



Office de la Propriété
Intellectuelle
du Canada

Un organisme
d'Industrie Canada

Canadian
Intellectual Property
Office

An agency of
Industry Canada

CA 2101648 C 2003/09/09

(11)(21) **2 101 648**

(12) **BREVET CANADIEN
CANADIAN PATENT**

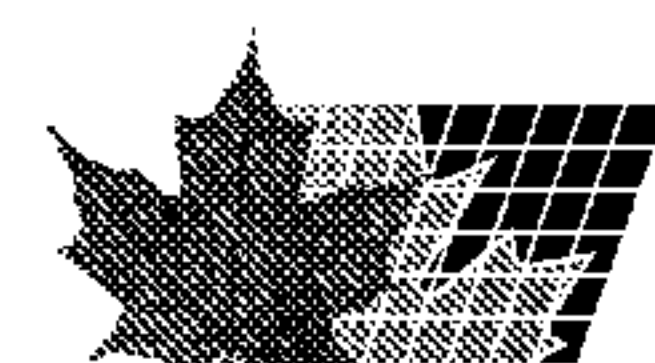
(13) **C**

(86) Date de dépôt PCT/PCT Filing Date: 1992/03/12 (87) Date publication PCT/PCT Publication Date: 1992/10/01 (45) Date de délivrance/Issue Date: 2003/09/09 (85) Entrée phase nationale/National Entry: 1993/07/29 (86) N° demande PCT/PCT Application No.: US 1992/001796 (87) N° publication PCT/PCT Publication No.: 1992/016232 (30) Priorité/Priority: 1991/03/12 (667,170) US	(51) Cl.Int. ⁶ /Int.Cl. ⁶ C07K 14/00, A61K 39/39, A61K 39/385 (72) Inventeurs/Inventors: SCHNEERSON, RACHEL, US; ROBBINS, JOHN B., US; SARVAMANGALA, DEVI J. N., US (73) Propriétaire/Owner: UNITED STATES OF AMERICA AS REPRESENTED BY THE SECRETARY, DEPARTMENT OF HEALTH AND HUMAN SERVICES, US (74) Agent: SHAPIRO COHEN
--	---

(54) Titre : CONJUGUES POLYSACCHARIDE-PROTEINE
(54) Title: POLYSACCHARIDE-PROTEIN CONJUGATES

(57) **Abrégé/Abstract:**

The present Invention relates to a polysaccharide-protein conjugate. The invention also relates to a method of using said conjugate to prevent systemic infections. The invention further relates to a pharmaceutical composition. The invention also relates to a method of producing a polysaccharide-protein conjugate.





INTERNATIONAL APPLICATION PUBLISHED UNDER THE PATENT COOPERATION TREATY (PCT)

(51) International Patent Classification ⁵ : A61K 39/385, 39/095, 39/102 A61K 39/108, 39/116, C07K 17/10 C07H 13/02	A1	(11) International Publication Number: WO 92/16232 (43) International Publication Date: 1 October 1992 (01.10.92)
2101848		
(21) International Application Number: PCT/US92/01796 (22) International Filing Date: 12 March 1992 (12.03.92) (30) Priority data: 667,170 12 March 1991 (12.03.91) US (71) Applicant: THE UNITED STATES OF AMERICA, as represented by THE SECRETARY, U.S. DEPARTMENT OF COMMERCE [US/US]; 5285 Port Royal Road, Springfield, VA 22161 (US). (72) Inventors: SCHNEERSON, Rachel ; 10601 Weymouth Street, Bethesda, MD 20814 (US). ROBBINS, John, B. ; 3901 Rosemary Street, Chevy Chase, MD 20815 (US). SARVAMANGALA, Devi, J., N. ; 6224 Copper Sky Court, Columbia, MD 21405 (US).	(74) Agents: HOLMAN, John, Clarke et al.; Fleit, Jacobson, Cohn, Price, Holman & Stern, The Jenifer Building, 400 Seventh Street, N.W., Washington, DC 20004 (US). (81) Designated States: AT (European patent), AU, BE (European patent), CA, CH (European patent), DE (European patent), DK (European patent), ES (European patent), FR (European patent), GB (European patent), GR (European patent), IT (European patent), JP, LU (European patent), MC (European patent), NL (European patent), SE (European patent). Published <i>With international search report.</i>	
(54) Title: POLYSACCHARIDE-PROTEIN CONJUGATES		
(57) Abstract		
The present invention relates to a polysaccharide-protein conjugate. The invention also relates to a method of using said conjugate to prevent systemic infections. The invention further relates to a pharmaceutical composition. The invention also relates to a method of producing a polysaccharide-protein conjugate.		

2101648

POLYSACCHARIDE-PROTEIN CONJUGATESBACKGROUND OF THE INVENTIONField of the Invention

The present invention relates, in general, to polysaccharide-protein conjugates and vaccines. In particular the present invention relates to polysaccharide-protein conjugates that elicit serum IgG and IgM antibodies to poly $\alpha(2\rightarrow8)$ NeuNAc, or to both poly $\alpha(2\rightarrow8)$ NeuNAc and poly $\alpha(2\rightarrow9)$ NeuNAc, or to poly $\alpha(2\rightarrow8), \alpha(2\rightarrow9)$ NeuNAc.

Background Information

Neisseriae meningitidis are a major cause of systemic infections, especially meningitis, in humans. Capsular polysaccharide (CP) vaccines are licensed for meningococcal groups A, C, Y, and W135. Diseases caused by group B meningococci continue to occur in endemic and epidemic forms and remain an important health problem (Gotschlich, E.C. (1984) in Bacterial Vaccines. Ed. Germanier (Academic Press, NY) pp. 237-255; Peltola, H. (1983) Rev. Infect. Dis. 5, 71-91; Poolman, J.T. et al. (1986) Lancet, ii, 555-557). Escherichia coli (E. Coli) K1 is a major cause of neonatal meningitis, upper urinary tract infections and systemic infections in hospitalized patients and in domesticated and laboratory animals (Robbins, J.B. et al. (1974) N. Eng. J. Med. 290, 1216-1220; Kaijser, B. et al. (1977) Lancet i, 663-664; Cross, A.S. et al. (1984) J. Infect. Dis. 149, 184-193; Orskov, I., & Orskov, F. (1985) J. Hyg. Camb. 95, 551-575). Despite antibiotic treatment and supportive care, meningitis caused by these two pathogens continues to exert a high morbidity, including permanent CNS injury, and mortality (Peltola, H. (1983) Rev. Infect. Dis. 5, 71-91; Schneerson, R. (1988) in Understanding Mental Retardation, ed, Kavanagh, J.F. (Paul Brookes Publishing

2101648

2

Co. Baltimore), pp. 237-249; Brandtzaeg, P. et al. (1989) J. Infect. Dis. 159, 195-204; McCracken, G.H., Jr. et al. (1974) Lancet, ii, 246-250).

The CP of Group B meningococci and of E. coli K1 are
5 identical (poly $\alpha(2\rightarrow8)$ NeuNAc) and serve as essential
virulence factors and protective antigens for both
pathogens (Grados, O., & Ewing, W.H. (1970) J. Infect.
Dis. 122, 100-103; Kasper, D.L. et al. (1973) J. Immunol.
110, 262-268; Bhattacharjee, A.K. et al. (1975) J. Biol.
10 Chem. 250, 1926-1932; Robbins, J.B. et al. (1974) N. Eng.
J. Med. 290, 1216-1220). Poly $\alpha(2\rightarrow8)$ NeuNAc is also a
surface antigen of Moraxella nonliquefaciens and
Pasteurella haemolytica, serotype A-2 (Bøvre, K. et al.
(1983) NIHP Annals. 6, 65-73; Devi, S.J.N. et al. (1991)
15 Infect. Immun. 59, 732-736; Adlam, C. et al. (1987) FEMS
Microbiol. Lett. 42, 23-25). The latter is the major
cause of outbreaks of pasteurellosis in young lambs which
suggests that poly $\alpha(2\rightarrow8)$ NeuNAc may serve as a virulence
factor for yet another bacterial species.

20 Attempts to induce protective immunity to group B
meningococci and E. coli K1 have been thwarted because
poly $\alpha(2\rightarrow8)$ NeuNAc, alone or complexed to outer membrane
proteins, induced low and transient levels of IgM
antibodies (Kasper, D.L. et al. (1973) J. Immunol. 110,
25 262-268; Wyle, F.A. et al. (1972) J. Infect. Dis. 126,
514-522; Zollinger, W.D. et al. (1979) J. Clin. Invest.
63, 836-842; Moreno, C. et al. (1985) Infect. Immun. 47,
527-533; Frasch, C.E. et al. (1988) J. Infect. Dis. 158,
710-718; Lifely, M.R. et al. (1991) Vaccine 9, 60-66).
30 Covalent attachment of periodate-treated (Jennings, H. &
Lugowshi, C. (1981) J. Immunol. 127, 1011-1018) or acid-
hydrolyzed poly $\alpha(2\rightarrow8)$ NeuNAc (Porro, M. et al. (1983)
Med. Trop. 43, 129-132) to a protein also failed to

2101648

3

elicit antibodies to this antigen. Further, this CP has been considered as a "self antigen" because $\alpha(2\rightarrow8)$ NeuNAc is found as monomers or dimers on glycoproteins and gangliosides in adults and up to ≈ 11 residues in fetal
5 tissues including N-CAMs (Finne, J. et al. (1983) Lancet, ii, 355-357; Finne, J. et al. (1987) J. Immunol. 138, 4402-4407; Soderstrom, T. et al. (1984) N. Eng. J. Med. 310, 726-727). Accordingly, investigators have studied other components, such as LPS, outer membrane
10 proteins and iron-binding proteins, or chemically modified poly $\alpha(2\rightarrow8)$ NeuNAc, as potential vaccines (Zollinger, W.D. et al. (1979) J. Clin. Invest. 63, 836-842; Moreno, C. et al. (1985) Infect. Immun. 47, 527-533; Frasch, C.E. et al. (1988) J. Infect. Dis. 158, 710-718;
15 Jennings, H.J. et al. (1984) Infect. Immun. 43, 407-412; Jennings, H.J. et al. (1986) J. Immunol. 137, 1708-1713; Frasch, C.E. (1989) Clin. Microbiol. Rev. 2(Suppl), S134-S138).

Most newborns and adults have bactericidal
20 antibodies to the three major serogroups (A,B,C) of meningococci (Goldschneider, I. et al. (1969) J. Exp. Med. 129, 1307-1326); most of the bactericidal activity, including of group B meningococci, was removed by adsorption with the homologous CP (Frasch, C.E. et al.
25 (1988) J. Infect. Dis. 158, 710-718; Brandt, B.L. et al. (1972) J. Immunol. 108, 913-920; Kasper, D.L. et al. (1973) J. Infect Dis. 127, 378-387; Skevakis, L. et al. (1984) J. Infect. Dis. 149, 387-396). The peak incidence of disease caused by meningococci, including group B, is
30 when the maternally-derived antibodies have waned and the adult levels have not yet developed (Gotschlich, E.C. (1984) in Bacterial Vaccines. Ed. Germanier (Academic Press, NY) pp. 237-255; Goldschneider, I. et al. (1969)

2101648

4

- J. Exp. Med. 129, 1307-1326). Rises in poly $\alpha(2\rightarrow8)$ NeuNAc antibodies, including those of the IgG isotype, are detectable in patients convalescent from group B meningococcal meningitis (Wyle, F.A. et al. (1972) J. Infect. Dis. 126, 514-522; Zollinger, W.D. et al. (1979) J. Clin. Invest. 63, 836-842; Frasch, C.E. et al. (1988) J. Infect. Dis. 158, 710-718; Skevakis, L. et al. (1984) J. Infect. Dis. 149, 387-396; Craven, D.E. et al. (1982) Infect. Immun. 37, 132-137; Mandrell, R.E. & Zollinger, W.D. (1982) J. Immunol. 129, 2172-2178; Leinonen, M. & Frasch, C.E. (1982) Infect. Immun. 38, 1203-1207). Polyclonal and monoclonal (mAb) poly $\alpha(2\rightarrow8)$ NeuNAc antibodies were raised in animals by multiple intravenous injections of bacteria (Robbins, J.B. et al. (1974) N. Eng. J. Med. 290, 1216-1220; Moreno, C. et al. (1985) Infect. Immun. 47, 527-533; Mandrell, R.E. & Zollinger, W.D. (1982) J. Immunol. 129, 2172-2178; Allen, P.Z. et al. (1982) J. Clin. Microbiol. 15, 324-329; Craven, D.E. et al (1979) J. Clin. Microbiol. 10, 302-307; Frosch, M. et al. (1985) Proc. Natl. Acad. Sci. (USA) 82, 1194-1198). Monoclonal antibodies to this antigen were identified in a healthy 81 year old male and from hybridoma cultures (Kabat, E.A. et al. (1986) J. Exp. Med. 164, 642-654; Kabat, E.A. et al. (1988) J. Exp. Med. 168, 699-711; Raff, H.V. et al. (1988) J. Infect. Dis. 157, 188-126). These antibodies exert biologic activities which have been correlated with protective immunity; 1) complement-dependent bacteriolysis on Group B meningococci (Gotschlich, E.C. (1984) in Bacterial Vaccines. Ed. Germanier (Academic Press, NY) pp. 237-255; Goldschneider, I. et al. (1969) J. Exp. Med. 129, 1307-1326); 2) protection against lethal infection of rodents by E. coli K1 (Robbins, J.B. et al. (1974) N.

2101648

5

Eng. J. Med. 290, 1216-1220; Glode, M.P. et al. (1977) Infect. Immun. 16, 75-80; Kim, K.S. et al. (1985) Infect. Immun. 50, 734-737).

There are two other bacterial NeuNAc polymers: 1) group C N. meningitidis CP composed of poly $\alpha(2\rightarrow9)$ NeuNAc; most strains are variably O-acetylated at C7 or C8 (Bhattacharjee, A.K. et al. (1975) J. Biol. Chem. 250, 1926-1932.) Although differing from poly $\alpha(2\rightarrow8)$ NeuNAc only by linkage, poly $\alpha(2\rightarrow9)$ NeuNAc is immunogenic and is a licensed vaccine against group C meningococci (World Health Organization Expert Committee on Biological Standardization.) (1977) Technical Report Series, 610. WHO, Geneva, Switzerland); 2) E. coli K92 CP (Figure 1) with the disaccharide repeat unit of alternating $\alpha(2\rightarrow8)$, $\alpha(2\rightarrow9)$ NeuNAc (The structure of this polysaccharide can be written as 9)-NeuNAc- α -($2\rightarrow8$)-NeuNAc- α -($2\rightarrow$.) (Robbins, J.B. et al. (1972) Infect. Immun. 6, 651-656; Glode, M.P. et al. J. Infect. Dis 135, 94-102; Egan, W. et al. (1977) Biochem. (USA) 16, 3687-3692; Glode, M.P. et al. (1979) J. Infect. Dis. 139, 52-59). Both group B and group C meningococcal antisera precipitate with E. coli K92 CP (Glode, M.P. et al. (1977) J. Infect. Dis. 135, 94-102; Egan, W. et al. (1977) Biochem. (USA) 16, 3687-3692; Glode, M.P. et al. (1979) J. Infect. Dis. 139, 52-59). Multiple i.v. injections of killed E. coli K92 bacteria induced precipitating antibodies to poly $\alpha(2\rightarrow9)$ NeuNAc and to poly $\alpha(2\rightarrow8)$, $\alpha(2\rightarrow9)$ NeuNAc but not to poly $\alpha(2\rightarrow8)$ NeuNAc (Glode, M. P. et al. (1977) J. Infect. Dis. 135-94-102). Injection of E. coli K92 CP induced poly $\alpha(2\rightarrow9)$ NeuNAc antibodies in adult volunteers; antibodies to poly $\alpha(2\rightarrow8)$ NeuNAc were not measured (Glode, M.P. et al. (1979) J. Infect. Dis. 139, 52-59).

It is a general object of this invention to provide a polysaccharide-protein conjugate and a vaccine.

5 In accordance with a first aspect of the invention, an *E. coli* K92 capsular polysaccharide and carrier protein conjugate wherein the K92 capsular polysaccharide comprises a linear copolymer having the following structural formula as a repeating unit: 9)-NeuNAc- α (2 $\rightarrow$ 8)NeuNAc- α (2 $\rightarrow$), or derivatives thereof, and
10 further wherein the conjugate elicits the production of antibodies reactive with non-K92 bacterial microorganisms having poly α (2 $\rightarrow$ 8) NeuNAc capsular polysaccharide surface antigens, antibodies reactive with non-K92 bacterial microorganisms having poly α (2 $\rightarrow$ 9) NeuNAc capsular polysaccharide surface antigens, and
15 antibodies reactive with the carrier protein.

It is a specific object of this invention to provide a polysaccharide-protein conjugate capable of eliciting serum IgG and IgM antibodies to poly α (2 $\rightarrow$ 8) NeuNAc, or to both poly α (2 $\rightarrow$ 8), α (2 $\rightarrow$ 9) NeuNAc.

20 It is a further object of this invention to provide a pharmaceutical composition suitable for use in preventing systemic infections.

It is another object of this invention to provide a method of preventing systemic infections.

25 It is a further object of this invention to provide a method of preventing systemic infections caused by Groups A, B, and C *Neisseria meningitidis*.

It is another object of this invention to provide a method of producing a polysaccharide-protein conjugate.

30 Further objects and advantages of the present invention will be clear from the description that follows.

In one embodiment, the present invention relates to a polysaccharide-protein conjugate comprising a polysaccharide and

6a

a carrier protein wherein the conjugate is capable of eliciting serum IgG and IgM antibodies to poly $\alpha(2\rightarrow8)$ NeuNAc, or to both
5 poly $\alpha(2\rightarrow8)$ NeuNAc and poly $\alpha(2\rightarrow9)$ NeuNAc or to poly $\alpha(2\rightarrow9)$ NeuNAc in a mammal or bird.

In another embodiment, the present invention relates to a pharmaceutical composition and a vaccine comprising a polysaccharide-protein conjugate in an amount

10

sufficient to prevent systemic infections, and a pharmaceutically acceptable diluent, carrier, or excipient.

5 In a further embodiment, the present invention relates to a method of preventing systemic infections in an animal comprising administering to the animal an amount of a polysaccharide-protein conjugate sufficient to effect the prevention.

10 In another embodiment, the present invention relates to a method of preventing systemic infections caused by Groups A, B, and C Neisseria meningitidis in an animal comprising administering to the animal the above-described polysaccharide-protein conjugate and a Group A meningococcal polysaccharide-protein conjugate under
15 conditions such that the infections are prevented.

In yet another embodiment, the present invention relates to a method of producing a polysaccharide-protein conjugate comprising derivatizing a polysaccharide and conjugating the derivatized polysaccharide to a protein.

20

BRIEF DESCRIPTION OF THE DRAWINGS

Figure 1. Structure of the Escherichia coli K92 capsular polysaccharide: poly $\alpha(2\rightarrow8), \alpha(2\rightarrow9)$ NeuNAc (Egan, W., et al. (1977) Biochem. (USA) 13, 3687-3692).

25 Figure 2. Gel filtration of K92-TT (tetanus toxoid) conjugate. 1.0 ml of K92-TT, was passed through a column of 4B-CL* Sepharose (2.5x90cm) in 0.2M NaCl. The fraction size was 2.0 ml and the eluent was monitored by assay of NeuNAc (Yao, K. & Ubuka, T. (1987) Acta Med. Okayama. 41, 237-241) and by absorbance at 280 nm (World Health
30 Organization Expert Committee on Biological Standardization. (1977) Technical Report Series, 610. WHO, Geneva, Switzerland; Schneerson, R. et al. (1980) J. Exp. Med. 152, 361-376).

*TM

2101648

8

Figure 3. Double immunodiffusion with K92 conjugate: Center well - K92-TT, 0.1 mg/ml, Well A - rabbit antiserum to Escherichia coli K92 cells, Well B - mouse tetanus toxin antiserum.

5

DETAILED DESCRIPTION OF THE INVENTION

The present invention relates to a polysaccharide-protein conjugate and a vaccine. This conjugate includes a polysaccharide and a carrier protein and is capable of eliciting serum IgG and IgM antibodies to poly $\alpha(2\rightarrow8)$ NeuNAc, or to both poly $\alpha(2\rightarrow8)$ NeuNAc and poly $\alpha(2\rightarrow9)$ NeuNAc, or to poly $\alpha(2\rightarrow8), \alpha(2\rightarrow9)$ NeuNAc in a mammal or bird. The carrier is associated with the polysaccharide in such a way as to increase the immunogenicity of the polysaccharide and to confer upon it the properties of both eliciting a booster response and IgG antibodies. These immunologic properties should be elicited by the protein-polysaccharide vaccine alone. Addition of adjuvants, such as aluminum salts, bacterial murein structures in saline or in emulsions, may be helpful in eliciting or in enhancing the production of poly $\alpha(2\rightarrow8)$ NeuNAc and poly $\alpha(2\rightarrow9)$ NeuNAc Antibodies by the E. coli K92 and the poly $\alpha(2\rightarrow8)$ NeuNAc conjugate vaccines. In one preferred embodiment, the carrier protein is covalently bound to the polysaccharide. The covalent bond should preserve the immunologic properties of the native polysaccharide and native protein. Some proteins that could serve as effective carriers for covalently bound polysaccharide-protein conjugates are albumins, pharmacologically active proteins that have been detoxified, by chemical or genetic mechanisms, including diphtheria, tetanus, pertussis, Pseudomonas aeruginosa exotoxin A and Staphylococcus aureus toxins, synthetic polypeptides, bacterial outer membrane proteins and viral

2101648

9

proteins (Schneerson, R. et al. (1980) In: New Developments with Human and Veterinary Vaccines. Eds. Mizrahi et al., New York, Alan R. Liss; Schneerson, R. et al. (1987) In: Towards Better Carbohydrate Vaccines. Eds., Bell, R. & Torrigiani, G., World Health Organization, John Wiley & Sons, Ltd.). Carriers for the K92 or the poly $\alpha(2\rightarrow8)$ NeuNAc polysaccharides should be proteins that are immunogenic and elicit booster responses by themselves. Carriers should have the necessary groups that allow the synthesis of conjugates with the E. coli K92 or poly $\alpha(2\rightarrow8)$ NeuNAc polysaccharides. Carriers should confer the properties of increased immunogenicity and booster responses to the E. coli K92 and poly $\alpha(2\rightarrow8)$ NeuNAc including the formation of both IgM and IgG antibodies to these polysaccharides (Schneerson et al (1987) In: Towards Better Carbohydrate Vaccines. Eds., Bell, R. Torrigiani, G., World Health Organization, John Wiley & Sons, Ltd.). In another preferred embodiment, the polysaccharide and protein are covalently bound by a linker. An effective linker has been found to be adipic acid dihydrazide. Other linkers could be diaminohexane, amino epsilon caproic acid, N-hydroxysuccinimide acid anhydride based heterobifunctional linkers as illustrated by N-succinimidyl 3-(2-pyridyldithio) propionate (SPDP). Other cross-linking compounds can be used to synthesize the conjugate, provided they are not toxic and result in a conjugate that elicits poly $\alpha(2\rightarrow8)$ NeuNAc and poly $\alpha(2\rightarrow9)$ neuNAc antibodies (Robbins, J.B. Schneerson, R. (1990) J. Infect. Dis. 161:821-832). A linker is a molecule which may be used to covalently bind the polysaccharide to the protein. A chemical reaction with each end of the linker changes the structure of the

2101648

10

linker. For example, after adipic acid dihydrazide chemically combines with the polysaccharide and the protein to form a conjugate, the polysaccharide and protein are bound by an adipic acid dihydrazido linkage.

5 In another preferred embodiment, the polysaccharide comprises poly $\alpha(2\rightarrow8)$ NeuNAc or derivatives thereof. In a further preferred embodiment, the polysaccharide comprises a heteropolymer of $\alpha(2\rightarrow8), \alpha(2\rightarrow9)$ NeuNAc or derivatives thereof. In yet another preferred
10 embodiment, the carrier protein is tetanus toxoid. Additional carrier proteins that may be used include albumins (Schneerson, R., et al. (1980) J. Exp. Med. 152, 361-376), diphtheria toxoid (Schneerson, R., et al. (1980) J. Exp. Med. 152, 361-376), and Pseudomonas
15 aeruginosa exotoxin A and mutants of this protein (Fattom A., et al. (1990) Infect. Immun. 58, 2367-2374).

In another embodiment, the present invention relates to a pharmaceutical composition comprising the above described polysaccharide-protein conjugate in an amount
20 sufficient to prevent systemic infections including meningitis, caused by group B or group C Neisseria meningitidis, Escherichia coli K1, Moraxella nonliquefaciens, Pasteurella haemolytica, or other microorganisms containing poly $\alpha(2\rightarrow8)$ NeuNAc, poly $\alpha(2\rightarrow9)$
25 NeuNAc, or poly $\alpha(2\rightarrow8), \alpha(2\rightarrow9)$ NeuNAc, surface antigens and a pharmaceutically acceptable diluent, carrier, or excipient. The pharmaceutical composition of the invention includes polysaccharide conjugate in a quantity selected depending on the route of administration.
30 Although subcutaneous or intramuscular routes of administration are preferred, the above described polysaccharide-protein conjugate could also be administered by an intraperitoneal or intravenous route.

One skilled in the art will appreciate that the amounts to be administered for any particular treatment protocol can be readily
5 determined. Suitable amounts might be expected to fall within the range of 5.0 micrograms per dose to 100.0 micrograms per dose of either the polysaccharide or the protein. (The ratios of polysaccharide and protein that comprise the conjugate may differ. The dosages mentioned for each component are within the
10 expected range.)

In another embodiment, the present invention relates to a method of using the above described polysaccharide-protein conjugate to prevent the above described systemic infections. One skilled in the art will appreciate that the amounts to be
15 administered for any particular treatment protocol can readily be determined.

In yet another embodiment, the present invention relates to a method of preventing systemic infections caused by Groups A, B, and C Neisseria meningitidis in an animal comprising
20 administering to the animal the above-described polysaccharide-protein conjugate and a Group A meningococcal polysaccharide-protein conjugate under conditions such that the infections are prevented. The compositions also serve as vaccines.

In an embodiment of the invention an antisera is produced
25 against an *E. coli* K92 capsular polysaccharide and carrier protein conjugate, wherein the K92 capsular polysaccharide comprises a linear copolymer having the following structural formula as a repeating unit: 9)-NeuNAc- α (2 $\rightarrow$ 8)NeuNAc- α (2 $\rightarrow$), and further wherein the antisera comprises (i) antibodies reactive
30 with non-K92 bacterial microorganisms having poly α (2 $\rightarrow$ 8) NeuNAc capsular polysaccharide surface antigens, (ii) antibodies reactive with non-K92 bacterial microorganisms having poly α (2 $\rightarrow$ 9) NeuNAc capsular polysaccharide surface antigens, and (iii) antibodies reactive with the carrier protein.

11a

Preferably, bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens comprise *E. coli* K1 and Group B *N. meningitidis*, and the bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens comprise Group C *N. meningitides*.

In another embodiment, the present invention relates to a method of producing a polysaccharide-protein conjugate effective in eliciting serum IgG and IgM antibodies immunoreactive to poly $\alpha(2\rightarrow8)$ NeuNAc, or to both poly $\alpha(2\rightarrow8)$ NeuNAc and poly $\alpha(2\rightarrow9)$ NeuNAc, or to poly $\alpha(2\rightarrow8)$, $\alpha(2\rightarrow9)$ NeuNAc in a mammal or bird. The first step of the method comprises derivatizing the polysaccharide by using, for example, adipic acid dihydrazide in a carbodiimide reaction, or alternative agents/protocols. Adipic acid dihydrazide may be substituted in the carbodiimide

2101648

12

reaction with other dihydrazide compounds or diamino compounds (for example: diamino hexane). Other derivatives of the polysaccharides could be made in order to covalently bind them to proteins. These include the use of disulfide bonds linked by heterobifunctional reagents (Szu, S.C., et al. (1986) Infect. Immun. 54, 448-455; Szu, S.C., et al. (1987) J. Exp. Med. 166, 1510-1524).

After derivatizing the polysaccharide, the next step of the method involves conjugating the derivative to a protein. Preferably, the adipic acid hydrazide derivative of the polysaccharide is conjugated to the protein by mixing the derivative with the carrier protein at equal concentrations and adjusting the pH to a pH in the range between 6.1 and 7.0. The reactants are dissolved in 0.2M NaCl and the temperature is at 3-8°C. Then, 1-ethyl-3(3-dimethylaminopropyl) carbodiimide (EDAC) is added to a final concentration less than 0.3M. The original pH is maintained for 3 hours. Next, the reaction mixture is dialyzed against 0.2M NaCl at 3-8°C for 3 days with multiple changes of the outer fluid. This synthetic scheme of multipoint attachment does not grossly fragment the poly $\alpha(2\rightarrow8)$ NeuNAc or poly $\alpha(2\rightarrow8)$, $\alpha(2\rightarrow9)$ NeuNAc and may provide conformational stability to the polysaccharide.

The invention is described in further detail in the following non-limiting examples.

EXAMPLES

The following protocols and experimental details are referenced in the examples that follow:

Bacteria. E. coli 07:K1:H- strain C94, E. coli 016:K1H:H-, stable in the 0 acetyl negative form (OAc), E. coli 075:K1:H-, OAc⁺, strain LH, (Lars A. Hanson,

2101648

13

Goteborg, Sweden), E. coli 013:K92:H4, strain N67 have been described (Robbins, J.B. et al. (1972) Infect. Immuno. 6, 651-656). Group B meningococci, serotype 6, strain M990 and strain B11, and Group C meningococcus, strain C11, were provided by Carl E. Frasch, FDA, Bethesda, Maryland.

Polysaccharides and proteins. CP were purified from Group B meningococcus, strains B11 and M990, E. coli strains C94, LH, 016:K1:H- and N67 (World Health Organization Expert Committee on Biological Standardization. (1977) Technical Report Series, 610. WHO, Geneva, Switzerland). These CP contained <1.0% of protein and nucleic acid, 75 to 87% NeuNAc (Yao, K. & Ubuk, T. (1987) Acta Med. Okayama. 41, 237-241), <0.01% of LPS and had Kd values through 4B-CL Sepharose of ~0.5 (World Health Organization Expert Committee on Biological Standardization. (1977) Technical Report Series, 610. WHO, Geneva, Switzerland). The OAc contents were 1.62 μ M/mg for LH and 1.39 μ M/mg for the group C meningococcal CP (Bhattacharjee, A.K. et al. (1975) J. Biol. Chem. 250, 1926-1932; World Health Organization Expert Committee on Biological Standardization. (1977) Technical Report Series, 610. WHO, Geneva, Switzerland). The ^{13}C and proton NMR spectra of the poly $\alpha(2\rightarrow8)$ NeuNAc and K92 CP were identical to those reported for these two polymers (Bhattacharjee, A.K. et al. (1975) J. Biol. Chem. 250, 1926-1932; Egan, W. et al. (1977) Biochem. (USA) 16, 3687-3692). Group C meningococcal CP was obtained from Pat McVerry, Connaught Laboratories Inc., Swiftwater, PA, and tetanus toxoid (TT), lot GYA, and group A meningococcal CP from Dominique Schulz, Pasteur Merieux Serums and Vaccines, Lyon, France. Type III, group B streptococcus CP was purified in the laboratory

2101648

14

(Lagergard, T. et al. (1990) Infect. & Immun. 58, 687-694).

- Hyperimmune sera. Antisera, prepared by intravenous injections of killed cells of Group B meningococci, strain B11 (horse 46), Group C meningococci, strain C11 (burro 211) and rabbit E. coli K92 (Drs. Ida and Frits Orskov, Statens Serum Institut, Copenhagen, Denmark) have been described (Orskov, I., & Orskov, F. (1985) J. Hyg. Camb. 95, 551-575; Allen, P.Z. et al. (1982) J. Clin. Microbiol. 15, 324-329; Golde, M.P. et al (1977) J. Infect. Dis. 135, 94-102; Orskov F. et al (1979) J. Exp. Med. 149, 669-685). Mice were injected with formalin-killed cells and their sera harvested as described (Orskov, I., & Orskov, F. (1985) J. Hyg. Camb. 95, 551-575; Lagergard, T. et al. (1990) Infect & Immun. 58, 687-694). Antisera for standards were produced in NIH general purpose mice by i.p. injection of 5.0 μ g of either TT or K1-TT₁ in Freund's adjuvants (Lagergard, T. et al. (1990) Infect. & Immun. 58, 687-694).
- Serology. Double immunodiffusion was performed in 0.6% agarose. ELISA was performed using biotinylated CP (Sutton, A. et al (1985) J. Immunol. Meth. 82, 215-224). Murine sera were assayed for poly $\alpha(2\rightarrow8)$ NeuNAc and poly $\alpha(2\rightarrow9)$ NeuNAc and TT antibodies using alkaline-phosphatase-labeled goat anti-murine immunoglobulins (Kirkgaard & Perry Inc., Gaithersburg, MD) (Lagergard, T. et al. (1989) Infect. & Immun. 58, 687-694; Sutton A. et al (1985) J. Immunol. Meth. 82, 215-224). Murine IgM mAb to poly $\alpha(2\rightarrow8)$ NeuNAc (Wendell Zollinger, Walter Reed Army Institute of Research, Washington, D.C.) and murine IgM and IgG mAb to poly $\alpha(2\rightarrow9)$ NeuNAc (Kathryn Stein, FDA, Rockville, MD) were used as reference standards (Mandrell, R.E. & Zollinger, W.D. (1982) J. Immunol. 129,

2101648

15

2172-2178; Rubinstein, L.J. & Stein, K.E. (1988) J. Immunol. 141, 4357-4362). Human poly $\alpha(2\rightarrow8)$ NeuNAc antibodies were assayed as described (Claesson, B.O. et al. (1988) J. Pediatr. 112, 695-702). A human IgM mAb
5 (Elvin Kabat, Columbia University, NY) (Kabat, E.A. et al (1986) J. Exp. Med. 164, 642-654; Kabat E.A. et al. (1988) J. Exp. Med. 168, 669-711) and a high-tittered human sera (GH) were used as references for human poly $\alpha(2\rightarrow8)$ NeuNAc antibodies and the data are expressed as
10 $\mu\text{g/ml}$ for the IgM and as percent of the standard for IgG.

The effect of temperature upon IgG binding to poly $\mu(2\rightarrow8)$ NeuNAc and poly $\alpha(2\rightarrow9)$ NeuNAc was assayed with sera from mice injected with bacteria or three times with 10.0 μg of conjugates. The data are expressed as the
15 percent binding at 37°C compared to 22°C.

Synthesis of conjugates. It was confirmed that treatment at pH <6.0 or with 1-ethyl-3-(3-dimethylaminopropyl) carbodiimide (EDAC) at concentrations >0.3M, even at neutral pH, resulted in loss of antigenicity of poly
20 $\alpha(2\rightarrow8)$ NeuNAc (Lifely, M.R., Gilbert, A.S. & Moreno, C. (1981) Carb. Res. 94, 193-201). Accordingly, the CP (5.0 mg/ml in 0.2M NaCl) were derivatized with 0.5M adipic acid dihydrazide (ADH), 0.1M EDAC, pH 6.1 to 7.0 at room temperature for 3 to 4 hr. The pH was maintained in a pH
25 stat with 0.25N HCl. The reaction mixture was dialyzed against 0.2M NaCl at 3-8°C, for 2 days with 3 changes of the outer fluid and passed through 4B-CL Sepharose in this solvent. The CP-containing fractions were pooled, dialyzed against sterile pyrogen-free water and freeze-
30 dried. The content of adipic acid hydrazide (AH) was assayed by the TNBS reaction (Inman, J.K., & H.M. Dintzis. (1969) Biochem. (USA) 8, 4074-4080; Schneerson, R. et al. (1980) J. Exp. Med. 152, 361-376).

2101648

16

AH-CP and TT, at equal concentrations of 7.5 to 20 mg/ml in 0.2M NaCl, were adjusted to a pH between 6.1 and 7.0 with 0.1N HCl. Then, 0.1M EDAC was added and this pH maintained at 3-8°C for 3 h. The reaction mixture was
5 dialyzed against 0.2M NaCl at 3-8°C and then passed through 4B-CL Sepharose in the same solvent. The void volume fractions were pooled, assayed for NeuNAc and protein and stored in 0.01% thimerosal at 3-8°C.

Immunization of Mice. General purpose mice, 4 to 5 weeks
10 old, were injected s.c. with 2.5 µg of NeuNAc in 0.1 ml of saline, either as the CP alone or as the conjugate, 3 times 2 weeks apart (Schneerson, R. et al. (1980) J. Exp. Med. 152, 361-376). Ten mice from each group were exsanguinated 7 days after each injection. None of the
15 mice injected with saline (controls) had antibodies to the CP or to TT (data not shown).

Adsorption. ELISA was used to determine the specificity of IgG poly α(2→8) NeuNAc and poly α(2→9) NeuNAc antibodies. Dilutions of sera that yielded an A in the
20 upper linear part of the curve (1.0 to 1.4) were mixed with 100 µg of either poly α(2→8) NeuNAc, poly α(2→9) NeuNAc, or K92 CP and incubated at 22°C for 2 h and overnight at 3-8°C. Controls were the group A meningococcal and the type III group B streptococcal CP
25 (containing an α(2→8)- linked NeuNAc residue per repeat unit). Adsorption by the CP was calculated as the percent A compared to the unadsorbed sera.

Human sera. Paired maternal and cord sera were donated by James C. Parke Jr, Charlotte Memorial Hospital and
30 Medical Center, Charlotte, NC and Eyal Schiff and Justin Passwell, Sheba Medical Center, Israel.

Statistical Methods. Data analysis was performed using the Statistical Analysis System (SAS). The logarithms of

2101648

17

the concentrations were used for all statistical calculations. Antibody concentrations that were below the limit of sensitivity of the ELISA were assigned values equal to one half of that value. Comparison of
5 geometric means was performed with the two-sided t-test and the paired t-test.

EXAMPLE 1

Characterization of the conjugates

Data of representative conjugates are shown in Table
10 1. The percent of derivatization of the CP with AH ranged from 0.8 for K1-TT₁ to 10.2 for K92-TT₂. All AH derivatives, except for the latter, yielded an identity reaction with the native CP by double immunodiffusion. The native CP formed a spur over this K92-AH derivative
15 (not shown).

The protein/NeuNAc ratios were related to the percent derivatization of the CP with AH. K1-TT₁ had the highest protein/NeuNAc ratio (12.8) and contained a CP with 0.8% AH. K92-TT₂, with the lowest ratio (1.4),
20 contained a CP with 10.2% AH. The highest yields of conjugates were obtained when the reaction mixture for conjugation used concentrations of 7.5 to 10 mg/ml of TT and AH-CP.

All preparations of conjugates eluted at the void
25 volume through CL-4B Sepharose indicating multipoint attachment between the AH-CP and the TT (Figure 2). Figure 3 provides serologic evidence for the covalent attachment of the CP with the carrier protein (TT). Antiserum to each component precipitated with a line of
30 identity with a representative conjugate, K1-TT₁. Non-identical lines of precipitation were formed when these antisera reacted with mixtures of the CP and TT (not shown).

2101648

18

Table 1. Characterization of capsular polysaccharide-protein conjugates

	Conjugate	Protein ($\mu\text{g/ml}$)	NeuNAc ($\mu\text{g/ml}$)	AH/NeuNAc (wt/wt)	Protein/ CP ratio	Yield (% CP)	Concentration (mg/ml)*
5	K1-TT ₁ **	531	41.4	0.8	12.8	5.0	20
	K1-TT ₂ **	465	96.1	2.6	4.8	9.6	15
	K1 _{OAc+} -TT***	630	262	1.9	2.4	28.8	10
10	MenB-TT ₁	463	94.5	1.8	4.9	5.0	15
	MenB-TT ₂	314	51.1	2.3	6.2	4.6	15
	K92-TT ₁	294	98.8	3.4	3.0	10.5	15
	K92-TT ₂	705	517	10.2	1.4	51.7	7.5
15	MenC-TT	234	121	8.5	1.9	22.5	10

* Concentration of the reactants during the conjugation procedure.

20 ** The K1 CP for these conjugates were OAc⁻.

*** K1 CP of the OAc⁺ variant of Escherichia coli, strain LH.

Example 2

Induction of poly $\alpha(2\rightarrow8)$ NeuNAc antibodies (Table 2).

25 The four CP did not elicit rises of IgM or IgG antibodies. All four $\alpha(2\rightarrow8)$ NeuNAc conjugates (K1-TT₁, K1-TT₂, MenB-TT₁, and MenB-TT₂) elicited statistically significant rises in IgM antibodies. An IgM booster response was elicited after the second injection by these

30 conjugates; the levels elicited by K1-TT₁ and MenB-TT₁ were higher than those elicited by the other two poly $\alpha(2\rightarrow8)$ NeuNAc conjugates ($p < 0.001$). Only K1-TT₂ and MenB-TT₂ elicited IgM booster responses after the third

2101648

19

injection.

The four poly $\alpha(2\rightarrow8)$ NeuNAc conjugates elicited statistically significant rises of IgG antibodies after the second and third injections. The IgG levels elicited by the third injection of MenB-TT₂ (4.29 U/ml) were higher than those elicited by the other three conjugates but not significant (NS). One mouse in this group, however, had 240 U/ml and the geometric mean level, excluding this animal, was 2.74 U/ml.

10 K1_{OAc+}-TT, prepared from E. coli strain LH, elicited high levels of IgM and IgG antibody to the OAc⁺ variant of this CP and low antibody levels to poly $\alpha(2\rightarrow8)$ NeuNAc.

The two K92-TT elicited both IgM and IgG poly $\alpha(2\rightarrow8)$ NeuNAc antibodies; the IgG levels were higher than those elicited by the K1-TT₁ (P=0.01), K1-TT₂ (P=0.0001), MenB-TT₁ (P=0.0002) and MenB-TT₂ (p<0.05). K92-TT₂, containing the heavily derivated K92 CP, also elicited higher IgG antibody levels than the K1-TT and MenB-TT conjugates.

MenC-TT did not elicit poly $\alpha(2\rightarrow8)$ NeuNAc antibodies in any of the mice.

The specificity of the antibodies was shown by adsorption experiments using sera from mice injected with killed bacteria or by three injections of the conjugates (data not shown). Poly $\alpha(2\rightarrow8)$ NeuNAc and poly $\alpha(2\rightarrow9)$ NeuNAc adsorbed homologous IgG antibodies from the antisera (50-89%). The K92 CP adsorbed both poly $\alpha(2\rightarrow8)$ and poly $\alpha(2\rightarrow9)$ NeuNAc antibodies (69-89%). The two controls (group A meningococcal and group B type III streptococcal CP) adsorbed <10% of either poly $\alpha(2\rightarrow8)$ or $\alpha(2\rightarrow9)$ NeuNAc antibodies.

2101648

20

Table 2. Serum IgG and IgM antibodies to the capsular polysaccharide of Group B Neisseria meningitidis and Escherichia coli K1 (poly $\alpha(2\rightarrow8)$ NeuNAc).

	Immunogen	Post-immunization geometric mean					
		IgM ($\mu\text{g/ml}$)			IgG (ELISA U)		
		1st	2nd	3rd	1st	2nd	3rd
5	K1	0.09	0.12	0.11 ^a	0.05	0.05	0.06 ^c
	K1-TT ₁	0.32	3.35	1.63 ^b	0.10	0.49	2.44 ^d
	K1-TT ₂	0.12	0.19	0.62 ^b	0.06	0.13	1.95 ^e
10	K1 _{OAc} -TT*	0.17	0.16	0.08	0.07	0.20	0.72
		38.7	27.2	7.18	0.16	12.1	56.1
	MenB	0.05	0.05	0.05 ^a	0.05	0.05	0.05 ^c
	MenB-TT ₁	0.67	1.59	1.50 ^b	0.08	0.45	1.81 ^f
	MenB-TT ₂	0.08	0.26	0.72 ^b	0.05	0.11	4.29 ^g
15	K92	0.05	0.05	0.05 ^a	0.05	0.05	0.05 ^c
	K92-TT ₁	0.09	0.49	1.20 ^b	0.05	0.25	17.2 ^h
	K92-TT ₂	0.28	0.78	0.47 ^b	0.05	0.83	4.52 ⁱ
20	MenC	0.05	0.05	0.05	0.05	0.05	0.05
	MenC-TT	0.05	0.05	0.05	0.05	0.05	0.05

b vs a: $P < 0.001$, h vs i: $P = 0.007$, h vs g: $P < 0.05$, h vs f, e: $P < 0.05$, h vs d: $P = 0.01$

* The second set of values for conjugate K1_{OAc}-TT was determined using OAc⁺ K1 CP as the antigen.

EXAMPLE 3

Induction of poly $\alpha(2\rightarrow9)$ NeuNAc and TT Antibodies

(Table 3)

The homologous CP induced low levels of poly $\alpha(2\rightarrow9)$ NeuNAc IgM antibodies. Neither the homologous nor the heterologous CP induced IgG antibodies.

All the conjugates elicited IgM antibodies after the first injection. These levels declined after the 2nd and 3rd injections of the MenC-TT and K92-TT conjugates and

2101648

21

increased only after the first two injections of the K1-TT conjugates.

Only the MenC-TT elicited poly $\alpha(2\rightarrow9)$ NeuNAc IgG antibodies after the first injection; all the conjugates elicited increases after the second and third injections. The highest levels were elicited by MenC-TT > K92-TT > K1-TT. Similar to those observed with poly $\alpha(2\rightarrow8)$ NeuNAc antibodies, the IgG antibody levels elicited by K92-TT, were higher than those elicited by K92-TT₂ but N.S.

TT antibodies were elicited by all the conjugates with booster responses after each injection similar to those reported for other conjugates using this protein as a carrier (data not shown) (Robbins, J.B. & Schneerson, R. (1990) J. Infect. Dis 161, 821-832; Lagergard, T. et al. (1990) Infect. & Immuno. 58, 687-694).

Table 3. Serum IgG and IgM antibodies ($\mu\text{g/ml}$) to the capsular polysaccharide of group C *Neisseria meningitidis* (poly $\alpha(2\rightarrow9)$ NeuNAc)

Antigen	1st	IgM 2nd	3rd	1st	IgG 2nd	3rd
K1	0.05	0.05	0.05 ^a	0.05	0.05	0.05 ^e
K1-TT ₁	0.11	0.32	0.14 ^b	0.05	0.14	1.24 ⁱ
K1-TT ₂	0.23	1.09	0.40 ^b	0.05	0.97	3.32 ⁱ
MenC	0.05	0.08	0.11 ^c	0.07	0.10	0.05 ^e
MenC-TT	2.26	0.89	0.53 ^d	1.87	18.4	107.5 ^g
K92	0.05	0.05	0.05 ^a	0.05	0.05	0.05 ^e
K92-TT ₁	3.23	2.85	0.68 ^b	0.05	0.70	21.4 ^h
K92-TT ₂	1.87	0.74	0.15 ^b	0.06	1.71	15.9 ^h

2101648

PCT/US 92/01796
03 Rec'd PCT/PTO 05 JAN 1993

22

b vs a: $P=0.0001$, d, vs c: $P=0.0004$, c vs a: $P<0.001$,
f,g,h, vs e: $P=0.0001$, g vs f,h: $P<0.001$

EXAMPLE 4

Temperature-dependent Binding of
IgG Antibodies (Table 4)

Binding to the two CP by IgG antibodies elicited by K92-TT, K1-TT and MenC-TT conjugates and E. coli K92 and M. nonliquefaciens cells was assayed at 22°C and at 37°C. Reduction in binding at 37°C of poly $\alpha(2\rightarrow8)$ NeuNAc antibodies elicited by the K1-TT₂, M. nonliquefaciens, and K92-TT₁, was similar (~40%). In contrast, there was only <10% reduction in binding of poly $\alpha(2\rightarrow9)$ NeuNAc antibodies elicited by K1-TT₂, K92-TT₁, MenC-TT and E. coli K92 cells. These data are consistent with other results (Mandrell, R.E. & Zollinger, W.D. (1982) J. Immunol. 129, 2172-2178).

Table 4. Temperature-dependent binding of murine poly $\alpha(2\rightarrow8)$ and poly $\alpha(2\rightarrow9)$ NeuNAc IgG antibodies (percent binding at 37°C compared to 22°C)

Immunogen	<u>CP used for ELISA</u>	
	Poly $\alpha(2\rightarrow8)$	poly $\alpha(2\rightarrow9)$
	NeuNAc	NeuNAc
K1-TT ₂	41.8%	90.9%
25 <u>M. nonliquefaciens</u> cells	34.6	N.D.*
K92-TT ₁	49.1%	93.8%
E.coli K92 cells	N.D.	91.5%
MenC-TT	N.D.	100%
*N.D. Not detectable		

EXAMPLE 5

Poly $\alpha(2\rightarrow8)$ NeuNAc antibodies in paired maternal and cord sera (Table 5)

Most women at term had detectable IgM and IgG poly

SUBSTITUTE SHEET

2101648

23

$\alpha(2\rightarrow8)$ NeuNAc antibodies. The IgM and IgG levels of the Israeli women were higher than those of the women in Charlotte, NC ($P=0.0001$). As expected, the IgM poly $\alpha(2\rightarrow8)$ NeuNAc antibodies in the cord were at trace or non-detectable levels. The GM levels of IgG antibodies in the cord sera were significantly higher than those of the mothers from both regions. Most of the cord poly $\alpha(2\rightarrow8)$ NeuNAc IgG antibodies were higher than those of the corresponding maternal sera (69/81).

10 Table 5. IgG and IgM antibodies to poly $\alpha(2\rightarrow8)$ NeuNAc in paired human mother-newborn (umbilical cord) sera (Geometric mean)

<u>Source</u>	<u>n</u>	<u>Maternal</u>		<u>Cord</u>		<u>Maternal IgG vs cord IgG</u>
		<u>IgM</u>	<u>IgG</u>	<u>IgM</u>	<u>IgG</u>	
15 Charlotte, NC	36	0.35	26.9	0.03	32.9	$P=0.003$
Sheba Medical Center, Israel	45	0.91	80.0	0.04	121	$P=0.0001$

The levels of IgM antibodies are expressed as $\mu\text{g Ab/ml}$ and the levels of IgG antibodies as percent of a high-tittered adult serum (GH) as ELISA units.

EXAMPLE 6

Passive Immunization

Either monoclonal or polyclonal antibodies, of human or animal origin, for passive immunization for prevention, or as adjunct therapy of systemic infections with organisms containing poly $\alpha(2\rightarrow8)$ NeuNAc or poly $\alpha(2\rightarrow9)$ NeuNAc surface antigens in an animal, including humans, may be produced by the above-described conjugate vaccines. (example: passive immunization of case contacts of group B meningococcal systemic infections including meningitis). Passive immunization, for both therapeutic and preventative purposes, has been carried out since the turn of the century. Passive immunization

2101648

24

has been considered again for prevention of group B meningococcus systemic infections including meningitis, as well as other capsulated bacterial pathogens that cause systemic infections including the pneumococcus, Hemophilus influenza type b, group B streptococcus and E. coli infections in hosts at higher risk than the general population including fetuses, newborns and patients with congenital or acquired immunodeficiencies (Patients with immunodeficiencies may not be capable of producing protective levels of antibodies when injected with K92 and/or poly $\alpha(2\rightarrow8)$ NeuNAc conjugate vaccines). The technique of passive immunization is taught by: Flexner (1913) J. Exp. Med. 17:553-570; Brahm (1938) Proc. Soc. Exp. Biol. Med. 30:348; Raff et al. (1988) J. Infect. Dis. 157:118-126; Kim et al. (1985) Infect. Immuno. 50:734-737; and Latson et al. (1988) Podiatr. Infect. Dis. 7:747-752.

EXAMPLE 7

Further Uses of the Antibodies

Either monoclonal or polyclonal antibodies are prepared for diagnostic purposes or for the investigation of the developmental processes, pathogenesis, prevention, immunopathology, or immunologic responses of poly $\alpha(2\rightarrow8)$ NeuNAc, poly $\alpha(2\rightarrow9)$ NeuNAc, or to poly $\alpha(2\rightarrow8)$, $\alpha(2\rightarrow9)$ NeuNAc alone, as a component or a complex molecule or of organisms containing these saccharides. The use of poly $\alpha(2\rightarrow8)$ NeuNAc antibodies, especially of the IgG class, for use in developmental studies is illustrated in the following articles: Husmann et al. (1990) J. Histochem. & Cytol. 38:209-215; Robbins & Schneerson (1990) J. Infect. Dis. 161:821-832). The above-described conjugate-induced antibodies may be derivatized or interacted with other substances to produce kits for

2101648

25

diagnosis of diseases or identification of organisms containing poly $\alpha(2\rightarrow8)$ NeuNAc or poly $\alpha(2\rightarrow9)$ NeuNAc. Kits, containing polyclonal or monoclonal antibodies, are used worldwide for the diagnosis of systemic infections, including meningitis, or for asymptomatic carriages of Neisseria meningitidis as well as other capsulated bacterial pathogens. This use is reviewed in: Lim et al. (1990) J. Clin. Microbiol. 28:670-675; Cuevas et al. (1989) Ann. Trop. Med. Parasitol. 83:375-379; Orskov et al. (1979) J. Exp. Med. 149:669-685.

EXAMPLE 8

Active Immunization Against the Three Major Serogroups of N. meningitidis

Active immunization against the three major serogroups of Neisseria meningitidis, would include conjugate vaccines of group A along with the conjugate vaccines described-above. A trivalent polysaccharide-protein conjugate vaccine, capable of eliciting serum antibodies to groups A, B, and C meningococcal meningitis and thereby preventing most of the systemic infections, including meningitis, caused by Neisseria meningitidis, may be produced by this method using the above-described conjugates and a group A meningococcal conjugate. Group A meningococcal polysaccharide protein conjugates have been synthesized according to a published method (Chu et al. (1983) Infect. Immun. 40:245-256). Concurrent injection of more than one polysaccharide protein conjugate in animals and in humans has been shown to elicit protective levels of antibodies to each component and at equal levels as those elicited by each conjugate injected separately (Schneerson et al. (1986) Infect. Immun. 52:501-518).

While the foregoing invention has been described in some detail for purposes of clarity and understanding, it will be appreciated by one skilled in the art from a reading of this disclosure that various changes in form and detail can be made without departing from the true scope of the invention and appended claims.

The embodiments of the invention in which an exclusive property or privilege is claimed are defined as follows:

1. An *E. coli* K92 capsular polysaccharide and carrier protein conjugate wherein the K92 capsular polysaccharide comprises a linear copolymer having the following structural formula as a repeating unit: 9)-NeuNAc- α (2 $\rightarrow$ 8)NeuNAc- α (2 $\rightarrow$), or derivatives thereof, and further wherein the conjugate elicits the production of antibodies reactive with non-K92 bacterial microorganisms having poly α (2 $\rightarrow$ 8) NeuNAc capsular polysaccharide surface antigens, antibodies reactive with non-K92 bacterial microorganisms having poly α (2 $\rightarrow$ 9) NeuNAc capsular polysaccharide surface antigens, and antibodies reactive with the carrier protein.
2. The conjugate according to Claim 1, further wherein the bacterial microorganisms having poly α (2 $\rightarrow$ 8) NeuNAc capsular polysaccharide surface antigens comprise *E. coli* K1 and Group B *N. meningitidis*, and the bacterial microorganisms having poly α (2 $\rightarrow$ 9) NeuNAc capsular polysaccharide surface antigens comprise Group C *N. meningitidis*.
3. The conjugate according to Claim 1, wherein the carrier protein is immunogenic and is selected from the group consisting of albumins, chemically or genetically detoxified diphtheria toxin, tetanus toxoid, detoxified exotoxin A of *P. aeruginosa*, detoxified *S. aureus*, synthetic polypeptides, bacterial outer membrane proteins, and viral proteins.
4. The conjugate according to Claim 3, wherein the carrier protein is tetanus toxoid.
5. The conjugate according to Claim 1, wherein the capsular polysaccharide and the carrier protein are covalently coupled with a linker selected from the group consisting of dihydrazide compounds, diamino compounds, amino-epsilon-caproic acid and N-hydroxysuccinimide acid anhydride-based heterobifunctional molecules.
6. The conjugate according to Claim 5, wherein the linker is adipic acid dihydrazide.

-28-

7. The conjugate according to Claim 5, wherein the linker is diamino hexane.
8. The conjugate according to Claim 5, wherein the linker is N-succinimidyl 3-(2-pyridyldithio) proprionate.
9. An *E. coli* K92 capsular polysaccharide and carrier protein conjugate, wherein the K92 capsular polysaccharide comprises a linear copolymer having the following structural formula as a repeating unit: 9)-NeuNAc- α (2 $\rightarrow$ 8)NeuNAc- α (2 $\rightarrow$), or derivatives thereof, and further wherein the K92 capsular polysaccharide and the carrier protein are covalently coupled with a linker selected from the group consisting of adipic acid dihydrazide, diaminohexane, amino-epsilon-caproic acid, and N-succinimidyl 3-(2-pyridyldithio) proprionate.
10. The conjugate according to Claim 9, further wherein the conjugate elicits the production of antibodies reactive with non-K92 bacterial microorganisms having poly α (2 $\rightarrow$ 8) NeuNAc capsular polysaccharide surface antigens, antibodies reactive with non-K92 bacterial microorganisms having poly α (2 $\rightarrow$ 9) NeuNAc capsular polysaccharide surface antigens, and antibodies reactive with the carrier protein.
11. The conjugate according to Claim 10, further wherein the bacterial microorganisms having poly α (2 $\rightarrow$ 8) NeuNAc capsular polysaccharide surface antigens comprise *E. coli* K1 and Group B *N. meningitidis*, and the bacterial microorganisms having poly α (2 $\rightarrow$ 9) NeuNAc capsular polysaccharide surface antigens comprise Group C *N. meningitidis*.
12. The conjugate according to Claim 9, wherein the carrier protein is immunogenic and is selected from the group consisting of albumins, chemically or genetically detoxified diphtheria toxin, tetanus toxoid, detoxified exotoxin A of *P. aeruginosa*, detoxified *S. aureus* toxin, synthetic polypeptides, bacterial outer membrane proteins, and viral proteins.
13. The conjugate according to Claim 12, wherein the carrier protein is tetanus toxoid.
14. The conjugate according to Claim 9, wherein the linker is adipic acid dihydrazide.

-29-

15. An *E. coli* K92 capsular polysaccharide and tetanus toxoid conjugate, wherein the conjugate comprises *E. coli* K92 capsular polysaccharide surface antigen and detoxified tetanus toxin, and further wherein the conjugate is capable of eliciting the production of serum antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens, serum antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens, and serum antibodies reactive with tetanus toxoid.
16. The conjugate according to Claim 15, further wherein the non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens comprise *E. coli* K1 and Group B *N. meningitidis*, and the non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens comprise Group C *N. meningitidis*.
17. The conjugate according to Claim 15, wherein the capsular polysaccharide is covalently bound to detoxified tetanus toxin with a linker selected from the group consisting of dihydrazide compounds, diamino compounds, amino-epsilon-caproic acid and N-hydroxysuccinimide acid anhydride-based heterobifunctional molecules.
18. The conjugate according to Claim 17, wherein the linker is adipic acid dihydrazide.
19. The conjugate according to Claim 17, wherein the linker is diaminohexane.
20. The conjugate according to Claim 17, wherein the linker is amino-epsilon-caproic acid.
21. The conjugate according to Claim 17, wherein the linker is N-succinimidyl 3-(2-pyridyldithio) propionate.
22. A method of producing serum antibodies immunoreactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens, serum antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens, and serum antibodies reactive with a carrier protein in a mammal, comprising the steps of:

-30-

- (a) administering to the mammal the conjugate according to Claim 1, Claim 9, or Claim 15;
- (b) boosting the mammal with the conjugate so as to produce the anti-capsular polysaccharide serum antibodies and the anti-carrier protein serum antibodies; and
- (c) isolating the antibodies from serum.

23. The method according to Claim 22, wherein, in step (a), the conjugate carrier protein is immunogenic and is selected from the group consisting of albumins, chemically or genetically detoxified diphtheria toxin, tetanus toxoid, detoxified exotoxin A of *P. aeruginosa*, detoxified *S. aureus* toxin, synthetic polypeptides, bacterial outer membrane proteins, and viral proteins.
24. The method according to Claim 23, wherein the conjugate carrier protein is tetanus toxoid.
25. The method according to Claim 22, wherein the non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens comprise *E. coli* K1 and Group B *N. meningitidis*, and the non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens comprise Group C *N. meningitidis*.
26. An immunogenic preparation comprising the conjugate according to Claim 1, Claim 9, or Claim 15 in a pharmaceutically-acceptable carrier, diluent, adjuvant, excipient, or a mixture thereof.
27. The preparation according to Claim 26, wherein the carrier protein is immunogenic, elicits a booster response, and confers immunogenicity and a booster response to the conjugate.

-31-

28. A vaccine comprising the K92 capsular polysaccharide and carrier protein conjugate according to Claim 1 or Claim 9, said vaccine administered in an amount effective to elicit in a mammal antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens and antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens.
29. The vaccine according to Claim 28, wherein the carrier protein is immunogenic, elicits a booster response, and confers immunogenicity and a booster response to the conjugate.
30. The vaccine according to Claim 28, wherein the carrier protein is selected from the group consisting of albumins, chemically or genetically detoxified diphtheria toxin, tetanus toxoid, detoxified exotoxin A of *P. aeruginosa*, detoxified *S. aureus* toxin, synthetic polypeptides, bacterial outer membrane proteins, and viral proteins.
31. The vaccine according to Claim 30, wherein the carrier protein is tetanus toxoid.
32. A vaccine comprising the K92 capsular polysaccharide and carrier protein conjugate according to Claim 15, said vaccine administered in an amount effective to elicit in a mammal antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens and antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens.
33. The vaccine according to Claim 32, wherein the carrier protein is immunogenic, elicits a booster response, and confers immunogenicity and a booster response to the conjugate.
34. A pharmaceutical composition comprising the K92 capsular polysaccharide and carrier protein conjugate according to any one of Claims 1, 9, 15, in a pharmaceutically acceptable carrier, excipient, or diluent.

-32-

35. The pharmaceutical composition according to Claim 34, wherein the composition is administered in an amount effective to elicit the production of (i) IgM and IgG antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens; (ii) IgM and IgG antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens; and (iii) IgM and IgG antibodies reactive with the carrier protein.
36. The composition according to Claim 35, wherein the bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens comprise *E. coli* K1 and Group B *N. meningitidis*, and the bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens comprise Group C *N. meningitidis*.
37. A method of producing an *E. coli* K92 capsular polysaccharide and carrier protein conjugate, said conjugate effective for eliciting serum IgM and IgG antibodies immunoreactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens; serum IgM and IgG antibodies immunoreactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens; and IgM and IgG serum antibodies immunoreactive with the carrier protein, comprising:
- a) derivatizing the *E. coli* K92 capsular polysaccharide to allow covalent coupling to the carrier protein; and
 - b) covalently coupling the derivatized polysaccharide of step a) to the carrier protein to form the immunoreactive conjugate.
38. The method according to Claim 37, wherein the bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens comprise *E. coli* K1 and Group B *N. meningitidis*, and the bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens comprise Group C *N. meningitidis*.

-33-

39. The method according to Claim 37, wherein the capsular polysaccharide is covalently coupled to the carrier protein by a linker selected from the group consisting of dihydrazide compounds, diamino compounds, amino-epsilon-caproic acid and N-hydroxysuccinimide acid anhydride-based heterobifunctional molecules.
40. The method according to Claim 39, wherein the linker is adipic acid dihydrazide.
41. The method according to Claim 39, wherein the linker is diamino hexane.
42. The method according to Claim 39, wherein the linker is N-succinimidyl 3-(2-pyridyldithio) propionate.
43. The method according to Claim 37, wherein the carrier protein is selected from the group consisting of albumins, chemically or genetically detoxified diphtheria toxin, tetanus toxoid, pertussis toxoid, detoxified exotoxin A of *P. aeruginosa*, detoxified *S. aureus* toxin, synthetic polypeptides, bacterial outer membrane proteins, and viral proteins.
44. The method according to Claim 43, wherein the carrier protein is tetanus toxoid.
45. The method according to Claim 37, wherein the derivatizing step (a) is carried out at a pH of 6 to 7 via carbodiimide condensation.
46. Antisera produced against an *E. coli* K92 capsular polysaccharide and carrier protein conjugate, wherein the K92 capsular polysaccharide comprises a linear copolymer having the following structural formula as a repeating unit: 9)-NeuNAc- $\alpha(2\rightarrow8)$ NeuNAc- $\alpha(2\rightarrow)$, and further wherein the antisera comprises (i) antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens, (ii) antibodies reactive with non-K92 bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens, and (iii) antibodies reactive with the carrier protein.

-34-

47. The antisera according to Claim 46, wherein the bacterial microorganisms having poly $\alpha(2\rightarrow8)$ NeuNAc capsular polysaccharide surface antigens comprise *E. coli* K1 and Group B *N. meningitidis*, and the bacterial microorganisms having poly $\alpha(2\rightarrow9)$ NeuNAc capsular polysaccharide surface antigens comprise Group C *N. meningitidis*.
48. The antisera according to Claim 46, wherein the antisera contain antibodies selected from the IgM and IgG classes.
49. The conjugate according to any of Claims 2, 11, or 16, wherein the bacterial microorganisms are Group B *N. meningitidis*.
50. The conjugate according to any of Claims 2, 11, or 16, wherein the bacterial microorganisms are *E. coli* K1.
51. The conjugate according to any of Claims 2, 11, or 16, wherein the bacterial microorganisms are Group C *N. meningitidis*.

2101648
1/2

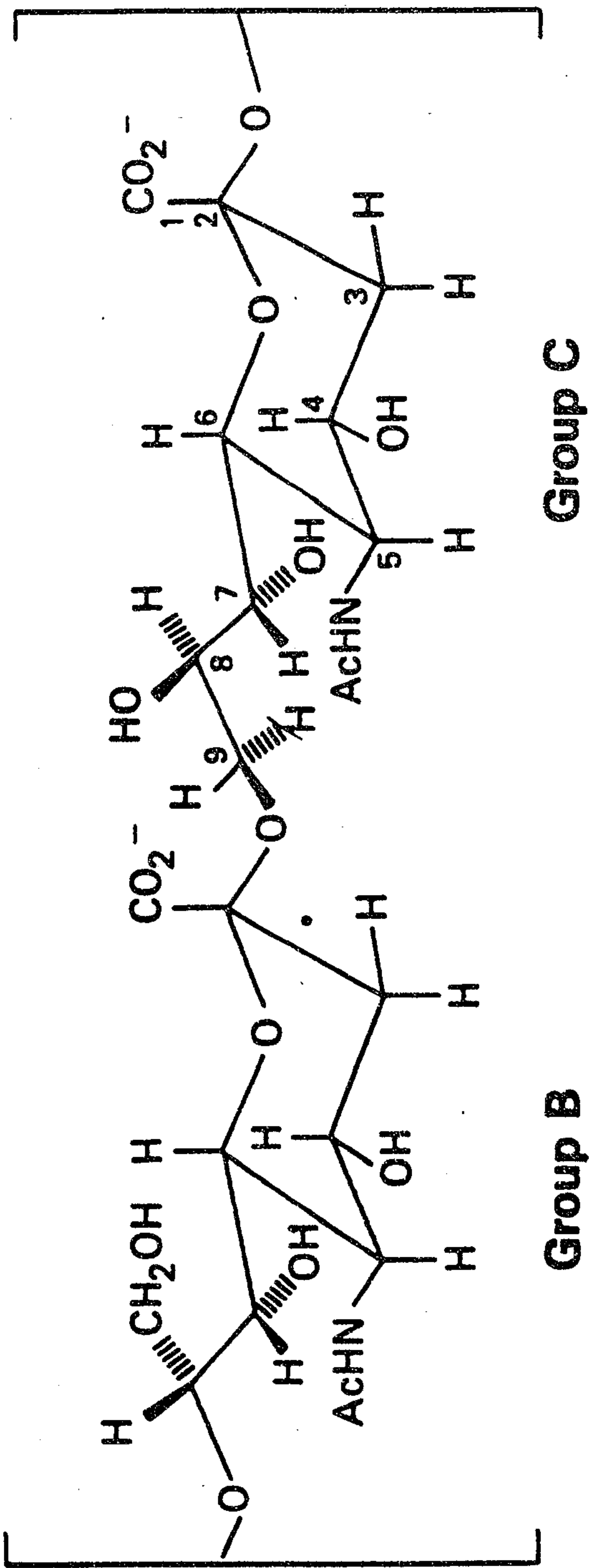


FIG. 1

SUBSTITUTE SHEET

FIG. 2

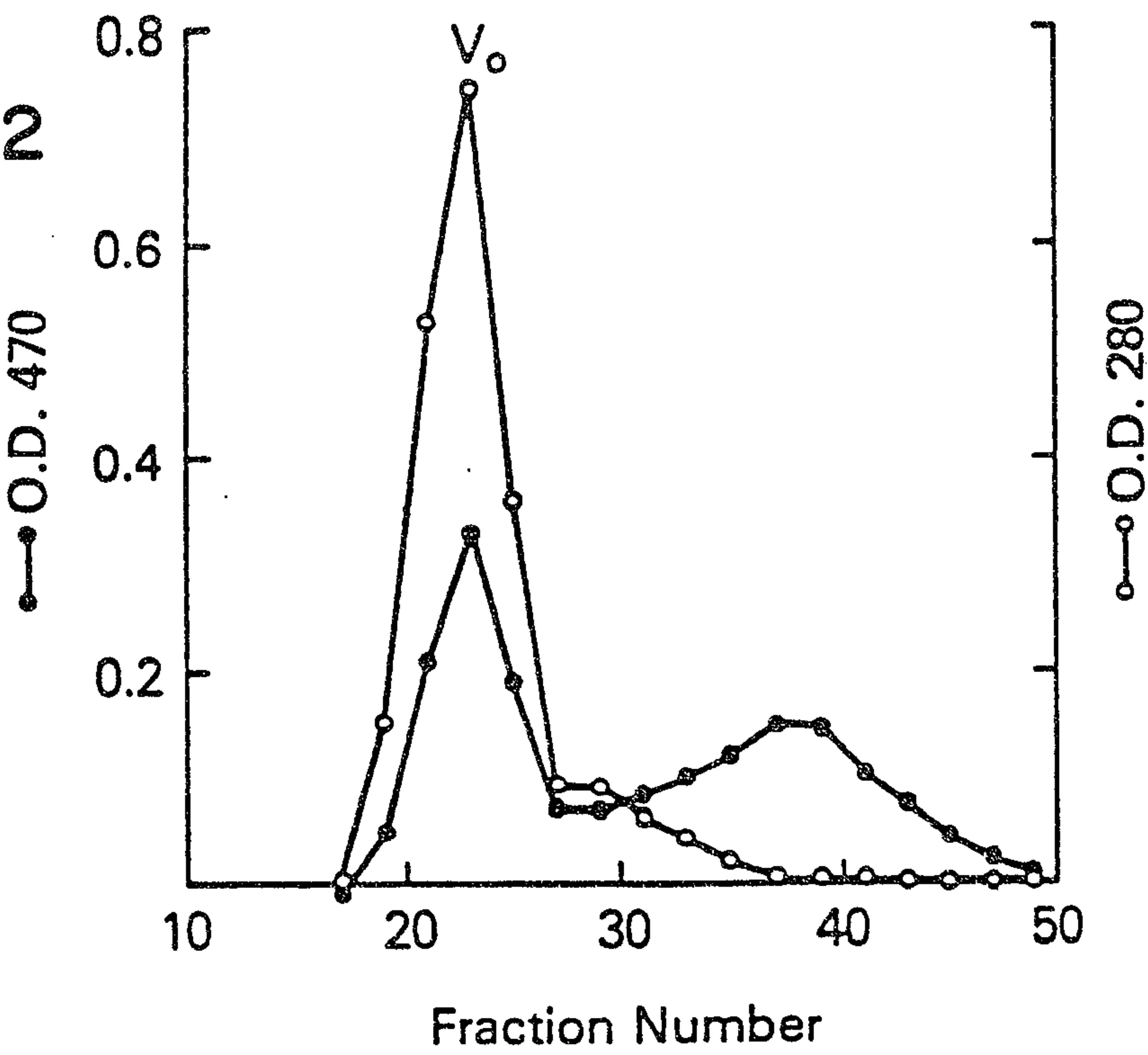
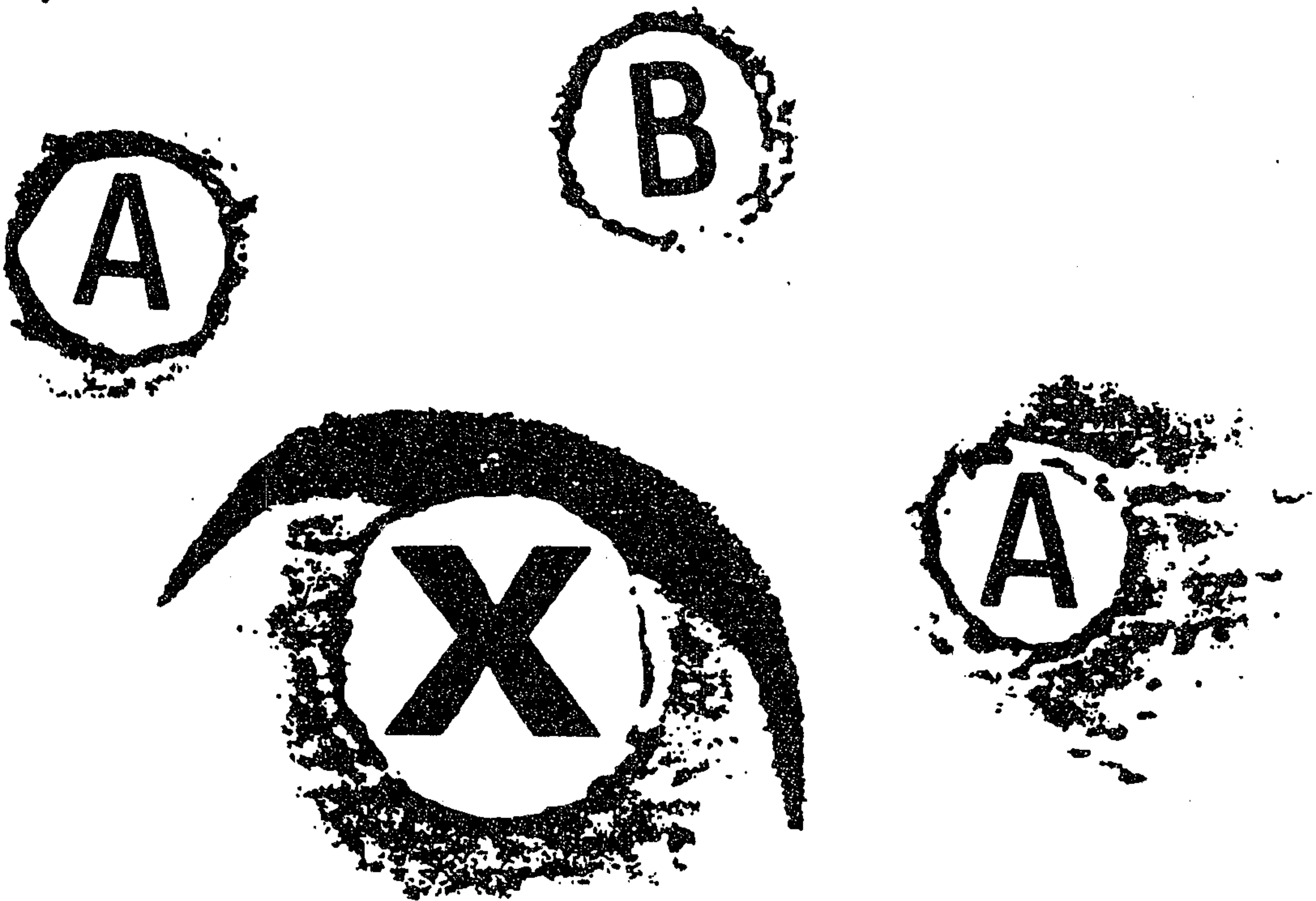


FIG. 3



SUBSTITUTE SHEET