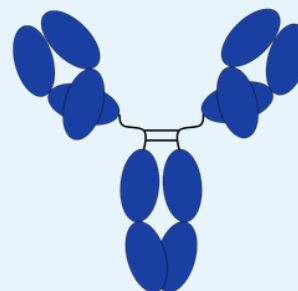


Welcome!

This issue highlights new ways we're connecting with the antibody community, from the launch of the Antibodies! podcast to upcoming educational programs and events.

In this issue, you'll find:

- Highlights from the AIRR-C Meeting VIII ... Page 2
- A TAbS committee member spotlight ... Page 3
- An antibody news feature on Daratumumab... Page 4
- An antibody news feature on Pertuzumab.. Page 6
- TAbS Science Writing Competition features ... Page 10



A Note from the Chair of the Communications Committee: Janine Schuurman

Welcome to the September Edition of The Antibody Society's Newsletter.

A brand new edition with plenty to explore for all antibody enthusiasts:

- a conference recap from the AIRR-C meeting (special thanks to: Lorissa Corrie),
- a chance to get to know our Podcast host (and Communications Committee member) Jonathan Davis as our Member in the Spotlight,
- and an opportunity to brush up on your knowledge on antibody biosimilar names in this edition's puzzle and more.

We would furthermore like to draw your attention to two insightful articles on famous and successful antibody therapeutics, we hope these articles will give you inspiration and maybe also some food for thought.

Did you notice that our June Newsletter had an (accidental) recurring topic (hint: a target name)?

Something similar is going on in this Newsletter. Curious whether you'll spot it!

All these articles and the fun puzzle are brought to you by the amazing Communications Committee:

Harini, Katy, Harshad, Daphne, Jonathan, and Kristen.

If you're interested in contributing or if you have ideas or feedback, let us know: your participation is what keeps The Antibody Society alive!

AIRR-C Meeting Recap

Thank you to everyone who joined AIRR-C Meeting VIII: Decoding and Recoding Immunity at Yale University!

The meeting showcased the breadth and energy of the AIRR Community:

201 in person attendees, 31 remote attendees, 5 keynote speakers, 17 invited speakers, 12 contributed talks, 110 research posters, 5 Working Group/Sub-Committee posters, 22 early-career mentors, 70 mentees and 14 sponsors. A lot of work, a lot of science, and a lot of fun. Thank you all for making this meeting such a success!

Conference Award Highlights

Lifetime Service Award

We are honored to recognize Andrew Collins, Honorary Associate Professor at the University of New South Wales (Sydney, Australia), with the AIRR-C Lifetime Service Award for his outstanding contributions to immunology and to the AIRR community.

For over 25 years, Professor Collins' work has advanced our understanding of antibody genetics and repertoire biology, while his leadership in AIRR-C initiatives, including the AIRR-C Germline Database Working Group and IARC, has helped shape germline standards.

Pam Borghardt Community Service Prize

Congratulations to William Lees (Clareo Biosciences Inc., Louisville, KY, USA), recipient of the Pam Borghardt Community Service Prize, recognizing outstanding service to the AIRR community.

William's work focuses on developing Adaptive Immune Receptor (AIR) reference sets across diverse species and improving the annotation of AIRR-seq data. A dedicated contributor since the early days, he has played a key role in the AIRR-C Germline Database Working Group, helping advance community standards and resources.

AIRR-C Elections

We are pleased to announce the results of the AIRR-C elections and congratulate the newly elected members of the Executive Council. These members are joining Christian Busse (current Chair) and Encarnita Mariotti-Ferrandiz (Past-Chair).

Chair-elect:

- Corey Watson. Associate Professor, Department of Biochemistry and Molecular Genetics, University of Louisville School of Medicine (US)

Additional members:

- Gur Yaari. Associate Professor of Pathology, Yale School of Medicine (US)
- Ulrik Stervbo. Team Lead, Ruhr-Universität Bochum (Germany)
- Nick Borchering. Assistant Professor of Pathology and Immunology, Washington University School of Medicine (US)

TAbs Member Spotlight

This month we're featuring Jonathan Davis: Founder of Creative Antibodies which provides consulting to biotechs and others on antibody discovery and design. Jonathan has been doing this for 2.5 years, after almost 25 years in industry. Jonathan is also co-founder of a stealth startup therapeutics biotech company. Jonathan is a member of our Communications Committee and the host of our 'Antibodies!' podcast.

How did you become a member of The Antibody Society?

Jonathan: In my first job after my post-doc I reported directly to Jim Huston, founder of TAbS. I have been looking for a way to give back to the Society to honor Jim's work, and am happy to have found a great way to associate with TAbS as a member of the communications committee and host of the Antibodies! podcast.

Is there a scientific accomplishment or milestone in your career that you're particularly proud of?

Jonathan: I am proud of the three platforms I have invented / co-invented. The SEEDbody was the first one, a method of making heterodimeric Fc, one of the backbones of bispecifics. It used a novel mechanism to generate clean heterodimers that are well behaved and developable. The second platform was for generating murine bispecifics, which is important for projects where extended dosing in mouse models is critical. This one used known approaches but I combined them in novel ways and it worked very nicely. The third is the B-body, a whole-IgG bispecific platform. When I arrived at Invenra, it was a difficult platform, that didn't provide particularly clean molecules. I came up with a novel approach, which is to generate a new disulfide bond then stabilize the region where the bond shifts the backbone. This worked beautifully, and the platform is now a top tier bispecific platform. I'm particularly proud of the fact that none of these three project required optimization or iteration – my first designs worked as planned. I was fortunate to be working with excellent colleagues in all these cases. We put a lot of work into studying the structures and the potential solutions, and it paid off.

What area of antibody research are you currently most excited about, and why?

Jonathan: I am really excited by the efforts to create antibodies with novel functions. For example, antibodies that mimic a cytokine and signal via the cytokine receptors, or antibodies that gather together ligases or phosphatases with a target on the cell surface to generate a reaction in the cell, such as degradation or deactivation. I think we will continue to discover new ways of using antibodies that will give us better control over disease biology.



**Jonathan Davis, PhD,
Founder of Creative Antibodies**

What therapeutic modality or antibody format do you think has the most untapped potential?

Jonathan: I think multispecifics are only now getting started. As companies and funders get more comfortable with novel uses of them, they will drive a new generation of more powerful and effective medicines that have greater precision and fewer side effects. I look to see these antibodies being used to re-balance the immune system, specifically fix issues in particular tissues, overcome missing or aberrant components, and many other things we can't even guess at now. I am of the belief that if a bispecific is good, we can likely find an additional binder that will make it better.

What advice would you give to early-career scientists interested in entering the antibody field?

Jonathan: Get a broad education. Learn about biology, not just immunology. Spend some real time learning structural biology and protein engineering, so you develop a sense of what a protein might do or not do. Read some of the more obscure literature, there are gems in there. As an antibody-focused scientist, you will be much more valuable and productive if you have the cross-training to allow you to catch problems before they start, identify optimal designs, and think up novel uses of antibodies.

Daratumumab: first-in-class CD38 monoclonal antibody that became a gamechanger for multiple myeloma

Written by: Katy Lloyd

Key Takeaways

- Daratumumab is a first-in-class CD38-targeting antibody that transformed the treatment paradigm for multiple myeloma
- With a multifaceted mechanism-of-action and subcutaneous administration, daratumumab became a huge commercial success

Daratumumab (brand name Darzalex) is a monoclonal antibody targeting human CD38, a type II transmembrane glycoprotein overexpressed in multiple cancers, particularly in haematological malignancies (1). Discovered by Genmab and later developed and commercialized by Johnson & Johnson, daratumumab gained FDA-approval in November 2015 as the first monoclonal antibody for treatment of multiple myeloma (MM) (2). In combination with bortezomib, lenalidomide and dexamethasone, it helped shift the treatment paradigm for MM, transforming the disease from incurable to chronically manageable (2). Furthermore, the FDA-approval of Darzalex Faspro in May 2020 improved the speed and ease of drug delivery, facilitating at-home subcutaneous injection, as well as reducing infusion-related reactions compared to intravenous administration (3).

The success of daratumumab in MM is linked to its multifaceted mechanism of action, covering CD38 enzymatic activity modulation, cross-linking mediated apoptosis, complement-dependent cytotoxicity (CDC), antibody-dependent cellular cytotoxicity (ADCC), and antibody-dependent cellular phagocytosis (ADCP) (4, 5). Furthermore, the elimination of CD38-positive immunosuppressive cells like Tregs, regulatory B cells and myeloid-derived suppressor cells boosts host anti-tumor immunity (6). Daratumumab has a favourable safety profile with manageable toxicities, likely resulting from the relatively limited expression of CD38 on normal lymphoid and myeloid cells, as well as non-hematopoietic tissues (2). Together, these factors contributed to daratumumab's adoption as standard-of-care for MM.

Beyond MM, daratumumab received FDA-approvals for the treatment of light chain amyloidosis in November 2025 (7) and is currently under investigation in Phase 2 trials for T cell acute lymphoblastic leukemia (NCT05289687). Daratumumab has also been evaluated as part of therapeutic combinations, including in combination with the CD3×BCMA bispecific antibody teclistamab, which received FDA approval in March 2026 for the treatment of relapsed/refractory MM. However, daratumumab has faced limited clinical efficacy in other hematological malignancies, including follicular lymphoma, diffuse large B-cell lymphoma, and mantle cell lymphoma (8), as well as solid tumors (9). More recently, daratumumab has emerged as a potential therapeutic approach for targeting refractory B cell-mediated autoimmune diseases such as systemic lupus erythematosus (10) and immune thrombocytopenia (11). This approach is supported by the high expression of CD38 on plasma cells and reflects a broader trend toward repurposing cancer immunotherapies for the treatment of autoimmune diseases (12).

Continuation of Daratumumab

Daratumumab has been a major commercial success, reaching blockbuster status in 2017, a mere two year after the initial U.S. launch (13). Worldwide net sales of DARZALEX reached an impressive \$14.35 billion in 2025 (14), substantially exceeding the \$9 billion in peak annual sales projected by Genmab CEO Jan van de Winkel in 2017 (15). The commercial success of daratumumab is likely to soon face pressure from the approaching patent cliff, with key U.S. patents set to expire in 2029. The anticipated loss of exclusivity has already spurred the development of biosimilar candidates, including Celltrion's CT-P44, which is currently in Phase 3 development (16).

In conclusion, the story of daratumumab extends well beyond its success in MM. It represents a broader paradigm in immunotherapy – translating a fundamental understanding of biology into a therapy capable of delivering meaningful and durable benefit to patients. By validating CD38 as a therapeutic target for antibody therapy, daratumumab has not only transformed the treatment of multiple myeloma but has also helped catalyse a much wider exploration of CD38-directed approaches across hematologic malignancies, autoimmune disorders, and other diseases in which dysregulated plasma cells or immune pathways play a central role.

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About the Author: *Katy Lloyd, PhD is an antibody enthusiast with over 15 years experience in immunotherapy R&D. She is co-inventor on numerous patents covering CD3 combination therapies, polyclonal antibody technology, and Fc enhancing formats. She is currently a Communication Committee member for The Antibody Society.*

Pertuzumab's Patent Cliff: What It Means for Biosimilar Developers

Written by: Harini Sriram

Key Takeaways

- Pertuzumab (Perjeta) is a validated biosimilar target: an interesting casus to understand more about the biosimilar dynamics
- Regulatory approval of Pertuzumab biosimilars has arrived on both sides of the Atlantic
- Local approvals expand emerging market access
- A dense patent thicket governs freedom-to-operate
- Regulatory clearance and commercial launch are decoupled
- Regional market dynamics diverge significantly

A biosimilar is a biological product that has no clinically meaningful differences from an existing US Food and Drug Administration (FDA) approved biopharmaceutical (19). The expiration of market exclusivity for innovator products represents a pivotal transition in healthcare, competition from biosimilars that are highly similar in quality, safety, and efficacy to the originator biopharmaceutical. Biosimilar entry has a huge impact on all parties involved in the healthcare ecosystem: from payer price negotiations, patient access to critical therapies and commercial value of the innovator product (1, 3, 12, 17, 18).

Crucially, regulatory approval and commercial entry of these biosimilars do not always coincide. Regulatory agencies, such as the FDA and European Medicines Agency (EMA), evaluate biosimilar applications solely on comparative quality, nonclinical, and clinical criteria and grant fixed statutory market and data protection. Patents typically extend 20 years from their first non-provisional filing date, and patent portfolios are frequently augmented by new priority family filings that cover secondary product features, such as manufacturing or purification processes, etc. As a consequence, patent litigation and settlement terms around innovator patent portfolios can delay commercial launch of a biosimilar for years. (1, 2, 3, 16).

Once a biosimilar product reaches the market, their real-world impact varies markedly across global regions. In the US, commercial uptake is shaped by payer formularies, patent litigation, and formal interchangeability standards, whereas European health systems drive price erosion through national tendering, reference pricing, and physician-led switching policies. Meanwhile, in emerging markets like India and China, local biosimilar manufacturing expands treatment availability, though launch timing and uptake remain subject to local clinical trial requirements and patent challenges (3, 16).

The landscape of oncology therapeutics is undergoing a shift as the first wave of innovator patents covering blockbuster antibody products expires, paving the way for biosimilars to enter the market. Pertuzumab, marketed as Perjeta by Genentech/Roche, is a pivotal humanized monoclonal antibody that has defined the standard of care for HER2-positive breast cancer for over a decade. Originally co-developed by Genentech and Chugai Pharmaceutical, Perjeta received FDA approval in 2012 and has since become a cornerstone of HER2-positive breast cancer management globally. Pertuzumab specifically targets the extracellular dimerization domain (Subdomain II) of the human epidermal growth factor receptor 2 protein (HER2). Unlike trastuzumab (Herceptin), which binds to Domain IV, pertuzumab inhibits the ability of HER2 to form active heterodimers with other HER receptors, such as EGFR/HER1, HER3, and HER4. This mechanism of action of pertuzumab, particularly when used in combination with trastuzumab and chemotherapy, has demonstrated a statistically significant improvement in progression-free survival in patients with HER2-positive metastatic breast cancer—an increase of approximately 6 months compared to standard regimens.

Pertuzumab Patent Cliff Continued

Written by: Harini Sriram

Perjeta's commercial story reflects the enduring clinical demand for HER2-targeted combination regimens. Over the past five years, global revenues have risen steadily, reaching approximately USD 4.5 billion in 2024 driven by expanding adjuvant, metastatic uptake and its inclusion in key combination regimens (14). However, with its initial U.S. FDA approval dating back to 2012 and EMA approval in 2013, the standard biological exclusivity window has closed, making it a premier target for biosimilar developers.

The intellectual property landscape surrounding Pertuzumab involves layered protection that restricts freedom to operate around the molecule in various ways. The foundational patent estates rest on a cluster of composition-of-matter and method-of-use patents filed by Genentech over a period of time spanning nearly two decades, thus creating a tiered exclusivity structure that biosimilar developers must carefully navigate. Although the original composition-of-matter patents of pertuzumab might have expired, other patents relating to specific antibody compositions and structural variants may still be active, as well as patents focusing on combination treatment strategies.

Table 1: Analysis of the patents surrounding Pertuzumab

Patent Number	Protection Category	Title	Estimated Expiry Date
US7862817B2	Humanization & Composition	Humanized anti-ErbB2 antibodies and treatment with anti-ErbB2 antibodies	Jan 2025
US7560111B2	Composition & Structural Variants	HER2 antibody composition	Jul 2025
US7618631B2	Combination Therapies	Treatment with anti-ErbB2 antibodies and EGFR-targeted drugs	Jun 2025
US12527867B2	Combination Therapies	Uses for and article of manufacture including HER2 dimerization inhibitor	Apr 2043
US12427193B2	Advanced Formulations	Subcutaneous anti-HER2 antibody formulations and uses thereof	Dec 2044
US12252549B2	Advanced Formulations	Pertuzumab plus trastuzumab fixed dose combination	Jun 2041

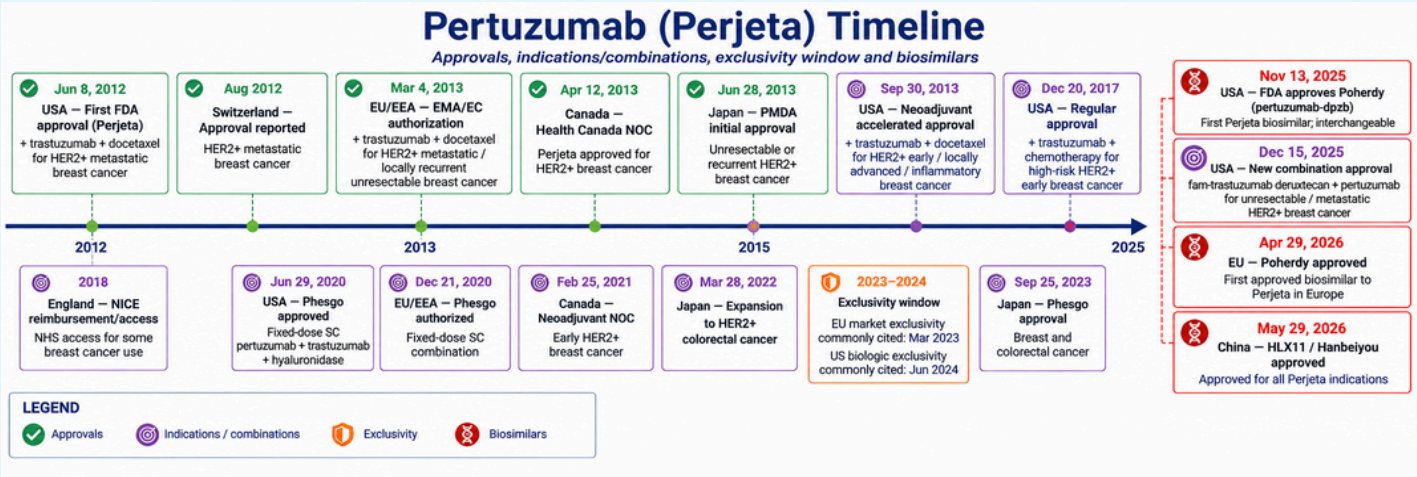


Figure 1: Illustration depicting the market approval timelines surrounding Pertuzumab (5, 13, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32 and 33)

Pertuzumab Patent Cliff Continued

Written by: Harini Sriram

This practice of layering continuation patent applications and new filings in a patent portfolio is well-documented in biopharmaceutical patent strategy and increases the complexity and cost burden for biosimilar applicants (4). For a biosimilar developer, each patent represents a potential litigation vector; Freedom-to-Operate (FTO) being a complex and expensive part of biosimilar development. The combination of foundational composition of matter patents, method-of-use patents, later-stage continuation filings, and new priority family filings constitutes the so-called “patent thicket,” a strategic barrier that, for pertuzumab, rivals those seen around adalimumab and trastuzumab. Roche itself has publicly anticipated biosimilar competition by the end of 2026, signaling that the originator's defensive pricing strategies are already under recalibration (15).

Despite this intellectual property architecture, the biosimilar community has begun to try to breach Perjeta's exclusivity walls. On 13 November 2025, the FDA approved Poherdy, developed by Shanghai Henlius Biologics and commercialized by Organon, as the first biosimilar and first interchangeable biosimilar to reference Perjeta in the United States (14). The FDA approval was underpinned by a comprehensive comparability package encompassing structural and functional analytical data, pharmacokinetic equivalence, clinical immunogenicity profiling, and supportive efficacy data in breast cancer patients. The interchangeable designation is commercially significant: it permits pharmacists to substitute Poherdy for Perjeta without prescriber intervention in applicable US states, representing the most powerful form of market entry available to a biosimilar product.

On 26 February 2026, the Committee for Medicinal Products for Human Use (CHMP) adopted a positive opinion, recommending the granting of a marketing authorization for the medicinal product Poherdy, intended for the treatment of breast cancer (5). In May 2026, the European Commission granted marketing authorization to Poherdy as the first approved pertuzumab biosimilar in Europe, with authorization spanning all reference product indications, metastatic, neoadjuvant, and adjuvant HER2-positive breast cancer (13). The EU approval was grounded in the same comparability dataset used for the US submission, illustrating the efficiency of globally coordinated biosimilar development programmes. Meanwhile in September 2025, other pertuzumab biosimilars Pertuza (Alkem Laboratories) and Perzea (Hetero Biopharma) entered the Indian market, providing early evidence of the price-competitive environment taking shape in biosimilar-permissive jurisdictions.

Pertuzumab stands at the convergence of several defining forces in modern biopharmaceutical markets: a clinically indispensable molecule with a blockbuster revenue profile, a sophisticated multi-layered patent estate designed to maximize exclusivity duration, and a nascent but accelerating biosimilar pipeline. For developers capable of navigating the patent thicket, whether through litigation, licensing, or “at-risk” launches, the commercial prize is significant. As regulatory agencies in the US and EU have now validated the biosimilar pathway for this molecule, the pertuzumab market is entering a new competitive phase. The story of Perjeta biosimilars will serve as how the industry resolves the tension between innovator exclusivity and access-driven biosimilar competition in high-value oncology biologics.

Pertuzumab Patent Cliff Continued

Written by: Harini Sriram

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About the Author: Harini Sriram is a biopharmaceutical researcher and CMC specialist with over a decade of experience in drug product development and nanomaterials. She has authored nine peer-reviewed publications and contributed to innovative antimicrobial research. She currently serves as a Research Specialist at BioNTech SE while completing her Pharmaceutical Administration MBA.

Competition Highlights

TAbS 2026 Science Writing Competition Winners

Graduate Winner: Ehsan Mofidi Chelan

Ehsan Mofidi Chelan is a nanobiotechnologist and graduate researcher at Tabriz University of Medical Sciences, Iran. His research integrates nanotechnology, molecular biology, and computational approaches to develop next-generation biomedical solutions, with a particular focus on targeted mRNA delivery, structural bioinformatics, and cancer vaccine development.

His master's research focuses on targeted delivery of self-amplifying mRNA to the brain using peptide-modified PAMAM dendrimers. He also works on mRNA-based multi-epitope vaccine design, molecular dynamics simulations, protein-peptide interaction modeling, and nanoformulation. Alongside his research, he mentors junior researchers in computational and experimental molecular biology.

Ehsan is passionate about translating interdisciplinary scientific ideas into innovative biomedical technologies and making advanced research accessible through clear and engaging scientific communication.



Ehsan Mofidi Chelan

[Read Ehsan's essay](#)



Renoy Antony Olivera

Undergraduate Winner: Renoy Antony Olivera

My name is Renoy Antony Olivera, and I am pursuing a Bachelor of Science in Neuroscience Technology at Father Muller College of Allied Health Sciences, Mangaluru, India. My interests span neuroscience, genomics, computational biology, mathematics, and, more recently, antibody research. I recently received the Dr. Sanjeev Rai Award for Best Student Researcher and published a single-author paper in Neuroinformatics, a Springer Nature journal. My dream is to become a scientist who can bring these and other fields together to explore questions that no single discipline can answer alone.

[Read Renoy's essay](#)

PBSS IP Event Flyer Placeholder



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Intellectual Property (IP) Antibody and Related Therapeutics: Strategies, Best Practice, and Case Studies

Organizers: Udaya Rangaswamy, PhD (Rondo Therapeutics); James Ernst, PhD (Xencor); Kristen McPike (TAbS); Stephanie Casey Parks, PhD (Amgen); Julia Minitti, PhD, JD (WSGR); Sarah Bodary, PhD (Darwin Bodary Consulting)



Raymond Doss, PhD, JD

Associate General Counsel,
Intellectual Property &
Litigation Law,
Amgen Inc

Opening Talk (title TBD)



Rex Watkins, PhD, JD

Of Counsel,
Wilson Sonsini Goodrich &
Rosati

FTO for Antibody Therapeutics



Christopher J. Betti, PhD, JD

Partner and Global Life
Sciences Leader,
Morgan Lewis

Lifecycle Protection for Antibody Therapeutics:
Patent Term Extension, Data Exclusivity, Purple
Book Strategy, and Biosimilar Entry



Ben Pelletier, M.Eng, JD

Partner and Co-Chair,
Biotech Practice Group
Hayes Boone

Patentability of Antibodies and Related Therapeutics:
Practical Patent Strategies for Antibodies, ADCs, and
Multispecifics



Anna Yuan, JD

Of Counsel, Patent Attorney,
Morrison Foerster

Impact of Artificial Intelligence (AI) on
Patent Strategies for Antibody Therapeutics



Janet Xiao, PhD, JD

Partner, Patent Attorney,
Morrison Foerster

Impact of Artificial Intelligence (AI) on Patent
Strategies for Antibody Therapeutics



October 21, 2026 TAbS members in Europe & Asia
Pacific: Rebroadcast details on page 2



8:30 AM - 1:30 PM PT



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<https://www.pbss.org/eventDetails/1097>

Zoom registration only - Free (\$0);
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Intellectual Property (IP) Antibody and Related Therapeutics



For TABS members in Europe and Asia Pacific, the rebroadcast will be available on October 28, 2026



Europe: 9:00 AM (London) | 10:00 AM (Berlin) | Asia Pacific: 1:30 PM (New Delhi) | 4:00 PM (Singapore/Beijing) | 5:00 PM (Tokyo/Seoul)



Scientific Program Partner

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Time (PST)	Topic	Speaker
8:30 AM - 8:45 AM	Intro and welcome	PBSS and TABS
8:45 AM - 9:05 AM	Opening Talk (Title TBD)	Raymond Doss , PhD, JD, Associate General Counsel, Intellectual Property & Litigation Law, Amgen Inc
9:05 AM - 10:00 AM	Patentability of Antibodies and Related Therapeutics: Practical Patent Strategies for Antibodies, ADCs, and Multispecifics	Benjamin Pelletier , M. Eng, PhD Partner and Co-Chair, Biotech Practice Group Haynes Boone
10:00 AM - 10:55 AM	FTO for Antibody Therapeutics	Rex Watkins , PhD, JD , Of Counsel at Wilson Sonsini
10:55 AM - 11:15 AM	Break	-
11:15 AM - 12:00 PM	Lifecycle Protection for Antibody Therapeutics: Patent Term Extension, Data Exclusivity, Purple Book Strategy, and Biosimilar Entry	Christopher J. Betti , PhD, JD, Partner and Global Life Sciences Leader at Morgan Lewis
12:00 PM - 12:45 PM	Impact of Artificial Intelligence (AI) on Patent Strategies for Antibody Therapeutics	Anna Yuan , JD, Of Counsel, Patent Attorney at Morrison Foester ; Janet Xiao , PhD, JD, Partner, Patent Attorney at Morrison Foester
12:45 PM - 1:30 PM	Panel Discussion	All Speakers

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Antibody Biosimilar Word Search

Instructions: Find each reference antibody INN using its FDA-approved biosimilar clue. Words run in any direction.

N	N	V	W	B	E	Y	H	B	A	M	U	Z	I	L	A	M	O
B	U	X	K	C	A	R	K	C	K	F	W	Z	M	O	D	E	M
A	S	N	Q	Z	Z	M	H	R	Q	B	Z	M	M	K	E	T	N
M	T	T	A	O	P	N	U	W	W	V	U	S	J	M	J	R	B
I	E	P	R	T	J	B	A	M	U	S	O	N	E	D	T	A	E
X	K	A	C	B	A	M	U	Z	I	L	I	C	O	T	U	S	V
U	I	B	H	S	I	L	O	C	Q	L	H	H	O	X	I	T	A
T	N	B	A	M	U	Z	I	B	I	N	A	R	B	R	J	U	C
I	U	L	Y	Q	V	X	G	Z	U	B	Q	D	I	A	A	Z	I
R	M	N	E	T	W	S	E	D	U	G	L	Y	A	H	C	U	Z
J	A	S	Y	E	J	O	D	P	L	M	M	V	K	E	S	M	U
A	B	A	M	U	Z	I	L	U	C	E	A	Q	O	L	B	A	M
Y	G	P	Y	M	T	N	X	K	L	B	G	B	W	B	I	B	A
I	N	F	L	I	X	I	M	A	B	T	L	E	T	I	V	V	B

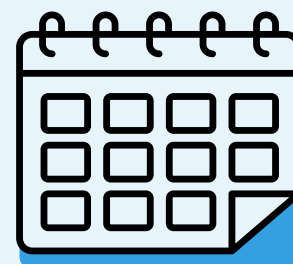
CLUES

1. Inflectra
2. Amjevita
3. Mvasi
4. Ogivri
5. Truxima
6. Byooviz
7. Tyruko
8. Tofidence
9. Wezlana
10. Jubbonti
11. Bkernv
12. Omlyclo

Answers on pg. 16

Upcoming Events

1. October 8th: TAbS Talk: Antibodies in the CNS: Friend and Foe
2. October 21st: TAbS / PBSS Virtual IP Workshop
3. October 28th: TAbS H2 Townhall
4. November 5th: YUMAB Scientific Briefing
5. November 19th: Fluidic Scientific Briefing
6. December 13-17th: Antibody Engineering and Therapeutics San Diego



View the full event
calendar

TAbs Talks
 VIRTUAL SYMPOSIUM

Hosted by **ANTIBODY SOCIETY**

Registration is open

Antibodies in the CNS: Friend and Foe

THURSDAY, OCTOBER 8, 2026 | 11:00 AM-1:00 PM ET

FEATURED SPEAKERS

Dr Sophie Keeling
Research Associate
UK Dementia Research Institute
University of Cambridge, UK

Prof. Dr. Simone Mader
Full Professor, Friedrich Alexander
Universität Erlangen Nürnberg, Director -
Department of Translational Immunology,
Uniklinikum Erlangen, Germany

Assistant Prof. John Pluvina, MD
Assistant Professor, Neurology,
Arc Institute & University of California,
San Francisco, USA

Dr Kylie Chew
Senior Principal Scientist,
Denali Therapeutics, USA

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About The Antibody Society Newsletter

This newsletter is made possible by the voluntary efforts of the members of The Antibody Society Communications Committee: Harshad Ugamraj, Harini Sriram, Katy Lloyd, Jonathan Davis, Daphne van Elstrand, Kristen McPike and Janine Schuurman (chair).

We warmly thank everyone who contributed to this issue.

The views and opinions expressed in the articles are those of their authors and do not necessarily represent the position of The Antibody Society. All articles are written in good faith and to the best knowledge of their authors. The Antibody Society accepts no liability for any errors, omissions, or consequences arising from the content published in this newsletter.

If you're interested in contributing to future editions of the newsletter please reach out to Kristen McPike at kristen.mcpike@antibodysociety.org

We look forward to sharing the next edition of The Antibody Society Newsletter in January 2027

The logo for The Antibody Society is displayed within a white rounded square. The text "ANTIBODY SOCIETY" is arranged in a grid. The words "ANTI", "BODY", and "SOCI" are in the first three rows, and ". ETY" is in the fourth row. The letters are in a bold, black, sans-serif font. The letters "Y" in "BODY" and "ETY", and the letter "I" in "SOCI", are colored blue, while all other letters are black.

Thank you for reading!

Antibody Biosimilar Word Search Solution

Answers

Inflectra -> Infliximab
 Amjevita -> Adalimumab
 Mvasi -> Bevacizumab
 Ogivri -> Trastuzumab

Truxima -> Rituximab
 Byovoiv -> Ranibizumab
 Tyruko -> Natalizumab
 Tofidence -> Tocilizumab

Weziana -> Ustekinumab
 Jubboni -> Denosumab
 Bkernv -> Eculizumab
 Omlyclo -> Omalizumab

I	N	F	L	I	X	I	M	A	B	T	L	E	T	I	V	B
Y	G	P	Y	M	T	N	X	K	L	B	G	B	W	B	I	B
A	B	A	M	U	Z	I	L	U	C	E	A	Q	O	L	B	A
J	A	S	Y	E	J	O	D	P	L	M	M	V	K	E	S	M
R	M	N	E	T	W	S	E	D	B	G	L	Y	H	C	U	Z
I	U	L	Y	Q	V	X	G	Z	U	B	Q	B	I	A	A	Z
T	N	B	A	M	U	Z	I	B	I	N	A	R	B	R	J	U
U	I	B	H	S	I	L	O	C	Q	L	H	H	O	X	I	T
X	K	A	C	B	A	M	U	Z	I	L	I	G	T	U	S	V
I	E	P	R	F	J	B	A	M	U	S	O	N	E	D	T	A
M	T	T	A	O	P	N	U	W	W	V	U	S	J	M	J	R
A	S	N	Q	Z	Z	M	H	R	Q	B	Z	M	M	K	E	T
B	U	X	K	C	A	R	K	C	K	F	W	Z	M	O	D	E
N	N	V	W	B	E	Y	H	B	A	M	U	Z	I	L	A	M