

Anti-human LT alpha (LT-α) Monoclonal Antibody

Catalog No.: YR0370

Basic Information

Molecular Weight

150kDa

Endotoxin

<1EU/mg (<0.001EU/µg)Determined by LAL gel clotting assay

Sterility

0.2 µm filtration

Aggregation

<5% Determined by SECP

Purity

>95% Determined by SDS-PAGE

Reported Applications

ELISA, neutralization, functional assays such as bioanalytical P K and ADA assays, and those assays for studying biological pathways

Background

Pateclizumab Biosimilar uses the same protein sequences as the therapeutic antibody pateclizumab. Pateclizumab is an immunoglobulin G1 kappa (IgG1k) monoclonal antibody targeting lymphotoxin alpha (LT-α) for the treatment of rheumatoid arthritis. A phase I study has assessed the safety, pharmacokinetics, and biologic activity of pateclizumab, and found that pateclizumab was generally well-tolerated in RA patients. Pateclizumab also has been investigated in clinical trial to study its efficacy and safety in combination with a diseasemodifying anti-rheumatic drug (DMARD) compared with adalimumab in combination with a DMARD in patients with active rheumatoid arthritis. LT- α is a member of tumor necrosis factor superfamily family (TNFSF) and products by predominately by activated cells of the innate and adaptive immune response. Lymphotoxin α formerly named tumor necrosis factor-beta (TNF- β) as it is a homologous protein to TNF α . When LT β is discovered, TNF- β was renamed LT-α. LT-α plays different roles in immune regulation as its different secreted forms. $LT\alpha$ binds to TNF receptor 1 (TNFR1) and TNFR2 to promote inflammation as a form of soluble homotrimeric molecule (LTα3); whereas cell-bound LTα1β2 (LT-α complex with LTβ as LTα1β2 heterotrimers on the surface of activated B, Th1 and Th17 cells) bind LTβ receptors (LTBR) to mediate signaling pathway. Rheumatoid arthritis (RA) is an autoimmune disorder associated with progressive joint damage, pain, fatigue, and disability. TNF α is reported to be the main factor promoting the development of RA, so targeting TNFα is regarded as the routine method of RA treatment. However, a large number of RA patients did not respond to TNF α therapy, which prompted us to seek new treatments. In addition to TNFa, other cytokines have also been reported to be involved in the pathogenesis of RA, and LT- α is one of them. It was found that two forms of LT α homotrimer (LT α 3 and LT α 1 β 2) increased in synovial fluid of RA patients, while the LTa, LTB and LTBR transcripts increased in synovium respectively. Study has demonstrated that the depletion of CD4 T helper (Th) subsets Th1 and Th17 (with high levels of surface LT α 1 β 2) by mouse LT α specific monoclonal antibody showed therapeutic efficacy in the preclinical mouse model of RA, which suggests the treatment possibility targeting LTa. Thus, humanized pateclizumab was designed to target $LT\alpha$, binding to both the soluble $LT\alpha3$ homotrimeric form and the surfaceexpressed LTα1β2 heterotrimer, for the treatement of RA. By blocking the binding of LTα3 and LTα1β2 to its cognate receptors LTβR and TNFR, pateclizumab specificly deplete of activated cells and inhibit the immune cell trafficking and/or recruitment to inflammatory sites. Depletion is limited to cells that express LTα1β2 on the surface, which improves the targeting of therapy.

Immunogen Information

Clone

Isotype

Pateclizumab Biosimilar

Human IgG1 kappa

Immunogen

Human LT alpha (LT-α)

RecommendedIsotype Control(s)

In Vivo Grade Recombinant Human IgG1 Kappa Isotype Control Antibody

Recommended Dilution Buffer

1×PBS pH 7.4

Contact

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Product Information

Production

Purification

Purified from cell culture supernatant in an animal-free facility

Protein A/G

Storage

Store at 2 - 8° C. 2 - 8° C for up to 4 weeks and - 80° C for long term storage (Avoid repeated freezing and thawing)