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(19) **United States**(12) **Patent Application Publication** (10) **Pub. No.: US 2004/0248197 A1**
Holtzman et al. (43) **Pub. Date: Dec. 9, 2004**(54) **ASSAY METHOD FOR ALZHEIMER'S DISEASE**(76) Inventors: **David M. Holtzman**, St. Louis, MI (US); **Ronald DeMattos**, Noblesville, IN (US); **Kelly R. Bales**, Coatesville, IN (US); **David J. Cummins**, Indianapolis, IN (US); **Steven M. Paul**, Carmel, IN (US); **Audrey Yunhua Jia**, Union City, CA (US); **Naoya Tsurushita**, Palo Alto, CA (US); **Maximiliano J. Vasquez**, Palo Alto, CA (US)

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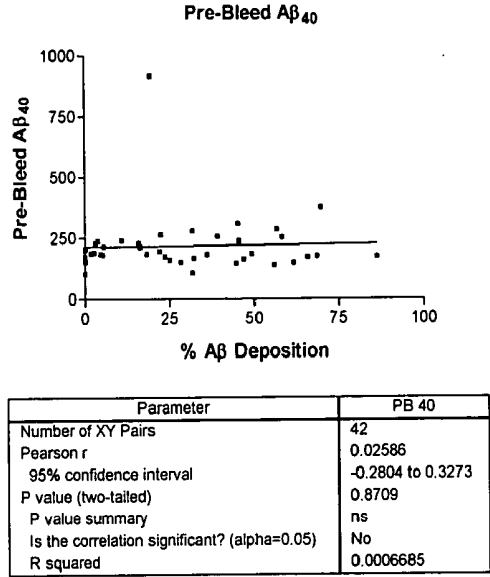
Brinks Hofer**Gilson & Lione****PO Box 10395****Chicago, IL 60610 (US)**(21) Appl. No.: **10/486,908**(22) PCT Filed: **Aug. 16, 2002**(86) PCT No.: **PCT/US02/26321****Related U.S. Application Data**

(60) Provisional application No. 60/313,221, filed on Aug. 17, 2001.

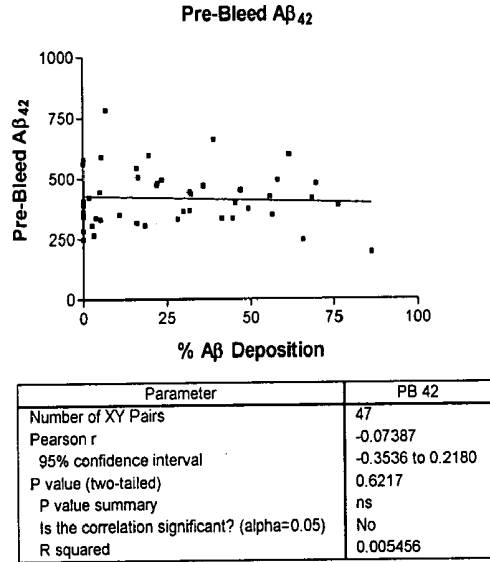
Publication Classification(51) **Int. Cl.⁷** **G01N 33/53**(52) **U.S. Cl.** **435/7.1**(57) **ABSTRACT**

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.

A



B



C

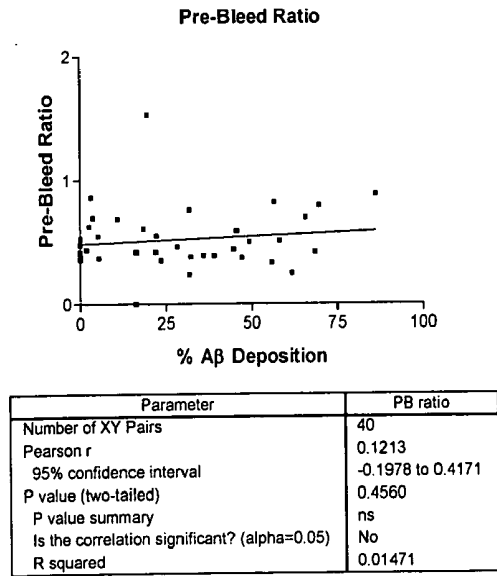
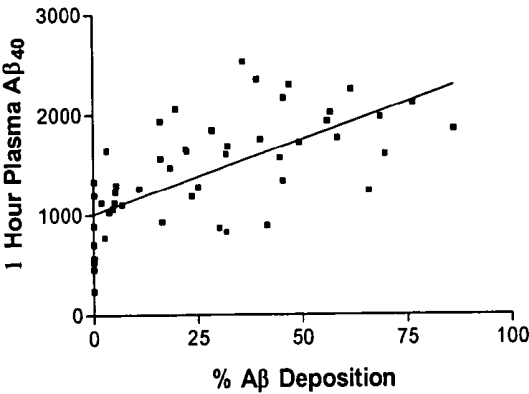


Figure 1

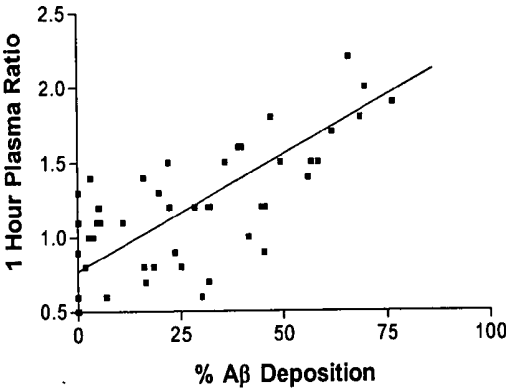
A



Parameter	1-Hour 40
Number of XY Pairs	52
Pearson r	0.6567
95% confidence interval	0.4676 to 0.7884
P value (two-tailed)	P<0.0001
P value summary	***
Is the correlation significant? (alpha=0.05)	Yes
R squared	0.4313

B

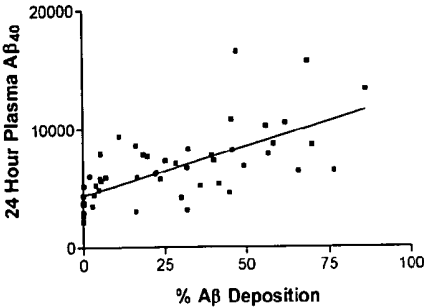
Plasma Aβ₄₀/Aβ₄₂ Ratio
1-Hour Post m266 Injection



Parameter	1-Hour Ratio
Number of XY Pairs	52
Pearson r	0.7565
95% confidence interval	0.6093 to 0.8533
P value (two-tailed)	P<0.0001
P value summary	***
Is the correlation significant? (alpha=0.05)	Yes
R squared	0.5723

Figure 2

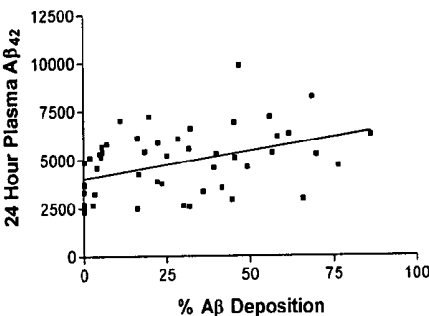
A



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

B

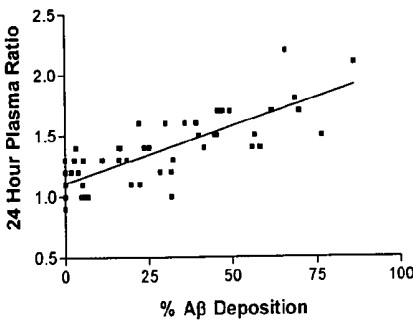
Plasma A β ₄₂
24-Hours Post m266 Injection



Parameter	24-Hour 42
Number of XY Pairs	52
Pearson r	0.4039
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
R squared	0.1631

C

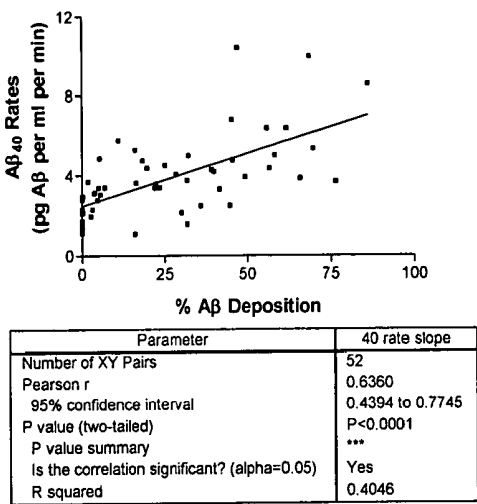
Plasma A β ₄₀/A β ₄₂ Ratio
24-Hours Post m266 Injection



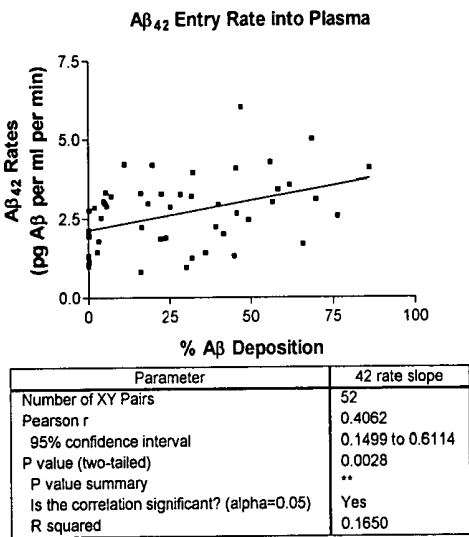
Parameter	24-Hour Ratio
Number of XY Pairs	52
Pearson r	0.7987
95% confidence interval	0.6724 to 0.8799
P value (two-tailed)	P<0.0001
P value summary	***
Is the correlation significant? (alpha=0.05)	Yes
R squared	0.6380

Figure 3

A



B



C

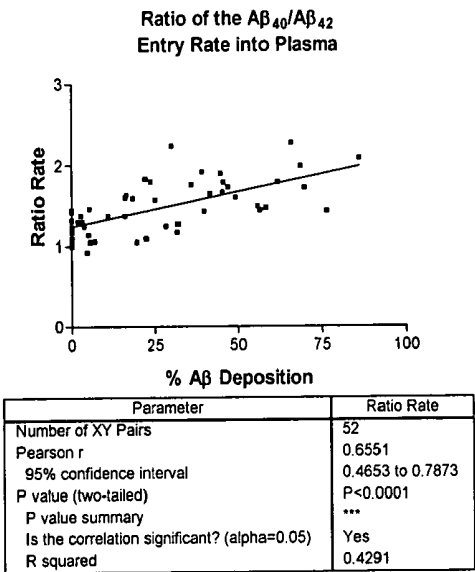
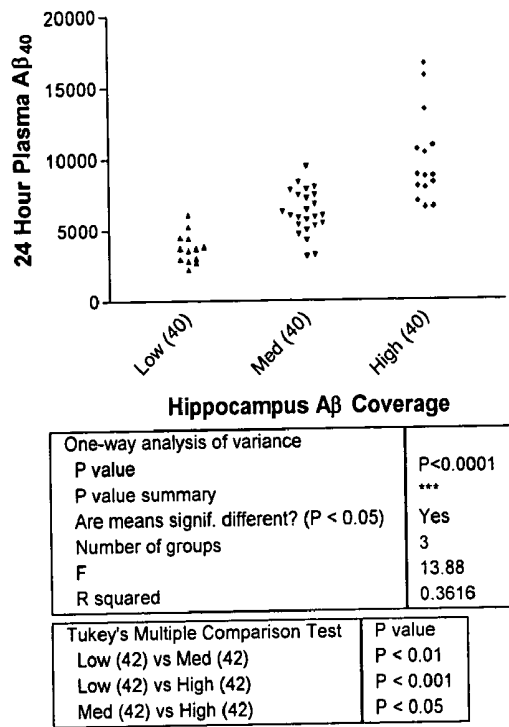


Figure 4

A



B

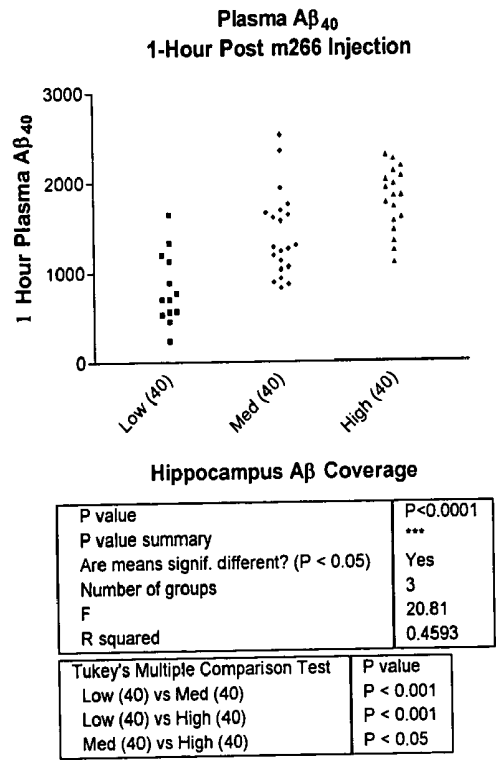


Figure 5

Plasma A β Correlation's with Alzheimer-Like Pathology in Hippocampus							
Plasma A β correlation with A β load and fibrillar amyloid							
	Pre-Bleed	5-Min	1-Hour	3-Hour	6-Hour	24-Hour	AUC
<u>Plasma Aβ40:</u>							
A β Load:	Pearson r	-0.0158	0.5527	0.5904	0.4310	0.5533	0.7056
	P value	0.9209	<0.0001	<0.0001	0.0014	<0.0001	<0.0001
Amyloid Load:							
	Pearson r	0.1535	0.7420	0.6257	0.7053	0.6684	0.7624
	P value	0.3378	<0.0001	<0.0001	<0.0001	<0.0001	<0.0001
<u>Plasma Aβ42:</u>							
A β Load:	Pearson r	-0.0614	0.2223	-0.0036	0.1309	0.4551	0.5322
	P value	0.6817	0.1207	0.9798	0.3549	0.0008	<0.0001
Amyloid Load:							
	Pearson r	0.0443	0.4790	0.2321	0.3996	0.4476	0.6214
	P value	0.7698	0.0005	0.1013	0.0037	0.0011	<0.0001
<u>Aβ40/42 Ratio:</u>							
A β Load:	Pearson r	0.0369	0.5223	0.6888	0.4215	0.1754	0.6138
	P value	0.8236	<0.0001	<0.0001	0.0019	0.2183	<0.0001
Amyloid Load:							
	Pearson r	0.1293	0.4825	0.5047	0.4364	0.2843	0.5510
	P value	0.4393	0.0004	0.0002	0.0014	0.0454	<0.0001

Figure 6

ASSAY METHOD FOR ALZHEIMER'S DISEASE

CROSS REFERENCE TO RELATED APPLICATIONS

[0001] This application claims the priority of U.S. provisional application 60/334,987, filed Oct. 23rd, 2001, 60/313,221, filed Aug. 17th, 2001, and 60/313,224, filed Aug. 17th, 2001, the contents of which are incorporated herein by reference.

TECHNICAL FIELD

[0002] 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 ($A\beta$) peptide in plasma following administration of certain anti- $A\beta$ antibodies to a subject.

BACKGROUND ART

[0003] 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 ($A\beta$). 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 $A\beta$ 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.

[0004] Evidence suggests that $A\beta$ 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 $A\beta$ in plaques is in an equilibrium with soluble $A\beta$ 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.

[0005] As described in PCT application US00/35681 and U.S. Ser. No. 09/153,130 both incorporated herein by reference, total circulating levels of $A\beta$ peptide in CSF are similar in normal individuals and individuals predisposed to exhibit the symptoms of Alzheimer's. However, $A\beta_{42}$ 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 $A\beta_{42}$ is more prone to aggregate than is $A\beta_{40}$, and when this happens, adverse consequences such as $A\beta$ deposition in amyloid plaques, conversion of $A\beta$ 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).

[0006] PCT application PCT/US01/06191 entitled "Humanized Antibodies That Sequester $A\beta$ Peptide" filed 26 Feb. 2001 and incorporated herein by reference describes antibodies which do not appreciably cross the blood-brain barrier and which sequester $A\beta$ peptides circulating in biological fluids. These antibodies are described as useful for preventive and therapeutic treatment of conditions asso-

ciated with the formation of $A\beta$ -containing diffuse, neuritic, and cerebrovascular plaques in the brain. The application describes administering the antibodies and then measuring circulating levels of $A\beta$ peptide in blood in order to assess the progress of therapy. There is no clear suggestion, however, that the levels of $A\beta$ 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 $A\beta_{40}/A\beta_{42}$ ratio correlate with the levels of $A\beta$ 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.

[0007] There are additional relevant publications concerning the behavior of $A\beta$ peptide antibodies. For example, PCT publication WO99/27944 published 10 Jun. 1999 describes methods to induce an immune response in order to reduce amyloid deposits. Publication No. WO99/60024 published 25 Nov. 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- $A\beta$ 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.

[0008] It has been shown that one pathway for $A\beta$ 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 $A\beta$ 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 $A\beta$ antibodies decreases $A\beta$ 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- $A\beta$ 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 $A\beta$ antibody, along with exogenously added microglia, induced phagocytosis of $A\beta$, resulting in removal of $A\beta$ deposits.

[0009] 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. Pat. Nos. 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 A β are mouse antibodies 266 (m266), 4G8, and 1C2.

DISCLOSURE OF THE INVENTION

[0010] It has now been found that antibodies which are useful for performing assays for A β 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 A β 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 A β peptide from its bound, circulating form in blood and alter clearance of soluble and bound forms of A β in central nervous system and plasma. These antibodies, and fragments thereof, specifically bind to an epitope between amino acids 13 and 28 of the A β 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.

[0011] 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 β peptide from its bound, circulating form in blood, and alters clearance of soluble and bound forms of A β in the central nervous system in plasma, or which specifically binds an epitope contained within positions 13-28 of A β , preferably an antibody having an immunoreactivity equivalent to mouse antibody 266 effective to alter the levels of circulating A β 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 β_{40} , A β_{42} , or the ratio of A β_{40} /A β_{42} in the blood of said subject, wherein an enhanced concentration of A β_{40} , A β_{42} and/or A β_{40} /A β_{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

[0012] FIGS. 1A, B and C are graphs showing the levels of A β_{40} (FIG. 1A), A β_{42} (FIG. 1B), and A β_{40} /A β_{42} ratio (FIG. 1C) in plasma of transgenic mice prior to administration of the antibody m266, and the lack of correlation with brain A β deposits.

[0013] FIGS. 2A and B are graphs showing plasma A β_{40} (FIG. 2A) and plasma A β_{40} /A β_{42} ratio (FIG. 2B) in transgenic mice one hour after injection of antibody m266, and the significant correlation with brain A β deposits.

[0014] FIGS. 3A, B and C are graphs showing the significant correlations of the two A β peptides (FIGS. 3A and

3B) and their ratio (FIG. 3C) with A α peptide deposition in the brain 24 hours after injection with monoclonal antibody m266.

[0015] FIGS. 4A, B and C are graphs showing the significant correlations of entry rates into the circulation of the two A β peptides (FIGS. 4A and 4B) and their ratio (FIG. 4C) and A β peptide deposition in transgenic mice.

[0016] FIGS. 5A and B are graphs showing an alternative graphical representation of A β_{40} levels in the plasma 24 hours (FIG. 5A) and 1 hour (FIG. 5B) after m266 injection correlated with the percentage hippocampus covered by A β deposits.

[0017] FIG. 6 is a table showing Pearson correlation coefficients (Pearson r) and significance (P value) determined between plasma A β values (pre and post injection of m266) and hippocampal A β or amyloid load.

MODES OF CARRYING OUT THE INVENTION

[0018] 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.

[0019] The above-mentioned patent documents (U.S. Pat. Nos. 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 A β peptide. Applicants have found that after administering m266 to APP^{V717F} mice, a mouse model of Alzheimer's disease, they can measure levels of A β 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 A β 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 A β peptide.

[0020] 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.

[0021] 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 β 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_v, 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.

[0022] 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 amino-terminal portion of each chain includes a variable region of about 100 to 10 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.

[0023] 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.

[0024] 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].

[0025] 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 A β 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.

[0026] 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 β levels ex vivo (e.g. by ELISA), the murine forms themselves can be used.

[0027] 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.

[0028] 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 immunoglobulin 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.

[0029] 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.

[0030] A preferred humanized antibody is a humanized form of mouse antibody 266. The CDRs of humanized 266 have the following amino acid sequences:

[0031] light chain CDR1:

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1             5             10             15      (SEQ ID NO:1)
Arg Ser Ser Gln Ser Leu Ile Tyr Ser Asp Gly Asn Ala Tyr Leu His

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[0032] light chain CDR2:

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1             5      (SEQ ID NO:2)
Lys Val Ser Asn Arg Phe Ser

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[0033] light chain CDR3:

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1             5      (SEQ ID NO:3)
Ser Gln Ser Thr His Val Pro Trp Thr

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[0034] heavy chain CDR1:

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1             5      (SEQ ID NO:4)
Arg Tyr Ser Met Ser

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[0035] heavy chain CDR2:

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1             5             10             15      (SEQ ID NO:5)
Gln Ile Asn Ser Val Gly Asn Ser Thr Tyr Tyr Pro Asp Thr Val Lys Gly

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[0036] and, heavy chain CDR3:

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

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[0037] 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 acid substitutions to the consensus amino acids in the same human V subgroup to reduce potential immunogenicity:

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1             5             10             15      (SEQ ID NO:7)
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

```

[0038] wherein:

- [0039] Xaa at position 2 is Val or Ile;
- [0040] Xaa at position 7 is Ser or Thr;
- [0041] Xaa at position 14 is Thr or Ser;
- [0042] Xaa at position 15 is Leu or Pro;
- [0043] Xaa at position 30 is Ile or Val;
- [0044] Xaa at position 50 is Arg, Gln, or Lys;
- [0045] Xaa at position 88 is Val or Leu;

[0046] Xaa at position 105 is Gln or Gly;

[0047] Xaa at position 108 is Lys or Arg; and

[0048] Xaa at position 109 is Val or Leu.

[0049] 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:

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1           5           10           15 (SEQ ID NO:8)
Xaa Val Gln Leu Val Glu Xaa Gly Gly Gly Leu Val Gln Pro Gly

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

                65           70           75
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

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[0050] wherein:

[0051] Xaa at position 1 is Glu or Gln;

[0052] Xaa at position 7 is Ser or Leu;

[0053] Xaa at position 46 is Glu, Val, Asp, or Ser;

[0054] Xaa at position 63 is Thr or Ser;

[0055] Xaa at position 75 is Ala, Ser, Val, or Thr;

[0056] Xaa at position 76 is Lys or Arg;

[0057] Xaa at position 89 is Glu or Asp; and

[0058] Xaa at position 107 is Leu or Thr.

[0059] 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:

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1           5           10           15 (SEQ ID NO:9)
Asp Val Val Met Thr Gln Ser Pro Leu Ser Leu Pro Val Thr Leu

                20           25           30
Gly Gln Pro Ala Ser Ile Ser Cys Arg Ser Ser Gln Ser Leu Ile

                35           40           45
Tyr Ser Asp Gly Asn Ala Tyr Leu His Trp Phe Leu Gln Lys Pro

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				50					55					60	
Gly	Gln	Ser	Pro	Arg	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	Val	Gly	Val	
				95					100					105	
Tyr	Tyr	Cys	Ser	Gln	Ser	Thr	His	Val	Pro	Trp	Thr	Phe	Gly	Gln	
				110											
Gly	Thr	Lys	Val	Glu	Ile	Lys	Arg.								

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

1	5					10					15				
Asp	Val	Val	Met	Thr	Gln	Ser	Pro	Leu	Ser	Leu	Pro	Val	Thr	Leu	
20					25					30					
Gly	Gln	Pro	Ala	Ser	Ile	Ser	Cys	Arg	Ser	Ser	Gln	Ser	Leu	Ile	
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	Arg	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	

-continued

80	85	90
Phe Thr Leu Lys Ile Ser Arg Val Glu Ala Glu Asp Val Gly Val		
95	100	105
Tyr Tyr Cys Ser Gln Ser Thr His Val Pro Trp Thr Phe Gly Gln		
110	115	120
Gly Thr Lys Val Glu Ile Lys Arg Thr Val Ala Ala Pro Ser Val		
125	130	135
Phe Ile Phe Pro Pro Ser Asp Glu Gln Leu Lys Ser Gly Thr Ala		
140	145	150
Ser Val Val Cys Leu Leu Asn Asn Phe Tyr Pro Arg Glu Ala Lys		
155	160	165
Val Gln Trp Lys Val Asp Asn Ala Leu Gln Ser Gly Asn Ser Gln		
170	175	180
Glu Ser Val Thr Glu Gln Asp Ser Lys Asp Ser Thr Tyr Ser Leu		
185	190	195
Ser Ser Thr Leu Thr Leu Ser Lys Ala Asp Tyr Glu Lys His Lys		
200	205	210
Val Tyr Ala Cys Glu Val Thr His Gln Gly Leu Ser Ser Pro Val		
215		
Thr Lys Ser Phe Asn Arg Gly Glu Cys.		
(SEQ ID NO: 11)		

[0062] A preferred heavy chain for a humanized antibody of the present invention has the amino acid sequence:

1	5	10	15	(SEQ ID NO: 12)
Glu Val Gln Leu Val Glu Ser Gly Gly Gly Leu Val Gln Pro Gly				
20	25	30		
Gly Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser				
35	40	45		
Arg Tyr Ser Met Ser Trp Val Arg Gln Ala Pro Gly Lys Gly Leu				
50	55	60		
Glu Leu Val Ala Gln Ile Asn Ser Val Gly Asn Ser Thr Tyr Tyr				
65	70	75		
Pro Asp Thr Val Lys Gly Arg Phe Thr Ile Ser Arg Asp Asn Ala				
80	85	90		
Lys Asn Thr Leu Tyr Leu Gln Met Asn Ser Leu Arg Ala Glu Asp				
95	100	105		
Thr Ala Val Tyr Tyr Cys Ala Ser Gly Asp Tyr Trp Gly Gln Gly				

-continued

110	115	120
Thr Leu Val Thr Val Ser Ser Ala Ser Thr Lys Gly Pro Ser Val		
125	130	135
Phe Pro Leu Ala Pro Ser Ser Lys Ser Thr Ser Gly Gly Thr Ala		
140	145	150
Ala Leu Gly Cys Leu Val Lys Asp Tyr Phe Pro Glu Pro Val Thr		
155	160	165
Val Ser Trp Asn Ser Gly Ala Leu Thr Ser Gly Val His Thr Phe		
170	175	180
Pro Ala Val Leu Gln Ser Ser Gly Leu Tyr Ser Leu Ser Ser Val		
185	190	195
Val Thr Val Pro Ser Ser Ser Leu Gly Thr Gln Thr Tyr Ile Cys		
200	205	210
Asn Val Asn His Lys Pro Ser Asn Thr Lys Val Asp Lys Lys Val		
215	220	225
Glu Pro Lys Ser Cys Asp Lys Thr His Thr Cys Pro Pro Cys Pro		
230	235	240
Ala Pro Glu Leu Leu Gly Gly Pro Ser Val Phe Leu Phe Pro Pro		
245	250	255
Lys Pro Lys Asp Thr Leu Met Ile Ser Arg Thr Pro Glu Val Thr		
260	265	270
Cys Val Val Val Asp Val Ser His Glu Asp Pro Glu Val Lys Phe		
275	280	285
Asn Trp Tyr Val Asp Gly Val Glu Val His Asn Ala Lys Thr Lys		
290	295	300
Pro Arg Glu Glu Gln Tyr Asn Ser Thr Tyr Arg Val Val Ser Val		
305	310	315
Leu Thr Val Leu His Gln Asp Trp Leu Asn Gly Lys Glu Tyr Lys		
320	325	330
Cys Lys Val Ser Asn Lys Ala Leu Pro Ala Pro Ile Glu Lys Thr		
335	340	345
Ile Ser Lys Ala Lys Gly Gln Pro Arg Glu Pro Gln Val Tyr Thr		
350	355	360
Leu Pro Pro Ser Arg Asp Glu Leu Thr Lys Asn Gln Val Ser Leu		
365	370	375
Thr Cys Leu Val Lys Gly Phe Tyr Pro Ser Asp Ile Ala Val Glu		

-continued

380 385 390
 Trp Glu Ser Asn Gly Gln Pro Glu Asn Asn Tyr Lys Thr Thr Pro
 395 400 405
 Pro Val Leu Asp Ser Asp Gly Ser Phe Phe Leu Tyr Ser Lys Leu
 410 415 420
 Thr Val Asp Lys Ser Arg Trp Gln Gln Gly Asn Val Phe Ser Cys
 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.

[0063] 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.

[0064] 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:

amino acids are Ala, Cys, Asp, Glu, Phe, Gly, His, Ile, Lys, Leu, Met, Asn, Pro, Gln, Arg, Ser, Thr, Val, Trp, and Tyr.

[0070] A preferred deglycosylated humanized antibody is a humanized form of m266, wherein the deglycosylated heavy chain CDR2 is SEQ ID NO:13, wherein:

[0071] 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;

[0072] 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

1 5 10 15
 Gln Ile Asn Ser Val Gly Xaa Xaa Xaa Tyr Tyr Pro Asp Thr Val Lys Gly (SEQ ID NO: 13)

[0065] wherein:

[0066] 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;

[0067] 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

[0068] 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;

[0069] By "any amino acid" is meant any naturally-occurring amino acid. Preferred naturally-occurring

[0073] 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.

[0074] 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 (SEQ ID NO: 14)

Xaa Val Gln Leu Val Glu Xaa Gly Gly Gly Leu Val Gln Pro Gly

 20 25 30

Gly Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe 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 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

[0075] wherein:

[0076] Xaa at position 1 is Glu or Gln;

[0077] Xaa at position 7 is Ser or Leu;

[0078] Xaa at position 46 is Glu, Val, Asp, or Ser;

[0079] 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

[0080] 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

[0081] 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

[0082] Xaa at position 63 is Thr or Ser;

[0083] Xaa at position 75 is Ala, Ser, Val, or Thr;

[0084] Xaa at position 76 is Lys or Arg;

[0085] Xaa at position 89 is Glu or Asp; and

[0086] Xaa at position 107 is Leu or Thr.

[0087] 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:

1 5 10 15 (SEQ ID NO: 15)

Glu Val Gln Leu Val Glu Ser Gly Gly Gly Leu Val Gln Pro Gly

 20 25 30

Gly Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser

 35 40 45

Arg Tyr Ser Met Ser Trp Val Arg Gln Ala Pro Gly Lys Gly Leu

 50 55 60

Glu Leu Val Ala Gln Ile Asn Ser Val Gly Xaa Xaa Xaa Tyr Tyr

-continued

65	70	75
Pro Asp Thr Val Lys Gly Arg Phe Thr Ile Ser Arg Asp Asn Ala		
80	85	90
Lys Asn Thr Leu Tyr Leu Gln Met Asn Ser Leu Arg Ala Glu Asp		
95	100	105
Thr Ala Val Tyr Tyr Cys Ala Ser Gly Asp Tyr Trp Gly Gln Gly		
110		
Thr Leu Val Thr Val Ser Ser.		

[0088] wherein:

[0089] 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

[0090] Xaa at position 57 is any amino acid, provided that if Xaa at position 56 is Asn and Xaa at position 57 is Ser or Thr, then Xaa at position 57 is Asp or Pro; and

[0091] 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.

[0092] 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	(SEQ ID NO: 16)
Glu Val Gln Leu Val Glu Ser Gly Gly Gly Leu Val Gln Pro Gly				
20	25	30		
Gly Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser				
35	40	45		
Arg Tyr Ser Met Ser Trp Val Arg Gln Ala Pro Gly Lys Gly Leu				
50	55	60		
Glu Leu Val Ala Gln Ile Asn Ser Val Gly Xaa Xaa Xaa Tyr Tyr				
65	70	75		
Pro Asp Thr Val Lys Gly Arg Phe Thr Ile Ser Arg Asp Asn Ala				
80	85	90		
Lys Asn Thr Leu Tyr Leu Gln Met Asn Ser Leu Arg Ala Glu Asp				
95	100	105		
Thr Ala Val Tyr Tyr Cys Ala Ser Gly Asp Tyr Trp Gly Gln Gly				
110	115	120		
Thr Leu Val Thr Val Ser Ser Ala Ser Thr Lys Gly Pro Ser Val				
125	130	135		
Phe Pro Leu Ala Pro Ser Ser Lys Ser Thr Ser Gly Gly Thr Ala				
140	145	150		
Ala Leu Gly Cys Leu Val Lys Asp Tyr Phe Pro Glu Pro Val Thr				
155	160	165		
Val Ser Trp Asn Ser Gly Ala Leu Thr Ser Gly Val His Thr Phe				

-continued

170	175	180
Pro Ala Val Leu Gln Ser Ser Gly Leu Tyr Ser Leu Ser Ser Val		
185	190	195
Val Thr Val Pro Ser Ser Ser Leu Gly Thr Gln Thr Tyr Ile Cys		
200	205	210
Asn Val Asn His Lys Pro Ser Asn Thr Lys Val Asp Lys Lys Val		
215	220	225
Glu Pro Lys Ser Cys Asp Lys Thr His Thr Cys Pro Pro Cys Pro		
230	235	240
Ala Pro Glu Leu Leu Gly Gly Pro Ser Val Phe Leu Phe Pro Pro		
245	250	255
Lys Pro Lys Asp Thr Leu Met Ile Ser Arg Thr Pro Glu Val Thr		
260	265	270
Cys Val Val Val Asp Val Ser His Glu Asp Pro Glu Val Lys Phe		
275	280	285
Asn Trp Tyr Val Asp Gly Val Glu Val His Asn Ala Lys Thr Lys		
290	295	300
Pro Arg Glu Glu Gln Tyr Asn Ser Thr Tyr Arg Val Val Ser Val		
305	310	315
Leu Thr Val Leu His Gln Asp Trp Leu Asn Gly Lys Glu Tyr Lys		
320	325	330
Cys Lys Val Ser Asn Lys Ala Leu Pro Ala Pro Ile Glu Lys Thr		
335	340	345
Ile Ser Lys Ala Lys Gly Gln Pro Arg Glu Pro Gln Val Tyr Thr		
350	355	360
Leu Pro Pro Ser Arg Asp Glu Leu Thr Lys Asn Gln Val Ser Leu		
365	370	375
Thr Cys Leu Val Lys Gly Phe Tyr Pro Ser Asp Ile Ala Val Glu		
380	385	390
Trp Glu Ser Asn Gly Gln Pro Glu Asn Asn Tyr Lys Thr Thr Pro		
395	400	405
Pro Val Leu Asp Ser Asp Gly Ser Phe Phe Leu Tyr Ser Lys Leu		
410	415	420
Thr Val Asp Lys Ser Arg Trp Gln Gln Gly Asn Val Phe Ser Cys		
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		

- [0093] wherein:
- [0094] 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;
- [0095] 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
- [0096] 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.
- [0097] 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:
- [0098] Xaa at position 56 is selected from the group consisting of Ala, Gly, His, Asn, Gin, Ser, and Thr, provided that if Xaa at position 58 is Ser or Thr, then Xaa at position 56 is not Asn;
- [0099] Xaa at position 57 is selected from the group consisting of Ala, Gly, His, Asn, Gin, Ser, and Thr; and
- [0100] Xaa at position 58 is selected from the group consisting of Ala, Gly, His, Asn, Gin, Ser, and Thr, provided that if Xaa at position 56 is Asn, then Xaa at position 58 is neither Ser nor Thr.

[0101] 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.

[0102] 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").

[0103] Production of the antibodies useful in the invention typically involves recombinant techniques, as is described in PCT/US01/06191 cited above and incorporated herein by reference.

[0104] The antibodies (including immunologically reactive fragments) are administered to a subject to be evaluated for conditions associated with A β deposits such as clinical or preclinical Alzheimer's disease, or clinical or preclinical amyloid angiopathy, using standard administration tech-

niques, 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.

[0105] 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, incorporated herein by reference, 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.

[0106] 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.

[0107] 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.

[0108] 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.

[0109] 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.

[0110] 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.

[0111] Typical dosage levels can be optimized using standard clinical techniques and will be dependent on the mode of administration.

[0112] 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. Pat. No. 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.

[0113] 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.

[0114] 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.

[0115] The following examples are intended to illustrate but not to limit the invention.

[0116] 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 $A\beta$ 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 $A\beta$ peptide, or at any other epitopes within the $A\beta$ peptide. The preparation of this antibody is described in U.S. Pat. No. 5,766,846, incorporated herein by reference. 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 Circulating Peptide Levels with Plaques

[0117] 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, $A\beta$ 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 $A\beta$ deposits while others do not.

[0118] 53 homozygous mice at 12 months were used in this study.

[0119] 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 μ g 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. Natl. Acad. Sci. USA* (2001) 98:8850-8855, and evaluated as a percentage of brain covered by $A\beta$ deposits.

[0120] As shown in FIGS. 1A, 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.

[0121] As shown in FIGS. 2A and B, however, the plasma level of $A\beta_{40}$ strongly correlated with the percentage of $A\beta$ deposition in hippocampus one hour after m266 injection, as did the ratio of $A\beta_{40}$ to $A\beta_{42}$.

[0122] FIGS. 3A, 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.

[0123] FIGS. 4A, B and C show analogous results with respect to entry rate of the two $A\beta$ 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 $A\beta$ deposition were rate of $A\beta_{40}$ entry and the ratio of $A\beta_{40}/A\beta_{42}$.

[0124] FIGS. 5A 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 β deposition could be completely distinguished from those with high deposition as a function of the level of plasma A β_{40} .

EXAMPLE 2

[0125] 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 μ g IV of m266, plasma samples were obtained at 5 minutes, 1 hour, 3 hours, 6 hours and 24 hours and levels of A β_{40} and A β_{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 β peptide (using quantitative A β immunofluorescence staining) and the area occupied by amyloid (by thioflavine-S (amyloid) staining). The regions from the other hemisphere were assessed for A β peptide by ELISA.

[0126] 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.

[0127] FIG. 6 shown the results obtained. Briefly, it was found that the base line levels (prior to injection) of A β_{40} , A β_{42} and the calculated A $\beta_{40/42}$ ratio prior to injection with m266 did not correlate with percentage A β or amyloid deposition. However, following administration of m266, there were significant correlations between plasma A β_{40} , A β_{42} , and A $\beta_{40/42}$ ratio with both A β and amyloid burden in the hippocampus and cingulate cortex.

[0128] 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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Gln Pro Ala Ser Ile Ser Cys Arg Ser Ser Gln Ser Leu Xaa Tyr Ser
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Asp Gly Asn Ala Tyr Leu His Trp Phe Leu Gln Lys Pro Gly Gln Ser
35 40 45
Pro Xaa Leu Leu Ile Tyr Lys Val Ser Asn Arg Phe Ser Gly Val Pro
50 55 60
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 Xaa Gly Val Tyr Tyr Cys Ser Gln Ser
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Thr His Val Pro Trp Thr Phe Gly Xaa Gly Thr Xaa Xaa Glu Ile Lys
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Arg

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Xaa Val Gln Leu Val Glu Xaa Gly Gly Leu Val Gln Pro Gly Gly
1          5          10          15

Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser Arg Tyr
          20          25          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          55          60

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

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

Ala Ser Gly Asp Tyr Trp Gly Gln Gly Thr Xaa Val Thr Val Ser Ser
          100          105          110


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Asp Val Val Met Thr Gln Ser Pro Leu Ser Leu Pro Val Thr Leu Gly
1          5          10          15

Gln Pro Ala Ser Ile Ser Cys Arg Ser Ser Gln Ser Leu Ile Tyr Ser
          20          25          30

Asp Gly Asn Ala Tyr Leu His Trp Phe Leu Gln Lys Pro Gly Gln Ser
          35          40          45

Pro Arg Leu Leu Ile Tyr Lys Val Ser Asn Arg Phe Ser Gly Val Pro
          50          55          60

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          90          95

Thr His Val Pro Trp Thr Phe Gly Gln Gly Thr Lys Val Glu Ile Lys
          100          105          110

Arg

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1           5           10           15
Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser Arg Tyr
20           25           30
Ser Met Ser Trp Val Arg Gln Ala Pro Gly Lys Gly Leu Glu Leu Val
35           40           45
Ala Gln Ile Asn Ser Val Gly Asn Ser Thr 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           70           75           80
Leu Gln Met Asn Ser Leu Arg Ala Glu Asp Thr Ala Val Tyr Tyr Cys
85           90           95
Ala Ser Gly Asp Tyr Trp Gly Gln Gly Thr Leu Val Thr Val Ser Ser
100          105          110

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Gln Pro Ala Ser Ile Ser Cys Arg Ser Ser Gln Ser Leu Ile Tyr Ser
20           25           30
Asp Gly Asn Ala Tyr Leu His Trp Phe Leu Gln Lys Pro Gly Gln Ser
35           40           45
Pro Arg Leu Leu Ile Tyr Lys Val Ser Asn Arg Phe Ser Gly Val Pro
50           55           60
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           90           95
Thr His Val Pro Trp Thr Phe Gly Gln Gly Thr Lys Val Glu Ile Lys
100          105          110
Arg Thr Val Ala Ala Pro Ser Val Phe Ile Phe Pro Pro Ser Asp Glu
115          120          125
Gln Leu Lys Ser Gly Thr Ala Ser Val Val Cys Leu Leu Asn Asn Phe
130          135          140
Tyr Pro Arg Glu Ala Lys Val Gln Trp Lys Val Asp Asn Ala Leu Gln

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145	150	155	160
Ser Gly Asn Ser	Gln Glu Ser Val Thr	Glu Gln Asp Ser Lys Asp Ser	
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Thr Tyr Ser Leu Ser Ser Thr Leu Thr Leu Ser Lys Ala Asp Tyr Glu			
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Lys His Lys Val Tyr Ala Cys Glu Val Thr His Gln Gly Leu Ser Ser			
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Pro Val Thr Lys Ser Phe Asn Arg Gly Glu Cys			
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Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser Arg Tyr			
	20	25	30
Ser Met Ser Trp Val Arg Gln Ala Pro Gly Lys Gly Leu Glu Leu Val			
	35	40	45
Ala Gln Ile Asn Ser Val Gly Asn Ser Thr 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	70	75
Leu Gln Met Asn Ser Leu Arg Ala Glu Asp Thr Ala Val Tyr Tyr Cys			
	85	90	95
Ala Ser Gly Asp Tyr Trp Gly Gln Gly Thr Leu Val Thr Val Ser Ser			
	100	105	110
Ala Ser Thr Lys Gly Pro Ser Val Phe Pro Leu Ala Pro Ser Ser Lys			
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Ser Thr Ser Gly Gly Thr Ala Ala Leu Gly Cys Leu Val Lys Asp Tyr			
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Phe Pro Glu Pro Val Thr Val Ser Trp Asn Ser Gly Ala Leu Thr Ser			
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Gly Val His Thr Phe Pro Ala Val Leu Gln Ser Ser Gly Leu Tyr Ser			
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Leu Ser Ser Val Val Thr Val Pro Ser Ser Ser Leu Gly Thr Gln Thr			
	180	185	190
Tyr Ile Cys Asn Val Asn His Lys Pro Ser Asn Thr Lys Val Asp Lys			
	195	200	205
Lys Val Glu Pro Lys Ser Cys Asp Lys Thr His Thr Cys Pro Pro Cys			
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Pro Ala Pro Glu Leu Leu Gly Gly Pro Ser Val Phe Leu Phe Pro Pro			
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Lys Pro Lys Asp Thr Leu Met Ile Ser Arg Thr Pro Glu Val Thr Cys			
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			260					265						270	
Tyr	Val	Asp	Gly	Val	Glu	Val	His	Asn	Ala	Lys	Thr	Lys	Pro	Arg	Glu
		275					280					285			
Glu	Gln	Tyr	Asn	Ser	Thr	Tyr	Arg	Val	Val	Ser	Val	Leu	Thr	Val	Leu
		290				295					300				
His	Gln	Asp	Trp	Leu	Asn	Gly	Lys	Glu	Tyr	Lys	Cys	Lys	Val	Ser	Asn
305				310						315					320
Lys	Ala	Leu	Pro	Ala	Pro	Ile	Glu	Lys	Thr	Ile	Ser	Lys	Ala	Lys	Gly
			325						330					335	
Gln	Pro	Arg	Glu	Pro	Gln	Val	Tyr	Thr	Leu	Pro	Pro	Ser	Arg	Asp	Glu
			340					345					350		
Leu	Thr	Lys	Asn	Gln	Val	Ser	Leu	Thr	Cys	Leu	Val	Lys	Gly	Phe	Tyr
		355					360					365			
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					400
Leu	Tyr	Ser	Lys	Leu	Thr	Val	Asp	Lys	Ser	Arg	Trp	Gln	Gln	Gly	Asn
			405					410					415		
Val	Phe	Ser	Cys	Ser	Val	Met	His	Glu	Ala	Leu	His	Asn	His	Tyr	Thr
			420					425				430			
Gln	Lys	Ser	Leu	Ser	Leu	Ser	Pro	Gly	Lys						
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Gln	Ile	Asn	Ser	Val	Gly	Xaa	Xaa	Xaa	Tyr	Tyr	Pro	Asp	Thr	Val	Lys
1				5					10					15	

Gly

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Xaa Val Gln Leu Val Glu Xaa Gly Gly Gly Leu Val Gln Pro Gly Gly
1          5          10          15

Ser Leu Arg Leu Ser Cys Ala Ala Ser Gly Phe Thr Phe Ser Arg Tyr
20          25          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 Xaa Xaa Xaa Tyr Tyr Pro Asp Xaa Val
50          55          60

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

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Leu Gln Met Asn Ser Leu Arg Ala Xaa Asp Thr Ala Val Tyr Tyr Cys
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Ala Ser Gly Asp Tyr Trp Gly Gln Gly Thr Xaa Val Thr Val Ser Ser
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 <222> LOCATION: (56)..(56)
 <223> OTHER INFORMATION: Xaa at position 56 is any amino acid, provided
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 Thr

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Glu Val Gln Leu Val Glu Ser Gly Gly Gly Leu Val Gln Pro Gly Gly
1 5 10 15

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

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

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 70 75 80

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

Ala Ser Gly Asp Tyr Trp Gly Gln Gly Thr Leu Val Thr Val Ser Ser
100 105 110

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 <220> FEATURE:
 <221> NAME/KEY: MISC_FEATURE
 <222> LOCATION: (56)..(56)
 <223> OTHER INFORMATION: Xaa at position 56 is any amino acid, provided

-continued

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> FEATURE:

<221> NAME/KEY: MISC_FEATURE

<222> LOCATION: (57)..(57)

<223> OTHER INFORMATION: 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

<220> FEATURE:

<221> NAME/KEY: MISC_FEATURE

<222> LOCATION: (58)..(58)

<223> OTHER INFORMATION: 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> SEQUENCE: 16

Glu Val Gln Leu Val Glu Ser Gly Gly Gly Leu Val Gln Pro Gly Gly
1 5 10 15

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

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

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 70 75 80

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

Ala Ser Gly Asp Tyr Trp Gly Gln Gly Thr Leu Val Thr Val Ser Ser
100 105 110

Ala Ser Thr Lys Gly Pro Ser Val Phe Pro Leu Ala Pro Ser Ser Lys
115 120 125

Ser Thr Ser Gly Gly Thr Ala Ala Leu Gly Cys Leu Val Lys Asp Tyr
130 135 140

Phe Pro Glu Pro Val Thr Val Ser Trp Asn Ser Gly Ala Leu Thr Ser
145 150 155 160

Gly Val His Thr Phe Pro Ala Val Leu Gln Ser Ser Gly Leu Tyr Ser
165 170 175

Leu Ser Ser Val Val Thr Val Pro Ser Ser Ser Leu Gly Thr Gln Thr
180 185 190

Tyr Ile Cys Asn Val Asn His Lys Pro Ser Asn Thr Lys Val Asp Lys
195 200 205

Lys Val Glu Pro Lys Ser Cys Asp Lys Thr His Thr Cys Pro Pro Cys
210 215 220

Pro Ala Pro Glu Leu Leu Gly Gly Pro Ser Val Phe Leu Phe Pro Pro
225 230 235 240

Lys Pro Lys Asp Thr Leu Met Ile Ser Arg Thr Pro Glu Val Thr Cys
245 250 255

Val Val Val Asp Val Ser His Glu Asp Pro Glu Val Lys Phe Asn Trp
260 265 270

Tyr Val Asp Gly Val Glu Val His Asn Ala Lys Thr Lys Pro Arg Glu
275 280 285

Glu Gln Tyr Asn Ser Thr Tyr Arg Val Val Ser Val Leu Thr Val Leu
290 295 300

His Gln Asp Trp Leu Asn Gly Lys Glu Tyr Lys Cys Lys Val Ser Asn
305 310 315 320

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Lys	Ala	Leu	Pro	Ala	Pro	Ile	Glu	Lys	Thr	Ile	Ser	Lys	Ala	Lys	Gly
			325						330					335	
Gln	Pro	Arg	Glu	Pro	Gln	Val	Tyr	Thr	Leu	Pro	Pro	Ser	Arg	Asp	Glu
		340					345					350			
Leu	Thr	Lys	Asn	Gln	Val	Ser	Leu	Thr	Cys	Leu	Val	Lys	Gly	Phe	Tyr
		355				360					365				
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					400	
Leu	Tyr	Ser	Lys	Leu	Thr	Val	Asp	Lys	Ser	Arg	Trp	Gln	Gln	Gly	Asn
			405					410						415	
Val	Phe	Ser	Cys	Ser	Val	Met	His	Glu	Ala	Leu	His	Asn	His	Tyr	Thr
			420					425					430		
Gln	Lys	Ser	Leu	Ser	Leu	Ser	Pro	Gly	Lys						
		435					440								

1-15. (Canceled).

16. A method of diagnosing preclinical or clinical Alzheimer's disease in a subject comprising:

- a) administering to said subject an amount of an antibody which specifically binds an epitope contained within positions 13-28 of A β or an antibody that sequesters A β peptide from its bound, circulating form in the blood and alters clearance of soluble and bound forms of A β in the central nervous system and in plasma,

wherein said amount is effective to alter the levels of circulating A β peptides in the blood of said subject when said subject is in a preclinical or clinical stage of Alzheimer's disease;

- b) measuring the level of A β_{40} , A β_{42} , or the ratio of A α_{40} /A β_{42} in the blood of said subject at a time interval after said administering; and

- c) comparing the level of A β_{40} , A β_{42} , or the ratio of A β_{40} /A β_{42} in said subject with a control value of said levels, wherein differing levels of A β_{40} , A β_{42} , or the ratio of A β_{40} /A β_{42} in said subject as compared to control levels or ratio identifies said subject as in a preclinical or clinical stage of Alzheimer's disease.

17. The method of claim 16, wherein said time interval is less than 1 week.

18. The method of claim 16, wherein said time interval is less than or equal to 24 hours.

19. The method of claim 18, wherein said time interval is less than or equal to 3 hours.

20. The method of claim 16, wherein said administering is by injection of said antibodies.

21. The method of claim 16, wherein the subject is human and the antibody is a humanized antibody or a fragment thereof.

22. The method of claim 21, wherein the humanized antibody or fragment thereof comprises a light chain of SEQ ID NO:11 and a heavy chain SEQ ID NO:12.

23. The method of claim 21, 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.

24. The method of claim 21, 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.

25. The method of claim 16, wherein said antibody is a fragment.

26. The method of claim 16, wherein the antibody specifically binds to an epitope of A β to which antibody 266 specifically binds.

27. The method of claim 16, wherein the antibody is a single-chain antibody.

28. 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 β or an antibody that sequesters A β peptide from its bound, circulating form in the blood and alters clearance of soluble and bound forms of A β in the central nervous system and in plasma; and

instructions for administering the antibody.

29. The kit of claim 28, which further comprises a reagent for assessing the level of A β_{40} and/or A β_{42} in the blood.

30. The kit of claim 28, which further comprises a description of control values for A β_{40} , A β_{42} , and/or A β_{40} /A β_{42} ratios in blood of normal subjects.

* * * * *

专利名称(译)	阿尔茨海默病的测定方法		
公开(公告)号	US20040248197A1	公开(公告)日	2004-12-09
申请号	US10/486908	申请日	2002-08-16
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其他公开文献	US7771722		
外部链接	Espacenet USPTO		
摘要(译)			

临床前和临床阿尔茨海默病的诊断测试基于Abeta40，Abeta42的血浆水平，它们的比例，或在施用螯合Abeta的抗体后的进入速率。来自对照值的任何这些参数的改变确定了临床前或临床阿尔茨海默氏病。

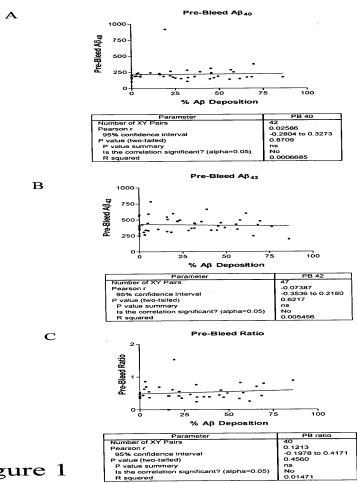


Figure 1