was immobilized onto a MULTI-ARRAY 96-well plate (Meso Scale Discovery) overnight before incubating in blocking buffer for 2 hours at 30°C. Cynomolgus monkey CCL2 calibration curve samples, quality control samples and diluted cynomolgus monkey serum samples were incubated with pH5.5 acid buffer for 10 minutes at 37°C. After that, the samples were incubated onto anti-CCL2-immobilized plate for 1 hour at 30°C before washing. Next, SULFO TAG labelled MCP-1 antibody was added and incubated for 1 hour at 30°C before washing. Read Buffer T (x4) (Meso Scale Discovery) was immediately added to the plate and signal was detected by SECTOR Imager 2400 (Meso Scale Discovery). The cynomolgus monkey CCL2 concentrations were calculated based on the response of the calibration curve using the analytical software SOFTmax PRO (Molecular Devices).

Free CCL2 serum samples were analyzed with a non-validated, but qualified, Gyrolab™ immunoassay run on a Gyrolab Xplore. A biotinylated anti-CCL2 antibody (M-2F6-IgG) was used as capture reagent and for detection an Alexa647 labeled anti-CCL2 antibody (M-1H11-IgG) was selected. Both reagents were diluted to 1 µg/mL in PBS, 0.1% Tween, 1% BSA and transferred to a 96-well PCR plate (Fisher Scientific). Cynomolgus monkey CCL2 calibration curve samples, QCs and undiluted serum samples were also transferred to a 96-well PCR plate. Both plates were loaded into the instrument together with a Gyrolab Bioaffy 200 nl disc (Gyros Protein Technologies AB). A three step assay protocol (200-3W-001) was selected. Briefly the protocol describes the sequential addition of capture reagent, sample and detection reagent to designated streptavidin columns of the Gyrolab Bio Affy 200 disc. Each reagent reaches the column at the same time after a short spinning step is applied to the disc. The columns were washed with PBS 0.05% Tween after each step and finally laser induced fluorescence values were recorded within the instrument. The free cynomolgus monkey CCL2 concentration was calculated based on the response of the calibration curve using XL Fit software (IDBS).

ADA were analyzed using a method described elsewhere (Stubenrauch et al., 2010). In summary, biotinylated mAb anti-human Fcγ-pan R10Z8E9 was bound to streptavidin-coated high bind plate at a concentration of 0.5 µg/mL and incubated for 1 h. Samples and standards were diluted with assay buffer to 5% cynomolgus monkey serum and added to each well of the coated plate after washing and incubated for 1 h with shaking. After washing, digoxigenylated anti-cynomolgus(cyno) IgG at 0.1 µg/mL were added and incubated for 1 h with shaking.

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After washing, the polyclonal anti-digoxigenin-HRP conjugate at 25 mU/mL were added and incubated for 1 h with shaking. ABTS was added to the plate and incubated for 10 minutes at room temperature with shaking. Absorption was measured by microplate reader at 405/490 nm wavelength. The ADA concentration was calculated based on the response of the calibration curve using the analytical software SOFTmax PRO (Molecular Devices).

Results. The PK behaviour was assessed during the time in which animals were free of ADA (i.e., before day 14). During this period, the serum concentration-time profiles of all anti-CCL2 antibodies were similar (see Figure 11 left panel) and partial average AUC values (AUC_{0-7d}) were comparable between the different groups 1490, 1810, 1210 and 1320 day. $\mu\text{g/mL}$ for groups 1, 2, 3, and 4 respectively. Similarly, the average C_{max} values were comparable with values of 620, 764, 616 and 664 $\mu\text{g/mL}$ for the groups 1, 2, 4 and 4, respectively. The extent of ADA development was highly variable between animals and groups and resulted in highly variable PK profiles beyond day 7 (data not shown). One animal from group 2 was ADA-negative throughout the entire observation period of 70 days (see Figure 11 right panel). In this animal the clearance, volume of distribution and terminal half-life of anti-CCL2 antibodies was estimated by non-compartmental analysis at 7.34 mL/(day.kg), 76.2 mL/kg and 10.9 days, respectively.

Baseline levels of CCL2 in serum were assessed for each animal before antibody treatment started. Basal CCL2 levels ranged from 0.126 to 0.357 ng/mL (geometric mean (%CV): 0.199 ng/mL (32.2%, N=14)). As the free form of CCL2 has a higher elimination rate than the antibody-bound form of CCL2, an increase of total CCL2 serum concentrations following antibody treatment was expected. This was indeed observed in all groups (Figure 12 left panel), demonstrating engagement of the target by all antibodies. Under treatment, the C_{max} values of total CCL2 increased to 824, 575, 106, 32.7 ng/mL for groups 1, 2, 3 and 4, respectively. The AUC_{0-7d} values were 3060, 2970, 522 and 181 day.ng/mL for groups 1, 2, 3 and 4, respectively. During the time that animals were ADA negative, the molar drug concentrations remained in excess of the total CCL2 concentrations. The two sweeping anti-CCL2 antibodies (groups 3 and 4) showed a considerable reduction in total CCL2 serum concentrations compared to the conventional antibody (group 1) of approximately 8- and 25-fold, respectively based on serum C_{max} values and approximately 6- to 17-fold based on the AUC_{0-7d} values of total CCL2. The ADA-negative animal of Group 2 displayed a sustained target engagement (apparent by the plateau) of total CCL2 concentrations (Figure 12 right panel).

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Treatments with all antibodies led to a substantial reduction of free CCL2 levels in serum (Figure 13 left panel), however the reduction was in part only initially. In group 1, all individuals had quantifiable levels of free CCL2 again after one day. In group 2, all individuals had quantifiable levels of free CCL2 again after two days. In groups 3 and 4, two individuals of each group showed suppression of free CCL2 for seven days. In group 3, two animals with a moderate ADA response, maintaining sufficient antibody concentrations, showed free CCL2 suppression below the detection limit for 21 days. In ADA positive animals, antibody elimination was significantly increased and as a consequence of loss of target engagement CCL2 levels returned rapidly to their original baseline (not shown here).

In additional analogous experiments other variants like CKLO2-SG1099, CKLO2-GG01, GG02 and GG03/GG04 are analyzed.

PK/PD study of CCL2 sweeping efficiency in cynomolgus monkeys

Study outline and aims. The PK/PD study was designed based on the results of the POC study using anti-CCL2 antibody CKL02-SG1095. As the POC study had demonstrated a high extent of anti-drug antibody (ADA) formation, a Gazyva® (obinituzumab) treatment was included in the PK/PD study with the intention to reduce the ADA response. For this purpose, 30 mg/kg doses of Gazyva were administered by intravenous infusions four times throughout the study: on days -14, -7, 8 and 36. CKL02-SG1095 was administered at 2.5, 10 and 25 mg/kg dose levels to four animals (2/2 male and female) per dose group as IV infusion over 30 minutes on day 1 (groups 1-3). For comparison a conventional anti-CCL2 antibody (CNTO888-IgG1) was administered at 25 mg/kg as IV infusion over 30 minutes on day 1 (group 4; same control as group 1 of the POC study described above). Total PK (CKL02-SG1095), total and free CCL2 concentrations were assessed until day 99 (i.e., 14 weeks post dose).

The aim of the PK/PD study was to demonstrate a prolonged duration of free CCL2 suppression of CKL02-SG1095 in comparison to a conventional anti-CCL2 antibody (CNTO888 with wild type IgG1 Fc part) in non-human primates.

Methods. Total PK as well as total and free CCL2 were quantified in this study. However, due to the presence of Gazyva in the serum samples some modifications were made to the total PK assay, the total CCL2 assay and the ADA assay in comparison to the POC study, which are described herein. For CNTO888 IgG1 no PK assay was developed.

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The concentration of total antibody CKL02-SG1095 in monkey serum was measured by ELISA. For the ELISA biotinylated recombinant human CCL2 (Antigen), pre-treated test samples, positive control standards (calibrator) or QCs (quality controls) and digoxigenylated anti-human IgG (M-1.19.31-IgG) were successively added to a 384 well streptavidin coated microtiter plate (SA-MTP). To dissociate CCL2-drug complexes a pre-treatment of test samples was performed at pH 5.5 for 20 minutes. Before addition to the SA-MTP the acidified samples were neutralized. Immobilized immune complexes were detected with a polyclonal anti-digoxigenin-POD conjugate. The plate was washed three times after each step to remove unbound substances. ABTS was added to the plate as substrate and incubated at room temperature. Absorption was measured at 405/490 nm wavelength. The antibody concentrations were calculated based on the response of the calibration curve using the analytical software XLFit (IDBS).

Total CCL2 serum samples were analyzed with a non-validated, but qualified, specific sandwich ELISA. Briefly, biotinylated anti-CCL2 capture antibody*, pretreated test sample and detection reagent (digoxigenylated anti-CCL2 antibody (1H11-IgG1)), were added stepwise to a 384-well streptavidin-coated microtiter plate and incubated on a non-vigorous shaker for 1 hour for capture and sample step and 50 minutes for the detection reagent respectively. To dissociate CCL2-drug complexes in the pre-treatment step samples, calibrators or QCs were acidified in pH 5.5 for 20 minutes. Acidified samples were added to the SA-MTP. For detection of immobilized immune complexes, a polyclonal anti-digoxigenin-POD conjugate was added and the plate was incubated for 50 minutes. The plate was washed three times after each step to remove unbound substances.

ABTS was added to the plate and incubated at room temperature with shaking. Absorption was measured at 405/490 nm wavelength. The cynomolgus monkey CCL2 concentrations were calculated based on the response of the calibration curve using the analytical software XLFit (IDBS). *Capture antibody for analysis of Group 1-Group 3: anti-CCL2 CNT08888 IgG1, Capture antibody for analysis of Group 4: anti-CCL2 2F2 IgG1.

ADAs were screened with a bridging sandwich ELISA in 384-well plates. Test samples of animals of group 1, 2 and 3, quality control samples and positive controls were incubated overnight with biotinylated capture antibody CKL02-SG1095 and digoxigenylated detection antibody CKL02-SG1095 together with two additional anti CCL2 antibodies (2F6-IgG1 and 1H11-IgG1) at RT, 500 rpm on a MTP-shaker;

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these antibodies were added to neutralize CCL2. For samples of animals of group 4 biotin labelled CNTO888-SG1 and digoxigenylated CNTO888-SG1 were used respectively. Formed immune complexes were transferred to a Streptavidin (SA)-coated MTP to immobilize the immune complexes via the biotin-labelled (Bi) capture antibody. Following aspiration of the supernatant, unbound substances were removed by repeated washing. Detection was accomplished by addition of an anti-digoxigenin POD(p) conjugated antibody and ABTS substrate solution. The color intensity of the reaction was photometrically determined (absorption at 405 nm - 490 nm reference wavelength). A sample was defined ADA positive if the signal was found to be above a plate specific cut-point. This cut point was defined during assay qualification.

Results. In spite of the Gazyva® (obinituzumab) pre-treatment, 10 out of 12 animals of the CKL02-SG1095 treated and 1 out of 4 of the CNTO888 treated animals developed ADA with influence on the drug and biomarker concentrations. However, the two ADA-negative animals for CKL02-SG1095 were in the 25 mg/kg dose group allowing a direct comparison to the ADA-negative animals of the CNTO888 group. The PK behaviour was assessed during the time in which animals were free of ADAs (i.e., before day 10). The PK profiles of the three different dose groups for CKL02-SG1095 are shown in Figure 14, left panel. The partial average AUC values (AUC_{0-7d}) were 229/191 (male/female), 696/813 and 1492/1346 day·µg/mL for the dose levels 2.5, 10 and 25 mg/kg, respectively. The C_{max} values were 115/122 (male/female), 369/491 and 869/941 µg/mL for the dose levels 2.5, 10 and 25 mg/kg, respectively. At the highest dose level, these findings are consistent with the POC study. For the two ADA-negative animals the clearance, volume of distribution and terminal half-life of CKL02-SG1095 was estimated by non-compartmental analysis at 10.5-17.4 mL/(day.kg), 116-118 mL/kg and 5.8-11.6 days, respectively (see Figure 14 right panel).

As for the POC study describe above, accumulation of total CCL2 was observed upon treatment with anti-CCL2 antibodies (see Figure 15 left panel). Baseline levels of CCL2 were assessed on five occasions before drug administration (including one occasion before Gazyva® (obinituzumab) treatment); the average CCL2 baseline value was 0.742 ng/mL and Gazyva® (obinituzumab) treatment did not affect basal CCL2 levels. The extent of total CCL2 accumulation (values in parenthesis indicate the median fold-change from individual baselines) was dose and construct dependent. For CKL02-SG1095, total CCL2 levels increased to 22.4 (22), 67.2 (105) and 54.9 (76) ng/mL (median of four animals) for 2.5, 10 and 25 mg/kg dose levels. For

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CNTO888 IgG1, total CCL2 level increased to 1490 (3160) ng/mL (median of 4 animals). Comparison of the ADA-negative animals of groups 3 and 4 showed a considerably lower level of accumulation for CKL02-SG1095 compared to CNTO888 (Figure 15 right panel).

5 Treatments of all study groups lead to a substantial, transient reduction of free CCL2 levels in serum (see Figure 16 left panel; typically, below the limit of detection (0.01 ng/mL). For all ADA-positive animals, free CCL2 levels rapidly returned to baseline values after ADA developed (consistent with the loss of drug exposure and a rapid target turnover). For ADA-negative animals (2/4 in group 3) and (3/4 in group 4) the
10 duration of free CCL2 suppression could be assessed throughout the study duration. For the conventional antibody CNTO888 (group 4), the duration of CCL2 suppression was short, presumably due to the extensive accumulation of the total target (Figure 15). While the drug concentration was not quantified (no specific assay available for CNTO888), the POC study suggests similar PK properties between
15 CNTO888 and CKL02-SG1095. For the two ADA-negative animals of group 3 on the other hand, long lasting free CCL2 suppression was observed. For one animal, free CCL2 levels remained below the limit of detection for 29 days (Figure 16 right panel).

20 In additional analogous experiments other variants like CKLO2-SG1099, CKLO2-GG01, GG02 and GG03/GG04 are analyzed.

Prevalence Study of CCL2 in different tumor types

The following IHC prevalence study of CCL2 and its receptor CCR2, including macrophages analysis using CD163/CD68 and CD14, was performed on 121 human matched tumor and serum samples of 6 different indications:

25 pancreatic cancer (PaC)

colorectal cancer (CRC)

breast cancer (BC)

prostate cancer (PrC)

ovarian cancer (OvC)

30 gastric cancer (GC)

the following questions were addressed:

- do these tumors (over)express CCL2?
- is the blood CCL2 level elevated in these tumor patients?
- is there a correlation between blood and tumor CCL2 levels?
- 5 • is there a correlation between tumor CCL2 and infiltrating CCR2⁺ immune cells?
- is there a correlation between tumor CCL2 and infiltrating myeloid cells?

Material and Methods

10 Histopathological scoring was done semiquantitatively. Additionally, automatical multiplex image analysis was used for CD163/CD68 IHC, and tested for CD14 and CCR2 for immune cell quantification, as well as for CCL2 quantification.

15 The immunohistological investigation was performed on a set of resection specimens of 121 human tumors of 6 different indications: 31 Pancreatic cancer (PaC), 30 colorectal cancer (CRC), 30 breast cancer (BC), 29 prostate cancer (PrC), 20 ovarian cancer (OvC), and 10 gastric cancer (GC), provided by Indivumed (Hamburg) and Asterand (Royston/Herts, UK). Tumors were fixed in 4% buffered formaldehyde, paraffin-embedded, cut at 2.5µm thickness, and mounted on Superfrost Plus slides.

20 The mouse monoclonal antibody against CCL2 (clone 2D8, Novusbio NBP2-22115) was used on the Ventana BXT, following a standard staining Protocol (CC1 for 32', concentration of 1 µg/mL in VBX, Optiview DAB detection system). The rabbit monoclonal antibody against CCR2 (E68, Abcam ab32144) was used on the Ventana Discovery XT, following a standard staining protocol (CC1 for 32', concentration 0.8 ug/ml in DS2, Omni-UltraMap HRP DAB detection system). The mouse monoclonal antibody against the monocytic marker CD14 (Cell Marque EPR3653, RTU) was used on the Ventana Discovery Ultra, following a standard staining protocol (CC1 for 64', Omni-UltraMap HRP DAB detection system detection system). The double staining against macrophages and M2-like TAMs (tumor-associated macrophages) CD163/CD68 (DAB CD163 Mouse MRQ-26 Cell Marque RTU // red CD68 Mouse PG-M1 Dako) was used on the Ventana BXT, following a

25 standard staining protocol (CC1 for 32', CD163 RTU//CD68 concentration 0.6µg/ml in DS2, Detection with DAB and Red detection systems). All images were scanned using the Ventana iScan HT®. The tissue sections were analyzed semi-quantitatively.

30

1. Results

CCL2 and CCR2 prevalence

All analyzed tumor indications showed some tumors with up-regulation of CCL2 at variable levels and presence of CCR2 on TAMs at variable amount (Table 6 below).
 5 For both, CCL2 and CCR2, the highest expression was observed in ovarian carcinoma, followed by PDAC and GC

Tumor type-specific characteristics

Tumors with high activity of CCL2-CCR2, associated with a tumor-growth enhancing immunological status of high MDSC attraction and M2 polarization,
 10 represent the preferred of tumors for CCL2-blocking therapy. CCR2 IHC showed a good correlation to MDSCs and M2-like macrophages confirming its biological role, and demonstrated a higher relevance as biomarker for this pathway than CCL2 IHC measurement. Concluding from the present study, the following recommendations for CCL2-therapy can be summarized:

15 • OvC can be recommended for CCL2-targeted therapy because of the highest CCL2 and CCR2 prevalence and M2 polarization;

• PDAC can be recommended for CCL2-targeted therapy due to the highest amount of MDSCs compared to the other analyzed tumor types, and because CCR2 and M2 were present at considerable high levels and amounts. CCL2 was high in PDAC as well and showed, in contrast to the other tumor types, an extraordinary higher
 20 presence in immune cells than in tumor cells. PaC showed a very good correlation between CCL2/CCR2 and MDSC attraction/M2-polarization. These results support that in the analyzed PDACs, the role of CCL2-CCR2 is highly focused on immune cell attraction.

25 • BC, especially TNBC, can be recommended for CCL2-targeted therapy: BC showed CCL2, CCR2, MDSCs and M2 at considerable high levels and amounts. Especially TNBC cases were characterized by higher amounts of M2 and MDSC than non-TNBC, although non-TNBC showed the highest CCL2 production in tumor cells compared to other tumor indications.

30 The following tumor indications seemed to be less dependent from the CCL2-CCR2-axis and, therefore, might be less recommended for CCL2 targeted therapy:

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• CRC: CCL2 was low compared to the other tumor types, especially when compared to PaC. Also here, the lowest amount of M2-like macrophages was measured compared to the other tumor types. CCR2 and MDSCs were present at variable amounts. Interestingly, in this indication only, a trend of a positive correlation between CCL2 and CCR2 was detectable. However, the overall findings support that in CRC, the role of CCL2-CCR2 is focused on tumor cell survival and not on immune cell attraction.

• Although high for CCL2, GC was observed to be low for CCR2 and showed the lowest amount of MDSCs. M2-like macrophages were present at variable amounts.

Table 6: CCL2 and CCR2 positive expression in tumor cells (TC) and in immune cells (IC) of the different tumor types analyzed in the present study.

Tumor type:	CCL2					CCR2		
	in tumor cells (TC) (manual score)			in immune cells (IC) (manual score)		in immune cells (manual score)		
	% of positive cases	% of mod to hi pos cases	Mean score	% of positive cases	Mean score	% of positive cases	% of mod to hi pos cases	Mean score
OvC	100%	42%	1.3	100%	0.9	100%	63	1.7
PaC	90%	9%	0.8 (PDAC 0.8 and PNET 0.9)	97%	2.0 (PDAC 2.2 and PNET 0.6)	90%	55	1.5 (PDAC 1.7 and PNET 0.3)
GC	91%	45%	1.3	91%	1.9	91%	18	0.8
BC	78%	46%	1.1 (TNBC 0.9, non-TNBC 1.6)	61%	0.6 (TNBC 0.5, non-TNBC 0.9)	96%	38	1.3 (TNBC 1.2, non-TNBC 1.5)
CRC	76%	24%	0.8	72%	0.7	96%	39	1.2
PrC	72%	10%	0.7	79%	0.5	72%	10	0.6

• In PrC, CCR2 was present at variable levels. (M2 and MDSC were not measured)

Correlation analyses

The study outcome can be summarized as follows:

• Between tumor CCL2 and CCR2 (IHC), the only positive correlation was existent in CRC.

• Serum CCL2 (ELISA) did not correlate with any of the measured parameters in the tumor, including CCL2, CCR2, macrophages, and MDSCs. A trend of positive correlation to tumor CCL2 was found only in PrC, where both methods show very low values.

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• CCR2 expression correlates positively with the presence of M2-like macrophages and CD14⁺ cells, and negatively with the M1/M2-ratio, and confirms the biological role of CCR2. The level of CCR2 correlates better with M2 polarization than with MDSC attraction.

- 5 • CCL2 showed a trend of positive correlation with MDSC attraction and M2 polarization. Thus, the CCL2 level alone seemed not to be the main factor for the presence of MDSCs and M2-like polarization.

10 **Example C-1 Bispecific Contorsbodies with modified variable domains and CDRs (ion dependent/ pH dependent binding) and Fc mediated sweeping**

Generation of biparatopic anti-CCL2 antibodies in contorsbody format (bispecific anti-CCL2 Contorsbodies) with FcγRIIb-enhanced Fc variants and further Fc modifications

- 15 The following IgG1 constant domain/Fc variants of the bispecific anti-CCL2 antibodies were generated with mutations at positions of the Fc part (EU Kabat numbering) in the contorsbody (CB) format. This Fc domain comprising format, the “contorsbody” (CB), is described e.g. in Guy J.Georges et al, Computational and Structural Biotechnology Journal Volume 18, 2020, Pages 1210-1220.

- 20 Accordingly using the methods described e.g. under Example B-1 , but using the sequences SEQ ID NO: 175 - SEQ ID NO: 182 the following bispecific antibodies (contorsbodies) were generated:

- 25 **P1AF8142 (CKLO2 – CB- SG1095) - (exemplary bispecific CKLO2 Contorsbody (CB) comprising only 2 polypeptide chains including SG1095 Fc mutations)**

SEQ ID NO: 175 heavy chain 1- CKLO2 – CB- SG1095

SEQ ID NO: 176 heavy chain 2- CKLO2 – CB- SG1095

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P1AF8143 (CKLO2 – CB- GG02)- (exemplary bispecific CKLO2 Contorsbody (CB) comprising only 2 polypeptide chains including GG02 Fc mutations)

5 SEQ ID NO: 177 heavy chain 1- CKLO2 – CB- GG02
SEQ ID NO: 178 heavy chain 2- CKLO2 – CB- GG02

P1AG5853 (CKLO2 – CB- GG02-K447G) - (exemplary bispecific CKLO2 Contorsbody (CB) comprising only 2 polypeptide chains including GG02 Fc mutations and the mutation K447G)

10 SEQ ID NO: 179 heavy chain 1- CKLO2 – CB- GG02-KG
SEQ ID NO: 180 heavy chain 2- CKLO2 – CB- GG02-KG

P1AG8317 (CKLO2 – CB- SG1095-K447G) - (exemplary bispecific CKLO2 Contorsbody (CB) comprising only 2 polypeptide chains including SG1095 Fc mutations and the mutation K447G)

15
SEQ ID NO: 181 heavy chain 1- CKLO2 – CB- SG1095
SEQ ID NO: 182 heavy chain 2- CKLO2 – CB- SG1095

20 Analogously contorsbodies of the variants CKLO1, and CKLO3 - CKLO16 are generated with either wild type (wt) Fc (including heterodimerization fostering mutations like e.g. knobs into holes) or other Fc variants as described herein.

Purification of the biparatopic anti-CCL2 antibodies

25 Biparatopic anti-CCL2 antibodies containing cell culture supernatants were filtered and purified by up to three chromatographic steps. Depending on the purity of the capture step eluate an ion exchange chromatography step was optionally implemented between capture and polishing step.

30 Biparatopic anti-CCL2 antibodies were purified from cell culture supernatants by affinity chromatography using CaptureSelect IgG-CH1 Affinity Matrix (Thermofisher Scientific), POROS XS (Thermofisher Scientific) and Superdex 200 size exclusion (GE Healthcare, Sweden) chromatography. Briefly, sterile filtered cell culture supernatants were captured on a IgG-CH1 resin equilibrated with PBS buffer (10 mM Na₂HPO₄, 1 mM KH₂PO₄, 137 mM NaCl and 2.7 mM KCl, pH 7.4), washed with equilibration buffer and eluted with 25 mM sodium citrate at pH 3.0.
35 The eluted protein fractions were pooled and neutralized with 2M Tris, pH 9.0.

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Ion exchange chromatography as optional second purification step was performed with POROS XS (ThermoFisher Scientific), equilibration and wash with 40 mM sodium acetate pH 5.5 and load of diluted capture step eluate a gradient chromatography was done with 1 M sodium acetate at pH 5.5. Ion exchange chromatography fractions were analyzed by CE-SDS LabChip GX II (PerkinElmer) and Crossmab containing fractions were pooled.

Size exclusion chromatography on Superdex 200 (GE Healthcare) was used as second or third purification step. The size exclusion chromatography was performed in 20 mM histidine buffer, 0.14 M NaCl, pH 6.0. Size exclusion chromatography fractions were analyzed by CE-SDS LabChip GX II (PerkinElmer) and Crossmab containing fractions were pooled and stored at -80°C.

In case of a satisfying product quality after the POROS XS (ThermoFisher Scientific) size exclusion chromatography on Superdex 200 (GE Healthcare) replaced by desalting chromatography on HiPrep 26/10 Desalting (GE Healthcare) in 20 mM histidine buffer, 0.14 M NaCl, pH 6.0.

The protein concentration of antibody preparations was determined by measuring the optical density (OD) at 280 nm, using the molar extinction coefficient calculated on the basis of the amino acid sequence.

Purity and integrity of the antibodies were analyzed by CE-SDS using a LabChip GX II (PerkinElmer) with Protein Express Chip and HT Protein Express Reagents Kit. Aggregate content of antibody preparations was determined by high-performance SEC using a Biosuite High Resolution SEC, 250 Å, 5 µm analytical size-exclusion column (Waters GmbH) using 200 mM K₂HPO₄/KH₂PO₄, 250 mM KCl, pH 7.0 as running buffer. Average purities were between 94-100% as analyzed by CE-SDS and monomer content >95% (SEC).

Functional Characterization of the bispecific anti-CCL2 Contorsbodies with modified variable domains and CDRs (ion dependent/ pH dependent binding) and modified Fc domains

Surface Plasmon resonance (SPR)- CCL2 binding of Contorbodies P1AF8142 (CKLO2 – CB- SG1095) , P1AF8143 (CKLO2 – CB- GG02), P1AG5853 (CKLO2 – CB- GG02-K447G) (in comparison to crossmabs)

Binding to CCL2 antigen evaluated by Surface Pasmon Resonance (SPR)

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The overall architecture of the bi-specific antibodies has no significant influence on the binding of the Fab moieties.

Materials & Methods (Mat & Meth) -SPR

5 SPR measurements were done at a Biacore 8K instrument (GE Healthcare/Cytiva). In a first step, a CM3 chip (series S sensor chip CM3, GE Healthcare/Cytiva) was prepared and an anti-kappa antibody (anti kappa select, Thermo Fischer) as capture molecule was immobilized (10µg/ml, 280 s, flow 10 µl/min, pH 4.5).

10 Subsequently, the antibody constructs were bound to the immobilized anti-kappa antibody at a concentration of 5 nM and an association time of 120 s at a flow of 5 µl/min (immobilization buffer HBS-N: 0.01 M HEPES, 0.15 M NaCl, pH 7.4; GE Healthcare/cytiva BR-1006-70). In a next step, CCL2 antigens were injected as analyte in a concentration series (0-100nM) at a flow rate of 50 µl/min. Association time was 120 s, dissociation time was 600s. As regeneration solution 10 mM glycine
15 pH 1.5 was injected for 60 s at a flow rate of 30 µl/min.

The main run was done two times: one with running buffer PBS-P+ (0.02 M phosphate buffer, 2.7 mM KCl, 137 mM NaCl, 0.05% (v/v) surfactant P20; GE Healthcare/Cytiva 28995084) at pH 7.4 and a second one with PBS-P+ at pH 5.8. All measurements were performed at 25°C.

20 For evaluation, $t_{1/2}$ (= half time of dissociation of the antigens bound to the antibodies) and R_{max} were calculated.

The binding of different constructs (Crossmabs and Contorsbodies) to monomeric human CCL2 and cyno CCL2 was measured. Results are shown in the table below. Analogously in an additional experiment P1AG5853 and P1AG8317 are analyzed and
25 results are shown.

Table: The binding monomeric human CCL2 and cyno CCL2

Antibody	Antigen	Rmax (RU) @ pH 7.4	t 1/2 (s) @ pH 7.4	Rmax (RU) @ pH 5.8	t 1/2 (s) @ pH 5.8
P1AD8325	Monomeric human CCL2	6.0	106.8	9.1	4.6
CNTO888-IgG1	Monomeric human CCL2	4.4	2125.8	5.1	366.5
P1AF8137	Monomeric human CCL2	5.9	96.7	8.5	4.8
P1AF8139	Monomeric human CCL2	5.1	271.9	7.4	5.2
P1AF8140	Monomeric human CCL2	5.4	84.1	8.6	4.9
P1AF8142	Monomeric human CCL2	4.3	130.1	4.2	5.7
P1AF8143	Monomeric human CCL2	3.7	257.5	4.6	4.6
P1AD8325	Monomeric cyno CCL2	5.5	289.6	6.9	2.8
CNTO888-IgG1	Monomeric cyno CCL2	4.8	2627.9	5.7	421.8
P1AF8137	Monomeric cyno CCL2	5.4	296.0	5.8	3.1
P1AF8139	Monomeric cyno CCL2	4.9	345.1	7.2	2.6

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P1AF8140	Monomeric cyno CCL2	4.9	294.3	5.1	3.4
P1AF8142	Monomeric cyno CCL2	3.9	284.1	1.9	0.0
P1AF8143	Monomeric cyno CCL2	3.5	276.3	2.5	3.1

Evaluation of the binding at pH 5.8 leads to loss of binding for all bi-specific antibodies.

5

Binding to FcRn by Surface Plasmon Resonance (SPR)

All bi-specific molecules are showing a good binding affinity to the FcRn receptor at low pH and a much reduced one at physiological pH 7.4. All bi-specific antibodies are then binding the FcRn at acidic pH in the endosome and are then reshuffled out of the cell.

10

SPR measurements were done at a Biacore 8K instrument (GE Healthcare/Cytiva). In a first step, an SA chip (GE Healthcare/Cytiva) was prepared and the biotinylated ligand human single chain FcRn (sc huFcRn) was immobilized by non-covalent capture binding to streptavidin (90 s, flow 10 µl/min, HBS-EP+ buffer: 0.01 M HEPES, 0.15 M NaCl, 0.003 M EDTA, 0.05 % (v/v) Surfactant P20) to reach an sc huFcRn level of 500 RU. Subsequently, the antibody constructs were bound to the immobilized sc huFcRn-Bi at a concentration of 50 nM, an association time of 90 s, and a dissociation time of 240 s at a flow of 30 µl/min in 1 x PBS at the three different pH values 5, 6, and 7.4 (PBS-P+: 0.02 M phosphate buffer, 2.7 mM KCl, 137 mM NaCl, 0.05% (v/v) surfactant P20). All measurements were performed at 25°C.

15

20

The report point "binding", which is located at the end of the association phase, is the read out. The amount of bound antibody construct [RU] per 1 RU sc huFcRn on the chip was evaluated. Analogously in an additional experiment P1AG5853 and P1AG8317 are analyzed and results are shown.

25

Table SPR-FcRn binding

	Binding amount of Ab (RU) per 1RU of FcRn-surface		
Antibody (capture level: 500 RU)	@ pH 5	@ pH 6	@ pH 7.4
P1AD8325	1.16	0.90	0.13
P1AF8137	1.18	0.85	0.09
P1AF8139	1.27	1.07	0.34
P1AF8140	1.20	0.92	0.15
P1AF8142	1.16	0.82	0.08
P1AF8143	1.18	0.89	0.18
CNT0888-IgG1	0.90	0.35	0.00
CKLO2-SG1	1.02	0.56	0.00
CKLO2-SG1100	1.18	0.97	0.15

Binding to Fcgamma receptors by SPR

5 All bi-specific antibodies are engineered to enhance the binding to the FcgammaRIIb, a receptor that is generating an inhibitory signal in contrast to all other Fcgamma receptors. The bi-specifics are thus intended to undergo a good uptake into the cells without generating an activating signal.

10 SPR measurements were done at a Biacore T200 (GE Healthcare/Cytiva). Protein L (Pierce #21189) was immobilized on a CM5 biosensor chip (GE Healthcare/Cytiva) using EDC/NHS coupling chemistry (amine coupling kit, GE Healthcare/Cytiva). For this purpose, it was diluted in 10 mM sodium acetate buffer, pH 4.0, and injected

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into both flow cells for 600s at a flow rate of 10 μ l/min. Immobilization and the following capture-binding-assay were measured at a temperature of 25°C. As running and dilution buffer PBS-P (0.02 M phosphate buffer, 2.7 mM KCl, 137 mM NaCl pH 7.4, 0.05% v/v Surfactant P20) was used.

- 5 In the first step, the antibody sample is injected for 120 s at a flow rate of 10 μ l/min, with the goal of achieving 1000 RU capture level. In the second step, the monomeric Fc γ receptor (Fc γ RIIa, Fc γ RIIb, or Fc γ RIIIa) was injected at a concentration of 5 μ g/ml for 90 s at a flow rate of 10 μ l/min.

- 10 The report point "binding", which is located at the end of the association phase, is read out. The binding amounts (RU) of Fc γ receptor per 1RU antibody were calculated.

Table SPR-Fc γ gammaR

Antibody (capture level: 1000 RU)	Fc γ receptor	binding amounts of hFc γ Rs (RU) per 1 RU Ab
P1AD8325	Fc γ RIIa	0.042
	Fc γ RIIb	0.049
	Fc γ RIIIa	-0.001
P1AF8137	Fc γ RIIa	0.002
	Fc γ RIIb	0.051
	Fc γ RIIIa	0.000
P1AF8139	Fc γ RIIa	0.002
	Fc γ RIIb	0.056
	Fc γ RIIIa	0.000

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P1AF8140	FcγRIIa	0.003
	FcγRIIb	0.059
	FcγRIIIa	0.000
P1AF8142	FcγRIIa	0.070
	FcγRIIb	0.074
	FcγRIIIa	0.002
P1AF8143	FcγRIIa	0.003
	FcγRIIb	0.033
	FcγRIIIa	0.001
CKLO2-SG1	FcγRIIa	0.028
	FcγRIIb	0.007
	FcγRIIIa	0.017
CKLO2-SG1100	FcγRIIa	0.038
	FcγRIIb	0.010
	FcγRIIIa	0.020
CNT0888-IgG1	FcγRIIa	0.003
	FcγRIIb	0.000
	FcγRIIIa	0.001

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The <CCL2> antibodies are not recognizing the activating receptors like FcγRIIa but have enhanced affinity to the FcγRIIb. Additionally, molecules P1AF8137, P1AF8139, P1AF8140, and P1AF8143 show selectivity for the FcγRIIb vs FcγRIIa while molecules P1AD8325 and P1AF8142 do not. The two groups of molecules belong to two distinct types of engineering of the Fc moiety.

Between a Y-shape bi-specific antibody and a contorsbody, the geometry around the hinge region might be different. The binding to FcγRs does not seem to be drastically affected by this conformational modification.

Analogously in an additional experiment P1AG5853 and P1AG8317 were analyzed and results are shown for the different FcγRs.

Chemotaxis Assay

In additional analogous experiments as described under B-3 the IC₅₀ values of P1AF8142 (CKLO2 – CB- SG1095) , P1AF8143 (CKLO2 – CB- GG02), P1AG5853 (CKLO2 – CB- GG02-K447G) were (or are to be) determined as follows:

P1AF8142 (0.2 μg/ml), P1AF8143 (0.6 μg/ml), P1AG5853 (to be determined).

Also the in vivo biological activity in a genetically-modified mouse model and/ or the CCL2 sweeping efficiency in cynomolgus monkeys are determined analogously as decribed in Example B-3

Concentrability and viscosity

The viscosity and concentrability of a molecule is an important factor in case a drug is intended to be applied subcutaneously and/or is requiring high concentration to neutralize its target. High concentrations have been investigated for the bi-specific antibodies. At concentrations higher than 200 mg/L, the proteins can show higher propensity to form aggregates and, eventually, precipitate. In order to be used as injectables, the measurement of the viscosity is the more relevant parameter. Viscosity is plotted vs a range of concentrations so that the maximal concentration for which the viscosity remains acceptable (<15 cP) can be derived; the table below is showing the values. The contorsbody P1AF8142 is showing an increase of 38% of the maximal concentration compared to the crossmab P1AD8325; both

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compounds have identical Fabs and Fc moieties but the contorsbody format is more compact and leads to a higher concentration for the same viscosity.

Table maximal concentration at a viscosity of 15 cP (at 20°C)

5

Compound	max. conc. 15 cP (20°C)
P1AD8325	81 mg/ml
P1AF8142	112 mg/ml
P1AF8139	115 mg/ml
P1AF8143	183 mg/ml

Compound P1AF8143 shows an increase of the maximal concentration at 15 cP of about 60% compared to molecule P1AF8139, the corresponding crossmab. Thus, the contorsbody architecture is significantly enhancing the bio-physical properties.

10

Mat&Meth viscosity measurements

15

Samples were buffer exchanged to 20 mM Histidine buffer, pH 6.0, in Amicon centrifugal filter devices (10K), and concentrated at 14000 x g. The highly concentrated stock solution was diluted using an analytical balance in order to determine the concentration by UV measurements (triplicates at a NanoDrop 8000 UV-Vis Spectrophotometer).

20

For DLS measurements (Wyatt DLS DynaPro Plate Reader), samples were prepared in a buffer containing a final Tween20 concentration of 0.02% and a final bead concentration of 0.03% in a volume of 15 µl. A 1% bead stock solution (Nanosphere Size Standards, Thermo Scientific, Nom Diam: 300 nm, Mean Diam (NIST

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Traceable): $296 \pm 6 \text{ nm}$, Size Distrib: 5.3 nm – Std Dev: $1.8 \% \text{ CV}$, Contents: Polymer Microspheres in Water, ($1 \% \text{ solids}$, $6.77 \times 10^8 \text{ Beads}/\mu\text{L}$) was used for dilution.

Samples were transferred into an optical 384-well plate by reverse pipetting (Greiner bio-one Microplate/Sensoplate, 384 Well, Black, Glassbottom, small volume, Lid, gen 2) and were covered with silicone oil (Alfa Aesar). The apparent diameter of the latex beads was determined by dynamic light scattering at 20°C . The viscosity of the solution can be calculated as $\eta = \eta_0(\text{rh}/\text{rh}_0)$ (η : viscosity; η_0 : viscosity of water; rh: apparent hydrodynamic radius of the latex beads; rh_0 : hydrodynamic radius of the latex beads in water).

To allow for comparison of various samples at the same concentration, data were fitted within XLfit using the exponential fit model 501 with the following equation: $\eta = C + (A \cdot \exp(B \cdot c))$

(η : viscosity; c : concentration; A, B, C: exponential fit variables).

Derived from these fits, the maximum feasible concentration at 20°C for the viscosity threshold of 15 cP can be extrapolated.

Analogously in an additional experiment P1AG5853 and P1AG8317 are analyzed and results are shown.

CCL2 Complex formation

Method SEC

Complex formation:

For complex formation, $1 \times \text{PBS}$ (sigma-Aldrich 1166678900) was spiked with $100 \mu\text{g/mL}$ of P1AD8325, P1AF8139 or P1AF8143 together with the respective equimolar concentration of wtCCL2. The solution was mixed and incubated overnight at ambient temperature.

SEC-MALLS measurements:

For SEC-MALLS measurements, $100 \mu\text{g}$ samples at a concentration of 1 mg/mL were applied to a GE Superose6 column (Increase 10/300 GL) on a ThermoUltimate 3000 instrument with a UV280 Detector and Wyatt MALS detectors (RI Optilab rEX, LS

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miniDAWN Treos). 1x PBS, pH7.4, was used as an eluent at a flow rate of 0.5 mL/min.

Compared to a Y-shape IgG-like format like the crossmab, a compact contorsbody format is behaving differently with regard to the formation of multimeric assembly triggered by bi-paratopic molecules. Figure SEC complex shows the behaviour of the bi-paratopic molecules without and with CCL2 in a SEC-MALLs chromatography experiment. All bi-paratopic molecules have a comparable molecular weight ranging from 145 to 148 kDa but the behaviour of the contorsbodies differs from that of the Crossmabs as the format is more compact. This compactness also does not allow long daisy chaining upon binding to CCL2. Actually, the contorsbody P1AF8143 (abbreviated as 43 in Figure 18) forms mostly around 85% tetramers after incubation with wtCCL2 while the corresponding Crossmab P1AF8139 (abbreviated as 39 in Figure 18) is forming much bigger multimers to a very large extent.

SEC-MALLS measurements of P1AF8139 (abbreviated as 39) show that the majority of the complexes (>80 %) are multimers of up to 10 MDa whereas P1AF8143 (abbreviated as 43) forms mostly (>85 %) tetramers of approximately 600 kDa in complex with wtCCL2.

Analogously in an additional experiment P1AG5853 and P1AG8317 are analyzed and results are shown.

Depletion of CCL2 via Cellular uptake

In order to measure the ability of the bi-specific antibodies to penetrate the cell via interaction with the FcγRIIb receptor, the CHO-K1 cell line has been transfected with the human FcγRIIb receptor (clone 223). As a control of unwanted interaction with activating FcγRs, the CHO-K1 cell line has also been transfected with the human FcγRIIa (clone 138). The bi-specifics herein have been engineered to enhance the binding to FcγRIIb while keeping the interaction with FcγRIIa as low as possible.

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In vitro, <CCL2> antibodies at different concentrations are mixed to form complexes with CCL2; the complexes are added to the seeded cells. After 24 hours, the supernatant is analyzed to detect the remaining CCL2 (the portion that was not internalized and degraded).

5

Materials & Methods CHO Uptake Assay

Cell lines and culture conditions:

10 CHO cells, CHO-K1-W-TDZ5_HOMSA_FCGR2B_Clone_223 (Roche) or CHO-K1-W-TDZ5_HOMSA_FCGR2A_Clone_138_HR (Roche) were produced in house. CHO cells were cultivated in RPMI160 Medium ATCC Modification, including 200mM L-Glutamine, 4.5g/L Glucose, 10mM HEPES, 1mM Na-Pyruvate supplemented with 10% FCS and 400µg/ml Geneticin (Thermo Fisher).

15 All cells were grown in monolayer in tissue culture dishes (Greiner) and incubated at 37°C in a humidified incubator with 5% CO₂. Cells were detached with Accutase (Thermo Fisher) and further processed in RPMI160 Medium ATCC Modification, including 200mM L-Glutamine, 4.5g/L Glucose, 10mM HEPES, 1mM Na-Pyruvate supplemented with 10% FCS and 50µg/mL Gentamicin (Thermo Fisher).

20

In the cellular uptake studies, 2 ng/mL biotinylated CCL2 (Roche) was pre-incubated with varying dilutions of <CCL2>Mab for one hour to form a CCL2/<CCL2>Mab immune complex in a 96-well tissue culture plate at 37°C and 5 % CO₂.

25 Then, 2,5x10⁴ cells per well of the respective cell line were added to the immune complex and the plate was incubated for 23-24 hours at 37°C and 5 % CO₂.

30 In the following ELISA, the cell culture supernatant (10µL) was transferred to a 96 well streptavidin coated plate (Microcoat) containing assay diluent (90 µL) 1 % BSA (Sigma Aldrich) in PBST (Thermo Fisher) adjusted to pH 2.5 with 160 mM Glycine-HCl (Sigma Aldrich) incubated for one hour at ambient temperature to resolve the immune complex and capture the denatured biotinylated CCL2.

35 The denatured biotinylated CCL2 was detected by sequential one hour incubations at room temperature with 0.3 µg/mL DIG-anti CCL2 detection antibody and 40 mU/ml POD-labeled anti-DIG Fab (both from Roche, Penzberg) in assay diluent.

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Wells were washed 3 times with PBST between each step. For read-out, ABTS solution (Roche, Penzberg) and ABTS stop solution (KPL) were used. OD405/490 was quantified on an i3x (Molecular Devices).

5 Serial dilutions of purified <CCL2>Mab from 40 µg/mL to 0.512 ng/mL were tested in the assay. OD405/490 signals in function of <CCL2>Mab concentrations were fitted via non-linear regression using the following 4-parameter equation to determine effective concentration:

$$y = D + \frac{A - D}{1 + \left(\frac{x}{C}\right)^B}$$

With:

A = Higher asymptote
 B = Hill slope
 C = EC₅₀ value
 D = Lower asymptote
 X = <CCL2>Mab concentration in ng/ml
 Y = OD value

Results are shown in Figures 19A-1 and 20A-C and the table below.

10 Fig.19A-19C and 20A-20C FcγRIIa show that the concentration of CCL2 in the supernatant remains stable for most of the compounds tested. With compound P1AF8142, however, a concentration dependent loss of CCL2 in the supernatant is observed; Compared to crossmab P1AD8325 which share an identical Fc sequence, a format dependent uptake is observed for the contorsbody P1AF8142. Binding to

15 the FcγRIIa and FcγRIIb was observed at the same level for the two compounds, respectively, but the level of binding for the contorsbody P1AF8142 was significantly higher compared to the crossmab P1AD8325. Thus, the contorsbody format influence the binding to FcγRIIa and, together with the smaller size of the format, some uptake via FcγRIIa in the case of the contorsbody P1AF8142 is

20 observed.

Table Fcgamma-IIb: Depletion via FcγRIIb in CHO cells clone 223

Compound	Depletion level max (%)	EC50 [nM]	EC90 [nM]
P1AF8143	82	0.14	0.4
P1AF8142	80	0.13	0.5
P1AD8325	85	0.50	13
P1AF8139	45	0.60	~30

Table Fc gamma I Ib shows different levels of CCL2 depletion/degradation. The two bi-specifics in the contorsbody format, P1AF8142 & P1AF8143, are the most efficient CCL2 depleters with an EC50 around 0.13 nM. The two corresponding crossmabs, P1AD8325 & P1AF8139, have an EC50 around 0.55 nM. EC90 and maximum level of depletion are summarized in Table gamma-IIb.

A very light decrease of CCL2 concentration in the supernatant is also observed for the reference CKLO2-SG1 (Fig.20C gamma I Ib) because this compound has the antigen binding sites as all other bi-specific antibodies P1AD8325, P1AF8139, P1AF8142, P1AF8143, CKLO2-SG1 has a regular Fc, i.e. wt IgG1, thus does not have an engineered Fc for better uptake, but, in case of passive uptake into the cells, the antigen CCL2 is released at low pH and can be sorted out to degradation. Analogously in an additional experiment P1AG5853 and P1AG8317 are analyzed and results are shown.

DC-T-Cell activation assay: DC:CD4 re-stimulation assay

Materials

PBMC from healthy donors were prepared from whole blood within six hours of blood withdrawal. Cells were cryopreserved in vapour phase nitrogen until use in the assays. The quality and functionality of each PBMC preparation was analyzed by seven days of activation with positive controls such as KLH to assess naïve T cell responses.

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Keyhole limpet haemocyanin (KLH) was used as a technical control, reconstituted and stored at -80°C in single use aliquots according to the manufacturer's recommendations under sterile conditions. Additionally, bevacizumab (Avastin®) was included as a positive benchmark protein. All samples were tested at a final concentration of 0.3 µM for the DC stimulation stage and for the APC re-stimulation stage.

Methods

Monocytes were isolated from frozen PBMC samples by magnetic bead selection and differentiated into immature DC (iDC) using GM-CSF and IL-4. iDC were then harvested, washed and loaded with each individual test protein (mAb (data not shown) or immune complexes) for 4 hours at 37°C at a final concentration of 300nM. The immune complexes were freshly prepared as follows: 600nM of mAb was incubated with 600nM CCL2 for 24 hours at room temperature and added to the iDC at a final concentration of 300nM. A DC maturation cocktail containing TNFα and IL-1β was then added for a further 40-42 hours to activate/mature the DC (mDC). The expression of key DC surface markers (CD11c, CD14, CD40, CD80, CD83, CD86, CD209 and HLA-DR) at both the immature and mature stage were assessed by flow cytometry to ensure the DC were activated prior to T cell interaction. 1.0x10⁵ mDC were then co-cultured with 1.2x10⁶ autologous CD4⁺ T cells (isolated by magnetic bead selection) for 6 days at 37°C, 5% CO₂ in a humidified atmosphere. On day 6, autologous monocytes were isolated from PBMC using magnetic bead selection and loaded with the selected protein/peptide that were initially used to load the DC. After incubation at 37°C, 5% CO₂ in a humidified atmosphere for 4 hours. 5x10⁴ monocytes/well were added to anti-IFN-γ/anti-IL-5 pre-coated FluoroSpot plates (Mabtech) along with the corresponding DC:T co-culture in quadruplicate (2.5x10⁵ CD4⁺ T cells/well). The FluoroSpot plates were incubated for 40-42 hours at 37°C, 5% CO₂ in a humidified atmosphere. After incubation the FluoroSpot plates were developed using an in-house procedure and the spot-forming cells (SFC) per well assessed for each cytokine in each test condition.

Surface marker QC checks were performed on the monocyte derived DC at both the immature and mature stage to determine any possible influence of the test product on the DC differentiation and allows for the assessment of the quality of the DCs before subsequent co-culture with CD4⁺ T cells. Surface markers are assessed by flow cytometry using fluorescently labelled antibodies and the Guava® easyCyte™ 8HT flow cytometer.

Data analysis

Data management and statistical analysis has been performed in the R programming language (<https://www.R-project.org/>, v. 3.6.1). Data are transformed to a log2 scale and a Generalized linear model (GLM) is applied to quantify SI (fold change and 95% CI). Adjustments are applied to the dataset (exponential type of heteroscedasticity adjusted, gaussian noise injection at low end of SFU scale, linear regression and extrapolation of each SI to a blank value of 0) and QC plot are generated (DC differentiation markers, reproducibility on compound and donor level, relative stimulation of donors).

To help for the immunogenicity risk assessment the Stimulation Index (SI) is calculated for each test condition in each donor (ratio between SFU/well and the matched blank).

A positive donor response is counted if at least 2-fold SI change is established with $p < 0.05$ (non-adjusted p-value from GLM). The number of positive donor responses to a treatment within the 30 healthy donor cohort gives the response rate relative to this treatment.

Table Response rates overview (St > 2 with $p > 0.05$)- observed percentages based on SFU_corr

Antibody	Response rates for the immune complexes (antibody + CCL2) (in %)
P1AD8325	3,33
P1AF8137-048	23,33
P1AF8139	33,33
P1AF8140	6,67
P1AF8142	3,33
P1AF8143	10

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Compound P1AF8139, with an engineered Fc moiety to increase uptake via FcγRIIb, shows an elevated number of responders (around 33%) when the compound is applied as immune complex whereas the compound P1AF8143, the corresponding contorsbody of Y-shape antibody P1AF8139, do show a percentage of responder at the reference level of 10%.

5

Patent Claims

1. A bispecific antibody comprising a first antigen-binding site that (specifically) binds to a first epitope on human CCL2 and a second different antigen-binding site that (specifically) binds to a second different epitope on human CCL2,

wherein the bispecific antibody comprises

- a) a first polypeptide chain comprising (from N-terminal to C-terminal direction) VH1-CH1-L1-Hinge-CH2-CH3-L2-VL1-CL wherein,

VH1 is a first heavy chain variable domain and VL1 is a first variable light chain domain (both forming together (associating together to form) the first antigen binding site),

CH1 is a constant heavy chain domain 1,

L1 is a polypeptide linker with a length of 5 to 15 amino acids (in one claim with a length of 5 to 10 amino acids),

Hinge is a heavy chain hinge region,

CH2 is a constant heavy chain domain 2,

CH3 is a constant heavy chain domain 3,

L2 is is a polypeptide linker with a length of 5 to 15 amino acids (in one claim with a length of 10 to 15 amino acids),

CL is a constant light chain domain,

and

- b) a second polypeptide chain comprising (from N-terminal to C-terminal direction) VH2-CH1-L1-Hinge-CH2-CH3-L2-VL2-CL wherein,

VH2 is a second heavy chain variable domain and VL2 is a second variable light chain domain (both forming together (associating together to form) the second antigen binding site),

CH1 is a constant heavy chain domain 1,

L1 is a polypeptide linker with a length of 5 to 15 amino acids (in one claim with a length of 5 to 10 amino acids),

Hinge is a heavy chain hinge region,

CH2 is a constant heavy chain domain 2,

CH3 is a constant heavy chain domain 3,

L2 is is a polypeptide linker with a length of 5 to 15 amino acids (in one claim with a length of 10 to 15 amino acids),

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CL is a constant light chain domain,

wherein

5 A) i) the VH1 domain comprises the amino acid sequence of SEQ ID
NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID
NO:75; and

10 ii) the VH2 domain comprises the amino acid sequence of SEQ ID
NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID
NO:93;

or

15 B) i) the VH1 domain comprises the amino acid sequence of SEQ ID
NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID
NO:75; and

20 ii) the VH2 domain comprises the amino acid sequence of SEQ ID
NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID
NO:93;

or

25 C) i) the VH1 domain comprises the amino acid sequence of SEQ ID
NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID
NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID
NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID
NO:94;

30 or

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D) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

5 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

10 E) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

15 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

20 F) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

25 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

30 G) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

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ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

5 or

H) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:73;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

10 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

15 I) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

20 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

25 J) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

30 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

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or

5 K) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:72;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

10 or

L) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

15 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

20 M) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

25 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94;

or

30 N) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

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and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;

5 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

O) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:74;

10 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;

15 and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

or

P) i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;

20 and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:92;

and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93;

25 2. The bispecific antibody according to claim 1, wherein

i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;

and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

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ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:91;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:93.

5 3. The bispecific antibody according to claim 1, wherein

i) the VH1 domain comprises the amino acid sequence of SEQ ID NO:71;
and the VL1 domain comprises the amino acid sequence of SEQ ID NO:75; and

10 ii) the VH2 domain comprises the amino acid sequence of SEQ ID NO:90;
and the VL2 domain comprises the amino acid sequence of SEQ ID NO:94.

15 4. The bispecific antibody according to anyone of the claims 1 to 3, wherein
L1 is a polypeptide linker with a length of 9 to 11 amino acids, and
L2 is a polypeptide linker with a length of 9 to 11 amino acids.

20 5. The bispecific antibody according to claim 4, wherein
L1 and L2 are polypeptide linkers selected from the group of :
GSGGSGGSGG (SEQ ID NO: 183), GSGGGSGGGG (SEQ ID NO: 184),
GSGGGGSGGG (SEQ ID NO: 185); GSGGGSGGGG (SEQ ID NO: 186),
GGSGGGSGGG (SEQ ID NO: 187), GGSGGGGSGG (SEQ ID NO: 188),
GGGSGGSGGG (SEQ ID NO: 189), GGGSGGGSGG (SEQ ID NO: 190),
and GGGGSGGSGG (SEQ ID NO: 191).

25 6. The bispecific antibody according to claim 4, wherein
L1 is a polypeptide linker comprising the amino acid sequence of
GGSGGGGSGG (SEQ ID NO: 188), and
L2 is a polypeptide linker comprising the amino acid sequence of
30 GSGGGGSGG (SEQ ID NO: 188).

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7. The bispecific antibody according to anyone of the claims 1 to 6, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG isotype, preferably of human IgG1 isotype.
8. The bispecific antibody according to anyone of the preceding claims, wherein the bispecific antibody
 - i) blocks binding of CCL2 to its receptor CCR2 *in vitro* (reporter assay, $IC_{50}=0.5nM$); and/or
 - ii) inhibits CCL2-mediated chemotaxis of myeloid cells *in vitro* ($IC_{50}=1.5nM$); and/or
 - iii) is cross-reactive to cyno and human CCL2.
9. The bispecific antibody according to anyone of the preceding claims, wherein the bispecific antibody is not cross-reactive to other CCL homologs, selected from the group of CCL8, CCL7, and CCL13, compared to the binding to CCL2.
10. The bispecific antibody according to anyone of the preceding claims, wherein the bispecific antibody binds to human CCL2 in pH dependent manner and wherein the first antigen binding site and the second antigen binding site both bind to CCL2 with a higher affinity at neutral pH than at acidic pH.
11. The bispecific antibody according to anyone of the preceding claims, wherein the bispecific antibody binds to human CCL2 with a 10 times higher affinity at pH 7.4, than at pH 5.8.
12. The bispecific antibody according to anyone of claims 1 to 11, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)
 - i) Q311R and/or P343R ; and/or
 - ii) L234Y, L235W, G236N, P238D, T250V, V264I, H268D, Q295L, T307P, K326T and/or A330K; and/or
 - iii) M428L, N434A and/or Y436T; and/or
 - iv) Q438R and/or S440E.

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13. The bispecific antibody according to anyone of of claims 1 to 11, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)
 - 5 i) Q311R, and/or P343R; and/or
 - ii) L235W, G236N, H268D, Q295L, K326T and/or A330K; and/or
 - iii) N434A; and/or
 - iv) Q438R and/or S440E.
- 10 14. The bispecific antibody according to anyone of of claims 1 to 11, wherein the constant heavy chain domains CH1, Hinge, CH2 and CH3 are of human IgG1 isotype and comprise one or more of the following mutations (Kabat EU numbering)
 - i) Q311R and P343R; and
 - ii) L234Y, P238D, T250V, V264I, T307V and A330K; and
 - 15 iii) M428L, N434A and Y436T; and
 - iv) Q438R and S440E.
- 20 15. The bispecific antibody according to anyone of claims 12 to 14, wherein the constant heavy chain domains CH3 comprise the following mutation (Kabat EU numbering)
 - K447G.
16. Nucleic acid encoding the antibody according to any one of the preceding claims.
17. A host cell comprising the nucleic acid of claim 16.
- 25 18. A method of producing an antibody comprising culturing the host cell of claim 17 so that the antibody is produced.
19. The method of claim 18, further comprising recovering the antibody from the host cell.

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20. A pharmaceutical formulation comprising the bispecific antibody according any one of claims 1 to 15 and a pharmaceutically acceptable carrier.
21. The bispecific antibody according any one of claims 1 to 15 for use as a medicament.
- 5 22. The bispecific antibody according any one of claims 1 to 15 for use in treating cancer, or an inflammatory or autoimmune disease.
23. Use of the bispecific antibody according any one of claims 1 to 15 in the manufacture of a medicament.
24. The use of claim 23, wherein the medicament is for treatment of cancer.
- 10 25. The use of claim 24, wherein the medicament is for treatment of an inflammatory or autoimmune disease.
26. A method of treating an individual having cancer comprising administering to the individual an effective amount of the bispecific antibody according any one of claims 1 to 15.
- 15 27. A method of treating an individual having an inflammatory or autoimmune disease comprising administering to the individual an effective amount of the bispecific antibody according any one of claims 1 to 15.

Figure 1

1/45

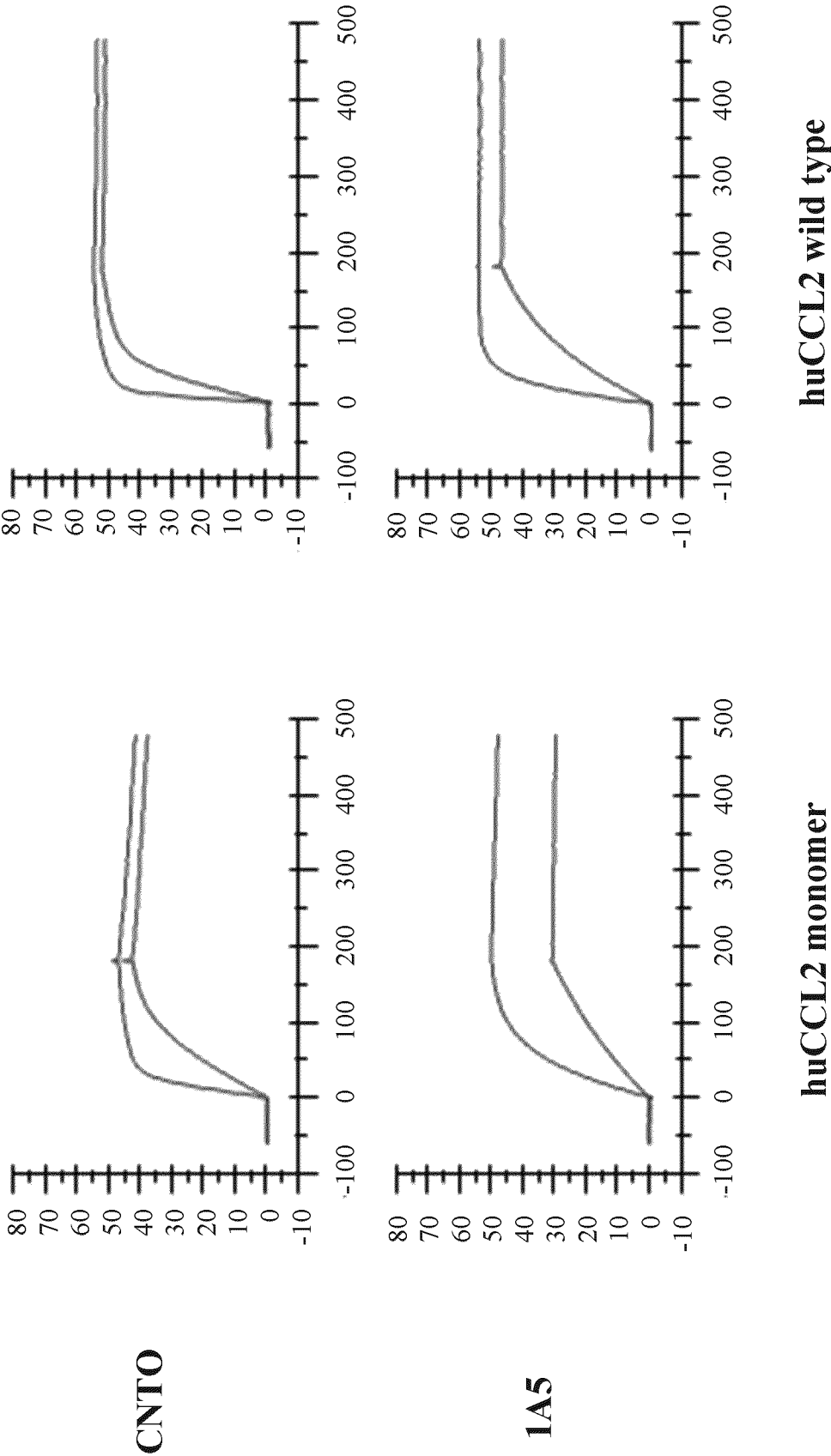


Figure 1 cont.

2/45

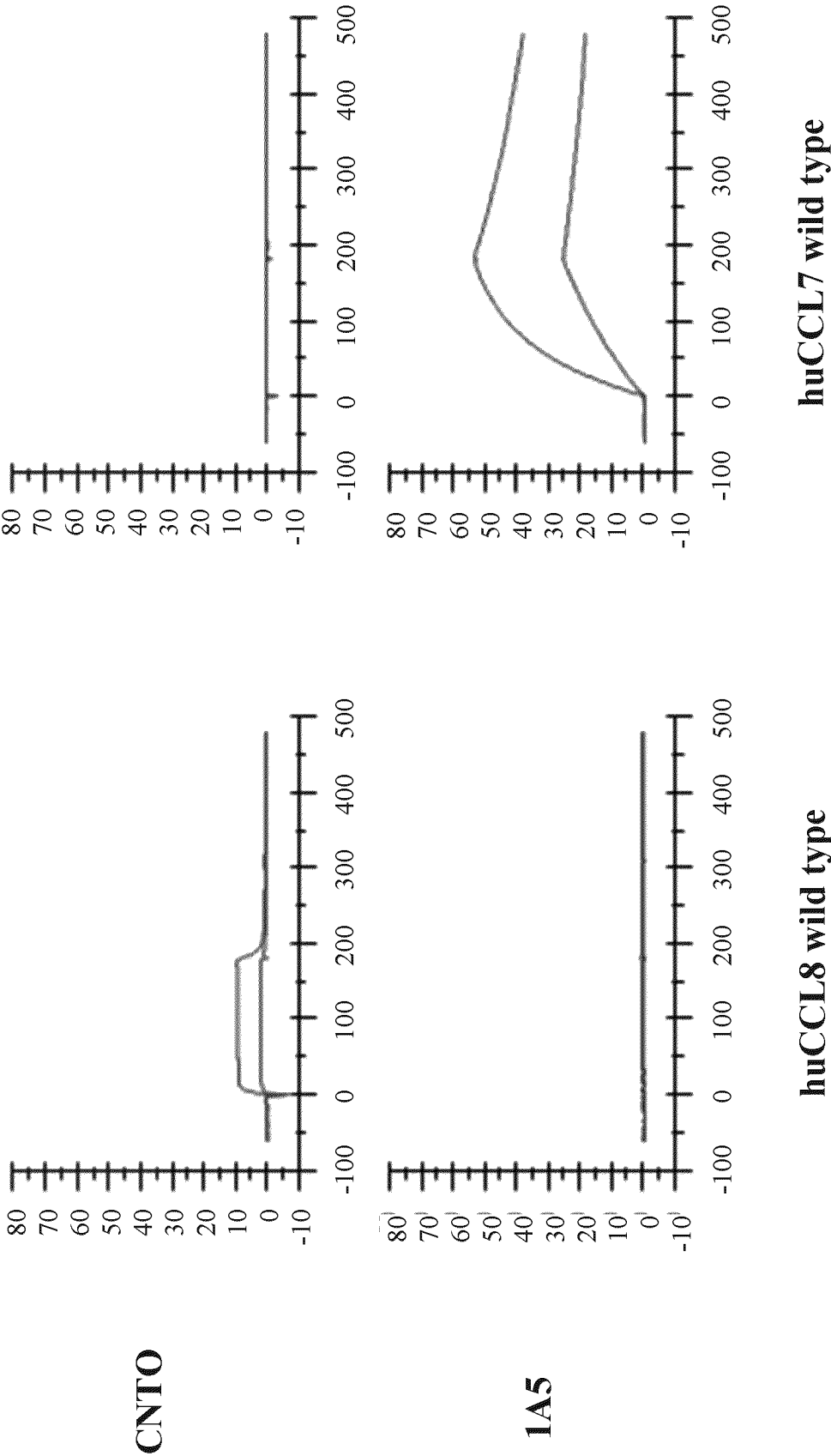


Figure 1 cont.

3/45

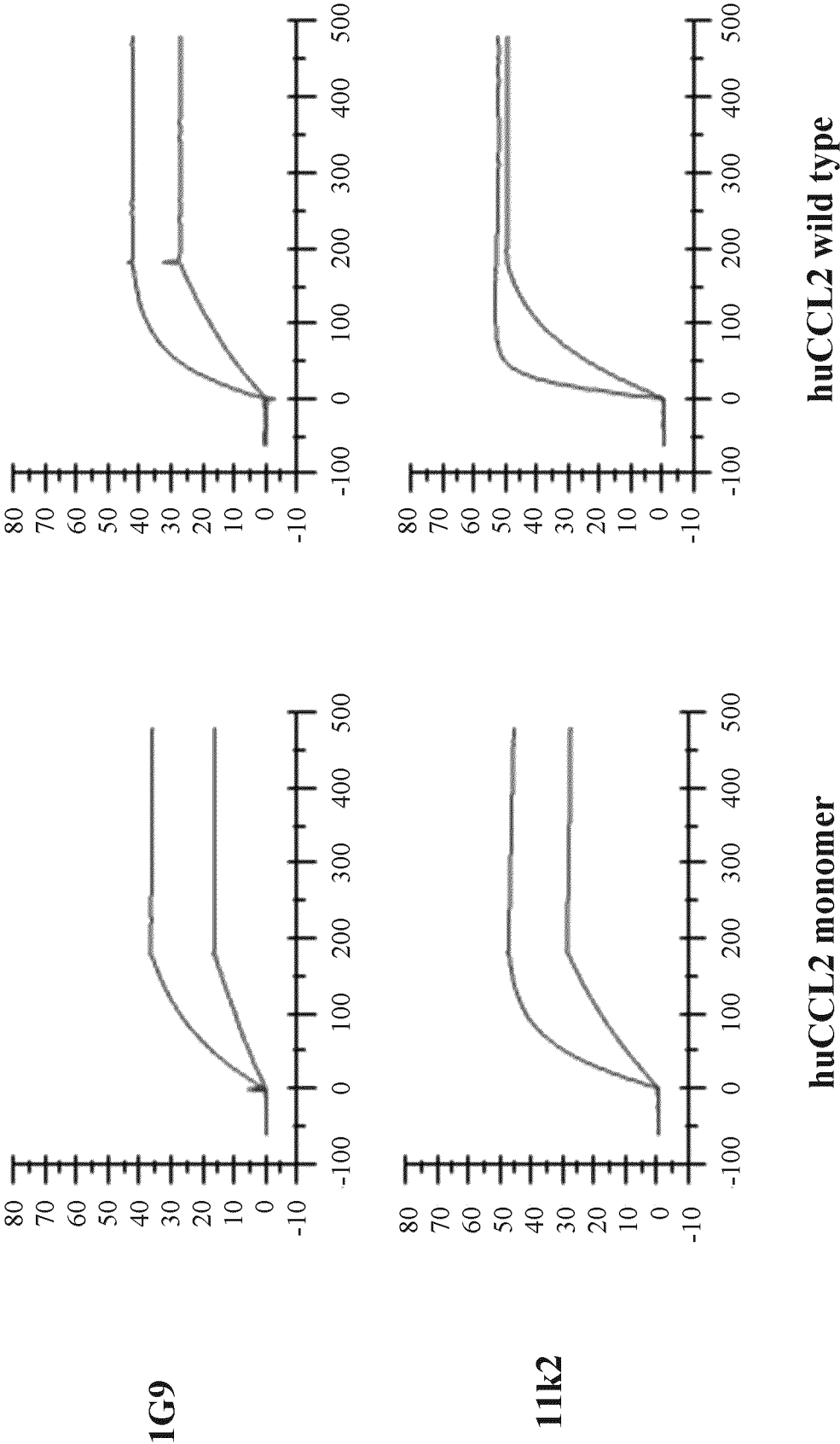


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4/45

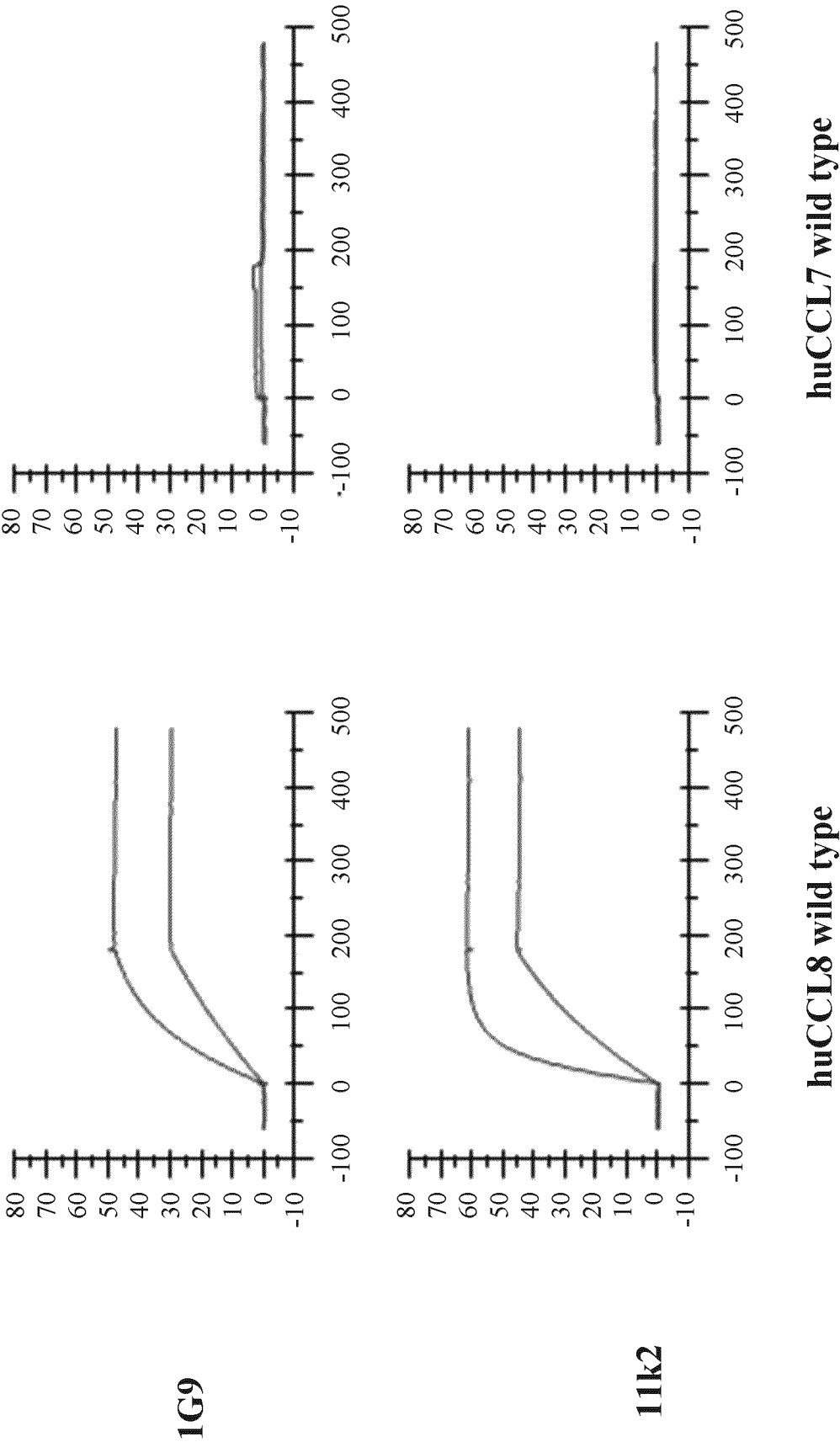


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5/45

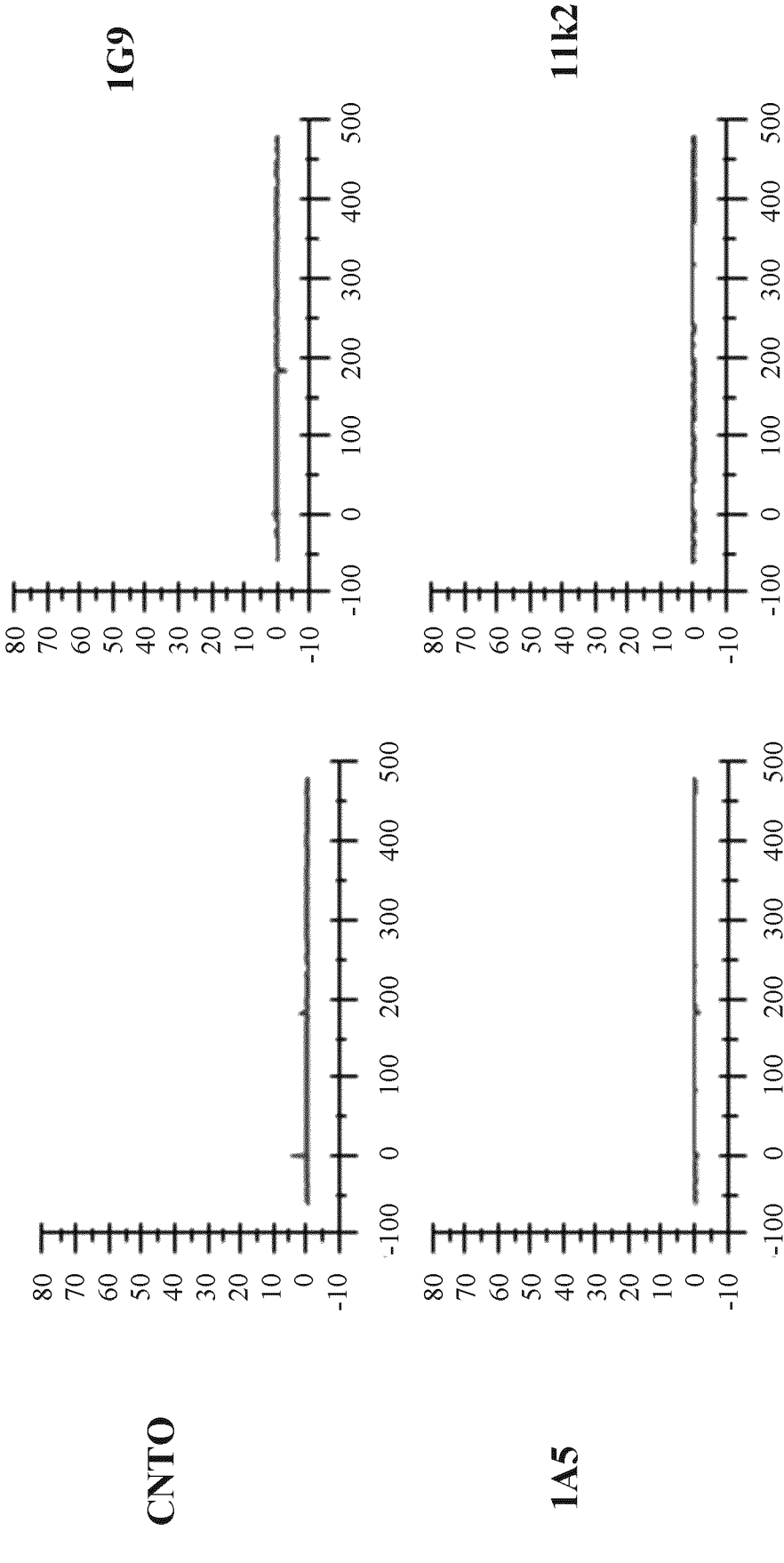


Figure 2a

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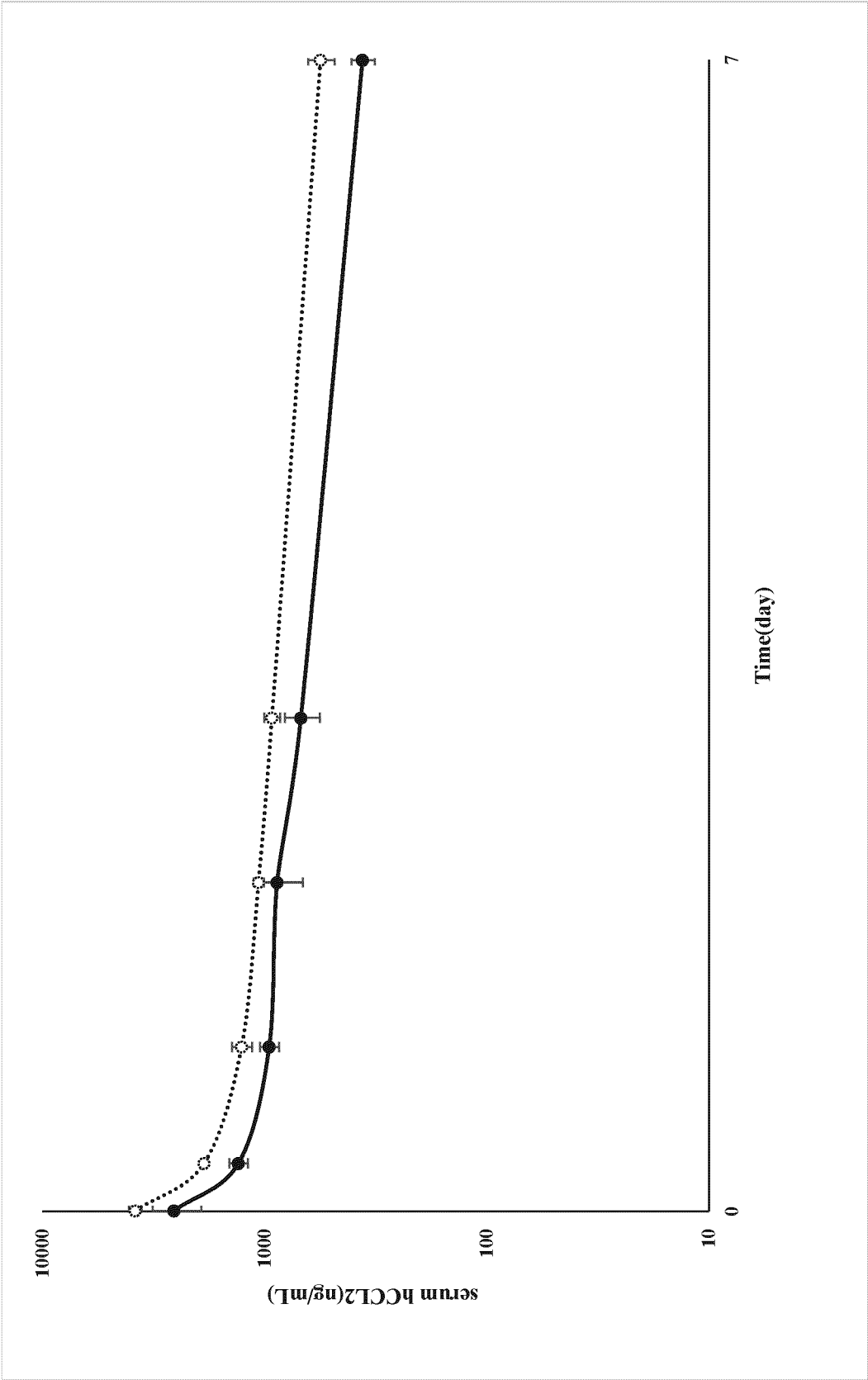


Figure 2b

7/45

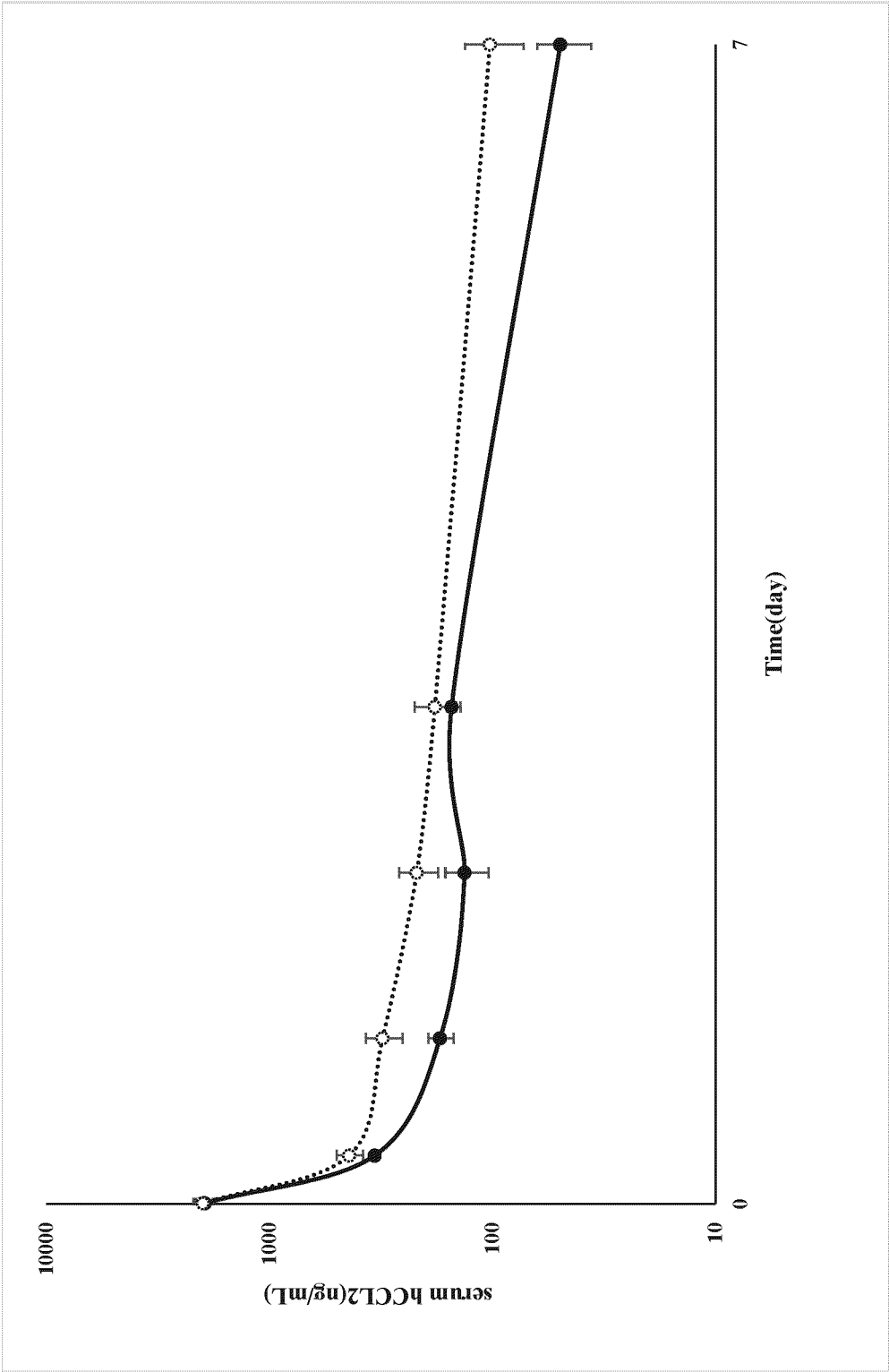


Figure 2c

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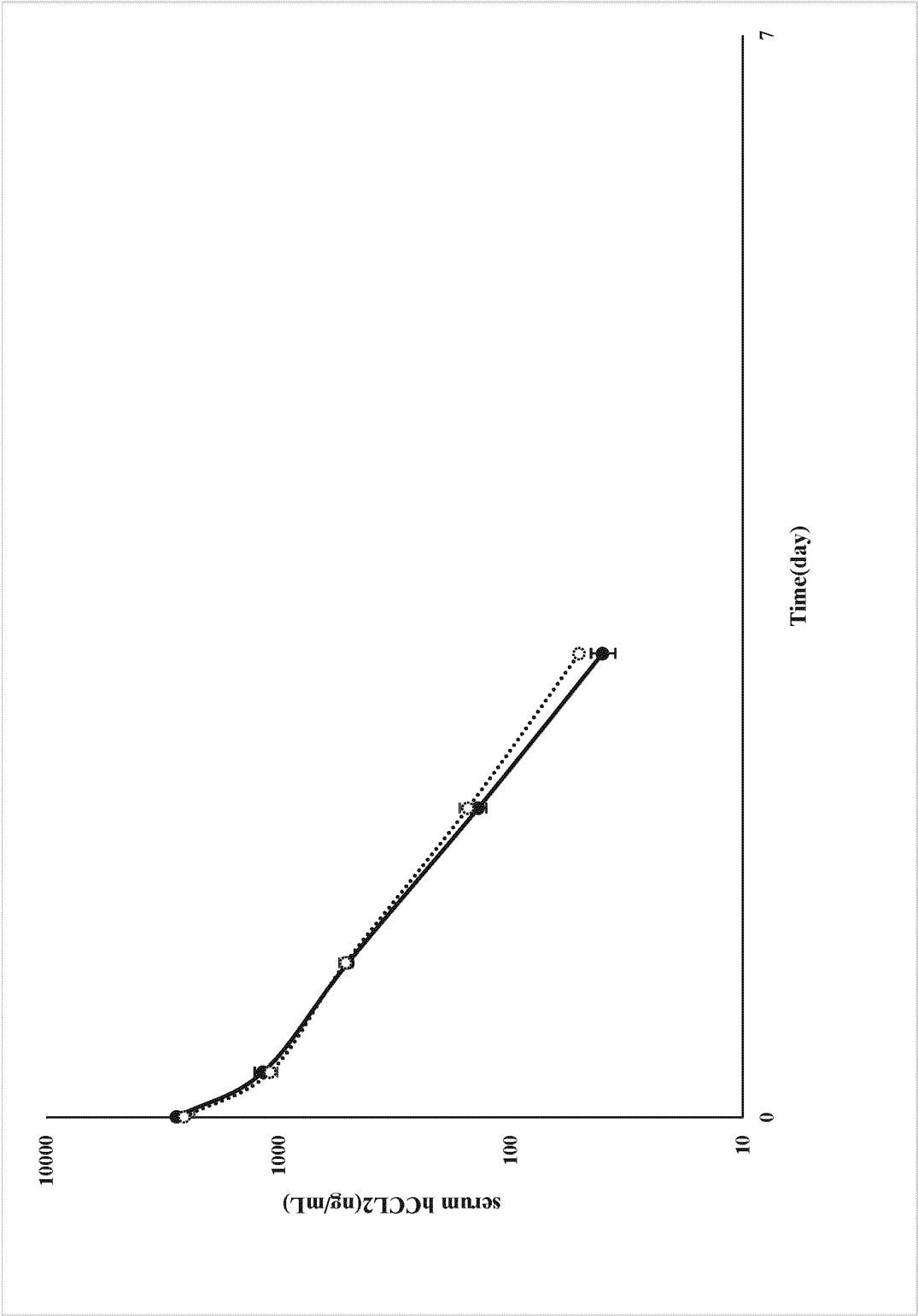


Figure 2d

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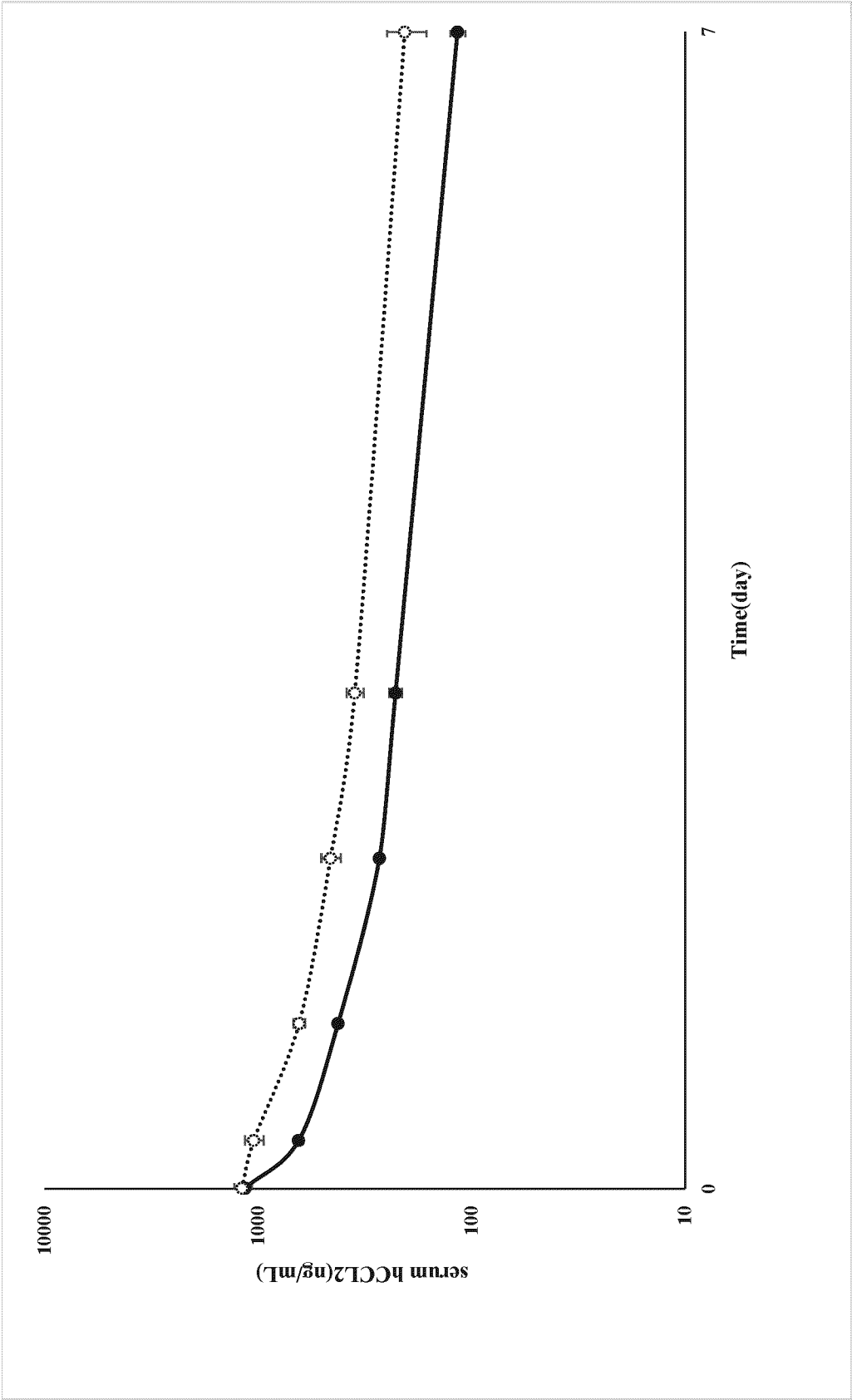


Figure 2e

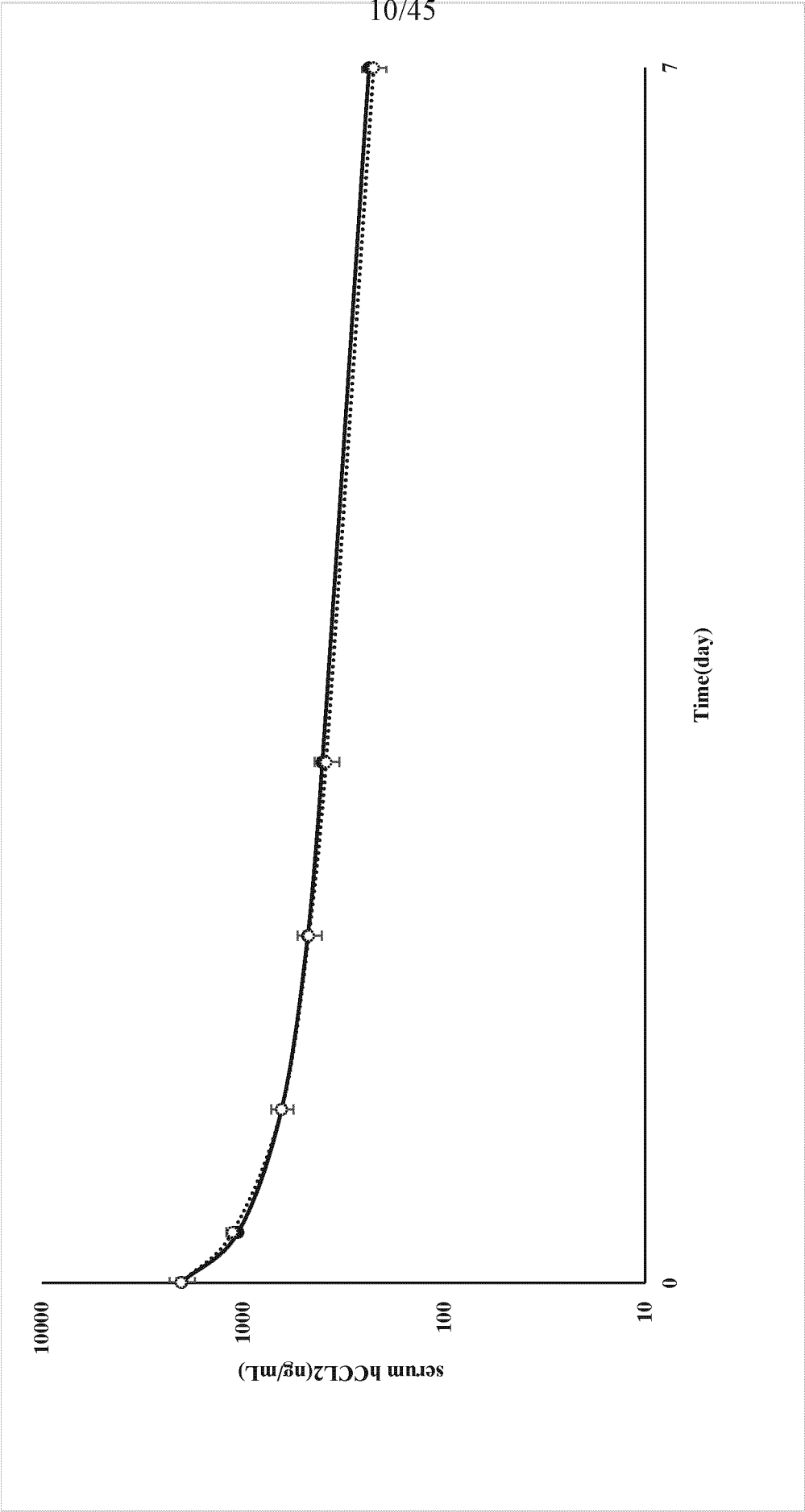


Figure 2f

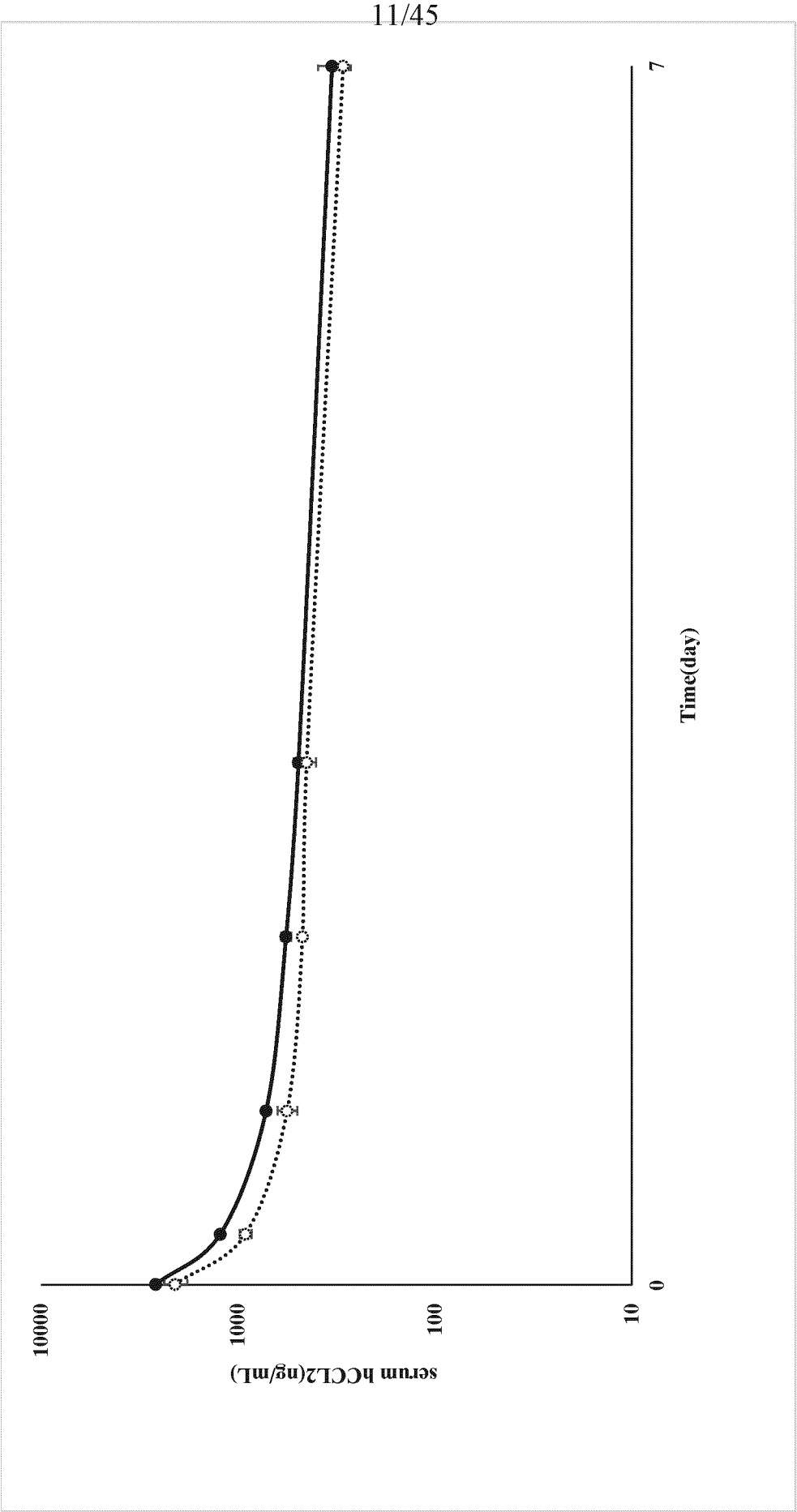


Figure 2g

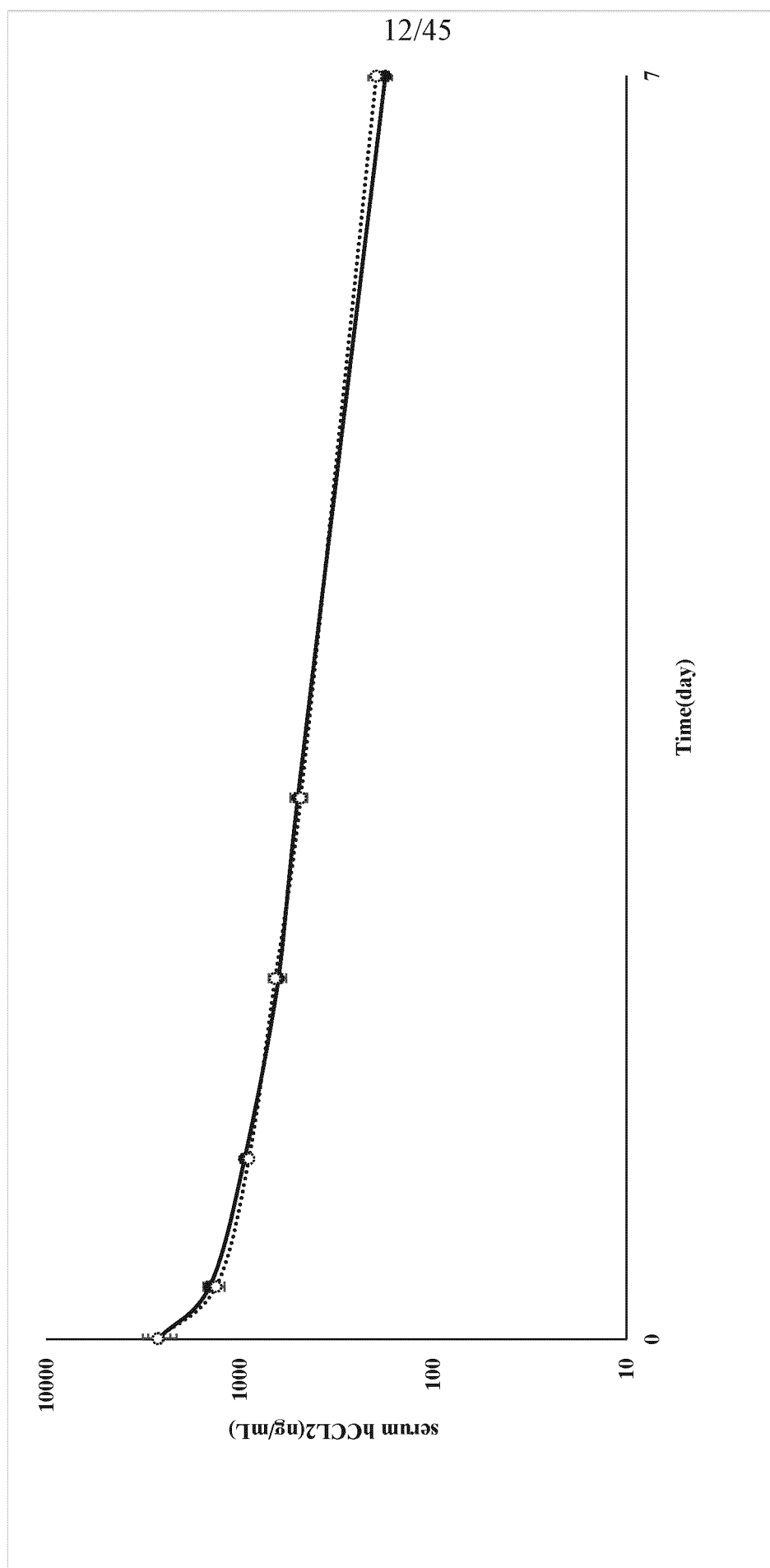


Figure 3a

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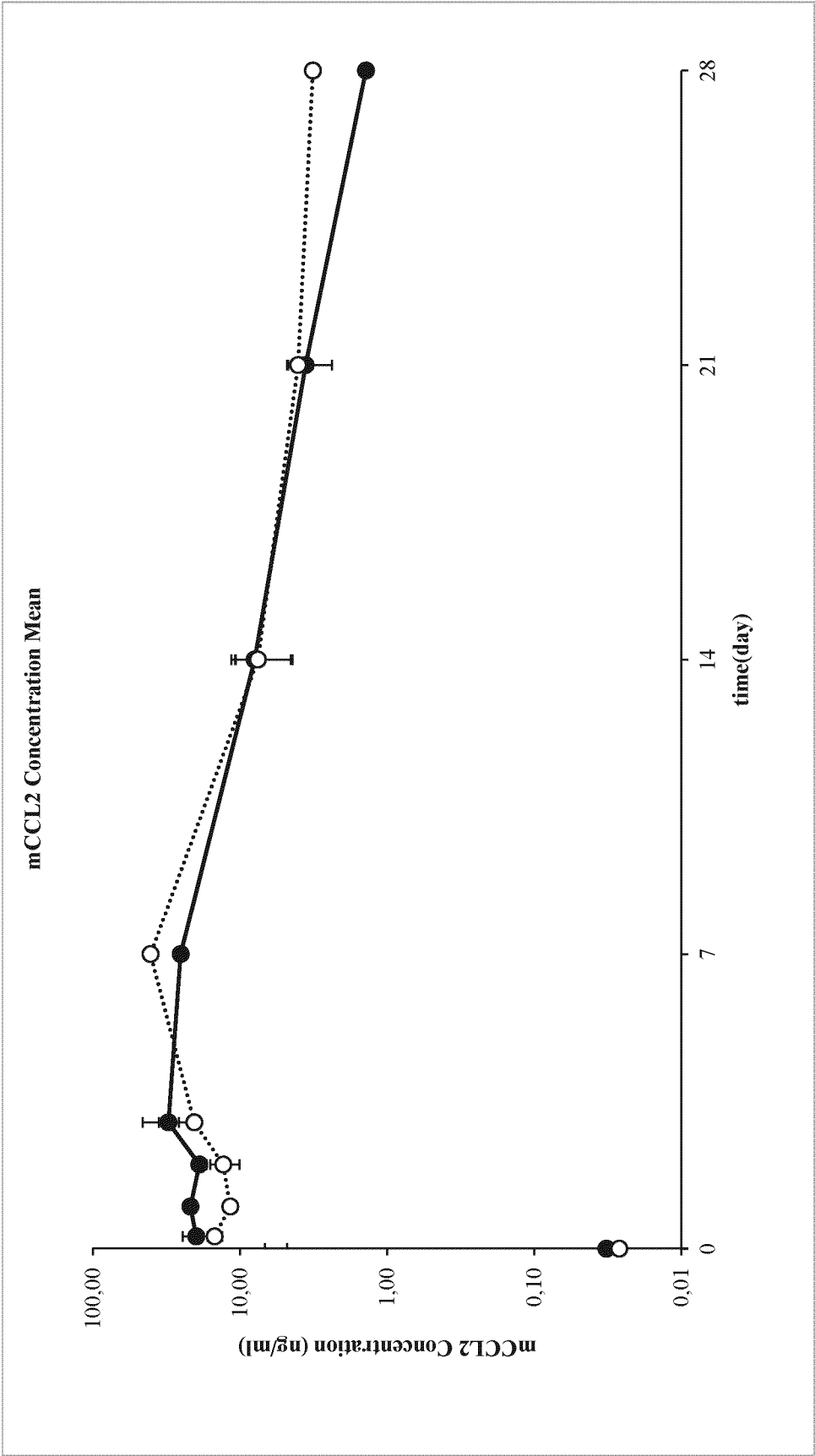


Figure 3b

14/45

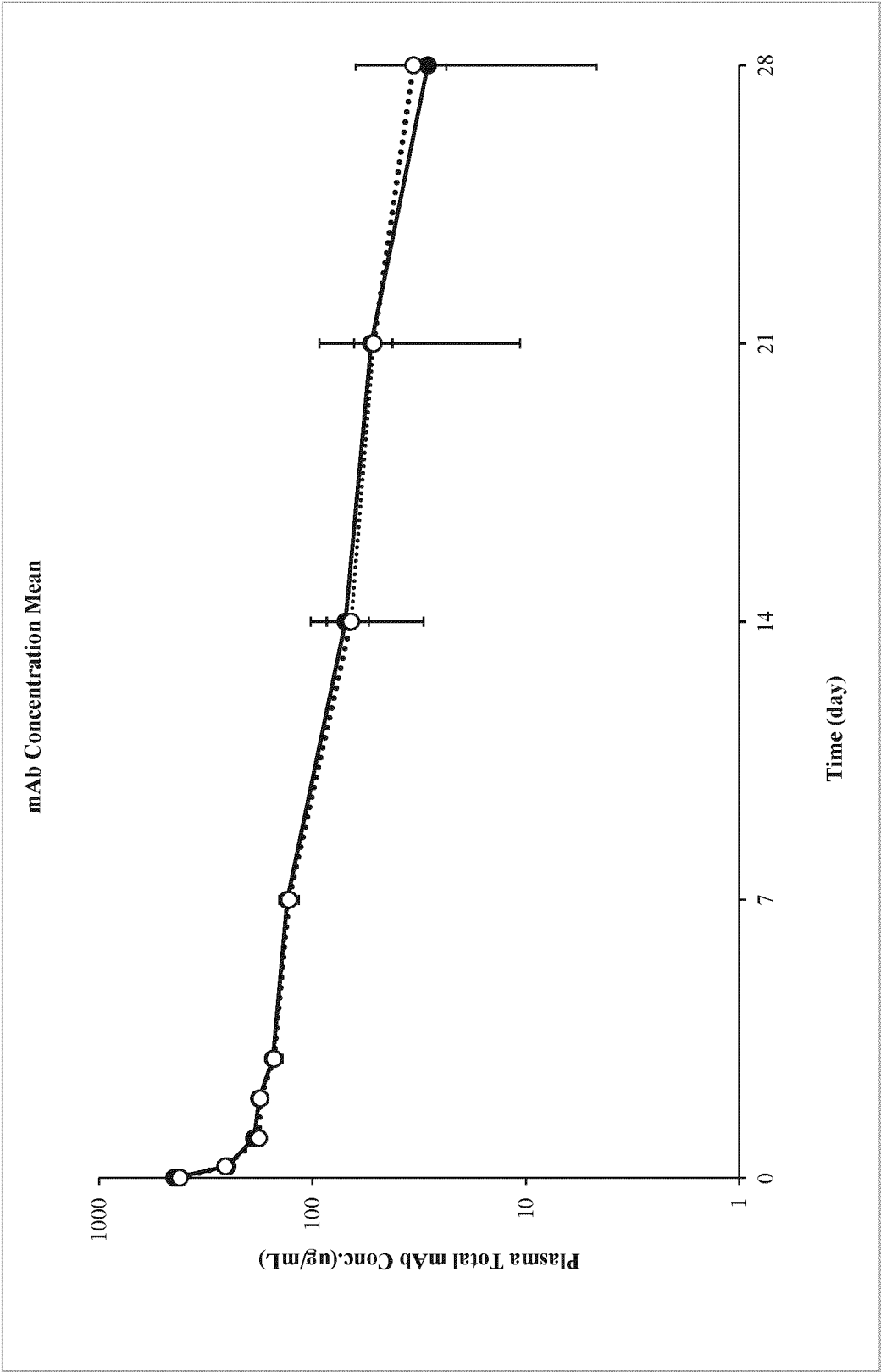


Figure 4a

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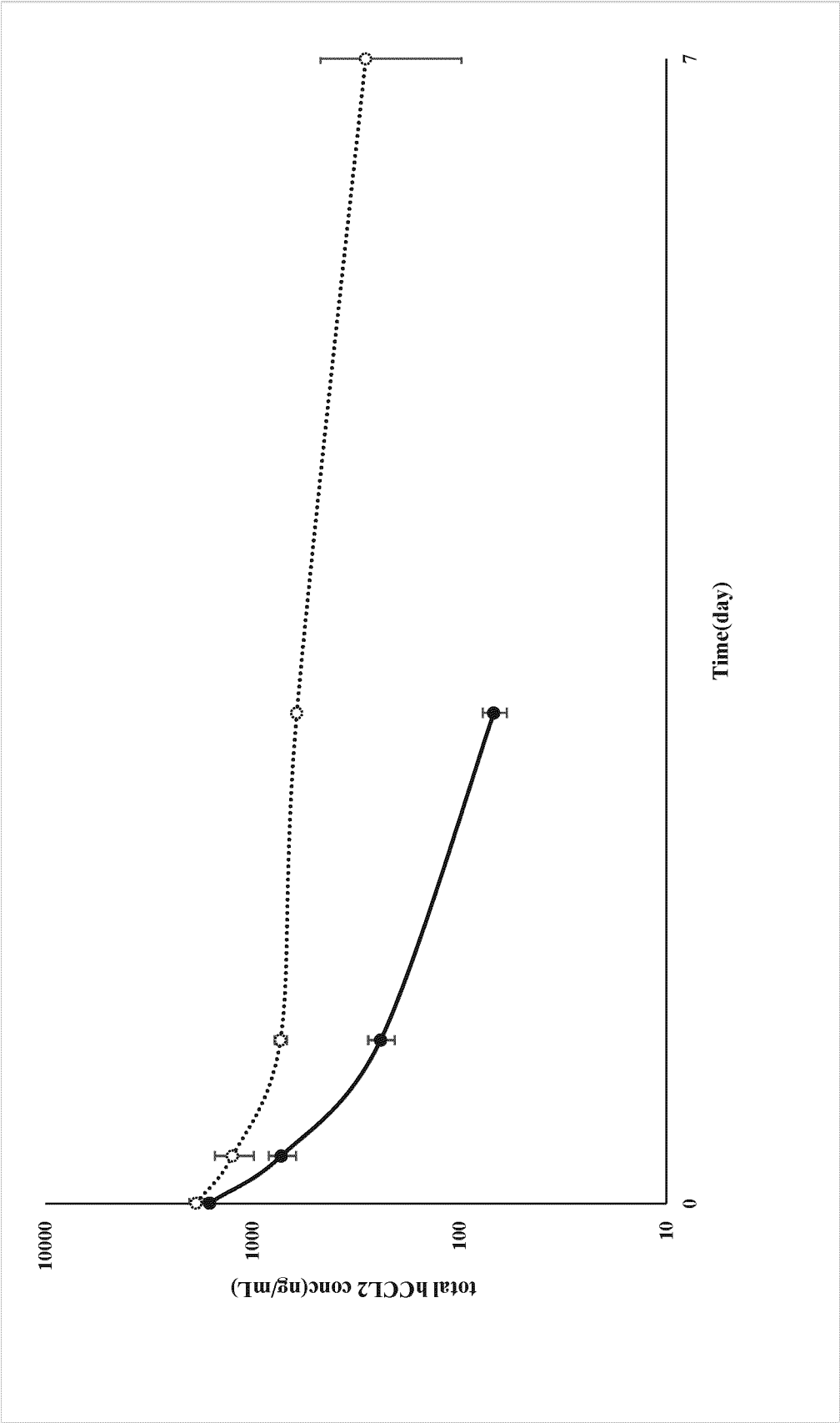


Figure 4b

16/45

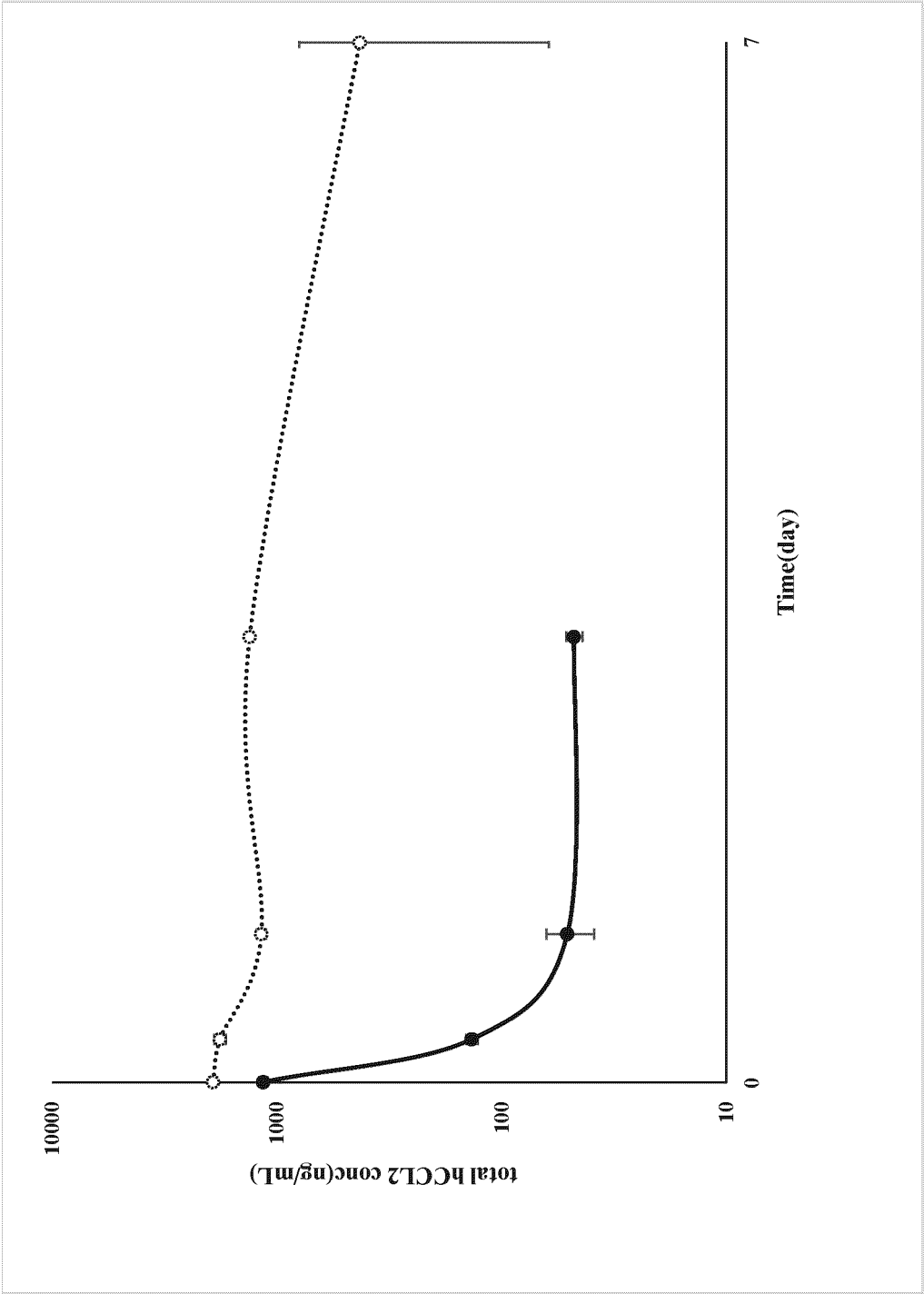


Figure 4c

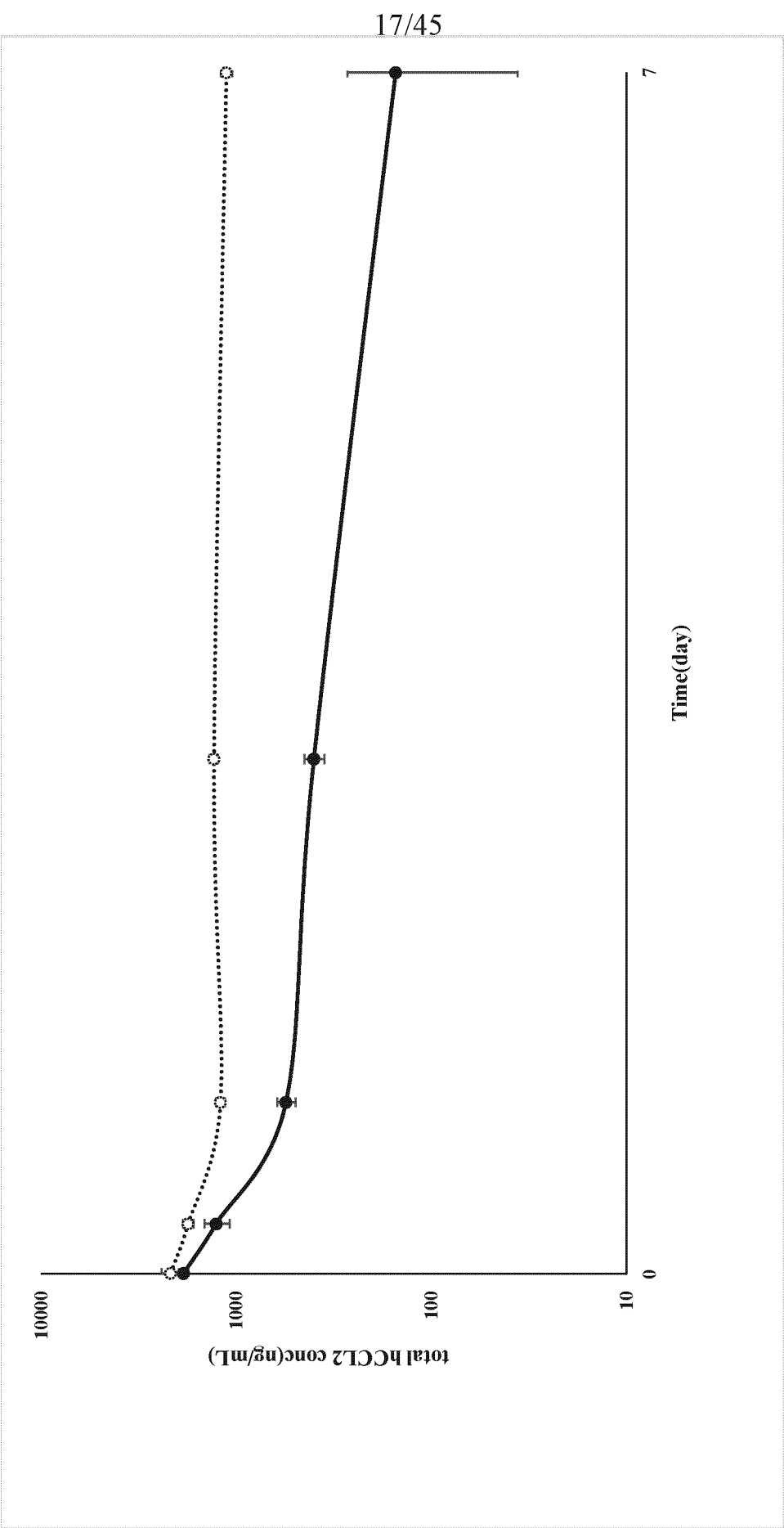


Figure 4d

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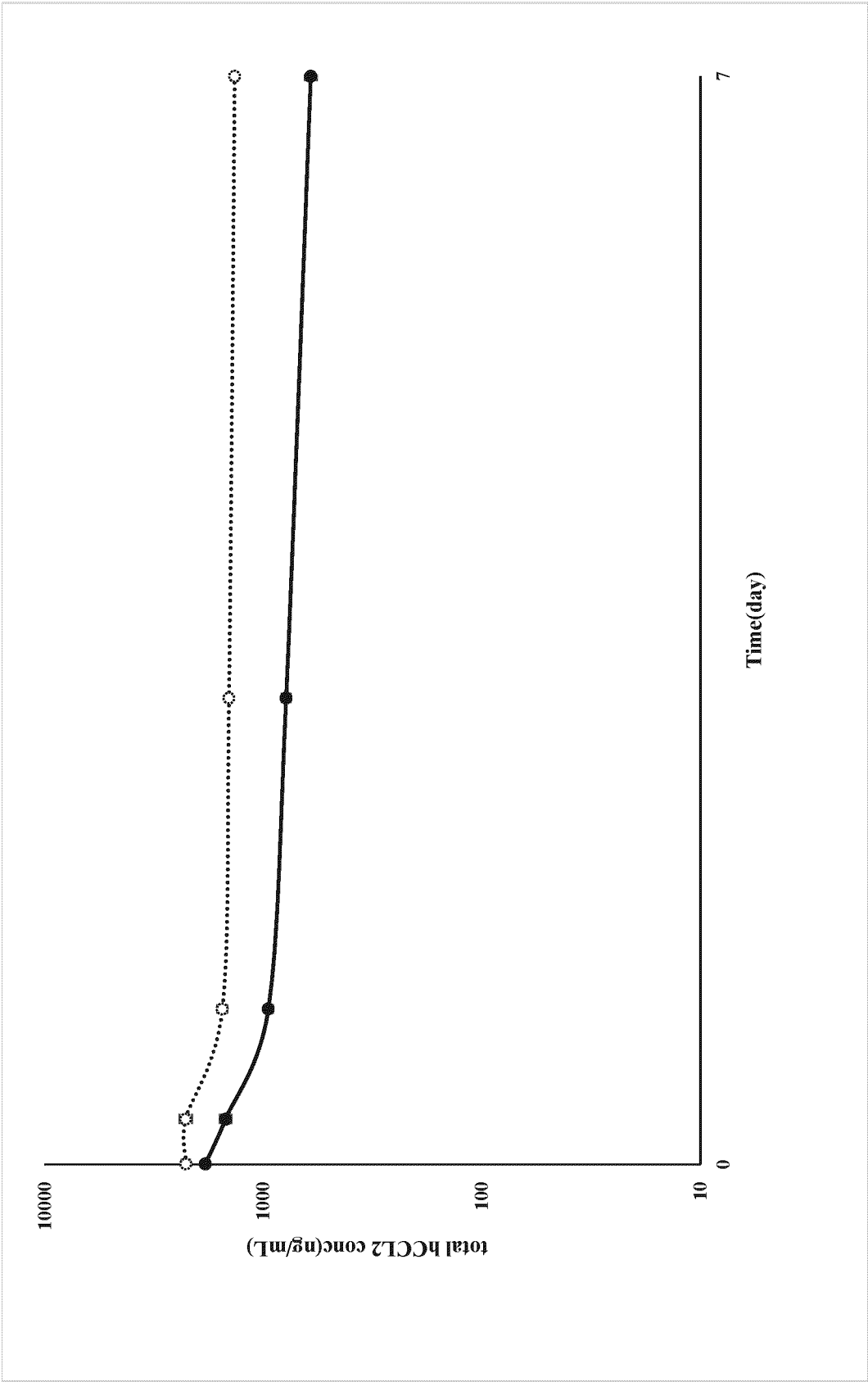


Figure 4e

19/45

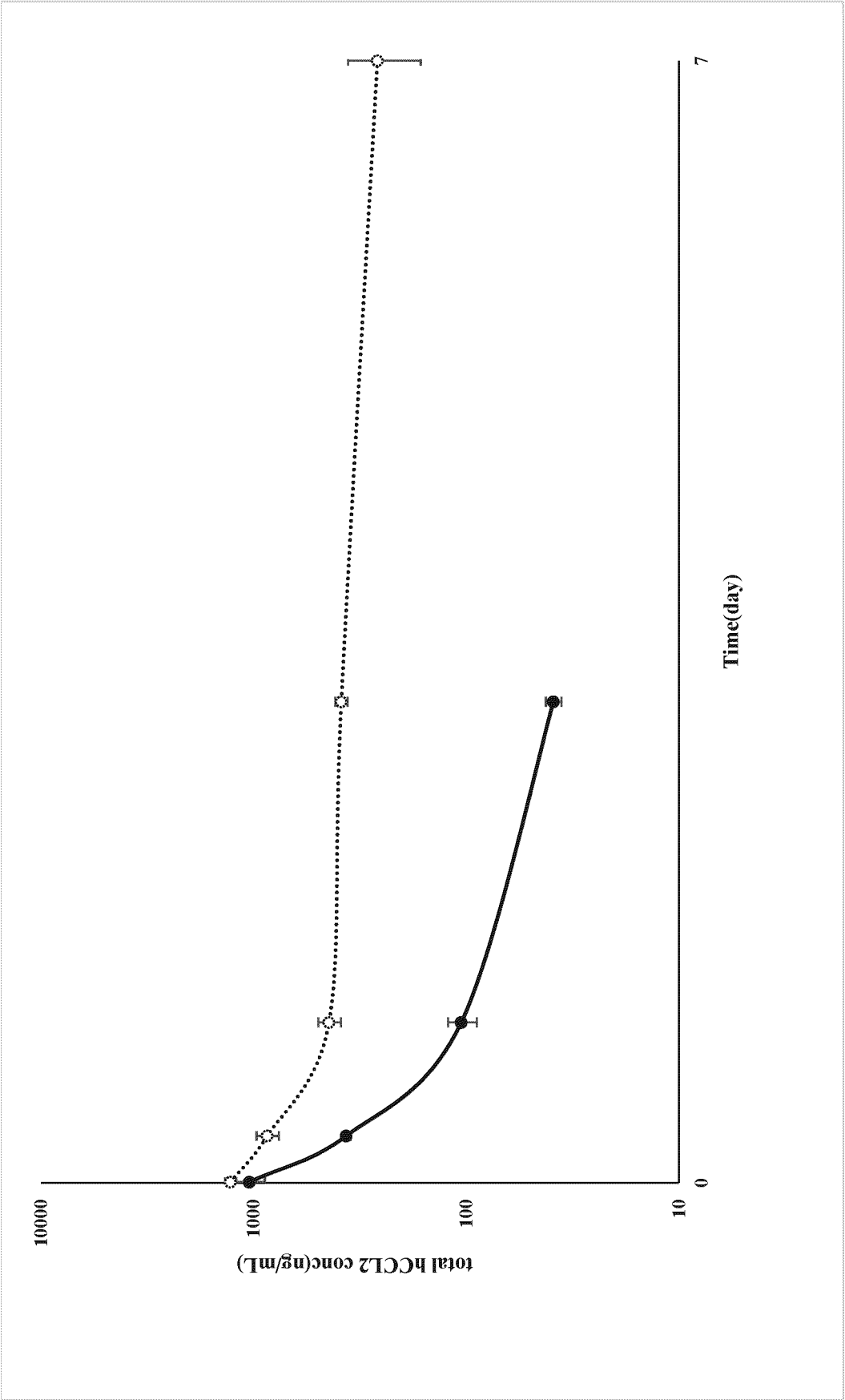


Figure 4f

20/45

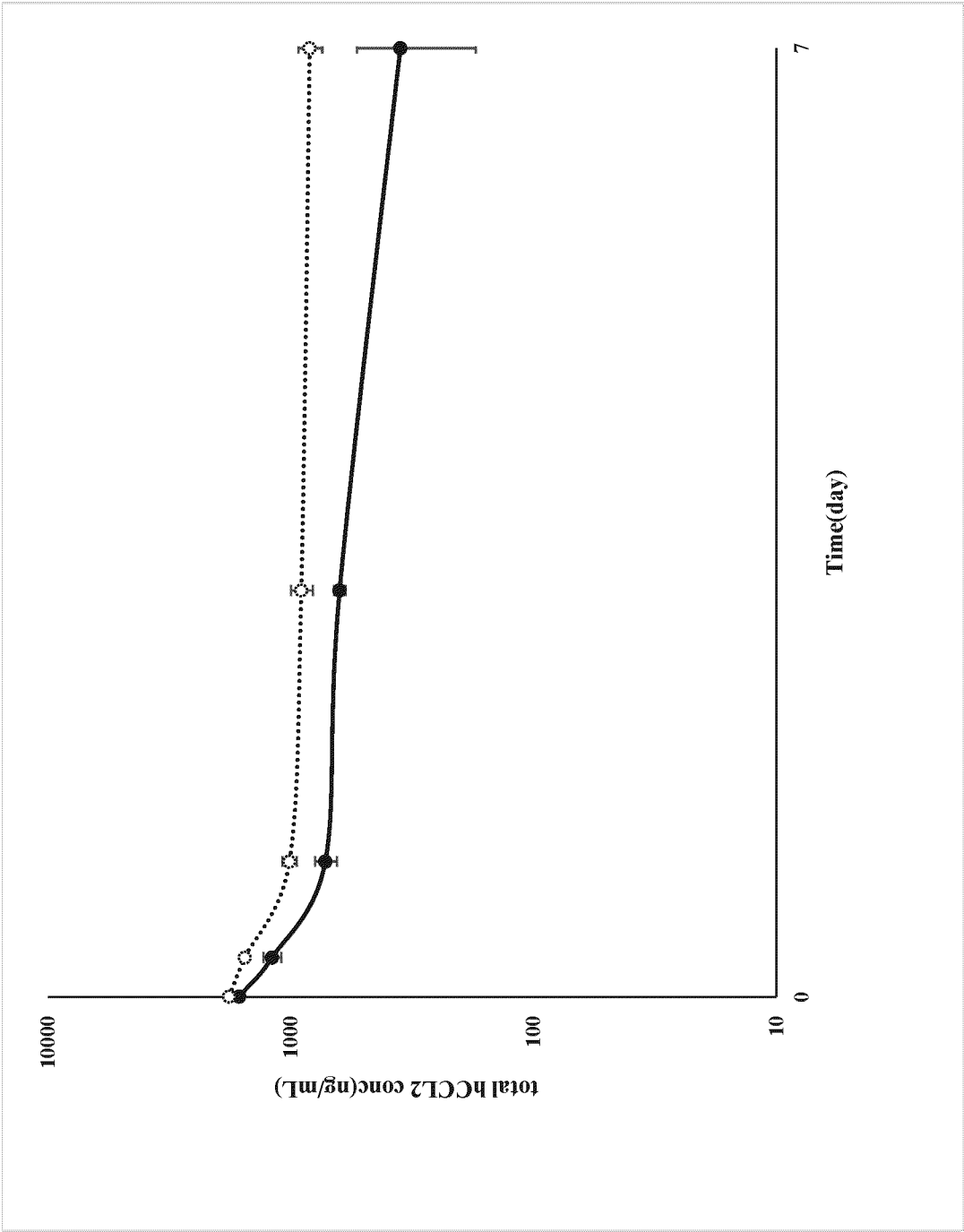


Figure 4g

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Figure 4h

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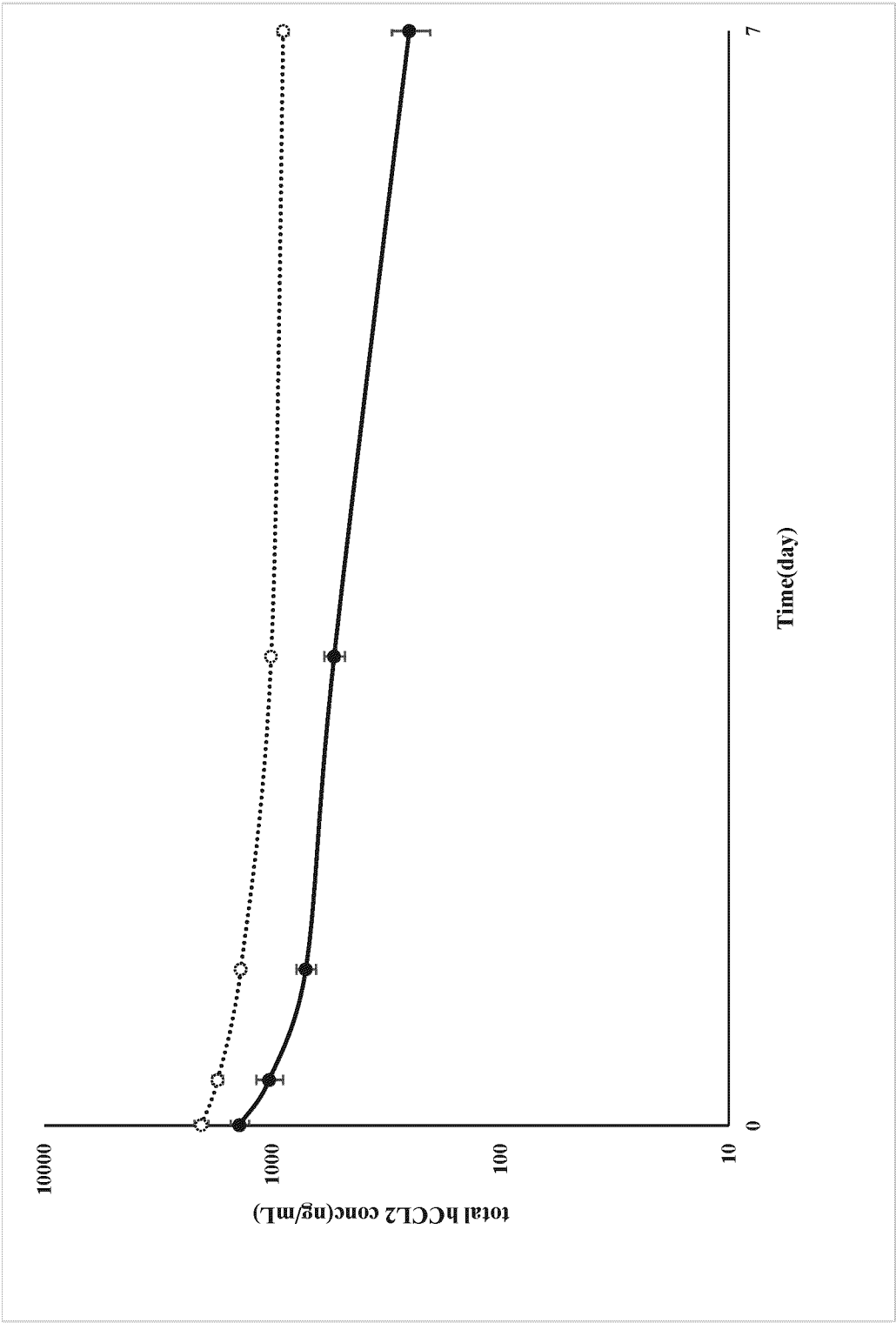


Figure 4i

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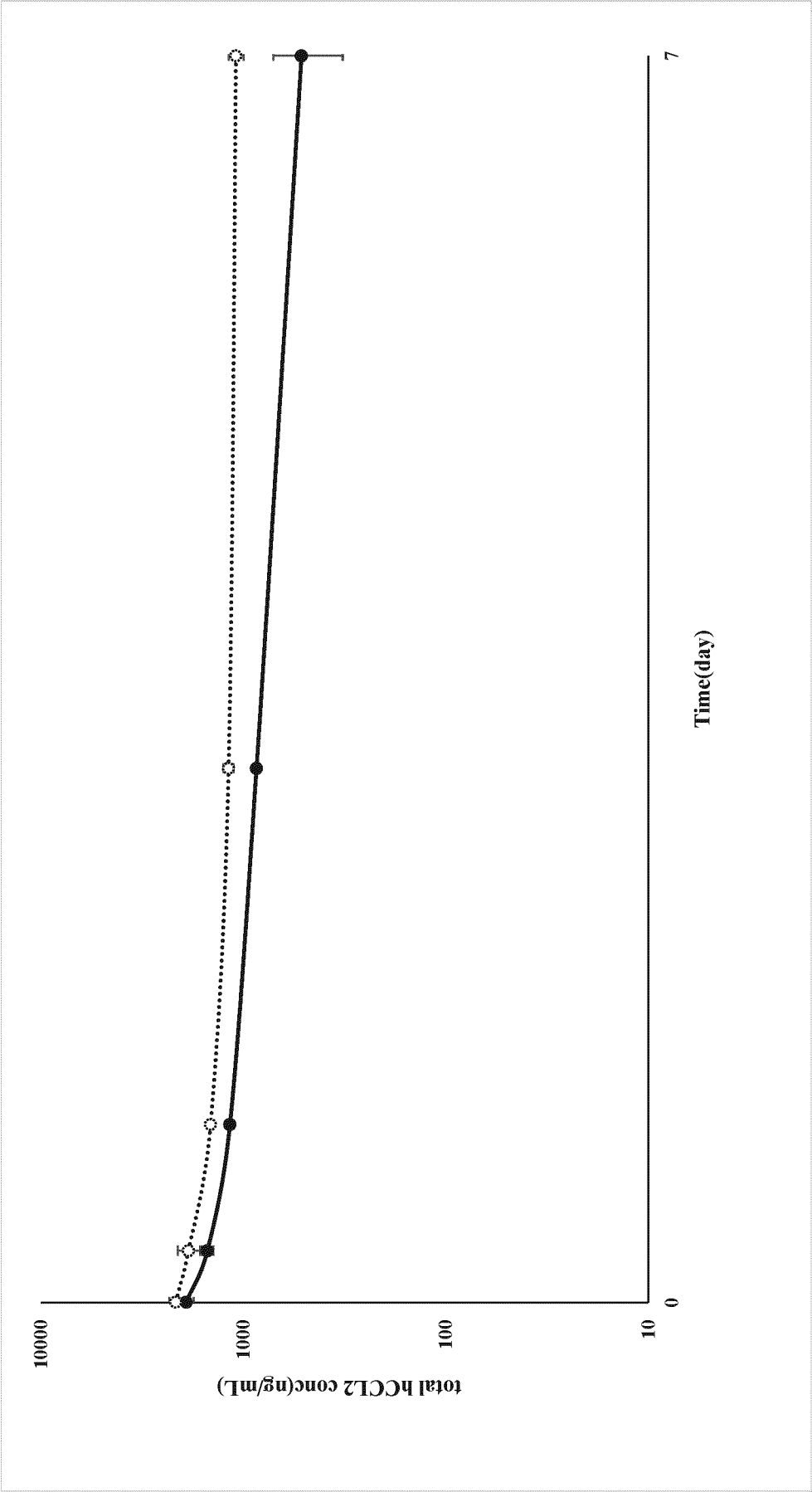
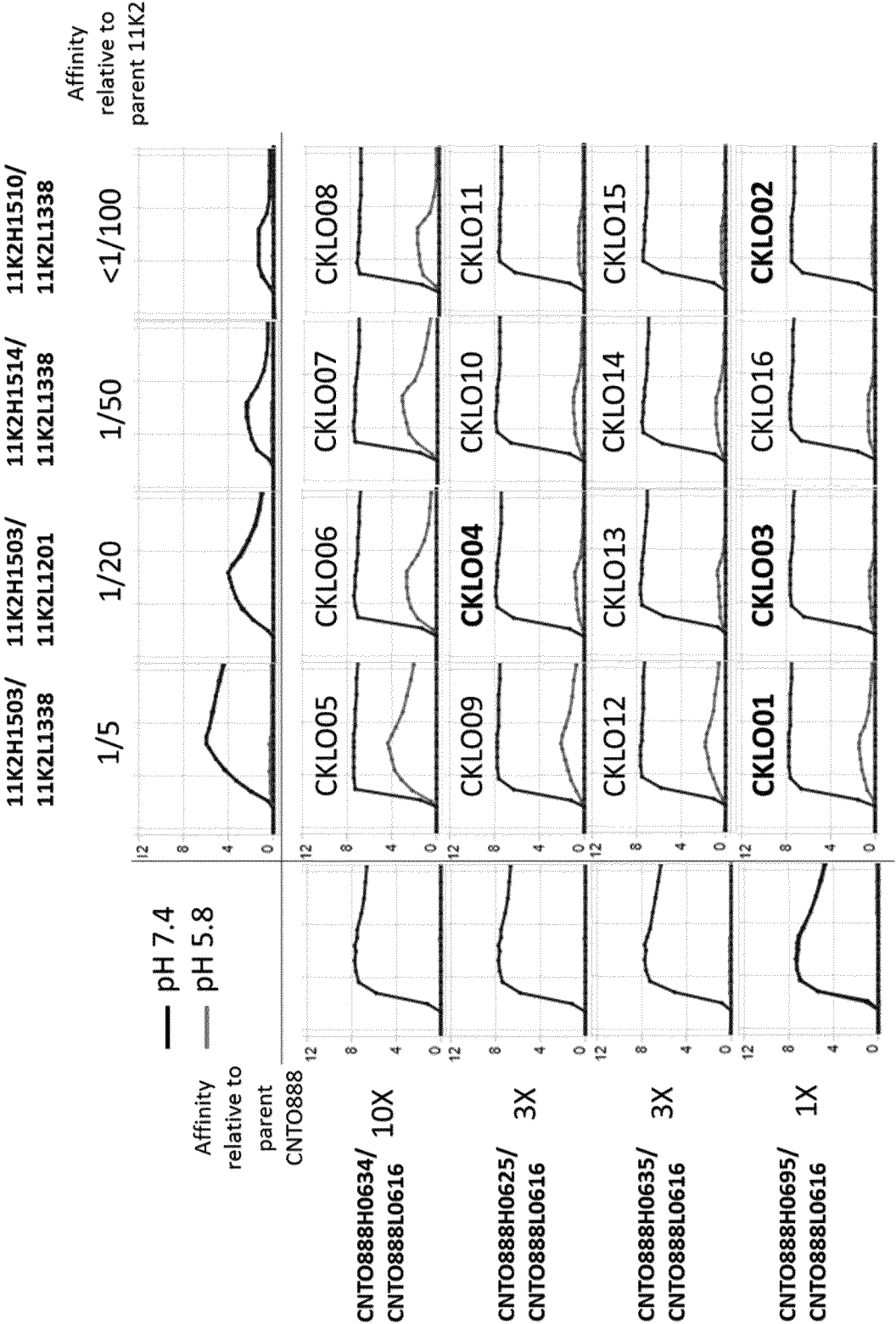


Figure 5a



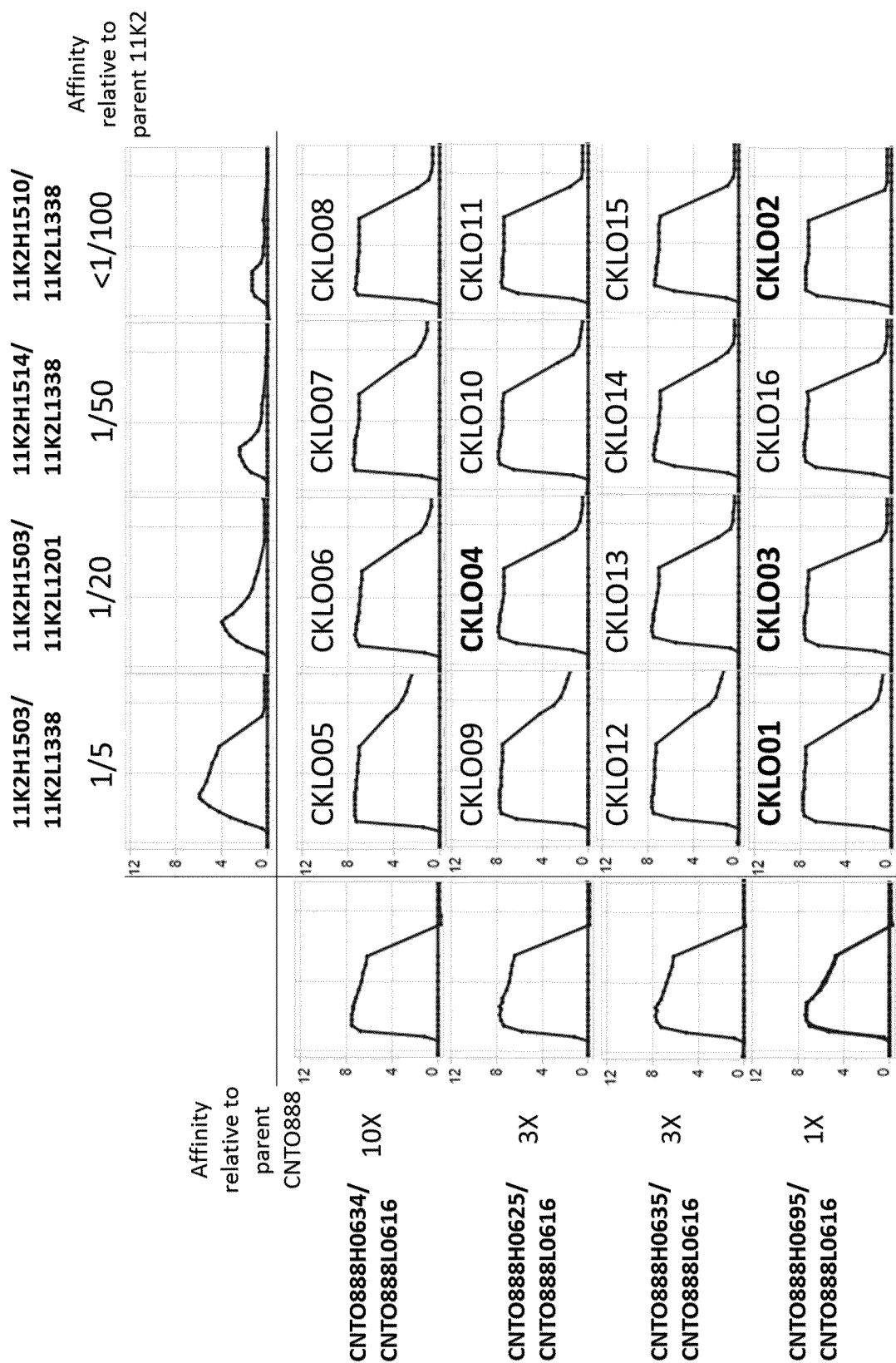


Figure 6

Monomeric CCL8

CKLO01	CKLO04	CKLO03	CKLO02
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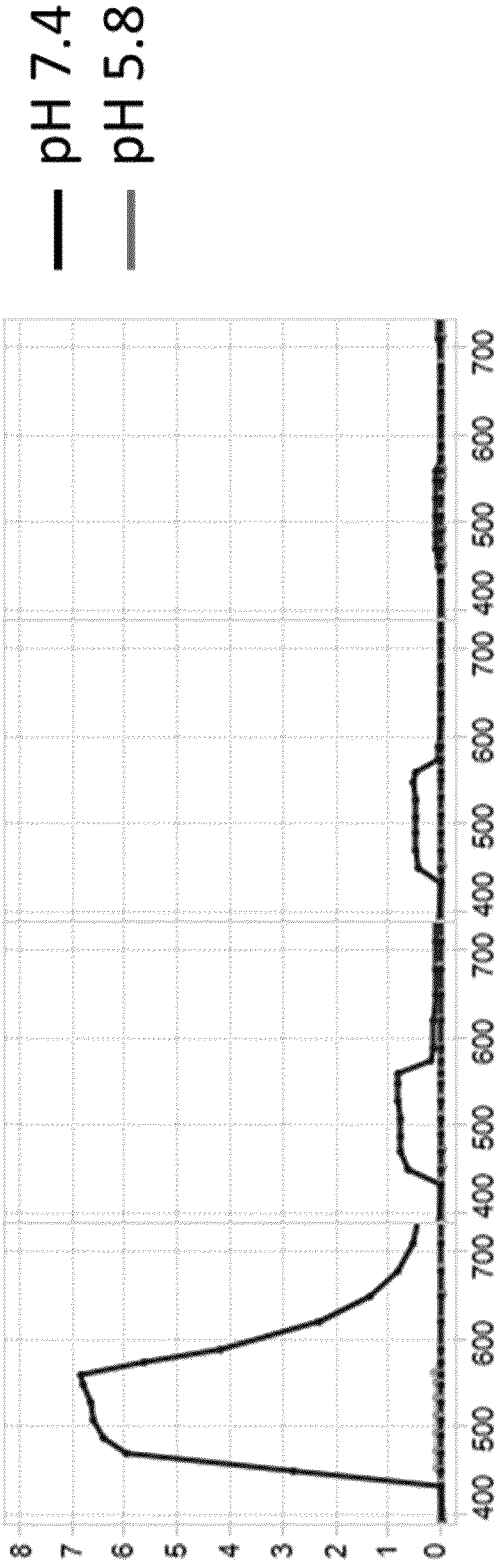


Figure 7a

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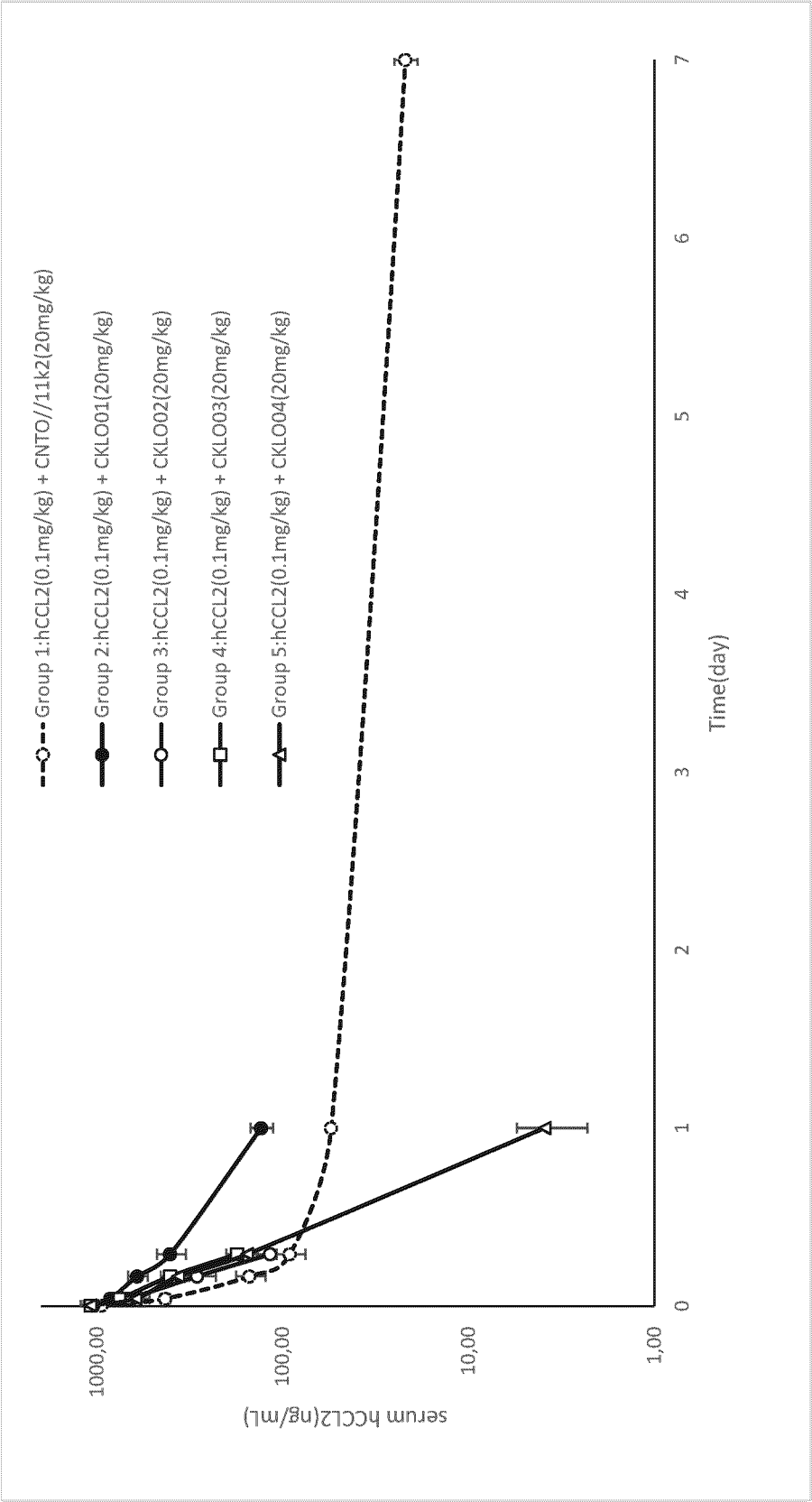
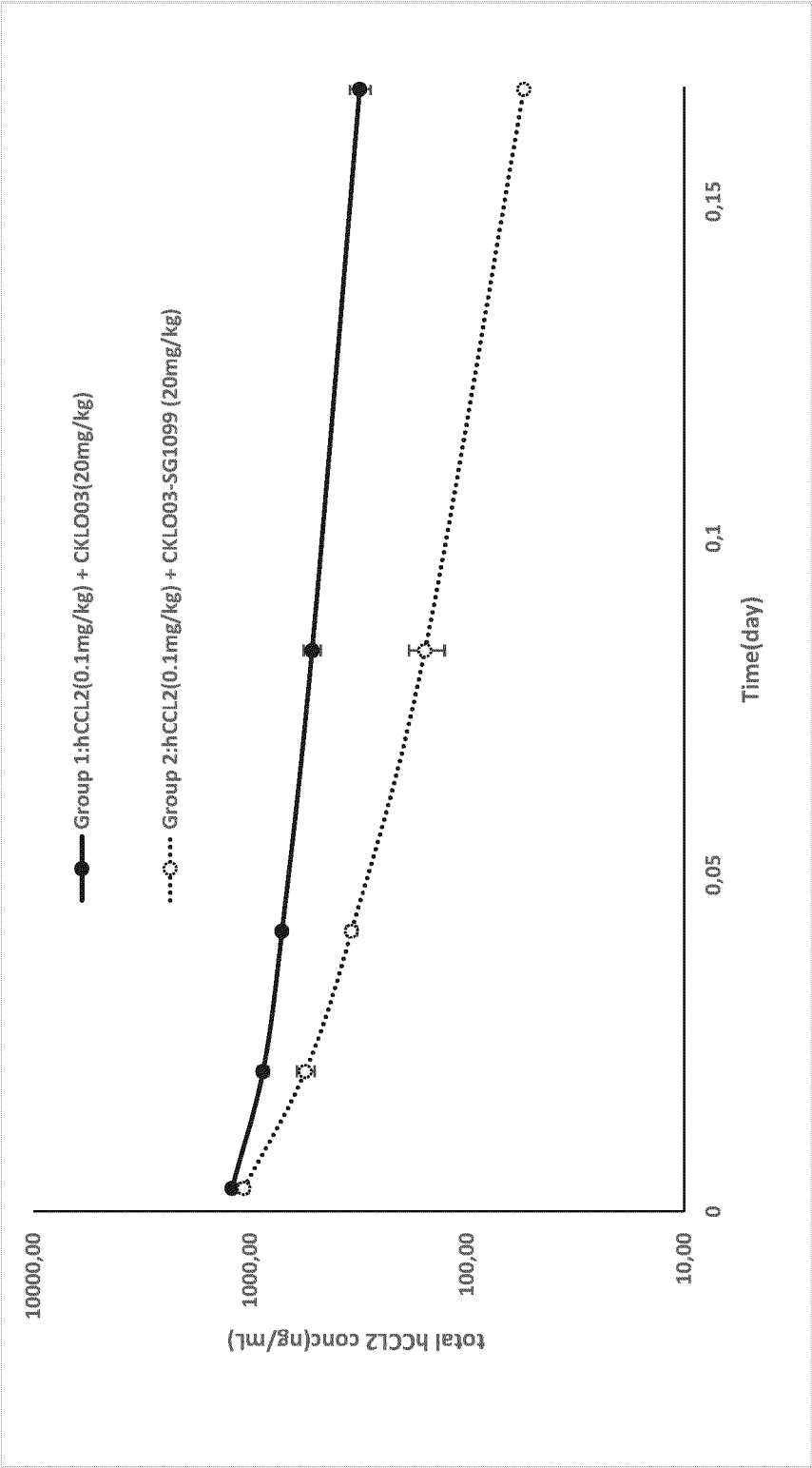


Figure 7b

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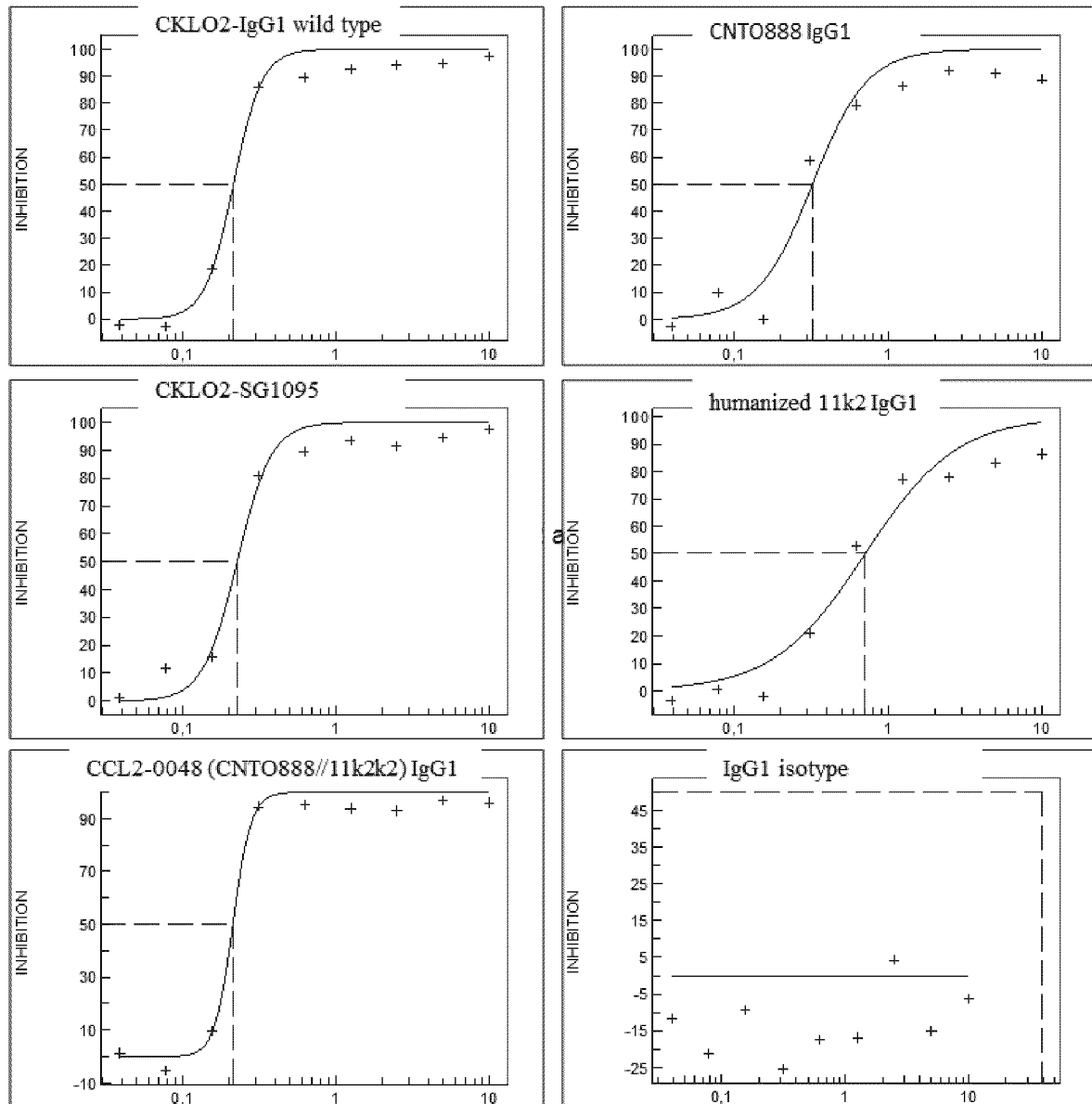


Figure 9

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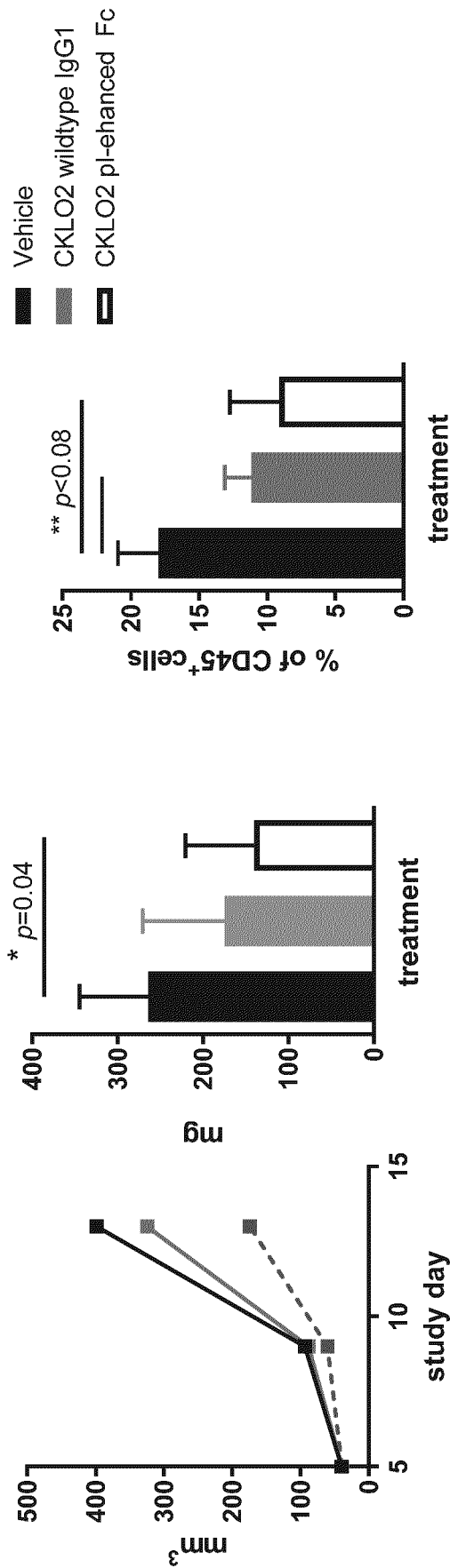


Figure 10

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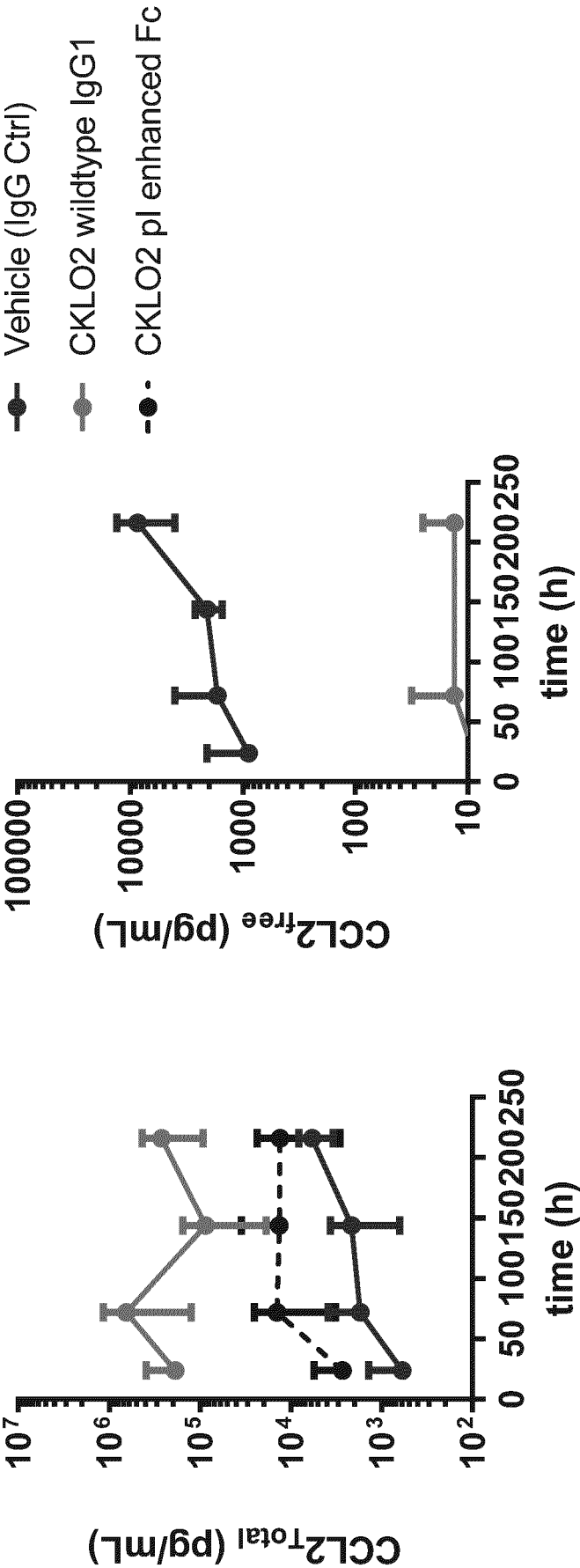


Figure 11

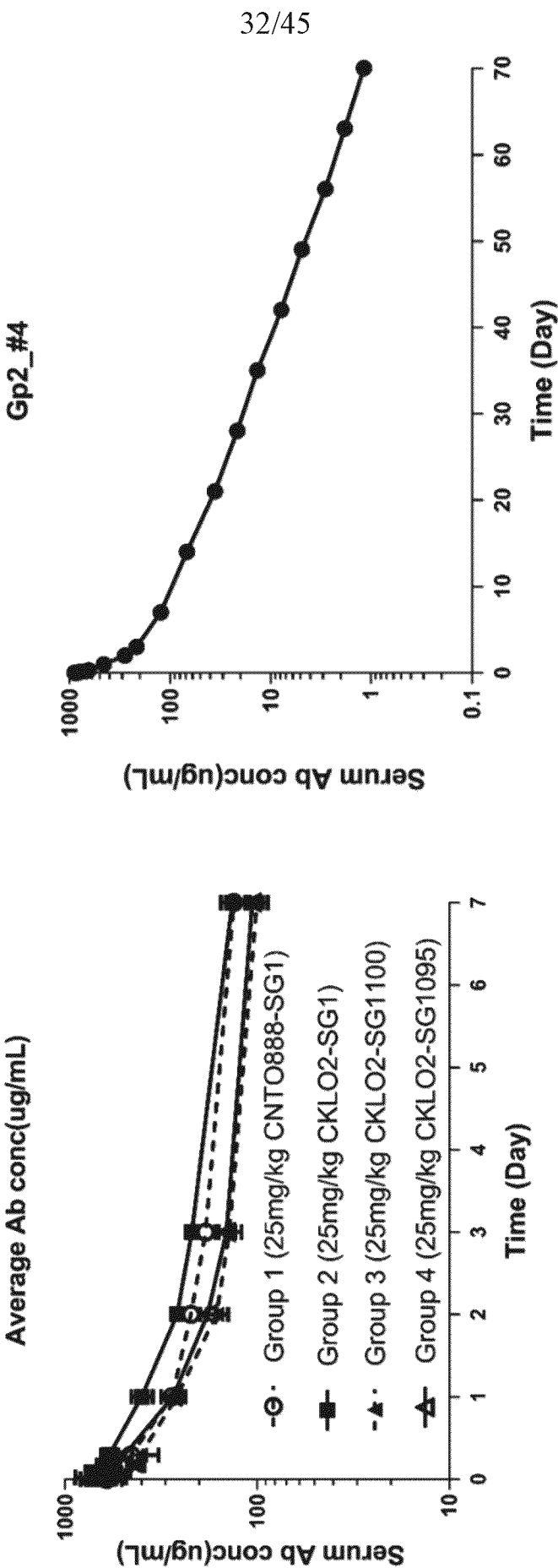


Figure 12

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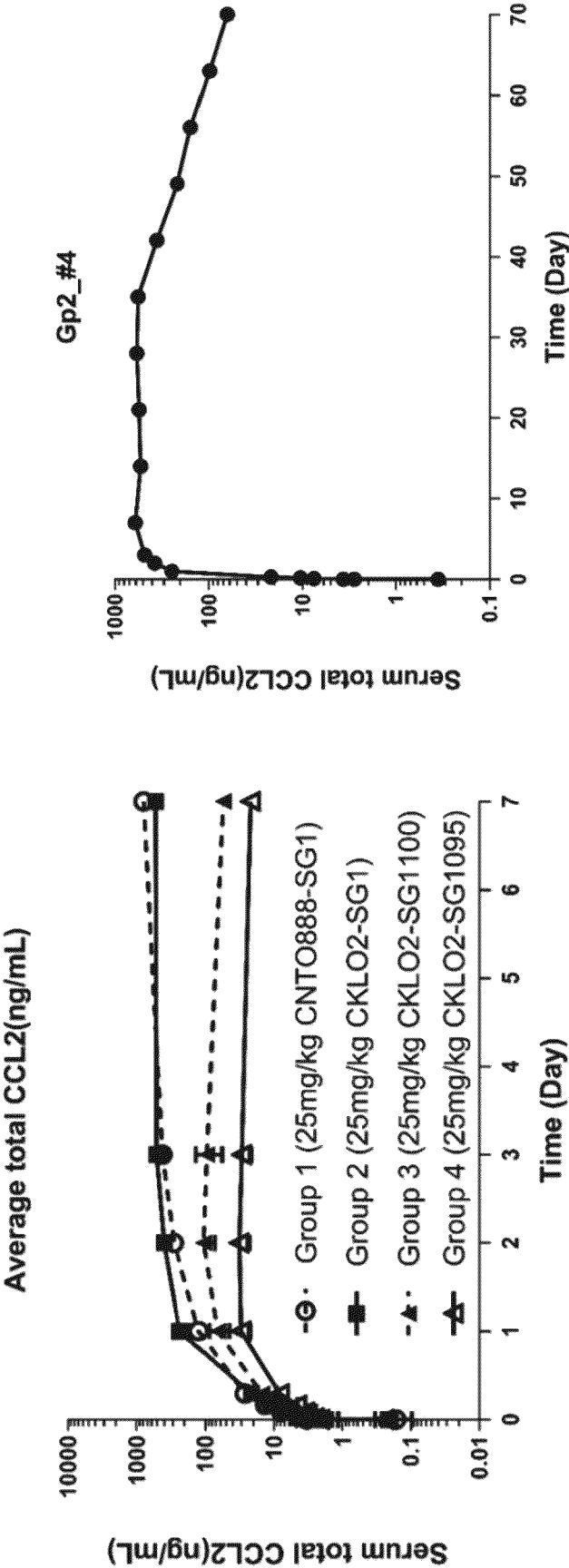


Figure 13

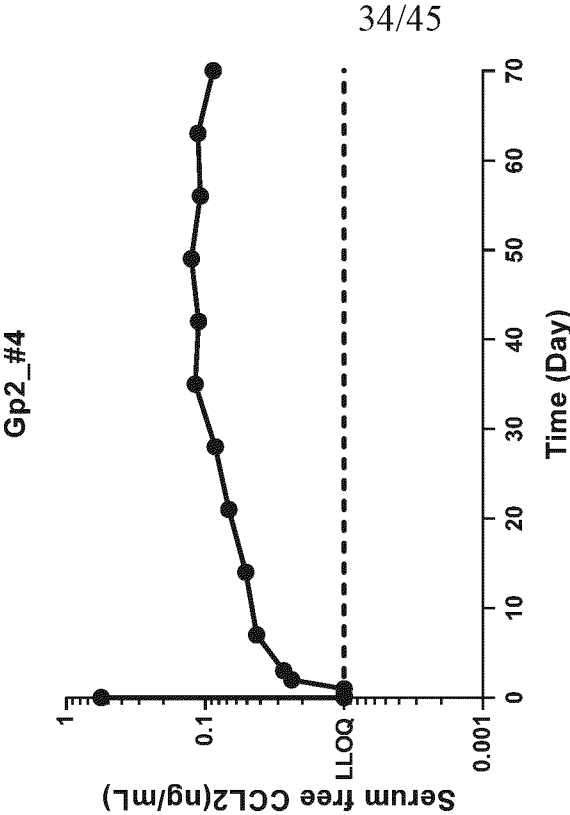
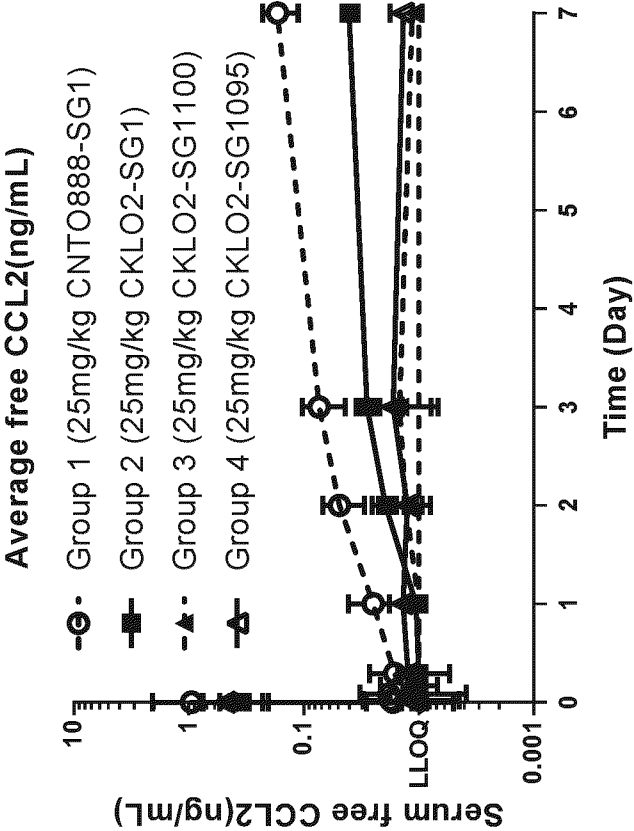


Figure 14

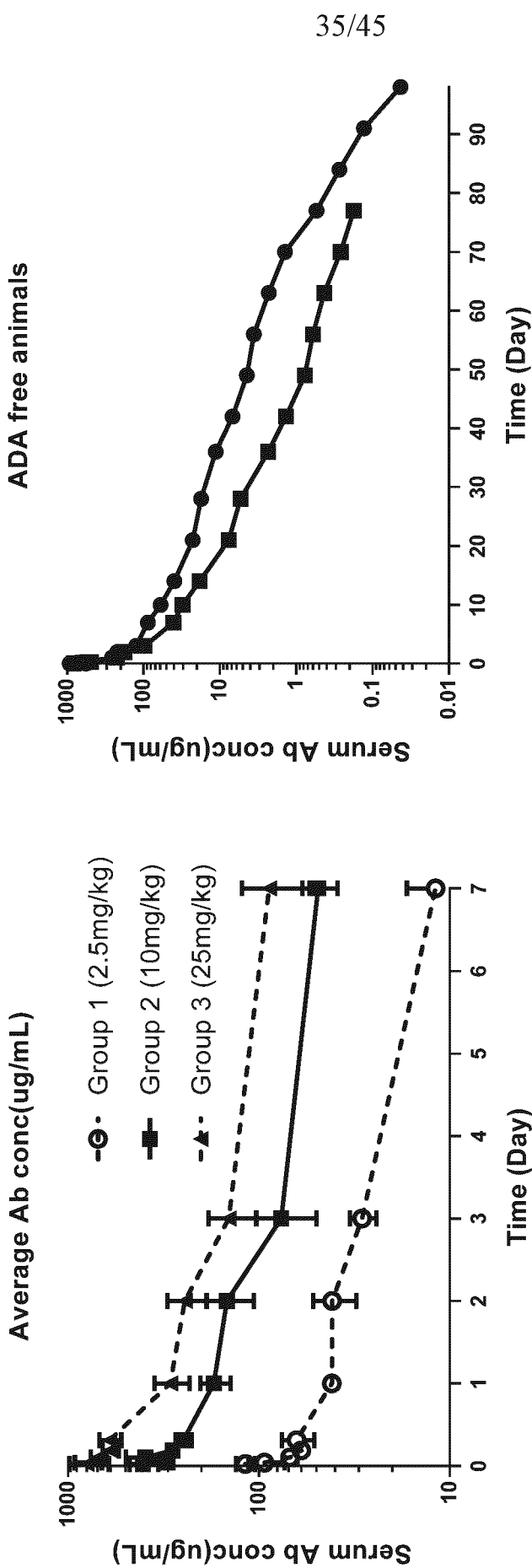


Figure 15

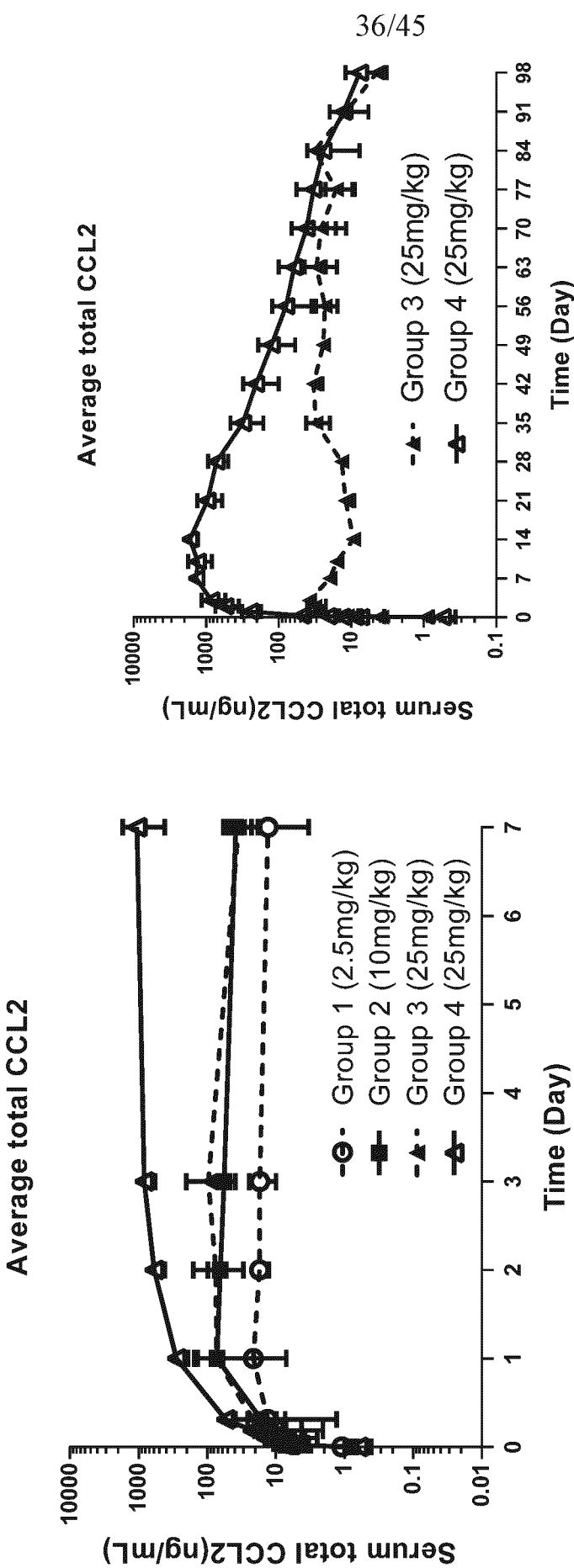


Figure 16

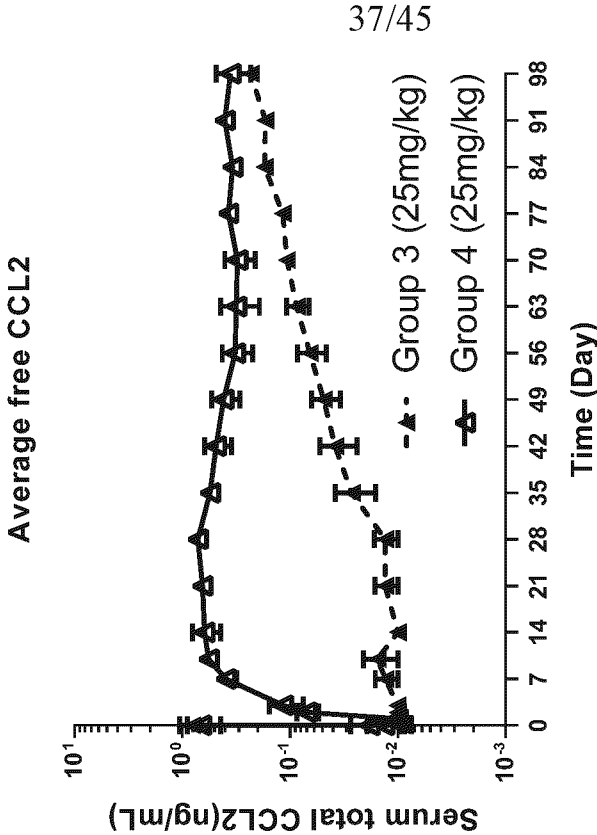
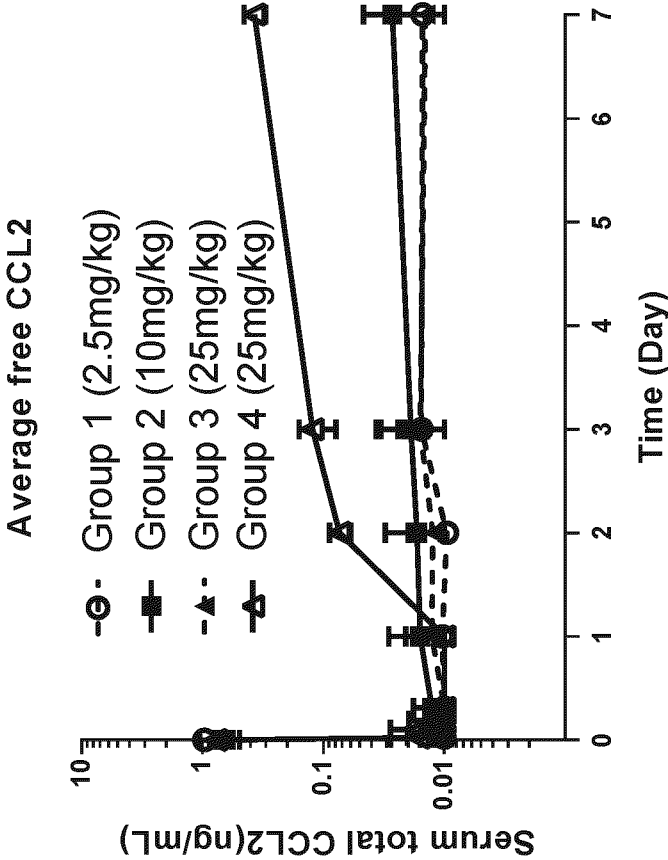


Figure 17

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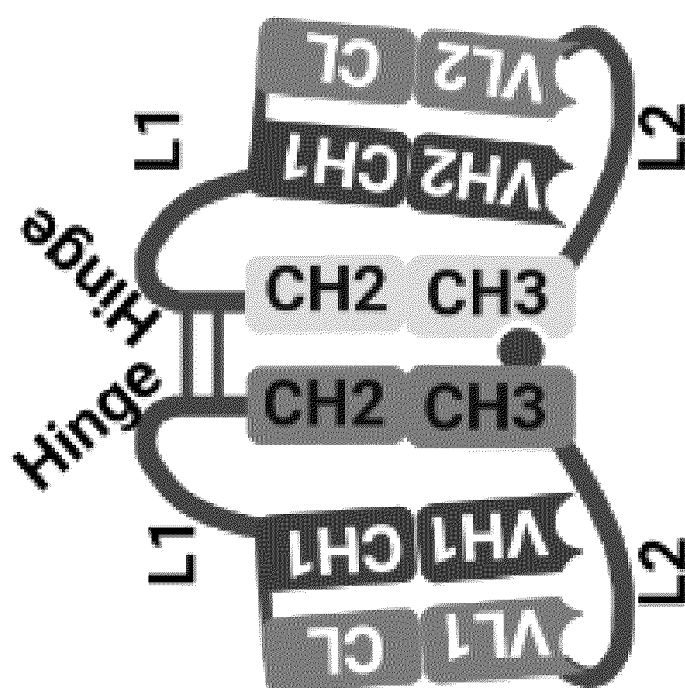
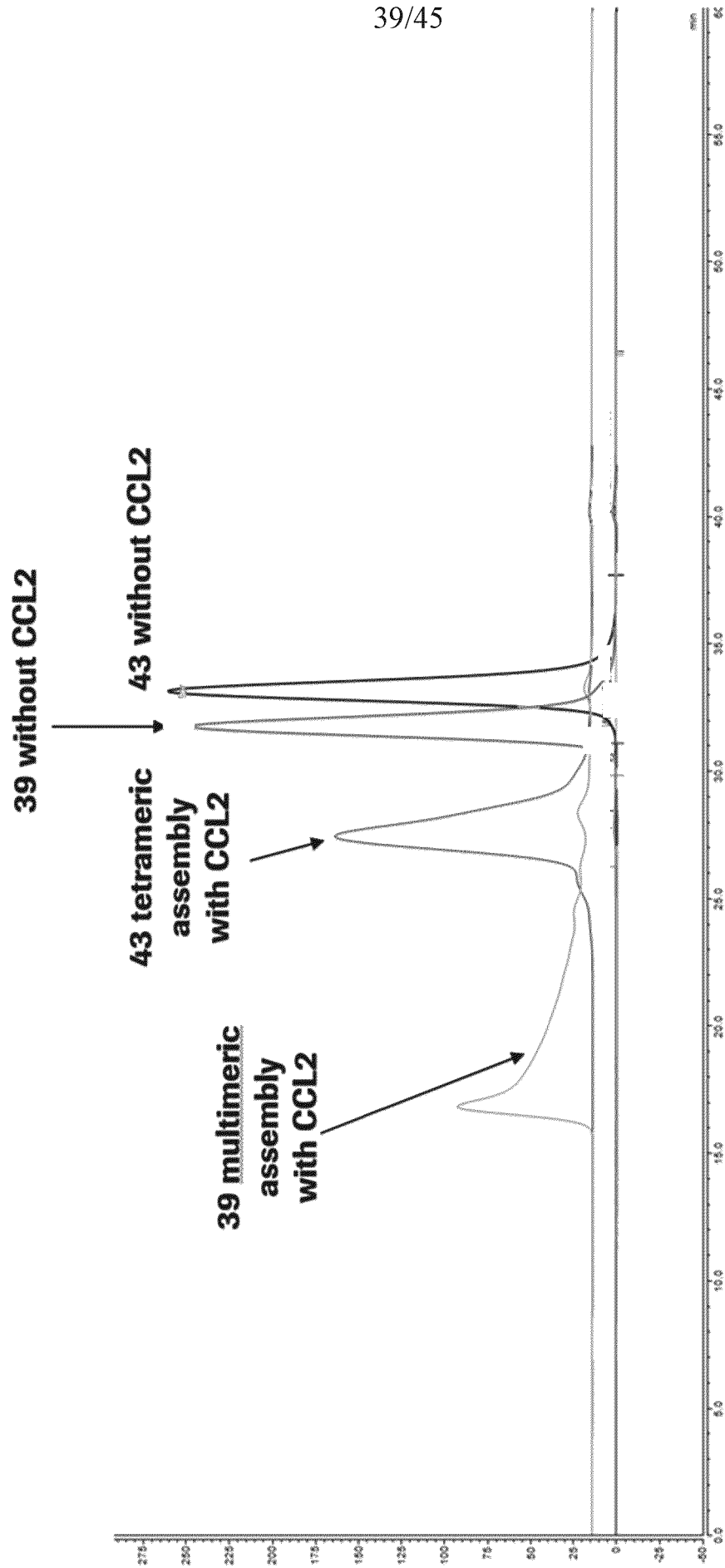


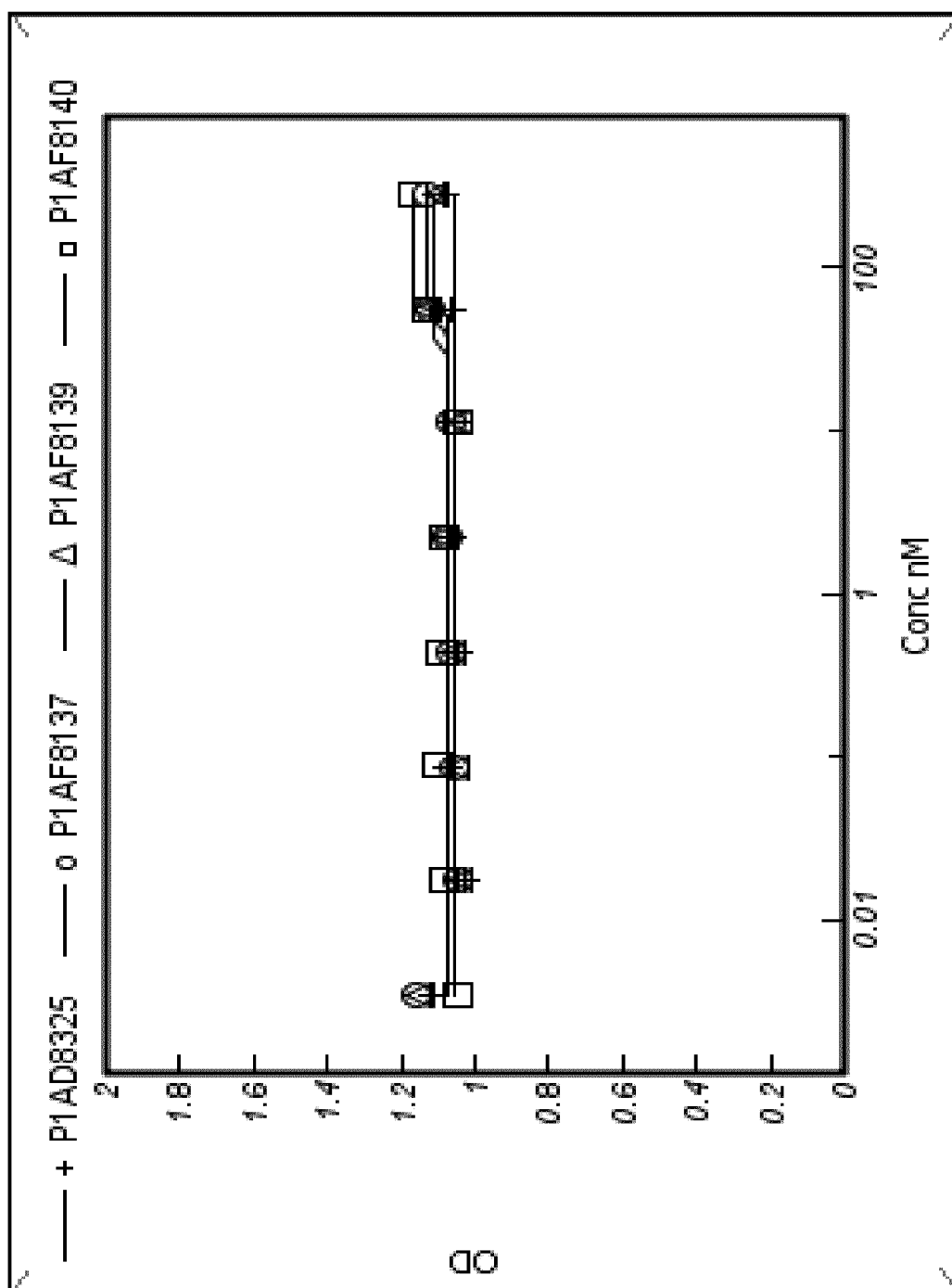
Figure 18

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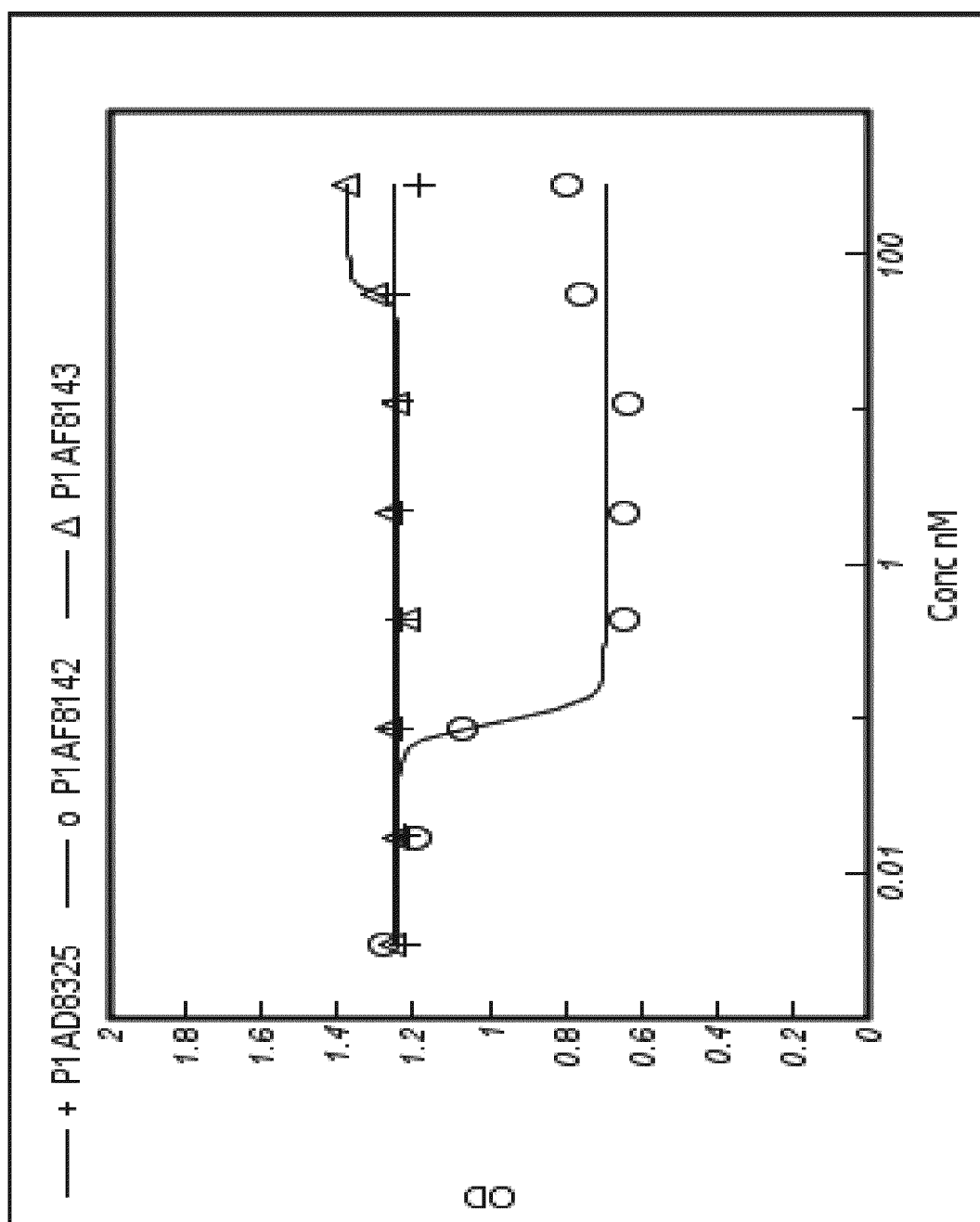
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Figure 19A



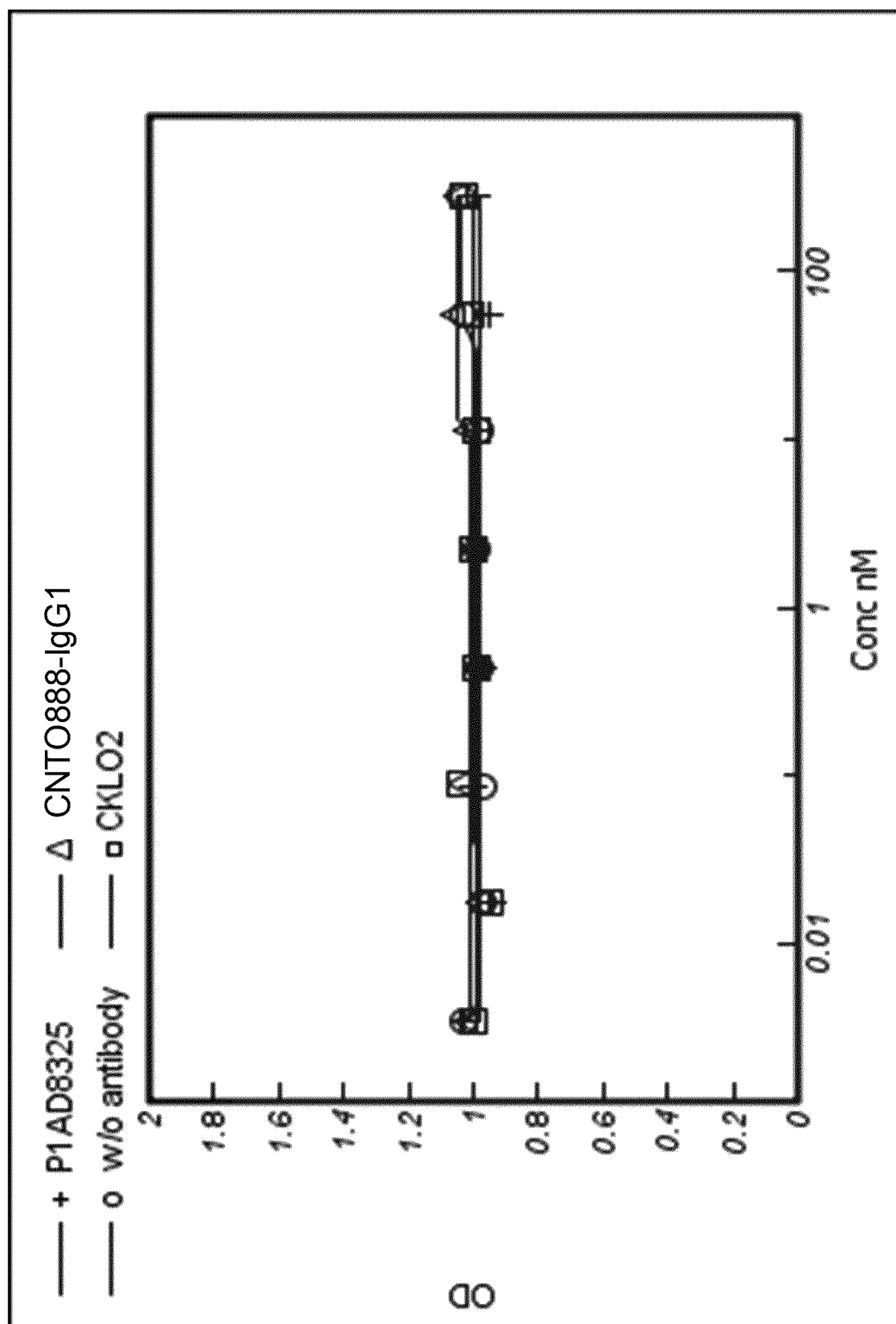
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Figure 19B



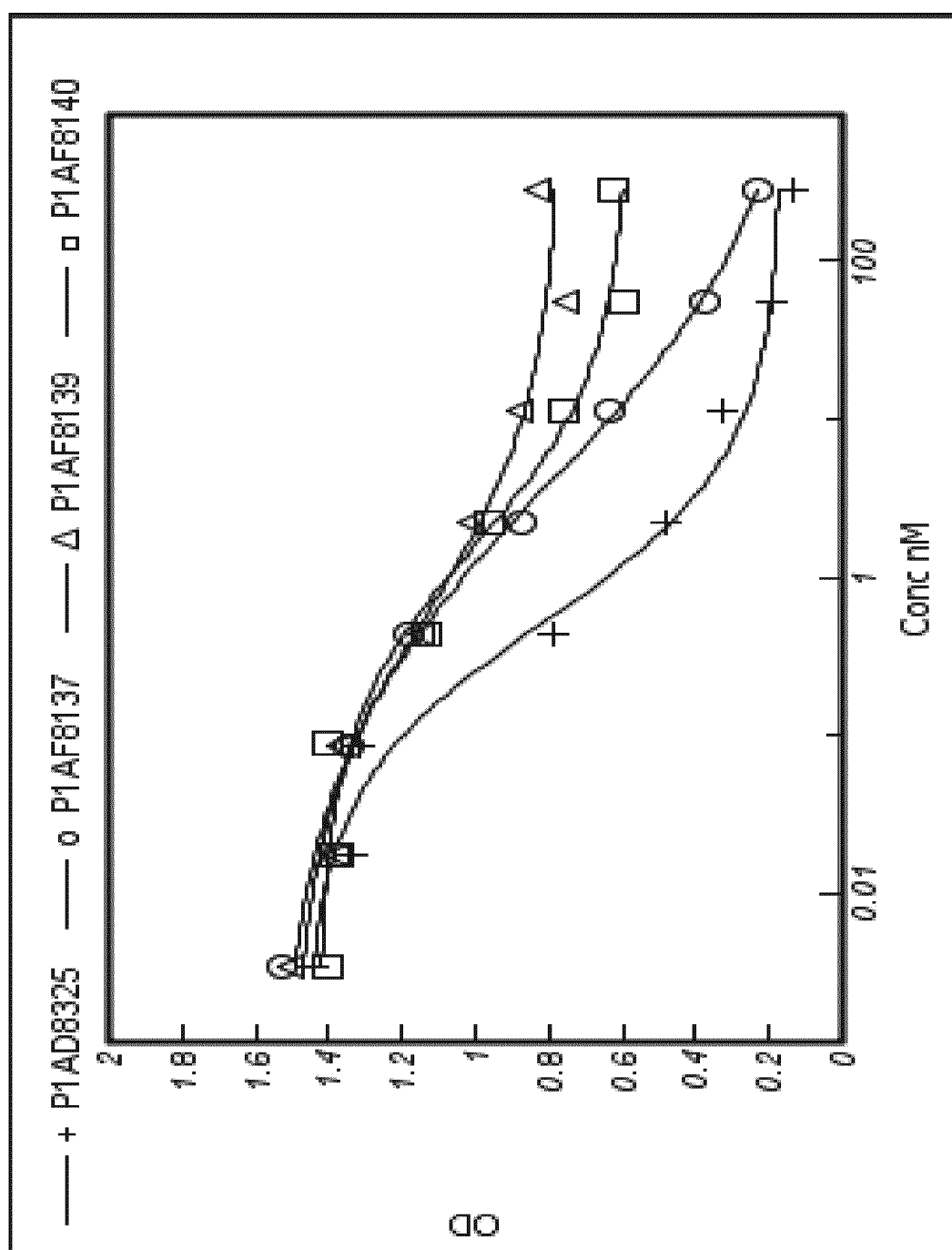
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Figure 19C



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Figure 20A



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Figure 20B

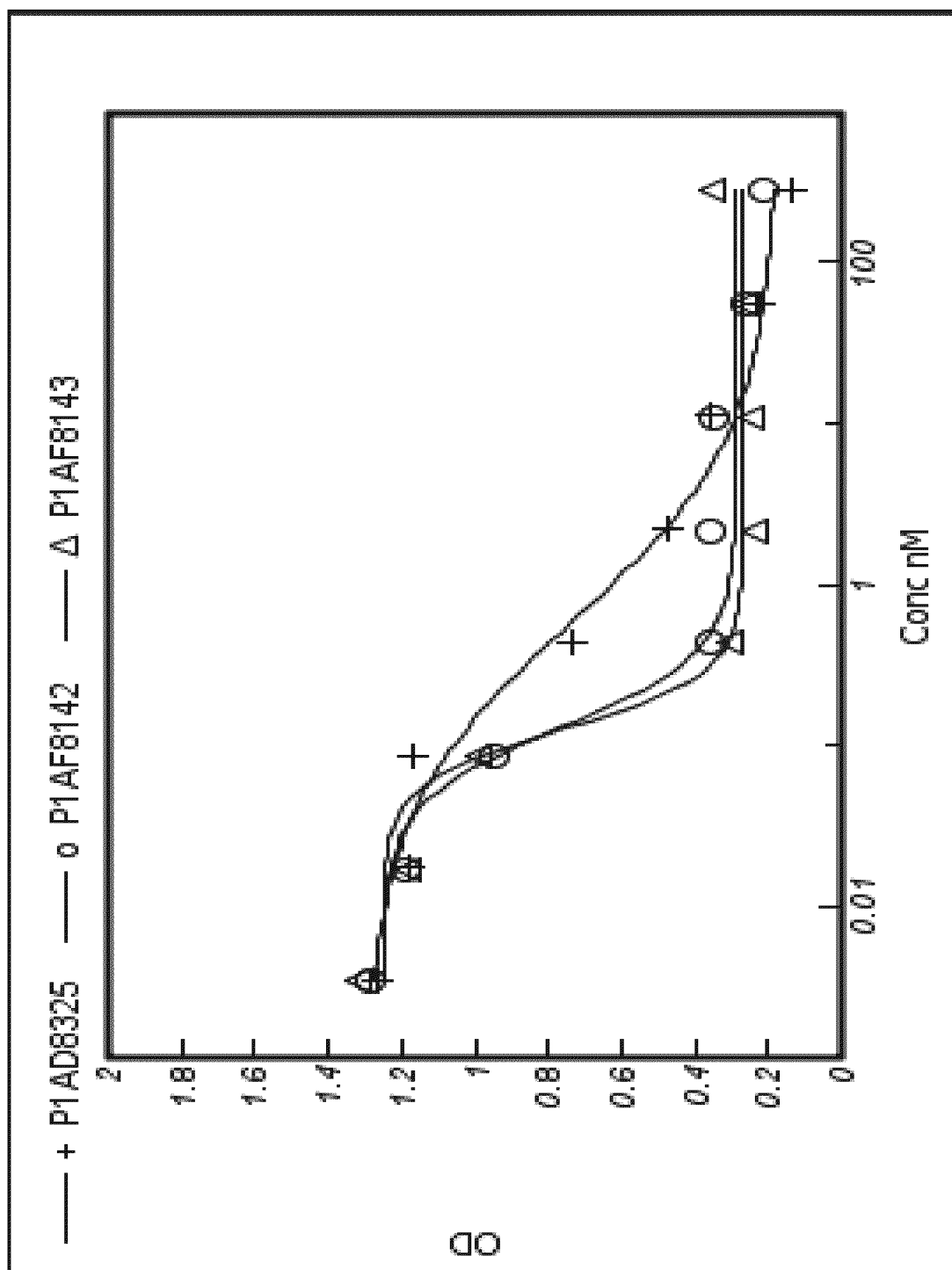


Figure 20C

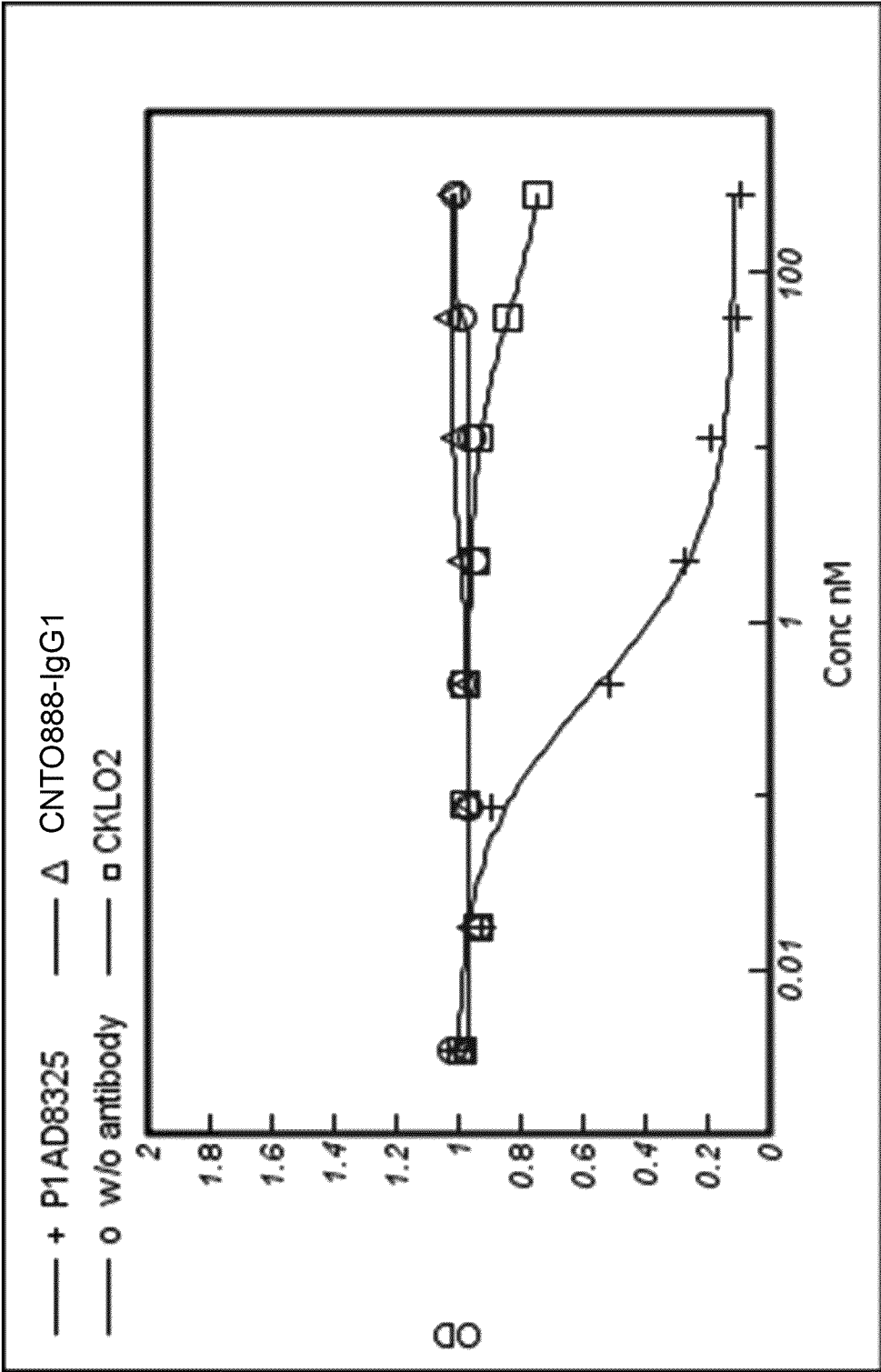


Figure 6

