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(54) **ANTI-MULLERIAN INHIBITING  
SUBSTANCE TYPE II RECEPTOR (MISIIR)  
IMMUNOCONJUGATES TO DETECT AND  
TREAT CANCER**

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- (60) Provisional application No. 60/485,622, filed on Jul. 8, 2003.

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- (52) **U.S. Cl.** ..... **424/1.49**; 530/389.1; 530/391.3;  
424/172.1; 530/391.7; 435/188; 435/7.1

(57) **ABSTRACT**

Compositions and methods for detecting and treating cancers expressing Mullerian inhibiting substance Type II receptor (MISIIR) are provided.

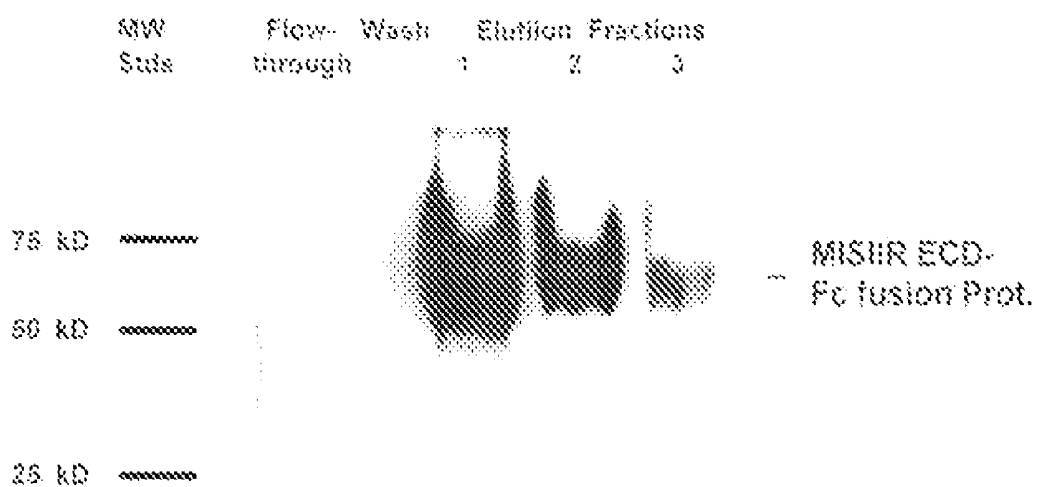


Figure 1

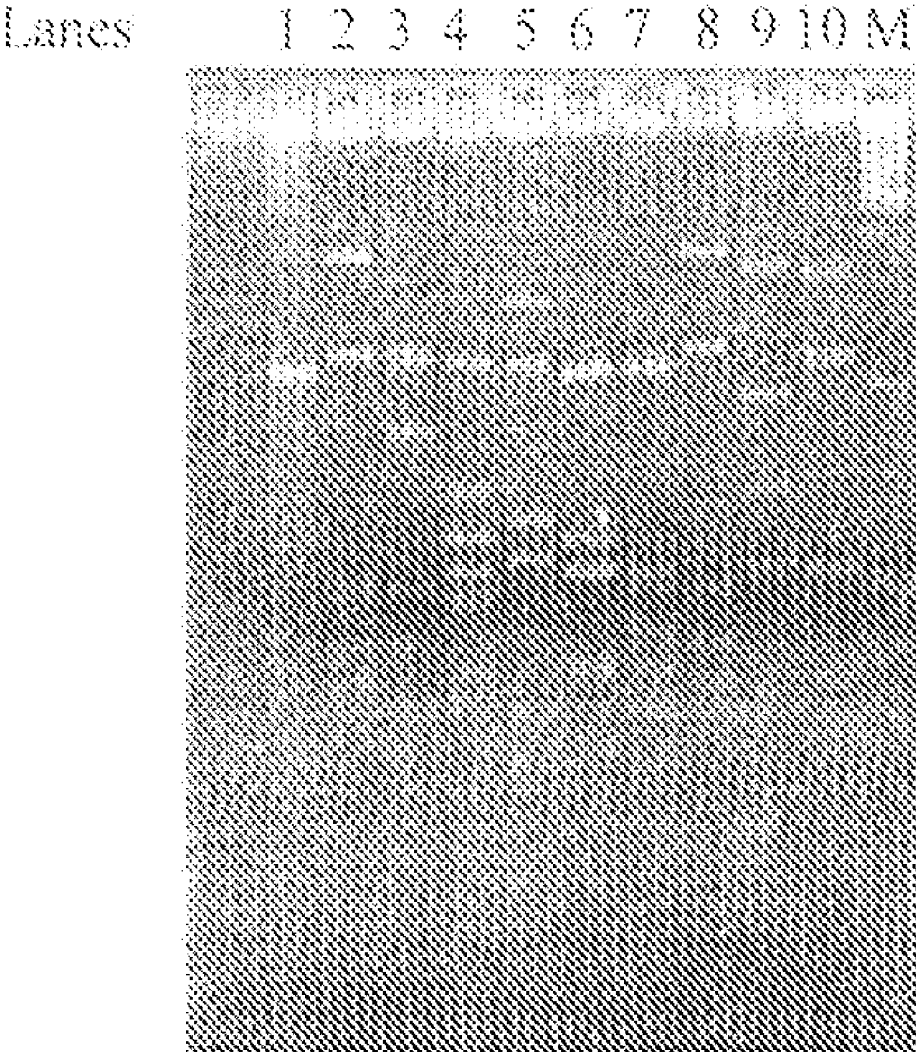


Figure 2

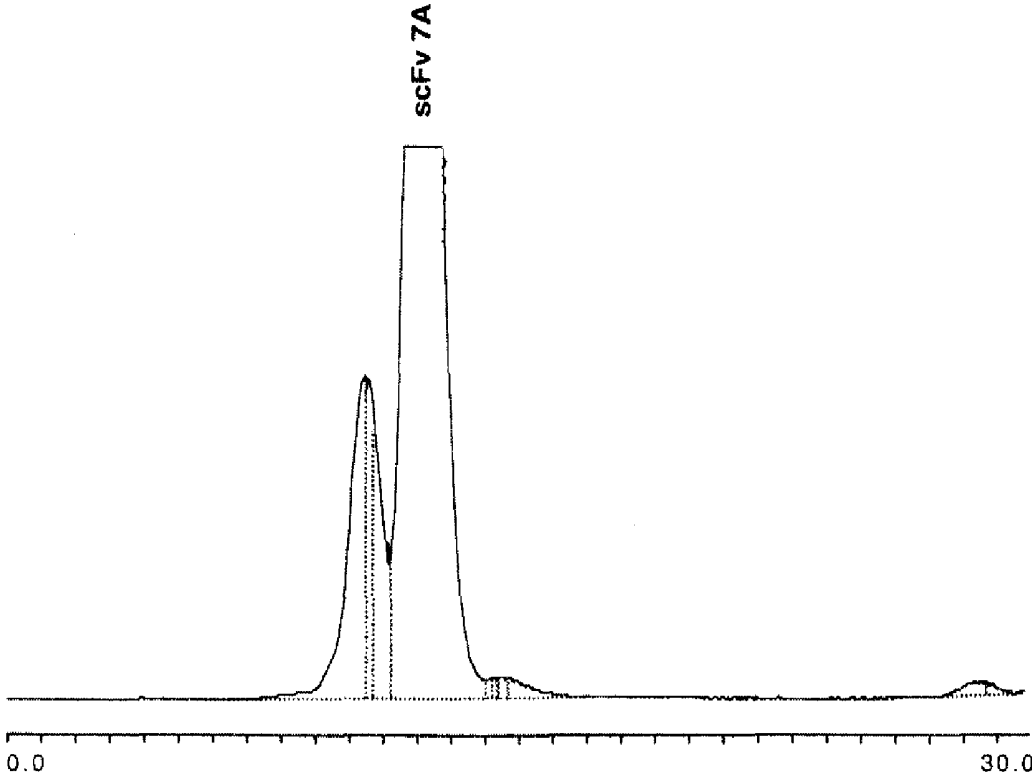


Figure 3



Figure 4

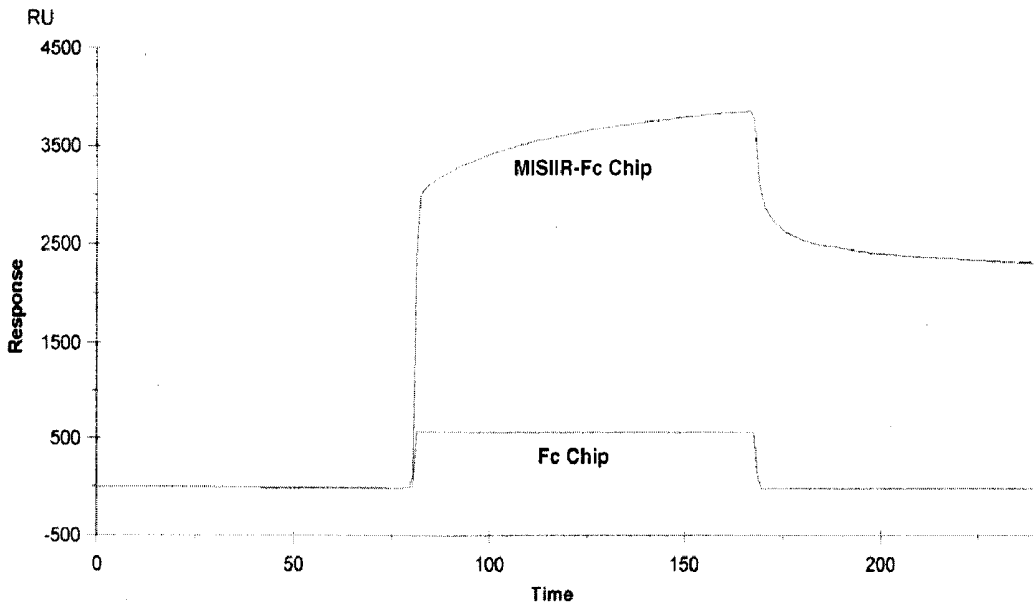


Figure 5

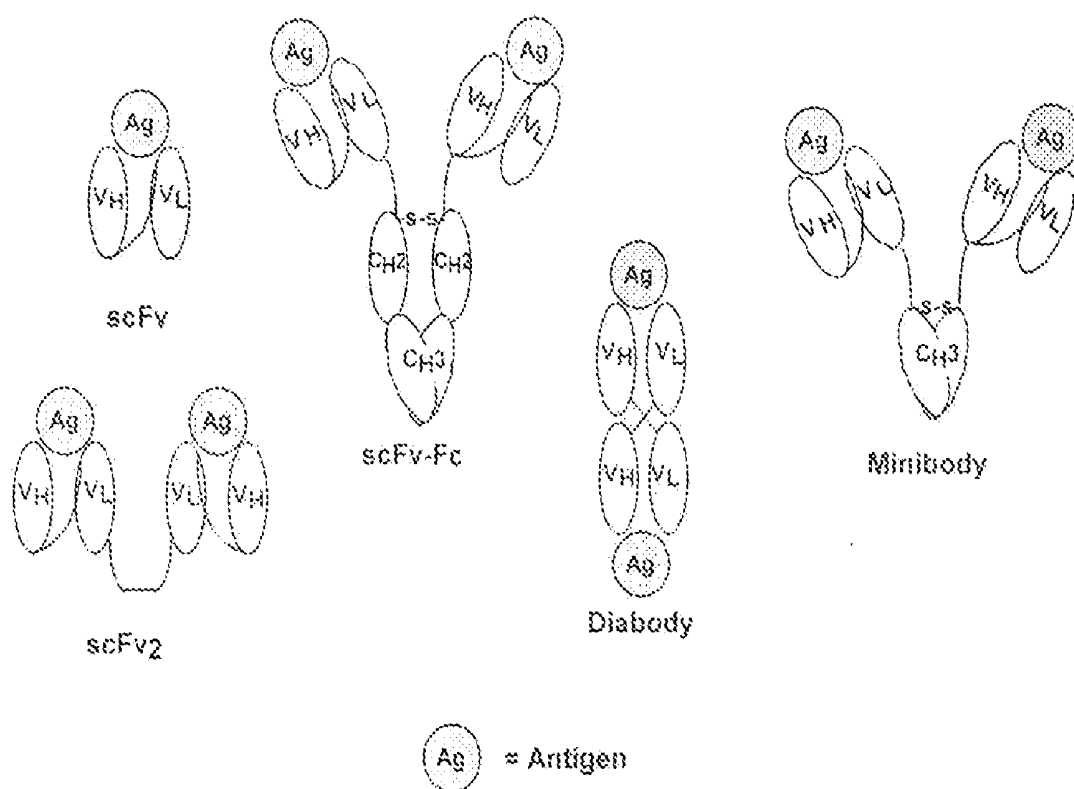


Figure 6

1 GGCGCGCCCA CCATCACCAT CACCATCCCC CAAACAGGCG  
41 AACCTGTGTG TTCTTTGAGG CCCCTGGAGT GCGGGGAAGC  
81 ACAAAGACAC TGGGAGAGCT GCTAGATACA GGCACAGAGC  
121 TCCCAGAGC TATCCGCTGC CTCTACAGCC GCTGCTGCTT  
161 TGGGATCTGG AACCTGACCC AAGACCGGGC ACAGGTGGAA  
201 ATGCAAGGAT GCCGAGACAG TGATGAGCCA GGCTGTGAGT  
241 CCCTCCACTG TGACCCAAGT CCCCAGAGCC ACCCCAGCCC  
281 TGGCTCCACT CTCTTCACCT GCTCCTGTGG CACTGACTTC  
321 TGCAATGCCA ATTACAGCCA TCTGCCTCCT CCAGGGAGCC  
361 CTGGGACTCC TGGCTCCCAG GGTCCCCAGG CTGCCCCAGG  
401 TGAGTCCGGT ACCGTTGAGC CCAAATCTTG TGACAAAACT  
441 CACACATGCC CACCGTGCCC AGCACCTGAA CTCCTGGGGG  
481 GACCGTCAGT CTTCTCTTC CCCCCAAAAC CCAAGGACAC  
521 CCTCATGATC TCCCGGACCC CTGAGGTCAC ATGCGTGGTG  
561 GTGGACGTGA GCCACGAAGA CCCTGAGGTC AAGTTCAACT  
601 GGTACGTGGA CGGCGTGGAG GTGCATAATG CCAAGACAAA  
641 GCCGCGGGAG GAGCAGTACA ACAGCACGTA CCGTGTGGTC  
681 AGCGTCCTCA CCGTCCTGCA CCAGGACTGG CTGAATGGCA  
721 AGGAGTACAA GTGCAAGGTC TCCAACAAAG CCCTCCCAGC  
761 CCCCATCGAG AAAACCATCT CCAAAGCCAA AGGGCAGCCC  
801 CGAGAACCAC AGGTGTACAC CCTGCCCCCA TCCCGGGATG  
841 AGCTGACCAA GAACCAGGTC AGCCTGACCT GCCTGGTCAA  
881 AGGCTTCTAT CCCAGCGACA TCGCCGTGGA GTGGGAGAGC  
921 AATGGGCAGC CGGAGAACAA CTACAAGACC ACGCCTCCCG  
961 TGCTGGACTC CGACGGCTCC TTCTTCCTCT ACAGCAAGCT  
1001 CACCGTGGAC AAGAGCAGGT GGCAGCAGGG GAACGTCTTC  
1041 TCATGCTCCG TGATGCATGA GGCTCTGCAC AACCCTACA  
1081 CGCAGAAGAG CCTCTCCCTG TCTCCGGGTA AACTCGAG

**Figure 7**

1 ATGGCCCAGG TCACCTTGAA GGAGTCTGGT CCTACGCTGG  
41 TGAAACCCAC ACAGACCCTC ACGCTGACCT GCACGTTCTC  
81 TGGGTTCTCA CTCACCACTA GTGGAGTGGG TGTGGGCTGG  
121 ATCCGTCAGG CCCCAGGAAA GGCCCCGGAG TGGCTTGCAC  
161 TCATTGATTG GGATGACGAT AAATACTACA GCACATCTCT  
201 GAAGACCAGG CTCACCATCT CCAAGGACAC CTCCAAAAC  
241 CAGGTGGTCC TTACAATGAC CAACATGGAC CCTGTGGACA  
281 CAGCCACATA TTA CTGTGCC CGGGACTCTT ATTATGGCTC  
321 GGGGAGTCAT TTTGACTTCT GGGGCCAGGG AACCCCTGGTC  
361 ACCGTCTCCT CAGGTGGCGG CGGTTCCGGA GGTGGTGGTT  
401 CTGGCGGTGG TGGCAGCTCC TATGAGCTGA CTCAGCCACC  
441 CTCAGTGTCC GTGTCCCCTG GACAGACAGC CACCATCACC  
481 TGTTCTGGAC ATGACTTGCG GAATAAATAT GCTCATTGGT  
521 ATCAGCAGAA GCCAGGACAG TCCCCTGTGC TGGTCGTCTA  
561 TCAAGATGCT AAGCGGCCCT CAGGAATCCC TGAGCGATTC  
601 TCTGGCTCCA ACTCTGGGAA CACAGCCACT CTGACCATCA  
641 GCGGGACCCA GGCTATGGAT GAGGCTGACT ATTACTGTCA  
681 GACGTGGGAC AGGAGCACAG TGGTCTTCGG CGGAGGGACC  
721 AAGCTGACCG TCCTAGGTCA GCCCAAGGCT GCCCCCTCGG  
761 CGGCCGC

**Figure 8A**

MAQVTLKESGPTLVKPTQTL	20
TLTCTFSGFSLTTSVGVGW	40
IRQAPGKAPEWLALIDWDDD	60
KYYSTSLKTRLTISKDTSKN	80
QVVLTMNMDPVDATYYCA	100
RDSYYGSGSHFDFWGQGLV	120
TVSSGGGGSGGGGGSS	140
YELTQPPSVSVSPGQTATIT	160
CSGHDLRNKYAHWYQQKPGQ	180
SPVLVVYQDAKRPSGIPERF	200
SGSNSGNTATLTISGTQAMD	220
EADYYCQTWDRSTVVFGGGT	240
KLTVLGQPKAAPSAA	255

## Figure 8B

1 ATGGCCCAGG TGCAGCTGGT GCAGTCTGGA ACTGAGGTGA  
41 AGAGGCCTGG GGCCTCAGTG AAGATCTCCT GCAGGGCTAC  
81 TGGTTACACC TTTAGTGATT ATGGTATCAG TTGGATGCGA  
121 CAGGCCCTG GACAAGGGCT TGAGTGGATG GGATGGATCA  
161 GCGCTTACAA TGGTAACACA AACTATGCAC AGAAGCTCCA  
201 GGGCAGAGTC ACCATGACCA CAGACACGTC CACGAGCACA  
241 GCCTACATGG AGCTGAGGAG CCTCAGATAT GACGACACGG  
281 CCGTATATTA CTGTGCGAGA GATGGGAGGC GTGGTTCGGG  
321 TATTTACTGG GGTGTGTATT ATTACAACGG TATGGACGTC  
361 TGGGGCCAAG GGACCACGGT CACCGTCTCC TCAGGTGGCG  
401 GCGGTTCCGG AGGTGGTGGT TCTGGCGGTG GTGGCAGTCA  
441 GCCTGTGCTG ACTCAGCCAC CCTCAGCGTC TGGGACCCCC  
481 GGGCAGAGGG TCACCATCTC TTGTTCTGGA AGCAGGTCCA  
521 ACATCGGAAG GAATACCGTA AACTGGTATC AGCAGGTCCC  
561 AGGAATGGCC CCCAACTCC TCATCTATAG TAATAATCAG  
601 CGGCCCTCAG GGGTCCCTGA CCGATTCTCT GGCTCCAAGT  
641 CTGGCACCTC AGCCTCCCTG GCCATCAGTG GGCTCCAGTC  
681 TGAGGATGAG GCTGATTATT ACTGTGCAGC ATGGGATGAC  
721 AGTCTGAATG GTGTGGTATT CGGCGGAGGG ACCAAGCTGA  
761 CCGTCCTAGG TCAGCCCAAG GCCGCCCCCT CGGCGGCCGC

**Figure 9A**

MAQVQLVQSGTEVKRPGASV	20
KISCRATGYTFSDYGISWMR	40
QAPGQGLEWMGWISAYNGNT	60
NYAQKLQGRVTMTTDTSTST	80
AYMELRSLRYDDTAVYYCAR	100
DGRRGSGIYWGVYYNGMDV	120
WGQGTTVTVSSGGGGSGGGG	140
SGGGGSQPVLTPPSASGTP	160
GQRVTISCSGSRSNIGRNTV	180
NWYQQVPGMAPKLLIYSNNQ	200
RPSGVPDRFSGSKSGTSASL	220
AISGLQSEDEADYYCAAWDD	240
SLNGVVFGGGTKLTVLGQPK	260
AAPSAA	266

## Figure 9B

1 ATGGCCCAGG TGCAGCTGGT GCAGTCTGGA GGAGGCTTGG  
41 TCCAGCCTGG GGGGTCCCTG AGACTCTCCT GTGCAGCCTC  
81 TGGGTTCCACC GTCAGTAGCA ACTACATGAG CTGGGTCCGC  
121 CAGGCTCCAG GGAAGGGGCT GGAGTGGGTC TCAGCTATTA  
161 GTGGTAGTGG TGGTAGCACA TACTACGCAG ACTCCGTGAA  
201 GGGCCGGTTC ACCATCTCCA GAGACAATTC CAAGAACACG  
241 CTGTATCTGC AAATGAACAG CCTGAGAGCC GAGGACACGG  
281 CCGTATATTA CTGTGCGACG CGCCCTTCAA GGGGTAGCAG  
321 TGGCTGGTAC GGGGGGGACT ACTGGGGCCA GGAACCCTG  
361 GTCACCGTCT CCTCAGGTGG CGGCGGTTCC GGAGGTGGTG  
401 GTTCTGGCGG TGGTGGCAGC TCCTATGAGC TGA CTCAGCC  
441 ACCCTCAACT TCTGGGACTC CCGGGCAGAG GGT CACCATC  
481 TCTTGTTCTG GAAGCACCTC CAACATCGCA ACTAATAATG  
521 TAAACTGGTA CCAGTTCCTC CCAGGAACGG CCCCCAAACT  
561 CCTCATGTAT CGGAATGATC AGCGGCCCGC AGGGGTCCCT  
601 GACCGATTCT CTGGCTCCAA GTCTGGCACC TCAGCCTCCC  
641 TGGCCATCAG TGGGCTCCAA CCTGAGGATG AGGCTGACTA  
681 T TACTGTGCA GCATGGGATG ACAGCCTGGG TG GCGAGGTC  
721 TTCGGA ACTG GGACCAAGGT CAACGTCCTA GGT CAGCCCA  
761 AGGCCGCCCC CTCGGCGGCC GC

**Figure 10A**

MAQVQLVQSGGGLVQPGGSL	20
RLSCAASGFTVSSNYMSWVR	40
QAPGKGLEWVSAISGSGGST	60
YYADSVKGRFTISRDNKNT	80
LYLQMNSLRAEDTAVYYCAT	100
RPSRGSSGWYGGDYWGQGTL	120
VTVSSGGGGSGGGGSGGGGS	140
SYELTQPPSTSGTPGQRVTI	160
SCSGSTSNIATNNVNWYQFL	180
PGTAPKLLMYRNDQRPAGVP	200
DRFSGSKSGTSASLAISGLQ	220
PEDEADYYCAAWDDSLGGEV	240
FGTGTKVNVLGQPKAAPSAA	260

## Figure 10B

1 ATGGCCCAGG TGCAGCTGGT GCAGTCTGGA ACTGAGGTGA  
41 AGAGGCCTGG GGCCTCAGTG AAGATCTCCT GCAGGGCTAC  
81 TGGTTACACC TTTAGTGATT ATGGTATCAG TTGGATGCGA  
121 CAGGCCCTG GACAAGGGCT TGAGTGGATG GGATGGATCA  
161 GCGCTTACAA TGGTAACACA AACTATGCAC AGAAGCTCCA  
201 GGGCAGAGTC ACCATGACCA CAGACACGTC CACGAGCACA  
241 GCCTACATGG AGCTGAGGAG CCTCAGATAT GACGACACGG  
281 CCGTATATTA CTGTGCGAGA GATGGGAGGC GTGGTTCGGG  
321 TATTTACTGG GGTGTGTATT ATTACAACGG TATGGACGTC  
361 TGGGGCCAAG GGACCACGGT CACCGTCTCC TCAGGTGGCG  
401 GCGGTTCCGG AGGTGGTGGT TCTGGCGGTG GTGGCAGTCA  
441 GCCTGTGCTG ACTCAGCCAC CCTCAGCGTC TGGGACCCCC  
481 GGGCAGAGGG TCACCATCTC TTGTTCTGGA AGCAGGTCCA  
521 ACATCGGAAG GAATACCGTA AACTGGTATC AGCAGGTCCC  
561 AGGAATGGCC CCCAACTCC TCATCTATAG TAATAATCAG  
601 CGGCCCTCAG GGGTCCCTGA CCGATTCTCT GGCTCCAAGT  
641 CTGGCACCTC AGCCTCCCTG GCCATCAGTG GGCTCCAGTC  
681 TGAGGATGAG GCTGATTATT ACTGTGCAGC ATGGGATGAC  
721 AGTCTGAATG GTGTGGTATT CGGCGGAGGG ACCAAGCTGA  
761 CCGTCCTAGG TCAGCCCAAG GCCGCCCC

**Figure 11A**

MAQVQLVQSGTEVKRPGASV	20
KISCRATGYTFSDYGISWMR	40
QAPGQGLEWMGWISAYNGNT	60
NYAQKLQGRVTMTTDTSTST	80
AYMELRSLRYDDTAVYYCAR	100
DGRRGSGIYWGVIYYNGMDV	120
WGQGTTVTVSSGGGGSGGGG	140
SGGGGSQPVLTQPPSASGTP	160
GQRVTISCSGSRSNIGRNTV	180
NWYQQVPGMAPKLLIYSNNQ	200
RPSGVPDRFSGSKSGTSASL	220
AISGLQSEDEADYYCAAWDD	240
SLNGVVFEGGGTKLTVLGQPK	260
AAP	263

## Figure 11B

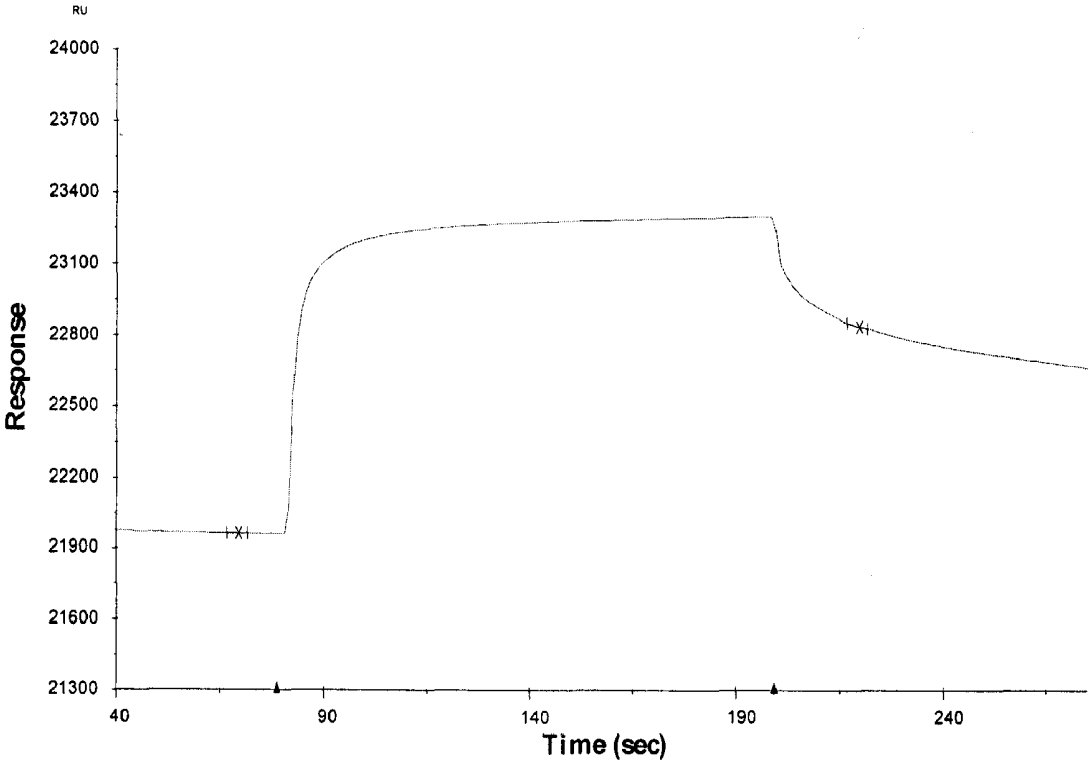


Figure 12A

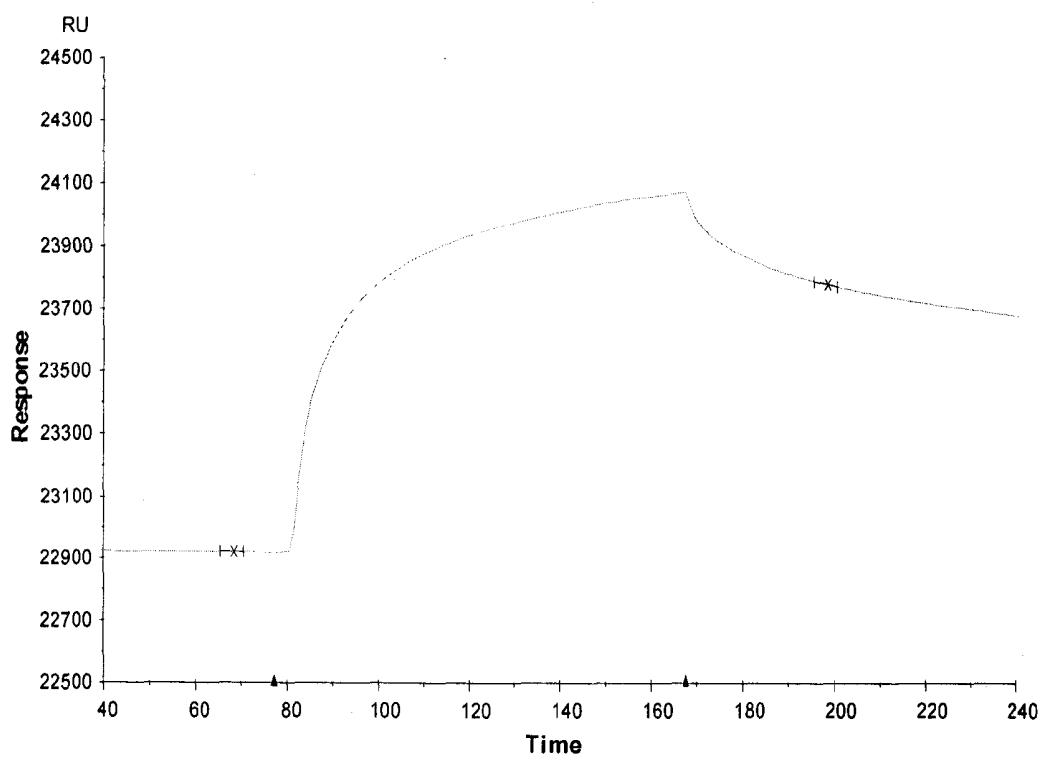


Figure 12B

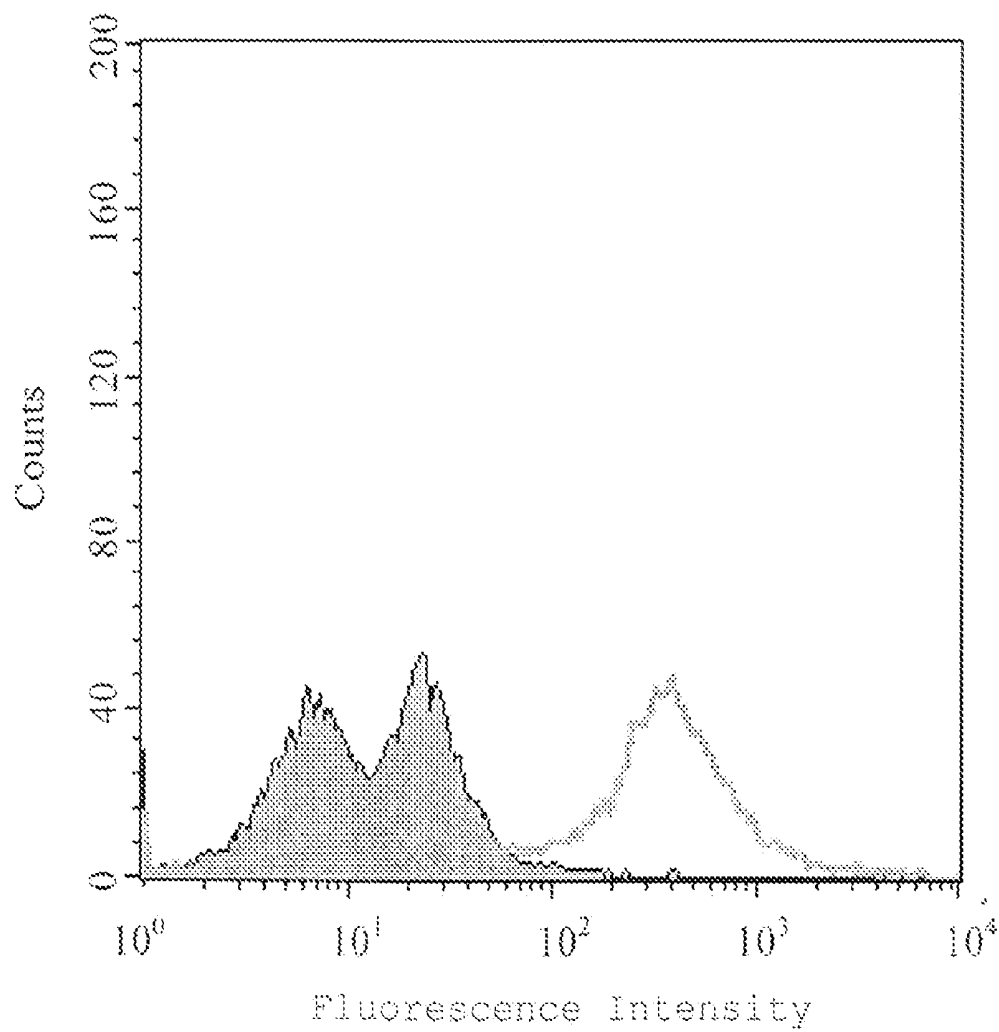


Figure 13

```
1  ATGGCCCAGA TCACCTTGAA GGAGTCTGGT CCTACGCTGG TGAAACCCAC
51 ACAGACCCTC ACGCTGACCT GCACCGTCTC TGGGTTCTCA CTCAGCAATG
101 CTAGAATGGG TGTGAGCTGG ATCCGTCAGC CCCAGGAAA GGCCCTGGAG
151 TGGCTTGAC TCATTTATCG GGATAATGAT AAGCGCTACA ACCCATCTCT
201 GAAGAGCAGG CTCACCATCA CCAAGGACAC CTCGAAAAAC CAAGTGGTCC
251 TGACAATGAG CAACATGGAC CCTGTGGACA CAGCCACATA TTA CTGTGCA
301 CACAGCCTCG TAGTACCAGC TGCTAATCCC TTGACTACT GGGGCCAGGG
351 AACCTGGTC ACCGTCTCCT CATCGGCCTC GGGGGCCGAA TTGGGCGGCG
401 GCGGCTCCGG AGGAGGAGGA TCTGGTGGTG GTGGTTCGAC TAGTCAGGCT
451 GTGCTGACTC AGCCGTCTTC CCTCTCTGCA TCTCCTGGAG CATCAGCCAG
501 TCTCACCTGC ACCTTGCGCA GTGGCATCAA TGTGGTACC TACAGGATAT
551 ACTGGTACCA GCAGAAGCCA GGGAGTCCTC CCCAGTATCT CCTGAGGTAC
601 AAATCAGACT CAGATAAGCA GAAGGGCTCT GGAGTCCCCA GCCGCTTCTC
651 TGGATCCAAA GATGCTTCGG CCAATGCAGG GATTTTACTC ATCTCTGGGC
701 TCCAGTCTGA GGATGAGGCT GACTATTATT GTATGATTTG GCACACCAGC
751 GCTTATGTCT TCGGA ACTGG GACCAAGGTC ACCGTCCTAG GCTCGAGC
```

**Figure 14A**

MAQITLKESGPTLVKPTQTL	20
TLTCTVSGFSLSNARMGVSW	40
IRQPPGKALEWLALIYRDND	60
KRYNPSLKSRLTITKDTSKN	80
QVVLTMNSNMDPVDTATYYCA	100
HSLVVPAAANPFDYWGQGLV	120
TVSSASGAELGGGGSGGGG	140
SGGGGSTSQAVLTQPSSLSA	160
SPGASASLTCTLRSGINVGT	180
YRIYWYQQKPGSPQYLLRY	200
KSDSDKQKGSQVPSRFSGSK	220
DASANAGILLISGLQSEDEA	240
DYYCMIWHTSAYVFGTGTKV	260
TVLGSS	266

## Figure 14B

1 ATGGCCGAGG TGCANCTGGT GCAGTCTGGG GGAGGCGTGG TCCAGCCTGG  
51 GAGGTCCCTG AGACTCTCCT GTGACGCCTC TGGATTCGTC TTCAGTAATT  
101 ATGCTGTCCA CTGGGTCCGC CAGGCTCCAG GCAAGGGGCT AGAATGGGTG  
151 GCAGCTATTT CACCTGATGG GAGGTATATA CATTATGGAG ACTCCGTGCA  
201 GGGCCGATTC ACCGTGTCCA GAGACAACGC CCAGAGCACC CTGTATCTGC  
251 AAATGAACAG TCTGAGAGCC GAGGACACGG CTGTCTATTA TTGTGCAAGA  
301 GATCGAGGGA GGCCTGATGC TTTCGATATC TGGGGCCAAG GGACAATGGT  
351 CACCGTCTCT TCAGGTGGCG GCGGTTCCGG AGGTGGTGGT TCTGGCGGTG  
401 GTGGCAGCCA GTCTGTGCTG ACTCAGCCAC CCTCCGCGTC CGGGTCTCCT  
451 GGACAGTCAG TCACCATCTC CTGCACCGGA ACCAGCAGTG ACGTTGGCGC  
501 TTATGACCAT GTCTCTTGGT ACCAACAACA CCCAGACAAA GCCCCCAAAC  
551 TCATCATTTA TGAGGTCAAT AGACGGCCCT CAGGGGTCCC TGATCGCTTC  
601 TCTGGCTCCA AGTCTGGCAA CACGGCCTCC CTGACCGTCT CTGGCCTCCA  
651 GATTGAGGAT GAGGCTGATT ACTTCTGCAC CTCATATTCA CGAATTAACG  
701 ATTATGTCTT CGGACCTGGG ACCAGGGTCG CCGTCCTCGG TCAGCCCAAG  
751 GCTACCCCCT CGGCGGCCGC A

**Figure 15A**

MAEVXLVQSGGGVVQPGRSL	20
RLSCDASGFVFSNYAVHWVR	40
QAPGKGLEWVA AISPDGRYI	60
HYGDSVQGRFTVSRDNAQST	80
LYLQMNSLRAEDTAVYYCAR	100
DRGRPDAFDIWGQGTMVTVS	120
SGGGGSGGGGSGGGGSQSVL	140
TQPPSASGSPGQSVTISCTG	160
TSSDVGAYDHVSWYQQHPDK	180
APKLI IYEVRRRPSGVPDRF	200
SGSKSGNTASLTVSGLQIED	220
EADYFCTSYSRINDYVFGPG	240
TRVAVLGQPKATPSAAA	257

## Figure 15B

```
1  ATGGCTCAGG  TGCAGCTGGT  GCAGTCTGGG  GCTGAGGTGA  AGAAGCCTGG
51 GGCCTCAGTG  AAGGTCTCCT  GCAAGGCTTC  TGGATACACC  TTCACCAGTT
101 ATGATATCAA  CTGGGTGCGA  CAGGCCACTG  GACAAGGGCT  TGAGTGGATG
151 GGATGGATGA  ACCCTAACAG  TGGTAAACACA  GGCTATGCAC  AGAAGTTCCA
201 GGGCAGAGTC  ACCATGACCA  GGAACACCTC  CACTAATACA  GCCTACATGG
251 AACTGACCAG  CCTGACATCT  GAGGACACGG  CCGTGTATTA  CTGTGCGAGA
301 GGCAGCCCAT  CCCCATGAA  CGTCTGGGGC  CAAGGGACCA  CGGTCACCGT
351 CTCCTCAGGT  GGCGGCGGTT  CCGGAGGTGG  TGGTTCTGGC  GGTGGTGGCA
401 GCCAGCCTGT  GCTGACTCAG  CCCCCTCTG  TGTCGGAGTC  TCCGGGGAAG
451 ACGGTAACCA  TCTCCTGCAC  CCGCAGCAGT  GGGAGCATTG  CCAACGACTA
501 TGTTCAGTGG  TTCCAGCAGC  GCCCGGGCAG  TGCCCCCACC  ATTGTGATCT
551 ATGAAGATTA  CCGAAGACCC  TCTGGGGTCC  CTGATCGGTT  CTCTGGCTCC
601 ATCGACAGCT  CCTCCAATC  TGCCTCCCTC  ACCATCTCTG  GACTGAAGAC
651 TGAGGACGAG  GCTGACTACT  ACTGTCAGTC  TTATGATAGC  AGCAATCCTT
701 ATGTGGTATT  CGGCGGAGGG  ACCAAGCTGA  CCGTCCTAGG  TCAGCCCAAG
751 GCTGCCCCCT  CGGCGGCCGC  A
```

**Figure 16A**

MAQVQLVQSGAEVKKPGASV	20
KVSCKASGYTFTSYDINWVR	40
QATGQGLEWMGWMNPNSGNT	60
GYAQKFQGRVTMTRNTSTNT	80
AYMELTSLTSEDVAVYYCAR	100
GSPSPMNVWGQGTTVTVSSG	120
GGSGGGGSGGGGSQPVLTK	140
PHSVSESPGKTVTISCTRSS	160
GSIANDYVQWFQQRPGSAPT	180
IVIYEDYRRPSGVPDRFSGS	200
IDSSSNSASLTISGLKTEDE	220
ADYYCQSYDSSNPYVVFSGG	240
TKLTVLGQPKAAPSAEA	257

## Figure 16B

**ANTI-MULLERIAN INHIBITING  
SUBSTANCE TYPE II RECEPTOR (MISIIR)  
IMMUNOCONJUGATES TO DETECT AND  
TREAT CANCER**

**[0001]** This application is a continuation-in-part of PCT/US2004/022068, filed Jul. 8, 2004, which claims priority to U.S. Provisional Application 60/485,622 filed Jul. 8, 2003. The entire disclosure of each of these applications is incorporated by reference herein.

**[0002]** Pursuant to 35 U.S.C. Section 202(c), it is acknowledged that the United States Government has certain rights in the invention described herein, which was made in part with funds from United States National Cancer Institute, Grant No. 2P50 CA83638.

FIELD OF THE INVENTION

**[0003]** The present invention relates to the fields of immunology and cancer treatment. Specifically, compositions and methods for detecting and treating cancers expressing Mullerian inhibiting substance Type II receptor (MISIIR) are disclosed.

BACKGROUND OF THE INVENTION

**[0004]** Several publications and patent documents are cited throughout the specification in order to describe the state of the art to which this invention pertains. Each of these citations is incorporated herein by reference as though set forth in full.

**[0005]** The precise targeting specificity of antibody molecules makes them attractive vehicles for tumor imaging and therapy agents. Employing an antibody with a high affinity for an antigen that is uniquely or predominantly expressed on cancer cells can lead to a greater specificity of tumor retention, thereby increasing the likelihood of successful treatment or detection. While the initial clinical trials of antibody-based tumor targeting revealed a number of hurdles (e.g., the immunogenicity of the murine monoclonal antibodies, the poor tumor penetration of immunoconjugates and a lack of tumor specificity of the antigenic targets), these have largely been addressed over the past decade. Anti-tumor antibodies are now developed using human immunoglobulin genes, resulting in proteins that are rarely seen as foreign. The degree of tumor penetration and the rate of systemic elimination of toxic immunoconjugates have been improved through the development of novel, minimal antibody-based structures (e.g., monovalent and divalent single-chain Fv [scFv] molecules). In preclinical models, this has simultaneously increased the fraction of the tumor that is treated and reduced the exposure of normal tissues (e.g., bone marrow) to the immunoconjugate (Adams, G. P. (1998) *In Vivo*, 12:11-22). Additionally, a second generation of tumor-associated or tumor-specific antigenic targets combines a predominantly tumor-specific expression pattern with an antibody-triggered alteration in intracellular signaling. The targeting of cytotoxic agents, such as radioisotopes or drugs, to such an antigen can lead to an additive or synergistic anti-tumor effect.

**[0006]** Monoclonal antibody (MAb)-based immunotherapy has shown notable promise in the treatment of hematologic malignancies (Kaminski, M. S., et al. (1993) *N. Engl. J. Med.*, 329:459-465; Press, O. W., et al. (1993) *N. Engl. J. Med.*, 329:1219-1224). Despite some constraints imposed by tumor physiology (Jain, R. K., et al. (1987) 47:3039-3051),

two of the four members of the HER/EGF receptor family have proven to be useful targets for antibody-based therapy of cancer. MAbs specific for HER2/neu (Harweth, I. M., et al. (1993) *Br. J. Cancer*, 68:1140-1145) and EGFR (Fan, Z., et al. (1993) 53:4322-4328) can inhibit the growth of human tumors that overexpress their respective target antigens in immunodeficient mice. Treatment with a humanized form of the anti-HER2/neu 4D5 MAb (HERCEPTIN™) leads to clinical responses alone and in combination with chemotherapy agents in clinical trials and is licensed for use in breast cancer (Baselga, J., et al. (1996) *J. Clin. Oncol.*, 14:737-744; Baselga, J. (2001) *J. of Cancer*, 37 Suppl:S18-24). A number of clinical trials also have focused on the efficacy of antibodies that target therapeutic radioisotopes to tumors (radioimmunotherapy or RAIT). Of note, the U.S. Food and Drug Administration (F.D.A.) has approved commercial RAIT drugs ZEVALIN™, a conjugate of an anti-CD20 monoclonal antibody and the beta-emitting radioisotope Yttrium-90 [<sup>90</sup>Y] for the treatment of non-Hodgkin's lymphoma, and BEXXAR®, iodine-131 [<sup>131</sup>I] Tositumomab for the treatment of non-Hodgkin's lymphoma.

**[0007]** Radiolabeled MAbs have also been used for the radioimmunodetection (RAID) of a number of types of tumors including pancreatic cancer (Gold, D., et al. (2001) *Crit. Rev. Oncol.-Hemat.*, 39:147-154), non small cell lung cancer (Schillaci, O., et al. (2001) *Anticancer Res.*, 21:3571-3574), ovarian cancer (Kalofonos, H. P., et al. (1999) *Acta Oncol.*, 38:629-634), colorectal carcinoma (Wong, J., et al. (1997) *J. of Nuc. Med.*, 38:1951-1959; Willkomm, P., et al. (2000) *J. of Nuc. Med.*, 41:1657-1663), and prostate cancer (Fang, D. X., et al. (2000) *Tech. Urology*, 6:146-150). These studies report the ability to detect lesions that are detectable by other methodologies (e.g., computerized tomography (CT) and magnetic resonance imaging (MRI)). Immunodetection can be improved upon, however, by employing smaller, engineered antibody-based molecules such as scFv (Begent, R. H., et al. (1996) *Nat. Med.*, 2:979-984). When isotopes with relatively short half-lives are to be used, molecules like the small, divalent diabody should exhibit the greatest degree of specific tumor localization in a setting of low normal organ background (Williams, L. E., et al. (2001) *Cancer Biother. And Radiopharm.*, 16:25-35). Furthermore, RAID studies can be effectively utilized to acquire predictive dosimetry for use in planning or ensuring safety of subsequent RAIT studies.

**[0008]** Mullerian inhibiting substance (MIS) is a member of the transforming growth factor- $\beta$  (TGF $\beta$ ) superfamily of secreted protein hormones that signal through receptor complexes of type I and type II serine/threonine kinase receptors. The binding of MIS ligand to its receptor initiates a signaling cascade, including phosphorylation of Smad1, that is dependent on recruitment of type I receptors, ALK2 and ALK6, which also signal for bone morphogenetic proteins (Segev, D. L., et al. (2001) *J. of Biol. Chem.*, 276:26799-26806). In males, MIS is produced in fetal and postnatal testes. MIS binds to its receptor and triggers regression of the Mullerian ducts, the anlagen of the uterus, fallopian tubes and vagina (Hudson, P. L., et al. (1990) *J. Clin. Endocrinol. Metab.*, 70:16-22). In contrast, MIS is not produced in females until adolescence, thus allowing the above tissues to develop (Hudson, P. L., et al. (1990) *J. Clin. Endocrinol. Metab.*, 70:16-22).

**[0009]** In adult females, MIS type II receptor (MISIIR) is expressed on the surface epithelium of the ovaries (Masiakos, P. T., et al. (1999) *Clin. Cancer Res.*, 5:3488-3499). In mice,

MISIIR mRNA has been detected in ovarian surface epithelium (MOSE cells) and ovarian tissue (Connolly, D. C., et al. (2003) *Cancer Res.*, 1389-1397). In rats, MISIIR mRNA has been detected in embryonic, pubertal, and adult testes; the uterus; the ovaries; and the embryonic lung (Teixeira et al. (1996) *Endocrinology*, 137:160-165; Catlin et al. (1997) *Endocrinology*, 138:790-796). Additionally, MISIIR has been detected in human cervical cancer cells, prostate cancer cells, breast epithelial cells, breast cancer cell lines, breast fibroadenomas, breast tumors, and ductal carcinomas (Segev et al. (2000) *J. Biol. Chem.*, 275:28371-28379; Segev et al. (2001) *J. Biol. Chem.*, 276:26799-26806; Segev et al. (2002) *Proc. Natl. Acad. Sci.*, 99:239-244; Barbie et al. (2003) *Proc. Natl. Acad. Sci.*, 100:15601-15606).

**[0010]** Coelomic epithelium is the most common origin of human ovarian cancers and tumors of this origin express the MIS type II receptor. MISIIR mRNA is expressed in a number of ovarian carcinoma cell lines, including OVCAR3, OVCAR5, OVCAR8, OV1063 and SKOV3 (Masiakos, P. T. et al., (1999) *Clin. Cancer Res.*, 5:3488-3499). Furthermore, recombinant MIS bound tumor cells isolated from ascites in 15 of 27 (56%) ovarian cancer patients and the binding of recombinant MIS to these tumor cells led to significant growth inhibition in 22/27 (82%) of these cases (Masiakos, P. T. et al., (1999) *Clin. Cancer Res.*, 5:3488-3499). These findings demonstrate the relevance of MISIIR for anti-cancer therapies, particularly ovarian cancer.

#### SUMMARY OF THE INVENTION

**[0011]** In accordance with the present invention, novel antibody molecules having specific binding affinity for the Mullerian Inhibiting Substance II Receptor (MISIIR) are provided. Such antibodies include, monoclonal, polyclonal, diabodies, tribodies, single domain antibodies, and scFv. In a particular embodiment, the antibodies molecules are single chain Fv antibody molecules. In another embodiment of the invention, the single chain Fv antibody molecules comprise an amino acid sequence selected from the group consisting of SEQ ID NOS: 9-15.

**[0012]** In yet another embodiment, molecules comprising the single chain Fv antibody molecules of the invention are disclosed. Such molecules include without limitation, a diabody, a tribody, a tetrabody, an immunotoxin, a recombinantly produced IgG, Fab, Fab', F(ab')<sub>2</sub>, F(v), scFv, scFv<sub>2</sub>, scFv-Fc, minibody, a bispecific antibody, an Affibody®, and a peptabody.

**[0013]** In a preferred embodiment, the antibody of the invention has binding affinity for the extracellular domain of MISIIR. More preferably, the antibodies bind MIS binding sites. Such sites include, for example, the amino acid sequences of SEQ ID NOS: 16-18.

**[0014]** According to another aspect of the invention, compositions and methods for treating cancer are provided wherein a patient is administered a therapeutically effective amount of the anti-MISIIR molecules of the invention in a pharmaceutically acceptable carrier. In a particular embodiment of the invention, the cancer is selected from the group consisting of breast, prostate, cervical, ovarian, testicular, and pulmonary cancers. In a specific embodiment, the cancer is ovarian cancer. In accordance with another aspect of the instant invention, the anti-MISIIR antibody molecule can be conjugated to at least of the following agents, a chemotherapeutic agent, a radioisotope, a toxin, a magnetic bead, a detectable label and a pro-drug.

**[0015]** In yet another embodiment of the invention, the anti-MISIIR antibodies are administered to a patient in combination with, prior to, or after administration of chemotherapeutic agents.

**[0016]** According to yet another aspect of the invention, compositions and methods for imaging cancer, particularly ovarian cancer, are provided wherein a patient is administered a sufficient amount of an anti-MISIIR antibody molecule. In another embodiment, the anti-MISIIR antibody is labeled with a radioisotope and/or a contrast agent. The patient can be scanned by medical devices such as, without limitation, gamma cameras, mammography instruments, positron emission tomography (PET) cameras, and magnetic resonance imaging (MRI) imaging.

**[0017]** In another embodiment of the instant invention, anti-MISIIR antibodies are employed to detect the presence of MISIIR in patients suspected of having cancer, particularly ovarian cancer. According to one aspect, the anti-MISIIR antibodies are employed as a diagnostic tool. In another embodiment of the instant invention, the presence of MISIIR is detected in tissues and/or fluids, such as blood, from a patient to monitor progression or remission of disease.

#### BRIEF DESCRIPTIONS OF THE DRAWING

**[0018]** FIG. 1 is an image of a Western blot of the purification of an MISIIR fusion protein. Proteins were separated by SDS-polyacrylamide gel electrophoresis and detected by anti-His tag monoclonal antibodies.

**[0019]** FIG. 2 depicts the results of a PCR fingerprinting assay. The restriction patterns of 10 clones were analyzed on an agarose gel. Unique patterns are noted in lanes 1-7, 9, and 10. M lane is molecular weight markers.

**[0020]** FIG. 3 is a graph of the eluted protein from the SuperDex75 size exclusion column on an HPLC system. Samples were taken over 30 minutes at intervals of 0.1 seconds. The large peak (of which most is above the field of view) is labeled as the scFv of clone #7A.

**[0021]** FIG. 4 is an image of a polyacrylamide gel electrophoresis analysis of the proteins eluted from the size exclusion chromatography assay. Lanes 1-5 are the elution fractions 12-16. Lane MW contains molecular weight standards and the sizes of two of the molecular weight standards are indicated at the right of the gel.

**[0022]** FIG. 5 is a graph of the surface plasmon resonance assay performed with anti-MISIIR scFv (clone #17). MISIIR-Fc and IgG Fc were immobilized on a BIAcore® chip.

**[0023]** FIG. 6 is a schematic drawing of examples of the scFv-based antibodies that may be employed as anti-MISIIR antibodies.

**[0024]** FIG. 7 is a nucleotide sequence (SEQ ID NO: 8) encoding for the fusion of the extracellular domain of MISIIR and Fc.

**[0025]** FIGS. 8A and 8B are the nucleotide sequence (SEQ ID NO: 1) and amino acid sequence (SEQ ID NO: 9) of the scFv antibody molecule of clone #17.

**[0026]** FIGS. 9A and 9B are the nucleotide sequence (SEQ ID NO: 2) and the amino acid sequence (SEQ ID NO: 10) of the scFv antibody molecule of clone #23.

**[0027]** FIGS. 10A and 10B are the nucleotide sequence (SEQ ID NO: 3) and amino acid sequence (SEQ ID NO: 11) of the scFv antibody molecule of clone #29.

**[0028]** FIGS. 11A and 11B are the nucleotide sequence (SEQ ID NO: 4) and amino acid sequence (SEQ ID NO: 12) of the scFv antibody molecule of clone #7.

**[0029]** FIGS. 12A and 12B are graphs of the surface plasmon resonance of a diabody of clone #17 and an scFv-Fc of clone #7, respectively, on a Biacore® chip coated with MISIIR.

**[0030]** FIG. 13 is a graph of the binding of an scFv-Fc of clone #7 against IGROV-1 cells. The filled in results are a control IgG.

**[0031]** FIGS. 14A and 14B are the nucleotide sequence (SEQ ID NO: 5) and the amino acid sequence (SEQ ID NO: 13) of the GY4 scFv antibody molecule.

**[0032]** FIGS. 15A and 15B are the nucleotide sequence (SEQ ID NO: 6) and the amino acid sequence (SEQ ID NO: 14) of the M2 scFv antibody molecule.

**[0033]** FIGS. 16A and 16B are the nucleotide sequence (SEQ ID NO: 7) and the amino acid sequence (SEQ ID NO: 15) of the M9 scFv antibody molecule.

#### DETAILED DESCRIPTION OF THE INVENTION

**[0034]** In accordance with the present invention, anti-MISIIR antibodies and methods of use thereof are provided. Specifically, methods for the immunodetection and imaging of cancer associated with MISIIR expression and methods of treating the same are provided.

**[0035]** The antibodies of the invention include monoclonal, polyclonal, scFv and molecules comprising a plurality of scFv. Also encompassed by the present invention are conjugates of the antibody molecules described herein. Such conjugates include, without limitation, antibodies operably linked to imaging reagents, contrast agents, chemotherapeutic agents, cytotoxic molecules (e.g., immunotoxins) and the like.

**[0036]** scFv molecules specific for human tumor-associated antigens have been previously shown to be retained in a highly specific manner in human tumor xenografts growing in immunodeficient mice (Schier, R., et al. (1995) *Immunotechnology*, 1:63-71). Notably, quantitative tumor retention can be significantly enhanced by utilizing divalent scFv with a higher avidity for the antigen (Adams, G. P., et al. (1993) *Cancer Res.*, 53:4026-4034). Additionally, the structure of the divalent scFv can influence the degree of localization in a tumor, with non-covalent diabodies typically exhibiting four-fold greater localization at 24 hours post injection that was seen with the gene-fused or chemically conjugated scFv dimers (Adams, G. P., et al. (1998) *British J. Cancer*, 77:1405-1412).

**[0037]** In addition to avidity and structure, binding affinity can also influence the targeting properties of scFv molecules. Very high affinity (e.g., greater than  $10^{-9}$  M) has been associated with reduced tumor localization and poor tumor penetration of scFv, likely due to a saturation of the antigen pool in the perivascular region of the tumor (Adams, G., et al. (1998) *Cancer Res.*, 58:485-490; Adams, G. P., et al. (2001) *Cancer Res.*, 61:4750-4755). In these studies, very high affinity ( $10^{-11}$  M) anti-HER2/neu scFv molecules were observed by immunofluorescence to only penetrate a few cell lengths from blood vessels while low affinity ( $10^{-7}$  M or less) scFv targeting the same antigenic epitope exhibited a diffuse penetration. Therefore, antibody molecules with very high affinity may not be the most desirable for immunotherapy with antibodies conjugated, e.g., to radioisotopes or chemotherapeutic agents as the conjugated antibodies may not penetrate

efficiently enough in a short period of time. Unconjugated antibody molecules (i.e. lacking radioactive particles or chemotherapeutic agents) with very high affinity may be preferred for therapy, however, as they have significantly longer time to penetrate into the tumor to kill target cells. FIG. 6 shows some of the constructs that can be generated and used as anti-MISIIR antibodies. As noted herein, some of the divalent structures may exhibit improved retention or greater internalization, depending upon the affinity and the target epitope.

**[0038]** In a particular embodiment, the anti-MISIIR antibodies of the instant invention are directed to specific regions of MISIIR (see, e.g., GenBank Accession Nos. NP\_065434 and NM\_020547). Specifically, the anti-MISIIR antibodies are directed to regions of MISIIR which interact with MIS. These regions include, without limitation, amino acids 46-59 (GTLPRAIRCLYSR; SEQ ID NO: 16), amino acids 92-109 (CDPSPRAHPSPGSTLFTC; SEQ ID NO: 17), and amino acids 81-101 (DSDEPGCESLHC DPSRAHPS; SEQ ID NO: 18).

**[0039]** Exemplary amino acid sequences of anti-MISIIR antibodies of the instant invention include SEQ ID NOS: 9-15. See FIGS. 8B-11B and FIGS. 14B-16B. Nucleic acid molecules encoding these antibodies are also encompassed by the present invention. For example, SEQ ID NOS: 1-7.

#### I. DEFINITIONS

**[0040]** The following definitions are provided to facilitate an understanding of the present invention:

**[0041]** "Nucleic acid" or a "nucleic acid molecule" as used herein refers to any DNA or RNA molecule, either single or double stranded and, if single stranded, the molecule of its complementary sequence in either linear or circular form. In discussing nucleic acid molecules, a sequence or structure of a particular nucleic acid molecule may be described herein according to the normal convention of providing the sequence in the 5' to 3' direction. With reference to nucleic acids of the invention, the term "isolated nucleic acid" is sometimes used. This term, when applied to DNA, refers to a DNA molecule that is separated from sequences with which it is immediately contiguous in the naturally occurring genome of the organism in which it originated. For example, an "isolated nucleic acid" may comprise a DNA molecule inserted into a vector, such as a plasmid or virus vector, or integrated into the genomic DNA of a prokaryotic or eukaryotic cell or host organism.

**[0042]** When applied to RNA, the term "isolated nucleic acid" may refer to an RNA molecule encoded by an isolated DNA molecule as defined above. Alternatively, the term may refer to an RNA molecule that has been sufficiently separated from other nucleic acids with which it would be associated in its natural state (i.e., in cells or tissues). An isolated nucleic acid (either DNA or RNA) may further represent a molecule produced directly by biological or synthetic means and separated from other components present during its production.

**[0043]** With respect to single stranded nucleic acids, particularly oligonucleotides, the term "specifically hybridizing" refers to the association between two single-stranded nucleotide molecules of sufficiently complementary sequence to permit such hybridization under pre-determined conditions generally used in the art (sometimes termed "substantially complementary"). In particular, the term refers to hybridization of an oligonucleotide with a substantially complementary sequence contained within a single-stranded DNA molecule of the invention, to the substantial exclusion

of hybridization of the oligonucleotide with single-stranded nucleic acids of non-complementary sequence. Appropriate conditions enabling specific hybridization of single stranded nucleic acid molecules of varying complementarity are well known in the art.

**[0044]** For instance, one common formula for calculating the stringency conditions required to achieve hybridization between nucleic acid molecules of a specified sequence homology is set forth below (Sambrook et al., (1989) *Molecular Cloning*, Cold Spring Harbor Laboratory):

$$T_m = 81.5^\circ \text{C} + 16.6 \text{ Log} [\text{Na}^+] + 0.41(\% \text{ G+C}) - 0.63(\% \text{ formamide}) - 600/\# \text{bp in duplex}$$

**[0045]** As an illustration of the above formula, using  $[\text{Na}^+] = [0.368]$  and 50% formamide, with GC content of 42% and an average probe size of 200 bases, the  $T_m$  is 57° C. The  $T_m$  of a DNA duplex decreases by 1-1.5° C. with every 1% decrease in homology. Thus, targets with greater than about 75% sequence identity would be observed using a hybridization temperature of 42° C. For example, hybridizations may be performed, according to the method of Sambrook et al., (supra) using a hybridization solution comprising: 5×SSC, 5×Denhardt's reagent, 1.0% SDS, 100 µg/ml denatured, fragmented salmon sperm DNA, 0.05% sodium pyrophosphate and up to 50% formamide. Hybridization is carried out at 37-42° C. for at least six hours. Following hybridization, filters are washed as follows: (1) 5 minutes at room temperature in 2×SSC and 1% SDS; (2) 15 minutes at room temperature in 2×SSC and 0.1% SDS; (3) 30 minutes-1 hour at 37.0 in 1×SSC and 1% SDS; (4) 2 hours at 42-65° in 1×SSC and 1% SDS, changing the solution every 30 minutes.

**[0046]** The stringency of the hybridization and wash depend primarily on the salt concentration and temperature of the solutions. In general, to maximize the rate of annealing of the probe with its target, the hybridization is usually carried out at salt and temperature conditions that are 20-25° C. below the calculated  $T_m$  of the hybrid. Wash conditions should be as stringent as possible for the degree of identity of the probe for the target. In general, wash conditions are selected to be approximately 12-20° C. below the  $T_m$  of the hybrid. In regards to the nucleic acids of the current invention, a moderate stringency hybridization is defined as hybridization in 6×SSC, 5×Denhardt's solution, 0.5% SDS and 100 µg/ml denatured salmon sperm DNA at 42° C., and washed in 2×SSC and 0.5% SDS at 55° C. for 15 minutes. A high stringency hybridization is defined as hybridization in 6×SSC, 5×Denhardt's solution, 0.5% SDS and 100 µg/ml denatured salmon sperm DNA at 42° C., and washed in 1×SSC and 0.5% SDS at 65° C. for 15 minutes. A very high stringency hybridization is defined as hybridization in 6×SSC, 5×Denhardt's solution, 0.5% SDS and 100 µg/ml denatured salmon sperm DNA at 42° C., and washed in 0.1×SSC and 0.5% SDS at 65° C. for 15 minutes.

**[0047]** The term "probe" as used herein refers to an oligonucleotide, polynucleotide or DNA molecule, whether occurring naturally as in a purified restriction enzyme digest or produced synthetically, which is capable of annealing with or specifically hybridizing to a nucleic acid with sequences complementary to the probe. A probe may be either single-stranded or double-stranded. The exact length of the probe will depend upon many factors, including temperature, source of probe and use of the method. For example, for diagnostic applications, depending on the complexity of the target sequence, the oligonucleotide probe typically contains 15-25 or more nucleotides, although it may contain fewer

nucleotides. The probes herein are selected to be complementary to different strands of a particular target nucleic acid sequence. This means that the probes must be sufficiently complementary so as to be able to "specifically hybridize" or anneal with their respective target strands under a set of pre-determined conditions. Therefore, the probe sequence need not reflect the exact complementary sequence of the target. For example, a non-complementary nucleotide fragment may be attached to the 5' or 3' end of the probe, with the remainder of the probe sequence being complementary to the target strand. Alternatively, non-complementary bases or longer sequences can be interspersed into the probe, provided that the probe sequence has sufficient complementarity with the sequence of the target nucleic acid to anneal therewith specifically.

**[0048]** The term "primer" as used herein refers to a DNA oligonucleotide, either single-stranded or double-stranded, either derived from a biological system, generated by restriction enzyme digestion, or produced synthetically which, when placed in the proper environment, is able to functionally act as an initiator of template-dependent nucleic acid synthesis. When presented with an appropriate nucleic acid template, suitable nucleoside triphosphate precursors of nucleic acids, a polymerase enzyme, suitable cofactors and conditions such as a suitable temperature and pH, the primer may be extended at its 3' terminus by the addition of nucleotides by the action of a polymerase or similar activity to yield a primer extension product. The primer may vary in length depending on the particular conditions and requirement of the application. For example, in diagnostic applications, the oligonucleotide primer is typically 15-25 or more nucleotides in length. The primer must be of sufficient complementarity to the desired template to prime the synthesis of the desired extension product, that is, to be able to anneal with the desired template strand in a manner sufficient to provide the 3' hydroxyl moiety of the primer in appropriate juxtaposition for use in the initiation of synthesis by a polymerase or similar enzyme. It is not required that the primer sequence represent an exact complement of the desired template. For example, a non-complementary nucleotide sequence may be attached to the 5' end of an otherwise complementary primer. Alternatively, non-complementary bases may be interspersed within the oligonucleotide primer sequence, provided that the primer sequence has sufficient complementarity with the sequence of the desired template strand to functionally provide a template-primer complex for the synthesis of the extension product.

**[0049]** Polymerase chain reaction (PCR) has been described in U.S. Pat. Nos. 4,683,195, 4,800,195, and 4,965,188, the entire disclosures of which are incorporated by reference herein.

**[0050]** The terms "percent similarity", "percent identity" and "percent homology", when referring to a particular sequence are used as set forth in the University of Wisconsin GCG software program.

**[0051]** The term "functional" as used herein implies that the nucleic or amino acid sequence is functional for the recited assay or purpose.

**[0052]** "Natural allelic variants", "mutants" and "derivatives" of particular sequences of nucleic acids refer to nucleic acid sequences that are closely related to a particular sequence but which may possess, either naturally or by design, changes in sequence or structure. By closely related, it is meant that at least about 75%, but often, more than 90%,

of the nucleotides of the sequence match over the defined length of the nucleic acid sequence referred to using a specific SEQ ID NO. Changes or differences in nucleotide sequence between closely related nucleic acid sequences may represent nucleotide changes in the sequence that arise during the course of normal replication or duplication in nature of the particular nucleic acid sequence. Other changes may be specifically designed and introduced into the sequence for specific purposes, such as to change an amino acid codon or sequence in a regulatory region of the nucleic acid. Such specific changes may be made in vitro using a variety of mutagenesis techniques or produced in a host organism placed under particular selection conditions that induce or select for the changes. Such sequence variants generated specifically may be referred to as "mutants" or "derivatives" of the original sequence.

**[0053]** The phrase "consisting essentially of" when referring to a particular nucleotide or amino acid means a sequence having the properties of a given SEQ ID NO. For example, when used in reference to an amino acid sequence, the phrase includes the sequence per se and molecular modifications that would not affect the basic and novel characteristics of the sequence.

**[0054]** The term "promoters" or "promoter" as used herein can refer to a DNA sequence that is located adjacent to a DNA sequence that encodes a recombinant product. A promoter is preferably linked operatively to an adjacent DNA sequence. A promoter typically increases an amount of recombinant product expressed from a DNA sequence as compared to an amount of the expressed recombinant product when no promoter exists. A promoter from one organism can be utilized to enhance recombinant product expression from a DNA sequence that originates from another organism. For example, a vertebrate promoter may be used for the expression of jellyfish GFP in vertebrates. In addition, one promoter element can increase an amount of recombinant products expressed for multiple DNA sequences attached in tandem. Hence, one promoter element can enhance the expression of one or more recombinant products. Multiple promoter elements are well-known to persons of ordinary skill in the art.

**[0055]** The term "enhancers" or "enhancer" as used herein can refer to a DNA sequence that is located adjacent to the DNA sequence that encodes a recombinant product. Enhancer elements are typically located upstream of a promoter element or can be located downstream of or within a coding DNA sequence (e.g., a DNA sequence transcribed or translated into a recombinant product or products). Hence, an enhancer element can be located 100 base pairs, 200 base pairs, or 300 or more base pairs upstream or downstream of a DNA sequence that encodes recombinant product. Enhancer elements can increase an amount of recombinant product expressed from a DNA sequence above increased expression afforded by a promoter element. Multiple enhancer elements are readily available to persons of ordinary skill in the art.

**[0056]** The terms "transfected" and "transfection" as used herein refer to methods of delivering exogenous DNA into a cell. These methods involve a variety of techniques, such as treating cells with high concentrations of salt, an electric field, liposomes, polycationic micelles, or detergent, to render a host cell outer membrane or wall permeable to nucleic acid molecules of interest. These specified methods are not limiting and the invention relates to any transformation technique well known to a person of ordinary skill in the art.

**[0057]** A "replicon" is any genetic element, for example, a plasmid, cosmid, bacmid, phage or virus, that is capable of replication largely under its own control. A replicon may be either RNA or DNA and may be single or double stranded.

**[0058]** A "vector" is a replicon, such as a plasmid, cosmid, bacmid, phage or virus, to which another genetic sequence or element (either DNA or RNA) may be attached so as to bring about the replication of the attached sequence or element.

**[0059]** An "expression operon" refers to a nucleic acid segment that may possess transcriptional and translational control sequences, such as promoters, enhancers, translational start signals (e.g., ATG or AUG codons), polyadenylation signals, terminators, and the like, and which facilitate the expression of a polypeptide coding sequence in a host cell or organism.

**[0060]** The term "oligonucleotide," as used herein refers to sequences, primers and probes of the present invention, and is defined as a nucleic acid molecule comprised of two or more ribo- or deoxyribonucleotides, preferably more than three. The exact size of the oligonucleotide will depend on various factors and on the particular application and use of the oligonucleotide.

**[0061]** The term "substantially pure" refers to a preparation comprising at least 50-60% by weight of a given material (e.g., nucleic acid, oligonucleotide, protein, etc.). More preferably, the preparation comprises at least 75% by weight, and most preferably 90-95% by weight of the given compound. Purity is measured by methods appropriate for the given compound (e.g. chromatographic methods, agarose or polyacrylamide gel electrophoresis, HPLC analysis, and the like).

**[0062]** The term "isolated protein" or "isolated and purified protein" is sometimes used herein. This term refers primarily to a protein produced by expression of an isolated nucleic acid molecule of the invention. Alternatively, this term may refer to a protein that has been sufficiently separated from other proteins with which it would naturally be associated, so as to exist in "substantially pure" form. "Isolated" is not meant to exclude artificial or synthetic mixtures with other compounds or materials, or the presence of impurities that do not interfere with the fundamental activity, and that may be present, for example, due to incomplete purification, addition of stabilizers, or compounding into, for example, immunogenic preparations or pharmaceutically acceptable preparations.

**[0063]** The term "gene" refers to a nucleic acid comprising an open reading frame encoding a polypeptide, including both exon and (optionally) intron sequences. The nucleic acid may also optionally include non-coding sequences such as promoter or enhancer sequences. The term "intron" refers to a DNA sequence present in a given gene that is not translated into protein and is generally found between exons.

**[0064]** The phrase "operably linked," as used herein, may refer to a nucleic acid sequence placed into a functional relationship with another nucleic acid sequence. Examples of nucleic acid sequences that may be operably linked include, without limitation, promoters, cleavage sites, purification tags, transcription terminators, enhancers or activators and heterologous genes which when transcribed and translated will produce a functional product such as a protein, ribozyme or RNA molecule.

**[0065]** The phrase "solid support" refers to any solid surface including, without limitation, any chip (for example, silica-based, glass, or gold chip), glass slide, membrane,

bead, solid particle (for example, agarose, sepharose, polystyrene or magnetic bead), column (or column material), test tube, or microtiter dish.

**[0066]** The phrases “affinity tag,” “purification tag,” and “epitope tag” may all refer to tags that can be used to effect the purification of a protein of interest. Purification/affinity/epitope tags are well known in the art (see Sambrook et al., 2001, *Molecular Cloning*, Cold Spring Harbor Laboratory) and include, but are not limited to: polyhistidine tags (e.g. 6×His), polyarginine tags, glutathione-S-transferase (GST), maltose binding protein (MBP), S-tag, influenza virus HA tag, thioredoxin, staphylococcal protein A tag, the FLAG™ epitope, AviTag epitope (for subsequent biotinylation), dihydrofolate reductase (DHFR), an antibody epitope (e.g., a sequence of amino acids recognized and bound by an antibody), and the c-myc epitope.

**[0067]** A “cell line” is a clone of a primary cell or cell population that is capable of stable growth in vitro for many generations.

**[0068]** An “immune response” signifies any reaction produced by an antigen, such as a viral antigen, in a host having a functioning immune system. Immune responses may be either humoral in nature, that is, involve production of immunoglobulins or antibodies, or cellular in nature, involving various types of B and T lymphocytes, dendritic cells, macrophages, antigen presenting cells and the like, or both. Immune responses may also involve the production or elaboration of various effector molecules such as cytokines, lymphokines and the like. Immune responses may be measured both in in vitro and in various cellular or animal systems. Such immune responses may be important in protecting the host from disease and may be used prophylactically and therapeutically.

**[0069]** An “antibody” or “antibody molecule” is any immunoglobulin, including antibodies and fragments thereof, that binds to a specific antigen. The term includes polyclonal, monoclonal, chimeric, single domain (Dab) and bispecific antibodies. As used herein, antibody or antibody molecule contemplates recombinantly generated intact immunoglobulin molecules and immunologically active portions of an immunoglobulin molecule such as, without limitation: Fab, Fab', F(ab')<sub>2</sub>, F(v), scFv, scFv<sub>2</sub>, scFv-Fc, minibody, diabody, tetrabody, single variable domain (e.g., variable heavy domain, variable light domain), bispecific, Affibody® molecules (Affibody, Bromma, Sweden), and peptabodies (Terskikh et al. (1997) *PNAS* 94:1663-1668). Dabs can be composed of a single variable light or heavy chain domain. In a certain embodiment of the invention, the variable light domain and/or variable heavy domain specific for MISIIR are inserted into the backbone of the above mentioned antibody constructs. Methods for recombinantly producing antibodies are well-known in the art. For example, commercial vectors comprising constant genes to make IgGs from scFvs are provided by Lonza Biologics (Slough, United Kingdom).

**[0070]** “Fv” is an antibody fragment which contains an antigen-recognition and -binding site. This region consists of a dimer of one heavy- and one light-chain variable domain in tight, non-covalent association. It is in this configuration that the three CDRs of each variable domain interact to define an antigen-binding site on the surface of the V<sub>H</sub>-V<sub>L</sub> dimer. Collectively, the six CDRs confer antigen-binding specificity to the antibody. However, even a single variable domain (or half of an Fv comprising only three CDRs specific for an antigen)

has the ability to recognize and bind antigen, although often at a lower affinity than the entire binding site.

**[0071]** “Single-chain Fv” or “scFv” antibody fragments comprise the V<sub>H</sub> and V<sub>L</sub> domains of an antibody, wherein these domains are present in a single polypeptide chain. Generally, the Fv polypeptide further comprises a polypeptide linker between the V<sub>H</sub> and V<sub>L</sub> domains which enables the scFv to form the desired structure for antigen binding. For a review of scFv see, for example, Pluckthun, A. in *The Pharmacology of Monoclonal Antibodies*, vol. 113, Rosenberg and Moore eds., Springer-Verlag, New York, pp. 269-315 (1994).

**[0072]** The term “diabodies” refers to small antibody fragments with two antigen-binding sites, which fragments comprise a heavy-chain variable domain (V<sub>H</sub>) connected to a light-chain variable domain (V<sub>L</sub>) on the same polypeptide chain (V<sub>H</sub>-V<sub>L</sub>). By using a linker that is too short to allow pairing between the two domains on the same chain, the domains are forced to pair with the complementary domains of another chain and create two antigen-binding sites. Diabodies are described more fully in, for example, EP 404,097; WO 93/11161; and Holliger et al., (1993) *Proc. Natl. Acad. Sci. USA*, 90: 6444-6448.

**[0073]** With respect to antibodies, the term “immunologically specific” refers to antibodies that bind to one or more epitopes of a protein or compound of interest, but which do not substantially recognize and bind other molecules in a sample containing a mixed population of antigenic biological molecules.

**[0074]** As used herein, the term “immunotoxin” refers to chimeric molecules in which antibody molecules or fragments thereof are coupled or fused (i.e., expressed as a single polypeptide or fusion protein) to toxins or their subunits. Toxins to be conjugated or fused can be derived from various sources, such as plants, bacteria, animals, and humans or be synthetic toxins (drugs), and include, without limitation, saprin, ricin, abrin, ethidium bromide, diphtheria toxin, *Pseudomonas* exotoxin, PE40, PE38, saporin, gelonin, RNase, protein nucleic acids (PNAs), ribosome inactivating protein (RIP), type-1 or type-2, pokeweed anti-viral protein (PAP), bryodin, momordin, and bouganin.

**[0075]** The term “conjugated” refers to the joining by covalent or noncovalent means of two compounds or agents of the invention.

**[0076]** Chemotherapeutic agents are compounds that exhibit anticancer activity and/or are detrimental to a cell (e.g., a toxin). Suitable chemotherapeutic agents include, but are not limited to: toxins (e.g., saporin, ricin, abrin, ethidium bromide, diphtheria toxin, *Pseudomonas* exotoxin, and others listed above; thereby generating an immunotoxin when conjugated or fused to an antibody); alkylating agents (e.g., nitrogen mustards such as chlorambucil, cyclophosphamide, isofamide, mechlorethamine, melphalan, and uracil mustard; aziridines such as thiotepa; methanesulphonate esters such as busulfan; nitroso ureas such as carmustine, lomustine, and streptozocin; platinum complexes such as cisplatin and carboplatin; bioreductive alkylators such as mitomycin, procarbazine, dacarbazine and altretamine); DNA strand-breakage agents (e.g., bleomycin); topoisomerase II inhibitors (e.g., amsacrine, dactinomycin, daunorubicin, idarubicin, mitoxantrone, doxorubicin, etoposide, and teniposide); DNA minor groove binding agents (e.g., plicamycin); antimetabolites (e.g., folate antagonists such as methotrexate and trimetrexate; pyrimidine antagonists such as fluorouracil, fluorodeox-

uridine, CB3717, azacitidine, cytarabine, and floxuridine; purine antagonists such as mercaptopurine, 6-thioguanine, fludarabine, pentostatin; asparaginase; and ribonucleotide reductase inhibitors such as hydroxyurea); tubulin interactive agents (e.g., vincristine, vinblastine, and paclitaxel (Taxol)); hormonal agents (e.g., estrogens; conjugated estrogens; ethinyl estradiol; diethylstilbesterol; chlortrianisen; idenestrol; progestins such as hydroxyprogesterone caproate, medroxyprogesterone, and megestrol; and androgens such as testosterone, testosterone propionate, fluoxymesterone, and methyltestosterone); adrenal corticosteroids (e.g., prednisone, dexamethasone, methylprednisolone, and prednisolone); leutinizing hormone releasing agents or gonadotropin-releasing hormone antagonists (e.g., leuprolide acetate and goserelin acetate); and antihormonal antigens (e.g., tamoxifen, antiandrogen agents such as flutamide; and antiadrenal agents such as mitotane and aminoglutethimide). Preferably, the chemotherapeutic agent is selected from the group consisting of: placitaxel (Taxol®), cisplatin, docetaxol, carboplatin, vincristine, vinblastine, methotrexate, cyclophosphamide, CPT-11, 5-fluorouracil (5-FU), gemcitabine, estramustine, carmustine, adriamycin (doxorubicin), etoposide, arsenic trioxide, irinotecan, and epothilone derivatives.

**[0077]** The term "pro-drug" refers to a compound which is transformed in vivo to an active form of the drug. The pro-drug may be transformed to an active form only upon reaching the target in vivo or upon internalization by the target cell.

**[0078]** Radioisotopes of the instant invention include, without limitation, positron-emitting isotopes and alpha-, beta-, gamma-, Auger- and low energy electron-emitters. The radioisotopes include, without limitation:  $^{13}\text{N}$ ,  $^{18}\text{F}$ ,  $^{32}\text{P}$ ,  $^{64}\text{Cu}$ ,  $^{66}\text{Ga}$ ,  $^{67}\text{Ga}$ ,  $^{68}\text{Ga}$ ,  $^{67}\text{Cu}$ ,  $^{77}\text{Br}$ ,  $^{80\text{m}}\text{Br}$ ,  $^{82}\text{Rb}$ ,  $^{86}\text{Y}$ ,  $^{90}\text{Y}$ ,  $^{95}\text{Ru}$ ,  $^{97}\text{Ru}$ ,  $^{99\text{m}}\text{Tc}$ ,  $^{103}\text{Ru}$ ,  $^{105}\text{Ru}$ ,  $^{111}\text{In}$ ,  $^{113\text{m}}\text{In}$ ,  $^{113}\text{Sn}$ ,  $^{121\text{m}}\text{Te}$ ,  $^{122\text{m}}\text{Te}$ ,  $^{125\text{m}}\text{Te}$ ,  $^{123}\text{I}$ ,  $^{124}\text{I}$ ,  $^{125}\text{I}$ ,  $^{126}\text{I}$ ,  $^{131}\text{I}$ ,  $^{133}\text{I}$ ,  $^{165}\text{Tm}$ ,  $^{168}\text{Tm}$ ,  $^{177}\text{Lu}$ ,  $^{186}\text{Re}$ ,  $^{188}\text{Re}$ ,  $^{195\text{m}}\text{Hg}$ ,  $^{211}\text{At}$ ,  $^{212}\text{Bi}$ ,  $^{213}\text{Bi}$ , and  $^{225}\text{Ac}$ . When the conjugated antibodies of the instant invention are employed for radio-immunodetection, the radioisotope is preferably a gamma-emitting isotope. When the conjugated antibodies of the instant invention are employed for detection by ImmunoPET (positron emission tomography), the radioisotope is preferably a positron-emitting isotope such as, without limitation,  $^{13}\text{N}$ ,  $^{18}\text{F}$ ,  $^{82}\text{Rb}$ . When the conjugated antibodies of the instant invention are employed for radioimmunotherapy (i.e., the treating of a patient with cancer), the radioisotope is preferably selected from the group consisting of  $^{90}\text{Y}$ ,  $^{131}\text{I}$ ,  $^{177}\text{Lu}$ , and  $^{186}\text{Re}$ , although other radionuclides such as many of those listed above are also suitable.

**[0079]** The term "radiosensitizer", as used herein, is defined as a molecule administered to animals in therapeutically effective amounts to increase the sensitivity of the cells to radiation. Radiosensitizers are known to increase the sensitivity of cancerous cells to the toxic effects of radiation. Radiosensitizers include, without limitation, 2-nitroimidazole compounds, and benzotriazine dioxide compounds, halogenated pyrimidines, metronidazole, misonidazole, desmethylmisonidazole, pimnidazole, etanidazole, nimorazole, mitomycin C, RSU 1069, SR 4233, E09, RB 6145, nicotinamide, 5-bromodeoxyuridine (BUdR), 5-iododeoxyuridine (IUdR), bromodeoxycytidine, fluorodeoxyuridine (FdR), hydroxyurea, cisplatin, and therapeutically effective analogs and derivatives of the same.

## II. PREPARATION OF ANTIBODY MOLECULES

**[0080]** The antibody molecules of the invention may be prepared using a variety of methods known in the art. Poly-

clonal and monoclonal antibodies are prepared as described in Current Protocols in Molecular Biology, Ausubel et al. eds. Antibodies may be prepared by chemical cross-linking, hybrid hybridoma techniques and by expression of recombinant antibody fragments expressed in host cells, such as bacteria or yeast cells. Indeed, Salhi et al. describe the generation of an anti-MISIIR monoclonal antibody, 12G4, generated by a hybrid hybridoma technique (Biochem. J. (2004) 379:785-793).

**[0081]** In one embodiment of the invention, the antibody molecules are produced by expression of recombinant antibody fragments in host cells. The genes for several of the antibody molecules that target MISIIR have been cloned. The nucleic acid molecules encoding the MISIIR antibody fragments are inserted into expression vectors and introduced into host cells. The resulting antibody molecules are then isolated and purified from the expression system. The antibodies optionally comprise a purification tag by which the antibody can be purified.

**[0082]** The purity of the antibody molecules of the invention may be assessed using standard methods known to those of skill in the art, including, but not limited to, ELISA, immunohistochemistry, ion-exchange chromatography, affinity chromatography, immobilized metal affinity chromatography (IMAC), size exclusion chromatography, polyacrylamide gel electrophoresis (PAGE), western blotting, surface plasmon resonance and mass spectroscopy.

## III. USES OF ANTI-MISIIR ANTIBODY MOLECULES

**[0083]** Anti-MISIIR antibodies have broad applications in therapy and diagnosis. Specifically, the anti-MISIIR antibody molecules of the invention may be used: (1) to directly alter the growth of tumors that express MISIIR; (2) to alter the growth of tumors that express MISIIR in combination with other cytotoxic agents; (3) to image tumors that express MISIIR; and (4) as a diagnostic tool.

**[0084]** 1) The anti-MISIIR antibody molecules of the instant invention can be administered to a patient in need thereof, as described hereinbelow. The anti-MISIIR antibody molecules of the instant invention include the antibodies alone and antibodies conjugated to other agents such as, without limitation, chemotherapeutic agents, radioisotopes, pro-drugs, pro-drug activating enzymes capable of converting a pro-drug to its active form, and magnetic beads (see, for example, U.S. Pat. No. 6,645,731). If the compound to be conjugated is proteinaceous, a fusion protein may be generated with the antibody molecule. Radiosensitizers may also be administered with the antibodies.

**[0085]** 2) To alter the growth of tumors that express MISIIR, the anti-MISIIR antibody molecules of the instant invention may be administered to a patient in combination with other cytotoxic agents. These other cytotoxic agents include, without limitation, chemotherapeutic agents, external beam radiation, targeted radioisotopes, and other antibodies or signal transduction inhibitors. Radiosensitizers may also be administered with the antibodies.

**[0086]** 3) When employed for imaging tumors, the anti-MISIIR antibody molecules of the invention can be conjugated to radioisotopes as described hereinabove. The anti-MISIIR antibody molecules can be conjugated to the radioisotopes by any method including direct conjugation and by linking through a chelator (see, for example, U.S. Pat. No. 4,624,846). The anti-MISIIR antibody molecules may

also be conjugated to labels or contrast agents such as, without limitation, paramagnetic or superparamagnetic ions for detection by MRI imaging and optical and fluorescence and/or mammography agents (examples of other labels are provided in, for example, U.S. Pat. Nos. 3,817,837; 3,850,752; 3,939,350; 3,996,345; 4,277,437; 4,275,149 and 4,366,241). Paramagnetic ions include, without limitation, Gd(III), Eu(III), Dy(III), Pr(III), Pa(IV), Mn(II), Cr(III), Co(III), Fe(III), Cu(II), Ni(II), Ti(III), and V(IV). Fluorescent agents include, without limitation, fluorescein and rhodamine and their derivatives. Optical agents include, without limitation, derivatives of porphyrins, anthraquinones, anthrapyrazoles, perylenequinones, xanthenes, cyanines, acridines, phenoxazines and phenothiazines. Mammography agents include, without limitation, derivatives of iodine or metals such as gold, gold particles or gold nanoparticles.

[0087] In an alternative method, a secondary binding ligand, such as a second antibody or a biotin/avidin ligand binding arrangement, which can recognize the anti-MISIIR antibody molecules of the instant invention, may be conjugated with the agents described above instead of with the anti-MISIIR antibody molecules. The conjugated secondary binding ligand can then be used in conjunction with anti-MISIIR antibody molecules in any of the assays described herein.

[0088] 4) The anti-MISIIR antibody molecules of the invention may be used to 1) diagnose cancer in patient, 2) determine the prognosis of a patient, including stage and grade (particularly whether it is metastatic) of a tumor and its potential sensitivity to therapy, 3) determine the origin of a tumor, 4) determine the efficacy of a treatment of a patient. In one embodiment the anti-MISIIR antibody molecules are utilized to detect the presence of MISIIR in a biological sample from a patient. The biological sample may include biopsies of various tissues including, without limitation: breast, prostate, cervical, ovarian, testicular, and pulmonary. Cellular examples of biological samples include tumor cells, blood cells, ovarian cells, prostate cells, breast cells, testicular cells, cervical cells, and lung cells. The biological sample may also be a biological fluid, wherein shed MISIIR can be detected, such as, without limitation, blood, serum, nipple aspirate and urine. Many immunological assays are well known in the art for assaying of biological samples for the presence of a certain protein including, without limitation: immunoprecipitations, radioimmunoassays, enzyme-linked immunosorbent assays (ELISA), immunohistochemical assays, Western blot and the like.

[0089] The presence of MISIIR in fluids such as blood may be indicative of the presence of cancer. The presence of MISIIR in fluids or sites not near the tumor may be indicative of metastases. The loss of MISIIR expression in a patient, particularly one undergoing treatment, over time is indicative of remission (i.e., successful treatment) while the gain of MISIIR expression in a patient over time can be indicative of recurrence. Additionally, the imaging techniques described hereinabove may be employed to monitor the size of the tumor to determine the efficacy of a treatment. In a particular embodiment of the invention, other cancer diagnostic assays can be performed to confirm the results obtained with the instant invention.

[0090] The anti-MISIIR antibody molecules of the invention may also be used in gene therapy for direct targeting of vehicles (liposomes, viruses etc.) containing genes to specific tumors expressing MISIIR. In an exemplary embodiment,

liposomes may be studded by the anti-MISIIR antibody molecules of the invention to facilitate tumor specific targeting. In another embodiment, anti-MISIIR antibodies may be expressed directly on the surface of viruses or as fusions with viral coat proteins to facilitate tumor specific targeting. The genes targeted in this manner can have a direct anti-tumor effect, sensitize the tumor to other agents or increase the susceptibility of the tumor to a host immune response. Anti-cancer agents such as chemotherapeutic agents, toxins, antibodies, antisense molecules, RNAi and/or radioisotopes may also be encapsulated in liposomes so modified.

[0091] In another embodiment, the anti-MISIIR antibody molecules may be used to direct gene therapy vectors, including but not limited to modified viruses, to cells that express MISIIR. Viruses and other vectors may also be utilized to deliver the genes for the anti-MISIIR antibody molecules to tumor cells where they could be produced and secreted into the cellular microenvironment or, through the addition of additional intracellular targeting sequences, they could be turned into intrabodies that localize to specific cellular compartments and knockout the expression of their targets.

[0092] In yet another embodiment of the instant invention, the anti-MISIIR antibody molecules of the instant invention can be conjugated or covalently attached to another targeting agent to increase the specificity of the tumor targeting. Targeting agents can include, without limitation, antibodies, cytokines, and receptor ligands. In a particular embodiment, the targeting agent is overexpressed on the tumor as compared to normal tissue. Additionally, the anti-MISIIR antibody molecules of the instant invention can be conjugated or covalently attached to compounds which elicit an immune response such as, without limitation, cytokines.

[0093] The present invention further encompasses kits for use in detecting the expression of MISIIR in biological samples. Such kits may comprise the anti-MISIIR antibody molecules of the invention specific for MISIIR as well as buffers and other compositions and instruction material to be used for the detection of the MISIIR.

#### IV. ADMINISTRATION OF ANTIBODIES

[0094] The antibodies as described herein will generally be administered to a patient as a pharmaceutical preparation. The term "patient" as used herein refers to human or animal subjects. These antibodies may be employed therapeutically, under the guidance of a physician for the treatment of malignant tumors and metastatic disease.

[0095] The pharmaceutical preparation comprising the antibody molecules of the invention may be conveniently formulated for administration with an acceptable medium such as water, buffered saline, ethanol, polyol (for example, glycerol, propylene glycol, liquid polyethylene glycol and the like), dimethyl sulfoxide (DMSO), oils, detergents, suspending agents or suitable mixtures thereof. The concentration of antibody molecules in the chosen medium will depend on the hydrophobic or hydrophilic nature of the medium, as well as the size and other properties of the antibody molecules. Solubility limits may be easily determined by one skilled in the art.

[0096] As used herein, "biologically acceptable medium" includes any and all solvents, dispersion media and the like which may be appropriate for the desired route of administration of the pharmaceutical preparation, as exemplified in the preceding paragraph. The use of such media for pharmaceutically active substances is known in the art. Except insofar as any conventional media or agent is incompatible with

the antibody molecules to be administered, its use in the pharmaceutical preparation is contemplated.

**[0097]** The dose and dosage regimen of an antibody according to the invention that is suitable for administration to a particular patient may be determined by a physician considering the patient's age, sex, weight, general medical condition, and the specific condition and severity thereof for which the antibody is being administered. The physician may also consider the route of administration of the antibody, the pharmaceutical carrier with which the antibody may be combined, and the antibody's biological activity.

**[0098]** Selection of a suitable pharmaceutical preparation depends upon the method of administration chosen. For example, the antibodies of the invention may be administered by direct injection into any cancerous tissue or into the surrounding area. In this instance, a pharmaceutical preparation comprises the antibody molecules dispersed in a medium that is compatible with the cancerous tissue.

**[0099]** Antibodies may also be administered parenterally by intravenous injection into the blood stream, or by subcutaneous, intramuscular or intraperitoneal injection. Pharmaceutical preparations for parenteral injection are known in the art. If parenteral injection is selected as a method for administering the antibodies, steps must be taken to ensure that sufficient amounts of the molecules reach their target cells to exert a biological effect. The lipophilicity of the antibodies, or the pharmaceutical preparation in which they are delivered, may have to be increased so that the molecules can arrive at their target locations. Furthermore, the antibodies may have to be delivered in a cell-targeting carrier so that sufficient numbers of molecules will reach the target cells. Methods for increasing the lipophilicity of a molecule are known in the art. If a small form of the antibody is to be administered, including but not limited to a Fab fragment, a Dab, an scFv or a diabody, it may be conjugated to a second molecule such as, but not limited to polyethylene glycol (PEG) or an albumin-binding antibody or peptide to prolong its retention in blood.

**[0100]** Pharmaceutical compositions containing a compound of the present invention as the active ingredient in intimate admixture with a pharmaceutical carrier can be prepared according to conventional pharmaceutical compounding techniques. The carrier may take a wide variety of forms depending on the form of preparation desired for administration, e.g., intravenous, oral or parenteral. In preparing the antibody in oral dosage form, any of the usual pharmaceutical media may be employed, such as, for example, water, glycols, oils, alcohols, flavoring agents, preservatives, coloring agents and the like in the case of oral liquid preparations (such as, for example, suspensions, elixirs and solutions); or carriers such as starches, sugars, diluents, granulating agents, lubricants, binders, disintegrating agents and the like in the case of oral solid preparations (such as, for example, powders, capsules and tablets). Because of their ease in administration, tablets and capsules represent the most advantageous oral dosage unit form in which case solid pharmaceutical carriers are obviously employed. If desired, tablets may be sugar-coated or enteric-coated by standard techniques. For parenterals, the carrier will usually comprise sterile water, though other ingredients, for example, to aid solubility or for preservative purposes, may be included. Injectable suspensions may also be prepared, in which case appropriate liquid carriers, suspending agents and the like may be employed.

**[0101]** A pharmaceutical preparation of the invention may be formulated in dosage unit form for ease of administration

and uniformity of dosage. Dosage unit form, as used herein, refers to a physically discrete unit of the pharmaceutical preparation appropriate for the patient undergoing treatment. Each dosage should contain a quantity of active ingredient calculated to produce the desired effect in association with the selected pharmaceutical carrier. Procedures for determining the appropriate dosage unit are well known to those skilled in the art.

**[0102]** Dosage units may be proportionately increased or decreased based on the weight of the patient. Appropriate concentrations for alleviation of a particular pathological condition may be determined by dosage concentration curve calculations, as known in the art.

**[0103]** In accordance with the present invention, the appropriate dosage unit for the administration of anti-MISIIR antibody molecules may be determined by evaluating the toxicity of the antibody molecules in animal models. Various concentrations of antibody pharmaceutical preparations may be administered to mice with transplanted human tumors, and the minimal and maximal dosages may be determined based on the results of significant reduction of tumor size and side effects as a result of the treatment. Appropriate dosage unit may also be determined by assessing the efficacy of the antibody molecule treatment in combination with other standard anti-cancer drugs. The dosage units of anti-MISIIR antibody molecules may be determined individually or in combination with each anti-cancer treatment according to greater shrinkage and/or reduced growth rate of tumors.

**[0104]** The pharmaceutical preparation comprising the anti-MISIIR antibody molecules may be administered at appropriate intervals, for example, at least twice a day or more until the pathological symptoms are reduced or alleviated, after which the dosage may be reduced to a maintenance level. The appropriate interval in a particular case would normally depend on the condition of the patient.

**[0105]** The following examples provide illustrative methods of practicing the instant invention, and are not intended to limit the scope of the invention in any way. While certain of the following examples specifically recite a certain type of anti-MISIIR antibody (e.g., scFv and diabody), the use of any anti-MISIIR antibody is within the scope of the instant invention. Additionally, while radioisotope conjugated antibodies are also exemplified, immunotoxins may also be employed for therapeutic purposes.

#### Example 1

##### Identification of MISIIR Specific Antibodies

**[0106]** Single-chain Fv (scFv) molecules specific for MISIIR were obtained by employing a panning (selection) strategy of a human scFv combinatorial phage display library similar to that employed for identifying scFv molecules specific for Her2/neu (Horak, E. M., et al. (2001) Proc. Amer. Assoc. Cancer Res., 39:774). Specifically, the MISIIR gene was isolated by performing RT-PCR on a human testicle Poly (A) RNA library (Cat #7973; Ambion; Austin, Tex.). The portion of the resulting cDNA encoding the ECD (extracellular domain) of MISIIR (FIG. 7) was cloned into the pSec-Tag2/Hygro vector (Invitrogen, Carlsbad, Calif.) which encodes for a 6xHis tag and a c-myc tag to be added to the carboxyl-terminus of the protein and a secretion signal to be added to the amino-terminus. The DNA encoding for the ECD of MISIIR was inserted in to the vector in two orientations, either 5' or 3' of a human IgG1 Fc domain in order to

facilitate secretion of the fully folded MISIIR into the supernatant. A tobacco etch virus cleavage site was engineered into the construct between MISIIR and the Fc domain to facilitate the separation of the final product from the Fc domain.

**[0107]** HEK 293 cells, grown in serum-free media, were stably transfected with both constructs and each fusion protein was isolated from culture supernatants by immobilized metal affinity chromatography; IMAC (Hochuli, E., et al. (1988) *Bio/Technology*, 6:1321-1325). A western blot of the protein expressed from the construct encoding for the ECD of MISIIR 5' of the Fc domain is shown in FIG. 1. The purified fusion protein was coated onto the sides of a Nunc-Immuno™ tube (Nalge Nunc; Rochester, N.Y.). A human scFv combinatorial phage display library consisting of  $10^{11}$  unique scFv clones (provided by Wayne Marasco, Dana-Farber Cancer Institute) was mixed with 100-fold excess of human IgG Fc domain and subsequently added to the Nunc-Immuno™ tube. The premixing of the library with a large excess of Fc domain diminished the likelihood that phage expressing anti-Fc scFv would bind the immobilized MISIIR-Fc fusion protein. Selection of phage displaying anti-MISIIR scFv molecules was performed similarly to the method described in Adams and Schier (Adams, G. P. and Schier, R. (2000) *Methods in Molecular Medicine* Vol. 39: Ovarian Cancer. Ed. Bartlett, J. The Humana Press, Totowa, N.J., pp. 729-747). Briefly, the Nunc-Immuno™ tube containing the phage library and excess Fc domain was washed and reactive phage were eluted by the addition of 100 mM triethylamine. TG1 *E. coli* were challenged with the eluted phage. Subsequently, phage particles were isolated from the infected bacteria and employed in subsequent rounds of binding and selecting.

**[0108]** After three rounds of selection, 200 phage-scFv clones were randomly isolated from the selection plates containing thousands of colonies. The clones were expanded and assayed by ELISA for binding to MISIIR-Fc and to IgG Fc domain. Thirty-three clones exhibited significant specificity for MISIIR-Fc without any evidence for specificity for IgG Fc domain.

**[0109]** After isolation of the vector containing the scFv gene from the 33 phage clones by phenol chloroform extraction, a PCR fingerprinting assay was performed. Briefly, the PCR fingerprinting assay entailed digesting the isolated scFv gene with BstNI at 60° C. for 2 hours and analyzing the restriction pattern on an agarose gel. As exemplified in FIG. 2, 16 of the clones had different restriction patterns and therefore contained scFv genes of unique nucleotide sequences.

**[0110]** DNA sequencing of the clones determined to be unique by PCR fingerprinting revealed that 12 of the 16 clones possessed unique amino acid sequences. All 12 unique clones were transferred into the pCYN expression vector (also referred to as pUC119mychis), expressed in *E. coli* with induction by the addition of isopropyl- $\beta$ -D-thiogalactopyranoside (IPTG), and then purified by IMAC (Schier, R., et al. (1995) *Immunotechnology*, 1:73-81; Adams, G. P., et al. (2000) *Methods in Molecular Medicine* Vol. 39: Ovarian Cancer, The Humana Press: Totowa, N.J., 729-747). The protein eluted from the resin was further purified by size exclusion chromatography using HPLC (high performance liquid chromatography) on a Superdex™ 75 column (Amersham; Piscataway, N.J.) (FIG. 3). The elution pattern indicated that anti-MISIIR scFv from clone #7A is primarily monomeric. 2.5 mg of purified anti-MISIIR scFv from clone #7A (major peak in FIG. 3) was obtained from 1 liter of bacterial culture. Polyacrylamide gel electrophoresis analysis of the elution

fractions from the size exclusion chromatography demonstrated the sequential purification scheme resulted in highly purified product (FIG. 4).

**[0111]** All 12 purified scFv molecules were also evaluated by surface plasmon resonance on a BIAcore® (Uppsala, Sweden) instrument to determine the ability of the scFv molecules to bind highly purified MISIIR ECD. Surface plasmon resonance analysis revealed that at least 7 of the 12 scFv molecules bind to MISIIR-Fc but not to IgG alone (see, e.g., clone #17 (FIG. 8), which displayed a high affinity for the ECD of MISIIR, in FIG. 5). As seen in FIG. 5, the dissociation rate of scFv from MISIIR-Fc is slow, therefore indicating a strong interaction between the antibody and MISIIR. Such a strong interaction will allow for more durable retention of the antibody to a tumor expressing MISIIR.

**[0112]** The nucleotide sequences of certain scFv clones which displayed specific binding to MISIIR are provided in FIGS. 8-11, 14, 15 and 16 (SEQ ID NOs 1-7).

**[0113]** Surface plasmon resonance (SPR) technology was used to determine the binding of the anti-MISIIR molecules to MISIIR ECD. The SPR response reflects a change in the mass concentration as molecules bind or dissociate from an antigen immobilized on a sensor chip. These studies were performed on a BIAcore 1000 instrument. The MISIIR-Fc ECD fusion protein target antigen was coated on a CM5 chip at a concentration of 5,000 resonance units (RU). The anti-MISIIR antibody molecules were then flowed over the chip and the difference in the response units (RU) between the start point and the end was determined. A negative control protein (Fc) was coated on a chip at 4,800 RU and was used to rule out binding to the Fc portion of the MISIIR-Fc fusion protein. The association and dissociation rates, and the affinity of each molecule for MISIIR ECD were determined by passing serially diluted samples over an MISIIR-Fc ECD coated chip with a lower concentration of target antigen (600 RU) as per the BIAcore manufacturer's instructions. The evaluation of the data was done using BIAevaluation 3.0 software. FIG. 12A shows the SPR of a diabody of clone #17 and FIG. 12B shows the SPR of an scFv-Fc of clone #7. Additionally, an scFv of clone #7 and an scFv of clone #17 demonstrated an affinity for MISIIR ECD by SPR of  $3 \times 10^{-7}$  M and  $0.9 \times 10^{-7}$  M, respectively.

**[0114]** The binding of the antibodies was also tested in a standard fluorescence-activated cell sorter (FACS) assay. IGROV-1 cells, which express MISIIR, were analyzed for binding to an scFv-Fc of clone #7 and a control IgG. Binding of the scFv-Fc to the cells was detected with a fluorescein conjugated goat anti-human IgG (Catalog #AHI0408; Biosource International, Camarillo, Calif.). FIG. 13 demonstrates specific binding of the scFv-Fc of clone #7 for the MISIIR expressing IGROV-1 cells.

## Example 2

### Identification of MISIIR Antibodies with Cytotoxic or Anti-Proliferative Effects

**[0115]** MIS has been reported to exhibit antiproliferative effects in many ovarian cancer cell lines (Masiakos, P. T., et al., (1999) *Clin. Cancer Res.*, 5:3488-3499). Accordingly, some anti-MISIIR scFv molecules can be expected to exhibit similar antagonistic effects. Therefore, the isolated unique anti-MISIIR scFv molecules identified in Example 1 can be evaluated for antiproliferative and pro-apoptotic effects on ovarian tumor cells that overexpress MISIIR and on control

cells that lack MISIIR. Notably, scFv molecules bind to antigen monovalently, but engineered antibody-based molecules may also bind divalently. Therefore, scFv molecules can also be assayed as divalent antibodies in each of the assays described herein by contacting the anti-MISIIR scFv molecules with an anti-myc antibody such as 9E10 antibody (Santa Cruz Biotechnology; Santa Cruz, Calif.). Inasmuch as the anti-MISIIR scFv molecules contain a myc tag expressed on the carboxyl terminus, the presence of the anti-myc antibodies generates dimeric MISIIR binders. Additionally, recombinant MIS or purified MIS can be included in each assay as a positive control.

**[0116]** An example of an assay that may be employed to determine the effects of the anti-MISIIR scFv molecules on the growth and viability of cells is an MTT (3-[4,5-dimethylthiazol-2-yl]-2,5-diphenyl-tetrazolium bromide) assay (see, e.g., Sigma, St. Louis, Mo.). Briefly, living cells are able to metabolize MTT and the reaction product can be monitored colorimetrically. The MTT assay may be performed as previously described wherein the purified anti-MISIIR scFv molecules are employed over a wide range of dilutions (e.g., ranging from 1  $\mu$ M to 20 pM) in order to identify optimal doses (Amoroso, A. R., et al. (1996) *Cancer Research*, 56:113-120).

**[0117]** scFv clones that inhibit the proliferation of cell lines that express MISIIR (e.g., OVCAR-3, SK-OV-3, IGROV-1, and MOVAR) without altering the growth of cell lines that lack MISIIR (e.g., COS cells) then will be assayed in clonogenicity assays designed to evaluate their ability to induce cytotoxicity of the cell lines (Connolly, D. C., et al. (2003) *Cancer Res.*, 1389-1397). Briefly, SK-OV-3, OVCAR-3, IGROV-1, MOVAR and COS cells can be plated at a low concentration in tissue culture plates in fresh media or conditioned media in the presence of increasing concentrations of anti-MISIIR scFv. The cells can then be grown for one week at 37° C. Colonies can then be stained with, for example, 0.25% Methylene Blue in 30% ethanol and the number of colonies present in the treated plates can be compared to those in untreated plates. Once a response curve is determined, assays can be repeated with the addition of increasing doses of gamma irradiation using, for example, a cesium irradiator system in order to look for additive or synergistic effects of the anti-MISIIR scFvs and radiation. As noted above, the assays can be performed using both monovalent anti-MISIIR scFv and anti-MISIIR scFv that have been crosslinked with the anti-myc tag 9E10 MAAb.

**[0118]** The anti-MISIIR scFv molecules that mediate cytotoxic effects in the clonogenicity assays can also be evaluated for the ability to induce apoptosis in cells that overexpress MISIIR. As an example, an ELISA assay can be performed to detect the translocation of phosphatidylserine from the inner face of the plasma membrane to the cell surface, which is associated with early apoptotic events. These assays can be performed using, for example, the ApoAlert™ Annexin V Apoptosis Kit (Clontech, Palo Alto, Calif.), which employs an ELISA assay based upon the high affinity of annexin V for phosphatidylserine. Briefly, at various times after incubation with anti-MISIIR scFv, MISIIR positive and negative cells can be washed, incubated with the annexin V-FITC conjugate, and evaluated in a microtiter plate reader. As above, the specificity of the results can be based upon the observation of a positive signal in the wells containing, for example, SK-OV-3, OVCAR-3, and possibly MOVAR cells (depending upon epitope conservation) and no change in the signal in the wells

containing negative controls such as COS cells which lack MISIIR. Alternatively, TUNEL (terminal deoxynucleotidyl transferase mediated dUTP-biotin nick end-labeling) assays can be performed on target and control cells after 24 hrs in the presence or absence of anti-MISIIR scFv (Surh, C. D. and Sprent, J. N. (1994) *Nature*, 372:100-103).

### Example 3

#### Diabody and scFv-Fc Construction

**[0119]** Diabodies can be created from the anti-MISIIR scFv genes using, for example, the same techniques as employed to create the anti-HER2/neu diabody from the C6.5 scFv (Adams, G. P. et al. (1998) *British J. Cancer*, 77:1405-1412). Diabodies can be generated from the scFv clones that had the greatest affect on the growth/survival properties of tumor cells and from clones that did not alter these characteristics as controls. As described, each diabody will be composed of two identical homodimers, but bispecific heteridiabodies can also be prepared. Briefly, the  $V_H$  and  $V_L$  genes from each selected scFv can be amplified from the scFv DNA and gel purified.

**[0120]** The  $V_H$  and  $V_L$  genes can be joined together by, for example, PCR splicing by overlap extension using an oligonucleotide which encodes a 5 amino acid linker (G<sub>4</sub>S) between the C-terminus of the  $V_H$  and the N-terminus of the  $V_L$ . Indeed, the diabody of clone #17 was generated with this G<sub>4</sub>S linker. The primer employed to amplify the variable heavy gene from the 3' end encoded for three extra glycines and contained a BamHI site. The primer employed to amplify the variable light gene from the 5' end contained a BamHI site. Notably, the BamHI site introduced a glycine-serine sequence into the encoded sequence for the antibody when the PCR fragments were ligated together, thereby resulting in the G<sub>4</sub>S linker.

**[0121]** The diabody gene can be cloned into a vector such as pUC119 Sfi-NotmycHis (Adams, G. P., et al. (1998) *British J. Cancer*, 77:1405-1412), resulting in the addition of the myc peptide tag (Schier, R., et al. (1995) *Immunotechnology*, 1:73-81) followed by a hexa-histidine tag at the C-terminal end of the diabody. The vector also encodes the pectate lyase leader sequence, which directs expression of the diabody into the bacterial periplasm where the leader sequence is cleaved. This makes it possible to harvest native properly folded diabody directly from the bacterial periplasm. Native diabody can be expressed and purified from the bacterial periplasm using, for example, immobilized metal affinity chromatography (IMAC) followed by FPLC size exclusion chromatography using a Superdex 75 column (Breitling, S. D., et al. (1991) *Gene* 104:147-153; Hochuli, E., et al. (1998) *Bio/Technology*, 6:1321-1325). Each diabody can be assayed as described above for the scFv molecules to determine the ability of each diabody to alter the growth properties of cells that overexpress MISIIR.

**[0122]** The scFv-Fc of clone #7 was generated using the hinge stuffer vector system (see, for example, www.nfcr-ctae.org). Briefly, the hinge stuffer vector is a pcDNA3.1 based plasmid in which a chimeric human F105 VH leader sequence (with 3' pelB leader) and human IgG1 sequence (hinge, CH2 and CH3 domains) flank SfiI (5') and NotI (3') cloning sites that contain stuffer DNA (circa 439 bp). Upon digestion of the plasmid with SfiI and NotI restriction enzymes, the stuffer DNA drops out and the scFv fragments with identical restric-

tion sites are cloned in frame. In this way, the bivalent human sFv-IgG fusion proteins are expressed and secreted from mammalian cells.

#### Example 4

##### In Vivo Distribution Assays

**[0123]** Diabodies generated in Example 3 can be radiolabeled with  $^{125}\text{I}$  and tested for their ability to target human ovarian carcinoma xenografts growing in immunodeficient mice. Notably,  $^{111}\text{In}$ , among other isotopes, can be used in place of  $^{125}\text{I}$ , particularly if radioiodine labeled diabodies are rapidly internalized. In particular, in vivo biodistribution and pharmacokinetics can be determined and cumulative tumor:organ ratios can be calculated. These values can be used in MIRD (Medical Internal Radiation Dose) dosimetry calculations to determine the potential dose that would be achieved with the therapeutic isotopes  $^{131}\text{I}$  and  $^{90}\text{Y}$  in place of  $^{125}\text{I}$ . Such assays can be performed in SCID mice as previously described (Adams, G. P., et al. (1993) *Cancer Res.*, 53:4026-4034). Briefly, groups of mice can receive intravenous (i.v.) injections of radioiodinated diabody and blood samples can be collected serially by retro-orbital bleeding at, for example, 5, 15, 30, 45 minutes, 1, 2, 4, 8, 16, 24, 48 and 72 hours post administration. The quantity of radioisotope retained per ml of blood can be determined. Trichloroacetic acid (TCA) precipitation assays (Adams, G. P., et al. (1995) *J. Nucl. Med.*, 36:2276-2281) can be performed to differentiate between protein-associated and unassociated counts to ensure that the distribution of the diabody is being followed. The pharmacokinetics can then be determined by analysis using the Rstrip program (Micromath, Salt Lake City, Utah). Biodistribution studies can also be performed similarly except that the SCID mice will also bear established subcutaneous 100-200  $\text{mm}^3$  tumors, such as OVCAR-3 or SK-OV-3 tumors, that overexpress MISIIR (Masiakos, P. T., et al. (1999) 5:3488-3499). AUC (area under the curve) calculations can then be determined from % ID (injected dose)/g values using, for example, the NCOMP program (Laub, P. and J. Gallo (1996) *J. Pharm. Sci.*, 85:393-395).

**[0124]** Dose estimates for radiolabeled antibodies in humans can be calculated using mouse biodistribution data from the same molecule based upon the following assumptions: 1) tumor and normal organ concentration data in the mouse can be extrapolated to "reference man"; 2) the pharmacokinetics and biodistribution of  $^{111}\text{In}$ -radiolabeled antibody are equal to those of antibodies radiolabeled with  $^{90}\text{Y}$ trium; and 3) the residence time of the radiopharmaceutical in tumors and organs in man is the same as that in the animal model. Finally, the S values (indicator of the radioactive doses that are both absorbed and emitted by a given organ; see MIRD program) for the mouse organs must be normalized to the human organs based upon the size of the organ relative to the whole animal versus the size of the organ relative to the whole person.

**[0125]** All dose estimates can be calculated based on Formula A ( $[\text{RT}/\text{PIDRB}]_{\text{man}} = [\text{RT}/\text{PIDRB}]_{\text{mouse}}$ ) where  $\text{RT} = \text{AUC}/\text{Activity administered}$  and  $\text{PIDRB} = \text{Percent Injected Dose Remaining in the Body}$ . The computer program MIRD DOSE 3 (supplied by Oak Ridge Associated Universities) can be used to calculate radiation absorbed doses to all the organs in "reference man" based on the residence times established in the above equation. Since there are no S values available for tumors, the dose to tumor can be calculated

based on separating the dose contributed by  $\beta$  particles and photons (Formula B: dose from  $\beta$  particles =  $D_{np} = [(0.408 \text{ g cGy}/\mu\text{Ci h})/[\text{Tumor mass (g)}] \times \text{Accumulated Activity } (\mu\text{Ci h})$ ). The dose from photons ( $D_p$ ) can be counted equivalent to fraction of total body dose calculated for photons only ( $D_{\text{tumor}} = D_{np} + D_p$ ). Molecules can be selected for evaluation in preclinical therapy trials based upon predicted human dosimetry from the MIRD calculations and tumor:normal organ AUC ratios. Preferably, diabodies will exhibit highly specific tumor targeting, e.g., a 3:1 ratio of cumulative tumor:normal dosimetry. Particular emphasis can be placed upon the  $\text{LD}_{50}$  values for myelosuppression-sensitive organs such as the bone marrow (200-300 cGy) and those believed to be involved in the catabolism of the radiolabeled protein such as the kidneys (1500 cGy) and liver (4000 cGy). Diabodies selected for therapy studies can have predicted delivery of more than 4000 cGy to tumor, with an associated normal organ dose limit of less than 200 cGy for the bone marrow, 1200 cGy for kidneys and 3000 cGy to the liver (Murray, J., et al. (1994) *Cancer*, 73:1057-1066).

#### Example 5

##### Imaging Studies

**[0126]** Ovarian cancers poses unique challenges for early detection and in monitoring responses to therapy (Ozols, R. F., et al. (2001) *Cancer: Principles and Practice of Oncology*, Lippincott Williams and Wilkins: Philadelphia, Pa.). CA-125 antigen detection in the circulating blood has proven useful in assessing the overall benefits of surgery or chemotherapy (Skates, S. J., et al. (2000) *Methods in Molecular Medicine* Vol. 39: Ovarian Cancer, The Humana Press: Totowa, N.J.). Non-invasive imaging by CT scanning, however, is insufficiently sensitive or specific to assess the impact of surgery or identify sites of tumor progression or regression. Antibody-based imaging of ovarian cancer has employed a variety of antibodies and radionuclide pairs (Kalofonos, H. P., et al. (1999) *Acta Oncologica*, 38:629-634), but none of these approaches has emerged as being sufficiently sensitive and specific for routine use.

**[0127]** The utility of using an anti-MISIIR diabody as a vehicle for the detection of ovarian cancer can be compared with the images obtained using the current PET imaging agent  $^{18}\text{F}$ FDG ( $^{18}\text{F}$  fluorodeoxyglucose). An example of an assay for testing the sensitivity of the anti-MISIIR diabodies for this purpose is as follows.

**[0128]** Due to the significantly longer physical half-life of  $^{124}\text{I}$ ,  $^{18}\text{F}$ FDG imaging can be performed before conjugated diabody imaging studies. Immunodeficient mice bearing established 300  $\text{mm}^3$  subcutaneous (s.c.) human SK-OV-3 or OVCAR-3 ovarian carcinoma tumors can be administered 50  $\mu\text{Ci}$  of  $^{18}\text{F}$ FDG by i.v. tail vein injection. At one and two hours after injection, the mice can be anesthetized and imaged on a Discovery<sup>TM</sup> LS PET/CT camera (GE Medical Systems; Waukesha, Wis.). Twenty four hours later, the diabody that is determined to be associated with the greatest degree of tumor targeting specificity in the biodistribution/dosimetry studies described above can be labeled with  $^{124}\text{I}$ , a positron-emitting radioisotope with a 4 day half-life) using the  $^{64}\text{Cu}$ , Chloramine T method. Notably, among other isotopes, can be used in place of  $^{124}\text{I}$  for imaging studies, particularly if the radioiodine-labeled diabodies are rapidly internalized. The  $^{124}\text{I}$ -conjugated diabody (50 microCuries on 50 micrograms of diabody per mouse) can be administered by i.v. tail vein injection

and the mice can be anesthetized as described above. The mice can be imaged at, for example, 4, 12, 24, 36 and 48 hours post administration. Imaging can be performed, for example, on the Discovery™ LS Whole Body PET/CT Scanner (GE Medical Systems) or microPET® (Concorde Instruments; Knoxville, Tenn.).

**[0129]** The standard clinical PET/CT acquisition protocol may be significantly modified for murine imaging. A custom-designed platform can be mounted on to the edge of imaging table for imaging up to 3 mice simultaneously. The current setting for CT (computed tomography) can be reduced to 50 mAs and PET data can be acquired in 2D mode for 10 minutes. PET images can be reconstructed using a standard manufacturer supplied OSEM algorithm with 28 subsets and 2 iterations, with a reduced display field of view of 30 cm diameter, in a 256×256 matrix. CT can be used for applying attenuation correction. PET activity data can be corrected for radioactive decay and normalized for the dose administered. Additional CT images can also be acquired with a slice thickness of 1 mm. Images can be reviewed on an eNTEGRA workstation (GE Medical Systems) as 3-D volume sets with simultaneous display of transverse, coronal and sagittal planes. Regions of interest (ROI's) can be drawn by two independent observers around tumors using a combination of PET and CT information to identify tumor edges. Both the maximum and average tumor activity concentration can be determined for any observed tumors from PET images. The size of the tumor can be estimated from CT images and activity can be corrected for object size effect using an experimentally determined recovery coefficient measured from mouse phantom studies with <sup>124</sup>I.

**[0130]** The specificity of anti-MISIIR diabodies, degree of tumor targeting and retention as compared to normal tissue, and estimation of tumor and normal tissue dosimetry associated with radiolabeled anti-MISIIR diabodies can also be determined in humans. An example of such a study follows.

**[0131]** Women with metastatic, measurable MISIIR expressing ovarian cancer can be eligible for this study. MISIIR expression can be determined by IHC (immunohistochemistry) on archived biopsy or aspirate specimens (Garcia de Palazzo, I., et al. (1993) *Intl. J. Biol. Markers*, 8:233-239; Weiner, L. M., et al. (1995) *Cancer Res.*, 55:4586-4593). Eligible patients should have acceptable normal organ function and should provide written informed consent. Prior antibody therapy can be permissible provided that at least two months have elapsed from the last antibody infusion.

**[0132]** On Day One, patients can receive an intravenous injection of 10 mCi of <sup>18</sup>F-FDG. One hour later, PET/CT fusion images will be acquired using a Discovery™ LS PET/CT instrument (GE Medical Systems) or equivalent imaging system. On Day Two or Three, the patients can receive 5 mCi (180 MBq) of <sup>124</sup>I on an escalating dose of anti-MISIIR diabody (5, 10, 20, 30 or 40 mg) by i.v. bolus injection. Whole body PET/CT images can be acquired and blood samples also can be obtained at about one hour, 4-8 hours, 24 hours, 48 hours, 72 hours and 120 hours after administration. Regions of interest can be drawn around critical organs and the amount of localized activity can be determined. Blood samples can be counted along with standards in a gamma well counter to determine the activity remaining in circulation. The projected radiation exposure to each organ and to bone marrow that would have been associated with a therapeutic dose if <sup>131</sup>I was

used in place of <sup>124</sup>I can then be determined using the MIRD Dose 3 software package (Oak Ridge Associated Universities).

**[0133]** Safety can be determined by the ongoing monitoring of the incidence and intensity of adverse events graded by the Common Toxicity Criteria. Following injection of the radiopharmaceuticals, whole body PET/CT imaging can be performed immediately at the time points indicated above. As the diabody is a novel construct, regular blood samples can be obtained to assay for the development of human anti-diabody antibodies (HADA). These data can be used to obtain dosimetry estimates to determine if <sup>131</sup>I labeled anti-MISIIR diabody would be associated with a predicted therapeutic effect and could be safely administered to patients. If so, this can provide justification for proceeding to a separate radioimmunotherapy clinical trial employing the <sup>131</sup>I labeled anti-MISIIR diabody.

**[0134]** Statistical analysis of the results of this study can be performed as follows. Briefly, logistic regression can be conducted to model the probability of DLT (dose-limiting toxicity) or of efficacious response as a function of protein dose. Polynomial functions of dose can be considered to permit the possibility of non-monotone dependence on dose (e.g., maximal efficacy achieved at a dose strictly less than the maximum administered in the study). The logistic regression models can provide an estimate of the lowest protein dose such that (1) the estimated percentage of patients expected to exhibit favorable dosimetry is at least 50% and (2) the estimated prevalence of DLT is no greater than 10%. Generalized estimating equations in the context of logistic regression can be used to model the probability of a positive diagnosis (i.e., sensitivity) as a function of protein dose and image agent (i.e., compare <sup>18</sup>F-FDG and multiple <sup>124</sup>I-based images).

#### Example 6

##### Therapy Studies

**[0135]** The ability of unconjugated diabody to treat ovarian cancer xenografts can be determined. If available, diabodies that either inhibit or do not suppress in vitro tumor cell growth can be employed as controls in these studies. An example of such studies is described briefly here. 8-12 week old SCID mice can receive s.c. implants of 5×10<sup>6</sup> OVCAR-3, IGROV-1, or SK-OV-3 ovarian cancer cells. After the tumors have grown to approximately 100 mm<sup>3</sup>, cohorts of about 10 mice can be treated daily with four escalating dose levels, which can be determined based upon the results of the in vitro studies described hereinabove, of the diabody clone that exhibited the greatest efficacy in the in vitro growth inhibition studies described hereinabove. The mice can be observed for tumor growth and treatment-related toxicity by noting, e.g., weight loss and distress (Adams, G. P., et al. (2000) *Nuc. Med. and Biol.*, 27:339-346). Tumors can be measured (length×width×depth) with calipers about three times per week and the total volume can be calculated using the ellipsoidal method (Hann, H. W. L., et al. (1992) *Cancer*, 70:2051-2056). If these results indicate that the unconjugated diabody is associated with an in vivo anti-tumor effect, the V<sub>H</sub> and V<sub>L</sub> domains can be incorporated into a human IgG1 molecule to potentially afford greater bioavailability and the therapeutic potential of the resulting anti-MISIIR IgG can be assessed.

**[0136]** The ability of the anti-MISIIR diabody and IgG to treat early, spontaneously occurring ovarian tumors in the MISIIR-TAg transgenic mouse model can also be assessed.

Briefly, the MISIIR-TAg transgenic mouse line expresses the transforming region (TAg) of simian virus 40 (SV40) under the control of the MISIIR promoter (Connolly, D. C., et al. (2003) *Cancer Res.*, 1389-1397). Approximately 50% of the female MISIIR-TAg mice develop ovarian tumors between 6 and 13 weeks of age. These ovarian tumors, in addition to a cell line, MOVCAR, derived from the ascites of the MISIIR-TAg mice, express endogenous MISIIR and TAg as determined by RT-PCR (Connolly, D. C., et al. (2003) *Cancer Res.*, 1389-1397). The ability of the anti-MISIIR diabody and IgG to treat the ovarian tumors in MISIIR-TAg mice can be determined by the following example. Briefly, cohorts of approximately 10 MISIIR-TAg mice can be treated with unconjugated anti-MISIIR diabody or IgG or left untreated at about 6, 9 and 12 weeks of age. The mice can be euthanized and dissected when approximately 30-50% of the untreated control mice display evidence of tumor formation (e.g., ascites). After documenting evidence of gross lesions, the tissues can be fixed in formalin and processed for histopathological examination. The significance of therapy efficacy with unconjugated anti-MISIIR diabody and IgG can be determined by comparing tumor growth in the presence of the agent compared to tumor growth in the controls.

**[0137]** The anti-MISIIR antibodies can also be tested in radioimmunotherapy studies as exemplified herein. Diabody molecules typically display several characteristics such as rapid renal elimination, more efficient tumor penetration and higher binding avidity that frequently make diabodies superior to other antibody formats, such as intact IgG, (scFv)<sub>2</sub> and scFv, in radioimmunotherapy. Therefore, the diabody constructs with the best-predicted dosimetry as described hereinabove can be assessed for their ability to serve as a vehicle for the radioimmunotherapy of solid tumors. Notably, diabodies with similar affinities but contrasting impacts on in vitro growth (e.g., one diabody that inhibits growth and one that does not) may be employed to determine if any growth inhibitory signaling is synergistic or additive with radioimmunotherapy. Inasmuch as scid mice have been found to be hypersensitive to ionizing radiation due to defects in DNA repair (Biedermann, K. A., et al. (1991) *Proc. Natl. Acad. Sci.*, 88:1394-1397), therapy trials can be performed in, for example, athymic nude mice.

**[0138]** Initially, the maximum tolerated dose (MTD) and LD<sub>10</sub> can be determined as follows. The diabody will be labeled at a specific activity approximating 5 mCi (180 MBq) of <sup>131</sup>I per mg diabody. Notably, <sup>90</sup>Y and <sup>177</sup>Lu, among other isotopes, can be used in place of <sup>131</sup>I in radioimmunotherapy, particularly if the radioiodine-labeled diabodies are rapidly internalized. A single i.v. dose, employing one of at least about five different doses, can be given to cohorts of about 5 non-tumor bearing athymic nude mice. The mice can then be observed for signs of toxicity (e.g., weight loss, petechiae, and death) and the maximum tolerated dose can then be identified as that at which all of the treated mice survive with less than about a 10% loss of body weight. The LD<sub>10</sub> can be defined as the dose associated with 10% mortality. Inasmuch as the biodistribution data for diabodies indicate that the greatest degree of normal organ retention occurs in the kidneys, renal retention may largely define the maximally-tolerated dose (MTD) in clinical radioimmunotherapy trials. Accordingly, the long-term effects of this therapy on the kidneys can also be determined. Briefly, the mice from these toxicity studies can be studied for about one year wherein monthly blood samples can be acquired, for example, by

retro-orbital bleeding to evaluate levels of markers that are associated with renal failure (e.g., blood urea nitrogen and serum creatinine). After about one year, the mice can be euthanized and their tissues can be fixed for histopathological examination. Particular scrutiny can be placed upon the evaluation of the kidneys and bone marrow.

**[0139]** Cohorts of approximately ten mice bearing subcutaneous OVCAR-3, IGROV-1, or SK-OV-3 tumors can be treated at the MTD for all schedules of each molecule to be tested. Duplicate experiments can be performed in mice with small (~2 mm<sup>3</sup>) palpable tumors and a second set of treatment studies can be performed in mice bearing established (~10 mm<sup>3</sup>) tumors. In all experiments, the radiolabeled diabody can be administered by i.v. bolus injection in a maximum volume of about 200  $\mu$ L. The therapeutic effects can be monitored by serially measuring tumor size (as described hereinabove) and sacrificing animals whose tumors exceed about 2 cm in greatest diameter and by plotting both tumor growth rates and times to sacrifice. All studies can include one or more of the following: groups that do not receive treatment, groups treated with radiolabeled growth inhibitory diabody, groups treated with radiolabeled non-growth inhibitory diabody with or without the same affinity, and groups treated with unlabeled forms of both diabodies.

**[0140]** As intraperitoneal (i.p.) models are particularly germane to ovarian cancer, the above-described studies can be performed in nude mice at 7 and 14 days following the i.p. injection of 4 $\times$ 10<sup>6</sup> OVCAR-3, IGROV-1, or SK-OV-3 cells. In this model, evidence of abdominal distention typically occurs after about 42 days and tumors are routinely observed within the peritoneum, within the intrabursal space and within the ovaries. In these studies, the mice can be followed for survival following the methods previously described in a study of antibody-based therapy of ovarian cancer in a SCID mouse model (Weiner, L. M., et al., (1993) *Cancer Res.*, 53:94-100).

**[0141]** Future studies can examine the combined effect of anti-MISIIR diabodies (growth inhibitory and non-growth inhibitory) with subcurative doses of chemotherapeutic agents that are active in ovarian cancer such as, without limitation, taxanes, platinum, carboplatin, and combinations of two or more agents such as gemcitabine with cisplatin, topotecan, and/or doxorubicin. Additionally, the efficacy of anti-MISIIR diabody-based radioimmunotherapy followed by sub-curative chemotherapy in the mouse model can be examined.

**[0142]** The tumor targeting and dosimetry of anti-MISIIR antibodies in addition to toxicities and MTDs can also be determined in humans. For example, women with metastatic, measurable MISIIR expressing ovarian cancer, as in the human imaging trials described hereinabove, can receive a scout dose consisting of an intravenous injection of 5 mCi (180 MBq) of <sup>131</sup>I on 5 mg of diabody. Whole body images can be acquired on a gamma camera and blood samples can also be taken at about one hour, 4-8 hours, 24 hours, 48 hours, 72 hours and 120 hours after administration. Regions of interest can be drawn around critical organs and the amount of localized activity can be determined. Blood samples can be counted along with standards in a gamma well counter to determine the activity remaining in circulation. The projected radiation exposure to each organ and to bone marrow associated with the patient's planned therapeutic dose can then be determined using the MIRD Dose 3 software package (Oak Ridge Associated Universities). If the exposure is predicted to

be within safe limits for all critical organs, the patient can be treated as described below on day 8 using the optimal total diabody protein dose identified in the first trial described above. Cohorts of about 3-6 patients will be treated in a standard dose-escalation schema. Dose escalation are preferably not permitted until at least six weeks have elapsed following treatment of the last patient on a current dose cohort. An example of dose escalation is seen in Table 1.

TABLE 1

Dose Level	Pts.	Diabody Dose	Radionuclide Dose (mCi)
1	3	Fixed <sup>a</sup>	10 mCi <sup>b</sup>
2	3	Fixed	20 mCi
3	3	Fixed	40 mCi
4	3	Fixed	55 mCi
5	3	Fixed	65 mCi
6	3-6	Fixed	75 mCi <sup>c</sup>

<sup>a</sup>The total diabody protein dose can be the optimal dose that was identified in the first trial.

<sup>b</sup>If one dose-limiting toxicity (DLT) is observed in the first three patients at a given dose level, another three patients can be accrued to that dose level. If >2/6 patients exhibit DLT in a given dose cohort, that dose can be considered to exceed the MTD, and an additional 3-6 patients can be treated at the next highest dose level to confirm it does not exceed the MTD.

<sup>c</sup>Dose-escalation in 5 mCi (180 MBq) increments can continue in three-patient cohorts until MTD has been identified. Six weeks must elapse from treatment of the last patient in a dose cohort before dose-escalation can occur.

**[0143]** Safety can be determined by the ongoing monitoring of the incidence and intensity of adverse events graded by, for example, the Common Toxicity Criteria (see, e.g., [www.fda.gov/cder/cancer](http://www.fda.gov/cder/cancer)). Following injection of the radiophar-

maceutical scout dose, whole body gamma camera imaging, optionally with SPECT (single photon emission computed tomography) capabilities, can be performed immediately after administration at the time points indicated above. The sensitivity and specificity of gamma camera imaging can be determined by comparing SPECT images with CT scans. Therapeutic efficacy can be determined by comparing pre- and post-treatment CT scans of known tumor deposits (CT scans can be acquired every six weeks for the first three months following therapy and then every two months thereafter until there is evidence of progression). As the diabody is a novel construct, regular blood samples can be obtained regularly to assay for the development of human anti-diabody antibodies (HADA). Statistical analysis of the results can be performed as described hereinabove in Example 5. As an example, the therapeutically effective dosage amount for a patient may be 50-200 mCi.

**[0144]** While the above demonstrates the therapeutic use of anti-MISIIR antibody molecules conjugated to radioisotopes, similar studies can be performed for immunotoxins and anti-MISIIR antibody molecules conjugated to chemotherapeutic agents.

**[0145]** While certain of the preferred embodiments of the present invention have been described and specifically exemplified above, it is not intended that the invention be limited to such embodiments. Various modifications may be made thereto without departing from the scope and spirit of the present invention, as set forth in the following claims.

## SEQUENCE LISTING

<160> NUMBER OF SEQ ID NOS: 18

<210> SEQ ID NO 1

<211> LENGTH: 767

<212> TYPE: DNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: Synthetic Sequence

<400> SEQUENCE: 1

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atccgtcagg ccccaggaaa ggcccgggag tggcttgca ctcattgattg ggatgacgat      180
aaatactaca gcacatctct gaagaccagg ctcaccatct ccaaggacac ctccaaaaac      240
caggtggttc ttacaatgac caacatggac cctgtggaca cagccacata ttactgtgcc      300
cgggactctt attatggctc ggggagtcac tttgacttct ggggccaggg aaccctggtc      360
accgtctcct caggtggcgg cggttccgga ggtggtgggt ctggcggtgg tggeagctcc      420
tatgagctga ctcagccacc ctcagtgtcc gtgtcccctg gacagacagc caccatcacc      480
tgttctggac atgacttgcg gaataaatat gctcattggt atcagcagaa gccaggacag      540
tcccctgtgc tggctgtcta tcaagatgct aagcggccct caggaatccc tgagcgatcc      600
tctggctcca actctgggaa cacagccact ctgaccatca gcgggaccca ggctatggat      660
gaggctgact attactgtca gacgtgggac aggagcacag tggctcttcgg cggaggggacc      720
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<220> FEATURE:
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<400> SEQUENCE: 2
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caggcccctg gacaagggct tgagtggatg ggatggatca gcgcttaca tgtaacaca    180
aactatgcac agaagctcca gggcagagtc accatgacca cagacacgtc cagcagcaca    240
gcctacatgg agctgaggag cctcagatat gacgacacgg ccgtatatta ctgtgcgaga    300
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gggcagaggg tcaccatctc ttgttctgga agcaggtcca acatcggaag gaataccgta    540
aactggtatc agcaggtccc aggaatggcc cccaaactcc tcactatag taataatcag    600
cggccctcag gggtcctcga ccgattctct ggctccaagt ctggcacctc agcctccctg    660
gccatcagtg ggtccagtc tgaggatgag gctgattatt actgtgcagc atgggatgac    720
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<210> SEQ ID NO 3
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<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Synthetic Sequence

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caggctccag ggaaggggct ggagtgggtc tcagctatta gtgtagtgg tggtagcaca    180
tactacgcag actccgtgaa gggccgggtc accatctcca gagacaattc caagaacacg    240
ctgtatctgc aaatgaacg cctgagagcc gaggacacgg ccgtatatta ctgtgcgacg    300
cgccctcaa ggggtagcag tggctggtac gggggggact actggggcca ggaaccctg    360
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tcctatgagc tgactcagcc accctcaact tctgggactc ccgggcagag ggtcaccatc    480
tcttgttctg gaagcacctc caacatcgca actaataatg taaactggtc ccagttcctc    540
ccaggaacgg cccccaaact cctcatgtat cggaatgatc agcggcccgc aggggtccct    600
gaccgattct ctggtcccaa gtctggcacc tcagcctccc tggccatcag tgggtccaa    660
cctgaggatg aggtcgacta ttactgtgca gcatgggatg acagcctggg tggcgaggtc    720
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gc

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<210> SEQ ID NO 4
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<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Synthetic Sequence

<400> SEQUENCE: 4

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caggccccctg gacaagggct tgagtggatg ggatggatca gcgcttaca tgtaacaca    180
aactatgcac agaagctcca gggcagagtc accatgacca cagacacgtc cagagacaca    240
gcctacatgg agctgaggag cctcagatat gacgacacgg ccgatatatta ctgtgcgaga    300
gatgggagggc gtggttcggg tatttactgg ggtgtgtatt attacaacgg tatggacgtc    360
tggggccaag ggaccacggt caccgtctcc tcagggtggcg gcggttcogg aggtggtggt    420
tctggcgggtg gtggcagtca gcctgtgctg actcagccac cctcagcgtc tgggaccccc    480
gggcagaggg tcaccatctc ttgttctgga agcaggtcca acatcggaag gaataccgta    540
aactggtatc agcaggtccc aggaatggcc cccaaactcc tcatctatag taataatcag    600
cggccctcag gggtcctcga ccgattctct ggctccaagt ctggcacctc agcctccctg    660
gccatcagtg ggtccagtc tgaggatgag gctgattatt actgtgcagc atgggatgac    720
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<210> SEQ ID NO 5
<211> LENGTH: 798
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Synthetic Sequence

<400> SEQUENCE: 5

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atccgtcagc ccccaggaaa ggcctggag tggcttgca tcatttatcg ggataatgat    180
aagegtaca accatctct gaagagcagg ctcaccatca ccaaggacac ctgaaaaaac    240
caagtggctc tgacaatgag caacatggac cctgtggaca cagccacata ttactgtgca    300
cacagcctcg tagtaccagc tgctaatccc tttgactact ggggccaggg aaccctggtc    360
accgtctcct catcggcctc gggggccgaa ttgggcggcg gcggtccogg aggaggagga    420
tctggtggtg gtggttcgac tagtcaggct gtgctgactc agccgtcttc cctctctgca    480
tctcctggag catcagccag tctcacctgc accttgccga gtggcatcaa tgttggtacc    540
tacaggatat actggtacca gcagaagcca gggagtcctc cccagtatct cctgaggtac    600
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<223> OTHER INFORMATION: Synthetic Sequence
<220> FEATURE:
<221> NAME/KEY: unsure
<222> LOCATION: (15)...(15)
<223> OTHER INFORMATION: n = a, g, c or t

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gatcgagggg ggctgatgc ttctgatatc tggggccaag ggacaatggt caccgtctct   360
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actcagccac cctccgcgtc cgggtctcct ggacagtcag tcaccatctc ctgcaccgga   480
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gaggtgatt acttctgac ctcatttca cgaattaacg attatgtctt cggacctggg   720
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<210> SEQ ID NO 7
<211> LENGTH: 771
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Synthetic Sequence

<400> SEQUENCE: 7
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caggccactg gacaagggct tgagtggatg ggatggatga accctaacag tggtaacaca   180
ggctatgcac agaagtcca gggcagagtc accatgacca ggaacacctc cactaataca   240
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ggcagcccat ccccgatgaa cgtctggggc caagggacca cggtcaccgt ctctcaggt   360
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attgtgatct atgaagatta ccgaagacc tctggggctc ctgatcgggt ctctggtctc   600
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gctgactact actgtcagtc ttatgatagc agcaatcctt atgtggtatt cggcgagggg   720
accaagctga cgtctcagg tcagcccaag gctgccccct cggcgccgcg a           771

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<210> SEQ ID NO 8
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<212> TYPE: DNA
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<220> FEATURE:
<223> OTHER INFORMATION: Synthetic Sequence

<400> SEQUENCE: 8

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tccccagagc tatccgctgc ctctacagcc gctgctgctt tgggatctgg aacctgacct    180
aagaccgggc acaggtggaa atgcaaggat gccgagacag tgatgagcca ggctgtgagt    240
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agctgaccaa gaaccaggtc agcctgacct gcctgtgcaa aggettctat cccagcgaca    900
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ggcagcaggg gaacgtcttc tcatgctccg tgatgcatga ggctctgcac aaccactaca   1080
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<210> SEQ ID NO 9
<211> LENGTH: 255
<212> TYPE: PRT
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Synthetic Sequence

<400> SEQUENCE: 9

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Thr Gln Thr Leu Thr Leu Thr Cys Thr Phe Ser Gly Phe Ser Leu Thr
          20          25          30

Thr Ser Gly Val Gly Val Gly Trp Ile Arg Gln Ala Pro Gly Lys Ala
          35          40          45

Pro Glu Trp Leu Ala Leu Ile Asp Trp Asp Asp Asp Lys Tyr Tyr Ser
          50          55          60

Thr Ser Leu Lys Thr Arg Leu Thr Ile Ser Lys Asp Thr Ser Lys Asn
65          70          75          80

Gln Val Val Leu Thr Met Thr Asn Met Asp Pro Val Asp Thr Ala Thr
          85          90          95

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Tyr Tyr Cys Ala Arg Asp Ser Tyr Tyr Gly Ser Gly Ser His Phe Asp
   100                               105                110
Phe Trp Gly Gln Gly Thr Leu Val Thr Val Ser Ser Gly Gly Gly Gly
   115                               120                125
Ser Gly Gly Gly Gly Ser Gly Gly Gly Gly Ser Ser Tyr Glu Leu Thr
   130                               135                140
Gln Pro Pro Ser Val Ser Val Ser Pro Gly Gln Thr Ala Thr Ile Thr
   145                               150                155                160
Cys Ser Gly His Asp Leu Arg Asn Lys Tyr Ala His Trp Tyr Gln Gln
   165                               170                175
Lys Pro Gly Gln Ser Pro Val Leu Val Val Tyr Gln Asp Ala Lys Arg
   180                               185                190
Pro Ser Gly Ile Pro Glu Arg Phe Ser Gly Ser Asn Ser Gly Asn Thr
   195                               200                205
Ala Thr Leu Thr Ile Ser Gly Thr Gln Ala Met Asp Glu Ala Asp Tyr
   210                               215                220
Tyr Cys Gln Thr Trp Asp Arg Ser Thr Val Val Phe Gly Gly Gly Thr
   225                               230                235                240
Lys Leu Thr Val Leu Gly Gln Pro Lys Ala Ala Pro Ser Ala Ala
   245                               250                255

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<210> SEQ ID NO 10
<211> LENGTH: 266
<212> TYPE: PRT
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Synthetic Sequence

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<400> SEQUENCE: 10

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Met Ala Gln Val Gln Leu Val Gln Ser Gly Thr Glu Val Lys Arg Pro
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 20     25     30
Asp Tyr Gly Ile Ser Trp Met Arg Gln Ala Pro Gly Gln Gly Leu Glu
 35     40     45
Trp Met Gly Trp Ile Ser Ala Tyr Asn Gly Asn Thr Asn Tyr Ala Gln
 50     55     60
Lys Leu Gln Gly Arg Val Thr Met Thr Thr Asp Thr Ser Thr Ser Thr
 65     70     75     80
Ala Tyr Met Glu Leu Arg Ser Leu Arg Tyr Asp Asp Thr Ala Val Tyr
 85     90     95
Tyr Cys Ala Arg Asp Gly Arg Arg Gly Ser Gly Ile Tyr Trp Gly Val
 100    105    110
Tyr Tyr Tyr Asn Gly Met Asp Val Trp Gly Gln Gly Thr Thr Val Thr
 115    120    125
Val Ser Ser Gly Gly Gly Gly Ser Gly Gly Gly Gly Ser Gly Gly Gly
 130    135    140
Gly Ser Gln Pro Val Leu Thr Gln Pro Pro Ser Ala Ser Gly Thr Pro
 145    150    155    160
Gly Gln Arg Val Thr Ile Ser Cys Ser Gly Ser Arg Ser Asn Ile Gly
 165    170    175
Arg Asn Thr Val Asn Trp Tyr Gln Gln Val Pro Gly Met Ala Pro Lys
 180    185    190

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Leu Leu Ile Tyr Ser Asn Asn Gln Arg Pro Ser Gly Val Pro Asp Arg  
 195 200 205

Phe Ser Gly Ser Lys Ser Gly Thr Ser Ala Ser Leu Ala Ile Ser Gly  
 210 215 220

Leu Gln Ser Glu Asp Glu Ala Asp Tyr Tyr Cys Ala Ala Trp Asp Asp  
 225 230 235 240

Ser Leu Asn Gly Val Val Phe Gly Gly Gly Thr Lys Leu Thr Val Leu  
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Gly Gln Pro Lys Ala Ala Pro Ser Ala Ala  
 260 265

<210> SEQ ID NO 11  
 <211> LENGTH: 260  
 <212> TYPE: PRT  
 <213> ORGANISM: Artificial Sequence  
 <220> FEATURE:  
 <223> OTHER INFORMATION: Synthetic Sequence

<400> SEQUENCE: 11

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

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

Trp Val Ser Ala Ile Ser Gly Ser Gly Gly Ser Thr Tyr Tyr Ala Asp  
 50 55 60

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

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

Tyr Cys Ala Thr Arg Pro Ser Arg Gly Ser Ser Gly Trp Tyr Gly Gly  
 100 105 110

Asp Tyr Trp Gly Gln Gly Thr Leu Val Thr Val Ser Ser Gly Gly Gly  
 115 120 125

Gly Ser Gly Gly Gly Gly Ser Gly Gly Gly Gly Ser Ser Tyr Glu Leu  
 130 135 140

Thr Gln Pro Pro Ser Thr Ser Gly Thr Pro Gly Gln Arg Val Thr Ile  
 145 150 155 160

Ser Cys Ser Gly Ser Thr Ser Asn Ile Ala Thr Asn Asn Val Asn Trp  
 165 170 175

Tyr Gln Phe Leu Pro Gly Thr Ala Pro Lys Leu Leu Met Tyr Arg Asn  
 180 185 190

Asp Gln Arg Pro Ala Gly Val Pro Asp Arg Phe Ser Gly Ser Lys Ser  
 195 200 205

Gly Thr Ser Ala Ser Leu Ala Ile Ser Gly Leu Gln Pro Glu Asp Glu  
 210 215 220

Ala Asp Tyr Tyr Cys Ala Ala Trp Asp Asp Ser Leu Gly Gly Glu Val  
 225 230 235 240

Phe Gly Thr Gly Thr Lys Val Asn Val Leu Gly Gln Pro Lys Ala Ala  
 245 250 255

Pro Ser Ala Ala  
 260

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<210> SEQ ID NO 12
<211> LENGTH: 263
<212> TYPE: PRT
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Synthetic Sequence

<400> SEQUENCE: 12

Met Ala Gln Val Gln Leu Val Gln Ser Gly Thr Glu Val Lys Arg Pro
1           5           10          15

Gly Ala Ser Val Lys Ile Ser Cys Arg Ala Thr Gly Tyr Thr Phe Ser
          20           25           30

Asp Tyr Gly Ile Ser Trp Met Arg Gln Ala Pro Gly Gln Gly Leu Glu
          35           40           45

Trp Met Gly Trp Ile Ser Ala Tyr Asn Gly Asn Thr Asn Tyr Ala Gln
          50           55           60

Lys Leu Gln Gly Arg Val Thr Met Thr Thr Asp Thr Ser Thr Ser Thr
65           70           75           80

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

Tyr Cys Ala Arg Asp Gly Arg Arg Gly Ser Gly Ile Tyr Trp Gly Val
          100          105          110

Tyr Tyr Tyr Asn Gly Met Asp Val Trp Gly Gln Gly Thr Thr Val Thr
          115          120          125

Val Ser Ser Gly Gly Gly Gly Ser Gly Gly Gly Gly Ser Gly Gly Gly
          130          135          140

Gly Ser Gln Pro Val Leu Thr Gln Pro Pro Ser Ala Ser Gly Thr Pro
          145          150          155          160

Gly Gln Arg Val Thr Ile Ser Cys Ser Gly Ser Arg Ser Asn Ile Gly
          165          170          175

Arg Asn Thr Val Asn Trp Tyr Gln Gln Val Pro Gly Met Ala Pro Lys
          180          185          190

Leu Leu Ile Tyr Ser Asn Asn Gln Arg Pro Ser Gly Val Pro Asp Arg
          195          200          205

Phe Ser Gly Ser Lys Ser Gly Thr Ser Ala Ser Leu Ala Ile Ser Gly
          210          215          220

Leu Gln Ser Glu Asp Glu Ala Asp Tyr Tyr Cys Ala Ala Trp Asp Asp
          225          230          235          240

Ser Leu Asn Gly Val Val Phe Gly Gly Gly Thr Lys Leu Thr Val Leu
          245          250          255

Gly Gln Pro Lys Ala Ala Pro
          260

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<210> SEQ ID NO 13
<211> LENGTH: 266
<212> TYPE: PRT
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Synthetic Sequence

<400> SEQUENCE: 13

Met Ala Gln Ile Thr Leu Lys Glu Ser Gly Pro Thr Leu Val Lys Pro
1           5           10          15

Thr Gln Thr Leu Thr Leu Thr Cys Thr Val Ser Gly Phe Ser Leu Ser

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                20                25                30
Asn Ala Arg Met Gly Val Ser Trp Ile Arg Gln Pro Pro Gly Lys Ala
   35                40                45

Leu Glu Trp Leu Ala Leu Ile Tyr Arg Asp Asn Asp Lys Arg Tyr Asn
   50                55                60

Pro Ser Leu Lys Ser Arg Leu Thr Ile Thr Lys Asp Thr Ser Lys Asn
   65                70                75                80

Gln Val Val Leu Thr Met Ser Asn Met Asp Pro Val Asp Thr Ala Thr
   85                90                95

Tyr Tyr Cys Ala His Ser Leu Val Val Pro Ala Ala Asn Pro Phe Asp
  100                105                110

Tyr Trp Gly Gln Gly Thr Leu Val Thr Val Ser Ser Ser Ala Ser Gly
  115                120                125

Ala Glu Leu Gly Gly Gly Gly Ser Gly Gly Gly Gly Ser Gly Gly Gly
  130                135                140

Gly Ser Thr Ser Gln Ala Val Leu Thr Gln Pro Ser Ser Leu Ser Ala
  145                150                155                160

Ser Pro Gly Ala Ser Ala Ser Leu Thr Cys Thr Leu Arg Ser Gly Ile
  165                170                175

Asn Val Gly Thr Tyr Arg Ile Tyr Trp Tyr Gln Gln Lys Pro Gly Ser
  180                185                190

Pro Pro Gln Tyr Leu Leu Arg Tyr Lys Ser Asp Ser Asp Lys Gln Lys
  195                200                205

Gly Ser Gly Val Pro Ser Arg Phe Ser Gly Ser Lys Asp Ala Ser Ala
  210                215                220

Asn Ala Gly Ile Leu Leu Ile Ser Gly Leu Gln Ser Glu Asp Glu Ala
  225                230                235                240

Asp Tyr Tyr Cys Met Ile Trp His Thr Ser Ala Tyr Val Phe Gly Thr
  245                250                255

Gly Thr Lys Val Thr Val Leu Gly Ser Ser
  260                265

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 20                25                30

Asn Tyr Ala Val His Trp Val Arg Gln Ala Pro Gly Lys Gly Leu Glu
 35                40                45

Trp Val Ala Ala Ile Ser Pro Asp Gly Arg Tyr Ile His Tyr Gly Asp
 50                55                60

Ser Val Gln Gly Arg Phe Thr Val Ser Arg Asp Asn Ala Gln Ser Thr
 65                70                75                80

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-continued

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

Tyr Cys Ala Arg Asp Arg Gly Arg Pro Asp Ala Phe Asp Ile Trp Gly  
 100 105 110

Gln Gly Thr Met Val Thr Val Ser Ser Gly Gly Gly Gly Ser Gly Gly  
 115 120 125

Gly Gly Ser Gly Gly Gly Gly Ser Gln Ser Val Leu Thr Gln Pro Pro  
 130 135 140

Ser Ala Ser Gly Ser Pro Gly Gln Ser Val Thr Ile Ser Cys Thr Gly  
 145 150 155 160

Thr Ser Ser Asp Val Gly Ala Tyr Asp His Val Ser Trp Tyr Gln Gln  
 165 170 175

His Pro Asp Lys Ala Pro Lys Leu Ile Ile Tyr Glu Val Asn Arg Arg  
 180 185 190

Pro Ser Gly Val Pro Asp Arg Phe Ser Gly Ser Lys Ser Gly Asn Thr  
 195 200 205

Ala Ser Leu Thr Val Ser Gly Leu Gln Ile Glu Asp Glu Ala Asp Tyr  
 210 215 220

Phe Cys Thr Ser Tyr Ser Arg Ile Asn Asp Tyr Val Phe Gly Pro Gly  
 225 230 235 240

Thr Arg Val Ala Val Leu Gly Gln Pro Lys Ala Thr Pro Ser Ala Ala  
 245 250 255

Ala

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Gly Ala Ser Val Lys Val Ser Cys Lys Ala Ser Gly Tyr Thr Phe Thr  
 20 25 30

Ser Tyr Asp Ile Asn Trp Val Arg Gln Ala Thr Gly Gln Gly Leu Glu  
 35 40 45

Trp Met Gly Trp Met Asn Pro Asn Ser Gly Asn Thr Gly Tyr Ala Gln  
 50 55 60

Lys Phe Gln Gly Arg Val Thr Met Thr Arg Asn Thr Ser Thr Asn Thr  
 65 70 75 80

Ala Tyr Met Glu Leu Thr Ser Leu Thr Ser Glu Asp Thr Ala Val Tyr  
 85 90 95

Tyr Cys Ala Arg Gly Ser Pro Ser Pro Met Asn Val Trp Gly Gln Gly  
 100 105 110

Thr Thr Val Thr Val Ser Ser Gly Gly Gly Gly Ser Gly Gly Gly Gly  
 115 120 125

Ser Gly Gly Gly Gly Ser Gln Pro Val Leu Thr Gln Pro His Ser Val  
 130 135 140

Ser Glu Ser Pro Gly Lys Thr Val Thr Ile Ser Cys Thr Arg Ser Ser  
 145 150 155 160

Gly Ser Ile Ala Asn Asp Tyr Val Gln Trp Phe Gln Gln Arg Pro Gly



16-18. (canceled)

19. The antibody as claimed in claim 15, wherein said molecule is a toxin selected from the group consisting of saprin, ricin, abrin, ethidium bromide, diphtheria toxin, *Pseudomonas* exotoxin, PE40, PE38, saporin, gelonin, RNase, protein nucleic acids (PNAs), ribosome inactivating protein (RIP), type-1 or type-2, pokeweed anti-viral protein (PAP), bryodin, momordin, and bouganin.

20. A method for treating cancer, comprising administering to a patient in need thereof a therapeutically effective amount of the composition of claim 14.

21. (canceled)

22. The method of claim 20, wherein said cancer is selected from the group consisting of breast, prostate, cervical, ovarian, testicular, and pulmonary cancers.

23. (canceled)

24. The method of claim 20, further comprising administration of at least one chemotherapeutic agent.

25-30. (canceled)

31. A method for imaging cancer in a patient comprising administering to a patient an antibody of claim 1, said antibody optionally comprising a detectable label.

32. (canceled)

33. The method of claim 31, wherein said detectable label comprises a radioisotope.

34. The method of claim 31, wherein said cancer is selected from the group consisting of breast, prostate, cervical, ovarian, testicular, and pulmonary cancers.

35. The method of claim 34, wherein said cancer is ovarian cancer.

36. The method of claim 33, wherein said radioisotope is  $^{124}\text{I}$ .

37. A method for detecting the presence or absence of MISIIR in a biological sample comprising:

- a) providing a biological sample;
- b) incubating said sample in the presence and absence of the antibody of claim 1, said antibody being detectably labeled;
- c) determining the presence or absence of said MISIIR as a function of the amount of detectable label bound to said sample.

38. The method of claim 37, further comprising the use of a non-specific antibody as a negative control.

39. The method of claim 37, wherein said biological sample is selected from the group consisting of blood, plasma, urine, tumor cells, blood cells, ovarian cells, prostate cells, breast cells, testicular cells, cervical cells, lung cells, and nipple aspirates.

40-42. (canceled)

43. The antibody of claim 1, wherein the amino acid sequences of the  $V_H$  and  $V_L$  domains of said antibody correspond to the  $V_H$  and  $V_L$  domains of SEQ ID NO: 13.

44. The antibody of claim 1, wherein said antibody is an IgG.

\* \* \* \* \*

专利名称(译)	疫苗抑制物质II型受体 ( MISIIR ) 免疫缀合物检测和治疗癌症		
公开(公告)号	<a href="#">US20100278728A1</a>	公开(公告)日	2010-11-04
申请号	US12/834338	申请日	2010-07-12
[标]申请(专利权)人(译)	ADAMS GREGORY P SIMMONE HEIDI ^ h 袁清AN 马拉斯科WAYNE MEHTA SMITA		
申请(专利权)人(译)	ADAMS GREGORY P SIMMONE HEIDI ^ h 袁清-AN 马拉斯科WAYNE MEHTA SMITA		
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[标]发明人	ADAMS GREGORY P SIMMONE HEIDI H YUAN QING AN MARASCO WAYNE MEHTA SMITA		
发明人	ADAMS, GREGORY P. SIMMONE, HEIDI H. YUAN, QING-AN MARASCO, WAYNE MEHTA, SMITA		
IPC分类号	A61K51/10 C07K16/28 A61K39/395 A61P35/00 C12N9/96 G01N33/53 C07K16/30 C12N		
CPC分类号	A61K51/103 A61K2039/505 C07K16/2863 C07K16/2869 C07K2317/34 C07K2316/96 C07K2317/21 C07K2317/622 C07K16/3069 A61P35/00 C07K2317/73		
优先权	60/485622 2003-07-08 US		
其他公开文献	US8198411		
外部链接	<a href="#">Espacenet</a> <a href="#">USPTO</a>		

#### 摘要(译)

提供了用于检测和治疗表达缪勒抑制物质II型受体 ( MISIIR ) 的癌症的组合物和方法。

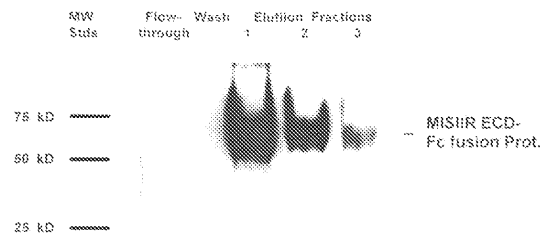


Figure 1