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A diagnostic test for preclinical and clinical Alzheimer's disease is based on plasma levels of $A\beta_{40}$, $A\beta_{42}$, their ratio, or their rate of entry following administration of antibodies that sequester A \(\beta \). Alterations of any of these parameters from control values identifies preclinical or clinical Alzheimer's disease.





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(57) Abstract: A diagnostic test for preclinical and clinical Alzheimer's disease is based on plasma levels of $A\beta_{40}$, $A\beta_{42}$, their ratio, or their rate of entry following administration of antibodies that sequester A\beta. Alterations of any of these parameters from control values identifies preclinical or clinical Alzheimer's disease.

ASSAY METHOD FOR ALZHEIMER'S DISEASE

Technical Field

The invention relates to an assay which permits diagnosis of preclinical and clinical Alzheimer's disease. The test relies on assessing the levels of amyloid beta (Aß) peptide in plasma following administration of certain anti-Aß antibodies to a subject.

Background Art

A number of symptomologies which result in cognitive deficits, stroke, brain hemorrhage, and general mental debilitation appear to be associated with neuritic and cerebrovascular plaques in the brain containing the amyloid beta peptide (Aβ). Among these conditions are both preclinical and clinical Alzheimer's disease, Down's syndrome, and preclinical and clinical cerebral amyloid angiopathy (CAA). The amyloid plaques are formed from amyloid beta peptides. These peptides circulate in the blood and in the cerebrospinal fluid (CSF). The Aβ peptide in circulating form is composed of 39-43 amino acids (mostly 40 or 42 amino acids) resulting from the cleavage of a common precursor protein, amyloid precursor protein, often designated APP.

Evidence suggests that Aβ can be transported back and forth between brain and the blood (Ghersi-Egea, J-F., et al., J. Neurochem. (1996) 67:880-883; Zlokovic, B.V., et al., Biochem. Biophys. Res. Comm. (1993) 67:1034-1040; Shibata, M., et al., J. Clin. Invest. (2000)106:1489-1499. Further Aβ in plaques is in an equilibrium with

soluble Aβ in the brain and blood (Kawarabayashi, T., et al., J. Neurosci. (2001) 21:372-381), DeMattos et al., Proc. Nat'l. Acad. Sci USA (2001) 98:8850-8855.

As described in WO 2001/049875 (PCT application US00/35681) and U.S. Patent No. 6,465,195, total circulating levels of A β peptide in CSF are similar in normal individuals and individuals predisposed to exhibit the symptoms of Alzheimer's. However, A β 42 levels are lower on average in individuals with Alzheimer's disease (Nitsch,R.M., et al., Ann. Neurol. (1995) 37:512-518). It is known that A β 42 is more prone to aggregate than is A β 42, and when this happens, adverse consequences such as A β deposition in amyloid plaques, conversion of A β to toxic forms, nerve cell damage, and behavioral impairment such as dementia ensue (Golde, T.E., et al., Biochem. Biophys. Acta. (2000) 1502:172-187).

PCT application PCT/US01/06191 entitled "Humanized Antibodies That Sequester Aß Peptide" filed 26 February 2001 and incorporated herein by reference describes antibodies which do not appreciably cross the blood-brain barrier and which sequester Aß peptides circulating in biological fluids. These antibodies are described as useful for preventive and therapeutic treatment of conditions associated with the formation of Aß-containing diffuse, neuritic, and cerebrovascular plaques in the brain. The application describes administering the antibodies and then measuring circulating levels of Aß peptide in blood in order to assess the progress of therapy. There is no clear suggestion, however, that the levels of AB peptide following administration of the antibodies are diagnostic of the condition itself. The present invention resides in the surprising result that enhanced levels of both $A\beta_{40}$ and $A\beta_{42}$ as well as the Aβ40/Aβ42 ratio correlate with the levels of Aβ peptide deposition in the brain when the antibodies are administered to an individual. Thus, measurement of these components in the blood after administration of the antibody provides a simple straightforward diagnostic test for both clinical and preclinical Alzheimer's disease and related neurological disorders.

There are additional relevant publications concerning the behavior of Aß peptide antibodies. For example, PCT publication W099/27944 published 10 June 1999 describes methods to induce an immune response in order to reduce amyloid deposits. Publication No. W099/60024 published 25 November 1999, describes

methods for amyloid removal using anti-amyloid antibodies. Additional PCT publications, including WO00/72880, WO00/72876 and WO00/77178 all describe various activities of anti-A β peptide antibodies. Antibodies directed to the N-terminus of this peptide are said to reduce plaques in a transgenic murine model; immunization with the amyloid itself is described as are antibodies designed to catalyze hydrolysis of the peptide.

It has been shown that one pathway for Aβ metabolism is via transport from CNS to the plasma (Zlokovic, B.V., et al., Proc. Natl. Acad. Sci (USA) (1996) 93:4229-4234; Ghersi-Egea, J-F., et al., J. Neurochem. (1996) 67:880-883).

Additionally, it has been shown that Aβ in plasma can cross the blood-brain-barrier and enter the brain (Zlokovic, B.V., et al., Biochem. Biophys. Res. Comm. (1993) 67:1034-1040). It has also been shown that administration of certain polyclonal and monoclonal Aβ antibodies decreases Aβ deposition in amyloid plaques in the APP^{V717F} transgenic mouse model of Alzheimer's disease (Bard, F., et al., Nature Med. (2000) 6:916-919). This was said to be due to certain anti-Aβ antibodies crossing the blood-brain-barrier and stimulating phagocytosis of amyloid plaques by microglial cells. In Bard's experiments, assays of brain slices ex vivo showed that the presence of added Aβ antibody, along with exogenously added microglia, induced phagocytosis of Aβ resulting in removal of Aβ deposits.

The levels of both soluble $A\beta_{40}$ and $A\beta_{42}$ in CSF and blood can readily be detected using standardized assays using antibodies directed against epitopes along the $A\beta$ chain. Such assays have been reported, for example, in U.S. patents 5,766,846; 5,837,672; and 5,593,846. These patents describe the production of murine monoclonal antibodies to the central domain of the $A\beta$ peptide, and these were reported to have epitopes around and including positions 16 and 17. Antibodies directed against the N-terminal region were described as well. Several monoclonal antibodies were asserted to immunoreact with positions 13-28 of the $A\beta$ peptide; these did not bind to a peptide representing positions 17-28, thus, according to the cited patents, establishing that it is this region, including positions 16-17 (the \Diamond -secretase site) that was the target of these antibodies. Among antibodies known to bind

between amino acids 13 and 28 of Aß are mouse antibodies 266 (m266), 4G8, and 1C2.

Disclosure of the Invention

It has now been found that antibodies which are useful for performing assays for Aß peptide, and which are useful in treatment of conditions associated with amyloid plaques in the brain can elicit a response which results in a marked increase in the level of Aß peptide in the blood and this level can be used as a diagnostic marker for clinical and preclinical Alzheimer's disease. These antibodies, which may or may not be humanized, sequester Aß peptide from its bound, circulating form in blood and alter clearance of soluble and bound forms of AB in central nervous system and plasma. These antibodies, and fragments thereof, specifically bind to an epitope between amino acids 13 and 28 of the Aß molecule. The CDR of these antibodies can be derived from mouse monoclonal antibody 266 (SEQ ID NO:1 through SEQ ID NO:6). Useful antibodies include antibodies and fragments thereof, wherein the variable regions have sequences comprising the CDR from mouse antibody 266 and specific human framework sequences (SEQ ID NO:7 through SEQ ID NO:10), wherein the antibodies retain approximately the binding properties of the mouse antibody and have in vitro and in vivo properties functionally equivalent to the mouse antibody 266. Especially useful are humanized antibodies and fragments thereof, wherein the light chain is SEQ ID NO:11 and the heavy chain is SEQ ID NO:12.

Thus, in one aspect, the invention is directed to a method to diagnose Alzheimer's disease in a subject at both a clinical and preclinical stage which method comprises administering to said subject an amount of an antibody that sequesters $A\beta$ peptide from its bound, circulating form in blood, and alters clearance of soluble and bound forms of $A\beta$ in the central nervous system in plasma, or which specifically binds an epitope contained within positions 13-28 of $A\beta$, preferably an antibody having an immunoreactivity equivalent to mouse antibody 266 effective to alter the levels of circulating $A\beta$ peptides in the blood of said subject when said subject is in a clinical or preclinical stage of Alzheimer's disease followed by measuring the level of $A\beta_{40}$, $A\beta_{42}$, or the ratio of $A\beta_{40}/A\beta_{42}$ in the blood of said subject, wherein an enhanced

concentration of $A\beta_{40}$, $A\beta_{42}$ and/or $A\beta_{40}/A\beta_{42}$ ratio in said subject identifies said subject as in a preclinical or clinical stage of Alzheimer's disease or cerebral amyloid angiopathy. In other aspects, the invention is directed to kits containing the appropriate materials for conducting the diagnostic method.

Brief Description of the Drawings

Figures 1 A, B and C are graphs showing the levels of $A\beta_{40}$ (Figure 1A), $A\beta_{42}$ (Figure 1B), and $A\beta_{40}/A\beta_{42}$ ratio (Figure 1C) in plasma of transgenic mice prior to administration of the antibody m266, and the lack of correlation with brain $A\beta$ deposits.

Figures 2 A and B are graphs showing plasma $A\beta_{40}$ (Figure 2A) and plasma $A\beta_{40}/A\beta_{42}$ ratio (Figure 2B) in transgenic mice one hour after injection of antibody m266, and the significant correlation with brain $A\beta$ deposits.

Figures 3 A, B and C are graphs showing the significant correlations of the two Aβ peptides (Figures 3A and 3B) and their ratio (Figure 3C) with Aβ peptide deposition in the brain 24 hours after injection with monoclonal antibody m266.

Figures 4 A, B and C are graphs showing the significant correlations of entry rates into the circulation of the two Aβ peptides (Figures 4A and 4B) and their ratio (Figure 4C) and Aβ peptide deposition in transgenic mice.

Figures 5 A and B are graphs showing an alternative graphical representation of $A\beta_{40}$ levels in the plasma 24 hours (Figure 5A) and 1 hour (Figure 5B) after m266 injection correlated with the percentage hippocampus covered by $A\beta$ deposits.

Figure 6 is a table showing Pearson correlation coefficients (Pearson r) and significance (P value) determined between plasma Aβ values (pre and post injection of m266) and hippocampal Aβ or amyloid load.

Modes of Carrying Out the Invention

The A β peptides that circulate in human biological fluids represent a carboxy terminal region of a precursor protein encoded on chromosome 21. It has been reported from the results of *in vitro* experiments that the A β peptide has poor solubility in physiological solutions, since it contains a stretch of hydrophobic amino acids which are a part of the region that anchors its longer precursor to the lipid membranes of cells. It is thus not surprising that circulating A β peptide is normally complexed with other moieties that prevent it from aggregating. This has resulted in difficulties in detecting circulating A β peptide in biological fluids.

The above-mentioned patent documents (U.S. patents 5,766,846; 5,837,672 and 5,593,846) describe the preparation of antibodies, including a monoclonal antibody, designated clone 266 (m266), which was raised against, and has been shown to bind specifically to, a peptide comprising amino acids 13-28 of the Aβ peptide. Applicants have found that after administering m266 to APP^{V717F} mice, a mouse model of Alzheimer's disease, they can measure levels of Aβ peptides in the circulation that are diagnostic of the levels of amyloid plaques in the brain. Thus, these antibodies are useful not only in conducting assays for circulating Aβ peptides *per se*, but also for eliciting circulating blood levels which are diagnostic of the amount of amyloid plaque in the brain, and thus useful in identifying individuals in clinical and preclinical stages of Alzheimer's disease. One such antibody, m266, bonds to the mid-region of Aβ peptide.

By "monoclonal antibody that bonds to the mid-region of A β peptide" is meant a monoclonal antibody (Mab or Mabs) that binds an amino acid sequence representing an epitope contained between positions 13-28 of A β . The entire region need not be targeted. As long as the antibody binds at least an epitope within this region (especially, *e.g.*, including the α -secretase site 16-17 or the site-at which antibody 266 binds), such antibodies are effective in the method of the invention.

By "antibody" is meant a monoclonal antibody per se, or an immunologically effective fragment thereof, such as an F_{ab} , $F_{ab'}$, or $F_{(ab')2}$ fragment thereof. In some contexts, herein, fragments will be mentioned specifically for emphasis; nevertheless,

it will be understood that regardless of whether fragments are specified, the term "antibody" includes such fragments as well as single-chain forms. As long as the protein retains the ability specifically to bind its intended target, and in this case, to sequester $A\beta$ peptide from its carrier proteins in blood, it is included within the term "antibody." Also included within the definition "antibody" for example, are single chain forms, generally designated F_{ν} , regions, of antibodies with this specificity. Preferably, but not necessarily, the antibodies useful in the invention are produced recombinantly, as manipulation of the typically murine or other non-human antibodies with the appropriate specificity is required in order to convert them to humanized form. Antibodies may or may not be glycosylated, though glycosylated antibodies are preferred. Antibodies are properly cross-linked via disulfide bonds, as is well-known.

The basic antibody structural unit is known to comprise a tetramer. Each tetramer is composed of two identical pairs of polypeptide chains, each pair having one "light" (about 25 kDa) and one "heavy" chain (about 50-70 kDa). The aminoterminal portion of each chain includes a variable region of about 100 to 110 or more amino acids primarily responsible for antigen recognition. The carboxy-terminal portion of each chain defines a constant region primarily responsible for effector function.

Light chains are classified as gamma, mu, alpha, and lambda. Heavy chains are classified as gamma, mu, alpha, delta, or epsilon, and define the antibody's isotype as IgG, IgM, IgA, IgD and IgE, respectively. Within light and heavy chains, the variable and constant regions are joined by a "J" region of about 12 or more amino acids, with the heavy chain also including a "D" region of about 10 more amino acids.

The variable regions of each light/heavy chain pair form the antibody binding site. Thus, an intact antibody has two binding sites. The chains all exhibit the same general structure of relatively conserved framework regions (FR) joined by three hypervariable regions, also called complementarily determining regions or CDRs. The CDRs from the two chains of each pair are aligned by the framework regions, enabling binding to a specific epitope. From N-terminal to C-terminal, both light and heavy chains comprise the domains FR1, CDR1, FR2,CDR2, FR3, CDR3 and FR4. The assignment of amino acids to each domain is in accordance with well known

conventions [Kabat "Sequences of Proteins of Immunological Interest" National Institutes of Health, Bethesda, Md., 1987 and 1991; Chothia, *et al.*, *J. Mol. Bio*. (1987)196:901-917; Chothia, *et al.*, *Nature* (1989) 342:878-883].

As is well understood in the art, monoclonal antibodies can readily be generated with appropriate specificity by standard techniques of immunization of mammals, forming hybridomas from the antibody-producing cells of said mammals or otherwise immortalizing them, and culturing the hybridomas or immortalized cells to assess them for the appropriate specificity. In the present case such antibodies could be generated by immunizing a human, rabbit, rat or mouse, for example, with a peptide representing an epitope encompassing the 13-28 region of the Aβ peptide or an appropriate subregion thereof. Materials for recombinant manipulation can be obtained by retrieving the nucleotide sequences encoding the desired antibody from the hybridoma or other cell that produces it. These nucleotide sequences can then be manipulated to provide them in humanized form, if desired.

It may be desirable to utilize humanized forms of these antibodies in order to elicit the desired circulating levels of the peptides in human subjects. Since the administration is short-term and only for diagnostic purposes, this may not be necessary, but clearly it is preferable to avoid any possibility of an immune response, so the use of humanized forms for this purpose is preferred. Of course, for the performance of the assay of $A\beta$ levels *ex vivo* (e.g. by ELISA), the murine forms themselves can be used.

By "humanized antibody" is meant an antibody that is composed partially or fully of amino acid sequences derived from a human antibody germline by altering the sequence of an antibody having non-human complementarity determining regions (CDR). The simplest such alteration may consist simply of substituting the constant region of a human antibody for the murine constant region, thus resulting in a human/murine chimera which may have sufficiently low immunogenicity to be acceptable for pharmaceutical use. Preferably, however, the variable region of the antibody and even the CDR is also humanized by techniques that are by now well known in the art. The framework regions of the variable regions are substituted by the corresponding human framework regions leaving the non-human CDR substantially

intact, or even replacing the CDR with sequences derived from a human genome. Fully human antibodies are produced in genetically modified mice whose immune systems have been altered to correspond to human immune systems. As mentioned above, it is sufficient for use in the methods of the invention, to employ an immunologically specific fragment of the antibody, including fragments representing single chain forms.

A humanized antibody thus refers to an antibody comprising a human framework, at least one CDR from a non-human antibody, and in which any constant region present is substantially identical to a human inimunoglobulin constant region, *i.e.*, at least about 85-90%, preferably at least 95% identical. Hence, all parts of a humanized antibody, except possibly the CDRs, are substantially identical to corresponding parts of one or more native human immunoglobulin sequences. For example, a humanized immunoglobulin would typically not encompass a chimeric mouse variable region/human constant region antibody.

The design of humanized immunoglobulins may be carried out as follows. When an amino acid falls under the following category, the framework amino acid of a human immunoglobulin to be used (acceptor immunoglobulin) is replaced by a framework amino acid from a CDR-providing non-human immunoglobulin (donor immunoglobulin):(a) the amino acid in the human framework region of the acceptor immunoglobulin is unusual for human immunoglobulin at that position, whereas the corresponding amino acid in the donor immunoglobulin is typical for human immunoglobulin at that position;(b) the position of the amino acid is immediately adjacent to one of the CDRs; or(c) any side chain atom of a framework amino acid is within about 5-6 angstroms (center-to-center) of any atom of a CDR amino acid in a three dimensional immunoglobulin model [Queen, et al., op. cit., and Co, et al., Proc. Natl. Acad. Sci. USA (1991) 88:2869]. When each of the amino acid in the human framework region of the acceptor immunoglobulin and a corresponding amino acid in the donor immunoglobulin is unusual for human immunoglobulin at that position, such an amino acid is replaced by an amino acid typical for human immunoglobulin at that position.

A preferred humanized antibody is a humanized form of mouse antibody 266. The CDRs of humanized 266 have the following amino acid sequences:

```
light chain CDR1:
                                      10
Arg Ser Ser Gln Ser Leu Ile Tyr Ser Asp Gly Asn Ala Tyr Leu His
(SEQ ID NO:1)
light chain CDR2:
Lys Val Ser Asn Arg Phe Ser (SEQ ID NO:2)
light chain CDR3:
Ser Gln Ser Thr His Val Pro Trp Thr (SEQ ID NO:3)
heavy chain CDR1:
Arg Tyr Ser Met Ser (SEQ ID NO:4)
heavy chain CDR2:
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10
                                                          15
Gln Ile Asn Ser Val Gly Asn Ser Thr Tyr Tyr Pro Asp Thr Val Lys Gly
(SEQ ID NO:5)
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and, heavy chain CDR3:

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Gly Asp Tyr (SEQ ID NO:6).
```

A preferred light chain variable region of a humanized antibody of the present invention has the following amino acid sequence, in which the framework originated from human germline Vk segments DPK18 and J segment Jkl, with several amino

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acid substitutions to the consensus amino acids in the same human V subgroup to reduce potential immunogenicity:

1.				5					10					15
Asp	Xaa	Val	Met	Thr	Gln	Xaa	Pro	Leu	Ser	Leu	Pro	Val	Xaa	Xaa
				20					25					30
Gly	Gln	Pro	Ala	Ser	Ile	Ser	Cys	Arg	Ser	Ser	Gln	Ser	Leu	Xaa
				35					40					45
Tyr	Ser	Asp	Gly	Asn	Ala	Tyr	Leu	His	Trp	Phe	Leu	Gln	Lys	Pro
				50					55					60
Gly	Gln	Ser	Pro	Xaa	Leu	Leu	Ile	Tyr	Lys	Val	Ser	Asn	Arg	Phe
				65					70					75
Ser	Gly	Val	Pro	Asp	Arg	Phe	Ser	Gly	Ser	Gly	Ser	Gly	Thr	Asp
				80					85					90
Phe	Thr	Leu	Lys	Ile	Ser	Arg	Val	Glu	Ala	Glu	Asp	Xaa	Gly	Val
				95					100					105
Tyr	Tyr	Cys	Ser	Gln	Ser	Thr	His	Val	Pro	Trp	Thr	Phe	Gly	Xaa
				110										
Gly	Thr	Xaa	Xaa	Glu	Ile	Lys	Arg	(SEÇ) ID	NO:7	7)			

wherein:

Xaa at position 2 is Val or Ile;

Xaa at position 7 is Ser or Thr;

Xaa at position 14 is Thr or Ser;

Xaa at position 15 is Leu or Pro;

Xaa at position 30 is Ile or Val;

Xaa at position 50 is Arg, Gln, or Lys;

Xaa at position 88 is Val or Leu;

Xaa at position 105 is Gln or Gly;

Xaa at position 108 is Lys or Arg; and

Xaa at position 109 is Val or Leu.

A preferred heavy chain variable region of a humanized antibody of the present invention has the following amino acid sequence, in which the framework originated from human germline VH segments DP53 and J segment JH4, with several amino acid substitutions to the consensus amino acids in the same human subgroup to reduce potential immunogenicity:

```
10
Xaa Val Gln Leu Val Glu Xaa Gly Gly Gly Leu Val Gln Pro Gly
                                                         30
Gly Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser
                                     40
                                                         45
Arg Tyr Ser Met Ser Trp Val Arg Gln Ala Pro Gly Lys Gly Leu
                50
                                                         60
Xaa Leu Val Ala Gln Ile Asn Ser Val Gly Asn Ser Thr Tyr Tyr
                65
Pro Asp Xaa Val Lys Gly Arg Phe Thr Ile Ser Arg Asp Asn Xaa
                80
                                      85
                                                         90
Xaa Asn Thr Leu Tyr Leu Gln Met Asn Ser Leu Arg Ala Xaa Asp
                95
                                      100
                                                         105
Thr Ala Val Tyr Tyr Cys Ala Ser Gly Asp Tyr Trp Gly Gln Gly
                110
Thr Xaa Val Thr Val Ser Ser (SEQ ID NO:8)
```

wherein:

Xaa at position 1 is Glu or Gln;

Xaa at position 7 is Ser or Leu;

Xaa at position 46 is Glu, Val, Asp, or Ser;

Xaa at position 63 is Thr or Ser;

Xaa at position 75 is Ala, Ser, Val, or Thr;

Xaa at position 76 is Lys or Arg;

Xaa at position 89 is Glu or Asp; and

Xaa at position 107 is Leu or Thr.

A particularly preferred light chain variable region of a humanized antibody of the present invention has the following amino acid sequence, in which the framework originated from human germline Vk segments DPK18 and J segment Jkl, with several amino acid substitutions to the consensus amino acids in the same human V subgroup to reduce potential immunogenicity:

1 Asp	Val	Val	Met	5 Thr	Gln	Ser	Pro	Leu	10 Ser	Leu	Pro	Val	Thr	15 Leu
Gly	Gln	Pro	Ala	20 Ser	Ile	Ser	Cys	Arg	25 Ser	Ser	Gln	Ser	Leu	30 Ile
Tyr	Ser	Asp	Gly	35 Asn	Ala	Tyr	Leu	His	40 Trp	Phe	Leu	Gln	Lys	45 Pro
Gly	Gln	Ser	Pro	50 Arg	Leu	Leu	Ile		55 Lys	Val	Ser	Asn	Arg	60 Phe
Ser	Gly	Val	Pro	65 Asp	Arg	Phe	Ser	Gly	70 Ser	Gly	Ser	Gly	Thr	75 Asp
Phe	Thr	Leu	Lys		Ser				85 Ala	Glu	Asp	Val	Gly	90 Val
Tyr	Tyr	Суѕ	Ser	95 Gln				Val					Gly	105 Gln
Gly	Thr	Lys	Val	110 Glu	Ile	Lys	Arg	(SEÇ) ID	NO: 9).			

A particularly preferred heavy chain variable region of a humanized antibody of the present invention has the following amino acid sequence, in which the framework originated from human germline VH segments DP53 and J segment JH4:

14

Pro Asp Thr Val Lys Gly Arg Phe Thr Ile Ser Arg Asp Asn Ala
Lys Asn Thr Leu Val Thr Val Ser Ser (SEQ ID NO:10).

A preferred light chain for a humanized antibody of the present invention has the amino acid sequence:

1 Asp	Val	Val	Met	5 Thr	Gln	Ser	Pro	Leu	10 Ser	Leu	Pro	Val	Thr	15 Leu
Gly	Gln	Pro	Ala	20 Ser	Ile	Ser	Cys		25 Ser	Ser	Gln	Ser	Leu	30 Ile
Tyr	Ser	Asp	Gly	35 Asn	Ala	Tyr	Leu	His	40 Trp	Phe	Leu	Gln	Lys	45 Pro
Gly	Gln	Ser	Pro	50 Arg	Leu	Leu	Ile	Tyr	55 Lys	Val	Ser	Asn	Arg	60 Phe
Ser	Gly	Val	Pro	65 Asp	Arg	Phe	Ser	Gly	70 Ser	Gly	Ser	Gly	Thr	75 Asp
Phe	Thr	Leu	Lys					Glu		Glu	Asp	Val	Gly	90 Val
			Ser	<i>-</i>									Gly	
Gly	Thr	Lys	Val					Thr						120 Val
Phe	Ile	Phe	Pro					Gln		Lys				135 Ala
Ser	Val	Val	Cys	140 Leu				Phe					Ala	
Val	Gln	Trp	Lys	155 Val	Asp	Asn	Ala	Leu	160 Gln	Ser	Gly	Asn	Ser	165 Gln
Glu	Ser	Val	Thr		Gln				175 Asp	Ser	Thr	Tyr	Ser	180 Leu
Ser	Ser	Thr	Leu	185 Thr	Leu	Ser	Lys	Ala	190 Asp	Tyr	Glu	Lys	His	195 Lys
				200					205					210

Val Tyr Ala Cys Glu Val Thr His Gln Gly Leu Ser Ser Pro Val
Thr Lys Ser Phe Asn Arg Gly Glu Cys (SEQ ID NO:11).

A preferred heavy chain for a humanized antibody of the present invention has the amino acid sequence:

1 Glu	Val	Gln	Leu	5 Val	Glu	Ser	Gly	Gly	10 Gly	Leu	Val	Gln	Pro	15 Gly
Gly	Ser	Leu		20 Leu	Ser	Cys	Ala	Ala	25 Ser	Gly	Phe	Thr	Phe	30 Ser
Arg	Tyr	Ser	Met	35 Ser	Trp	Val	Arg	Gln	40 Ala	Pro	Gly	Lys		45 Leu
Glu	Leu	Val	Ala	50 Gln			Ser		-					60 Tyr
Pro	Asp	Thr	Val	65 Lys	Gly	Arg	Phe	Thr	70 Ile	Ser	Arg	Asp	Asn	75 Ala
	Asn			80					85					90
_				95					100					105 Gly
				110					115					120 Val
				125					130					135 Ala
				140					145					150 Thr
				155					160					165 Phe
				170					175					180
				185				۵	190					Val
Val	Thr	Val	Pro	Ser	Ser	Ser	Leu	Gly	Thr	Gln	Thr	Tyr	Ile	Cys
Asn	Val	Asn	His	200 Lys		Ser	Asn	Thr	205 Lys		Asp	Lys	Lys	210 Val
Glu	Pro	Lys	Ser	215 Cys		Lys	Thr	His	220 Thr		Pro	Pro	Cys	225 Pro

Ala	Pro	Glu	Leu	230 Leu		Gly	Pro	Ser	235 Val		Leu	Phe	Pro	240 Pro
Lys	Pro	Lys	Asp	245 Thr		Met	Ile	Ser	250 Arg		Pro	Glu	Val	255 Thr
Cys	Val	Val	Val	260 Asp		Ser	His	Glu	265 Asp		Glu	Val	Lys	270 Phe
Asn	Trp	Tyr	Val	275 Asp		Val	Glu	Val	280 His		Ala	Lys	Thr	285 Lys
Pro	Arg	Glu	Glu	290 Gln	Tyr	Asn	Ser	Thr	295 Tyr		Val	Val	Ser	300 Val
Leu	Thr	Val	Leu	305 His	Gln	Asp	Trp	Leu	310 Asn	Gly	Lys	Glu	Tyr	315 Lys
Cys	Ļys	Val	Ser	320 Asn	Lys	Ala	Leu	Pro	325 Ala	Pro	Ile	Glu	Lys	330 Thr
Ile	Ser	Lys	Ala	335 Lys	Gly	Gln	Pro	Arg	340 Glu	Pro	Gln	Val	Tyr	345 Thr
Leu	Pro	Pro	Ser		Asp	Glu	Leu	Thr		Asn	Gln	Val	Ser	
Thr	Cys	Leu	Val	365 Lys	Gly	Phe	Tyr	Pro	370 Ser	Asp	Ile	Ala	Val	375 Glu
Trp	Glu	Ser	Asn	380 Gly	Gln	Pro	Glu	Asn	385 Asn	Tyr	Lys	Thr	Thr	390 Pro
Pro	Val	Leu	Asp	395 Ser	Asp	Gly	Ser	Phe	400 Phe	Leu	Tyr	Ser	Lys	405 Leu
Thr	Val	Asp	Lys	410 Ser	Arg	Trp	Gln	Gln	415 Gly	Asn	Val	Phe	Ser	420 Cys
Ser	Val	Met	His	425 Glu	Ala	Leu	His	Asn	430 His	Tyr	Thr	Gln	Lys	435 Ser
Leu	Ser	Leu	Ser	440 Pro	Gly	Lys	(SEQ] ID	NO:1	2).				

Other sequences are possible for the light and heavy chains for the humanized antibodies of the present invention and for humanized 266. The immunoglobulins can have two pairs of light chain/heavy chain complexes, at least one chain comprising one or more mouse complementarity determining regions functionally joined to human framework region segments.

Starting at position 56 of the heavy chain variable region, both m266 and humanized 266 contain the sequence Asn-Ser-Thr. This sequence is an example of the Asn-X-Ser/Thr signal for N-linked glycosylation, wherein the Asn is the site of attachment of N-linked glycosyl chains. Both m266 and humanized 266 are extensively glycosylated at this site. Quite unpredictably and advantageously, the affinity of humanized 266 that is deglycosylated in the heavy chain CDR2 for A β peptide is markedly higher than that of humanized 266. The heavy chain CDR2 of deglycosylated humanized 266 has the following amino acid sequences:

heavy chain CDR2:

wherein:

Xaa at position 7 is any amino acid, provided that if Xaa at position 8 is neither Asp nor Pro and Xaa at position 9 is Ser or Thr, then Xaa at position 7 is not Asn;

Xaa at position 8 is any amino acid, provided that if Xaa at position 7 is Asn and Xaa at position 9 is Ser or Thr, then Xaa at position 8 is Asp or Pro; and

Xaa at position 9 is any amino acid, provided that if Xaa at position 7 is Asn and Xaa at position 8 is neither Asp nor Pro, then Xaa at position 9 is neither Ser nor Thr;

By "any amino acid" is meant any naturally-occurring amino acid. Preferred naturally-occurring amino acids are Ala, Cys, Asp, Glu, Phe, Gly, His, Ile, Lys, Leu, Met, Asn, Pro, Gln, Arg, Ser, Thr, Val, Trp, and Tyr.

A preferred deglycosylated humanized antibody is a humanized form of m266, wherein the deglycosylated heavy chain CDR2 is SEQ ID NO:13, wherein:

Xaa at position 7 of SEQ ID NO:13 is selected from the group consisting of Ala, Cys, Asp, Glu, Phe, Gly, His, Ile, Lys, Leu, Met, Asn, Pro, Gln, Arg, Ser, Thr, Val, Trp, and Tyr, provided that if Xaa at position 8 is neither Asp nor Pro and Xaa at position 9 is Ser or Thr, then Xaa at position 7 is not Asn;

Xaa at position 8 of SEQ ID NO:13 is selected from the group consisting of Ala, Cys, Asp, Glu, Phe, Gly, His, Ile, Lys, Leu, Met, Asn, Pro, Gln, Arg, Ser, Thr, Val, Trp, and Tyr, provided that if Xaa at position 7 is Asn and Xaa at position 9 is Ser or Thr, then Xaa at position 8 is Asp or Pro; and

Xaa at position 9 of SEQ ID NO:13 is selected from the group consisting of Ala, Cys, Asp, Glu, Phe, Gly, His, Ile, Lys, Leu, Met, Asn, Pro, Gln, Arg, Ser, Thr, Val, Trp, and Tyr, provided that if Xaa at position 7 is Asn and Xaa at position 8 is neither Asp nor Pro, then Xaa at position 9 is neither Ser nor Thr.

A preferred heavy chain variable region of a deglycosylated humanized antibody of the present invention has the following amino acid sequence, in which the framework originated from human germline VH segment DP53 and J segment JH4, with several amino acid substitutions to the consensus amino acids in the same human subgroup to reduce potential immunogenicity and wherein the N-glycosylation site in heavy chain CDR2 is modified so that it cannot be N-glycosylated:

1				5					10					15
Xaa	Val	Gln	Leu	Val	Glu	Xaa	Gly	Gly	Gly	Leu	Val	Gln	Pro	Gly
~ 3	~		יובי	20	C	~	70 71		25	C7	Dho	mb *	Dho	30
Gly	Ser	ьeu	Arg	ьeu	Ser	Cys	Ата	Ата	ser	сту	rne	T11T	FIIE	Ser
				35					40					45
Arg	Tyr	Ser	Met	Ser	Trp	Val	Arg	Gln	Ala	Pro	Gly	Lys	Gly	Leu
				50					55					60
Xaa	Leu	Val	Ala	Gln	Ile	Asn	Ser	Val	Gly	Xaa	Xaa	Xaa	Tyr	Tyr
				65					70					75
Pro	Asp	Xaa	Val	Lys						Ser	Arg	Asp	Asn	Xaa
				80					85					90
Xaa	Asn	Thr	Leu	Tyr						Leu	Arg	Ala	Xaa	Asp
				95					10	0				105
Thr	Ala	Val	Tyr	Tyr	Cys	Ala	Ser	Gly	Asp	Tyr	Trp	Glу	Gln	Gly
				110			•			a				
Thr	Xaa	Val	Thr	Val	Ser	Ser						(SE	Q ID	NO:14)

wherein:

Xaa at position 1 is Glu or Gln;

Xaa at position 7 is Ser or Leu;

Xaa at position 46 is Glu, Val, Asp, or Ser;

Xaa at position 56 is any amino acid, provided that if Xaa at position 57 is neither Asp nor Pro and Xaa at position 59 is Ser or Thr, then Xaa at position 56 is not Asn;

Xaa at position 57 is any amino acid, provided that if Xaa at position 56 is Asn and Xaa at position 58 is Ser or Thr, then Xaa at position 57 is Asp or Pro; and

Xaa at position 58 is any amino acid, provided that if Xaa at position 56 is Asn and Xaa at position 57 is neither Asp nor Pro, then Xaa at position 58 is neither Ser nor Thr

Xaa at position 63 is Thr or Ser;

Xaa at position 75 is Ala, Ser, Val, or Thr;

Xaa at position 76 is Lys or Arg;

Xaa at position 89 is Glu or Asp; and

Xaa at position 107 is Leu or Thr.

A particularly preferred heavy chain variable region of a deglycosylated humanized antibody of the present invention has the following amino acid sequence, in which the framework originated from human germline VH segment DP53 and J segment JH4 and wherein the N-glycosylation site in heavy chain CDR2 is modified so that it cannot be N-glycosylated:

Lys Asn Thr Leu Tyr Leu Gln Met Asn Ser Leu Arg Ala Glu Asp

95
Thr Ala Val Tyr Tyr Cys Ala Ser Gly Asp Tyr Trp Gly Gln Gly

110
Thr Leu Val Thr Val Ser Ser (SEQ ID NO:15).

wherein:

Xaa at position 56 is any amino acid, provided that if Xaa at position 57 is neither Asp nor Pro and Xaa at position 59 is Ser or Thr, then Xaa at position 56 is not Asn;

Xaa at position 57 is any amino acid, provided that if Xaa at position 56 is Asn and Xaa at position 58 is Ser or Thr, then Xaa at position 57 is Asp or Pro; and

Xaa at position 58 is any amino acid, provided that if Xaa at position 56 is Asn and Xaa at position 57 is neither Asp nor Pro, then Xaa at position 58 is neither Ser nor Thr.

A preferred heavy chain for a deglycosylated humanized antibody of the present invention, wherein the N-glycosylation site in heavy chain CDR2 is modified so that it cannot be N-glycosylated, has the amino acid sequence:

1				5					10					15
Glu	Val	Gln	Leu	Val	Glu	Ser	Gly	Gly	Gly	Leu	Val	Gln	Pro	Gly
Gly	Ser	Leu	Arg	20 Leu		Cys				Gly	Phe	Thr	Phe	30 Ser
Arg	Tyr	Ser	Met	35 Ser	Trp	Val	Arg	Gln	40 Ala	Pro	Gly	Lys	Gly	45 Leu
Glu	Leu	Val	Ala	50 Gln					55 Gly					
Pro	Asp	Thr	Val	65 Lys					70 Ile					75 Ala
Lys	Asn	Thr	Leu	80 Tyr					85 Ser	Leu	Arg	Ala	Glu	90 Asp
Thr	Ala	Val	Tyr	95 Tyr		Ala						Gly		
Thr	Leu	Val	Thr	110 Val	Ser	Ser	Ala	Ser	11: Thr	-	Gly	Pro	Ser	120 Val
				125					13	0				135

Phe	Pro	Leu	Ala	Pro	Ser	Ser	Lys	Ser	Thr	Ser	Gly	Gly	Thr	Ala
Ala	Leu	Gly	Cys	140 Leu	Val	Lys	Asp	Tyr	145 Phe		Glu	Pro	Val	150 Thr
Val	Ser	Trp	Asn	155 Ser	Gly	Ala	Leu	Thr	160 Ser		Val	His	Thr	165 Phe
Pro	Ala	Val	Leu	170 Gln	Ser	Ser	Gly	Leu	175 Tyr		Leu	Ser	Ser	180 Val
Val	Thr	Val	Pro	185 Ser	Ser	Ser	Leu	Gly				Tyr		195 Cys
Asn	Val	Asn	His	200 Lys	Pro	Ser	Asn	Thr				Lys		210 Val
Glu	Pro	Lys	Ser	215 Cys	Asp	Lys	Thr	His	220 Thr		Pro	Pro	Суз	225 Pro
Ala	Pro	Glu	Leu	230 Leu	Gly	Gly	Pro	Ser	235 Val		Leu	Phe	Pro	240 Pro
Lys	Pro	Lys	Asp	245 Thr	Leu	Met	Ile	Ser	250 Arg		Pro	Glu	Val	255 Thr
Cys	Val	Val	Val	260 Asp	Val	Ser	His	Glu	265 Asp		Glu	Val	Lys	270 Phe
Asn	Trp	Tyr	Val	275 Asp	Gly	Val	Glu	Val	280 His		Ala	Lys	Thr	285 Lys
Pro	Arg	Glu	Glu	290 Gln	Tyr	Asn	Ser	Thr	295 Tyr		Val	Val	Ser	300 Val
Leu	Thr	Val	Leu	305 His	Gln	Asp	Trp	Leu	31(Asn		Lys	Glu	Tyr	315 Lys
Cys	Lys	Val	Ser	320 Asn	Lys	Ala	Leu	Pro	325 Ala		Ile	Glu	Lys	330 Thr
				335					340)				345 Thr
		-	Ser	350	_				35	5				360
				365					370	0				375 Glu
	-			380			_		38	5				390 Pro
-				395					40	0				405 Leu
			Lys	410					41	5				420
-F		ლ			J					<i>-,-</i>	. —			

425 430 435

Ser Val Met His Glu Ala Leu His Asn His Tyr Thr Gln Lys Ser

440

Leu Ser Leu Ser Pro Gly Lys (SEQ ID NO:16)

wherein:

Xaa at position 56 is any amino acid, provided that if Xaa at position 57 is neither Asp nor Pro and Xaa at position 59 is Ser or Thr, then Xaa at position 56 is not Asn;

Xaa at position 57 is any amino acid, provided that if Xaa at position 56 is Asn and Xaa at position 58 is Ser or Thr, then Xaa at position 57 is Asp or Pro; and

Xaa at position 58 is any amino acid, provided that if Xaa at position 56 is Asn and Xaa at position 57 is neither Asp nor Pro, then Xaa at position 58 is neither Ser nor Thr.

Preferred deglycosylated 266 antibodies having the heavy variable region according to SEQ ID NO:14, SEQ ID NO:15, and SEQ ID NO:16 are those wherein:

Xaa at position 56 is selected from the group consisting of Ala, Gly, His, Asn, Gln, Ser, and Thr, provided that if Xaa at position 58 is Ser or Thr, then Xaa at position 56 is not Asn;

Xaa at position 57 is selected from the group consisting of Ala, Gly, His, Asn, Gln, Ser, and Thr; and

Xaa at position 58 is selected from the group consisting of Ala, Gly, His, Asn, Gln, Ser, and Thr, provided that if Xaa at position 56 is Asn, then Xaa at position 58 is neither Ser nor Thr.

Preferred sequences for CDR2 (positions 56, 57, and 58) of the heavy chain SEQ ID NO:14, SEQ ID NO:15, and SEQ ID NO:16 include those in which only a single amino acid is changed, those in which only two amino acids are changed, or all three are changed. It is preferred to replace Asn at position 56. It is preferred to replace Thr at position 58 with an amino acid other than Ser. It is preferred to not destroy the N-glycosylation site in the CDR2 of the 266 heavy chain by replacing Ser at position 57 with Pro or Asp. Conservative substitutions at one, two, or all three

positions are preferred. The most preferred species are those in which Asn at position 56 is replaced with Ser or Thr. Particularly preferred antibodies are those in which Ser or Thr is at position 56, Ser is at position 57, and Thr is at position 58 of SEQ ID NO:14, SEQ ID NO:15, or SEQ ID NO:16.

Especially preferred deglycosylated species are antibodies comprising a light chain of SEQ ID NO:11 and a heavy chain of SEQ ID NO:16, wherein in SEQ ID NO:16, Xaa at position 56 is Ser, Xaa at position 57 is Ser, and Xaa at position 58 is Thr ("N56S"), or wherein in SEQ ID NO:16, Xaa at position 56 is Thr, Xaa at position 57 is Ser, and Xaa at position 58 is Thr ("N56T").

Production of the antibodies useful in the invention typically involves recombinant techniques, as is described in PCT/US01/06191 cited above.

The antibodies (including immnunologically reactive fragments) are administered to a subject to be evaluated for conditions associated with Aß deposits such as clinical or preclinical Alzheimer's disease, or clinical or preclinical amyloid angiopathy, using standard administration techniques, preferably peripherally (i.e. not by administration into the central nervous system) by intravenous, intraperitoneal, subcutaneous, pulmonary, transdermal, intramuscular, intranasal, buccal, sublingual, or suppository administration.

The compositions for administration are designed to be appropriate for the selected mode of administration, and pharmaceutically acceptable excipients such as dispersing agents, buffers, surfactants, preservatives, solubilizing agents, isotonicity agents, stabilizing agents and the like are used as appropriate. Remington's Pharmaceutical Sciences, Mack Publishing Co., Easton PA, latest edition, provides a compendium of formulation techniques as are generally known to practitioners. It may be particularly useful to alter the solubility characteristics of the antibodies of the invention, making them more lipophilic, for example, by encapsulating them in liposomes or by blocking polar groups.

Peripheral systemic delivery by intravenous or intraperitoneal or subcutaneous injection is preferred. Suitable vehicles for such injections are straightforward. In addition, however, administration may also be effected through the mucosal membranes by means of nasal aerosols or suppositories. Suitable formulations for such modes of administration are well known and typically include surfactants that facilitate cross-membrane transfer. Such surfactants are often derived from steroids or are cationic lipids, such as N-[1-(2,3-dioleoyl)propyl]-N,N,N-trimethyl ammonium chloride (DOTMA) or various compounds such as cholesterol hemisuccinate, phosphatidyl glycerols and the like.

The concentration of the humanized antibody in formulations from as low as about 0.1% to as much as 15 or 20% by weight and will be selected primarily based on fluid volumes, viscosities, and so forth, in accordance with the particular mode of administration selected. Thus, a typical composition for injection could be made up to contain 1 mL sterile buffered water of phosphate buffered saline and 1-1000 mg, preferably 10-100 mg, of the humanized antibody of the present invention. The formulation could be sterile filtered after making the formulation, or otherwise made microbiologically acceptable. A typical composition for intravenous infusion could have volumes between 1-250 mL of fluid, such as sterile Ringer's solution, and 1-100 mg per mL, or more in antibody concentration. Therapeutic agents of the invention can be frozen or lyophilized for storage and reconstituted in a suitable sterile carrier prior to use. Lyophilization and reconstitution can lead to varying degrees of antibody activity loss (e.g. with conventional immune globulins, IgM antibodies tend to have greater activity loss than IgG antibodies). Dosages may have to be adjusted to compensate. The pH of the formulation will be selected to balance antibody stability (chemical and physical) and comfort to the patient when administered. Generally, pH between 4 and 8 is tolerated.

Although the foregoing methods appear the most convenient and most appropriate for administration of proteins such as humanized antibodies, by suitable adaptation, other techniques for administration, such as transdermal administration and oral administration may be employed provided proper formulation is designed.

In addition, it may be desirable to employ controlled release formulations using biodegradable films and matrices, or osmotic mini-pumps, or delivery systems based on dextran beads, alginate, or collagen.

In summary, formulations are available for administering the antibodies of the invention and are well-known in the art and may be chosen from a variety of options.

Typical dosage levels can be optimized using standard clinical techniques and will be dependent on the mode of administration.

After administration of the antibody to the subject, blood samples are withdrawn at periodic intervals over the succeeding minutes, hours, or days. Suitable time periods may be as short as a few minutes, 10 minutes, 30 minutes, or 1 hour, several hours, or days may be allowed to elapse before withdrawal of the blood sample. Measurement after less than 3 hours is preferred. If desired, the plasma fraction can be obtained for ease of analysis. Standard analytic techniques for analysis of the $A\beta_{40}$, $A\beta_{42}$ and the ratio thereof are used. These techniques are described, for example, in U.S. patent 5,766,846. Any suitable technique for analysis, however, can be employed, such as chromatographic separation, Western blotting, ELISA assays, homogenous assays and the like.

The concentration of the $A\beta_{40}$, $A\beta_{42}$, or their ratio is then compared to these values in a control. Typical controls include individuals known to be free of conditions associated with the amyloid plaques, such as teenagers or very young adults and in addition, age-matched cognitively normal controls are obtained by averaging values from the general population. While some elderly age-matched cognitively normal controls have pre-clinical AD, most do not. Thus, the average values from such a population will be useful and critical to obtain. Design of standard controls is a process that is well known to the ordinary practitioner. Individuals who have elevated levels of the stated peptides or of the ratio of $A\beta_{40}$ to $A\beta_{42}$ as compared to the control values are then identified as having a high likelihood of clinical or preclinical conditions associated with the formation of amyloid plaques.

It may be desirable to package the components for carrying out the assay of the invention into convenient kits. Such kits will include containers such as bottles or vials which contain samples of the antibody to be administered as well as the

appropriate reagents for carrying out the assay on the withdrawn blood sample. The kit will also contain instructions for conducting the assay and, optionally, charts of control values.

The following examples are intended to illustrate but not to limit the invention.

The examples hereinbelow employ, among others, a murine monoclonal antibody designated "266" which was originally prepared by immunization with a peptide comprised of residues 13-28 of human A β peptide. The antibody was confirmed to immunoreact with this peptide, but had previously been reported to not react with the peptide containing only residues 17-28 of human A β peptide, or at any other epitopes within the A β peptide. The preparation of this antibody is described in U.S. patent 5,766,846. As the examples here describe experiments conducted in murine systems, the use of murine monoclonal antibodies is satisfactory. However, in the treatment methods of the invention intended for human use, humanized forms of the antibodies with the immunospecificity corresponding to that of antibody 266 are preferred.

Example 1

Correlation of Circuiating Peptide Levels with Plaques

A murine model for Alzheimer's disease, APP V717F transgenic mice, was used in this assay. These mice are described by Games, D., et al., Nature (1995) 373:523-527; Bales, K.R., et al., Nature Genet. (1997) 17:263-264; and by Holtzman, D.M., et al., Proc. Natl. Acad. Sci. U.S.A. (2000) 97:2892-2897. In this model, a mutant form of the human APP gene is expressed and results in an early onset form of familial Alzheimer's disease. Although the brains of these mice appear normal initially, Aβ deposition in the form of diffuse and neuritic plaques occurs at 6-15 months, although mice homozygous for the transgene show variability in that at 9-14 months of age, some mice develop Aβ deposits while others do not.

53 homozygous mice at 12 months were used in this study.

Plasma levels of $A\beta_{40}$, $A\beta_{42}$, and $A\beta_{40}/A\beta_{42}$ ratios were measured by ELISA in the plasma of these mice prior to administration of 500 µg of m266 and at various time intervals up to 24 hours after administering this antibody. After 24 hours, the mice were sacrificed, and the amount of $A\beta$ deposition in the brain was assessed in the hippocampus and cortex as described by DeMattos, *et al. Proc. Nat'l. Acad. Sci USA* (2001) 98:8850-8855, and evaluated as a percentage of brain covered by $A\beta$ deposits.

As shown in Figures 1 A, B and C, if the percentage $A\beta$ coverage due to deposition in the hippocampus is plotted on the x-axis against the levels of the peptides and their ratio in plasma on the y-axis prior to administration of the antibody, no correlation is found. Regardless of whether the percent $A\beta$ deposition was essentially zero (0) or over 75%, the average level of $A\beta_{40}$ was approximately 250 (pg/ml) and of $A\beta_{42}$ approximately 400 (pg/ml). The ratio of $A\beta_{40}$ to $A\beta_{42}$ was thus approximately 0.5-0.6.

As shown in Figures 2 A and B, however, the plasma level of A β 40 strongly correlated with the percentage of A β deposition in hippocampus one hour after m266 injection, as did the ratio of A β 40 to A β 42.

Figures 3 A, B and C show similar results obtained 24 hours post injection. The levels obtained of $A\beta_{40}$ and the $A\beta_{40}/A\beta_{42}$ ratio strongly correlated with the % $A\beta$ deposition in hippocampus The $A\beta_{42}$ levels also correlated with % $A\beta$ deposition but not as well as $A\beta_{40}$ levels.

Figures 4 A, B and C show analogous results with respect to entry rate of the two A β peptides into the plasma and the calculated values for the entry rate as a function of the ratio of these peptides. The best correlations with A β deposition were rate of A β ₄₀ entry and the ratio of A β ₄₀/ A β ₄₂.

Figures 5 A and B show an alternate presentation of the data for plasma levels of $A\beta_{40}$ 24 hours and 1 hour after m266 injection. When the mice were grouped according to low, medium, or high $A\beta$ coverage in the hippocampus, the animals with low $A\beta$ deposition could be completely distinguished from those with high deposition as a function of the level of plasma $A\beta_{40}$.

Example 2

In a study similar to that set forth in Example 1, a cohort of 49 homozygous APP V717F mice were used. Before and after injection of 500 μg IV of m266, plasma samples were obtained at 5 minutes, 1 hour, 3 hours, 6 hours and 24 hours and levels of $A\beta_{40}$ and $A\beta_{42}$ were assessed as described in Example 1. The mice were sacrificed after 24 hours and 1 hemisphere was assessed for the percentage of the area of the hippocampus or cingulate cortex occupied by $A\beta$ peptide (using quantitative $A\beta$ immunofluorescence staining) and the area occupied by amyloid (by thioflavine-S (amyloid) staining). The regions from the other hemisphere were assessed for $A\beta$ peptide by ELISA.

The Pearson correlation coefficient (Pearson r) and significance (P value) were determined between plasma A β values (pre and post injection of m266) and hippocampal A β or amyloid load using GraphPad Prism software (version 3.00 for Windows, San Diego, USA). A β load is defined as the percentage area of the hippocampus covered by A β -immunoreactive deposits. Amyloid load is defined as the percentage area of the hippocampus covered by thioflavine-S positive deposits. Correlations were also determined between the plasma A β accumulation over 24 hours (area under curve, AUC) and hippocampal A β load or amyloid load.

Figure 6 shown the results obtained. Briefly, it was found that the base line levels (prior to injection) of $A\beta_{40}$, $A\beta_{42}$ and the calculated $A\beta_{40}/_{42}$ ratio prior to injection with m266 did not correlate with percentage $A\beta$ or amyloid deposition. However, following administration of m266, there were significant correlations between plasma $A\beta_{40}$, $A\beta_{42}$, and $A\beta_{40}/_{42}$ ratio with both $A\beta$ and amyloid burden in the hippocampus and cingulate cortex.

Statistical analysis of the results permits accurate prediction of hippocampal A β load in these mice based on plasma A β 40 levels 24 hours following m266 injection.

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SEQUENCE LISTING for PCT-US02-26321.txt

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       (105)..(105)
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<223> Xaa at position 109 is Val or Leu
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SEQUENCE LISTING for PCT-US02-26321.txt

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Asp Gly Asn Ala Tyr Leu His Trp Phe Leu Gln Lys Pro Gly Gln Ser

SEQUENCE LISTING for PCT-US02-26321.txt Pro Xaa Leu Leu Ile Tyr Lys Val Ser Asn Arg Phe Ser Gly Val Pro 55 60 50 Asp Arg Phe Ser Gly Ser Gly Ser Gly Thr Asp Phe Thr Leu Lys Ile 65 70 Ser Arg Val Glu Ala Glu Asp Xaa Gly Val Tyr Tyr Cys Ser Gln Ser 85 Thr His Val Pro Trp Thr Phe Gly Xaa Gly Thr Xaa Xaa Glu Ile Lys 105 100 Arg <210> 8 <211> 112 <212> PRT <213> Artificial Sequence <220> Humanized antibody <223> <220> <221> MISC FEATURE (1)..(112) <222> HUMANIZED ANTIBODY HEAVY CHAIN VARIABLE REGION <223> <220> MISC_FEATURE <221> (76)..(76)<222> <223> Xaa at position 76 is Lys or Arg <220> MISC_FEATURE <221> (89)..(89)<222> <223> Xaa at position 89 is Glu or Asp

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SEQUENCE LISTING for PCT-US02-26321.txt

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       (75)..(75)
<222>
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CA 02457145 2004-02-17

28-8

SEQUENCE LISTING for PCT-US02-26321.txt

Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser Arg Tyr 20 30

Ser Met Ser Trp Val Arg Gln Ala Pro Gly Lys Gly Leu Xaa Leu Val 35 40 45

Ala Gln Ile Asn Ser Val Gly Asn Ser Thr Tyr Tyr Pro Asp Xaa Val 50

Lys Gly Arg Phe Thr Ile Ser Arg Asp Asn Xaa Xaa Asn Thr Leu Tyr 65 70 75

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<212> PRT

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Asp Gly Asn Ala Tyr Leu His Trp Phe Leu Gln Lys Pro Gly Gln Ser 35

Pro Arg Leu Leu Ile Tyr Lys Val Ser Asn Arg Phe Ser Gly Val Pro 50

SEQUENCE LISTING for PCT-US02-26321.txt

Asp Arg Phe Ser Gly Ser Gly Ser Gly Thr Asp Phe Thr Leu Lys Ile
75 75 80

Ser Arg Val Glu Ala Glu Asp Val Gly Val Tyr Tyr Cys Ser Gln Ser 85 90

Thr His Val Pro Trp Thr Phe Gly Gln Gly Thr Lys Val Glu Ile Lys 100 100

Arg

<210> 10

<211> 112

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Ser Met Ser Trp Val Arg Gln Ala Pro Gly Lys Gly Leu Glu Leu Val 35

Ala Gln Ile Asn Ser Val Gly Asn Ser Thr Tyr Tyr Pro Asp Thr Val 50

Lys Gly Arg Phe Thr Ile Ser Arg Asp Asn Ala Lys Asn Thr Leu Tyr 65 75 80

Leu Gln Met Asn Ser Leu Arg Ala Glu Asp Thr Ala Val Tyr Tyr Cys
85 90 95

SEQUENCE LISTING for PCT-US02-26321.txt

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Asp Gly Asn Ala Tyr Leu His Trp Phe Leu Gln Lys Pro Gly Gln Ser 35

Pro Arg Leu Leu Ile Tyr Lys Val Ser Asn Arg Phe Ser Gly Val Pro 50

Asp Arg Phe Ser Gly Ser Gly Ser Gly Thr Asp Phe Thr Leu Lys Ile 65 70 75 80

Ser Arg Val Glu Ala Glu Asp Val Gly Val Tyr Tyr Cys Ser Gln Ser 85

Thr His Val Pro Trp Thr Phe Gly Gln Gly Thr Lys Val Glu Ile Lys 100 105

Arg Thr Val Ala Ala Pro Ser Val Phe Ile Phe Pro Pro Ser Asp Glu 115 120

Gln Leu Lys Ser Gly Thr Ala Ser Val Val Cys Leu Leu Asn Asn Phe 130 135

SEQUENCE LISTING for PCT-US02-26321.txt

Tyr Pro Arg Glu Ala Lys Val Gln Trp Lys Val Asp Asn Ala Leu Gln 145 150 150

Ser Gly Asn Ser Gln Glu Ser Val Thr Glu Gln Asp Ser Lys Asp Ser 175

Thr Tyr Ser Leu Ser Ser Thr Leu Thr Leu Ser Lys Ala Asp Tyr Glu 180 185

Lys His Lys Val Tyr Ala Cys Glu Val Thr His Gln Gly Leu Ser Ser 195 200

Pro Val Thr Lys Ser Phe Asn Arg Gly Glu Cys 210

<210> 12

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<213> Artificial Sequence

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Ser Met Ser Trp Val Arg Gln Ala Pro Gly Lys Gly Leu Glu Leu Val 35

Ala Gln Ile Asn Ser Val Gly Asn Ser Thr Tyr Tyr Pro Asp Thr Val 50

Lys 65	Gly	Arg	Phe	Thr	Ile 70	Ser				Ala		Asn			321.txt Tyr 80
Leu	Gln	Met	. Asn	Ser 85	Leu	Arg	Ala	Glu			Ala			Tyr 95	Cys
Ala	Ser	Gly	Asp		Trp	Gly	Gln	Gly 105		Leu	Val	Thr	Val 110	Ser	Ser
Ala	Ser	Thr 115		Gly	Pro	Ser	Val 120		Pro	Leu	Ala	Pro 125	Ser	Ser	Lys
Ser	Thr 130	Ser	Gly	Gly	Thr	Ala 135		Leu	Gly	Суѕ	Leu 140	Val	Lys	Asp	Tyr
Phe 145	Pro	Glu	Pro	Val	Thr 150	Val	Ser	Trp	Asn	Ser 155	Gly	Ala	Leu	Thr	Ser 160
Gly	Val	His	Thr	Phe 165		Ala	Val	Leu	Gln 170	Ser	Ser	Gly	Leu	Tyr 175	Ser
Leu	Ser	Ser	Val 180	Val	Thr	Val	Pro		Ser		Leu	Gly	Thr 190	Gln	Thr
Tyr	Ile	Cys 195	Asn	Val	Asn	His	Lys 200	Pro	Ser	Asn	Thr	Lys 205	Val	Asp	Lys
Lys	Val 210	Glu	Pro	Lys	Ser	Cys 215	Asp		Thr	His	Thr 220	Cys	Pro	Pro	Cys
Pro 225	Ala	Pro	Glu	Leu	Leu 230	Gly	Gly	Pro	Ser	Val 235	Phe	Leu	Phe	Pro	Pro. 240
Lys	Pro	Lys	Asp	Thr 245	Leu	Met	Ile		Arg 250	Thr	Pro	Glu	Val	Thr 255	Cys
Val	Val	Val	Asp 260	Val	Ser	His		Asp 265	Pro	Glu	Val	Lys	Phe 270	Asn	Trp
Tyr	Val	Asp 275		Val	Glu	Val	His 280	Asn	Ala	Lys	Thr	Lys 285	Pro	Arg	Glu
	Gln 290	Tyr	Asn	Ser		Tyr 295	Arg	Val	Val		Val 300	Leu	Thr	Val	Leu
His 305	Gln	Asp	Trp		Asn 310	Gly	Lys	Glu		Lys 315	Cys	Lys	Val	Ser	Asn 320
Lys	Ala	Leu	Pro	Ala	Pro	Ile	Glu	Lys	Thr	Ile	Ser	Lys	Ala	Lys	Gly

SEQUENCE LISTING for PCT-US02-26321.txt
325
330
335

Gln Pro Arg Glu Pro Gln Val Tyr Thr Leu Pro Pro Ser Arg Asp Glu 340 345

Leu Thr Lys Asn Gln Val Ser Leu Thr Cys Leu Val Lys Gly Phe Tyr 355

Pro Ser Asp Ile Ala Val Glu Trp Glu Ser Asn Gly Gln Pro Glu Asn 370 375 380

Asn Tyr Lys Thr Thr Pro Pro Val Leu Asp Ser Asp Gly Ser Phe Phe 385 390 395

Leu Tyr Ser Lys Leu Thr Val Asp Lys Ser Arg Trp Gln Gln Gly Asn 405 410

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Gln Lys Ser Leu Ser Leu Ser Pro Gly Lys 435

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<211> 17

<212> PRT

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<223> HEAVY CHAIN CDR2

<220>

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<223> Xaa at position 7 is any amino acid, provided that is Xaa at position 8 is neither Asp nor Pro and Xaa at position 9 is Ser or Thr, then Xaa at position 7 is not Asn

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SEQUENCE LISTING for PCT-US02-26321.txt

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 <221>
 <222> (9)..(9)
 <223> Xaa at position 9 is any amino acid, provided that Xaa at position 7 is Asn and Xaa a
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Gly
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<211>
       112
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       Xaa at position 1 is Glu or Gln
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(7)..(7)

MISC FEATURE

 $(46)^{-}$. (46)

Xaa at position 7 is Ser or Leu

Xaa at position 46 is Glu, Val, Asp, or Ser

<222>

<223>

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<221>

<222>

SEQUENCE LISTING for PCT-US02-26321.txt

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Ala Gln Ile Asn Ser Val Gly Xaa Xaa Xaa Tyr Tyr Pro Asp Xaa Val

35

SEQUENCE LISTING for PCT-US02-26321.txt

55 50 Lys Gly Arg Phe Thr Ile Ser Arg Asp Asn Xaa Xaa Asn Thr Leu Tyr 70 65 Leu Gln Met Asn Ser Leu Arg Ala Xaa Asp Thr Ala Val Tyr Tyr Cys Ala Ser Gly Asp Tyr Trp Gly Gln Gly Thr Xaa Val Thr Val Ser Ser 100 105 110 <210> 15 <211> 112 <212> PRT <213> Artificial Sequence <220> <223> Humanized Antibody <220> <221> MISC FEATURE <222> (1)..(112) Deglycosylated Humanized Antibody Heavy Chain Variable Region <223> <220> <221> MISC FEATURE <222> (56)..(56) Xaa at position 56 is any amino acid, provided that if Xaa at pos ition 57 is neither Asp nor Pro and Xaa at position 59 is Ser or Thr, then Xaa at position 56 is not Asn <220> <221> MISC FEATURE <222> (57)..(57) <223> Xaa at position 57 is any amino acid, provided that if Xaa at pos ition 56 is Asn and Xaa at position 58 is Ser or Thr, then Xaa at position 57 is Asp or Pro <220> <221> MISC FEATURE <222> (58)..(58)<223> Xaa at position 58 is any amino acid, provided that if Xaa at pos ition 56 is Asn and Xaa at position 57 is neither Asp nor Pro, th en Xaa at position 58 is neither Ser nor Thr <400> 15 Glu Val Gln Leu Val Glu Ser Gly Gly Gly Leu Val Gln Pro Gly Gly Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser Arg Tyr Ser Met Ser Trp Val Arg Gln Ala Pro Gly Lys Gly Leu Glu Leu Val 35

SEQUENCE LISTING for PCT-US02-26321.txt

Ala Gln Ile Asn Ser Val Gly Xaa Xaa Xaa Tyr Tyr Pro Asp Thr Val
50 55 60

Lys Gly Arg Phe Thr Ile Ser Arg Asp Asn Ala Lys Asn Thr Leu Tyr 65 75 80

Leu Gln Met Asn Ser Leu Arg Ala Glu Asp Thr Ala Val Tyr Tyr Cys 85 90

Ala Ser Gly Asp Tyr Trp Gly Gln Gly Thr Leu Val Thr Val Ser Ser 100 100 110

<210> 16

<211> 442

<212> PRT

<213> Artificial Sequence

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<223> Humanized Antibody

<220>

<221> MISC FEATURE

 $\langle 222 \rangle$ (1)...(442)

<223> Humanized Antibody Heavy Chain

<220>

<221> MISC FEATURE

 $\langle 222 \rangle$ (56)..(56)

<223> Xaa at position 56 is any amino acid, provided that Xaa at position 57 is neither Asp nor Pro and Xaa at position 59 is Ser or Thr , then Xaa at position 56 is not Asn

<220>

<221> MISC_FEATURE

 $\langle 222 \rangle$ (57)...(57)

<223> Xaa at position 57 is any amino acid, provided that Xaa at position 56 is Asn and Xaa at position 58 is Ser or Thr, then Xaa at position 57 is Asp or Pro

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<221> MISC FEATURE

 $\langle 222 \rangle$ (58)...(58)

<223> Xaa at position 58 is any amino acid, provided that Xaa at position 56 is Asn and Xaa at position 57 is neither Asp nor Pro, then Xaa at position 58 is neither Ser nor Thr

<400> 16

Glu Val Gln Leu Val Glu Ser Gly Gly Gly Leu Val Gln Pro Gly Gly 1 5

Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser Arg Tyr 20 25 30

SEQUENCE L	ISTING	for	PCT-US02-26321.t:	xt
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- Ala Gln Iie Asn Ser Val Gly Xaa Xaa Xaa Tyr Tyr Pro Asp Thr Val
- Lys Gly Arg Phe Thr Ile Ser Arg Asp Asn Ala Lys Asn Thr Leu Tyr 65 70 75 80
- Leu Gln Met Asn Ser Leu Arg Ala Glu Asp Thr Ala Val Tyr Tyr Cys 85 90
- Ala Ser Gly Asp Tyr Trp Gly Gln Gly Thr Leu Val Thr Val Ser Ser 100 110
- Ala Ser Thr Lys Gly Pro Ser Val Phe Pro Leu Ala Pro Ser Ser Lys 115 120
- Ser Thr Ser Gly Gly Thr Ala Ala Leu Gly Cys Leu Val Lys Asp Tyr 130 135
- Phe Pro Glu Pro Val Thr Val Ser Trp Asn Ser Gly Ala Leu Thr Ser 145 150 150
- Gly Val His Thr Phe Pro Ala Val Leu Gln Ser Ser Gly Leu Tyr Ser 165 170
- Leu Ser Ser Val Val Thr Val Pro Ser Ser Ser Leu Gly Thr Gln Thr 180 185
- Tyr Ile Cys Asn Val Asn His Lys Pro Ser Asn Thr Lys Val Asp Lys 195 200
- Lys Val Glu Pro Lys Ser Cys Asp Lys Thr His Thr Cys Pro Pro Cys 210 215
- Pro Ala Pro Glu Leu Leu Gly Gly Pro Ser Val Phe Leu Phe Pro Pro 225 230 230
- Lys Pro Lys Asp Thr Leu Met Ile Ser Arg Thr Pro Glu Val Thr Cys 245
- Val Val Asp Val Ser His Glu Asp Pro Glu Val Lys Phe Asn Trp 260 265
- Tyr Val Asp Gly Val Glu Val His Asn Ala Lys Thr Lys Pro Arg Glu 275

SEQUENCE LISTING for PCT-US02-26321.txt Glu Gln Tyr Asn Ser Thr Tyr Arg Val Val Ser Val Leu Thr Val Leu 90 00 95 His Gln Asp Trp Leu Asn Gly Lys Glu Tyr Lys Cys Lys Val Ser Asn Lys Ala Leu Pro Ala Pro Ile Glu Lys Thr Ile Ser Lys Ala Lys Gly Gln Pro Arg Glu Pro Gln Val Tyr Thr Leu Pro Pro Ser Arg Asp Glu 50 Leu Thr Lys Asn Gln Val Ser Leu Thr Cys Leu Val Lys Gly Phe Tyr **5 5**5 Pro Ser Asp Ile Ala Val Glu Trp Glu Ser Asn Gly Gln Pro Glu Asn 75 70 Asn Tyr Lys Thr Thr Pro Pro Val Leu Asp Ser Asp Gly Ser Phe Phe Leu Tyr Ser Lys Leu Thr Val Asp Lys Ser Arg Trp Gln Gln Gly Asn Val Phe Ser Cys Ser Val Met His Glu Ala Leu His Asn His Tyr Thr Gln Lys Ser Leu Ser Leu Ser Pro Gly Lys

Claims

10

1. Use in a subject, of an amount of an antibody which specifically binds an epitope contained within positions 13-28 of $A\beta$ and increases clearance of soluble and bound forms of $A\beta$ from the central nervous system, wherein said amount is effective to increase the levels of circulating $A\beta$ peptides in the blood of said subject when said subject is in a clinical stage of Alzheimer's disease,

for diagnosing clinical Alzheimer's disease in said subject by measuring the level of $A\beta_{40}$ or $A\beta_{42}$, or the ratio of $A\beta_{40}/A\beta_{42}$ in the blood of said subject at a time interval after said administering; and

comparing the measured level of $A\beta_{40}$ or $A\beta_{42}$, or the measured ratio of $A\beta_{40}/A\beta_{42}$ in said subject with a control value of said levels or of said ratio, wherein an elevated measured level of $A\beta_{40}$ or $A\beta_{42}$, or of the ratio of $A\beta_{40}/A\beta_{42}$ in said subject as compared to said control valve identifies said subject as in a clinical stage of Alzheimer's disease.

- 2. The use of claim 1, wherein said time interval is less than 1 week.
- 3. The use of claim 1, wherein said time interval is less than or equal to 20 24 hours.
 - 4. The use of claim 3, wherein said time interval is less than or equal to 3 hours.
- 5. The use of claim 1, wherein said administering is by injection of said antibodies.
 - 6. The use of claim 1, wherein the subject is human and the antibody is a humanized antibody or a fragment thereof.

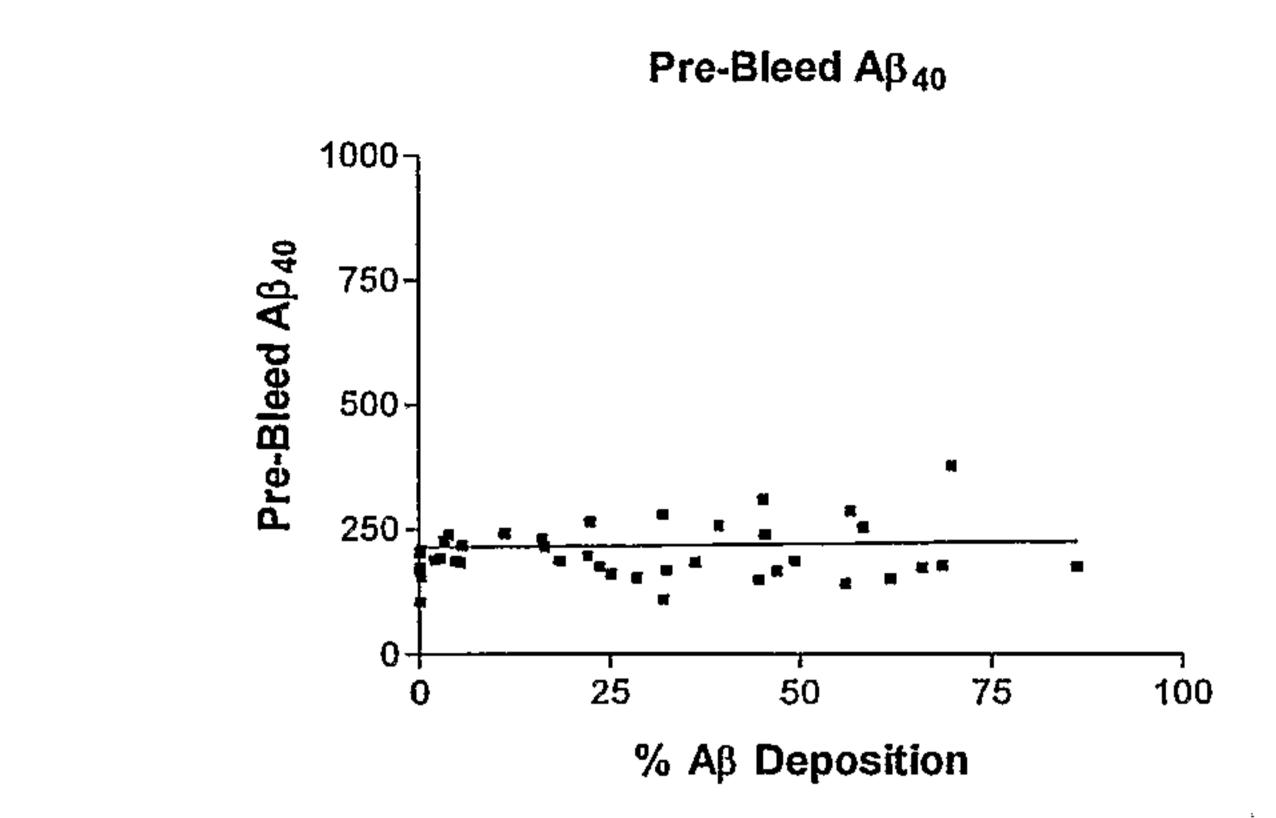
- 7. The use of claim 6, wherein the humanized antibody or fragment thereof comprises a light chain of SEQ ID NO:11 and a heavy chain of SEQ ID NO:12.
- 5 8. The use of claim 6, wherein the humanized antibody or fragment thereof comprises a light chain of SEQ ID NO:11 and a heavy chain of SEQ ID NO:16.
- 9. The use of claim 6, wherein the humanized antibody or fragment thereof comprises a light chain comprising a variable region of SEQ ID NO:7 and a heavy chain comprising a variable region of SEQ ID NO:16.
 - 10. The use of claim 1, wherein said antibody is a fragment.
- 15 11. The use of claim 1, wherein the antibody specifically binds to an epitope of $A\beta$ to which antibody 266 specifically binds.
 - 12. The use of claim 1, wherein the antibody is a single-chain antibody.
- 20 13. A kit for the diagnosis of clinical or preclinical Alzheimer's disease in a subject comprising:

a container containing an antibody which specifically binds an epitope contained within positions 13-28 of $A\beta$ or an antibody that sequesters $A\beta$ peptide from its bound, circulating form in the blood and alters clearance of soluble and bound forms of $A\beta$ in the central nervous system and in plasma, a reagent for assessing the level of $A\beta_{40}$ and/or $A\beta_{42}$ in the blood; and instructions for administering the antibody.

14. The kit of claim 13, which further contains a description of control values for $A\beta_{40}$, $A\beta_{42}$, and/or $A\beta_{40}/A\beta_{42}$ ratios in blood of normal subjects.

25

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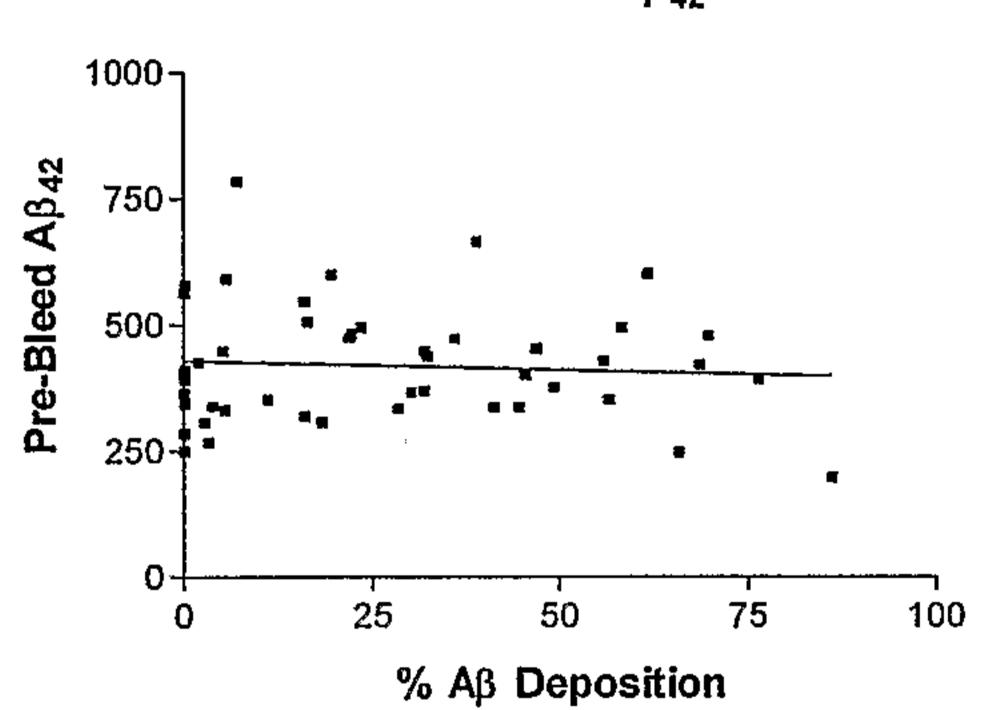


Parameter	PB 40
Number of XY Pairs	42
Pearson r	0.02586
95% confidence interval	-0.2804 to 0.3273
P value (two-tailed)	0.8709
P value summary	ns
Is the correlation significant? (alpha=0.05)	No
R squared	0.0006685

Pre-Bleed Aβ₄₂

B

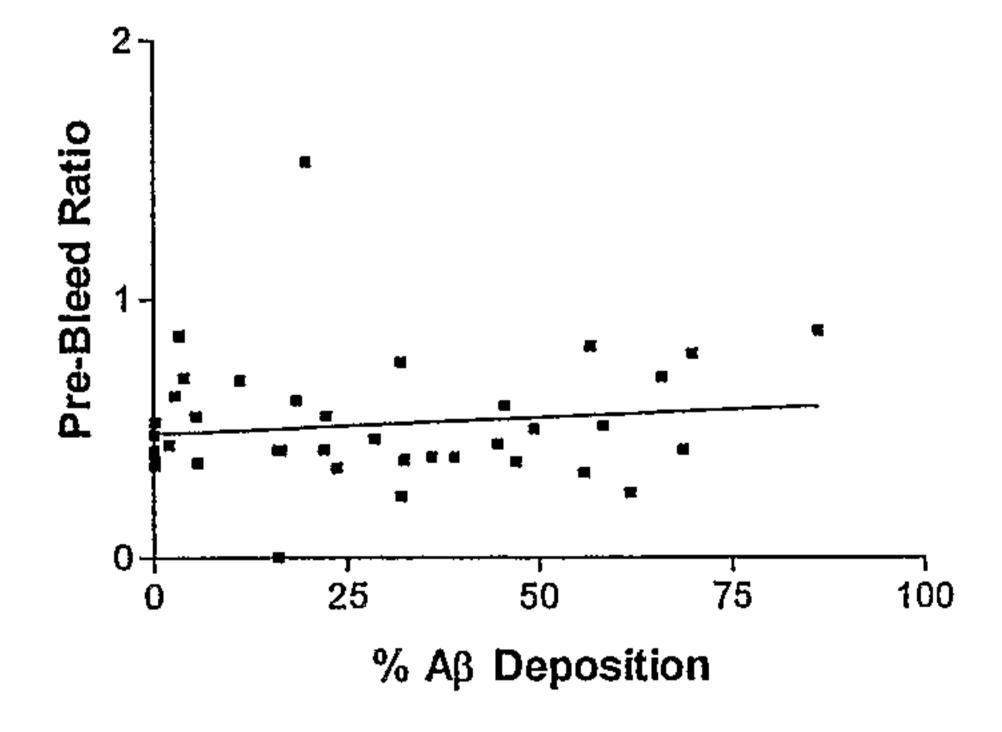
A



Parameter	PB 42
Number of XY Pairs	47
Pearson r	-0.07387
95% confidence interval	-0.3536 to 0.2180
P value (two-tailed)	0.6217
P value summary	ns
Is the correlation significant? (alpha=0.05)	No
R squared	0.005456

 \mathbf{C}

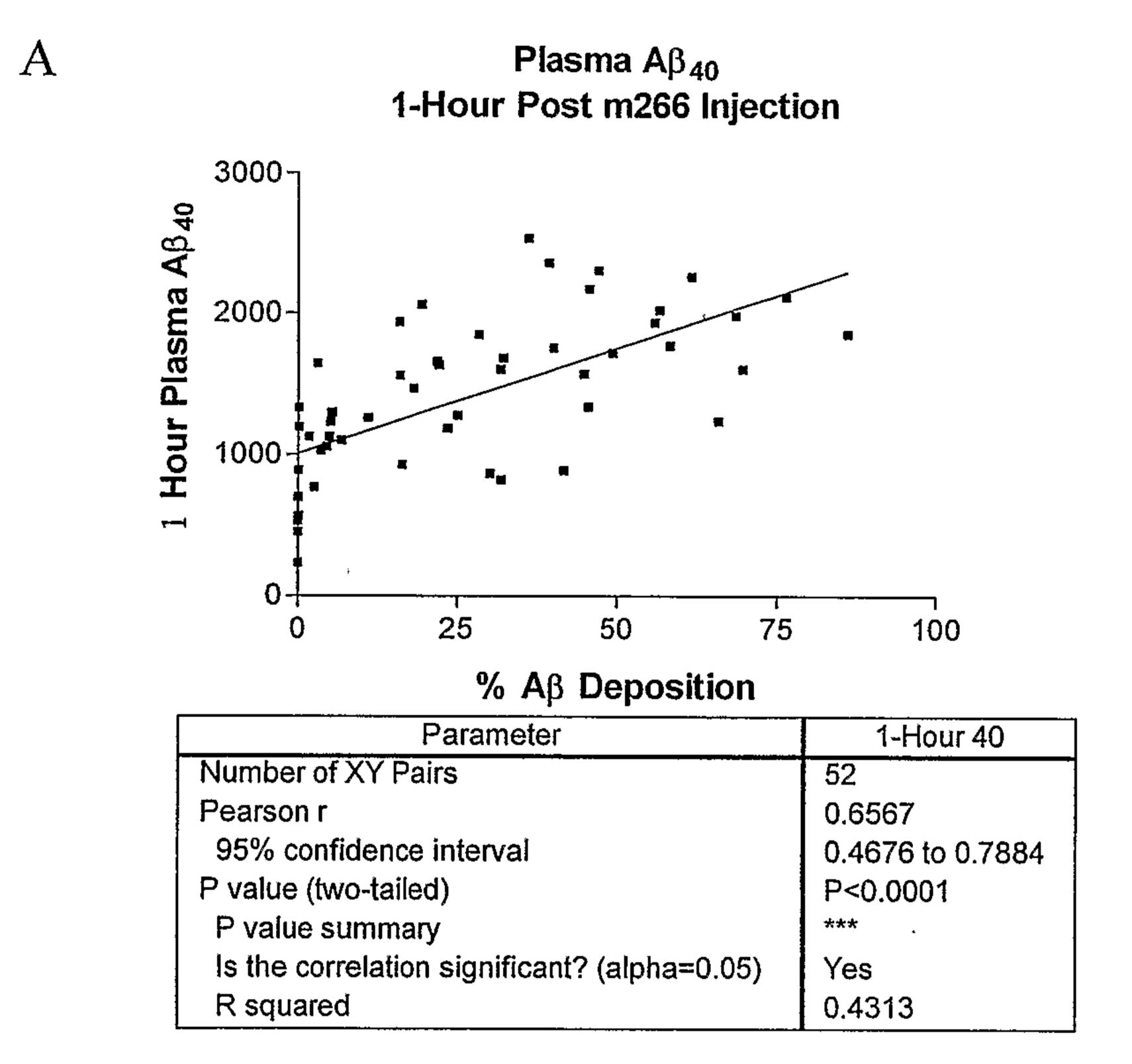
Pre-Bleed Ratio



<u> </u>		4
H1	gure	

Parameter	PB ratio
Number of XY Pairs	40
Pearson r	0.1213
95% confidence interval	-0.1978 to 0.4171
P value (two-tailed)	0.4560
P value summary	ns
Is the correlation significant? (alpha=0.05)	No
R squared	0.01471

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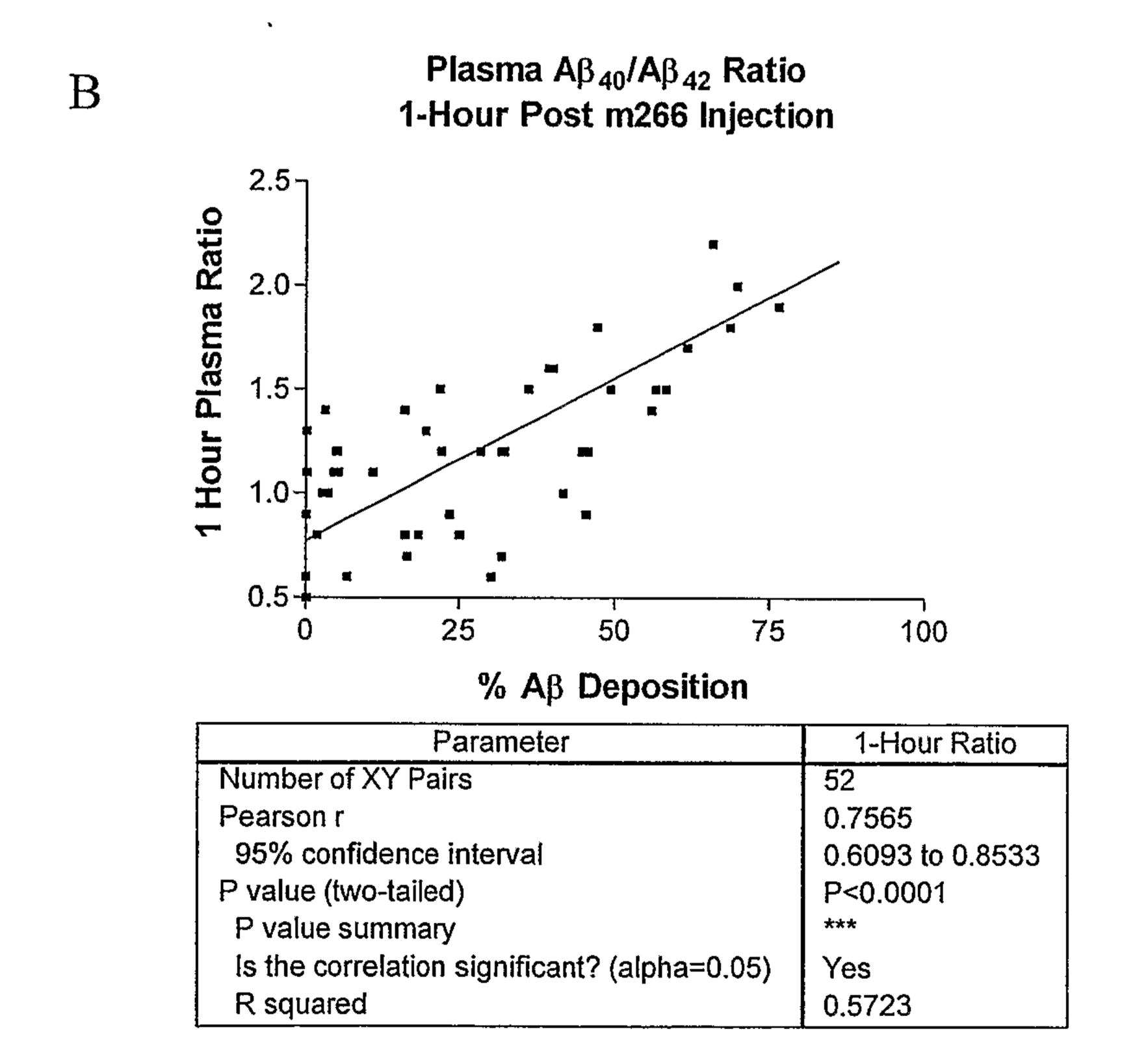


Figure 2

Plasma Aβ₄₀
24-Hours Post m266 Injection

20000

20000

25 50 75 100

% Aβ Deposition

Parameter	24-Hour 40
Number of XY Pairs	52
Pearson r	0.6628
95% confidence interval	0.4759 to 0.7924
P value (two-tailed)	P<0.0001
P value summary	***
Is the correlation significant? (alpha=0.05)	Yes
R squared	0.4393

Plasma Aβ₄₂ \mathbf{B} 24-Hours Post m266 Injection 125007 24 Hour Plasma Aβ₄₂ 10000-7500-5000 2500-75 50 100 % Aβ Deposition 24-Hour 42 Parameter 52 Number of XY Pairs 0.4039 Pearson r 95% confidence interval 0.1471 to 0.6096 P value (two-tailed) 0.0030 ** P value summary Is the correlation significant? (alpha=0.05) Yes

0.1631

R squared

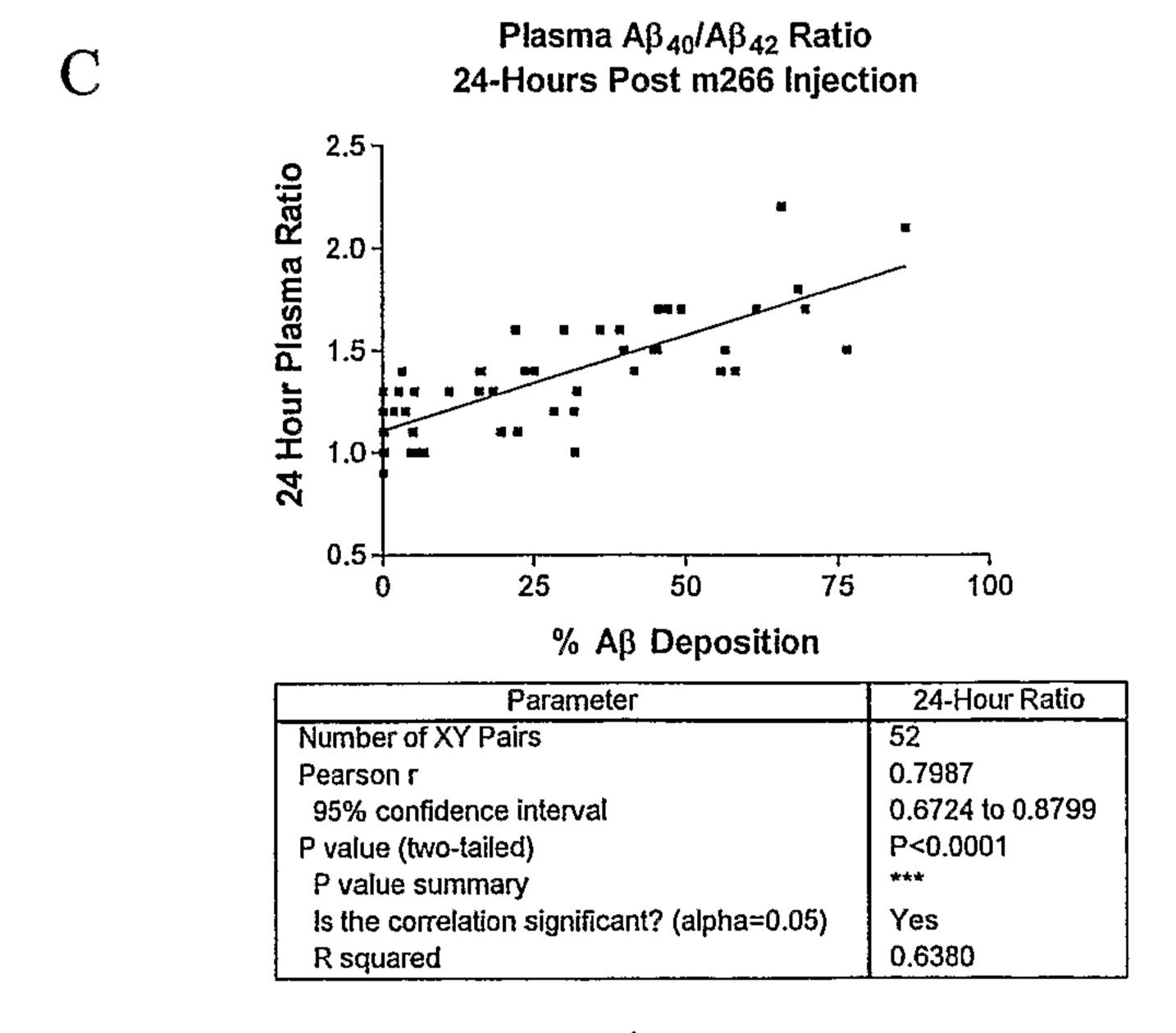
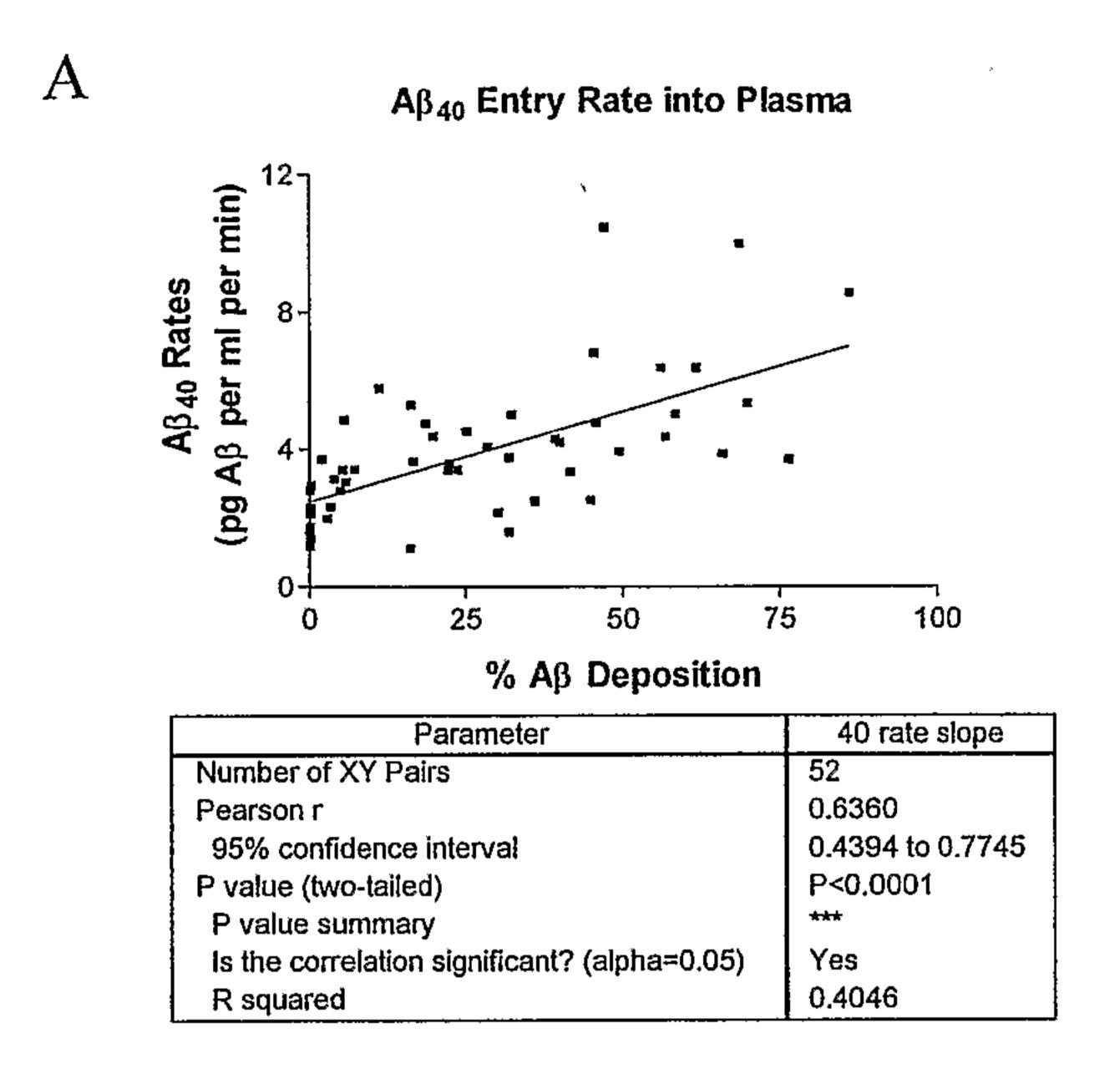
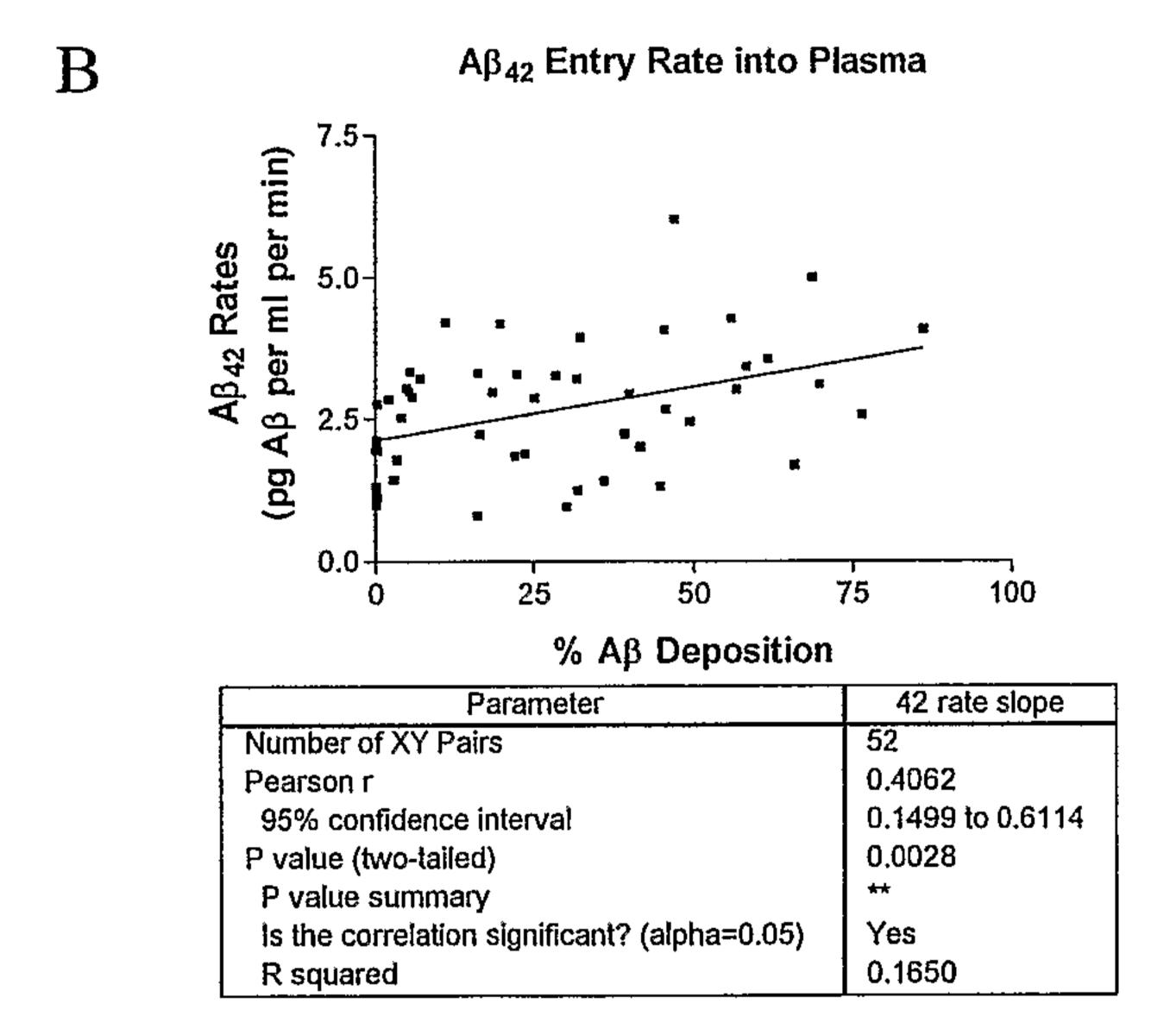


Figure 3

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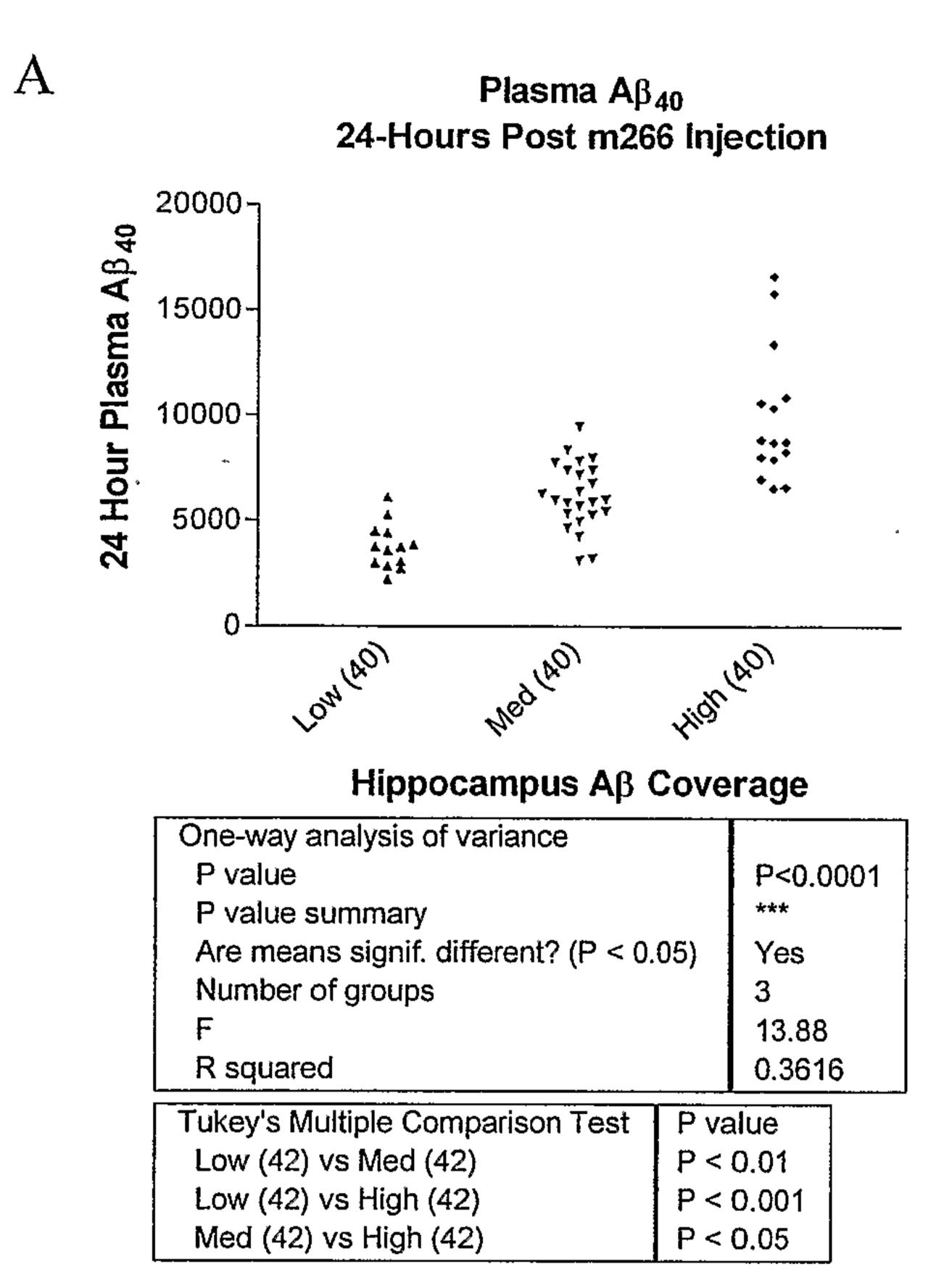




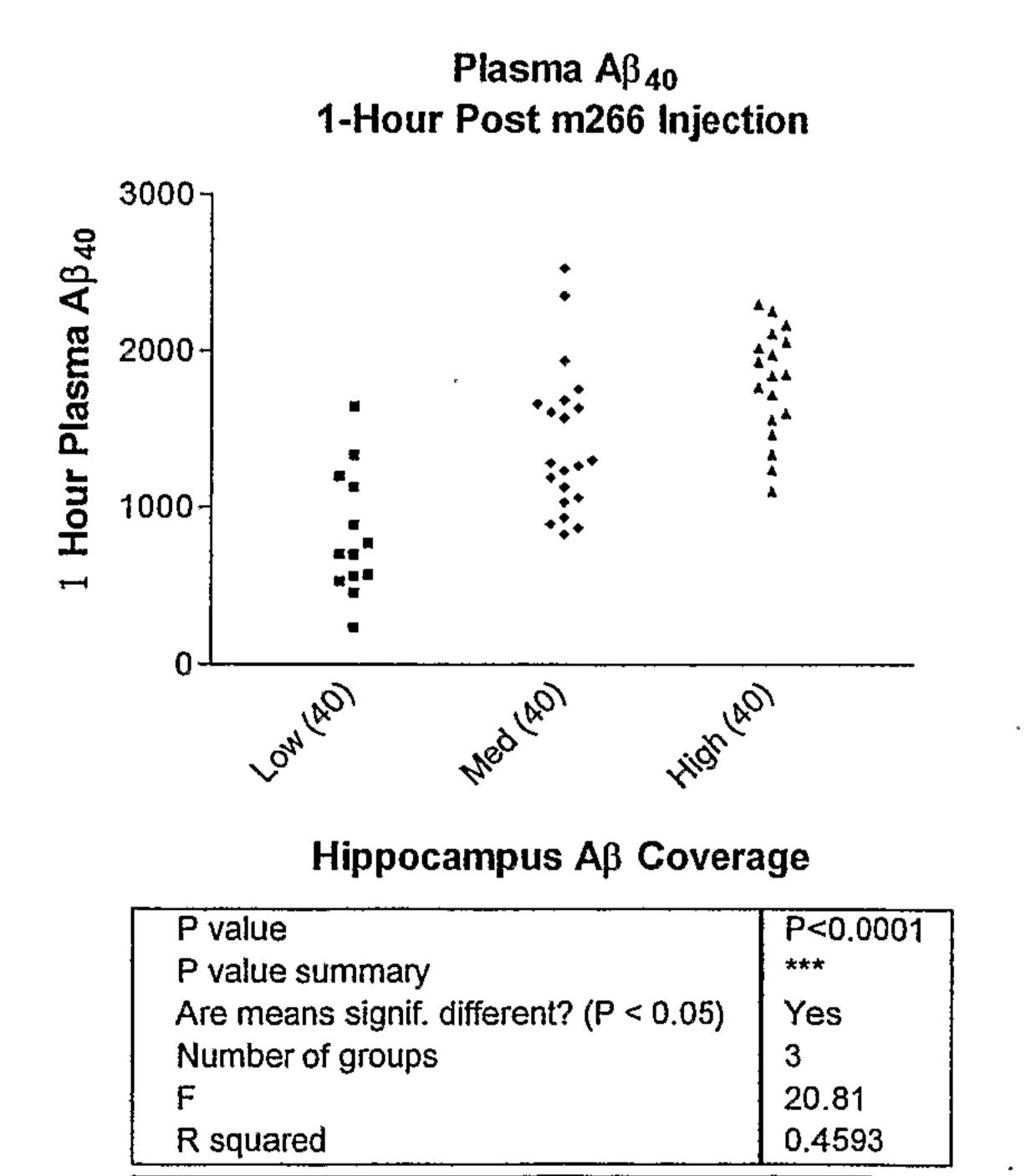
Ratio of the $A\beta_{40}/A\beta_{42}$ Entry Rate into Plasma Ratio Rate 75 100 50 % Aß Deposition Ratio Rate Parameter 52 Number of XY Pairs 0.6551 Pearson r 0.4653 to 0.7873 95% confidence interval P<0.0001 P value (two-tailed) *** P value summary Is the correlation significant? (alpha=0.05) Yes 0.4291 R squared

Figure 4

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R



Tukey's Multiple Comparison Test

Low (40) vs Med (40)

Low (40) vs High (40)

Med (40) vs High (40)

Figure 5

P value

P < 0.001

P < 0.001

P < 0.05

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Plasma	5 1	Aß Correlation's with Alzheimer-Like Pathology in Hippocampus	ith Alzhein	ner-Like P	thology in	Hippocam	bus	
	Plasma	Aβ correlation with Aβ load and fibrillar amyloid Pre-Bleed 5-Min 1-Hour 3-Hour 6-Ho	ion with A 5-Min	β load and 1-Hour	fibrillar an 3-Hour	myloid 6-Hour	24-Hour	AUC
Flasma Ab4υ: Aβ Load:	Pearson r P value	-0.0158 0.9209	0.5527	0.5904	0.4310	0.5533	0.5932	0.7056
Amyloid Load:	Pearson r P value	0.1535	0.7420	0.6257	0.7053	0.6684	0.7432	0.7624
Plasma Aβ42: Aβ Load:	Pearson r P value	-0.0614	0.2223	0.9798	0.1309	0.4551	0.3391	0.5322
Amyloid Load:	Pearson r P value	0.0443	0.0005	0.2321	0.3996	0.4476	0.6062	0.6214
<u>Aβ40/42 Ratio:</u> Aβ Load:	Pearson r P value	0.0369	0.5223	0.6888	0.4215 0.0019	0.1754	0.7190	0.6138
Amyloid Load:	Pearson r P value	0.1293	0.4825	0.5047	0.4364	0.2843	0.6029	0.5510