

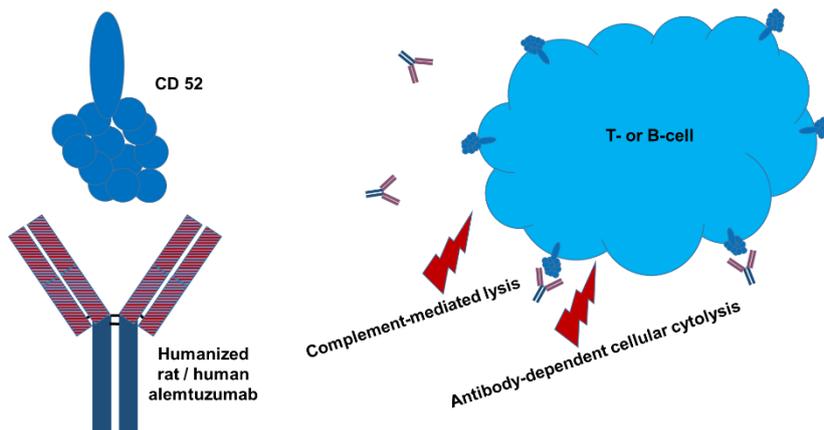
## Alemtuzumab – Fact Sheet

### Molecule

Alemtuzumab (Lemtrada®) is a humanized monoclonal antibody from the IgG1 kappa type with human variable framework and constant regions, and complementarity-determining regions from a rat monoclonal antibody.

### Mode of Action

Alemtuzumab depletes circulating T- and B-cells through antibody-dependent cellular cytotoxicity and complement-mediated lysis. It is directed against the 21–28 kDa cell surface glycoprotein cluster of differentiation (CD)-52 present on the surface of mature lymphocytes, but not on the stem cells from which these lymphocytes are derived. A therapy with alemtuzumab increases the risk for opportunistic infections.



### Indication

Alemtuzumab was originally indicated for second-line treatment of chronic lymphocytic leukemia (CLL), cutaneous T-cell lymphoma (CTCL) and normal T-cell lymphoma under trade names Campath®, MabCampath® and Campath-1H®. Currently it is indicated for the treatment

of multiple sclerosis as Lemtrada®. It is also applied for some conditioning regimens for bone marrow transplantation, kidney transplantation, and islet cell transplantation.

### Patent Situation

Basic patents for Lemtrada® already expired in 2017. New patents for treatment of multiple sclerosis were not granted.

### Market and Competitive Field

Bayer HealthCare, which started the development of alemtuzumab, retains an option to co-promote alemtuzumab in multiple sclerosis. MabCampath® was originally approved for CLL in 2007 by Genzyme / Sanofi. Then it was withdrawn from markets in the US and EU in 2012 to prepare for a higher-priced relaunch of Lemtrada® indicated for multiple sclerosis. Sales of Genzyme / Sanofi for Lemtrada® are constantly decreasing, in 2020 only 113 million € were generated and in 2021 the drug is not listed anymore in the top ten of Sanofi.

		Alemtuzumab
		Lemtrada®
	<b>Clone selection/ comparability</b>	
HPLC	Separation based on <b>size</b> (SE-HPLC)	
	Separation based on <b>hydrophobicity</b> (RP-HPLC)	
	Detection of <b>charge variants</b> (CEX-HPLC)	
Binding	Binding to <b>cell surface</b> expressed target (Flow cytometry)	Kit dependent
	Binding to <b>soluble target</b> (ELISA)	Kit dependent
	Binding to specific <b>antibody or antigen</b> (SPR-BIACORE, ELISA)	
	<b>Affinity/ kinetic</b> to recombinant target (SPR-BIACORE)	
Effector function	Binding to C1q, <sup>1</sup> <b>CDC surrogate</b> (ELISA)	
	<b>Affinity</b> to recombinant Fc-receptors (SPR-BIACORE)	
	Reporter gene assays, <sup>2</sup> <b>ADCC surrogate</b> (Luminescence)	
	<sup>1</sup> <b>CDC</b> (Flow cytometry)	
	<sup>2</sup> <b>ADCC</b> (DELFI, Fluorescence)	n.a.
	Additional <b>bioassays</b> (Luminescence, fluorescence)	
Gly	Glyco-pattern with <b>Lectin Microarray</b> (45 different lectins)	
	<b>(Pre)clinical application</b>	
Clinics	Pharmacokinetics – <b>PK</b> (ECL, ELISA)	
	Pharmacodynamics – <b>PD</b> (ECL, ELISA, flow cytometry, bioassay)	
	Immunogenicity - <sup>3</sup> <b>ADAs</b> (ECL, Biacore, ELISA, neutr. assay)	

<sup>1</sup>CDC = Complement Dependent Cytotoxicity  
<sup>2</sup>ADCC = Antibody Dependent Cellular Cytotoxicity  
<sup>3</sup>ADA = Anti-Drug Antibody

If you are interested in the full version including patent and originator data please contact us: [velabd@vela-labs.at](mailto:velabd@vela-labs.at)

	VelaLabs portfolio
	VelaLabs planned
	c.l.d. = cell line dependent
	n.a. = not applicable
	In development