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(54) **COMBINATIONS AND METHODS FOR
SUBCUTANEOUS ADMINISTRATION OF
IMMUNE GLOBULIN AND
HYALURONIDASE**

(71) Applicant: **Takeda Pharmaceutical Company
Limited, Osaka (JP)**

(72) Inventors: **Richard Schiff, Eastsound, WA (US);
Heinz Leibl, Pechtoldsdorf (AT)**

(73) Assignee: **Takeda Pharmaceutical Company
Limited, Osaka (JP)**

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Primary Examiner — Sharon L Turner

(74) *Attorney, Agent, or Firm* — MORGAN, LEWIS &
BOCKIUS LLP

(57) **ABSTRACT**

Provided are combinations, compositions and kits contain-
ing a immune globulin (IG) composition and a soluble
hyaluronidase composition formulated for subcutaneous
administration. Such products can be used in methods of
treating IG-treatable diseases or conditions. Also provided
are methods for subcutaneous administration of immune
globulin whereby the dosing regimen is substantially the
same as for intravenous administration of the same dosage
for treatment of the same IG-treatable disease or condition.

78 Claims, No Drawings

Specification includes a Sequence Listing.

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COMBINATIONS AND METHODS FOR SUBCUTANEOUS ADMINISTRATION OF IMMUNE GLOBULIN AND HYALURONIDASE

Matter enclosed in heavy brackets [] appears in the original patent but forms no part of this reissue specification; matter printed in italics indicates the additions made by reissue; a claim printed with strikethrough indicates that the claim was canceled, disclaimed, or held invalid by a prior post-patent action or proceeding.

RELATED APPLICATIONS

The present application is a reissue of U.S. Pat. No. 10,301,376, which issued on May 28, 2019, which was filed as U.S. application Des. No. 12/381,844 on Mar. 16, 2009. Benefit of priority is claimed to U.S. Provisional Application Ser. No. 61/069,841, to Richard Schiff, Heinz Leibl and Gregory Frost, entitled "Combinations and Methods for Subcutaneous Administration of Immune Globulin and Hyaluronidase," filed Mar. 17, 2008. The subject matter of the above-noted application is incorporated by reference in its entirety.

This application is related to International PCT Application Serial No. PCT/US2009/001670, filed the same day herewith, entitled "Combinations and Methods for Subcutaneous Administration of Immune Globulin and Hyaluronidase," which claims priority to U.S. Provisional Application Ser. No. 61/069,841. The subject matter of the above-noted related application is incorporated by reference in its entirety.

FIELD OF THE INVENTION

Provided are combinations, compositions and kits containing an immune globulin (IG) composition and a soluble hyaluronidase composition formulated for subcutaneous administration. Such products can be used in methods of treating IG-treatable diseases or conditions. Also provided are methods for subcutaneous administration of immune globulin whereby the dosing regimen is substantially the same as for intravenous administration of the same dosage for treatment of the same IG-treatable disease or condition.

BACKGROUND

The intravenous (IV) administration of immune globulin (WIG) is the primary treatment of individuals with immune deficiencies. Although the initial IVIG preparations caused severe side effects, the IVIG preparations available at the present time are well tolerated in the majority of immune deficient patients. Nonetheless, a small proportion of patients continue to have unpleasant, even disabling, reactions such as headache, fatigue, and myalgia. Fever and chills remains a problem, especially when patients have intercurrent infections. The reactions often persist despite trying other IVIG preparations or pre-medicating with acetaminophen, diphenhydramine, and corticosteroids. Further, due to the requirement for IV administration, there are issues with patient compliance.

Subcutaneous (SQ) administration of immune globulin is an alternative to intravenous administration. Compared to IV infusions, SQ administration of immune globulin has several advantages. For example, it reduces the incidence of systemic reactions, does not require sometimes-difficult IV

access, improves trough levels, and gives patients more independence. Because of the difficulty in administering large quantities of fluid in a single site, it is necessary to do SQ infusions once or twice a week, using two to as many as 5 sites at a time. Thus, unlike WIG, which is given once a month, subcutaneous administration is usually done weekly. Hence, there is a need for alternative methods for administering immune globulin.

SUMMARY

Provided herein are methods, compositions, combinations and kits for subcutaneous administration of immune globulin and for treating IG-treatable diseases or conditions. Provided are methods for treating an IG-treatable disease or condition in a subject by subcutaneously administering to the subject soluble hyaluronidase and an immune globulin (IG) for treating the disease or condition. Co-administration of IG and hyaluronidase increases the bioavailability of subcutaneously administered IG to permit administration of IG subcutaneously using a dosing regime substantially the same as intravenous IG (IVIG) administration for the particular disease or condition. The administration of the IG is effected such that the amount administered and frequency of administration is substantially the same as for IV (intravenous) administration of the same amount via IV for the same disease or condition. The amount administered via IV can be predetermined or is known for a particular disease or condition. Typically, in the presence of a soluble hyaluronidase, for subcutaneous administration, the rate of administration can be greater than for IV administration. Hence, the time for administration of a particular dose can be reduced. Rate of administration can be controlled, such as by a pump, or can rely on gravity.

Thus, among the methods provided are methods for treating an IG-treatable disease or condition in a subject in need of such treatment by subcutaneously administering to the subject a soluble hyaluronidase and an amount of immune globulin (IG) effective for treating the disease or condition. The administration is performed with a dosage regimen in which: (a) a quantity of IG; and (b) a dosing frequency for successive administrations of IG to the subject are selected such that the therapeutic effect of the subcutaneous IG administration upon the subject is at least substantially equivalent to intravenous administration of the IG to the subject using the same dosing regimen.

In some examples of the methods provided herein, bioavailability of the subcutaneously administered IG is at least about 90% of the bioavailability of the same dosage administered via IV administration. The amount of soluble hyaluronidase administered can be sufficient to effect subcutaneous administration of the IG at a dosage administered no more than once a month. In other examples, administration of IG is no more than once monthly.

The soluble hyaluronidase used in the methods and uses provided herein can be PH20 or a truncated form thereof. For example, the soluble hyaluronidase can be an ovine or bovine or truncated human PH20. In instances where a truncated human PH20 is used in the methods and uses provided herein, the truncated human PH20 can be selected from among polypeptides having a sequence of amino acids set forth in any of SEQ ID NOS:4-9, or allelic variants or other variants thereof. In one example, the soluble hyaluronidase is rHuPH20.

The IG administered using the methods and uses herein can be purified from human plasma, such as by alcohol fractionation. In some examples, the IG is further purified by

any one or more of a chemical modification, incubation at pH 4.0 with or without pepsin, polyethylene glycol (PEG) precipitation, ion-exchange chromatography, enzymatic cleavage, solvent detergent treatment, diafiltration or ultrafiltration. The methods and uses provided herein can employ IG that contains IgG, IgA and IgM. In some examples, the IG contains greater than 95% IgG. Further, the IgG can be monomeric. Protein-stabilizing excipients, such as one or more of glycine, maltose, a polyol, human serum albumin, mannitol, and non-ionic detergent, also can be present in the IG. In some examples, the pH of the IG preparation is at or about 4.2 to 5.4, 4.6 to 5.1 or 4.8 to 5.0, and the protein concentration is or is about 5 to 15% w/v, 6 to 15% w/v, or 8 to 12% w/v of IG composition. In one example, the protein concentration of the IG is 10% w/v.

Provided herein are methods and uses for treating an IG-treatable disease or condition, in which soluble hyaluronidase and an immune globulin (IG) for treating the disease or condition are subcutaneously administered, and the IG is infused at a rate of 10 ml/hr to 300 ml/hr, such as at or about 10 ml/hr, 20 ml/hr, 30 ml/hr, 40 ml/hr, 50 ml/hr, 60 ml/hr, 70 ml/hr, 80 ml/hr, 90 ml/hr, 100 ml/hr, 150 ml/hr, 200 ml/hr, 250 ml/hr and 300 ml/hr. The rate can be controlled by a pump or gravity. In some examples, the IG and hyaluronidase are administered separately, simultaneously or intermittently. For example, the hyaluronidase can be administered prior to administration of IG, such as 0.5 minutes, 1 minute, 2 minutes, 3 minutes, 4 minutes, 5 minutes, 6 minutes, 7 minutes, 8 minutes, 9 minutes, 10 minutes, 20 minutes or 30 minutes prior to administration of IG. In other examples, the IG and hyaluronidase are in a single composition. In further examples, about or 5 grams (g), 10 g, 15 g, 20 g, 21 g, 22 g, 23 g, 24 g, 25 g, 26 g, 27 g, 28 g, 29 g, 30 g, 31 g, 32 g, 33 g, 34 g, 35 g, 36 g, 37 g, 38 g, 39 g or 40 g of IG is administered, and the hyaluronidase is administered at a ratio (units hyaluronidase/grams of IG) at or about 10 U/gram (g), 20 U/g, 30 U/g, 35 U/g, 40 U/g, 50 U/g, 60 U/g, 70 U/g, 80 U/g, 90 U/g, 100 U/g, 150 U/g, or 300 U/g.

Soluble hyaluronidase and IG can be administered using the methods and uses provided herein to treat, for example, immunodeficiency; acquired hypogammaglobulinemia secondary to hematological malignancies; Kawasaki's disease; chronic inflammatory demyelinating polyneuropathy (CIDP); Guillain-Barre Syndrome; Idiopathic thrombocytopenic purpura; inflammatory myopathies; Lambert-Eaton myasthenic syndrome; multifocal motor neuropathy; Myasthenia Gravis; Moersch-Wohmann syndrome; secondary hypogammaglobulinaemia (including iatrogenic immunodeficiency); specific antibody deficiency; Acute disseminated encephalomyelitis; ANCA-positive systemic necrotizing vasculitis; Autoimmune haemolytic anaemia; Bullous pemphigoid; Cicatricial pemphigoid; Evans syndrome (including autoimmune haemolytic anaemia with immune thrombocytopenia); Foeto-maternal/neonatal alloimmune thrombocytopenia (FMAIT/NAIT); Haemophagocytic syndrome; High-risk allogeneic haemopoietic stem cell transplantation; IgM paraproteinaemic neuropathy; kidney transplantation; multiple sclerosis; Opsoclonus myoclonus ataxia; Pemphigus foliaceus; Pemphigus vulgaris; Post-transfusion purpura; Toxic epidermal necrolysis/Steven Johnson syndrome (TEN/SJS); Toxic shock syndrome; Alzheimer's Disease; Systemic lupus erythematosus; multiple myeloma; sepsis; B cell tumors; trauma; and a bacterial, viral or fungal infection. In instances where the IG and hyaluronidase are administered to treat an immunodeficiency, the immunodeficiency can be selected from among

common variable immunodeficiency (CVID), congenital agammaglobulinemia, Wiskott-Aldrich syndrome, severe combined immunodeficiency (SCID), primary hypogammaglobulinemia, primary immunodeficiency diseases with antibody deficiency, X-linked agammaglobulinemia (XLA), hypogammaglobulinemia of infancy, and paraneoplastic cerebellar degeneration with no antibodies.

In instances where the IG-treatable disease or condition is acquired hypogammaglobulinemia secondary to hematological malignancies, and the hematological malignancy can be chronic lymphocytic leukemia (CLL), multiple myeloma (MM) or non-Hodgkin's lymphoma (NHL). In instances where the IG-treatable disease or condition is an inflammatory myopathy, the inflammatory myopathy can be polymyositis, dermatomyositis or inclusion body myositis.

In some examples, soluble hyaluronidase and IG is administered subcutaneously to treat a bacteria, viral or fungal condition, such as, for example, Haemophilus influenzae type B, Pseudomonas aeruginosa types A and B, Staphylococcus aureus, Group B Streptococcus, Streptococcus pneumoniae types 1, 3, 4, 6, 7, 8, 9, 12, 14, 18, 19, and 23, Adenovirus types 2 and 5, Cytomegalovirus, Epstein Barr virus VCA, Hepatitis A virus, Hepatitis B virus, Herpes simplex virus-1, Herpes simplex virus-2, Influenza A, Measles, Parainfluenza types 1, 2 and 3, Polio, Varicella zoster virus, Aspergillus and Candida albicans.

Provided herein are combinations of compositions, containing a first composition containing IG formulated for subcutaneous single dosage administration no more than once per month, and a second composition containing a soluble hyaluronidase formulated for single dosage administration no more than once per month. The compositions can be in a dual chamber container or in single container separated from each other. In some examples, the hyaluronidase is positioned in the container to be administered before the IG. The container can be a syringe, tube or bottle, and can further contain a needle for injection.

The combinations of compositions provided herein can contain PH20, or a truncated form thereof. For example, ovine, bovine or truncated human PH20, such as a polypeptide having a sequence of amino acids set forth in any of SEQ ID NOS:4-9, or allelic variants or other variants thereof, can be included in the combinations of compositions provided herein. In some examples, the soluble hyaluronidase in the combination is rHuPH20. Further, the IG in the combinations of compositions can be purified from human plasma, and can be lyophilized or a liquid.

In some examples, the volume of liquid in the combinations of compositions provided herein is or is about 100 ml, 150 ml, 200 ml, 300 ml, 400 ml, 500 ml, 600 ml or 700 ml. The IG in the combinations of compositions can have a protein concentration that is or is about 5 to 15% w/v, 6 to 15% w/v, or 8 to 12% w/v of IG composition, such as, for example, 10% w/v. In some examples, the IG in the composition is or is about 5 grams (g), 10 g, 15 g, 20 g, 21 g, 22 g, 23 g, 24 g, 25 g, 26 g, 27 g, 28 g, 29 g, 30 g, 31 g, 32 g, 33 g, 34 g, 35 g, 36 g, 37 g, 38 g, 39 g or 40 g. The hyaluronidase can be a liquid. In some examples, the volume of the hyaluronidase liquid is or is about 1 ml, 2 ml, 3 ml, 4 ml, 5 ml, 6 ml, 7 ml, 8 ml, 9 ml, 10 ml, 20 ml or 30 ml, and the hyaluronidase is at or about 10 Units to 500,000 Units, 100 Units to 100,000 Units, 500 Units to 50,000 Units, 1000 Units to 10,000 Units, 5000 Units to 7500 Units, 5000 Units to 50,000 Units, or 1,000 Units to 10,000 Units. Provided herein are compositions containing immune globulin (IG) and a soluble hyaluronidase formulated for single dosage administration once a month. The soluble hyaluronidase

dase contained in the composition can be PH20, or a truncated form thereof. For example, ovine, bovine or tam-
cated human PH20, such as a polypeptide having a sequence
of amino acids set forth in any of SEQ ID NOS:4-9, or allelic
variants or other variants thereof, can be included in the
compositions formulated for single dosage administration
provided herein. In some examples, the soluble hyaluroni-
dase in the composition is rHuPH20. The IG in the compo-
sitions can be purified from human plasma, and can be a
liquid.

In exemplary embodiments, the IG in the compositions
formulated for single dosage administration provided herein
has a protein concentration that is or is about 5 to 15% w/v,
6 to 15% w/v, or 8 to 12% w/v of IG composition, such as,
for example, 10% w/v. The IG in the composition is or is
about 5 grams (g), 10 g, 15 g, 20 g, 21 g, 22 g, 23 g, 24 g,
25 g, 26 g, 27 g, 28 g, 29 g, 30 g, 31 g, 32 g, 33 g, 34 g, 35
g, 36 g, 37 g, 38 g, 39 g or 40 g, and the hyaluronidase is
at or about 10 Units to 500,000 Units, 100 Units to 100,000
Units, 500 Units to 50,000 Units, 1000 Units to 10,000
Units, 5000 Units to 7500 Units, 5000 Units to 50,000 Units,
or 1,000 Units to 10,000 Units. The volume of liquid in the
composition can be at or about 100 ml, 150 ml, 200 ml, 300
ml, 400 ml, 500 ml, 600 ml or 700 ml.

Provided herein are kits containing combinations of com-
positions, containing a first composition containing IG for-
mulated for subcutaneous single dosage administration no
more than once per month, and a second composition
containing a soluble hyaluronidase formulated for single
dosage administration no more than once per month. Also
provided herein are compositions containing illumine globu-
lin (IG) and a soluble hyaluronidase formulated for single
dosage administration once a month. Optionally, instruc-
tions can be included in the kits.

DETAILED DESCRIPTION

Outline

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5. Guillain-Barre Syndrome
6. Idiopathic thrombocytopenic purpura
7. Inflammatory myopathies: polymyositis, dermatomyo-
sitis and inclusion body myositis
8. Lambert-Eaton myasthenic syndrome
9. Multifocal motor neuropathy
10. Myasthenia Gravis
11. Moersch-Woltmann syndrome
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- I. Articles of manufacture and kits
- J. Examples

A. Definitions

Unless defined otherwise, all technical and scientific
terms used herein have the same meaning as is commonly
understood by one of skill in the art to which the invention(s)
belong. All patents, patent applications, published applica-
tions and publications, Genbank sequences, databases, web-
sites and other published materials referred to throughout the
entire disclosure herein, unless noted otherwise, are incor-
porated by reference in their entirety. In the event that there
are a plurality of definitions for terms herein, those in this
section prevail. Where reference is made to a URL or other
such identifier or address, it understood that such identifiers
can change and particular information on the internet can
come and go, but equivalent information can be found by
searching the internet. Reference thereto evidences the
availability and public dissemination of such information.

As used herein, "immunoglobulin," "immune globulin,"
"gamma globulin" refer to preparations of plasma proteins
derived from the pooled plasma of adult donors. IgG anti-
bodies predominate; other antibody subclasses, such as IgA
and IgM are present. Therapeutic immune globulin can
provide passive immunization by increasing a recipient's
serum levels of circulating antibodies. IgG antibodies can,
for example, bind to and neutralize bacterial toxins;
opsonize pathogens; activate complement; and suppress
pathogenic cytokines and phagocytes through interaction
with cytokines and receptors thereof, such as CD5, inter-
leukin-1a (IL-1a), interleukin 6 (IL-6), tumor necrosis fac-
tor-alpha (TNF-alpha), and T-cell receptors. Therapeutic
immune globulin can inhibit the activity of autoantibodies.
Immune globulin preparations also include, but are not
limited to, immune globulin intravenous (IGIV), immune
globulin IV, therapeutic immunoglobulin. Immune globulin
preparation are well known, and include brand names, such
as BayGam®, Gamimune® N, Gammagard® S/D, Gam-
mar®-P, Iveegam® EN, Panglobulin®, Polygam® S/D,
Sandoglobulin®, Venoglobulin®-I, Venoglobulin®-S,
WinRho® SDF and others. Immune globulin preparations
can be derived from human plasma, or are recombinantly
produced.

As used herein, IG-treatable diseases or conditions refer
to any disease or condition for which immune globulin
preparations are used. Such diseases and conditions, include,
but are not limited to, any disease in which an increase in
circulating antibodies is ameliorative, such as, for example,
immunodeficiency; acquired hypogammaglobulinemia sec-
ondary to hematological malignancies; Kawasaki's disease;

chronic inflammatory demyelinating polyneuropathy (CIDP); Guillain-Barre Syndrome; Idiopathic thrombocytopenic purpura; inflammatory myopathies; Lambert-Eaton myasthenic syndrome; multifocal motor neuropathy; Myasthenia Gravis; Moersch-Woltmann syndrome; secondary hypogammaglobulinaemia (including iatrogenic immunodeficiency); specific antibody deficiency; Acute disseminated encephalomyelitis; ANCA-positive systemic necrotizing vasculitis; Autoimmune haemolytic anaemia; Bullous pemphigoid; Cicatricial pemphigoid; Evans syndrome (including autoimmune haemolytic anaemia with immune thrombocytopenia); Foeto-maternal/neonatal alloimmune thrombocytopenia (FMAIT/NAIT); Haemophagocytic syndrome; High-risk allogeneic haemopoietic stem cell transplantation; IgM paraproteinaemic neuropathy; kidney transplantation; multiple sclerosis; Opsoclonus myoclonus ataxia; Pemphigus foliaceus; Pemphigus vulgaris; Post-transfusion purpura; Toxic epidermal necrolysis/Steven Johnson syndrome (TEN/SJS); Toxic shock syndrome; Alzheimer's Disease; Systemic lupus erythematosus; multiple myeloma; sepsis; B cell tumors; trauma; and a bacterial viral or fungal infection.

As used herein, dosing regime refers to the amount of immune globulin administered and the frequency of administration. The dosing regime is a function of the disease or condition to be treated, and thus can vary.

As used herein, "substantially the same as an intravenous IG (IVIG) dosing regime" refers to a regimen in which the dose and/or frequency is within an amount that is effective for treating a particular disease or condition, typically is about or 10%, of the IV dose or frequency. Amounts of IVIG that are effective for treating a particular disease or condition are known or can be empirically determined by one of skill in the art. For example, as exemplified below, 300 mg/kg (i.e. 21 grams assuming the average adult weighs 70 kg) to 600 mg/kg (i.e. 42 grams) is the typical monthly dose of IVIG administered to patients having primary immunodeficiency diseases. Hence, IG, when administered in combination with hyaluronidase, is administered subcutaneously at doses that are or are about 300 mg/kg to 600 mg/kg for treatment of primary immunodeficiency diseases.

As used herein, frequency of administration refers to the time between successive doses of immune globulin. For example, frequency can be one, two, three, four weeks, and is a function of the particular disease or condition treated. Generally, frequency is a least every two or three weeks, and typically no more than once a month.

As used herein, hyaluronidase refers to an enzyme that degrades hyaluronic acid. Hyaluronidases include bacterial hyaluronidases (EC 4.2.99.1), hyaluronidases from leeches, other parasites, and crustaceans (EC 3.2.1.36), and mammalian-type hyaluronidases (EC 3.2.1.35). Hyaluronidases also include any of non-human origin including, but not limited to, murine, canine, feline, leporine, avian, bovine, ovine, porcine, equine, piscine, ranine, bacterial, and any from leeches, other parasites, and crustaceans. Exemplary non-human hyaluronidases include, hyaluronidases from cows (SEQ ID NO:10 and 11), yellow jacket wasp (SEQ ID NOS:12 and 13), honey bee (SEQ ID NO:14), white-face hornet (SEQ ID NO:15), paper wasp (SEQ ID NO:16), mouse (SEQ ID NOS:17-19, 32), pig (SEQ ID NOS:20-21), rat (SEQ ID NOS:22-24, 31), rabbit (SEQ ID NO:25), sheep (SEQ ID NO:26 and 27), orangutan (SEQ ID NO:28), cynomolgus monkey (SEQ ID NO:29), guinea pig (SEQ ID NO: 30), Staphylococcus aureus (SEQ ID NO:33), Streptococcus pyogenes (SEQ ID NO:34), and Clostridium perfringens (SEQ ID NO:35). Hyaluronidases also include those of

human origin. Exemplary human hyaluronidases include HYAL1 (SEQ ID NO:36), HYAL2 (SEQ ID NO:37), HYAL3 (SEQ ID NO:38), HYAL4 (SEQ ID NO:39), and PH20 (SEQ ID NO:1). Also included amongst hyaluronidases are soluble hyaluronidases, including, ovine and bovine PH20, soluble human PH20 and soluble rHuPH20.

Reference to hyaluronidases includes precursor hyaluronidase polypeptides and mature hyaluronidase polypeptides (such as those in which a signal sequence has been removed), truncated forms thereof that have activity, and includes allelic variants and species variants, variants encoded by splice variants, and other variants, including polypeptides that have at least 40%, 45%, 50%, 55%, 60%, 65%, 70%, 75%, 80%, 85%, 90%, 95%, 96%, 97%, 98%, 99% or more sequence identity to the precursor polypeptides set forth in SEQ ID NOS: 1 and 10-39, or the mature form thereof. For example, reference to hyaluronidase also includes the human PH20 precursor polypeptide variants set forth in SEQ ID NOS:50-51. Hyaluronidases also include those that contain chemical or posttranslational modifications and those that do not contain chemical or posttranslational modifications. Such modifications include, but are not limited to, pegylation, albumination, glycosylation, farnesylation, carboxylation, hydroxylation, phosphorylation, and other polypeptide modifications known in the art.

As used herein, a soluble hyaluronidase refers to a polypeptide characterized by its solubility under physiologic conditions. Soluble hyaluronidases can be distinguished, for example, by its partitioning into the aqueous phase of a Triton X-114 solution warmed to 37° C. (Bordier et al., (1981) J. Biol. Chem., 256:1604-7). Membrane-anchored, such as lipid anchored hyaluronidases, will partition into the detergent rich phase, but will partition into the detergent-poor or aqueous phase following treatment with Phospholipase-C. Included among soluble hyaluronidases are membrane anchored hyaluronidases in which one or more regions associated with anchoring of the hyaluronidase to the membrane has been removed or modified, where the soluble form retains hyaluronidase activity. Soluble hyaluronidases include recombinant soluble hyaluronidases and those contained in or purified from natural sources, such as, for example, testes extracts from sheep or cows. Exemplary of such soluble hyaluronidases are soluble human PH20. Other soluble hyaluronidases include ovine (SEQ ID NO:27) and bovine (SEQ ID NO:11) PH20.

As used herein, soluble human PH20 or sHuPH20 include mature polypeptides lacking all or a portion of the glycosylphosphatidylinositol (GPI) attachment site at the C-terminus such that upon expression, the polypeptides are soluble. Exemplary sHuPH20 polypeptides include mature polypeptides having an amino acid sequence set forth in any one of SEQ ID NOS:4-9 and 47-48. The precursor polypeptides for such exemplary sHuPH20 polypeptides include a signal sequence. Exemplary of the precursors are those set forth in SEQ ID NOS:3 and 40-46, each of which contains a 35 amino acid signal sequence at amino acid positions 1-35. Soluble HuPH20 polypeptides also include those degraded during or after the production and purification methods described herein.

As used herein, soluble recombinant human PH20 (rHuPH20) refers to a soluble form of human PH20 that is recombinantly expressed in Chinese Hamster Ovary (CHO) cells. Soluble rHuPH20 is encoded by nucleic acid that includes the signal sequence and is set forth in SEQ ID NO:49. Also included are DNA molecules that are allelic variants thereof and other soluble variants. The nucleic acid encoding soluble rHuPH20 is expressed in CHO cells which

secrete the mature polypeptide. As produced in the culture medium there is heterogeneity at the C-terminus so that the product includes a mixture of species that can include any one or more of SEQ ID NOS: 4-9 in various abundance. Corresponding allelic variants and other variants also are included, including those corresponding to the precursor human PH20 polypeptides set forth in SEQ ID NOS:50-51. Other variants can have 60%, 70%, 80%, 85%, 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99% or more sequence identity with any of SEQ ID NOS:4-9 and 47-48 as long they retain a hyaluronidase activity and are soluble.

As used herein, activity refers to a functional activity or activities of a polypeptide or portion thereof associated with a full-length (complete) protein. Functional activities include, but are not limited to, biological activity, catalytic or enzymatic activity, antigenicity (ability to bind or compete with a polypeptide for binding to an anti-polypeptide antibody), immunogenicity, ability to form multimers, and the ability to specifically bind to a receptor or ligand for the polypeptide.

As used herein, hyaluronidase activity refers to the ability of hyaluronidase to cleave hyaluronic acid. In vitro assays to determine the hyaluronidase activity of hyaluronidases, such as soluble rHuPH20, are known in the art and described herein. Exemplary assays include the microturbidity assay described below (see e.g. Example 3) that measures cleavage of hyaluronic acid by hyaluronidase indirectly by detecting the insoluble precipitate formed when the uncleaved is hyaluronic acid binds with serum albumin.

As used herein, the residues of naturally occurring α -amino acids are the residues of those 20 α -amino acids found in nature which are incorporated into protein by the specific recognition of the charged tRNA molecule with its cognate mRNA codon in humans.

As used herein, nucleic acids include DNA, RNA and analogs thereof, including peptide nucleic acids (PNA) and mixtures thereof. Nucleic acids can be single or double-stranded. When referring to probes or primers, which are optionally labeled, such as with a detectable label, such as a fluorescent or radiolabel, single-stranded molecules are contemplated. Such molecules are typically of a length such that their target is statistically unique or of low copy number (typically less than 5, generally less than 3) for probing or priming a library. Generally a probe or primer contains at least 14, 16 or 30 contiguous nucleotides of sequence complementary to or identical to a gene of interest. Probes and primers can be 10, 20, 30, 50, 100 or more nucleic acids long.

As used herein, a peptide refers to a polypeptide that is from 2 to 40 amino acids in length.

As used herein, the amino acids which occur in the various sequences of amino acids provided herein are identified according to their known, three-letter or one-letter abbreviations (Table 1). The nucleotides which occur in the various nucleic acid fragments are designated with the standard single-letter designations used routinely in the art.

As used herein, an "amino acid" is an organic compound containing an amino group and a carboxylic acid group. A polypeptide contains two or more amino acids. For purposes herein, amino acids include the twenty naturally-occurring amino acids, non-natural amino acids and amino acid analogs (i.e., amino acids wherein the α -carbon has a side chain).

As used herein, "amino acid residue" refers to an amino acid formed upon chemical digestion (hydrolysis) of a polypeptide at its peptide linkages. The amino acid residues described herein are presumed to be in the "L" isomeric

form. Residues in the "D" isomeric form, which are so designated, can be substituted for any L-amino acid residue as long as the desired functional property is retained by the polypeptide. NH₂ refers to the free amino group present at the amino terminus of a polypeptide. COOH refers to the free carboxy group present at the carboxyl terminus of a polypeptide. In keeping with standard polypeptide nomenclature described in J. Biol. Chem., 243: 3557-3559 (1968), and adopted 37 C.F.R. §§ 1.821-1.822, abbreviations for amino acid residues are shown in Table 1:

TABLE 1

Table of Correspondence		
SYMBOL		
1-Letter	3-Letter	AMINO ACID
Y	Tyr	Tyrosine
G	Gly	Glycine
F	Phe	Phenylalanine
M	Met	Methionine
A	Ala	Alanine
S	Ser	Serine
I	Ile	Isoleucine
L	Leu	Leucine
T	Thr	Threonine
V	Val	Valine
P	Pro	proline
K	Lys	Lysine
H	His	Histidine
Q	Gln	Glutamine
E	Glu	glutamic acid
Z	Glx	Glu and/or Gln
W	Trp	Tryptophan
R	Arg	Arginine
D	Asp	aspartic acid
N	Asn	asparagine
B	Asx	Asn and/or Asp
C	Cys	Cysteine
X	Xaa	Unknown or other

It should be noted that all amino acid residue sequences represented herein by formulae have a left to right orientation in the conventional direction of amino-terminus to carboxyl-terminus. In addition, the phrase "amino acid residue" is broadly defined to include the amino acids listed in the Table of Correspondence (Table 1) and modified and unusual amino acids, such as those referred to in 37 C.F.R. §§ 1.821-1.822, and incorporated herein by reference. Furthermore, it should be noted that a dash at the beginning or end of an amino acid residue sequence indicates a peptide bond to a further sequence of one or more amino acid residues, to an amino-terminal group such as NH₂ or to a carboxyl-terminal group such as COOH.

As used herein, "naturally occurring amino acids" refer to the 20 L-amino acids that occur in polypeptides.

As used herein, "non-natural amino acid" refers to an organic compound that has a structure similar to a natural amino acid but has been modified structurally to mimic the structure and reactivity of a natural amino acid. Non-naturally occurring amino acids thus include, for example, amino acids or analogs of amino acids other than the 20 naturally-occurring amino acids and include, but are not limited to, the D-isostereomers of amino acids. Exemplary non-natural amino acids are described herein and are known to those of skill in the art.

As used herein, a DNA construct is a single or double stranded, linear or circular DNA molecule that contains segments of DNA combined and juxtaposed in a manner not

found in nature. DNA constructs exist as a result of human manipulation, and include clones and other copies of manipulated molecules.

As used herein, a DNA segment is a portion of a larger DNA molecule having specified attributes. For example, a DNA segment encoding a specified polypeptide is a portion of a longer DNA molecule, such as a plasmid or plasmid fragment, which, when read from the 5' to 3' direction, encodes the sequence of amino acids of the specified polypeptide.

As used herein, the term polynucleotide means a single- or double-stranded polymer of deoxyribonucleotides or ribonucleotide bases read from the 5' to the 3' end. Polynucleotides include RNA and DNA, and can be isolated from natural sources, synthesized in vitro, or prepared from a combination of natural and synthetic molecules. The length of a polynucleotide molecule is given herein in terms of nucleotides (abbreviated "nt") or base pairs (abbreviated "bp"). The term nucleotides is used for single- and double-stranded molecules where the context permits. When the term is applied to double-stranded molecules it is used to denote overall length and will be understood to be equivalent to the term base pairs. It will be recognized by those skilled in the art that the two strands of a double-stranded polynucleotide can differ slightly in length and that the ends thereof can be staggered; thus all nucleotides within a double-stranded polynucleotide molecule can not be paired. Such unpaired ends will, in general, not exceed 20 nucleotides in length.

As used herein, "similarity" between two proteins or nucleic acids refers to the relatedness between the sequence of amino acids of the proteins or the nucleotide sequences of the nucleic acids. Similarity can be based on the degree of identity and/or homology of sequences of residues and the residues contained therein. Methods for assessing the degree of similarity between proteins or nucleic acids are known to those of skill in the art. For example, in one method of assessing sequence similarity, two amino acid or nucleotide sequences are aligned in a manner that yields a maximal level of identity between the sequences. "Identity" refers to the extent to which the amino acid or nucleotide sequences are invariant. Alignment of amino acid sequences, and to some extent nucleotide sequences, also can take into account conservative differences and/or frequent substitutions in amino acids (or nucleotides). Conservative differences are those that preserve the physico-chemical properties of the residues involved. Alignments can be global (alignment of the compared sequences over the entire length of the sequences and including all residues) or local (the alignment of a portion of the sequences that includes only the most similar region or regions).

"Identity" per se has an art-recognized meaning and can be calculated using published techniques. (See, e.g.: Computational Molecular Biology, Lesk, A. M., ed., Oxford University Press, New York, 1988; Biocomputing: Informatics and Genome Projects, Smith, D. W., ed., Academic Press, New York, 1993; Computer Analysis of Sequence Data, Part I, Griffin, A. M., and Griffin, H. G., eds., Humana Press, New Jersey, 1994; Sequence Analysis in Molecular Biology, von Heinje, G., Academic Press, 1987; and Sequence Analysis Primer, Gribskov, M. and Devereux, J., eds., M Stockton Press, New York, 1991). While there exists a number of methods to measure identity between two polynucleotide or polypeptides, the term "identity" is well known to skilled artisans (Carillo, H. & Lipton, D., SIAM J Applied Math 48:1073 (1988)).

As used herein, homologous (with respect to nucleic acid and/or amino acid sequences) means about greater than or equal to 25% sequence homology, typically greater than or equal to 25%, 40%, 50%, 60%, 70%, 80%, 85%, 90% or 95% sequence homology; the precise percentage can be specified if necessary. For purposes herein the terms "homology" and "identity" are often used interchangeably, unless otherwise indicated. In general, for determination of the percentage homology or identity, sequences are aligned so that the highest order match is obtained (see, e.g.: Computational Molecular Biology, Lesk, A. M., ed., Oxford University Press, New York, 1988; Biocomputing: Informatics and Genome Projects, Smith, D. W., ed., Academic Press, New York, 1993; Computer Analysis of Sequence Data, Part I, Griffin, A. M., and Griffin, H. G., eds., Humana Press, New Jersey, 1994; Sequence Analysis in Molecular Biology, von Heinje, G., Academic Press, 1987; and Sequence Analysis Primer, Gribskov, M. and Devereux, J., eds., M Stockton Press, New York, 1991; Carillo et al. (1988) SIAM J Applied Math 48:1073). By sequence homology, the number of conserved amino acids is determined by standard alignment algorithms programs, and can be used with default gap penalties established by each supplier. Substantially homologous nucleic acid molecules would hybridize typically at moderate stringency or at high stringency all along the length of the nucleic acid of interest. Also contemplated are nucleic acid molecules that contain degenerate codons in place of codons in the hybridizing nucleic acid molecule.

Whether any two molecules have nucleotide sequences or amino acid sequences that are at least 60%, 70%, 80%, 85%, 90%, 95%, 96%, 97%, 98% or 99% "identical" or "homologous" can be determined using known computer algorithms such as the "FASTA" program, using for example, the default parameters as in Pearson et al. (1988) Proc. Natl. Acad. Sci. USA 85:2444 (other programs include the GCG program package (Devereux, J., et al., Nucleic Acids Research 12(I):387 (1984)), BLASTP, BLASTN, FASTA (Atschul, S. F., et al., J Molec Biol 215:403 (1990)); Guide to Huge Computers, Martin J. Bishop, ed., Academic Press, San Diego, 1994, and Carillo et al. (1988) SIAM J Applied Math 48:1073). For example, the BLAST function of the National Center for Biotechnology Information database can be used to determine identity. Other commercially or publicly available programs include, DNASTar "MegAlign" program (Madison, Wis.) and the University of Wisconsin Genetics Computer Group (UWG) "Gap" program (Madison Wis.). Percent homology or identity of proteins and/or nucleic acid molecules can be determined, for example, by comparing sequence information using a GAP computer program (e.g., Needleman et al. (1970) J. Mol. Biol. 48:443, as revised by Smith and Waterman ((1981) Adv. Appl. Math. 2:482). Briefly, the GAP program defines similarity as the number of aligned symbols (i.e., nucleotides or amino acids), which are similar, divided by the total number of symbols in the shorter of the two sequences. Default parameters for the GAP program can include: (1) a unary comparison matrix (containing a value of 1 for identities and 0 for non-identities) and the weighted comparison matrix of Gribskov et al. (1986) Nucl. Acids Res. 14:6745, as described by Schwartz and Dayhoff, eds., ATLAS OF PROTEIN SEQUENCE AND STRUCTURE, National Biomedical Research Foundation, pp. 353-358 (1979); (2) a penalty of 3.0 for each gap and an additional 0.10 penalty for each symbol in each gap; and (3) no penalty for end gaps. Therefore, as used herein, the term "identity" or "homology" represents a comparison between a test and a reference polypeptide or polynucleotide. As used herein, the term at

least "90% identical to" refers to percent identities from 90 to 99.99 relative to the reference nucleic acid or amino acid sequence of the polypeptide. Identity at a level of 90% or more is indicative of the fact that, assuming for exemplification purposes a test and reference polypeptide length of 100 amino acids are compared. No more than 10% (i.e., 10 out of 100) of the amino acids in the test polypeptide differs from that of the reference polypeptide. Similar comparisons can be made between test and reference polynucleotides. Such differences can be represented as point mutations randomly distributed over the entire length of a polypeptide or they can be clustered in one or more locations of varying length up to the maximum allowable, e.g. 10/100 amino acid difference (approximately 90% identity). Differences are defined as nucleic acid or amino acid substitutions, insertions or deletions. At the level of homologies or identities above about 85-90%, the result should be independent of the program and gap parameters set; such high levels of identity can be assessed readily, often by manual alignment without relying on software.

As used herein, an aligned sequence refers to the use of homology (similarity and/or identity) to align corresponding positions in a sequence of nucleotides or amino acids. Typically, two or more sequences that are related by 50% or more identity are aligned. An aligned set of sequences refers to 2 or more sequences that are aligned at corresponding positions and can include aligning sequences derived from RNAs, such as ESTs and other cDNAs, aligned with genomic DNA sequence.

As used herein, "primer" refers to a nucleic acid molecule that can act as a point of initiation of template-directed DNA synthesis under appropriate conditions (e.g., in the presence of four different nucleoside triphosphates and a polymerization agent, such as DNA polymerase, RNA polymerase or reverse transcriptase) in an appropriate buffer and at a suitable temperature. It will be appreciated that a certain nucleic acid molecules can serve as a "probe" and as a "primer." A primer, however, has a 3' hydroxyl group for extension. A primer can be used in a variety of methods, including, for example, polymerase chain reaction (PCR), reverse-transcriptase (RT)-PCR, RNA PCR, LCR, multiplex PCR, panhandle PCR, capture PCR, expression PCR, 3' and 5' RACE, in situ PCR, ligation-mediated PCR and other amplification protocols.

As used herein, "primer pair" refers to a set of primers that includes a 5' (upstream) primer that hybridizes with the 5' end of a sequence to be amplified (e.g. by PCR) and a 3' (downstream) primer that hybridizes with the complement of the 3' end of the sequence to be amplified.

As used herein, "specifically hybridizes" refers to annealing, by complementary base-pairing, of a nucleic acid molecule (e.g. an oligonucleotide) to a target nucleic acid molecule. Those of skill in the art are familiar with in vitro and in vivo parameters that affect specific hybridization, such as length and composition of the particular molecule. Parameters particularly relevant to in vitro hybridization further include annealing and washing temperature, buffer composition and salt concentration. Exemplary washing conditions for removing non-specifically bound nucleic acid molecules at high stringency are 0.1×SSPE, 0.1% SDS, 65° C., and at medium stringency are 0.2×SSPE, 0.1% SDS, 50° C. Equivalent stringency conditions are known in the art. The skilled person can readily adjust these parameters to achieve specific hybridization of a nucleic acid molecule to a target nucleic acid molecule appropriate for a particular application. Complementary, when referring to two nucleotide sequences, means that the two sequences of nucleotides

are capable of hybridizing, typically with less than 25%, 15% or 5% mismatches between opposed nucleotides. If necessary, the percentage of complementarity will be specified. Typically the two molecules are selected such that they will hybridize under conditions of high stringency.

As used herein, substantially identical to a product means sufficiently similar so that the property of interest is sufficiently unchanged so that the substantially identical product can be used in place of the product.

As used herein, it also is understood that the terms "substantially identical" or "similar" varies with the context as understood by those skilled in the relevant art. As used herein, an allelic variant or allelic variation references any of two or more alternative forms of a gene occupying the same chromosomal locus. Allelic variation arises naturally through mutation, and can result in phenotypic polymorphism within populations. Gene mutations can be silent (no change in the encoded polypeptide) or can encode polypeptides having altered amino acid sequence. The term "allelic variant" also is used herein to denote a protein encoded by an allelic variant of a gene. Typically the reference form of the gene encodes a wildtype form and/or predominant form of a polypeptide from a population or single reference member of a species. Typically, allelic variants, which include variants between and among species typically have at least 80%, 90% or greater amino acid identity with a wildtype and/or predominant form from the same species; the degree of identity depends upon the gene and whether comparison is interspecies or intraspecies. Generally, intraspecies allelic variants have at least about 80%, 85%, 90% or 95% identity or greater with a wildtype and/or predominant form, including 96%, 97%, 98%, 99% or greater identity with a wildtype and/or predominant form of a polypeptide. Reference to an allelic variant herein generally refers to variations in proteins among members of the same species.

As used herein, "allele," which is used interchangeably herein with "allelic variant" refers to alternative forms of a gene or portions thereof. Alleles occupy the same locus or position on homologous chromosomes. When a subject has two identical alleles of a gene, the subject is said to be homozygous for that gene or allele. When a subject has two different alleles of a gene, the subject is said to be heterozygous for the gene. Alleles of a specific gene can differ from each other in a single nucleotide or several nucleotides, and can include substitutions, deletions and insertions of nucleotides. An allele of a gene also can be a form of a gene containing a mutation.

As used herein, species variants refer to variants in polypeptides among different species, including different mammalian species, such as mouse and human.

As used herein, a splice variant refers to a variant produced by differential processing of a primary transcript of genomic DNA that results in more than one type of mRNA.

As used herein, modification is in reference to modification of a sequence of amino acids of a polypeptide or a sequence of nucleotides in a nucleic acid molecule and includes deletions, insertions, and replacements of amino acids and nucleotides, respectively. Methods of modifying a polypeptide are routine to those of skill in the art, such as by using recombinant DNA methodologies.

As used herein, the term promoter means a portion of a gene containing DNA sequences that provide for the binding of RNA polymerase and initiation of transcription. Promoter sequences are commonly, but not always, found in the 5' non-coding region of genes.

As used herein, isolated or purified polypeptide or protein or biologically-active portion thereof is substantially free of cellular material or other contaminating proteins from the cell or tissue from which the protein is derived, or substantially free from chemical precursors or other chemicals when chemically synthesized. Preparations can be determined to be substantially free if they appear free of readily detectable impurities as determined by standard methods of analysis, such as thin layer chromatography (TLC), gel electrophoresis and high performance liquid chromatography (HPLC), used by those of skill in the art to assess such purity, or sufficiently pure such that further purification would not detectably alter the physical and chemical properties, such as enzymatic and biological activities, of the substance. Methods for purification of the compounds to produce substantially chemically pure compounds are known to those of skill in the art. A substantially chemically pure compound, however, can be a mixture of stereoisomers. In such instances, further purification might increase the specific activity of the compound.

The term substantially free of cellular material includes preparations of proteins in which the protein is separated from cellular components of the cells from which it is isolated or recombinantly-produced. In one embodiment, the term substantially free of cellular material includes preparations of enzyme proteins having less than about 30% (by dry weight) of non-enzyme proteins (also referred to herein as a contaminating protein), generally less than about 20% of non-enzyme proteins or 10% of non-enzyme proteins or less than about 5% of non-enzyme proteins. When the enzyme protein is recombinantly produced, it also is substantially free of culture medium, i.e., culture medium represents less than about or at 20%, 10% or 5% of the volume of the enzyme protein preparation.

As used herein, the term substantially free of chemical precursors or other chemicals includes preparations of enzyme proteins in which the protein is separated from chemical precursors or other chemicals that are involved in the synthesis of the protein. The term includes preparations of enzyme proteins having less than about 30% (by dry weight) 20%, 10%, 5% or less of chemical precursors or non-enzyme chemicals or components.

As used herein, synthetic, with reference to, for example, a synthetic nucleic acid molecule or a synthetic gene or a synthetic peptide refers to a nucleic acid molecule or polypeptide molecule that is produced by recombinant methods and/or by chemical synthesis methods.

As used herein, production by recombinant means by using recombinant DNA methods means the use of the well known methods of molecular biology for expressing proteins encoded by cloned DNA.

As used herein, vector (or plasmid) refers to discrete elements that are used to introduce a heterologous nucleic acid into cells for either expression or replication thereof. The vectors typically remain episomal, but can be designed to effect integration of a gene or portion thereof into a chromosome of the genome. Also contemplated are vectors that are artificial chromosomes, such as yeast artificial chromosomes and mammalian artificial chromosomes. Selection and use of such vehicles are well known to those of skill in the art.

As used herein, an expression vector includes vectors capable of expressing DNA that is operatively linked with regulatory sequences, such as promoter regions, that are capable of effecting expression of such DNA fragments. Such additional segments can include promoter and terminator sequences, and optionally can include one or more

origins of replication, one or more selectable markers, an enhancer, a polyadenylation signal, and the like. Expression vectors are generally derived from plasmid or viral DNA, or can contain elements of both. Thus, an expression vector refers to a recombinant DNA or RNA construct, such as a plasmid, a phage, recombinant virus or other vector that, upon introduction into an appropriate host cell, results in expression of the cloned DNA. Appropriate expression vectors are well known to those of skill in the art and include those that are replicable in eukaryotic cells and/or prokaryotic cells and those that remain episomal or those which integrate into the host cell genome.

As used herein, vector also includes "virus vectors" or "viral vectors." Viral vectors are engineered viruses that are operatively linked to exogenous genes to transfer (as vehicles or shuttles) the exogenous genes into cells.

As used herein, operably or operatively linked when referring to DNA segments means that the segments are arranged so that they function in concert for their intended purposes, e.g., transcription initiates in the promoter and proceeds through the coding segment to the terminator.

As used herein the term assessing is intended to include quantitative and qualitative determination in the sense of obtaining an absolute value for the activity of a protease, or a domain thereof, present in the sample, and also of obtaining an index, ratio, percentage, visual or other value indicative of the level of the activity. Assessment can be direct or indirect and the chemical species actually detected need not of course be the proteolysis product itself but can for example be a derivative thereof or some further substance. For example, detection of a cleavage product of a complement protein, such as by SDS-PAGE and protein staining with Coomassie blue.

As used herein, biological activity refers to the in vivo activities of a compound or physiological responses that result upon in vivo administration of a compound, composition or other mixture. Biological activity, thus, encompasses therapeutic effects and pharmaceutical activity of such compounds, compositions and mixtures. Biological activities can be observed in in vitro systems designed to test or use such activities. Thus, for purposes herein a biological activity of a protease is its catalytic activity in which a polypeptide is hydrolyzed.

As used herein equivalent, when referring to two sequences of nucleic acids, means that the two sequences in question encode the same sequence of amino acids or equivalent proteins. When equivalent is used in referring to two proteins or peptides, it means that the two proteins or peptides have substantially the same amino acid sequence with only amino acid substitutions that do not substantially alter the activity or function of the protein or peptide. When equivalent refers to a property, the property does not need to be present to the same extent (e.g., two peptides can exhibit different rates of the same type of enzymatic activity), but the activities are usually substantially the same.

As used herein, "modulate" and "modulation" or "alter" refer to a change of an activity of a molecule, such as a protein. Exemplary activities include, but are not limited to, biological activities, such as signal transduction. Modulation can include an increase in the activity (i.e., up-regulation or agonist activity) a decrease in activity (i.e., down-regulation or inhibition) or any other alteration in an activity (such as a change in periodicity, frequency, duration, kinetics or other parameter). Modulation can be context dependent and typically modulation is compared to a designated state, for

example, the wildtype protein, the protein in a constitutive state, or the protein as expressed in a designated cell type or condition.

As used herein, a composition refers to any mixture. It can be a solution, suspension, liquid, powder, paste, aqueous, non-aqueous or any combination thereof.

As used herein, a combination refers to any association between or among two or more items. The combination can be two or more separate items, such as two compositions or two collections, can be a mixture thereof, such as a single mixture of the two or more items, or any variation thereof. The elements of a combination are generally functionally associated or related.

As used herein, a kit is a packaged combination that optionally includes other elements, such as additional reagents and instructions for use of the combination or elements thereof.

As used herein, "disease or disorder" refers to a pathological condition in an organism resulting from cause or condition including, but not limited to, infections, acquired conditions, genetic conditions, and characterized by identifiable symptoms. Diseases and disorders of interest herein are those that are treatable by immune globulin.

As used herein, "treating" a subject with a disease or condition means that the subject's symptoms are partially or totally alleviated, or remain static following treatment. Hence treatment encompasses prophylaxis, therapy and/or cure. Prophylaxis refers to prevention of a potential disease and/or a prevention of worsening of symptoms or progression of a disease. Treatment also encompasses any pharmaceutical use of an immune globulin preparation and compositions provided herein.

As used herein, a pharmaceutically effective agent, includes any therapeutic agent or bioactive agents, including, but not limited to, for example, anesthetics, vasoconstrictors, dispersing agents, conventional therapeutic drugs, including small molecule drugs and therapeutic proteins.

As used herein, treatment means any manner in which the symptoms of a condition, disorder or disease or other indication, are ameliorated or otherwise beneficially altered.

As used herein therapeutic effect means an effect resulting from treatment of a subject that alters, typically improves or ameliorates the symptoms of a disease or condition or that cures a disease or condition. A therapeutically effective amount refers to the amount of a composition, molecule or compound which results in a therapeutic effect following administration to a subject.

As used herein, the term "subject" refers to an animal, including a mammal, such as a human being.

As used herein, a patient refers to a human subject.

As used herein, amelioration of the symptoms of a particular disease or disorder by a treatment, such as by administration of a pharmaceutical composition or other therapeutic, refers to any lessening, whether permanent or temporary, lasting or transient, of the symptoms that can be attributed to or associated with administration of the composition or therapeutic.

As used herein, prevention or prophylaxis refers to methods in which the risk of developing disease or condition is reduced.

As used herein, a "therapeutically effective amount" or a "therapeutically effective dose" refers to the quantity of an agent, compound, material, or composition containing a compound that is at least sufficient to produce a therapeutic effect. Hence, it is the quantity necessary for preventing, curing, ameliorating, arresting or partially arresting a symptom of a disease or disorder.

As used herein, unit dose form refers to physically discrete units suitable for human and animal subjects and packaged individually as is known in the art.

As used herein, a single dosage formulation refers to a formulation for direct administration.

As used herein, an "article of manufacture" is a product that is made and sold.

As used throughout this application, the term is intended to encompass IG and hyaluronidase compositions contained in articles of packaging.

As used herein, fluid refers to any composition that can flow. Fluids thus encompass compositions that are in the form of semi-solids, pastes, solutions, aqueous mixtures, gels, lotions, creams and other such compositions.

As used herein, a "kit" refers to a combination of compositions provided herein and another item for a purpose including, but not limited to, activation, administration, diagnosis, and assessment of a biological activity or property. Kits optionally include instructions for use.

As used herein, a cellular extract or lysate refers to a preparation or fraction which is made from a lysed or disrupted cell.

As used herein, animal includes any animal, such as, but are not limited to primates including humans, gorillas and monkeys; rodents, such as mice and rats; fowl, such as chickens; ruminants, such as goats, cows, deer, sheep; ovine, such as pigs and other animals. Non-human animals exclude humans as the contemplated animal. The enzymes provided herein are from any source, animal, plant, prokaryotic and fungal. Most enzymes are of animal origin, including mammalian origin.

As used herein, a control refers to a sample that is substantially identical to the test sample, except that it is not treated with a test parameter, or, if it is a plasma sample, it can be from a normal volunteer not affected with the condition of interest. A control also can be an internal control.

As used herein, the singular forms "a," "an" and "the" include plural referents unless the context clearly dictates otherwise. Thus, for example, reference to a compound, comprising "an extracellular domain" includes compounds with one or a plurality of extracellular domains.

As used herein, ranges and amounts can be expressed as "about" a particular value or range. About also includes the exact amount. Hence "about 5 bases" means "about 5 bases" and also "5 bases."

As used herein, "optional" or "optionally" means that the subsequently described event or circumstance does or does not occur, and that the description includes instances where said event or circumstance occurs and instances where it does not. For example, an optionally substituted group means that the group is unsubstituted or is substituted.

As used herein, the abbreviations for any protective groups, amino acids and other compounds, are, unless indicated otherwise, in accord with their common usage, recognized abbreviations, or the IUPAC-IUB Commission on Biochemical Nomenclature (see, (1972) Biochem. 11:1726).

B. Subcutaneous Administration of Immune Globulin (IG)

Provided herein are methods and uses of treating IG-treatable diseases and conditions by subcutaneously administering immune globulin (IG) in combination with a soluble hyaluronidase. Hence, also provided are combinations of IG and a soluble hyaluronidase. By virtue of the ability of

hyaluronidase to break down hyaluronic acid in the extracellular matrix, hyaluronidase facilitates subcutaneous infusions of therapeutic agents. Immune globulin is a therapeutic that is primarily given by intravenous administration to treat individuals with immune deficiencies, referred to as IVIG therapy. The bioavailability of IG in the presence of hyaluronidase is greater than 90% of the bioavailability of IG following IVIG treatment. Hence, in the methods and use provided herein, the combination therapy of hyaluronidase and IG permits the subcutaneous administration of immune globulin at dosages and frequencies that are similar to IVIG treatment. Thus, for example, in the methods and uses provided herein, IG, when administered subcutaneously in the presence of a soluble hyaluronidase, can be administered once monthly at prevailing IVIG doses for the particular indication. Further, because hyaluronidase acts to open flow channels in the skin it can speed infusion rates. Hence, methods of subcutaneously administering IG co-formulated and/or co-administered with hyaluronidase increases infusion rates, and thereby decreases time of delivery of IG therapy.

Defective antibody formation is the most common abnormality in the majority of primary immunodeficiency (PID) diseases; it is most often reflected by a decrease in serum immunoglobulins, which in turn leads to increased susceptibility to bacterial infections, especially of the sinopulmonary tract. Decreased immunoglobulin levels are found in individuals having antibody defects such as X-linked agammaglobulinemia, immunoglobulin heavy chain deletion, selective immunoglobulin G (IgG) subclass deficiency, common variable immunodeficiency, or X-linked hyperimmunoglobulin M syndrome. Decreased immunoglobulin levels also are found in individuals having combined immunodeficiencies due to defects in T and B cells, such as, but not limited to, severe combined immunodeficiency or Wiskott Aldrich Syndrome (IUIS Scientific Committee, 1999).

Individuals with these diseases require replacement therapy with immunoglobulin products to prevent or reduce the severity of infections. Initially, immunoglobulin replacement therapy was given by the intramuscular route, but starting in 1981 the overwhelming majority of patients have been treated by the intravenous (IV) route. Currently, the majority of immunoglobulin products in the United States are for IV administration. Immune globulin preparations have, however, been developed more recently for subcutaneous administration (Gardulf et al. (2006) *Curr. Opin. Allergy Clin. Immunol.*, 6: 434-42; Gardulf et al. (2006) *J Clin. Immunol.*, 26: 177-85; Ochs et al. (2006) *J Clin. Immunol.*, 26:265-73). At least one product, Vivaglobin®, is approved for subcutaneous administration.

All of the immunoglobulin preparations presently used are formulated at 16%, compared to IVIG preparations formulated at 5 to 12%. The higher concentration relative to IV preparations allows smaller infusion volumes; such preparations cannot be infused intravenously. Such subcutaneous methods of immunoglobulin replacement therapy is considered to be effective, safe and also highly appreciated by patients as it has a low risk of systemic adverse reactions and leads to higher trough serum IgG concentrations compared to monthly IV infusions (Gardulf et al. (1995) *J Adv. Nurs.*, 21: 917-27; Gardulf et al. (1993) *Clin. Exp. Immunol.*, 92: 200-4; Gardulf et al. (1991) *Lancet*, 338: 162-6).

The bioavailability of immunoglobulin administered subcutaneously generally is less than that infused intravenously. Immune globulin is immediately available in the blood, and slowly equilibrates to the extra-vascular compartment over 3 to 5 days (Schiff et al. (1986) *J. Clin. Immunol.*, 6:256-64).

Subcutaneously administered immunoglobulin is slowly absorbed from the subcutaneous space into the blood and at the same time equilibrates with the extra-vascular compartment; there is no high IV spike. The bioavailability has not been extensively studied, but in a recent trial of the ZLB-Behring preparation (i.e. Vivaglobin®), it was determined by measuring the area under the curve (AUC) that only 67% of the immunoglobulin was absorbed and thus, the recommended dose was 137% of the IV dose (Ochs et al. (2006) *J Clin. Immunol.*, 26:265-73). Despite the technical difficulties of comparing AUC for 2 different routes and frequency of administration, studies of intradermally administered immunoglobulin in rabbits suggests there is decreased bioavailability through the subcutaneous route. This may be due to the mode of absorption of large protein molecules, which cannot readily diffuse through the capillary walls and must be absorbed via the lymphatics (Supersaxo et al. (1990) *Pharm. Res.*, 7: 167-9).

In addition to problems with bioavailability associated with subcutaneous administration of IG, the primary disadvantage of SC administration is that only small volumes can be infused in each site, necessitating the use of multiple sites on a weekly or biweekly (every other week) basis. Generally, using a 16% solution, approximately 20 ml can be infused per site; and adult patient receiving 400 mg/kg body weight (BW) thus would require at least 3 sites per week or 12 sites per month. Even though weekly or biweekly administration has the added advantage of maintaining better trough levels than monthly IV infusions, the requirement of multiple needle insertions has been a deterrent for many patients.

The SC space is formed by a collagen network filled with a gel-like substance, hyaluronic acid. Hyaluronic acid is replaced with a half-life of approximately 5 h, and is largely responsible for the resistance to fluid flow through the tissues. Hyaluronidase temporarily digests the hyaluronic acid, thereby facilitating infusions into the subcutaneous space. The hyaluronic acid is restored within 24 hours, leaving no observable changes. Thus, due to the ability of hyaluronidase to open channels in the interstitial space through degradation of glycosaminoglycans, administration of a soluble hyaluronidase permits the diffusion of molecules, thereby improving the bioavailability, pharmacokinetics and/or pharmacodynamic characteristics of such co-formulated or co-administered molecules.

In some examples, the bioavailability of IG co-administered subcutaneously with hyaluronidase is 70%, 80%, 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% of the bioavailability of IVIG. Typically, the bioavailability is greater than 90%. Further, co-administration with a soluble hyaluronidase permits infusion of large volumes at a single subcutaneous site. For example, volumes up to 600 ml or greater of IG can be administered at a single site in a single sitting, for example 200 ml, 300 ml, 400 ml, 500 ml, 600 ml or more can be administered at a single site in a single administration. Thus, an IG preparation formulated at or between 5-12% can be co-administered subcutaneously with a soluble hyaluronidase at dosages equivalent to once monthly IVIG doses, for example, at or about 100 mg/kg, 200 mg/kg, 300 mg/kg, 400 mg/kg, 500 mg/kg, 600 mg/kg or more. The dosages can be administered as a single dose or can be divided into multiple doses given daily or weekly, such as once a week or every two, three or four weeks or combinations thereof. Hence, by administering IG subcutaneously in the presence of a soluble hyaluronidase, one or all of the considerations and problems associated with subcutaneous administration of IG are addressed. Thus, by virtue of the dispersion properties of hyaluronidase, subcutaneous

ously administering IG in the presence of a soluble hyaluronidase permits administration of IVIG doses at once monthly IVIG frequencies, while maintaining IVIG bio-availability.

The following sections describe exemplary immunoglobulins and soluble hyaluronidases in the combinations herein, methods of making them, and using them to treat IG-treatable diseases and conditions.

C. Immune Globulin

Provided herein are immune globulins (IG, also referred to as gamma globulin or IgG) that can be used for subcutaneous administration in combination with a soluble hyaluronidase. IG acts to strengthen the immune system by modulating the activity of complement, suppressing autoantibody production, saturating or blocking Fc receptors on macrophages and B lymphocytes, and suppressing the production of inflammatory mediators such as cytokines, chemokines and metalloproteinases.

IG is a protein fraction found in the plasma of higher animals and contains a large number of antibodies having varying specificities. Generally, IG contains serum immunoglobulins that can be any idiotype, such as IgG and various subclasses, IgA, IgM, IgD, IgE. The various immunoglobulins or subclasses can be present at various concentrations and specificities, which can differ between immune globulin preparations depending, for example, on the plasma donor's exposure to antigens (e.g., by way of vaccinations). Often, immunoglobulins are present in amounts normally found in the serum (see Table 2), although purification steps can be employed to alter ratios of particular immunoglobulin class or classes. Typically, IG preparations contain 90% or more IgG, such as 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99% or more IgG. The immunoglobulins can be polyclonal or monoclonal. Typically, preparations include a high percentage of monomeric IgG and a low IgA content.

TABLE 2

Serum Immunoglobulin		
Ig Class	Serum Level mg/ml (%)	Function
IgG	1200 (77)	Major Ig in Humans
IgA	200 (13)	Protects Mucosa
IgM	150 (9)	Major Ig for primary immune responses
IgD	2 (<1)	Regulates B cells
IgE	<1 (trace)	Major Ig in Allergic Response

Immune globulins can be isolated from human or animal blood or produced by other means, for example, by recombinant DNA technology or hybridoma technology. For example, immune globulin can be obtained from tissues, lymphocyte hybridoma cultures, blood plasma or serum, or recombinant cell cultures using any suitable fractionation procedure, e.g., alcohol precipitations or ion exchange separations. In general, IG is prepared from blood plasma by alcohol fractionation, such as was originally employed by Cohn and modified by Oncley (the Cohn-Oncley method, see e.g., Cohn et al. (1946) J. Am. Chem. Soc. 68: 459-475; Oncley et al. (1949) J. Am. Chem. Soc., 71: 541-550). The use of alcohol in the purification can inactivate potentially contaminating viruses. The Cohn-Oncley method can result in denatured and aggregated proteins, which can result in

high molecular weight forms that can act as antibody-antigen complexes having the capacity to freely fix complement.

To prevent such unwanted effects, modified Cohn-Oncley methods have been developed for the preparation and purification of IG. Various such procedures are known and can be adapted and modified for use of IG preparations herein. It is within the skill of the art to prepare IG preparations in view of the detailed methods known and available in the art. Typically, IG is manufactured using a primary cold ethanol fractionation and a secondary fractionation that can include any one or more of a chemical modification, incubation at pH 4.0 with or without pepsin, PEG precipitation, ion-exchange chromatography, enzymatic cleavage, solvent detergent treatment and diafiltration and ultrafiltration.

For example, the separation of IG aggregates by conventional techniques, such as ultra-centrifuging or exclusion chromatography, make it possible to obtain a product having a low anti-complementary activity. Other methods of IG preparation include, but are not limited to, a process for fractionating human plasma by means of ethyleneglycol polymers (Polson et al. (1964) Biochim. Biophys. Acta., 82: 463-475); incorporation of a polyethyleneglycol (PEG) as a purification agent starting from a material separated from the Cohn fractionation (fraction II or II+III, see e.g., U.S. Pat. Nos. 4,093,606 and 4,165,370); and other similar methods of purification processes with polyethyleneglycol (EP 0246579). In addition, processes have been described for obtaining IG that exhibits low anticomplement activity by treatment with enzymes such as pepsin, plasmin, immobilized trypsin, treatment at a moderate acidic pH, B-propionolactone treatment, fractionation methods which use polyethylene glycol as a precipitating agent, and other techniques described in U.S. Pat. Nos. 4,093,606, 4,126,605, 3,966,906, and 4,124,576. Other processes are based on chemically and partially modifying the IG molecules by treating them with reducing agents, alcoholization, alkylation and sulphonation (see e.g., U.S. Pat. No. 6,875,848). Ion exchange chromatography can be used to eliminate undesirable contaminants from the starting materials used to obtain the IG preparations (see e.g., U.S. Pat. No. 3,869,436, EP 91300790 and WO 94/29334). EP0440483 describes a combination of techniques useful for facilitating the intravenous preparation of the product based on ion exchange chromatography and diafiltration at a weak acid pH. Other methods also are described in the art and are known to one of skill in the art (see e.g., U.S. Pat. Nos. 5,177,194 and 6,875,848).

The IG preparations should be treated to remove viral load. There are two methods of decreasing viral load: viral inactivation and viral partitioning or removal. Exemplary of viral inactivation methods include, but are not limited to, cold ethanol fractionation, heating (pasteurization), solvent/detergent and acidic environment (low pH). For example, solvent/detergent process has been demonstrated to have virucidal action against VSV (vesicular stomatitis virus), Sindbis virus, HIV, HBV (hepatitis B virus, and HCV (hepatic C virus). Exemplary of viral partitioning or removal include, but are not limited to, cold ethanol fractionation, phase partitioning or PEG precipitation, affinity chromatography, ion exchange or gel exclusion chromatography and filtration.

The final purified formulation also must be prepared to avoid excessive aggregation and to stabilize the protein. Aggregation of IG preparation can be minimized by preparing lyophilized preparations for improved stability on storage, for reconstitution with a diluent before use. Another way of increasing the stability of IG preparations that is well

known in the art is the addition of protein-stabilizing excipients to the IG preparation. Known excipients include, but are not limited to, sugars, polyols, amino acids, amines, salts, polymers and surfactants. For example, U.S. Pat. No. 4,499,073 describes stabilization through the selection of pH and ionic strength; JP Patent 54020124 discloses the addition of an amino acid to an intramuscular preparation to render it storage stable and safe; JP 57031623 and JP 57128635 disclose the use of arginine and/or lysine with NaCl in 5 to 15% IG preparations to achieve long-term stability in an intramuscular preparation; JP 4346934 discloses the use of low conductivity (less than mmho), pH 5.3 to 5.7 and optionally one or more stabilizer including PEG, human serum albumin and mannitol; U.S. Pat. No. 4,439,421 teaches the addition of a hydrophilic macromolecule, a polyol and another protein to stabilize against anti-complement generation; U.S. Pat. No. 5,945,098 discloses the stabilization of isotonic solutions by the addition of amino acids (0.1 to 0.3 M glycine) and non-ionic detergents (poly-sorbate and PEG); U.S. Pat. No. 4,186,192 discloses various additives including amino acids; WO 2005/049078 discloses the stabilization with maltose and additionally glycine to 0.1 M; U.S. Pat. No. 4,362,661 discloses the use of neutral and basic amino acids to impart stability on a 5% IG preparation. Stable liquid formulations also can be prepared, which use carbohydrates in an aqueous medium having a very low ionic strength and a pH of 4.25 (U.S. Pat. No. 4,396,608) or a weakly acidic pH of 5-6 (EP 0278422).

Dimer formation of IG preparations also can be controlled. For example, U.S. Pat. No. 5,871,736 discloses IG preparations, particularly liquid preparations, containing one or more amphiphilic stabilizer in order to stabilize against dimer formation. The amphiphilic stabilizers include nicotinic acid and its derivatives, in particular nicotinamide, and mainly in conjunction with the above, amino acids having uncharged lipophilic side chains, e.g., phenylalanine, methionine, leucine, isoleucine, proline and valine.

The preparations can be prepared by methods known in the art, such as any described herein. Generally, however, the pH of the final preparation is adjusted to a relatively high but acidic pH, namely in the range of about pH 4.2 to 5.4, such as a pH range of 4.6 to 5.1. It has been found that this pH range is particularly useful for improving the storage of IG preparations.

Generally, final IG preparations have a protein concentration of about 5 to 25% w/v, generally 6 to 15% w/v, 8 to 12% w/v, and typically 10% w/v. The final protein concentration will depend on various factors, such as the administration route the patient to be treated, and the type of condition to be treated.

It is contemplated herein that any IG preparation used for IV administration can be used in the methods provided herein in combination with a soluble hyaluronidase for subcutaneous administration. Preparations include lyophilized and liquid formulations. Immune globulin (IVIG) is commercially available as Carimune® NF, Flebogamma® 5%, Gammagard® Liquid, Gammagard® S/D, Gamunex®, Iveegam® EN, Octagam® and Polygam® S/D. Typically, such preparations all use a method of cold alcohol fractionation, but use different methods to isolate and purify the immune globulin and different methods to reduce the potential virus contamination. Further, other preparations presently formulated for intramuscular or subcutaneous administration can be used in the combinations and methods provided herein.

Exemplary of an IG preparation is Immune Globulin Intravenous (Human), 10% (IVIG, 10%, marketed as Gam-

magard® liquid, Baxter Healthcare Corporation), which is a liquid unmodified IgG preparation with a distribution of IgG subclasses similar to that of normal plasma. The preparation contains intact fragment crystallizable (Fc) and Fab regions. The preparations contains 100 mg/ml proteins, with at least 98% being IgG; IgA is present at a concentration of 37 µg/ml, and IgM is present only in trace amounts. It has an osmolality that is similar to physiologic osmolality and contains no added sugars, sodium or preservatives. It is formulated with glycine for stabilization at a pH of 4.6 to 5.1. The manufacturing process employs a modified Cohn-Oncley cold alcohol fractionation procedure and further purifications by a continuous process through the use of weak cation exchange chromatography and weak anion exchange chromatography. The manufacturing process also includes 3 independent viral inactivation or removal steps: solvent/detergent (S/D) treatment, nanofiltration and incubation at a low pH and elevated temperature.

D. Hyaluronidase

Provided herein are combinations containing immunoglobulin and a soluble hyaluronidase, and methods of using such combinations for subcutaneous administration for the treatment of IG-mediated diseases and conditions. Hyaluronidases are a family of enzymes that degrade hyaluronic acid, which is an essential component of the extracellular matrix and a major constituent of the interstitial barrier. By catalyzing the hydrolysis of hyaluronic acid, a major constituent of the interstitial barrier, hyaluronidase lowers the viscosity of hyaluronic acid, thereby increasing tissue permeability. As such, hyaluronidases have been used, for example, as a spreading or dispersing agent in conjunction with other agents, drugs and proteins to enhance their dispersion and delivery. Exemplary of hyaluronidases in the combinations and methods provided herein are soluble hyaluronidases.

There are three general classes of hyaluronidases; mammalian hyaluronidase, bacterial hyaluronidase and hyaluronidase from leeches, other parasites and crustaceans. Mammalian-type hyaluronidases (EC 3.2.1.35) are endo- β -N-acetyl-hexosaminidases that hydrolyze the β 1 $\rightarrow$ 4 glycosidic bond of hyaluronan into various oligosaccharide lengths such as tetrasaccharides and hexasaccharides. They have both hydrolytic and transglycosidase activities, and can degrade hyaluronan and chondroitin sulfates (CS), generally C4-S and C6-S. Hyaluronidases of this type include, but are not limited to, hyaluronidases from cows (bovine) (SEQ ID NOS:10 and 11), mouse (SEQ ID NOS:17-19, 32), pig (SEQ ID NOS:20-21), rat (SEQ ID NOS:22-24, 31), rabbit (SEQ ID NO:25), sheep (ovine) (SEQ ID NOS:26 and 27), orangutan (SEQ ID NO:28), cynomolgus monkey (SEQ ID NO:29), guinea pig (SEQ ID NO: 30), and human hyaluronidases.

Mammalian hyaluronidases can be further subdivided into those that are neutral active, predominantly found in testes extracts, and acid active, predominantly found in organs such as the liver. Exemplary neutral active hyaluronidases include PH20, including but not limited to, PH20 derived from different species such as ovine (SEQ ID NO:27), bovine (SEQ ID NO:11) and human (SEQ ID NO:1). Human PH20 (also known as SPAM1 or sperm surface protein PH20), is generally locked to the plasma membrane via a glycosylphosphatidyl inositol (GPI) anchor. It is naturally involved in sperm-egg adhesion and aids penetration by sperm of the layer of cumulus cells by digesting hyaluronic acid. The PH20 mRNA transcript is

normally translated to generate a 509 amino acid precursor polypeptide (SEQ ID NO:1) containing a 35 amino acid signal sequence at the N-terminus (amino acid residue positions 1-35) and a 19 amino acid GPI anchor at the C-terminus (amino acid residue positions 491-509). The mature PH20 is, therefore, a 474 amino acid polypeptide set forth in SEQ ID NO:2). Bovine PH20 is a 553 amino acid precursor polypeptide (SEQ ID NO:11). Alignment of bovine PH20 with the human PH20 shows only weak homology, with multiple gaps existing from amino acid 470 through to the respective carboxy termini due to the absence of a GPI anchor in the bovine polypeptide (see e.g., Frost GI (2007) Expert Opin. Drug. Deliv. 4: 427-440). In fact, no clear GPI anchor is predicted in any other PH20 species besides humans. Thus, PH20 polypeptides produced from ovine and bovine exist as soluble forms. Though bovine PH20 exists very loosely attached to the plasma membrane, it is not anchored via a phospholipase sensitive anchor (Lalancette et al, Biol Reprod. 2001 August; 65(2):628-36.). This unique feature of bovine hyaluronidase has permitted the use of the soluble bovine testes hyaluronidase enzyme as an extract for clinical use (Wydase™, Hyalase™).

Besides human PH20 (also termed SPAM1), five hyaluronidase-like genes have been identified in the human genome, HYAL1, HYAL2, HYAL3, HYAL4 and HYALP1. HYALP1 is a pseudogene, and HYAL3 (SEQ ID NO:38) has not been shown to possess enzyme activity toward any known substrates. HYAL4 (precursor polypeptide set forth in SEQ ID NO:39) is a chondroitinase and exhibits little activity towards hyaluronan. HYAL(precursor polypeptide set forth in SEQ ID NO:36) is the prototypical acid-active enzyme and PH20 (precursor polypeptide set forth in SEQ ID NO:1) is the prototypical neutral-active enzyme. Acid-active hyaluronidases, such as HYAL1 and HYAL2 (precursor polypeptide set forth in SEQ ID NO:37) generally lack catalytic activity at neutral pH (i.e. pH 7). For example, HYAL1 has little catalytic activity in vitro over pH 4.5 (Frost et al. (1997) Anal. Biochemistry, 251:263-269). HYAL2 is an acid-active enzyme with a very low specific activity in vitro. The hyaluronidase-like enzymes can also be characterized by those which are generally locked to the plasma membrane via a glycosylphosphatidyl inositol anchor such as human HYAL2 and human PH20 (Danilko-vitch-Miagkova, et al. (2003) Proc Natl Acad Sci USA. 100(8):4580-5), and those which are generally soluble such as human HYAL1 (Frost et al, (1997) Biochem Biophys Res Commun. 236(1):10-5).

Glycosylation, including N- and O-linked glycosylation, of some hyaluronidases can be very important for their catalytic activity and stability. While altering the type of glycan modifying a glycoprotein can have dramatic effects on a protein's antigenicity, structural folding, solubility, and stability, most enzymes are not thought to require glycosylation for optimal enzyme activity. Such hyaluronidases are unique in this regard, in that removal of N-linked glycosylation can result in near complete inactivation of the hyaluronidase activity. For such hyaluronidases, the presence of N-linked glycans is critical for generating an active enzyme.

N-linked oligosaccharides fall into several major types (oligomannose, complex, hybrid, sulfated), all of which have (Man) 3-GlcNAc-GlcNAc-cores attached via the amide nitrogen of Asn residues that fall within-Asn-Xaa-Thr/Ser-sequences (where Xaa is not Pro). Glycosylation at an-Asn-Xaa-Cys-site has been reported for coagulation protein C. In some instances, the hyaluronidase can contain

both N-glycosidic and O-glycosidic linkages. For example, PH20 has O-linked oligosaccharides as well as N-linked oligosaccharides.

There are seven potential N-linked glycosylation sites at N82, N166, N235, N254, N368, N393, N490 of human PH20 exemplified in SEQ ID NO: 1. Disulfide bonds form between the cysteine residues C60 and C351 and between C224 and C238 to form the core hyaluronidase domain. However, additional cysteines are required in the carboxy terminus for neutral enzyme catalytic activity such that amino acids 36 to 464 of SEQ ID NO:1 contains the minimally active human PH20 hyaluronidase domain. Thus, N-linked glycosylation site N-490 is not required for proper hyaluronidase activity.

15 Soluble Hyaluronidase

Provided in the combinations and methods herein are soluble hyaluronidases. Soluble hyaluronidases include any that exist in soluble form, including, but not limited to, Hyall, bovine PH20 and ovine PH20, allelic variants thereof and other variants. Also included among soluble hyaluronidase are any hyaluronidase that has been modified to be soluble. For example, human PH20, which is normally membrane anchored via a GPI anchor, can be made soluble by truncation of and removal of all or a portion of the GPI anchor at the C-terminus. Soluble hyaluronidases also include neutral active and acid active hyaluronidases, however, neutral active hyaluronidases are contemplated for use herein for purposes of subcutaneous administration.

Thus, exemplary of a soluble hyaluronidase is PH20 from any species, such as any set forth in any of SEQ ID NOS: 1, 2, 11, 25, 27, 30 and 31, or truncated forms thereof lacking all or a portion of the C-terminal GPI anchor, so long as the hyaluronidase is soluble and retains hyaluronidase activity. Also included among soluble hyaluronidases are allelic variants or other variants of any of SEQ ID NOS: 1, 2, 11, 25, 27, 30 and 31, or truncated forms thereof. Allelic variants and other variants are known to one of skill in the art, and include polypeptides having 60%, 70%, 80%, 90%, 91%, 92%, 93%, 94%, 95% or more sequence identity to any of SEQ ID NOS: 1, 2, 11, 25, 27, 30 and 31, or truncated forms thereof.

Typically, for use in the methods herein, a soluble human PH20 is used. Although PH20 from other animals can be utilized, such preparations are potentially immunogenic, since they are animal proteins. For example, a significant proportion of patients demonstrate prior sensitization secondary to ingested foods, and since these are animal proteins, all patients have a risk of subsequent sensitization. Thus, non-human preparations may not be suitable for chronic use. If non-human preparations are desired, it is contemplated herein that such polypeptides can be prepared to have reduced immunogenicity. Such modifications are within the level of one of skill in the art. Hyaluronidases, including PH20, used in the methods herein can be recombinantly produced or can be purified or partially-purified from natural sources, such as, for example, from testes extracts.

50 Soluble Human PH20

Exemplary of a soluble hyaluronidase is soluble human PH20. Soluble forms of recombinant human PH20 have been produced and can be used in the methods described herein for co-administration or co-formulation with immunoglobulin for subcutaneous administration to treat IG-treatable diseases and conditions. The production of such soluble forms of PH20 is described in application Ser. Nos. 11/065,716 and 11/238,171, and in Examples 2-6, below. Soluble forms include, but are not limited to, any having

C-terminal truncations to generate polypeptides containing amino acid 1 to amino acid 347, 372, 394, 413, 430, 447, 467, 477, 478, 479, 480, 481, 482 and 483 of the sequence of amino acids set forth in SEQ ID NOS 1. When expressed in mammalian cells, the 35 amino acid N-terminal signal sequence is cleaved during processing, and the mature form of the protein is secreted. Thus, the mature soluble polypeptides contain amino acids 36 to 347, 372, 394, 413, 430, 447, 467, 477, 478, 479, 480, 481, 482 and 483 of SEQ ID NO:1. Deletion mutants ending at amino acid position 477 to 483 (corresponding to the precursor polypeptide set forth in SEQ ID NO:1) exhibit higher secreted hyaluronidase activity than the full length GPI-anchored form. Hence, exemplary of soluble hyaluronidases are those that are 442, 443, 444, 445, 446 or 447 amino acids in length, such as set forth in any of SEQ ID NOS:4-9, or allelic or species variants or other variants thereof. Generally soluble forms of PH20 are produced using protein expression systems that facilitate correct N-glycosylation to ensure the polypeptide retains activity, since glycosylation is important for the catalytic activity and stability of hyaluronidases. Such cells include, for example Chinese Hamster Ovary (CHO) cells (e.g. DG44 CHO cells).

Recombinant Soluble Human PH20 (rHuPH20)

Recombinant soluble forms of human PH20 (soluble rHuPH20) have been generated and can be produced and purified using the methods described herein. The generation of such soluble forms of rHuPH20 are described in U.S. patent application Ser. Nos. 11/065,716 and 11/238,171 (published as U.S. published patent application Nos. US20050260186 and US 20060104968), and in Examples 2-6, below. Exemplary of such polypeptides are those generated from a nucleic acid molecule encoding amino acids 1-482 set forth in SEQ ID NO:3. Post translational processing removes the 35 amino acid signal sequence, resulting in the secretion of a 447 amino acid soluble rHuPH20 (SEQ ID NO:4). Resulting purified rHuPH20 can be heterogeneous due to peptidases present in the culture medium upon production and purification. Typically, rHuPH20 is produced in cells that facilitate correct N-glycosylation to retain activity, such as CHO cells (e.g. DG44 CHO cells).

E. Methods of Producing Nucleic Acids Encoding a Soluble Hyaluronidase and Polypeptides thereof

Polypeptides of a soluble hyaluronidase set forth herein, can be obtained by methods well known in the art for protein purification and recombinant protein expression. Any method known to those of skill in the art for identification of nucleic acids that encode desired genes can be used. Any method available in the art can be used to obtain a full length (i.e., encompassing the entire coding region) cDNA or genomic DNA clone encoding a hyaluronidase, such as from a cell or tissue source. Modified or variant soluble hyaluronidases, can be engineered from a wildtype polypeptide, such as by site-directed mutagenesis.

Polypeptides can be cloned or isolated using any available methods known in the art for cloning and isolating nucleic acid molecules. Such methods include PCR amplification of nucleic acids and screening of libraries, including nucleic acid hybridization screening, antibody-based screening and activity-based screening.

Methods for amplification of nucleic acids can be used to isolate nucleic acid molecules encoding a desired polypeptide, including for example, polymerase chain reaction (PCR) methods. A nucleic acid containing material can be used as a starting material from which a desired polypeptide-

encoding nucleic acid molecule can be isolated. For example, DNA and mRNA preparations, cell extracts, tissue extracts, fluid samples (e.g. blood, serum, saliva), samples from healthy and/or diseased subjects can be used in amplification methods. Nucleic acid libraries also can be used as a source of starting material. Primers can be designed to amplify a desired polypeptide. For example, primers can be designed based on expressed sequences from which a desired polypeptide is generated. Primers can be designed based on back-translation of a polypeptide amino acid sequence. Nucleic acid molecules generated by amplification can be sequenced and confirmed to encode a desired polypeptide.

Additional nucleotide sequences can be joined to a polypeptide-encoding nucleic acid molecule, including linker sequences containing restriction endonuclease sites for the purpose of cloning the synthetic gene into a vector, for example, a protein expression vector or a vector designed for the amplification of the core protein coding DNA sequences. Furthermore, additional nucleotide sequences specifying functional DNA elements can be operatively linked to a polypeptide-encoding nucleic acid molecule. Examples of such sequences include, but are not limited to, promoter sequences designed to facilitate intracellular protein expression, and secretion sequences, for example heterologous signal sequences, designed to facilitate protein secretion. Such sequences are known to those of skill in the art. Additional nucleotide residues sequences such as sequences of bases specifying protein binding regions also can be linked to enzyme-encoding nucleic acid molecules. Such regions include, but are not limited to, sequences of residues that facilitate or encode proteins that facilitate uptake of an enzyme into specific target cells, or otherwise alter pharmacokinetics of a product of a synthetic gene. For example, enzymes can be linked to PEG moieties.

In addition, tags or other moieties can be added, for example, to aid in detection or affinity purification of the polypeptide. For example, additional nucleotide residues sequences such as sequences of bases specifying an epitope tag or other detectable marker also can be linked to enzyme-encoding nucleic acid molecules. Exemplary of such sequences include nucleic acid sequences encoding a His tag (e.g., 6×His, HHHHHH; SEQ ID NO:54) or Flag Tag (DYKDDDDK; SEQ ID NO:55).

The identified and isolated nucleic acids can then be inserted into an appropriate cloning vector. A large number of vector-host systems known in the art can be used. Possible vectors include, but are not limited to, plasmids or modified viruses, but the vector system must be compatible with the host cell used. Such vectors include, but are not limited to, bacteriophages such as lambda derivatives, or plasmids such as pCMV4, pBR322 or pUC plasmid derivatives or the Bluescript vector (Stratagene, La Jolla, Calif.). Other expression vectors include the HZ24 expression vector exemplified herein. The insertion into a cloning vector can, for example, be accomplished by ligating the DNA fragment into a cloning vector which has complementary cohesive termini. Insertion can be effected using TOPO cloning vectors (INVITROGEN, Carlsbad, Calif.). If the complementary restriction sites used to fragment the DNA are not present in the cloning vector, the ends of the DNA molecules can be enzymatically modified. Alternatively, any site desired can be produced by ligating nucleotide sequences (linkers) onto the DNA termini; these ligated linkers can contain specific chemically synthesized oligonucleotides encoding restriction endonuclease recognition sequences. In an alternative method, the cleaved vector and protein gene

can be modified by homopolymeric tailing. Recombinant molecules can be introduced into host cells via, for example, transformation, transfection, infection, electroporation and sonoporation, so that many copies of the gene sequence are generated.

In specific embodiments, transformation of host cells with recombinant DNA molecules that incorporate the isolated protein gene, cDNA, or synthesized DNA sequence enables generation of multiple copies of the gene. Thus, the gene can be obtained in large quantities by growing transformants, isolating the recombinant DNA molecules from the transformants and, when necessary, retrieving the inserted gene from the isolated recombinant DNA.

1. Vectors and Cells

For recombinant expression of one or more of the desired proteins, such as any described herein, the nucleic acid containing all or a portion of the nucleotide sequence encoding the protein can be inserted into an appropriate expression vector, i.e., a vector that contains the necessary elements for the transcription and translation of the inserted protein coding sequence. The necessary transcriptional and translational signals also can be supplied by the native promoter for enzyme genes, and/or their flanking regions.

Also provided are vectors that contain a nucleic acid encoding the enzyme. Cells containing the vectors also are provided. The cells include eukaryotic and prokaryotic cells, and the vectors are any suitable for use therein.

Prokaryotic and eukaryotic cells, including endothelial cells, containing the vectors are provided. Such cells include bacterial cells, yeast cells, fungal cells, Archea, plant cells, insect cells and animal cells. The cells are used to produce a protein thereof by growing the above-described cells under conditions whereby the encoded protein is expressed by the cell, and recovering the expressed protein. For purposes herein, for example, the enzyme can be secreted into the medium.

Provided are vectors that contain a sequence of nucleotides that encodes the soluble hyaluronidase polypeptide coupled to the native or heterologous signal sequence, as well as multiple copies thereof. The vectors can be selected for expression of the enzyme protein in the cell or such that the enzyme protein is expressed as a secreted protein.

A variety of host-vector systems can be used to express the protein coding sequence. These include but are not limited to mammalian cell systems infected with virus (e.g. vaccinia virus, adenovirus and other viruses); insect cell systems infected with virus (e.g. baculovirus); microorganisms such as yeast containing yeast vectors; or bacteria transformed with bacteriophage, DNA, plasmid DNA, or cosmid DNA. The expression elements of vectors vary in their strengths and specificities. Depending on the host-vector system used, any one of a number of suitable transcription and translation elements can be used.

Any methods known to those of skill in the art for the insertion of DNA fragments into a vector can be used to construct expression vectors containing a chimeric gene containing appropriate transcriptional/translational control signals and protein coding sequences. These methods can include in vitro recombinant DNA and synthetic techniques and in vivo recombinants (genetic recombination). Expression of nucleic acid sequences encoding protein, or domains, derivatives, fragments or homologs thereof, can be regulated by a second nucleic acid sequence so that the genes or fragments thereof are expressed in a host transformed with the recombinant DNA molecule(s). For example, expression of the proteins can be controlled by any promoter/enhancer known in the art. In a specific embodiment, the promoter is

not native to the genes for a desired protein. Promoters which can be used include but are not limited to the SV40 early promoter (Bemoist and Chambon, *Nature* 290:304-310 (1981)), the promoter contained in the 3' long terminal repeat of Rous sarcoma virus (Yamamoto et al. *Cell* 22:787-797 (1980)), the herpes thymidine kinase promoter (Wagner et al., *Proc. Natl. Acad. Sci. USA* 78:1441-1445 (1981)), the regulatory sequences of the metallothionein gene (Brinster et al., *Nature* 296:39-42 (1982)); prokaryotic expression vectors such as the β -lactamase promoter (Jay et al., (1981) *Proc. Natl. Acad. Sci. USA* 78:5543) or the tac promoter (DeBoer et al., *Proc. Natl. Acad. Sci. USA* 80:21-25 (1983)); see also "Useful Proteins from Recombinant Bacteria": in *Scientific American* 242:79-94 (1980)); plant expression vectors containing the nopaline synthetase promoter (Herrera-Estrella et al., *Nature* 303:209-213 (1984)) or the cauliflower mosaic virus 35S RNA promoter (Gardner et al., *Nucleic Acids Res.* 9:2871 (1981)), and the promoter of the photosynthetic enzyme ribulose biphosphate carboxylase (Herrera-Estrella et al., *Nature* 310:115-120 (1984)); promoter elements from yeast and other fungi such as the Gal4 promoter, the alcohol dehydrogenase promoter, the phosphoglycerol kinase promoter, the alkaline phosphatase promoter, and the following animal transcriptional control regions that exhibit tissue specificity and have been used in transgenic animals: elastase I gene control region which is active in pancreatic acinar cells (Swift et al., *Cell* 38:639-646 (1984); Ornitz et al., *Cold Spring Harbor Symp. Quant. Biol.* 50:399-409 (1986); MacDonald, *Hepatology* 7:425-515 (1987)); insulin gene control region which is active in pancreatic beta cells (Hanahan et al., *Nature* 315:115-122 (1985)), immunoglobulin gene control region which is active in lymphoid cells (Grosschedl et al., *Cell* 38:647-658 (1984); Adams et al., *Nature* 318:533-538 (1985); Alexander et al., *Mol. Cell Biol.* 7:1436-1444 (1987)), mouse mammary tumor virus control region which is active in testicular, breast, lymphoid and mast cells (Leder et al., *Cell* 45:485-495 (1986)), albumin gene control region which is active in liver (Pinckert et al., *Genes and Devel.* 1:268-276 (1987)), alpha-fetoprotein gene control region which is active in liver (Krumlauf et al., *Mol. Cell. Biol.* 5:1639-1648 (1985); Hammer et al., *Science* 235:53-58 (1987)), alpha-1 antitrypsin gene control region which is active in liver (Kelsey et al., *Genes and Devel.* 1:161-171 (1987)), beta globin gene control region which is active in myeloid cells (Magram et al., *Nature* 315:338-340 (1985); Kollias et al., *Cell* 46:89-94 (1986)), myelin basic protein gene control region which is active in oligodendrocyte cells of the brain (Readhead et al., *Cell* 48:703-712 (1987)), myosin light chain-2 gene control region which is active in skeletal muscle (Shani, *Nature* 314:283-286 (1985)), and gonadotrophic releasing hormone gene control region which is active in gonadotrophs of the hypothalamus (Mason et al., *Science* 234:1372-1378 (1986)).

In a specific embodiment, a vector is used that contains a promoter operably linked to nucleic acids encoding a desired protein, or a domain, fragment, derivative or homolog, thereof, one or more origins of replication, and optionally, one or more selectable markers (e.g., an antibiotic resistance gene). Exemplary plasmid vectors for transformation of *E. coli* cells, include, for example, the pQE expression vectors (available from Qiagen, Valencia, Calif.; see also literature published by Qiagen describing the system). pQE vectors have a phage T5 promoter (recognized by *E. coli* RNA polymerase) and a double lac operator repression module to provide tightly regulated, high-level expression of recombinant proteins in *E. coli*, a synthetic ribosomal binding site

(RBS II) for efficient translation, a 6× His tag coding sequence, t_0 and T1 transcriptional terminators, ColE1 origin of replication, and a beta-lactamase gene for conferring ampicillin resistance. The pQE vectors enable placement of a 6× His tag at either the N- or C-terminus of the recombinant protein. Such plasmids include pQE 32, pQE 30, and pQE 31 which provide multiple cloning sites for all three reading frames and provide for the expression of N-terminally 6× His-tagged proteins. Other exemplary plasmid vectors for transformation of *E. coli* cells, include, for example, the pET expression vectors (see, U.S. Pat. No. 4,952,496; available from NOVAGEN, Madison, Wis.; see, also literature published by Novagen describing the system).

Such plasmids include pET 11 a, which contains the T7lac promoter, T7 terminator, the inducible *E. coli* lac operator, and the lac repressor gene; pET 12a-c, which contains the T7 promoter, T7 terminator, and the *E. coli* ompT secretion signal; and pET 15b and pET19b (NOVAGEN, Madison, Wis.), which contain a His-Tag™ leader sequence for use in purification with a His column and a thrombin cleavage site that permits cleavage following purification over the column, the T7-lac promoter region and the T7 terminator.

Exemplary of a vector for mammalian cell expression is the HZ24 expression vector. The HZ24 expression vector was derived from the pCI vector backbone (Promega). It contains DNA encoding the Beta-lactamase resistance gene (AmpR), an F1 origin of replication, a Cytomegalovirus immediate-early enhancer/promoter region (CMV), and an SV40 late polyadenylation signal (SV40). The expression vector also has an internal ribosome entry site (IRES) from the ECMV virus (Clontech) and the mouse dihydrofolate reductase (DHFR) gene.

2. Expression

Soluble hyaluronidase polypeptides can be produced by any method known to those of skill in the art including in vivo and in vitro methods. Desired proteins can be expressed in any organism suitable to produce the required amounts and forms of the proteins, such as for example, needed for administration and treatment. Expression hosts include prokaryotic and eukaryotic organisms such as *E. coli*, yeast, plants, insect cells, mammalian cells, including human cell lines and transgenic animals. Expression hosts can differ in their protein production levels as well as the types of post-translational modifications that are present on the expressed proteins. The choice of expression host can be made based on these and other factors, such as regulatory and safety considerations, production costs and the need and methods for purification.

Many expression vectors are available and known to those of skill in the art and can be used for expression of proteins. The choice of expression vector will be influenced by the choice of host expression system. In general, expression vectors can include transcriptional promoters and optionally enhancers, translational signals, and transcriptional and translational termination signals. Expression vectors that are used for stable transformation typically have a selectable marker which allows selection and maintenance of the transformed cells. In some cases, an origin of replication can be used to amplify the copy number of the vector.

Soluble hyaluronidase polypeptides also can be utilized or expressed as protein fusions. For example, an enzyme fusion can be generated to add additional functionality to an enzyme. Examples of enzyme fusion proteins include, but are not limited to, fusions of a signal sequence, a tag such as for localization, e.g. a his₆ tag or a myc tag, or a tag for purification, for example, a GST fusion, and a sequence for directing protein secretion and/or membrane association.

a. Prokaryotic Cells

Prokaryotes, especially *E. coli*, provide a system for producing large amounts of proteins. Transformation of *E. coli* is simple and rapid technique well known to those of skill in the art. Expression vectors for *E. coli* can contain inducible promoters, such promoters are useful for inducing high levels of protein expression and for expressing proteins that exhibit some toxicity to the host cells. Examples of inducible promoters include the lac promoter, the trp promoter, the hybrid tac promoter, the T7 and SP6 RNA promoters and the temperature regulated APL promoter.

Proteins, such as any provided herein, can be expressed in the cytoplasmic environment of *E. coli*. The cytoplasm is a reducing environment and for some molecules, this can result in the formation of insoluble inclusion bodies. Reducing agents such as dithiothreitol and β -mercaptoethanol and denaturants, such as guanidine-HCl and urea can be used to resolubilize the proteins. An alternative approach is the expression of proteins in the periplasmic space of bacteria which provides an oxidizing environment and chaperonin-like and disulfide isomerases and can lead to the production of soluble protein. Typically, a leader sequence is fused to the protein to be expressed which directs the protein to the periplasm. The leader is then removed by signal peptidases inside the periplasm. Examples of periplasmic-targeting leader sequences include the pelB leader from the pectate lyase gene and the leader derived from the alkaline phosphatase gene. In some cases, periplasmic expression allows leakage of the expressed protein into the culture medium. The secretion of proteins allows quick and simple purification from the culture supernatant. Proteins that are not secreted can be obtained from the periplasm by osmotic lysis. Similar to cytoplasmic expression, in some cases proteins can become insoluble and denaturants and reducing agents can be used to facilitate solubilization and refolding. Temperature of induction and growth also can influence expression levels and solubility, typically temperatures between 25° C. and 37° C. are used. Typically, bacteria produce aglycosylated proteins. Thus, if proteins require glycosylation for function, glycosylation can be added in vitro after purification from host cells.

b. Yeast Cells

Yeasts such as *Saccharomyces cerevisiae*, *Schizosaccharomyces pombe*, *Yarrowia lipolytica*, *Kluyveromyces lactis* and *Pichia pastoris* are well known yeast expression hosts that can be used for production of proteins, such as any described herein. Yeast can be transformed with episomal replicating vectors or by stable chromosomal integration by homologous recombination. Typically, inducible promoters are used to regulate gene expression. Examples of such promoters include GAL1, GALT and GALS and metallothionein promoters, such as CUP1, AOX1 or other *Pichia* or other yeast promoter. Expression vectors often include a selectable marker such as LEU2, TRP1, HIS3 and URA3 for selection and maintenance of the transformed DNA. Proteins expressed in yeast are often soluble. Co-expression with chaperonins such as Bip and protein disulfide isomerase can improve expression levels and solubility. Additionally, proteins expressed in yeast can be directed for secretion using secretion signal peptide fusions such as the yeast mating type alpha-factor secretion signal from *Saccharomyces cerevisiae* and fusions with yeast cell surface proteins such as the Aga2p mating adhesion receptor or the *Arxula adenivorans* glucoamylase. A protease cleavage site such as for the Kex-2 protease, can be engineered to remove the fused sequences from the expressed polypep-

tides as they exit the secretion pathway. Yeast also is capable of glycosylation at Asn-X-Ser/Thr motifs.

c. Insect Cells

Insect cells, particularly using baculovirus expression, are useful for expressing polypeptides such as hyaluronidase polypeptides. Insect cells express high levels of protein and are capable of most of the post-translational modifications used by higher eukaryotes. Baculovirus have a restrictive host range which improves the safety and reduces regulatory concerns of eukaryotic expression. Typical expression vectors use a promoter for high level expression such as the polyhedrin promoter of baculovirus. Commonly used baculovirus systems include the baculoviruses such as *Autographa californica* nuclear polyhedrosis virus (AcNPV), and the *Bombyx mori* nuclear polyhedrosis virus (BmNPV) and an insect cell line such as Sf9 derived from *Spodoptera frugiperda*, *Pseudaletia unipuncta* (A7S) and *Danaus plexippus* (DpN1). For high-level expression, the nucleotide sequence of the molecule to be expressed is fused immediately downstream of the polyhedrin initiation codon of the virus. Mammalian secretion signals are accurately processed in insect cells and can be used to secrete the expressed protein into the culture medium. In addition, the cell lines *Pseudaletia unipuncta* (A7S) and *Danaus plexippus* (DpN1) produce proteins with glycosylation patterns similar to mammalian cell systems.

An alternative expression system in insect cells is the use of stably transformed cells. Cell lines such as the Schneider 2 (S2) and Kc cells (*Drosophila melanogaster*) and C7 cells (*Aedes albopictus*) can be used for expression. The *Drosophila* metallothionein promoter can be used to induce high levels of expression in the presence of heavy metal induction with cadmium or copper. Expression vectors are typically maintained by the use of selectable markers such as neomycin and hygromycin.

d. Mammalian Cells

Mammalian expression systems can be used to express proteins including soluble hyaluronidase polypeptides. Expression constructs can be transferred to mammalian cells by viral infection such as adenovirus or by direct DNA transfer such as liposomes, calcium phosphate, DEAE-dextran and by physical means such as electroporation and microinjection. Expression vectors for mammalian cells typically include an mRNA cap site, a TATA box, a translational initiation sequence (Kozak consensus sequence) and polyadenylation elements. IRES elements also can be added to permit bicistronic expression with another gene, such as a selectable marker. Such vectors often include transcriptional promoter-enhancers for high-level expression, for example the SV40 promoter-enhancer, the human cytomegalovirus (CMV) promoter and the long terminal repeat of Rous sarcoma virus (RSV). These promoter-enhancers are active in many cell types. Tissue and cell-type promoters and enhancer regions also can be used for expression. Exemplary promoter/enhancer regions include, but are not limited to, those from genes such as elastase I, insulin, immunoglobulin, mouse mammary tumor virus, albumin, alpha fetoprotein, alpha 1 antitrypsin, beta globin, myelin basic protein, myosin light chain 2, and gonadotropic releasing hormone gene control. Selectable markers can be used to select for and maintain cells with the expression construct. Examples of selectable marker genes include, but are not limited to, hygromycin B phosphotransferase, adenosine deaminase, xanthine-guanine phosphoribosyl transferase, aminoglycoside phosphotransferase, dihydrofolate reductase (DHFR) and thymidine kinase. For example, expression can be performed in the presence of methotrexate

to select for only those cells expressing the DHFR gene. Fusion with cell surface signaling molecules such as TCR- ζ and Fc ϵ RI- γ can direct expression of the proteins in an active state on the cell surface.

Many cell lines are available for mammalian expression including mouse, rat human, monkey, chicken and hamster cells. Exemplary cell lines include but are not limited to CHO, Balb/3T3, HeLa, MT2, mouse NSO (nonsecreting) and other myeloma cell lines, hybridoma and heterohybridoma cell lines, lymphocytes, fibroblasts, Sp2/0, COS, NIH3T3, HEK293, 293S, 2B8, and HKB cells. Cell lines also are available adapted to serum-free media which facilitates purification of secreted proteins from the cell culture media. Examples include CHO-S cells (Invitrogen, Carlsbad, Calif., cat #11619-012) and the serum free EBNA-1 cell line (Pham et al., (2003) *Biotechnol. Bioeng.* 84:332-42.). Cell lines also are available that are adapted to grow in special mediums optimized for maximal expression. For example, DG44 CHO cells are adapted to grow in suspension culture in a chemically defined, animal product-free medium.

e. Plants

Transgenic plant cells and plants can be used to express proteins such as any described herein. Expression constructs are typically transferred to plants using direct DNA transfer such as microprojectile bombardment and PEG-mediated transfer into protoplasts, and with agrobacterium-mediated transformation. Expression vectors can include promoter and enhancer sequences, transcriptional termination elements and translational control elements. Expression vectors and transformation techniques are usually divided between dicot hosts, such as *Arabidopsis* and tobacco, and monocot hosts, such as corn and rice. Examples of plant promoters used for expression include the cauliflower mosaic virus promoter, the nopaline synthase promoter, the ribose biphosphate carboxylase promoter and the ubiquitin and UBQ3 promoters. Selectable markers such as hygromycin, phosphomannose isomerase and neomycin phosphotransferase are often used to facilitate selection and maintenance of transformed cells. Transformed plant cells can be maintained in culture as cells, aggregates (callus tissue) or regenerated into whole plants. Transgenic plant cells also can include algae engineered to produce hyaluronidase polypeptides. Because plants have different glycosylation patterns than mammalian cells, this can influence the choice of protein produced in these hosts.

3. Purification Techniques

Method for purification of polypeptides, including soluble hyaluronidase polypeptides or other proteins, from host cells will depend on the chosen host cells and expression systems. For secreted molecules, proteins are generally purified from the culture media after removing the cells. For intracellular expression, cells can be lysed and the proteins purified from the extract. When transgenic organisms such as transgenic plants and animals are used for expression, tissues or organs can be used as starting material to make a lysed cell extract. Additionally, transgenic animal production can include the production of polypeptides in milk or eggs, which can be collected, and if necessary, the proteins can be extracted and further purified using standard methods in the art.

Proteins, such as soluble hyaluronidase polypeptides, can be purified using standard protein purification techniques known in the art including but not limited to, SDS-PAGE, size fraction and size exclusion chromatography, ammonium sulfate precipitation and ionic exchange chromatography, such as anion exchange. Affinity purification techniques also can be utilized to improve the efficiency and purity of the

preparations. For example, antibodies, receptors and other molecules that bind hyaluronidase enzymes can be used in affinity purification. Expression constructs also can be engineered to add an affinity tag to a protein such as a myc epitope, GST fusion or His₆ and affinity purified with myc antibody, glutathione resin and Ni-resin, respectively. Purity can be assessed by any method known in the art including gel electrophoresis and staining and spectrophotometric techniques.

F. Preparation, Formulation and Administration of Immune Globulins and Soluble Hyaluronidase Polypeptides

Pharmaceutical compositions of immune globulins and soluble hyaluronidases are provided herein for subcutaneous administration. Formulations of pharmaceutical compositions of soluble hyaluronidases, for example, PH20, are known in the art (see e.g. published U.S. Application Nos. US20040268425, US20050260186 and US20060104968). Soluble hyaluronidases are co-formulated or co-administered with pharmaceutical formulations of immune globulin to enhance the delivery of immune globulins to desired sites within the body by increasing the bioavailability of immune globulins. For example, co-administration or co-formulation of IG with a hyaluronidase can improve the extent and/or rate of absorption and thus bioavailability of an agent by causing more of it to reach the bloodstream and/or less of it being degraded after administration by more rapid permeation. Increased absorption and bioavailability can be achieved, for example, by accelerating interstitial flow and potentially connective transport following administration by applying hydrostatic pressure associated with the volume injection combined with a reduction in impedance to flow associated with degradation of hyaluronan. Thus, soluble hyaluronidases can be used to achieve elevated and/or more rapidly achieved concentrations of the immune globulin following subcutaneous administration compared to conventional methods of subcutaneous administration, to provide, for example, a more potent and/or more rapid response for a given dose. Alternatively, the soluble hyaluronidase can be used to allow a given response to be achieved with a lower dose of administered IG. The ability of a soluble hyaluronidase to enhance bulk fluid flow at and near a site of injection or infusion also can improve other aspects of associated pharmacologic delivery. For example, the increase in bulk fluid flow can help to allow the volume of fluid injected to be more readily dispersed from the site of injection (reducing potentially painful or other adverse consequences of injection). This is particularly important for subcutaneous infusions to permit higher doses to be administered. In addition to increased bioavailability, co-administration or co-formulation of IG with soluble hyaluronidase provides for a safer or more convenient route of administration compared to conventional intravenous routes of administration.

Thus, by virtue of the increased bioavailability, immune globulins can be administered subcutaneously at dosages and frequencies for which current intravenous (IVIG) preparations are prepared and administered. The advantages over current subcutaneous formulations of IG is that co-administered or co-formulated hyaluronidase/IG can result in more favorable dosing regimens, for example, less frequent dosing. By less frequent or lower dosing, side effects associated with toxicity can be reduced. Generally, the pharmacokinetic and/or pharmacodynamics of subcutaneous IG therapy is improved. In addition, subcutaneous administrations of IG also has advantages over current intravenous infusions. For example, subcutaneous infusion permits infusion by the patient or family as opposed to a skilled nurse; infusion can

be achieved at higher rates such that IG is infused in 1-3 hours compared to 5-10 hours for conventional IVIG therapies; there is no requirement for functional veins; there is no infusion related side effects such as thrombosis, headache, thrombophlebitis, and nausea and less probability of adverse events; and infusion can be performed at home or anywhere.

The compositions can be formulated in lyophilized or liquid form. Where the compositions are provided in lyophilized form they can be reconstituted just prior to use by an appropriate buffer, for example, a sterile saline solution. The compositions can be provided together or separately. For purposes herein, such compositions typically are provided separately. The soluble hyaluronidase and IG can be packaged as separate compositions for administration together, sequentially or intermittently. The combinations can be packaged as a kit.

1. Formulations

The compounds can be formulated into any suitable pharmaceutical preparations for subcutaneous administration such as solutions, suspensions, powders, or sustained release formulations. Typically, the compounds are formulated into pharmaceutical compositions using techniques and procedures well known in the art (see e.g., Ansel Introduction to Pharmaceutical Dosage Forms, Fourth Edition, 1985, 126). Pharmaceutically acceptable compositions are prepared in view of approvals for a regulatory agency or other agency prepared in accordance with generally recognized pharmacopeia for use in animals and in humans. The formulation should suit the mode of administration.

Pharmaceutical compositions can include carriers such as a diluent, adjuvant, excipient, or vehicle with which a hyaluronidase or IG is administered. Examples of suitable pharmaceutical carriers are described in "Remington's Pharmaceutical Sciences" by E. W. Martin. Such compositions will contain a therapeutically effective amount of the compound, generally in purified form or partially purified form, together with a suitable amount of carrier so as to provide the form for proper administration to the patient. Such pharmaceutical carriers can be sterile liquids, such as water and oils, including those of petroleum, animal, vegetable or synthetic origin, such as peanut oil, soybean oil, mineral oil, and sesame oil. Water is a typical carrier when the pharmaceutical composition is administered intravenously. Saline solutions and aqueous dextrose and glycerol solutions also can be employed as liquid carriers, particularly for injectable solutions. Compositions can contain along with an active ingredient: a diluent such as lactose, sucrose, dicalcium phosphate, or carboxymethylcellulose; a lubricant, such as magnesium stearate, calcium stearate and talc; and a binder such as starch, natural gums, such as gum acaciagelatin, glucose, molasses, polyvinylpyrrolidone, celluloses and derivatives thereof, povidone, crospovidones and other such binders known to those of skill in the art. Suitable pharmaceutical excipients include starch, glucose, lactose, sucrose, gelatin, malt, rice, flour, chalk, silica gel, sodium stearate, glycerol monostearate, talc, sodium chloride, dried skim milk, glycerol, propylene, glycol, water, and ethanol. A composition, if desired, also can contain minor amounts of wetting or emulsifying agents, or pH buffering agents, for example, acetate, sodium citrate, cyclodextrine derivatives, sorbitan monolaurate, triethanolamine sodium acetate, triethanolamine oleate, and other such agents.

Pharmaceutically therapeutically active compounds and derivatives thereof are typically formulated and administered in unit dosage forms or multiple dosage forms. Each unit dose contains a predetermined quantity of therapeutically active compound sufficient to produce the desired

therapeutic effect, in association with the required pharmaceutical carrier, vehicle or diluent. Examples of unit dose forms include ampoules and syringes and individually packaged tablets or capsules. Unit dose forms can be administered in fractions or multiples thereof. A multiple dose form is a plurality of identical unit dosage forms packaged in a single container to be administered in segregated unit dose form. Examples of multiple dose forms include vials, bottles of tablets or capsules or bottles of pints or gallons. Hence, multiple dose form is a multiple of unit doses that are not segregated in packaging. Generally, dosage forms or compositions, containing active ingredient in the range of 0.005% to 100% with the balance made up from non-toxic carrier can be prepared.

Compositions provided herein typically are formulated for administration by subcutaneous route, although other routes of administration are contemplated, such as any route known to those of skill in the art including intramuscular, intravenous, intradermal, intralesional, intraperitoneal injection, epidural, nasal, oral, vaginal, rectal, topical, local, otic, inhalational, buccal (e.g., sublingual), and transdermal administration or any route. Formulations suited for such routes are known to one of skill in the art. Administration can be local, topical or systemic depending upon the locus of treatment. Local administration to an area in need of treatment can be achieved by, for example, but not limited to, local infusion during surgery, topical application, e.g., in conjunction with a wound dressing after surgery, by injection, by means of a catheter, by means of a suppository, or by means of an implant. Compositions also can be administered with other biologically active agents, either sequentially, intermittently or in the same composition. Administration also can include controlled release systems including controlled release formulations and device controlled release, such as by means of a pump.

The most suitable route in any given case depends on a variety of factors, such as the nature of the disease, the progress of the disease, the severity of the disease the particular composition which is used. For purposes herein, it is desired that hyaluronidases are administered so that they reach the interstitium of skin or tissues, thereby degrading the interstitial space for subsequent delivery of immunoglobulin. Thus, direct administration under the skin, such as by subcutaneous administration methods, is contemplated. Thus, in one example, local administration can be achieved by injection, such as from a syringe or other article of manufacture containing a injection device such as a needle. In another example, local administration can be achieved by infusion, which can be facilitated by the use of a pump or other similar device. Other modes of administration also are contemplated. Pharmaceutical composition can be formulated in dosage forms appropriate for each route of administration.

Subcutaneous administration, generally characterized by injection or infusion, is contemplated herein. Injectables can be prepared in conventional forms, either as liquid solutions or suspensions, solid forms suitable for solution or suspension in liquid prior to injection, or as emulsions. Suitable excipients are, for example, water, saline, dextrose, glycerol or ethanol. The pharmaceutical compositions may contain other minor amounts of non-toxic auxiliary substances such as wetting or emulsifying agents, pH buffering agents, stabilizers, solubility enhancers, and other such agents, such as for example, sodium acetate, sorbitan monolaurate, triethanolamine oleate and cyclodextrins. Implantation of a slow-release or sustained-release system, such that a constant level of dosage is maintained (see, e. g., U.S. Pat. No.

3,710,795) is also contemplated herein. The percentage of active compound contained in such compositions is highly dependent on the specific nature thereof, as well as the activity of the compound and the needs of the subject.

Injectables are designed for local and systemic administration. For purposes herein, local administration is desired for direct administration to the affected interstitium. Preparations for parenteral administration include sterile solutions ready for injection, sterile dry soluble products, such as lyophilized powders, ready to be combined with a solvent just prior to use, including hypodermic tablets, sterile suspensions ready for injection, sterile dry insoluble products ready to be combined with a vehicle just prior to use and sterile emulsions. The solutions may be either aqueous or nonaqueous. If administered intravenously, suitable carriers include physiological saline or phosphate buffered saline (PBS), and solutions containing thickening and solubilizing agents, such as glucose, polyethylene glycol, and polypropylene glycol and mixtures thereof.

Pharmaceutically acceptable carriers used in parenteral preparations include aqueous vehicles, nonaqueous vehicles, antimicrobial agents, isotonic agents, buffers, antioxidants, local anesthetics, suspending and dispersing agents, emulsifying agents, sequestering or chelating agents and other pharmaceutically acceptable substances. Examples of aqueous vehicles include Sodium Chloride Injection, Ringers Injection, Isotonic Dextrose Injection, Sterile Water Injection, Dextrose and Lactated Ringers Injection. Nonaqueous parenteral vehicles include fixed oils of vegetable origin, cottonseed oil, corn oil, sesame oil and peanut oil. Antimicrobial agents in bacteriostatic or fungistatic concentrations can be added to parenteral preparations packaged in multiple-dose containers, which include phenols or cresols, mercurials, benzyl alcohol, chlorobutanol, methyl and propyl p-hydroxybenzoic acid esters, thimerosal, benzalkonium chloride and benzethonium chloride. Isotonic agents include sodium chloride and dextrose. Buffers include phosphate and citrate. Antioxidants include sodium bisulfate. Local anesthetics include procaine hydrochloride. Suspending and dispersing agents include sodium carboxymethylcellulose, hydroxypropyl methylcellulose and polyvinylpyrrolidone. Emulsifying agents include Polysorbate 80 (TWEENS 80). A sequestering or chelating agent of metal ions include EDTA. Pharmaceutical carriers also include ethyl alcohol, polyethylene glycol and propylene glycol for water miscible vehicles and sodium hydroxide, hydrochloric acid, citric acid or lactic acid for pH adjustment.

The concentration of the pharmaceutically active compound is adjusted so that an injection provides an effective amount to produce the desired pharmacological effect. The exact dose depends on the age, weight and condition of the patient or animal as is known in the art. The unit-dose parenteral preparations are packaged in an ampoule, a vial or a syringe with a needle. The volume of liquid solution or reconstituted powder preparation, containing the pharmaceutically active compound, is a function of the disease to be treated and the particular article of manufacture chosen for package. All preparations for parenteral administration must be sterile, as is known and practiced in the art.

In one example, pharmaceutical preparation can be in liquid form, for example, solutions, syrups or suspensions. If provided in liquid form, the pharmaceutical preparations can be provided as a concentrated preparation to be diluted to a therapeutically effective concentration before use. Such liquid preparations can be prepared by conventional means with pharmaceutically acceptable additives such as suspending agents (e.g., sorbitol syrup, cellulose derivatives or

hydrogenated edible fats); emulsifying agents (e.g., lecithin or acacia); non-aqueous vehicles (e.g., almond oil, oily esters, or fractionated vegetable oils); and preservatives (e.g., methyl or propyl-p-hydroxybenzoates or sorbic acid). In another example, pharmaceutical preparations can be presented in lyophilized form for reconstitution with water or other suitable vehicle before use.

Administration methods can be employed to decrease the exposure of selected compounds to degradative processes, such as proteolytic degradation and immunological intervention via antigenic and immunogenic responses. Examples of such methods include local administration at the site of treatment. Pegylation of therapeutics has been reported to increase resistance to proteolysis, increase plasma half-life, and decrease antigenicity and immunogenicity. Examples of pegylation methodologies are known in the art (see for example, Lu and Felix, *Int. J. Peptide Protein Res.*, 43: 127-138, 1994; Lu and Felix, *Peptide Res.*, 6: 142-6, 1993; Felix et al., *Int. J. Peptide Res.*, 46: 253-64, 1995; Benhar et al., *J. Biol. Chem.*, 269: 13398-404, 1994; Brumeanu et al., *J. Immunol.*, 154: 3088-95, 1995; see also, Caliceti et al. (2003) *Adv. Drug Deliv. Rev.* 55(10):1261-77 and Molineux (2003) *Pharmacotherapy* 23 (8 Pt 2):3S-8S). Pegylation also can be used in the delivery of nucleic acid molecules in vivo. For example, pegylation of adenovirus can increase stability and gene transfer (see, e.g., Cheng et al. (2003) *Pharm. Res.* 20(9): 1444-51).

Lyophilized Powders

Of interest herein are lyophilized powders, which can be reconstituted for administration as solutions, emulsions and other mixtures. They may also be reconstituted and formulated as solids or gels.

The sterile, lyophilized powder is prepared by dissolving an active compound in a buffer solution. The buffer solution may contain an excipient which improves the stability or other pharmacological component of the powder or reconstituted solution, prepared from the powder. Subsequent sterile filtration of the solution followed by lyophilization under standard conditions known to those of skill in the art provides the desired formulation. Briefly, the lyophilized powder is prepared by dissolving an excipient, such as dextrose, sorbitol, fructose, corn syrup, xylitol, glycerin, glucose, sucrose or other suitable agent, in a suitable buffer, such as citrate, sodium or potassium phosphate or other such buffer known to those of skill in the art. Then, a selected enzyme is added to the resulting mixture, and stirred until it dissolves. The resulting mixture is sterile filtered or treated to remove particulates and to insure sterility, and apportioned into vials for lyophilization. Each vial will contain a single dosage or multiple dosages of the compound. The lyophilized powder can be stored under appropriate conditions, such as at about 4° C. to room temperature. Reconstitution of this lyophilized powder with a buffer solution provides a formulation for use in parenteral administration.

2. Dosage and Administration

The soluble hyaluronidase provided herein can be formulated as pharmaceutical compositions, typically for single dosage administration, in combination with IG. The selected soluble hyaluronidase is included in an amount sufficient to exert a therapeutically useful effect of the IG in the absence of undesirable side effects on the patient treated. The therapeutically effective concentration can be determined empirically by testing the polypeptides in known in vitro and in vivo systems such as by using the assays provided herein or known in the art (see e.g., Taliani et al. (1996) *Anal. Biochem.*, 240: 60-67; Filocamo et al. (1997) *J. Virology*, 71: 1417-1427; Sudo et al. (1996) *Antiviral Res.* 32: 9-18;

Buffard et al. (1995) *Virology*, 209:52-59; Bianchi et al. (1996) *Anal. Biochem.*, 237: 239-244; Hamatake et al. (1996) *Intervirology* 39:249-258; Steinkuhler et al. (1998) *Biochem.*, 37:8899-8905; D'Souza et al. (1995) *J. Gen. Virol.*, 76:1729-1736; Takeshita et al. (1997) *Anal. Biochem.*, 247:242-246; see also e.g., Shimizu et al. (1994) *J. Virol.* 68:8406-8408; Mizutani et al. (1996) *J. Virol.* 70:7219-7223; Mizutani et al. (1996) *Biochem. Biophys. Res. Commun.*, 227:822-826; Lu et al. (1996) *Proc. Natl. Acad. Sci. (USA)*, 93:1412-1417; Hahm et al., (1996) *Virology*, 226:318-326; Ito et al. (1996) *J. Gen. Virol.*, 77:1043-1054; Mizutani et al. (1995) *Biochem. Biophys. Res. Commun.*, 212:906-911; Cho et al. (1997) *J. Virol. Meth.* 65:201-207 and then extrapolated therefrom for dosages for humans.

Typically, a therapeutically effective dose is at or about 500 Units to 100,000 Units of a soluble hyaluronidase. For example, soluble hyaluronidase can be administered subcutaneously at or about 500 Units, 1000 Units, 2000 Units, 5000 Units, 10,000 Units, 30,000 Units, 40,000 Units, 50,000 Units, 60,000 Units, 70,000 Units, 80,000 Units, 90,000 Units, 100,000 Units or more. In some examples, dosages can be provided as a ratio IG administered. For example, hyaluronidase can be administered at 10 U/gram to 500 U/g or more of IG, for example, at or about 10 U/g, 20 U/g, 30 U/g, 40 U/g, 50 U/g, 60 U/g, 70 U/g, 80 U/g, 90 U/g, 100 U/g, 150 U/g, 200 U/g, 300 U/g, 400 U/g, 500 U/g or more. Typically, volumes of injections or infusions of hyaluronidase contemplated herein are from at or about 0.5 ml, 1 ml, 2 ml, 3 ml, 4 ml, 5 ml, 6 ml, 7 ml, 8 ml, 9 ml, 10 ml, 15 ml, 20 ml, 30 ml, 40 ml, 50 ml or more. The hyaluronidase can be provided as a stock solution at or about 50 U/ml, 100 U/ml, 150 U/ml, 200 U/ml, 400 U/ml or 500 U/ml or can be provided in a more concentrated form, for example at or about 1000 U/ml, 1500 Units/ml, 2000 U/ml, 4000 U/ml or 5000 U/ml for use directly or for dilution to the effective concentration prior to use. The soluble hyaluronidase can be provided as a liquid or lyophilized formulation. Lyophilized formulations are ideal for storage of large Units doses of soluble hyaluronidase.

The immune globulin preparations provided herein can be formulated as pharmaceutical compositions for single or multiple dosage use. Generally, the IG preparations are formulated in pharmaceutical compositions to achieve dosage regimes (doses and frequencies) for which current intravenous (IVIG) preparations are prepared and administered for particular IG-treatable diseases or conditions. One of skill in the art is familiar with dosage regimes for IVIG administration of particular diseases or conditions. For example, Section H below provides exemplary dosage regimes (doses and frequencies) of IG for particular diseases and conditions. Other dosage regimes are well known to those of skill in the art. In some examples, the dosage frequency can be daily over an interval of time given over consecutive or alternate days, for example, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10 or more days. In other examples, the dosage regime is weekly, for example, once every week, every two weeks, every three weeks, every four weeks, every five weeks, every six weeks or more. Typically, immune globulin preparations are formulated for single dose administration in an amount sufficient to provide a once monthly dose, but can be provided in lesser amounts for multiple dosage administrations. For example, once monthly doses of IG preparations can be administered daily, weekly, biweekly or once a month. Dosage regimes can be continued for months or years. The IG preparations can be provided in lyophilized or liquid form as discussed elsewhere herein.

The immune globulin is provided in a therapeutically effective dose. Therapeutically effective concentration can be determined empirically by testing the compounds in known in vitro and in vivo systems, such as the assays provided herein. The concentration of a selected immune globulin in the composition depends on absorption, inactivation and excretion rates of the complex, the physico-chemical characteristics of the complex, the dosage schedule, and amount administered as well as other factors known to those of skill in the art. For example, it is understood that the precise dosage and duration of treatment is a function of the tissue being treated and may be determined empirically using known testing protocols or by extrapolation from in vivo or in vitro test data. It is to be noted that concentrations and dosage values may also vary with the age of the individual treated. It is to be further understood that for any particular subject, specific dosage regimens should be adjusted over time according to the individual need and the professional judgment of the person administering or supervising the administration of the formulations, and that the concentration ranges set forth herein are exemplary only and are not intended to limit the scope thereof. The amount of a selected immune globulin preparation to be administered for the treatment of a disease or condition, for example an IG-treatable disease or condition, can be determined by standard clinical techniques. In addition, in vitro assays and animal models can be employed to help identify optimal dosage ranges.

Hence, the precise dosage, which can be determined empirically, can depend on the particular immune globulin preparation, the regime and dosing schedule with the soluble hyaluronidase, the route of administration, the type of disease to be treated and the seriousness of the disease. Generally, the IG preparations have a protein concentration that is or is about 5 to 15% w/v, 6 to 15% w/v, or 8 to 12% w/v of IG composition, such as, for example, 10% w/v. For example, IG is provided in an amount that permits subcutaneous administration of a dose equivalent to a once monthly IV dose for the particular indication being treated. The particular once monthly IV dose is a function of the disease to be treated, and thus can vary. Exemplary dosages ranges for subcutaneous administration of IG are from at or about 1 gram (g), 5 g, 10 g, 20 g, 30 g, 40 g, 50 g, 60 g, 70 g, 80 g, 90 g, 100 g or 200 g. The particular dosage and formulation thereof depends upon the indication and individual. For example, dosages can be administered at 50 mg/kg body weight (BW), 100 mg/kg BW, 200 mg/kg BW, 300 mg/kg BW, 400 mg/kg BW, 500 mg/kg BW, 600 mg/kg BW, or more. If necessary dosage can be empirically determined. To achieve such dosages, volumes of IG preparations administered subcutaneously can be at or about 50 ml, 100 ml, 200 ml, 300 ml, 400 ml, 500 ml, 600 ml, 700 ml or more. For example, a 10% liquid IG formulation (100 mg/ml) for indications described herein can be administered in a volume of 50 ml to 700 ml to achieve a dosage of 0.5 g to 70 g of IG.

Where large volumes are administered, administration is typically by infusion. Subjects can be dosed at rates of infusion at or about 0.5 ml/kg/BW/h, 1 ml/kg/BW/h, 2 ml/kg/BW/h, 3 ml/kg/BW/h, 4 ml/kg/BW/h, or 5 ml/kg/BW/h. The infusion rate can be empirically determined, and typically is a function of the tolerability of the subject. If an adverse reaction occurs during the infusion, the rate of infusion can be slowed to the rate immediately below that at which the adverse event occurred. If the adverse event resolves in response to the reduction in rate, the infusion rate can be slowly increased at the discretion of the physician.

Subcutaneous IG infusion can be facilitated by gravity, pump infusion or injection of a full 20-30 gram dose. Generally, for infusions intravenous infusion pumps can be employed. IG can be infused at rates at or about 5 ml/h, 10 ml/h, 30 ml/h, 60 ml/h, 120 ml/h, 240 ml/h or 300 ml/h. Infusion rates can be increased during the course of treatment so long as the infusion is tolerated by the patient. Generally, time of administration of infusion is at or about 0.5 h, 1 h, 1.5 h, 2 h, 2.5 h, 3 h, 4 h or more. Due to the high rate of infusion achieved by subcutaneous administration of IG coformulated and/or co-administered with hyaluronidase, the time of infusion is significantly less than for conventional IVIG therapies. Where infusion time exceeds the desired limit, a second infusion site can be started at the physician and subject's discretion. The second site typically is started at least 10 cm from the initial site.

Techniques for infusion are known to one of skill in the art, and are within the skill of a treating physician. Generally, the appropriate dose of IG can be pooled into a standard IV bag. For example, a non-vented infusion set can be used that has a Y-port near its terminus. A 24-gauge subcutaneous infusion needle can be inserted at a site of the subject's preferences, but the abdomen and secondarily the thighs are recommended because of the volume of solution to be infused. The hyaluronidase and IG can be provided in the same Y port apparatus. Other articles of manufacture also can be used herein for purposes of infusion by gravity or a pump, and include, but are not limited to tubes, bottles, syringes or other containers.

The soluble hyaluronidase can be administered subsequently, intermittently or simultaneously from the IG preparation. Generally, the hyaluronidase is administered prior to administration of the IG preparation to permit the hyaluronidase to degrade the hyaluronic acid in the interstitial space. For example, the soluble hyaluronidase can be administered 1 minute, 2 minute, 3 minute, 4 minute, 5 minute, 6 minute, 7 minutes, 8 minutes, 9 minutes, 10 minutes, 20 minutes or 30 minutes prior to administration of the IG preparation. In some examples, the hyaluronidase is administered together with the immune globulin preparation. As will be appreciated by those of skill in the art, the desired proximity of co-administration depends in significant part on the effective half lives of the agents in the particular tissue setting, and the particular disease being treated, and can be readily optimized by testing the effects of administering the agents at varying times in suitable models, such as in suitable animal models. In some situations, the optimal timing of administration of the hyaluronidase will exceed 60 minutes.

Generally, prior to infusion of IG, a soluble hyaluronidase is injected at a rate of at or about 0.2 ml/min, 0.5 ml/min, 1 ml/min, 2 ml/min, 5 ml/min, 10 ml/min or more. For example, the soluble hyaluronidase can be injected through the same Y-port used for subsequent infusion of IG. As noted above, the volume of soluble hyaluronidase administered is a function of the dosage required, but can be varied depending on the concentration of a soluble hyaluronidase stock formulation available. For example, it is contemplated herein that soluble hyaluronidase is not administered in volumes greater than about 50 ml, and typically is administered in a volume of 5-30 ml. A syringe pump can be used for the higher volumes, at the discretion of the physician.

In the event that an infusion is not tolerated (e.g., it causes moderate to severe local reactions), a second infusion site can be started so that the subject receives the full dosage.

An IG preparation can be administered at once, or can be divided into a number of smaller doses to be administered at intervals of time. Selected IG preparations can be adminis-

tered in one or more doses over the course of a treatment time for example over several hours, days, weeks, or months. In some cases, continuous administration is useful. It is understood that the precise dosage and course of administration depends on the indication and patients tolerability.

Also, it is understood that the precise dosage and duration of treatment is a function of the disease being treated and can be determined empirically using known testing protocols or by extrapolation from in vivo or in vitro test data. It is to be noted that concentrations and dosage values also can vary with the severity of the condition to be alleviated. It is to be further understood that for any particular subject, specific dosage regimens should be adjusted over time according to the individual need and the professional judgment of the person administering or supervising the administration of the compositions, and that the concentration ranges set forth herein are exemplary only and are not intended to limit the scope or use of compositions and combinations containing them. The compositions can be administered hourly, daily, weekly, monthly, yearly or once. Generally, dosage regimens are chosen to limit toxicity. It should be noted that the attending physician would know how to and when to terminate, interrupt or adjust therapy to lower dosage due to toxicity, or bone marrow, liver or kidney or other tissue dysfunctions. Conversely, the attending physician would also know how to and when to adjust treatment to higher levels if the clinical response is not adequate (precluding toxic side effects).

G. Methods of Assessing Activity, Bioavailability and Pharmacokinetics

Assays can be used to assess the in vitro and in vivo activities of immune globulin alone or in combination with a soluble hyaluronidase. Included among such assays are those that assess the pharmacokinetic properties of subcutaneously-administered immune globulin, including bioavailability, and tolerability. The biological activity of both immune globulin and hyaluronidase also can be assessed using assays well known in the art. Such assays can be used, for example, to determine appropriate dosages of immune globulin and hyaluronidase, and the frequency of dosing, for treatment.

1. Pharmacokinetics and Tolerability

Pharmacokinetic and tolerability studies, such as those described in Examples 1, below, can be performed using animal models or can be performed during clinical studies with patients. Animal models include, but are not limited to, mice, rats, rabbits, dogs, guinea pigs and non-human primate models, such as cynomolgus monkeys or rhesus macaques. In some instances, pharmacokinetic and tolerability studies are performed using healthy animals. In other examples, the studies are performed using animal models of a disease for which therapy with immune globulin is considered, such as animal models of any of the diseases and conditions described below.

The pharmacokinetics of subcutaneously administered immune globulin can be assessed by measuring such parameters as the maximum (peak) plasma immune globulin concentration (C_{max}), the peak time (i.e. when maximum plasma immune globulin concentration occurs; T_{max}), the minimum plasma immune globulin concentration (i.e. the minimum plasma concentration between doses of immune globulin; C_{min}), the elimination half-life ($T_{1/2}$) and area under the curve (i.e. the area under the curve generated by plotting time versus plasma immune globulin concentration; AUC), following administration. The absolute bioavailability of subcutaneously administered immune globulin is

determined by comparing the area under the curve of immune globulin following subcutaneous delivery (AUC_{sc}) with the AUC of immune globulin following intravenous delivery (AUC_{iv}). Absolute bioavailability (F), can be calculated using the formula: $F = ([AUC]_{sc} \times \text{dose}_{sc}) / ([AUC]_{iv} \times \text{dose}_{iv})$. The concentration of immune globulin in the plasma following subcutaneous administration can be measured using any method known in the art suitable for assessing concentrations of immune globulin in samples of blood. Exemplary methods include, but are not limited to, ELISA and nephelometry.

A range of doses and different dosing frequency of dosing can be administered in the pharmacokinetic studies to assess the effect of increasing or decreasing concentrations of immune globulin and/or hyaluronidase in the dose. Pharmacokinetic properties of subcutaneously administered immune globulin, such as bioavailability, also can be assessed with or without co-administration of hyaluronidase. For example, dogs, such as beagles, can be administered immune globulin subcutaneously in combination with hyaluronidase, or alone. Intravenous doses of immune globulin also are given to another group of beagles. Blood samples can then be taken at various time points and the amount of immune globulin in the plasma determine, such as by nephelometry. The AUC can then be measured and the bioavailability of subcutaneously administered immune globulin administered with or without hyaluronidase can be determined. Such studies can be performed to assess the effect of co-administration with hyaluronidase on pharmacokinetic properties, such as bioavailability, of subcutaneously administered immune globulin.

Studies to assess safety and tolerability also are known in the art and can be used herein. Following subcutaneous administration of immune globulin, with or without co-administration of hyaluronidase, the development of any adverse reactions can be monitored. Adverse reactions can include, but are not limited to, injection site reactions, such as edema or swelling, headache, fever, fatigue, chills, flushing, dizziness, urticaria, wheezing or chest tightness, nausea, vomiting, rigors, back pain, chest pain, muscle cramps, seizures or convulsions, changes in blood pressure and anaphylactic or severe hypersensitivity responses. Typically, a range of doses and different dosing frequencies are administered in the safety and tolerability studies to assess the effect of increasing or decreasing concentrations of immune globulin and/or hyaluronidase in the dose.

2. Biological Activity

a. Immune Globulin

The ability of immune globulin to act as a therapeutic agent can be assessed in vitro or in vivo. For example, in vitro assays can be performed to assess the ability of immune globulin to neutralize viral or bacterial infectivity (Hiemstra et al., (1994) J Lab Clin Med 123:241-6). Other in vitro assays can be utilized to assess other biological activities of immune globulin. For example, the ability of immune globulin preparations to interact with and modulate complement activation products, bind idiotype antibody, bind Fc receptors on macrophages, and suppress various inflammatory mediators including cytokines, chemokines, and metalloproteinases, can be assessed using any method known in the art, including, but not limited to, ELISA, Western blot, Northern blot, and flow cytometry to assess marker expression. For example, the effect of immune globulin on the expression of chemokine receptors on peripheral blood mononuclear cells can be assessed using flow cytometry (Trebst et al., (2006) Eur J Neurology). In another example, the effect of immune globulin on metalloproteinase expression in macrophages

can be assessed using Northern blot analysis (Shapiro et al., (2002) *Cancer* 95:2032-2037).

In vivo studies using animal models also can be performed to assess the therapeutic activity of immune globulin. Immune globulin can be administered to animal models infected with one or more microorganisms and the effect on progression of infection can be assessed, such as by measuring the number of microorganisms or measuring weight as a marker of morbidity. The therapeutic effect of immune globulin also can be assessed using animal models of the diseases and conditions for which therapy using immune globulin is considered. Such animal models are known in the art, and include, but are not limited to, small animal models for X-linked agammaglobulinemia (XLA), SCID, Wiskott-Aldrich syndrome, Kawasaki disease, Guillain-Barré syndrome, ITP, polymyositis, Lambert-Eaton myasthenic syndrome, Myasthenia gravis and Moersch-Woltmann syndrome (Czitrom et al (1985) *J Immunol* 134:2276-2280, Ellmeier et al., (2000) *J Exp Med.* 192: 1611-1624, Ohno (2006) *Drug Discovery Today: Disease Models* 3:83-89, Oyaizu et al (1988) *J Exp Med* 2017-2022, Hansen et al., (2002) *Blood* 100:2087-2093, Strongwater et al., (1984) *Arthritis Rheum.* 27:433-42, Kim et al. (1998) *Annals NY Acad Sci* 841:670-676, Christadoss et al. (2000) 94:75-87, Sommer et al., (2005)

Lancet 365:1406-1411, U.S. Pat. No. 7,309,810)

b. Hyaluronidase

Hyaluronidase activity can be assessed using methods well known in the art. In one example, activity is measured using a microturbidity assay. This is based on the formation of an insoluble precipitate when hyaluronic acid binds with serum albumin. The activity is measured by incubating hyaluronidase with sodium hyaluronate (hyaluronic acid) for a set period of time (e.g. 10 minutes) and then precipitating the undigested sodium hyaluronate with the addition of acidified serum albumin. The turbidity of the resulting sample is measured at 640 nm after an additional development period. The decrease in turbidity resulting from hyaluronidase activity on the sodium hyaluronate substrate is a measure of hyaluronidase enzymatic activity. In another example, hyaluronidase activity is measured using a microtiter assay in which residual biotinylated hyaluronic acid is measured following incubation with hyaluronidase (see e.g. Frost and Stern (1997) *Anal. Biochem.* 251:263-269, U.S. Patent Publication No. 20050260186). The free carboxyl groups on the glucuronic acid residues of hyaluronic acid are biotinylated, and the biotinylated hyaluronic acid substrate is covalently couple to a microtiter plate. Following incubation with hyaluronidase, the residual biotinylated hyaluronic acid substrate is detected using an avidin-peroxidase reaction, and compared to that obtained following reaction with hyaluronidase standards of known activity. Other assays to measure hyaluronidase activity also are known in the art and can be used in the methods herein (see e.g. Delpech et al., (1995) *Anal. Biochem.* 229:35-41; Takahashi et al., (2003) *Anal. Biochem.* 322:257-263).

The ability of hyaluronidase to act as a spreading or diffusing agent also can be assessed. For example, trypan blue dye can be injected subcutaneously with or without hyaluronidase into the lateral skin on each side of nude mice. The dye area is then measured, such as with a microcaliper, to determine the ability of hyaluronidase to act as a spreading agent (U.S. Patent No. 20060104968).

H. Therapeutic Uses

The methods described herein can be used for treatment of any condition for which immune globulin is employed.

Immune globulin (IG) can be administered subcutaneously, in combination with hyaluronidase, to treat any condition that is amenable to treatment with immune globulin. This section provides exemplary therapeutic uses of IG. The therapeutic uses described below are exemplary and do not limit the applications of the methods described herein. Therapeutic uses include, but are not limited to, immunoglobulin replacement therapy and immunomodulation therapy for various immunological, hematological, neurological, inflammatory, dermatological and/or infectious diseases and conditions. In some examples, immune globulin is administered to augment the immune response in healthy patients, such as following possible exposure to infectious disease (e.g. accidental needle stick injury). It is within the skill of a treating physician to identify such diseases or conditions.

Immune globulin can be co-administered with hyaluronidase subcutaneously, in combination with other agents used in the treatment of these diseases and conditions. For example, other agents that can be administered include, but are not limited to, antibiotics, chemotherapeutics, steroidal anti-inflammatories, non-steroidal anti-inflammatories, and other immunomodulatory agents such as cytokines, chemokines and growth factors.

If necessary, a particular dosage and duration and treatment protocol can be empirically determined or extrapolated. For example, exemplary doses of intravenously administered immune globulin can be used as a starting point to determine appropriate dosages. Dosage levels can be determined based on a variety of factors, such as body weight of the individual, general health, age, the activity of the specific compound employed, sex, diet, time of administration, rate of excretion, drug combination, the severity and course of the disease, and the patient's disposition to the disease and the judgment of the treating physician. Generally, dosages of immune globulin are from or about 100 mg per kg body weight (i.e. 100 mg/kg BW) to 2 g/kg BW, and dosages of hyaluronidase are from or about 10 U/gram to 500 U/g or more of immune globulin, for example, at or about 10 U/g, 20 U/g, 30 U/g, 40 U/g, 50 U/g, 60 U/g, 70 U/g, 80 U/g, 90 U/g, 100 U/g, 150 U/g, 200 U/g, 300 U/g, 400 U/g, 500 U/g or more. It is understood that the amount to administer will be a function of the indication treated, and possibly side effects that will be tolerated. Dosages can be empirically determined using recognized models for each disorder.

Upon improvement of a patient's condition, a maintenance dose of immune globulin can be administered subcutaneously in combination with hyaluronidase, if necessary, and the dosage, the dosage form, or frequency of administration, or a combination thereof can be modified. In some cases, a subject can require intermittent treatment on a long-term basis upon any recurrence of disease symptoms.

1. Primary Immune Deficiency with Antibody Deficiency

Immune globulin can be used to treat primary immune deficiency with antibody deficiency. Primary immune deficiency encompasses many disorders that are characterized by a deficiency of one or more proteins of the immune system. Typically, primary immune deficiencies are inherited disorders, and many are manifest by failure of protective antibody production. Thus, immune globulin can be administered as immunoglobulin replacement therapy to patients presenting with such diseases. Exemplary of primary immune deficiencies include, but are not limited to, common variable immunodeficiency (CVID), congenital agammaglobulinemia, Wiskott-Aldrich syndrome, severe combined immunodeficiency (SCID), primary hypogammaglobuline-

mia, primary immunodeficiency diseases with antibody deficiency, X-linked agammaglobulinaemia (XLA), hypogammaglobulinaemia of infancy, and paraneoplastic cerebellar degeneration with no antibodies. Immune globulin can be administered subcutaneously, in combination with hyaluronidase, to patients with primary immune deficiency with antibody deficiency at doses similar to the doses used for intravenous administration of immune globulin. Exemplary doses include, for example, between 100 mg/kg BW and 800 mg/kg BW immune globulin, at four week intervals. The dose can be increased or decreased, as can the frequency of the doses, depending on the clinical response.

2. Acquired Hypogammaglobulinemia Secondary to Hematological Malignancies

Patients with acquired hypogammaglobulinemia secondary to hematological malignancies, such as Chronic Lymphocytic Leukemia (CLL), multiple myeloma (MM), non-Hodgkin's lymphoma (NHL) & other relevant malignancies and post-hematopoietic stem cell transplantation, are susceptible to bacterial infections due to. Hypogammaglobulinemia is caused by a lack of B-lymphocytes and a resulting low level of antibodies in the blood, and can occur in patients with CLL, MM, NHL and as a result of both leukemia-related immune dysfunction and therapy-related immunosuppression. The deficiency in humoral immunity is largely responsible for the increased risk of infection-related morbidity and mortality in these patients, especially by encapsulated microorganisms. For example, *Streptococcus pneumoniae*, *Haemophilus influenzae*, and *Staphylococcus aureus*, as well as *Legionella* and *Nocardia* spp. are frequent bacterial pathogens that cause pneumonia in patients with CLL. Opportunistic infections such as *Pneumocystis carinii*, fungi, viruses, and mycobacteria also have been observed. The number and severity of infections in these patients can be significantly reduced by administration of immune globulin (Griffiths et al., (1989) *Blood* 73:366-368, Chapel et al. (1994) *Lancet* 343:1059-1063). Such patients, therefore, can be administered immune globulin subcutaneously in combination with hyaluronidase using the methods described herein to prevent recurrent infections. Exemplary dosages include those used for intravenous administration of immune globulin to patients with acquired hypogammaglobulinemia secondary to hematological malignancies. For example, about 400 mg/kg BW immune globulin, in combination with hyaluronidase, can be administered subcutaneously every 3 to 4 weeks. In a further example, an additional dose of 400 mg/kg BW can be administered in the first month of therapy where the patient's serum IgG is less than 4 g/L. The amount of immune globulin administered, and the frequency of the doses, can be increased or decreased as appropriate.

3. Kawasaki's Disease

Kawasaki disease is an acute, febrile, multi-system disease of children and young infants often involving the coronary arteries. It also is known as lymph node syndrome, mucocutaneous node disease, infantile polyarteritis and Kawasaki syndrome, and is a poorly understood self-limited vasculitis that affects many organs, including the skin and mucous membranes, lymph nodes, blood vessel walls, and the heart. Coronary artery aneurysms can occur from the second week of illness during the convalescent stage. Although the cause of the condition is unknown, there is evidence that the characteristic vasculitis results from an immune reaction characterized by T-cell and macrophage activation to an unknown antigen, secretion of cytokines, polyclonal B-cell hyperactivity, and the formation of autoantibodies to endothelial cells and smooth muscle cells. In genetically susceptible individuals, one or more uncharac-

terized common infectious agents, possibly with superantigen activity, may trigger the disease. Immune globulin administered early in Kawasaki disease can prevent coronary artery pathology. Subcutaneous administration of immune globulin in combination with hyaluronidase to patients with ongoing inflammation associated with Kawasaki disease can ameliorate symptoms. Exemplary dosages include those used for intravenous administration of immune globulin to patients with Kawasaki disease. For example, a patient with Kawasaki disease can be administered about 1-2 g per kg patient body weight of immune globulin. This can be administered, for example, in four doses of 400 mg/kg BW for four consecutive days. In another example, 1 g/kg BW immune globulin is administered as a single dose over a 10 hour period. The amount of immune globulin administered can be increased or decreased as appropriate.

4. Chronic Inflammatory Demyelinating Polyneuropathy

Chronic inflammatory demyelinating polyneuropathy (CIDP) is a neurological disorder characterized by progressive weakness and impaired sensory function in the legs and arms. The disorder, which is sometimes called chronic relapsing polyneuropathy, is caused by damage to the myelin sheath of the peripheral nerves. Although it can occur at any age and in both genders, CIDP is more common in young adults and in men more so than women. It often presents with symptoms that include tingling or numbness (beginning in the toes and fingers), weakness of the arms and legs, loss of deep tendon reflexes (areflexia), fatigue, and abnormal sensations. CIDP is closely related to Guillain-Barre syndrome and it is considered the chronic counterpart of that acute disease. There is no specific diagnostic test but characteristic clinical and laboratory findings help distinguish this disorder from other immune mediated neuropathic syndromes. Studies indicate that treatment with immune globulin reduces symptoms (van Schaik et al., (2002) *Lancet Neurol.* 1:497-498). Thus, immune globulin can be co-administered with hyaluronidase subcutaneously to patients presenting with CIDP using the methods described herein. Exemplary dosages include those used for intravenous administration of immune globulin to patients with CIDP. In one example, a patient with CIDP is administered about 2 g/kg BW of immune globulin subcutaneously, in combination with hyaluronidase. This can be administered, for example, in five doses of 400 mg/kg BW for five consecutive days. The amount of immune globulin administered can be increased or decreased as appropriate.

5. Guillain-Barré Syndrome

Guillain-Barré syndrome is a neurologic autoimmune disorder involving inflammatory demyelination of peripheral nerves. The first symptoms include varying degrees of weakness or tingling sensations in the legs, which can spread to the arms and upper body. These symptoms can increase in intensity until the muscles cannot be used at all and the patient is almost totally paralyzed, resulting in a life-threatening condition. Although recovery is generally good or complete in the majority of patients, persistent disability has been reported to occur in about 20% and death in 4 to 15% of patients. Guillain-Barré syndrome can occur a few days or weeks after symptoms of a respiratory or gastrointestinal viral infection. In some instances, surgery or vaccinations can trigger the syndrome. The disorder can develop over the course of hours or days, or it may take up to 3 to 4 weeks. A nerve conduction velocity (NCV) test can give a doctor clues to aid the diagnosis. In some instances, a spinal tap can be used in diagnosis as the cerebrospinal fluid in Guillain-Barré syndrome patients typically contains more protein than normal subjects.

Although there is no known cure for Guillain-Barre syndrome, treatment with immune globulin can lessen the severity of the illness and accelerate recovery. Immune globulin can be administered subcutaneously to patients in combination with hyaluronidase at an appropriate dose, such as, for example, a dose similar to the dose use to administer immune globulin intravenously to patients with Guillain-Barre syndrome. For example, a patient with Guillain-Barre syndrome can administered about 2 g/kg BW of immune globulin, in combination with hyaluronidase, subcutaneously. This can be administered, for example, in five doses of 400 mg/kg BW for five consecutive days. The amount of immune globulin administered can be increased or decrease depending on, for example, the severity of the disease and the clinical response to therapy, which can be readily evaluated by one of skill in the art.

6. Idiopathic Thrombocytopenic Purpura

Idiopathic thrombocytopenic purpura (ITP), also known as primary immune thrombocytopenic purpura and autoimmune thrombocytopenic purpura, is a reduction in platelet count (thrombocytopenia) resulting from shortened platelet survival due to anti-platelet antibodies. When platelet counts are very low (e.g. $<30 \times 10^9/L$), bleeding into the skin (purpura) and mucous membranes can occur. Bone marrow platelet production (megakaryopoiesis) in patients with ITP is morphologically normal. In some instances, there is additional impairment of platelet function related to antibody binding to glycoproteins on the platelet surface. ITP can present as chronic and acute forms. Approximately 80% of adults with ITP have the chronic form of disease. The highest incidence of chronic ITP is in women aged 15-50 years, although some reports suggest increasing incidence with age. ITP is relatively common in patients with HIV. While ITP can be found at any stage of the infection, its prevalence increases as HIV disease advances.

Studies have demonstrated that immune globulin can be used to treat patients with ITP (Godeau et al. (1993) Blood 82(5):1415-21, Godeau et al. (1999) Br J Haematol 1999; 107(4):716-9). Immune globulin can be administered subcutaneously to patients in combination with hyaluronidase at a dose similar to the dose use to administer immune globulin intravenously, to treat patients with ITP. For example, a patient with ITP can administered about 1 to 2 g/kg of immune globulin, in combination with hyaluronidase, subcutaneously. This can be administered over several days, or can be administered in one dose. In some examples, five doses of 400 mg/kg BW immune globulin on consecutive days is administered. In another example, 1 g/kg BW is administered for 1-2 consecutive days, depending on platelet count and clinical response. The amount of immune globulin administered, and the frequency of the doses, can be increased or decrease depending on, for example, platelet count and the clinical response to therapy, which can be readily evaluated by one of skill in the art.

7. Inflammatory Myopathies: Polymyositis, Dermatomyositis and Inclusion Body Myositis

Inflammatory myopathies are a group of muscle diseases involving the inflammation and degeneration of skeletal muscle tissues. These disorders are acquired and all present with significant muscle weakness and the presence of an inflammatory response within the muscle. Dermatomyositis (DM) is the most easily recognized of the inflammatory myopathies due to its distinctive rash, which occurs as a patchy, dusky, reddish or lilac rash on the eyelids, cheeks, and bridge of the nose, and on the back or upper chest, elbows, knees and knuckles. In some patients, calcified nodules or hardened bumps develop under the skin. The rash

often precedes muscle weakness, which typically develops over a period of weeks but may develop over months or even days. Dermatomyositis can occur at any age from childhood to adulthood and is more common in females than males. Approximately one third of DM patients report difficulty swallowing. Muscle pain and tenderness generally occurs in less than 25% of adults with DM, but more than 50% of children with DM complain of muscle pain and tenderness.

Polymyositis (PM) does not have the characteristic rash of dermatomyositis, and the onset of muscle weakness usually progresses slower than DM. Many PM patients present have difficulty in swallowing. In some instances, the patients also have difficulty breathing due to muscle failure. As many as one third of PM patients have muscle pain. PM. The disease affects more women than men, and rarely affects people under the age of 20, although cases of childhood and infant polymyositis have been reported.

Inclusion body myositis (IBM) is very similar to polymyositis. Onset of muscle weakness in IBM is usually very gradual, taking place over months or years. It is different from PM in that both proximal and distal muscles are affected, while generally only the proximal muscles are affected in PM. Typical findings include weakness of the wrist flexors and finger flexors. Atrophy of the forearms is characteristic of the disease, and atrophy of the quadriceps muscle is common with varying degrees of weakness in other muscles. Approximately half of the patients afflicted with IBM have difficulty swallowing. Symptoms of IBM usually begin after age 50, although no age group is excluded. IBM occurs more frequently in men than women. About one in ten cases of IBM may be hereditary.

Studies indicate that administration of immune globulin can benefit patients with these inflammatory myopathies. Immune globulin can improve muscle strength, reduce inflammation and reduce disease progression and severity (Dalakas et al. (1993) N Engl J Med 329(27):1993-2000; Dalakas et al. (2001) Neurology 56(3):323-7, Dalakas (2004) Pharmacol Ther 102(3):177-93, Walter et al. (2000) J Neurol 247(1):22-8). Immune globulin can be administered subcutaneously to patients with DM, PM or IBM in combination with hyaluronidase at a dose similar to the dose used to administer immune globulin intravenously. For example, 2 g/kg BW of immune globulin can be administered, typically over several days, such as, for example, five doses of 400 mg/kg BW on consecutive days.

8. Lambert-Eaton Myasthenic Syndrome

Lambert-Eaton myasthenic syndrome (LEMS) is a rare autoimmune disorder of neuromuscular transmission first recognized clinically in association with lung cancer and subsequently in cases in which no neoplasm was detected. Patients with LEMS have a presynaptic neuromuscular junction defect. The disease is characterized clinically by proximal muscle weakness with augmentation of strength after exercise, mild oculomotor signs, depressed deep tendon reflexes and autonomic dysfunction (dry mouth, constipation, erectile failure). Subcutaneous administration of immune globulin in combination with hyaluronidase to patients with LEMS can ameliorate symptoms. Exemplary dosages include those used for intravenous administration of immune globulin to patients with LEMS. For example, a patient with LEMS can be administered 2 g per kg patient body weight of immune globulin over several doses. For example, five doses of 400 mg/kg BW immune globulin can be administered on five consecutive days. The amount of immune globulin administered can be increased or decreased as appropriate.

9. Multifocal Motor Neuropathy

Multifocal motor neuropathy (MMN) with conduction block is an acquired immune-mediated demyelinating neuropathy with slowly progressive weakness, fasciculations, and cramping, without significant sensory involvement. The duration of disease prior to diagnosis ranges from several months to more than 15 years. The precise cause of MMN is unknown. Histopathologic and electrodiagnostic studies demonstrate the presence of both demyelinating and axonal injury. Motor nerves are primarily affected, although mild demyelination has been demonstrated in sensory nerves as well. Efficacy of immunomodulatory and immunosuppressive treatment further supports the immune nature of MMN. Titers of anti-GM1 antibodies are elevated in over half of the patients with MMN. Although the role of the anti-GM1 antibodies in the disease is unknown, their presence can be used as a diagnostic marker for MMN.

Subcutaneous administration of immune globulin in combination with hyaluronidase to patients with MMN can to ameliorate symptoms. Exemplary dosages include those used for intravenous administration of immune globulin to patients with MMN. For example, a patient with MMN can be administered 2 g per kg patient body weight of immune globulin over several doses. For example, five doses of 400 mg/kg BW immune globulin can be administered on five consecutive days. In another example, 1 g/kg BW can be administered on 2 consecutive days. Some patients can be given maintenance therapy, which can include, for example, doses of 400 mg/kg BW to 2 g/kg BW, given every 2-6 weeks. The amount of immune globulin administered can be increased or decreased as appropriate, taking into account the patients response.

10. Myasthenia Gravis

Myasthenia gravis (MG) is a chronic autoimmune neuromuscular disease characterized by varying degrees of weakness of the skeletal muscles of the body. It is associated with the presence of antibodies to acetylcholine receptors (AChR) or to muscle-specific tyrosine kinase (MuSK) at the neuromuscular junction, although some patients are antibody negative. The clinical features of MG include fluctuating weakness and fatigability of voluntary muscles, particularly levator palpebrae, extraocular, bulbar, limb and respiratory muscles. Patients usually present with unilateral or bilateral drooping of eyelid (ptosis), double vision (diplopia), difficulty in swallowing (dysphagia) and proximal muscle weakness. Weakness of respiratory muscles can result in respiratory failure in severe cases or in acute severe exacerbations (myasthenic crisis). Myasthenia gravis occurs in all ethnic groups and both genders. It most commonly affects young adult women under 40 and older men over 60, but it can occur at any age. In some instances, thymectomy is performed to reduce symptoms.

Immune globulin can be used, for example, as maintenance therapy for patients with moderate to severe MG, typically when other treatments have been ineffective caused severe side effects, and also can be administered prior to thymectomy or during an acute exacerbation of the disease (myasthenic crisis). Immune globulin can be administered subcutaneously, in combination with hyaluronidase, to patients with Myasthenia gravis using the methods described herein. Exemplary dosages include those used for intravenous administration of immune globulin to patients with MG. For example, a patient with MG can be administered doses of 400 mg/kg BW to 2 g/kg BW every 4-6 weeks for maintenance therapy. Prior to thymectomy or during myasthenic crisis, 1-2 g/kg BW can be administered over several doses, such as, for example, five doses of 400 mg/kg BW on

five consecutive days. In another example, 1 g/kg BW can be administered on 2 consecutive days.

11. Moersch-Woltmann Syndrome

Moersch-Woltmann syndrome, also known as stiff person syndrome or stiffman syndrome, is a rare neurological disorder with features of an autoimmune disease. Patients present with symptoms related to muscular rigidity and superimposed episodic spasms. Muscle rigidity spreads to involve axial muscles, primarily abdominal and thoracolumbar, as well as proximal limb muscles. Typically, co-contraction of truncal agonist and antagonistic muscles leads to a board-like appearance with hyperlordosis. Less frequently, respiratory muscle involvement leads to breathing difficulty and facial muscle involvement to a mask-like face. Treatment with immune globulin can effect decreased stiffness and heightened sensitivity scores in patients with Moersch-Woltmann syndrome (Dalakas et al. (2001) *N Engl J Med* 345(26):1870-6). Immune globulin can be administered subcutaneously, in combination with hyaluronidase, to patients with Moersch-Woltmann syndrome using the methods described herein. Exemplary dosages include those used for intravenous administration of immune globulin to patients with Moersch-Woltmann syndrome. For example, immune globulin can be administered at doses of 400 mg/kg BW on five consecutive days. Some patients can be given maintenance therapy, which can include, for example, 1-2 g/kg BW immune globulin every 4-6 weeks. The amount of immune globulin administered can be increased or decreased as appropriate.

12. Alzheimer's Disease

Treatment for Alzheimer's disease includes treatment with intravenous inuminoglobulin (see e.g. Dodel et al. (2004) *J Neural Neurosurg. Psychiatry*, 75:1472-4; Solomon et al. (2007) *Curr. Opin. Mol. Ther.*, 9:79-85; Relkin et al. (2008) *Neurobiol Aging*). IG contains antibodies that bind to beta amyloid (AB), which is a central component of the plaque in the brains of Alzheimer's patients. Thus, IG can help to promote the clearance of AB from the brain and block AB's toxic effects on brain cells. Hence, immune globulin can be administered subcutaneously, in combination with hyaluronidase, to patients with Alzheimer's disease using the methods described herein. Subjects to be treated include patients having mild, moderate or advanced Alzheimer's disease. It is within the level of skill of a treating physician to identify patients for treatment. Immune globulin in combination with hyaluronidase can be administered every week, every two weeks or once a month. Treatment can continue over the course of months or years. IG can be administered at doses at or between 200 mg/kg BW to 2 g/kg BW every week or every two weeks, and generally at least 200 mg/kg to 2 g/kg BW at least once a month. Treatment with immune globulin can effect an increase in patients' anti-amyloid beta antibody levels compared to levels before treatment.

13. Other Diseases and Conditions

Clinical data indicate that immune globulin can be used in the treatment of many conditions. In some instances, immune globulin can be used as the primary treatment, while in other cases, it is administered as second-line therapy when standard therapies have proven ineffective, have become intolerable, or are contraindicated. It is within the skill of a treating physician to identify such diseases or conditions. Exemplary of these include, but are not limited to, secondary hypogammaglobulinaemia (including iatrogenic immunodeficiency); specific antibody deficiency; Acute disseminated encephalomyelitis; ANCA-positive systemic necrotizing vasculitis; Autoimmune haemolytic anaemia; Bullous pem-

phigoid; Cicatricial pemphigoid; Evans syndrome (including autoimmune haemolytic anaemia with immune thrombocytopenia); Foeto-maternal/neonatal alloimmune thrombocytopenia (FMAIT/NAIT); Alzheimer's Disease; Haemophagocytic syndrome; High-risk allogeneic haemopoietic stem cell transplantation; IgM paraproteinaemic neuropathy; kidney transplantation; multiple sclerosis; Opsoclonus myoclonus ataxia; Pemphigus foliaceus; Pemphigus vulgaris; Post-transfusion purpura; Toxic epidermal necrolysis/Steven Johnson syndrome (TEN/SJS); Toxic shock syndrome; Systemic lupus erythematosus; multiple myeloma; sepsis; bone marrow transplantation, B cell tumors; and trauma.

Immune globulin also has been shown to have antimicrobial activity against a number of bacterial, viral and fungal infections, including, but not limited to, Haemophilus influenzae type B, Pseudomonas aeruginosa types A and B, Staphylococcus aureus, Group B Streptococcus, Streptococcus pneumoniae types 1, 3, 4, 6, 7, 8, 9, 12, 14, 18, 19, and 23, Adenovirus types 2 and 5, Cytomegalovirus, Epstein Barr virus VCA, Hepatitis A virus, Hepatitis B virus, Herpes simplex virus-1, Herpes simplex virus-2, Influenza A, Measles, Parainfluenza types 1, 2 and 3, Polio, Varicella zoster virus, Aspergillus and Candida albicans. Thus, immune globulin can be administered subcutaneously in combination with hyaluronidase to patients with bacterial, viral and fungal infections to augment the patient's immune system and treat the disease. In some examples, antibiotics or other antimicrobials also are administered.

I. Articles of Manufacture and Kits

Pharmaceutical compositions of immune globulin and a soluble hyaluronidase, provided together or separately, can be packaged as articles of manufacture containing packaging material, a pharmaceutical composition which is effective for treating a IG-treatable disease or condition, and a label that indicates that the composition and combinations are to be used for treating a IG-treatable diseases and conditions. Exemplary of articles of manufacture are containers including single chamber and dual chamber containers. The containers include, but are not limited to, tubes, bottles and syringes. The containers can further include a needle for subcutaneous administration.

The articles of manufacture provided herein contain packaging materials. Packaging materials for use in packaging pharmaceutical products are well known to those of skill in the art. See, for example, U.S. Pat. Nos. 5,323,907, 5,033,252 and 5,052,558, each of which is incorporated herein in its entirety. Examples of pharmaceutical packaging materials include, but are not limited to, blister packs, bottles, tubes, inhalers, pumps, bags, vials, containers, syringes, bottles, and any packaging material suitable for a selected formulation and intended mode of administration and treatment. A wide array of formulations of the compounds and compositions provided herein are contemplated as are a variety of treatments for any IG-treatable disease or condition.

Compositions of immune globulin and a soluble hyaluronidase, provided together or separately, also can be provided as kits. Kits can include a pharmaceutical composition described herein and an item for administration. For example compositions can be supplied with a device for administration, such as a syringe, an inhaler, a dosage cup, a dropper, or an applicator. The kit can, optionally, include instructions for application including dosages, dosing regimens and instructions for modes of administration. Kits also

can include a pharmaceutical composition described herein and an item for diagnosis. For example, such kits can include an item for measuring the concentration, amount or activity of IG.

J. Examples

The following examples are included for illustrative purposes only and are not intended to limit the scope of the invention.

Example 1

Soluble Recombinant Human PH20 (rHuPH20) Facilitates Subcutaneous Administration of Immune Globulin (IG) and Bioavailability

Subcutaneous (SQ) administration of immune globulin (IG) results in reduced bioavailability compared to intravenous (IV) administration. One study reported 63% bioavailability compared to IV administration, thereby requiring an SQ dose of 137% of the IV dose to be used to achieve an equivalent bioavailability, i.e. area under the time-concentration curve (AUC) (Ochs et al. (2006) J Clin. Immunol., 26:265-273). Thus, experiments were performed to determine if subcutaneous administration of IG (GAMMAGARD LIQUID (GGL), Baxter Biosciences) in the presence of soluble recombinant human PH20 (rHuPH20) increased the bioavailability of IG upon SQ administration, obviating the need for increased doses. The experimental study was designed to assess 1) the ability of subjects to tolerate a monthly dose of GGL in a single site via subcutaneous (SQ) route; 2) the dose of rHuPH20 per gram of GGL required to tolerate a monthly dose of GGL with no more than mild local adverse drug reactions; 3) the time required for SC administration; and 3) a comparison of the bioavailability measured by area under the curve (AUC) of GGL IV versus SQ.

Briefly, eleven adult immunodeficient patients who were on stable doses of intravenous gammaglobulin (WIG) were enrolled in the study. All patients remained on the same monthly doses of IVIG as they received prior to the study. For subcutaneous administration, patients that were receiving up to 600 mg/kg body weight of GGL every four weeks IV, received SQ infusions in a single site beginning at a dose that was 1/4 of the 4-week IV dose, i.e. a 1-week dose, to determine the dose of rHuPH20 required to tolerate the 1-week dose. Subsequently, dosages of rHuPH20 were reduced and patients received the 2, 3, and finally a full four-week dose of GGL to determine the minimum rHuPH20 required to tolerate a once monthly infusion of GGL SQ.

Initial infusions were conducted using 150 U of rHuPH20 per gram of GGL. The rHuPH20 was administered through a 24-gauge SQ needle at a concentration of 150 U/ml or 1500 U/ml at a rate of 1-2 ml/min., prior to the infusion of the GGL. If 1500 U/ml rHuPH20 was used, it was diluted as follows: a) if the volume of the concentrated (1500 U/ml) rHuPH20 solution needed was 1.5 ml or below, it was diluted 1:10 using normal saline for injection; b) if the volume of the concentrated (1500 U/ml) rHuPH20 needed was above 1.5 ml but below 15 ml, it was diluted to 15 l with normal saline for injection; c) if the volume of the concentrated (1500 U/ml) rHuPH20 solution needed was 15 ml or above, it was used undiluted.

Immediately after the infusion of rHuPH20 (and within 5 minutes), the GGL was infused through the same 24-gauge SQ needle beginning at a dose that was 1/4 of the 4-week dose (i.e. 1 week dose) to determine the amount of rHuPH20

needed to give one fourth of the 4-week dose in a single site. Each patient was assessed to determine if the infusion was tolerated; the infusion was deemed not to be tolerated if there were moderate or severe local reactions requiring more than one site of administration or an inability to complete the infusion in less than 3 hours. If the weekly dose of GGL was tolerated, the one-half dose (two week dose) was administered using rHuPH20 at 100 U/g GGL, and the dose of rHuPH20 was further reduced to 66 U/g GGL, then 50 U/g GGL. The dose of rHuPH20 was repeated, on a per-gram

the minimum amount of rHuPH20 that permitted a monthly dose administration of GGL SQ was 50 U/g GGL. The results are summarized in Table 3 below. The results show that all but the first two patients were infused at rates up to 300 ml/hr with infusion times of 1.64 h (270 ml) to 3.55 h (537 ml). The rate of administration was limited primarily by the type of pump used. The IV pump frequently alarmed at rapid infusion rates. One infusion was slowed and one was interrupted due to mild infusion-site pain. Both infusions resumed and were completed.

TABLE 3

Infusion Parameters for Patients Successfully Completing Monthly SC Infusions						
Subjects (N = 10)	Number of monthly-dose infusions	Dose IgG (g) infused (mean)	Volume (mL) IgG infused (mean)	Final rHuPH20 conc. (U/g)	Max infusion rate (mL/hr)	Time (hrs) to infuse (mean)
390001	1	25.5	255	305.9	175	2.13
390003	1	30.1	301	46.9	200	2.38
400001	1	44.5	445	49.8	300	3.05
340001	3	30.3	303	52.5	300	3.02
340002	4	39.9	399	50.0	300	3.20
390004	4	29.3	293	50.8	300	1.92
390005	3	27.2	272	50.6	300	1.64
390006	3	61.4	614	50.0	300	2.75
400002	3	53.7	537	51.5	300	3.55
400003	3	42.1	421	48.8	300	2.29

GGL basis, with increased amounts of GGL until a full 4-week dose of GGL in a single site was tolerated. If the amount of rHuPH20 was not tolerated at any point, then that weekly dose of GGL was repeated at the next interval and the amount of rHuPH20 increased until the dose was tolerated. If a subject fails to tolerate a dose for 2 successive increases in rHuPH20 dose (i.e. 3 attempts at a distinct dose of GGL), then the previously tolerated dose was determined to be the maximum tolerated dose.

The first 4 patients were evaluated for tolerability only; the last 7 patients had an IV infusion, followed by a pharmacokinetic (PK) study to compare the IV infusion to the subsequent SQ infusions. For the SQ infusions, after a monthly dose administration of GGL was achieved, the same monthly dose was repeated and a PK study performed to evaluate the T1/2, Tmax, and AUC. If AUC(SQ) was not within 90% of the AUC(IV), the dose of rHuPH20 was increased 4-fold at the next infusion, and the PK assessment was repeated.

Ten of the 11 patients achieved monthly doses of 25.5 to 61.2 grams of GGL (255 to 612 ml) in a single SQ site, at rates of 120 to 300 ml/hour. The eleventh patient withdrew following the 1-week infusion citing local discomfort. For the first patient (39001), the initial infusions were done by gravity, however, the rates were not acceptable despite increasing the dose of rHuPH20 from 150 to 300 U/g GGL. Therefore, all subsequent infusions were done using an IV peristaltic pump. The remaining 9 patients achieved the GGL monthly dose without the need to repeat doses or increase the concentration of rHuPH20. Thus, all 9 patients in whom an attempt was made to reduce the dose of rHuPH20 completed the study and were able to tolerate the infusions using 50 U/g GGL. To determine if 50 U/g GGL was the minimum rHuPH20 that could be administered, a dose of 25 U/g GGL was attempted in two patients without success: one had discomfort and the other had reduced tolerability and required administration at two sites. Thus,

1. Tolerability Assessment

The subjects were assessed for their tolerability to the SQ infusions. Most infusions were associated with only mild infusion-related reactions (Table 4). Most common mild reactions were infusion site erythema, pain, swelling, warmth and pruritus. Moderate infusion site reactions included three cases of pain, and one case each of pruritus, swelling and warmth. No severe reactions were reported. There were complaints of transient burning during the infusion of the rHuPH20 in 10 of the infusions, with five occurring in one patient.

TABLE 4

Adverse events, regardless of causality, by periods corresponding to dose categories					
MedDRA System Organ Class	SC				SC full dose
	1/4 dose	1/2 dose	3/4 dose	SC	
Ear and labyrinth disorders	0	0	0	1	
Eye disorders	0	1	0	3	
Gastrointestinal disorders	0	1	0	2	
General disorders and administration site conditions	26	15	20	29	
Immune system disorders	0	0	0	1	
Infections and infestations	1	1	1	3	
Musculoskeletal and connective tissue disorders	1	1	1	0	
Nervous system disorders	2	1	0	0	
Respiratory, thoracic and mediastinal disorders	0	0	0	4	
Skin and subcutaneous tissue disorders	0	0	3	1	
Total	30	20	25	44	

Systemic adverse events considered to be possibly or probably related to the infusions are listed in Table 5. Three were moderate and none were severe. Only the episode of mild chest pain was associated with interruption of the

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infusion, but the infusion was completed and subsequent infusions were well tolerated. Table 6 depicts the proportion of subcutaneous infusions that were completed without interruption for an adverse event.

One serious adverse event, an anaphylactic reaction, occurred in one patient, unrelated to study therapy. The patient, who had a history of previous allergic reactions to antibiotics, received an antibiotic on the day following her infusion with GGL/rHuPH20, and subsequently developed anaphylaxis. This patient recovered completely and was able to successfully complete the study.

There were no documented bacterial infections during this trial of PID patients. There were 9 reported cases of viral infections, all deemed not related to study therapy: 2 cases of viral gastroenteritis, 1 case of herpetic keratitis, 2 cases of sinusitis, 1 case of conjunctivitis, and 3 cases (in one patient) of influenza-like illness.

TABLE 5

Systemic non-serious, related adverse events				
Adverse events by MEDRA term	Mild	Mod	Severe	Total
Dry eye	1	0	0	1
Night sweats	1	0	0	1
Musculoskeletal discomfort	0	1	0	1
Headache	1	2	0	3
Lethargy	1	0	0	1
Chest pain	1	0	0	1
Oedema peripheral	1	0	0	1
Pain	1	0	0	1
Back pain	2	0	0	2
Total related adverse events	9	3	0	12

TABLE 6

Proportion of SC infusions completed without interruption for an adverse event						
Patient	Without interruption	Percent (%)	Inter-rupted	Stopped	Percent %	Total infusions
390001	4	80	1*	0	20	5
390002	2	100	0	0	0	2
390003	4	100	0	0	0	4
400001	4	100	0	0	0	4
340001	6	100	0	0	0	6
340002	6	86	1†	0	14	7
390004	7	100	0	0	0	7
390005	7	100	0	0	0	7
390006	6	100	0	0	0	6
400002	6	100	0	0	0	6
400003	7	100	0	0	0	7
Total	59	N/A	2	0	N/A	61

*interrupted due to mild infusion-site pain
†interrupted due to mild transient chest pain

2. Pharmacokinetic Assessment

Pharmacokinetic (PK) analysis was performed on serum IgG levels. The 7 patients enrolled in the PK assessment phase of this study achieved monthly doses of 27 to 61 grams of GGL in a single site using 50 U of rHuPH20 per gram GGL (see Table 3). The PK study was performed after receiving a second monthly dose infusion of GGL. Serum samples were collected pre-infusion, 1 h post-infusion and on days 1, 2, 3, 4, 5, 7, 14, 21 and 28 (if on 28 day schedule) post-infusion. The pharmacokinetic parameters of the 7 patients are depicted in Table 7. The ratio of AUC(SQ) to AUC(IV) for the 7 patients is shown in Table 8. The results

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show that five of the 7 patients had AUC(SQ) within 90% of AUC (IV). Increasing the dose or rHuPH20 four-fold in the 2 subjects with a ratio less than 90% did not further improve bioavailability.

TABLE 7

Pharmacokinetic parameters of individual subjects				
Patients	AUC (days * g/L)	T _{1/2} (days)	T _{max} (days)	C _{min} (g/L)
34001	461.2	61.3	3.0	12.9
34002*	387.1	114.1	4.9	11.3
	356.7	43.9	4.0	11.3
39004*	256.9	113.8	5.0	7.9
	264.2	44.3	6.9	7.7
39005	369.6	59.3	3.1	10.9
39006	368.9	40.3	4.8	10.8
40002	375.2	33.7	6.8	10.6
40003	356.2	37.9	4.9	9.7
Median	368.9	43.93	4.8	10.8

*Patients with repeated PK assessments following administration with an increased dose of rHuPH20.

TABLE 8

Ratio AUC _(SQ) to AUC _(IV) (%)		
rHuPH20 concentration		
Patient	50 U/g	200 U/g
34001	101.0	N/A
34002	86.5	79.6
39004	75.8	77.8
39005	102.7	N/A
39006	94.7	N/A
40002	97.3	N/A
40003	90.5	N/A
Mean	92.6	N/A

3. Summary of Results

The use of rHuPH20 by injection prior to infusion with GGL made it possible to infuse as much as 600 ml of GGL in a single subcutaneous site at infusion rates up to 300 ml per hour in this study. The rate was limited primarily by the IV pumps that were used, which are designed to alarm and shut off when the IV infiltrates and pressure increases. Although pump shut off did not occur until rates approached the 300 ml/h, the need to restart the pump did increase the time of infusion. Since there is no need to pressure alarms for subcutaneous administration, the problem of shutting off should be eliminated by switching to pumps capable of generating more pressure without alarming.

Although most of the infusions were associated with some swelling, redness, or occasionally pain or itching, all but a few were mild. Two of the six moderate reactions occurred in infusions where the rHuPH20 was reduced in an effort to find the minimum effective dose; the rHuPH20 dose of 50 U/g GGL was tolerated by 10 of the 11 subjects. One subject, who had not previously experienced subcutaneous infusions, withdrew after the first one week dose citing discomfort at the site of the lower abdomen. All other infusions were completed despite the mild reactions, with 97% of the infusions being completed without interruption. Most reactions were treated with cool packs and only a few required acetaminophen or diphenhydramine.

The mean bioavailability of GGL upon subcutaneously administering in combination with rHuPH20 was 92% of the bioavailability of GGL following IV administration. This study suggests that the increased diffusion afforded by the rHuPH20 improved absorption of GGL. Further, the trough

levels achieved by monthly subcutaneous dosing of GGL in this study are identical to those achieved by IV administration. Thus, there is no need to increase the frequency of administration of GGL by subcutaneous dosing versus IV dosing; subcutaneous administration of GGL in combination with rHuPH20 requires only a single SQ site and can be achieved at rates of infusion up to 300 ml/h.

In conclusion, rHuPH20 facilitated administration of a full monthly dose of GGL in a single site at rates up to 300 ml/h in a group of adult immunodeficient subjects. The bioavailability of the combination was 92% of the IV bioavailability, based on AUC of the time versus IgG concentration curve. This suggests that rHuPH20 improves absorption of subcutaneous administered GGL. Most of the local side effects were mild and did not result in slowing or interrupting the infusions.

Example 2

Generation of a Soluble rHuPH20-Expressing Cell Line
The HZ24 plasmid (set forth in SEQ ID NO:52) was used to transfect Chinese Hamster Ovary (CHO cells) (see e.g. application Ser. Nos. 10,795,095, 11/065,716 and 11/238,171). The HZ24 plasmid vector for expression of soluble rHuPH20 contains a pCI vector backbone (Promega), DNA encoding amino acids 1-482 of human PH20 hyaluronidase (SEQ ID NO:49), an internal ribosomal entry site (IRES) from the ECMV virus (Clontech), and the mouse dihydrofolate reductase (DHFR) gene. The pCI vector backbone also includes DNA encoding the Beta-lactamase resistance gene (AmpR), an fl origin of replication, a Cytomegalovirus immediate-early enhancer/promoter region (CMV), a chimeric intron, and an SV40 late polyadenylation signal (SV40). The DNA encoding the soluble rHuPH20 construct contains an NheI site and a Kozak consensus sequence prior to the DNA encoding the methionine at amino acid position 1 of the native 35 amino acid signal sequence of human PH20, and a stop codon following the DNA encoding the tyrosine corresponding to amino acid position 482 of the human PH20 hyaluronidase set forth in SEQ ID NO:1), followed by a BamHI restriction site. The construct pCI-PH20-IRES-DHER-SV40pa (HZ24), therefore, results in a single mRNA species driven by the CMV promoter that encodes amino acids 1-482 of human PH20 (set forth in SEQ ID NO:3) and amino acids 1-186 of mouse dihydrofolate reductase (set forth in SEQ ID NO:53), separated by the internal ribosomal entry site (IRES).

Non-transfected DG44 CHO cells growing in GIBCO Modified CD-CHO media for DHFR(-) cells, supplemented with 4 mM Glutamine and 18 ml/L Plurionic F68/L (Gibco), were seeded at 0.5×10⁶ cells/ml in a shaker flask in preparation for transfection. Cells were grown at 37° C. in 5% CO₂ in a humidified incubator, shaking at 120 rpm. Exponentially growing non-transfected DG44 CHO cells were tested for viability prior to transfection.

Sixty million viable cells of the non-transfected DG44 CHO cell culture were pelleted and resuspended to a density of 2×10⁷ cells in 0.7 mL of 2× transfection buffer (2× HeBS: 40 mM Hepes, pH 7.0, 274 mM NaCl, 10 mM KCl, 1.4 mM Na₂HPO₄, 12 mM dextrose). To each aliquot of resuspended cells, 0.09 mL (250 µg) of the linear HZ24 plasmid (linearized by overnight digestion with Cla I (New England Biolabs) was added, and the cell/DNA solutions were transferred into 0.4 cm gap BTX (Gentronics) electroporation cuvettes at room temperature. A negative control electroporation was performed with no plasmid DNA mixed with the

cells. The cell/plasmid mixes were electroporated with a capacitor discharge of 330 V and 960 µF or at 350 V and 960 µF.

The cells were removed from the cuvettes after electroporation and transferred into 5 mL of Modified CD-CHO media for DHFR(-) cells, supplemented with 4 mM Glutamine and 18 ml/L Plurionic F68/L (Gibco), and allowed to grow in a well of a 6-well tissue culture plate without selection for 2 days at 37° C. in 5% CO₂ in a humidified incubator.

Two days post-electroporation, 0.5 mL of tissue culture media was removed from each well and tested for the presence of hyaluronidase activity, using the microturbidity assay described in Example 3.

TABLE 9

Initial Hyaluronidase Activity of HZ24 Transfected DG44 CHO cells at 40 hours post-transfection		
	Dilution	Activity Units/ml
Transfection 1 330 V	1 to 10	0.25
Transfection 2 350 V	1 to 10	0.52
Negative Control	1 to 10	0.015

Cells from Transfection 2 (350V) were collected from the tissue culture well, counted and diluted to 1×10⁴ to 2×10⁴ viable cells per mL. A 0.1 mL aliquot of the cell suspension was transferred to each well of five, 96 well round bottom tissue culture plates. One hundred microliters of CD-CHO media (GIBCO) containing 4 mM GlutaMAX™-1 supplement (GIBCO™, Invitrogen Corporation) and without hypoxanthine and thymidine supplements were added to the wells containing cells (final volume 0.2 mL). Ten clones were identified from the 5 plates grown without methotrexate.

TABLE 10

Hyaluronidase activity of identified clones	
Plate/Well ID	Relative Hyaluronidase
1C3	261
2C2	261
3D3	261
3E5	243
3C6	174
2G8	103
1B9	304
2D9	273
4D10	302

Six HZ24 clones were expanded in culture and transferred into shaker flasks as single cell suspensions. Clones 3D3, 3E5, 2G8, 2D9, 1E11, and 4D10 were plated into 96-well round bottom tissue culture plates using a two-dimensional infinite dilution strategy in which cells were diluted 1:2 down the plate, and 1:3 across the plate, starting at 5000 cells in the top left hand well. Diluted clones were grown in a background of 500 non-transfected DG44 CHO cells per well, to provide necessary growth factors for the initial days in culture. Ten plates were made per subclone, with 5 plates containing 50 nM methotrexate and 5 plates without methotrexate.

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Clone 3D3 produced 24 visual subclones (13 from the no methotrexate treatment, and 11 from the 50 nM methotrexate treatment. Significant hyaluronidase activity was measured in the supernatants from 8 of the 24 subclones (>50 Units/mL), and these 8 subclones were expanded into T-25 tissue culture flasks. Clones isolated from the methotrexate treatment protocol were expanded in the presence of 50 nM methotrexate. Clone 3D35M was further expanded in 500 nM methotrexate giving rise to clones producing in excess of 1,000 Units/ml in shaker flasks (clone 3D35M; or Gen1 3D35M). A master cell bank (MCB) of the 3D35M cells was then prepared.

Example 3

Determination of Hyaluronidase Activity of Soluble rHuPH20

Hyaluronidase activity of soluble rHuPH20 in samples such as cell cultures, purification fractions and purified solutions was determined using a turbidometric assay, which based on the formation of an insoluble precipitate when hyaluronic acid binds with serum albumin. The activity is measured by incubating soluble rHuPH20 with sodium hyaluronate (hyaluronic acid) for a set period of time (10 minutes) and then precipitating the undigested sodium hyaluronate with the addition of acidified serum albumin. The turbidity of the resulting sample is measured at 640 nm after a 30 minute development period. The decrease in turbidity resulting from enzyme activity on the sodium hyaluronate substrate is a measure of the soluble rHuPH20 hyaluronidase activity. The method is performed using a calibration curve generated with dilutions of a soluble rHuPH20 assay working reference standard, and sample activity measurements are made relative to this calibration curve.

Dilutions of the sample were prepared in Enzyme Diluent Solutions. The Enzyme Diluent Solution was prepared by dissolving 33.0 ± 0.05 mg of hydrolyzed gelatin in 25.0 mL of the 50 mM PIPES Reaction Buffer (140 mM NaCl, 50 mM PIPES, pH 5.5) and 25.0 mL of SWFI, and diluting 0.2 mL of 25% Buminat solution into the mixture and vortexing for 30 seconds. This was performed within 2 hours of use and stored on ice until needed. The samples were diluted to an estimated 1-2 U/mL. Generally, the maximum dilution per step did not exceed 1:100 and the initial sample size for the first dilution was not be less than 20 μ L. The minimum sample volumes needed to perform the assay were: In-process Samples, FPLC Fractions: 80 μ L; Tissue Culture Supernatants: 1 mL; Concentrated Material 80 μ L; Purified or Final Step Material: 80 μ L. The dilutions were made in triplicate in a Low Protein Binding 96-well plate, and 30 μ L of each dilution was transferred to Optilux black/clear bottom plates (BD BioSciences).

Dilutions of known soluble rHuPH20 with a concentration of 2.5 U/mL were prepared in Enzyme Diluent Solution to generate a standard curve and added to the Optilux plate in triplicate. The dilutions included 0 U/mL, 0.25 U/mL, 0.5 U/mL, 1.0 U/mL, 1.5 U/mL, 2.0 U/mL, and 2.5 U/mL. "Reagent blank" wells that contained 60 μ L of Enzyme Diluent Solution were included in the plate as a negative control. The plate was then covered and warmed on a heat block for 5 minutes at 37° C. The cover was removed and the plate was shaken for 10 seconds. After shaking, the plate was returned to the plate to the heat block and the MULTIDROP 384 Liquid Handling Device was primed with the warm 0.25 mg/mL sodium hyaluronate solution (prepared by dissolving 100 mg of sodium hyaluronate (LifeCore

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Biomedical) in 20.0 mL of SWFI. This was mixed by gently rotating and/or rocking at 2-8° C. for 2-4 hours, or until completely dissolved). The reaction plate was transferred to the MULTIDROP 384 and the reaction was initiated by pressing the start key to dispense 30 μ L sodium hyaluronate into each well. The plate was then removed from the MULTIDROP 384 and shaken for 10 seconds before being transferred to a heat block with the plate cover replaced. The plate was incubated at 37° C. for 10 minutes

The MULTIDROP 384 was prepared to stop the reaction by priming the machine with Serum Working Solution and changing the volume setting to 240 μ L. (25 mL of Serum Stock Solution [1 volume of Horse Serum (Sigma) was diluted with 9 volumes of 500 mM Acetate Buffer Solution and the pH was adjusted to 3.1 with hydrochloric acid] in 75 mL of 500 mM Acetate Buffer Solution). The plate was removed from the heat block and placed onto the MULTIDROP 384 and 240 μ L of serum Working Solutions was dispensed into the wells. The plate was removed and shaken on a plate reader for 10 seconds. After a further 15 minutes, the turbidity of the samples was measured at 640 nm and the hyaluronidase activity (in U/mL) of each sample was determined by fitting to the standard curve.

Specific activity (Units/mg) was calculated by dividing the hyaluronidase activity (U/ml) by the protein concentration (mg/mL).

Example 4

Production and Purification of Gen1 Human sPH20
A. 5 L Bioreactor Process

A vial of 3D35M was thawed and expanded from shaker flasks through 1 L spinner flasks in CD-CHO media (Invitrogen, Carlsbad Calif.) supplemented with 100 nM Methotrexate and GlutaMAX™-1 (Invitrogen). Cells were transferred from spinner flasks to a 5 L bioreactor (Braun) at an inoculation density of 4×10^5 viable cells per ml. Parameters were temperature Setpoint 37° C., pH 7.2 (starting Setpoint), with Dissolved Oxygen Setpoint 25% and an air overlay of 0-100 cc/min. At 168 hrs, 250 ml of Feed #1 Medium (CD CHO with 50 g/L Glucose) was added. At 216 hours, 250 ml of Feed #2 Medium (CD CHO with 50 g/L Glucose and 10 mM Sodium Butyrate) was added, and at 264 hours 250 ml of Feed #2 Medium was added. This process resulted in a final productivity of 1600 Units per ml with a maximal cell density of 6×10^6 cells/ml. The addition of sodium butyrate was to dramatically enhance the production of soluble rHuPH20 in the final stages of production.

Conditioned media from the 3D35M clone was clarified by depth filtration and tangential flow diafiltration into 10 mM Hepes pH 7.0. Soluble rHuPH20 was then purified by sequential chromatography on Q Sepharose (Pharmacia) ion exchange, Phenyl Sepharose (Pharmacia) hydrophobic interaction chromatography, phenyl boronate (Prometec) and Hydroxapatite Chromatography (Biorad, Richmond, Calif.).

Soluble rHuPH20 bound to Q Sepharose and eluted at 400 mM NaCl in the same buffer. The eluate was diluted with 2M ammonium sulfate to a final concentration of 500 mM ammonium sulfate and passed through a Phenyl Sepharose (low sub) column, followed by binding under the same conditions to a phenyl boronate resin. The soluble rHuPH20 was eluted from the phenyl sepharose resin in Hepes pH 6.9 after washing at pH 9.0 in 50 mM bicine without ammonium sulfate. The eluate was loaded onto a ceramic hydroxyapatite resin at pH 6.9 in 5 mM potassium phosphate and 1 mM CaCl_2 and eluted with 80 mM potassium phosphate, pH 7.4 with 0.1 mM CaCl_2 .

The resultant purified soluble rHuPH20 possessed a specific activity in excess of 65,000 USP Units/mg protein by way of the microturbidity assay (Example 16) using the USP reference standard. Purified sPH20 eluted as a single peak from 24 to 26 minutes from a Pharmacia 5RPC styrene divinylbenzene column with a gradient between 0.1% TFA/H₂O and 0.1% TFA/90% acetonitrile/10% H₂O and resolved as a single broad 61 kDa band by SDS electrophoresis that reduced to a sharp 51 kDa band upon treatment with PNGASE-F. N-terminal amino acid sequencing revealed that the leader peptide had been efficiently removed.

B. Upstream Cell Culture Expansion Process into 100 L Bioreactor Cell Culture

A scaled-up process was used to separately purify soluble rHuPH20 from four different vials of 3D35M cell to produce 4 separate batches of sHuPH20; HUA0406C, HUA0410C, HUA0415C and HUA0420C. Each vial was separately expanded and cultured through a 125 L bioreactor, then purified using column chromatography. Samples were taken throughout the process to assess such parameters as enzyme yield. The description of the process provided below sets forth representative specifications for such things as bioreactor starting and feed media volumes, transfer cell densities, and wash and elution volumes. The exact numbers vary slightly with each batch, and are detailed in Tables 11 to 18.

Four vials of 3D35M cells were thawed in a 37° C. water bath, CD CHO containing 100 nM methotrexate and 40 mL/L GlutaMAX was added and the cells were centrifuged. The cells were re-suspended in a 125 mL shake flask with 20 mL of fresh media and placed in a 37° C., 7% CO₂ incubator. The cells were expanded up to 40 mL in the 125 mL shake flask. When the cell density reached 1.5-2.5×10⁶ cells/mL, the culture was expanded into a 125 mL spinner flask in a 100 mL culture volume. The flask was incubated at 37° C., 7% CO₂. When the cell density reached 1.5-2.5×10⁶ cells/mL, the culture was expanded into a 250 mL spinner flask in 200 mL culture volume, and the flask was incubated at 37° C., 7% CO₂. When the cell density reached 1.5-2.5×10⁶ cells/mL, the culture was expanded into a 1 L spinner flask in 800 mL culture volume and incubated at 37° C., 7% CO₂. When the cell density reached 1.5-2.5×10⁶ cells/mL, the culture was expanded into a 6 L spinner flask in 5 L culture volume and incubated at 37° C., 7% CO₂. When the cell density reached 1.5-2.5×10⁶ cells/mL, the culture was

expanded into a 36 L spinner flask in 20 L culture volume and incubated at 37° C., 7% CO₂.

A 125 L reactor was sterilized with steam at 121° C., 20 PSI and 65 L of CD CHO media was added. Before use, the reactor was checked for contamination. When the cell density in the 36 L spinner flasks reached 1.8-2.5×10⁶ cells/mL, 20 L cell culture were transferred from the 36 L spinner flasks to the 125 L bioreactor (Braun), resulting a final volume of 85 L and a seeding density of approximately 4×10⁵ cells/mL. Parameters were temperature setpoint, 37° C.; pH: 7.2; Dissolved oxygen: 25%±10%; Impeller Speed 50 rpm; Vessel Pressure 3 psi; Air Sparge 1 L/min.; Air Overlay: 1 L/min. The reactor was sampled daily for cell counts, pH verification, media analysis, protein production and retention. Nutrient feeds were added during the run. At Day 6, 3.4 L of Feed #1 Medium (CD CHO+50 g/L Glucose+40 mL/L GlutaMAX™-1) was added, and culture temperature was changed to 36.5° C. At day 9, 3.5 L of Feed #2 (CD CHO+50 g/L Glucose+40 mL/L GlutaMAX™-1+1.1 g/L Sodium Butyrate) was added, and culture temperature was changed to 36° C. At day 11, 3.7 L of Feed #3 (CD CHO+50 g/L Glucose+40 mL/L GlutaMAX™-1+1.1 g/L Sodium Butyrate) was added, and the culture temperature was changed to 35.5° C. The reactor was harvested at 14 days or when the viability of the cells dropped below 50%. The process resulted in production of soluble rHuPH20 with an enzymatic activity of 1600 Units/ml with a maximal cell density of 8 million cells/mL. At harvest, the culture was sampled for mycoplasma, bioburden, endotoxin, and virus in vitro and in vivo, transmission electron microscopy (TEM) for viral particles, and enzyme activity.

The one hundred liter bioreactor cell culture harvest was filtered through a series of disposable capsule filters having a polyethersulfone medium (Sartorius): first through a 8.0 µm depth capsule, a 0.65 µm depth capsule, a 0.22 µm capsule, and finally through a 0.22 µm Sartopore 2000 cm² filter and into a 100 L sterile storage bag. The culture was concentrated 10× using two TFF with Spiral Polyethersulfone 30 kDa MWCO filters (Millipore), followed by a 6× buffer exchange with 10 mM HEPES, 25 mM Na₂SO₄, pH 7.0 into a 0.22 µm final filter into a 20 L sterile storage bag. Table 11 provides monitoring data related to the cell culture, harvest, concentration and buffer exchange steps.

TABLE 11

Monitoring data for cell culture, harvest, concentration and buffer exchange steps.				
Parameter	HUA0406C	HUA04010C	HUA0415C	HUA0420C
Time from thaw to inoculate 100 L bioreactor (days)	21	19	17	18
100 L inoculation density (×10 ⁶ cells/mL)	0.45	0.33	0.44	0.46
Doubling time in logarithmic growth (hr)	29.8	27.3	29.2	23.5
Max. cell density (×10 ⁶ cells/mL)	5.65	8.70	6.07	9.70
Harvest viability (%)	41	48	41	41
Harvest titer (U/ml)	1964	1670	991	1319
Time in 100-L bioreactor (days)	13	13	12	13
Clarified harvest volume (mL)	81800	93300	91800	89100
Clarified harvest enzyme assay (U/mL)	2385	1768	1039	1425
Concentrate enzyme assay (U/mL)	22954	17091	8561	17785
Buffer exchanged concentrate enzyme assay (U/mL)	15829	11649	9915	8679
Filtered buffer exchanged concentrate enzyme assay (U/mL)	21550	10882	9471	8527

TABLE 11-continued

Monitoring data for cell culture, harvest, concentration and buffer exchange steps.				
Parameter	HUA0406C	HUA04010C	HUA0415C	HUA0420C
Buffer exchanged concentrate volume (mL)	10699	13578	12727	20500
Ratio enzyme units concentration/harvest	0.87	0.96	1.32	1.4

A Q Sepharose (Pharmacia) ion exchange column (3 L resin, Height=20 cm, Diameter=14 cm) was prepared. Wash samples were collected for a determination of pH, conductivity and endotoxin (LAL) assay. The column was equilibrated with 5 column volumes of 10 mM Tris, 20 mM Na₂SO₄, pH 7.5. The concentrated, diafiltered harvest was loaded onto the Q column at a flow rate of 100 cm/hr. The column was washed with 5 column volumes of 10 mM Tris, 20 mM Na₂SO₄, pH 7.5 and 10 mM Hepes, 50 mM NaCl, pH 7.0. The protein was eluted with 10 mM Hepes, 400 mM NaCl, pH 7.0 and filtered through a 0.22 µm final filter into a sterile bag.

Phenyl-Sepharose (Pharmacia) hydrophobic interaction chromatography was next performed. A Phenyl-Sepharose (PS) column (9.1 L resin, Height=29 cm, Diameter=20 cm) was prepared. The column was equilibrated with 5 column volumes of 5 mM potassium phosphate, 0.5 M ammonium sulfate, 0.1 mM CaCl₂, pH 7.0. The protein eluate from above was supplemented with 2M ammonium sulfate, 1 M potassium phosphate and 1 M CaCl₂ stock solutions to final concentrations of 5 mM, 0.5 M and 0.1 mM, respectively. The protein was loaded onto the PS column at a flow rate of 100 cm/hr. 5 mM potassium phosphate, 0.5 M ammonium sulfate and 0.1 mM CaCl₂ pH 7.0 was added at 100 cm/hr. The flow through was passed through a 0.22 µm final filter into a sterile bag.

The PS-purified protein was the loaded onto an amino-phenyl boronate column

(ProMedics) (6.3 L resin, Height=20 cm, Diameter=20 cm) that had been equilibrated with 5 column volumes of 5 mM potassium phosphate, 0.5 M ammonium sulfate. The protein was passed through the column at a flow rate of 100 cm/hr, and the column was washed with 5 mM potassium phosphate, 0.5 M ammonium sulfate, pH 7.0. The column was then washed with 20 mM bicine, 100 mM NaCl, pH 9.0 and the protein eluted with 50 mM Hepes, 100 mM NaCl pH 6.9 through a sterile filter and into a 20 L sterile bag. The eluate was tested for bioburden, protein concentration and enzyme activity.

A hydroxyapatite (HAP) column (BioRad) (1.6 L resin, Height=10 cm, Diameter=14 cm) was equilibrated with 5 mM potassium phosphate, 100 mM NaCl, 0.1 mM CaCl₂ pH 7.0. Wash samples were collected and tested for pH, conductivity and endotoxin (LAL assay). The aminophenyl boronate purified protein was supplemented with potassium phosphate and CaCl₂ to yield final concentrations of 5 mM potassium phosphate and 0.1 mM CaCl₂ and loaded onto the HAP column at a flow rate of 100 cm/hr. The column was washed with 5 mM potassium phosphate pH 7.0, 100 mM NaCl, 0.1 mM CaCl₂, then 10 mM potassium phosphate pH 7.0, 100 mM NaCl, 0.1 mM CaCl₂ pH. The protein was eluted with 70 mM potassium phosphate pH 7.0 and filtered through a 0.22 µm filter into a 5 L sterile storage bag. The eluate was tested for bioburden, protein concentration and enzyme activity.

The HAP-purified protein was then pumped through a 20 nM viral removal filter via a pressure tank. The protein was added to the DV20 pressure tank and filter (Pall Corporation), passing through an Ultipor DV20 Filter with 20 nm pores (Pall Corporation) into a sterile 20 L storage bag. The filtrate was tested for protein concentration, enzyme activity, oligosaccharide, monosaccharide and sialic acid profiling, and process-related impurities. The protein in the filtrate was then concentrated to 1 mg/mL using a 10 kD molecular weight cut off (MWCO) Sartocoon Slice tangential flow filtration (TFF) system (Sartorius). The filter was first prepared by washing with a Hepes/saline solution (10 mM Hepes, 130 mM NaCl, pH 7.0) and the permeate was sampled for pH and conductivity. Following concentration, the concentrated protein was sampled and tested for protein concentration and enzyme activity. A 6× buffer exchange was performed on the concentrated protein into the final buffer: 10 mM Hepes, 130 mM NaCl, pH 7.0. The concentrated protein was passed though a 0.22 µm filter into a 20 L sterile storage bag. The protein was sampled and tested for protein concentration, enzyme activity, free sulfhydryl groups, oligosaccharide profiling and osmolarity.

Tables 12 to 18 provide monitoring data related to each of the purification steps described above, for each 3D35M cell lot.

TABLE 12

Q sepharose column data				
Parameter	HUA0406C	HUA0410C	HUA0415C	HUA0420C
Load volume (mL)	10647	13524	12852	20418
Load Volume/ Resin Volume ratio	3.1	4.9	4.5	7.3
Column Volume (mL)	2770	3840	2850	2880
Eluate volume (mL)	6108	5923	5759	6284
Protein Conc. of Eluate (mg/mL)	2.8	3.05	2.80	2.86
Eluate Enzyme Assay (U/mL)	24493	26683	18321	21052
Enzyme Yield (%)	65	107	87	76

TABLE 13

Phenyl Sepharose column data				
Parameter	HUA0406C	HUA0410C	HUA0415C	HUA0420C
Volume Before Stock Solution Addition (mL)	5670	5015	5694	6251
Load Volume (mL)	7599	6693	7631	8360

TABLE 13-continued

Phenyl Sepharose column data				
Parameter	HUA0406C	HUA0410C	HUA0415C	HUA0420C
Column	9106	9420	9340	9420
Volume (mL)				
Load Volume/	0.8	0.71	0.82	0.89
Resin Volume				
ratio				
Eluate volume	16144	18010	16960	17328
(mL)				
Protein Cone	0.4	0.33	0.33	0.38
of Eluate				
(mg/mL)				
Eluate Enzyme	8806	6585	4472	7509
Assay (U/mL)				
Protein Yield	41	40	36	37
(%)				
Enzyme Yield	102	88	82	96
(%)				

TABLE 14

Amino Phenyl Boronate column data				
Parameter	HUA0406C	HUA0410C	HUA0415C	HUA0420C
Load Volume	16136	17958	16931	17884
(mL)				
Load Volume/	2.99	3.15	3.08	2.98
Resin Volume				
ratio				
Column	5400	5700	5500	5300
Volume (mL)				
Eluate volume	17595	22084	20686	19145
(mL)				
Protein Conc.	0.0	0.03	0.03	0.04
of Eluate				
(mg/mL)				
Protein Conc.	not tested	0.03	0.00	0.04
of Filtered				
Eluate				
(mg/mL)				
Eluate Enzyme	4050	2410	1523	4721
Assay (U/mL)				
Protein Yield	0	11	11	12
(%)				
Enzyme Yield	not	41	40	69
(%)	determined			

TABLE 15

Hydroxyapatite column data				
Parameter	HUA0406C	HUA0410C	HUA0415C	HUA0420C
Volume Before	16345	20799	20640	19103
Stock Solution				
Addition (mL)				
Load Volume/	10.95	13.58	14.19	12.81
Resin Volume				
ratio				
Column	1500	1540	1462	1500
Volume (mL)				
Load volume	16429	20917	20746	19213
(mL)				
Eluate volume	4100	2415	1936	2419
(mL)				
Protein Conc.	not tested	0.24	0.17	0.23
of Eluate				
(mg/mL)				
Protein Conc.	NA	NA	0.17	NA
of Filtered				
Eluate				
(mg/mL)				

TABLE 15-continued

Hydroxyapatite column data				
Parameter	HUA0406C	HUA0410C	HUA0415C	HUA0420C
Eluate Enzyme	14051	29089	20424	29826
Assay (U/mL)				
Protein Yield	Not tested	93	53	73
(%)				
Enzyme Yield	87	118	140	104
(%)				

TABLE 16

DV20 filtration data				
Parameter	HUA0406C	HUA0410C	HUA0415C	HUA0420C
Start volume	4077	2233	1917	2419
(mL)				
Filtrate Volume	4602	3334	2963	3504
(mL)				
Protein Conc.	0.1	NA	0.09	NA
of Filtrate				
(mg/mL)				
Protein Conc.	NA	0.15	0.09	0.16
of Filtered				
Eluate				
(mg/mL)				
Protein Yield	not tested	93	82	101
(%)				

TABLE 17

Final concentration data				
Parameter	HUA0406C	HUA0410C	HUA0415C	HUA0420C
Start volume	4575	3298	2963	3492
(mL)				
Concentrate	562	407	237	316
Volume (mL)				
Protein Conc.	0.9	1.24	1.16	1.73
of Concentrate				
(mg/mL)				
Protein Yield	111	102	103	98
(%)				

TABLE 18

Buffer Exchange into Final Formulation data				
Parameter	HUA0406C	HUA0410C	HUA0415C	HUA0420C
Start Volume	562	407	237	316
(mL)				
Final Volume	594	516	310	554
Buffer				
Exchanged				
Concentrate				
(mL)				
Protein Conc.	1.00	0.97	0.98	1.00
of Concentrate				
(mg/mL)				
Protein Conc.	0.95	0.92	0.95	1.02
of Filtered				
Concentrate				
(mg/mL)				
Protein Yield	118	99	110	101
(%)				

The purified and concentrated soluble rHuPH20 protein was aseptically filled into sterile vials with 5 mL and 1 mL fill volumes. The protein was passed though a 0.22 μm filter

to an operator controlled pump that was used to fill the vials using a gravimetric readout. The vials were closed with stoppers and secured with crimped caps. The closed vials were visually inspected for foreign particles and then labeled. Following labeling, the vials were flash-frozen by submersion in liquid nitrogen for no longer than 1 minute and stored at $\leq 15^{\circ}\text{C}$. ($-20 \pm 5^{\circ}\text{C}$).

Example 5

Production Gen2 Cells Containing Soluble Human PH20 (rHuPH20)

The Gen1 3D35M cell line described in Example 2 was adapted to higher methotrexate levels to produce generation 2 (Gen2) clones. 3D35M cells were seeded from established methotrexate-containing cultures into CD CHO medium containing 4 mM GlutaMAX-1TM and 1.0 μM methotrexate. The cells were adapted to a higher methotrexate level by growing and passaging them 9 times over a period of 46 days in a 37°C , 7% CO_2 humidified incubator. The amplified population of cells was cloned out by limiting dilution in 96-well tissue culture plates containing medium with 2.0 μM methotrexate. After approximately 4 weeks, clones were identified and clone 3E10B was selected for expansion. 3E10B cells were grown in CD CHO medium containing 4 mM GlutaMAX-1TM and 2.0 μM methotrexate for 20 passages. A master cell bank (MCB) of the 3E10B cell line was created and frozen and used for subsequent studies.

Amplification of the cell line continued by culturing 3E10B cells in CD CHO medium containing 4 mM GlutaMAX-1TM and 4.0 μM methotrexate. After the 12th passage, cells were frozen in vials as a research cell bank (RCB). One vial of the RCB was thawed and cultured in medium containing 8.0 μM methotrexate. After 5 days, the methotrexate concentration in the medium was increased to 16.0 μM , then 20.0 μM 18 days later. Cells from the 8th passage in medium containing 20.0 μM methotrexate were cloned out by limiting dilution in 96-well tissue culture plates containing CD CHO medium containing 4 mM GlutaMAX-1TM and 20.0 μM methotrexate. Clones were identified 5-6 weeks later and clone 2B2 was selected for expansion in medium containing 20.0 μM methotrexate. After the 11th passage, 2B2 cells were frozen in vials as a research cell bank (RCB).

The resultant 2B2 cells are dihydrofolate reductase deficient (dhfr-) DG44 CHO cells that express soluble recombinant human PH20 (rHuPH20). The soluble PH20 is present in 2B2 cells at a copy number of approximately 206 copies/cell. Southern blot analysis of Spe I-, Xba I- and BamH I/Hind III-digested genomic 2B2 cell DNA using a rHuPH20-specific probe revealed the following restriction digest profile: one major hybridizing band of ~ 7.7 kb and four minor hybridizing bands (~ 13.9 , ~ 6.6 , ~ 5.7 and ~ 4.6 kb) with DNA digested with Spe I; one major hybridizing band of ~ 5.0 kb and two minor hybridizing bands (~ 13.9 and ~ 6.5 kb) with DNA digested with Xba I; and one single hybridizing band of ~ 1.4 kb observed using 2B2 DNA digested with BamH I/Hind III. Sequence analysis of the mRNA transcript indicated that the derived cDNA (SEQ ID NO:56) was identical to the reference sequence (SEQ ID NO:49) except for one base pair difference at position 1131, which was observed to be a thymidine (T) instead of the expected cytosine (C). This is a silent mutation, with no effect on the amino acid sequence.

Example 6

A. Production of Gen2 Soluble rHuPH20 in 300 L Bioreactor Cell Culture

A vial of HZ24-2B2 was thawed and expanded from shaker flasks through 36 L spinner flasks in CD-CHO media

(Invitrogen, Carlsbad, Calif.) supplemented with 20 μM methotrexate and GlutaMAX-1TM (Invitrogen). Briefly, the a vial of cells was thawed in a 37°C water bath, media was added and the cells were centrifuged. The cells were resuspended in a 125 mL shake flask with 20 mL of fresh media and placed in a 37°C , 7% CO_2 incubator. The cells were expanded up to 40 mL in the 125 mL shake flask. When the cell density reached greater than 1.5×10^6 cells/mL, the culture was expanded into a 125 mL spinner flask in a 100 mL culture volume. The flask was incubated at 37°C , 7% CO_2 . When the cell density reached greater than 1.5×10^6 cells/mL, the culture was expanded into a 250 mL spinner flask in 200 mL culture volume, and the flask was incubated at 37°C , 7% CO_2 . When the cell density reached greater than 1.5×10^6 cells/mL, the culture was expanded into a 1 L spinner flask in 800 mL culture volume and incubated at 37°C , 7% CO_2 . When the cell density reached greater than 1.5×10^6 cells/mL the culture was expanded into a 6 L spinner flask in 5000 mL culture volume and incubated at 37°C , 7% CO_2 . When the cell density reached greater than 1.5×10^6 cells/mL the culture was expanded into a 36 L spinner flask in 32 L culture volume and incubated at 37°C , 7% CO_2 .

A 400 L reactor was sterilized and 230 mL of CD-CHO media was added. Before use, the reactor was checked for contamination. Approximately 30 L cells were transferred from the 36 L spinner flasks to the 400 L bioreactor (Braun) at an inoculation density of 4.0×10^5 viable cells per ml and a total volume of 260 L. Parameters were temperature setpoint, 37°C ; Impeller Speed 40-55 RPM; Vessel Pressure: 3 psi; Air Sparge 0.5-1.5 L/Min.; Air Overlay: 3 L/min. The reactor was sampled daily for cell counts, pH verification, media analysis, protein production and retention. Also, during the run nutrient feeds were added. At 120 hrs (day 5), 10.4 L of Feed #1 Medium (4 $\times$ CD-CHO+33 g/L Glucose+160 mL/L Glutamax-1TM+83 mL/L Yeastolate+33 mg/L rHuInsulin) was added. At 168 hours (day 7), 10.8 L of Feed #2 (2 $\times$ CD-CHO+33 g/L Glucose+80 mL/L Glutamax-1TM+167 mL/L Yeastolate+0.92 g/L Sodium Butyrate) was added, and culture temperature was changed to 36.5°C . At 216 hours (day 9), 10.8 L of Feed #3 (1 $\times$ CD-CHO+50 g/L Glucose+50 mL/L Glutamax-1TM+250 mL/L Yeastolate+1.80 g/L Sodium Butyrate) was added, and culture temperature was changed to 36°C . At 264 hours (day 11), 10.8 L of Feed #4 (1 $\times$ CD-CHO+33 g/L Glucose+33 mL/L Glutamax-1TM+250 mL/L Yeastolate+0.92 g/L Sodium Butyrate) was added, and culture temperature was changed to 35.5°C . The addition of the feed media was observed to dramatically enhance the production of soluble rHuPH20 in the final stages of production. The reactor was harvested at 14 or 15 days or when the viability of the cells dropped below 40%. The process resulted in a final productivity of 17,000 Units per ml with a maximal cell density of 12 million cells/mL. At harvest, the culture was sampled for mycoplasma, bioburden, endotoxin and viral in vitro and in vivo, Transmission Electron Microscopy (TEM) and enzyme activity.

The culture was pumped by a peristaltic pump through four Millistak filtration system modules (Millipore) in parallel, each containing a layer of diatomaceous earth graded to 4-8 μm and a layer of diatomaceous earth graded to 1.4-1.1 μm , followed by a cellulose membrane, then through a second single Millistak filtration system (Millipore) containing a layer of diatomaceous earth graded to 0.4-0.11 μm and a layer of diatomaceous earth graded to <0.1 μm , followed by a cellulose membrane, and then through a 0.22 μm final filter into a sterile single use flexible bag with a 350

L capacity. The harvested cell culture fluid was supplemented with 10 mM EDTA and 10 mM Tris to a pH of 7.5. The culture was concentrated 10× with a tangential flow filtration (TFF) apparatus using four Sartoslice TFF 30 kDa molecular weight cut-off (MWCO) polyether sulfone (PES) filter (Sartorius), followed by a 10× buffer exchange with 10 mM Tris, 20 mM Na₂SO₄, pH 7.5 into a 0.22 μm final filter into a 50 L sterile storage bag.

The concentrated, diafiltered harvest was inactivated for virus. Prior to viral inactivation, a solution of 10% Triton X-100, 3% tri (n-butyl) phosphate (TNBP) was prepared. The concentrated, diafiltered harvest was exposed to 1% Triton X-100, 0.3% TNBP for 1 hour in a 36 L glass reaction vessel immediately prior to purification on the Q column.

B. Purification of Gent soluble rHuPH20

A Q Sepharose (Pharmacia) ion exchange column (9 L resin, H=29 cm, D=20 cm) was prepared. Wash samples were collected for a determination of pH, conductivity and endotoxin (LAL) assay. The column was equilibrated with 5 column volumes of 10 mM Tris, 20 mM Na₂SO₄, pH 7.5. Following viral inactivation, the concentrated, diafiltered harvest was loaded onto the Q column at a flow rate of 100 cm/hr. The column was washed with 5 column volumes of 10 mM Tris, 20 mM Na₂SO₄, pH 7.5 and 10 mM Hepes, 50 mM NaCl, pH 7.0. The protein was eluted with 10 mM Hepes, 400 mM NaCl, pH 7.0 into a 0.22 μm final filter into sterile bag. The eluate sample was tested for bioburden, protein concentration and hyaluronidase activity. A₂₈₀ absorbance reading were taken at the beginning and end of the exchange.

Phenyl-Sepharose (Pharmacia) hydrophobic interaction chromatography was next performed. A Phenyl-Sepharose (PS) column (19-21 L resin, H=29 cm, D=30 cm) was prepared. The wash was collected and sampled for pH, conductivity and endotoxin (LAL assay). The column was equilibrated with 5 column volumes of 5 mM potassium phosphate, 0.5 M ammonium sulfate, 0.1 mM CaCl₂, pH 7.0. The protein eluate from the Q sepharose column was supplemented with 2M ammonium sulfate, 1 M potassium phosphate and 1 M CaCl₂ stock solutions to yield final concentrations of 5 mM, 0.5 M and 0.1 mM, respectively. The protein was loaded onto the PS column at a flow rate of 100 cm/hr and the column flow thru collected. The column was washed with 5 mM potassium phosphate, 0.5 M ammonium sulfate and 0.1 mM CaCl₂ pH 7.0 at 100 cm/hr and the wash was added to the collected flow thru. Combined with the column wash, the flow through was passed through a 0.22 μm final filter into a sterile bag. The flow through was sampled for bioburden, protein concentration and enzyme activity.

An aminophenyl boronate column (Promtix) was prepared. The wash was collected and sampled for pH, conductivity and endotoxin (LAL assay). The column was equilibrated with 5 column volumes of 5 mM potassium phosphate, 0.5 M ammonium sulfate. The PS flow through containing purified protein was loaded onto the aminophenyl boronate column at a flow rate of 100 cm/hr. The column

was washed with 5 mM potassium phosphate, 0.5 M ammonium sulfate, pH 7.0. The column was washed with 20 mM bicine, 0.5 M ammonium sulfate, pH 9.0. The column was washed with 20 mM bicine, 100 mM sodium chloride, pH 9.0. The protein was eluted with 50 mM Hepes, 100 mM NaCl, pH 6.9 and passed through a sterile filter into a sterile bag. The eluted sample was tested for bioburden, protein concentration and enzyme activity.

The hydroxyapatite (HAP) column (Biorad) was prepared. The wash was collected and test for pH, conductivity and endotoxin (LAL assay). The column was equilibrated with 5 mM potassium phosphate, 100 mM NaCl, 0.1 mM CaCl₂, pH 7.0. The aminophenyl boronate purified protein was supplemented to final concentrations of 5 mM potassium phosphate and 0.1 mM CaCl₂ and loaded onto the HAP column at a flow rate of 100 cm/hr. The column was washed with 5 mM potassium phosphate, pH 7, 100 mM NaCl, 0.1 mM CaCl₂. The column was next washed with 10 mM potassium phosphate, pH 7, 100 mM NaCl, 0.1 mM CaCl₂. The protein was eluted with 70 mM potassium phosphate, pH 7.0 and passed through a 0.22 μm sterile filter into a sterile bag. The eluted sample was tested for bioburden, protein concentration and enzyme activity.

The HAP purified protein was then passed through a viral removal filter. The sterilized Virosart filter (Sartorius) was first prepared by washing with 2 L of 70 mM potassium phosphate, pH 7.0. Before use, the filtered buffer was sampled for pH and conductivity. The HAP purified protein was pumped via a peristaltic pump through the 20 nM viral removal filter. The filtered protein in 70 mM potassium phosphate, pH 7.0 was passed through a 0.22 μm final filter into a sterile bag. The viral filtered sample was tested for protein concentration, enzyme activity, oligosaccharide, monosaccharide and sialic acid profiling. The sample also was tested for process related impurities.

The protein in the filtrate was then concentrated to 10 mg/mL using a 10 kD molecular weight cut off (MWCO) Sartoclon Slice tangential flow filtration (TFF) system (Sartorius). The filter was first prepared by washing with 10 mM histidine, 130 mM NaCl, pH 6.0 and the permeate was sampled for pH and conductivity. Following concentration, the concentrated protein was sampled and tested for protein concentration and enzyme activity. A 6× buffer exchange was performed on the concentrated protein into the final buffer: 10 mM histidine, 130 mM NaCl, pH 6.0. Following buffer exchange, the concentrated protein was passed through a 0.22 μm filter into a 20 L sterile storage bag. The protein was sampled and tested for protein concentration, enzyme activity, free sulfhydryl groups, oligosaccharide profiling and osmolarity.

The sterile filtered bulk protein was then aseptically dispensed at 20 mL into 30 mL sterile Teflon vials (Nalgene). The vials were then flash frozen and stored at -20±5° C.

C. Comparison of Production and Purification of Gen1 Soluble rHuPH20 and Gen2 Soluble rHuPH20

The production and purification of Gen2 soluble rHuPH20 in a 300 L bioreactor cell culture contained some changes in the protocols compared to the production and purification Gen1 soluble rHuPH20 in a 100 L bioreactor cell culture (described in Example 4.B). Table 19 sets forth exemplary differences, in addition to simple scale up changes, between the methods.

TABLE 19

Process Difference	Gen1 soluble rHuPH20	Gen2 soluble rHuPH20
Cell line	3D35M	2B2
Media used to expand cell inoculum	Contains 0.10 µM methotrexate (0.045 mg/L)	Contains 20 µM methotrexate (9 mg/L)
Media in 6 L cultures onwards	Contains 0.10 µM methotrexate	Contains no methotrexate
36 L spinner flask	No instrumentation 20 L operating volume.	Equipped with instrumentation that monitors and controls pH, dissolved oxygen, sparge and overlay gas flow rate. 32 L operating volume
Final operating volume in bioreactor	Approx. 100 L in a 125 L bioreactor (initial culture volume + 65 L)	Approx. 300 L in a 400 L bioreactor (initial culture volume + 260 L)
Culture media in final bioreactor	No rHuInsulin	5.0 mg/L rHuInsulin
Media feed volume	Scaled at 4% of the bioreactor cell culture volume i.e. 3.4, 3.5 and 3.7 L, resulting in a target bioreactor volume of ~92 L.	Scaled at 4% of the bioreactor cell culture volume i.e. 10.4, 10.8, 11.2 and 11.7 L, resulting in a target bioreactor volume of ~303 L.
Media feed	Feed #1 Medium: CD CHO + 50 g/L Glucose + 8 mM GlutaMAX™-1 Feed #2 (CD CHO + 50 g/L Glucose + 8 mM GlutaMAX + 1.1 g/L Sodium Butyrate Feed #3: CD CHO + 50 g/L Glucose + 8 mM GlutaMAX + 1.1 g/L Sodium Butyrate	Feed #1 Medium: 4 × CD CHO + 33 g/L Glucose + 32 mM Glutamax + 16.6 g/L Yeastolate + 33 mg/L rHuInsulin Feed #2: 2 × CD CHO + 33 g/L Glucose + 16 mM Glutamax + 33.4 g/L Yeastolate + 0.92 g/L Sodium Butyrate Feed #3: 1 × CD CHO + 50 g/L Glucose + 10 mM Glutamax + 50 g/L Yeastolate + 1.80 g/L Sodium Butyrate Feed #4: 1 × CD CHO + 33 g/L Glucose + 6.6 mM Glutamax + 50 g/L Yeastolate + 0.92 g/L Sodium Butyrate
Filtration of bioreactor cell culture	Four polyethersulfone filters (8.0 µm, 0.65 µm, 0.22 µm and 0.22 µm) in series 100 L storage bag	1 st stage - Four modules in parallel, each with a layer of diatomaceous earth graded to 4-8 µm and a layer of diatomaceous earth graded to 1.4-1.1 µm, followed by a cellulose membrane. 2 nd stage - single module containing a layer of diatomaceous earth graded to 0.4-0.11 µm and a layer of diatomaceous earth graded to <0.1 µm, followed by a cellulose membrane. 3 rd stage - 0.22 µm polyethersulfone filter 300 L storage bag Harvested cell culture is supplemented with 10 mM EDTA, 10 mM Tris to a pH of 7.5.
Concentration and buffer exchange prior to chromatography	Concentrate with 2 TFF with Millipore Spiral Polyethersulfone 30K MWCO Filter Buffer Exchange the Concentrate 6 × with 10 mM Hepes, 25 mM NaCl, pH 7.0 20 L sterile storage bag	Concentrate using four Sartorius Sartoslice TFF 30K MWCO Filter Buffer Exchange the Concentrate 10 × with 10 mM Tris, 20 mM Na2SO4, pH 7.5 50 L sterile storage bag

TABLE 19-continued

Process Difference	Gen1 soluble rHuPH20	Gen2 soluble rHuPH20
Viral inactivation prior to chromatography	None	Viral inactivation performed with the addition of a 1% Triton X-100, 0.3% Tributyl Phosphate, pH 7.5,
1 st purification step (Q sepharose)	No absorbance reading	A280 measurements at the beginning and end
Viral filtration after chromatography	Pall DV-20 filter (20 nm)	Sartorius Virosart filter (20 nm)
Concentration and buffer exchange after chromatography	Hepes/saline pH 7.0 buffer Protein concentrated to 1 mg/ml	Histidine/saline, pH 6.0 buffer Protein concentrated to 10 mg/ml

15

Since modifications will be apparent to those of skill in this art, it is intended that this invention be limited only by the scope of the appended claims.

SEQUENCE LISTING

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Tyr Asn His His Tyr Lys Lys Pro Gly Tyr Asn Gly Ser Cys Phe Asn

-continued

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Thr Ala Leu Tyr Pro Ser Ile Tyr Leu Asn Thr Gln Gln Ser Pro Val	260	265	270
Ala Ala Thr Leu Tyr Val Arg Asn Arg Val Arg Glu Ala Ile Arg Val	275	280	285
Ser Lys Ile Pro Asp Ala Lys Ser Pro Leu Pro Val Phe Ala Tyr Thr	290	295	300
Arg Ile Val Phe Thr Asp Gln Val Leu Lys Phe Leu Ser Gln Asp Glu	305	310	315
Leu Val Tyr Thr Phe Gly Glu Thr Val Ala Leu Gly Ala Ser Gly Ile	325	330	335
Val Ile Trp Gly Thr Leu Ser Ile Met Arg Ser Met Lys Ser Cys Leu	340	345	350
Leu Leu Asp Asn Tyr Met Glu Thr Ile Leu Asn Pro Tyr Ile Ile Asn	355	360	365
Val Thr Leu Ala Ala Lys Met Cys Ser Gln Val Leu Cys Gln Glu Gln	370	375	380
Gly Val Cys Ile Arg Lys Asn Trp Asn Ser Ser Asp Tyr Leu His Leu	385	390	395
Asn Pro Asp Asn Phe Ala Ile Gln Leu Glu Lys Gly Gly Lys Phe Thr	405	410	415
Val Arg Gly Lys Pro Thr Leu Glu Asp Leu Glu Gln Phe Ser Glu Lys	420	425	430
Phe Tyr Cys Ser Cys Tyr Ser Thr Leu Ser Cys Lys Glu Lys Ala Asp	435	440	445
Val Lys Asp Thr Asp Ala Val Asp Val Cys Ile Ala Asp Gly Val Cys	450	455	460
Ile Asp Ala Phe Leu Lys Pro Pro Met Glu Thr Glu Glu Pro Gln Ile	465	470	475
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Pro Tyr Ile Asp Ser Ile Thr Gly Val Thr Val Asn Gly Gly Ile Pro	65	70	75
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Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys	Leu	Leu	Arg
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Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	Tyr	Asn	His
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Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln	Gly	Val	Cys
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Leu Val Tyr Thr Phe Gly Glu Thr Val Ala Leu Gly Ala Ser Gly Ile
325 330 335

Val Ile Trp Gly Thr Leu Ser Ile Met Arg Ser Met Lys Ser Cys Leu
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Leu Leu Asp Asn Tyr Met Glu Thr Ile Leu Asn Pro Tyr Ile Ile Asn
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Val Thr Leu Ala Ala Lys Met Cys Ser Gln Val Leu Cys Gln Glu Gln
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Gly Val Cys Ile Arg Lys Asn Trp Asn Ser Ser Asp Tyr Leu His Leu
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Phe	Tyr															
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<220> FEATURE:																
<223> OTHER INFORMATION: soluble rHuPH20 1-447																
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Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe	Asp	Glu	Pro	
			20					25					30			
Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg	Ile	Asn	Ala	
	35						40					45				
Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	Gly	Tyr	Tyr	
	50					55				60						
Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly	Gly	Ile	Pro	
65					70					75					80	
Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys	Lys	Asp	Ile	
			85					90						95		
Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val	Ile	Asp	Trp	
			100					105						110		
Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro	Lys	Asp	Val	
		115					120					125				
Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn	Val	Gln	Leu	
	130					135					140					
Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe	Glu	Lys	Ala	
145					150					155					160	
Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys	Leu	Leu	Arg	
			165						170					175		
Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	Tyr	Asn	His	
		180						185					190			
His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn	Val	Glu	Ile	
	195						200					205				
Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser	Thr	Ala	Leu	
	210					215					220					
Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val	Ala	Ala	Thr	
225					230					235					240	
Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val	Ser	Lys	Ile	
			245					250						255		
Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr	Arg	Ile	Val	
		260						265					270			

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Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu	Leu	Val	Tyr
		275					280					285			
Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	Val	Ile	Trp
	290					295					300				
Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu	Leu	Leu	Asp
305					310					315					320
Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn	Val	Thr	Leu
				325					330					335	
Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln	Gly	Val	Cys
			340					345					350		
Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu	Asn	Pro	Asp
		355					360					365			
Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr	Val	Arg	Gly
	370					375					380				
Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys	Phe	Tyr	Cys
385					390					395					400
Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp	Val	Lys	Asp
				405					410					415	
Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys	Ile	Asp	Ala
			420					425					430		
Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu	Pro	Gln	Ile	Phe	Tyr	
		435					440					445			
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<223> OTHER INFORMATION: soluble rHuPH20 1-446															
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Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe	Asp	Glu	Pro
			20					25					30		
Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg	Ile	Asn	Ala
		35					40					45			
Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	Gly	Tyr	Tyr
	50					55					60				
Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly	Gly	Ile	Pro
65					70					75					80
Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys	Lys	Asp	Ile
				85					90					95	
Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val	Ile	Asp	Trp
			100					105					110		
Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro	Lys	Asp	Val
		115					120					125			
Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn	Val	Gln	Leu
	130					135					140				
Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe	Glu	Lys	Ala
145					150					155					160
Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys	Leu	Leu	Arg
				165					170				175		
Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	Tyr	Asn	His
			180					185					190		

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His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn	Val	Glu	Ile	
		195					200					205				
Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser	Thr	Ala	Leu	
	210					215				220						
Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val	Ala	Ala	Thr	
225					230					235					240	
Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val	Ser	Lys	Ile	
				245					250					255		
Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr	Arg	Ile	Val	
			260					265					270			
Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu	Leu	Val	Tyr	
		275					280					285				
Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	Val	Ile	Trp	
	290					295					300					
Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu	Leu	Leu	Asp	
305					310					315					320	
Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn	Val	Thr	Leu	
				325					330					335		
Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln	Gly	Val	Cys	
			340					345					350			
Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu	Asn	Pro	Asp	
		355					360					365				
Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr	Val	Arg	Gly	
	370					375					380					
Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys	Phe	Tyr	Cys	
385					390					395					400	
Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp	Val	Lys	Asp	
				405					410					415		
Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys	Ile	Asp	Ala	
		420						425					430			
Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu	Pro	Gln	Ile	Phe			
		435					440					445				
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<211> LENGTH: 445																
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<220> FEATURE:																
<223> OTHER INFORMATION: soluble rHuPH20 1-445																
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Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe	Asp	Glu	Pro	
			20					25					30			
Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg	Ile	Asn	Ala	
		35					40					45				
Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	Gly	Tyr	Tyr	
	50					55				60						
Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly	Gly	Ile	Pro	
65					70					75				80		
Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys	Lys	Asp	Ile	
			85					90					95			
Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val	Ile	Asp	Trp	
			100					105					110			

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Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro	Lys	Asp	Val
		115					120					125			
Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn	Val	Gln	Leu
	130					135					140				
Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe	Glu	Lys	Ala
145					150					155					160
Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys	Leu	Leu	Arg
				165					170						175
Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	Tyr	Asn	His
			180					185						190	
His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn	Val	Glu	Ile
		195					200					205			
Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser	Thr	Ala	Leu
	210					215					220				
Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val	Ala	Ala	Thr
225					230					235					240
Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val	Ser	Lys	Ile
				245					250						255
Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr	Arg	Ile	Val
			260					265							
Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu	Leu	Val	Tyr
		275					280					285			
Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	Val	Ile	Trp
	290					295					300				
Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu	Leu	Leu	Asp
305					310					315					320
Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn	Val	Thr	Leu
				325					330					335	
Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln	Gly	Val	Cys
			340					345					350		
Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu	Asn	Pro	Asp
			355				360					365			
Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr	Val	Arg	Gly
	370					375					380				
Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys	Phe	Tyr	Cys
385					390					395					400
Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp	Val	Lys	Asp
				405					410					415	
Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys	Ile	Asp	Ala
			420					425					430		
Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu	Pro	Gln	Ile			
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<212> TYPE: PRT															
<213> ORGANISM: Homo sapiens															
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<223> OTHER INFORMATION: soluble rHuPH20 1-444															
<400> SEQUENCE: 7															
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Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe	Asp	Glu	Pro
			20					25					30		

Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg	Ile	Asn	Ala	
		35					40					45				
Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	Gly	Tyr	Tyr	
		50					55					60				
Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly	Gly	Ile	Pro	
65					70					75				80		
Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys	Lys	Asp	Ile	
				85					90					95		
Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val	Ile	Asp	Trp	
				100					105					110		
Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro	Lys	Asp	Val	
				115					120					125		
Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn	Val	Gln	Leu	
								135					140			
Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe	Glu	Lys	Ala	
145					150					155					160	
Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys	Leu	Leu	Arg	
				165					170					175		
Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	Tyr	Asn	His	
				180					185					190		
His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn	Val	Glu	Ile	
				195					200					205		
Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser	Thr	Ala	Leu	
								215					220			
Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val	Ala	Ala	Thr	
225					230					235					240	
Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val	Ser	Lys	Ile	
						245					250					255
Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr	Arg	Ile	Val	
								265							270	
Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu	Leu	Val	Tyr	
								280					285			
Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	Val	Ile	Trp	
								295					300			
Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu	Leu	Leu	Asp	
305					310					315					320	
Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn	Val	Thr	Leu	
										330					335	
Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln	Gly	Val	Cys	
										345					350	
Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu	Asn	Pro	Asp	
														365		
Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr	Val	Arg	Gly	
														380		
Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys	Phe	Tyr	Cys	
385											395					400
Ser	Cys	Tyr														

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<210> SEQ ID NO 8
<211> LENGTH: 443
<212> TYPE: PRT
<213> ORGANISM: Homo sapiens
<220> FEATURE:
<223> OTHER INFORMATION: soluble rHuPH20 1-443

<400> SEQUENCE: 8

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Ala Trp Asn Ala Pro Ser Glu Phe Cys Leu Gly Lys Phe Asp Glu Pro
20 25 30

Leu Asp Met Ser Leu Phe Ser Phe Ile Gly Ser Pro Arg Ile Asn Ala
35 40 45

Thr Gly Gln Gly Val Thr Ile Phe Tyr Val Asp Arg Leu Gly Tyr Tyr
50 55 60

Pro Tyr Ile Asp Ser Ile Thr Gly Val Thr Val Asn Gly Gly Ile Pro
65 70 75 80

Gln Lys Ile Ser Leu Gln Asp His Leu Asp Lys Ala Lys Lys Asp Ile
85 90 95

Thr Phe Tyr Met Pro Val Asp Asn Leu Gly Met Ala Val Ile Asp Trp
100 105 110

Glu Glu Trp Arg Pro Thr Trp Ala Arg Asn Trp Lys Pro Lys Asp Val
115 120 125

Tyr Lys Asn Arg Ser Ile Glu Leu Val Gln Gln Gln Asn Val Gln Leu
130 135 140

Ser Leu Thr Glu Ala Thr Glu Lys Ala Lys Gln Glu Phe Glu Lys Ala
145 150 155 160

Gly Lys Asp Phe Leu Val Glu Thr Ile Lys Leu Gly Lys Leu Leu Arg
165 170 175

Pro Asn His Leu Trp Gly Tyr Tyr Leu Phe Pro Asp Cys Tyr Asn His
180 185 190

His Tyr Lys Lys Pro Gly Tyr Asn Gly Ser Cys Phe Asn Val Glu Ile
195 200 205

Lys Arg Asn Asp Asp Leu Ser Trp Leu Trp Asn Glu Ser Thr Ala Leu
210 215 220

Tyr Pro Ser Ile Tyr Leu Asn Thr Gln Gln Ser Pro Val Ala Ala Thr
225 230 235 240

Leu Tyr Val Arg Asn Arg Val Arg Glu Ala Ile Arg Val Ser Lys Ile
245 250 255

Pro Asp Ala Lys Ser Pro Leu Pro Val Phe Ala Tyr Thr Arg Ile Val
260 265 270

Phe Thr Asp Gln Val Leu Lys Phe Leu Ser Gln Asp Glu Leu Val Tyr
275 280 285

Thr Phe Gly Glu Thr Val Ala Leu Gly Ala Ser Gly Ile Val Ile Trp
290 295 300

Gly Thr Leu Ser Ile Met Arg Ser Met Lys Ser Cys Leu Leu Leu Asp
305 310 315 320

Asn Tyr Met Glu Thr Ile Leu Asn Pro Tyr Ile Ile Asn Val Thr Leu
325 330 335

Ala Ala Lys Met Cys Ser Gln Val Leu Cys Gln Glu Gln Gly Val Cys
340 345 350

Ile Arg Lys Asn Trp Asn Ser Ser Asp Tyr Leu His Leu Asn Pro Asp
355 360 365

Asn Phe Ala Ile Gln Leu Glu Lys Gly Gly Lys Phe Thr Val Arg Gly

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370					375					380					
Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys	Phe	Tyr	Cys
385					390					395					400
Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp	Val	Lys	Asp
				405					410					415	
Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys	Ile	Asp	Ala
			420					425					430		
Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu	Pro					
		435					440								
<210> SEQ ID NO 9															
<211> LENGTH: 442															
<212> TYPE: PRT															
<213> ORGANISM: Homo sapiens															
<220> FEATURE:															
<223> OTHER INFORMATION: soluble rHuPH20 1-442															
<400> SEQUENCE: 9															
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Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe	Asp	Glu	Pro
			20					25					30		
Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg	Ile	Asn	Ala
		35					40					45			
Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	Gly	Tyr	Tyr
	50					55				60					
Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly	Gly	Ile	Pro
65					70					75					80
Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys	Lys	Asp	Ile
				85					90					95	
Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val	Ile	Asp	Trp
			100					105					110		
Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro	Lys	Asp	Val
		115					120					125			
Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn	Val	Gln	Leu
	130					135					140				
Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe	Glu	Lys	Ala
145					150					155					160
Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys	Leu	Leu	Arg
				165					170					175	
Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	Tyr	Asn	His
			180					185					190		
His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn	Val	Glu	Ile
	195						200					205			
Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser	Thr	Ala	Leu
	210					215					220				
Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val	Ala	Ala	Thr
225					230					235					240
Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val	Ser	Lys	Ile
				245					250					255	
Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr	Arg	Ile	Val
			260					265					270		
Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu	Leu	Val	Tyr
		275					280					285			
Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	Val	Ile	Trp

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290					295					300					
Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu	Leu	Leu	Asp
305					310					315					320
Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn	Val	Thr	Leu
				325					330					335	
Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln	Gly	Val	Cys
			340					345					350		
Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu	Asn	Pro	Asp
		355					360					365			
Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr	Val	Arg	Gly
	370					375					380				
Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys	Phe	Tyr	Cys
385					390					395					400
Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp	Val	Lys	Asp
				405					410					415	
Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys	Ile	Asp	Ala
			420					425					430		
Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu						
	435					440									
<210> SEQ ID NO 10															
<211> LENGTH: 450															
<212> TYPE: PRT															
<213> ORGANISM: Bos taurus															
<220> FEATURE:															
<223> OTHER INFORMATION: hyaluronidase															
<400> SEQUENCE: 10															
Met	Arg	Pro	Phe	Ser	Leu	Glu	Val	Ser	Leu	His	Leu	Pro	Trp	Ala	Met
1				5					10					15	
Ala	Ala	His	Leu	Leu	Pro	Val	Cys	Thr	Leu	Phe	Leu	Asn	Leu	Leu	Ser
			20					25					30		
Met	Thr	Gln	Gly	Ser	Arg	Asp	Pro	Val	Val	Pro	Asn	Gln	Pro	Phe	Thr
		35					40					45			
Thr	Ile	Trp	Asn	Ala	Asn	Thr	Glu	Trp	Cys	Met	Lys	Lys	His	Gly	Val
	50					55					60				
Asp	Val	Asp	Ile	Ser	Ile	Phe	Asp	Val	Val	Thr	Asn	Pro	Gly	Gln	Thr
65					70					75					80
Phe	Arg	Gly	Pro	Asn	Met	Thr	Ile	Phe	Tyr	Ser	Ser	Gln	Leu	Gly	Thr
				85					90					95	
Tyr	Pro	Tyr	Tyr	Thr	Ser	Ala	Gly	Glu	Pro	Val	Phe	Gly	Gly	Leu	Pro
			100					105					110		
Gln	Asn	Ala	Ser	Leu	Asn	Ala	His	Leu	Ala	Arg	Thr	Phe	Gln	Asp	Ile
		115					120					125			
Leu	Ala	Ala	Met	Pro	Glu	Pro	Arg	Phe	Ser	Gly	Leu	Ala	Val	Ile	Asp
	130					135					140				
Trp	Glu	Ala	Trp	Arg	Pro	Arg	Trp	Ala	Phe	Asn	Trp	Asp	Thr	Lys	Asp
145					150					155					160
Ile	Tyr	Arg	Gln	Arg	Ser	Arg	Ala	Leu	Val	Gln	Lys	Gln	His	Pro	Asp
				165					170					175	
Trp	Leu	Ala	Pro	Arg	Val	Glu	Ala	Ala	Ala	Gln	Asp	Gln	Phe	Glu	Gly
			180				185						190		
Ala	Ala	Glu	Glu	Trp	Met	Ala	Gly	Thr	Leu	Lys	Leu	Gly	Gln	Ala	Leu
		195				200						205			
Arg	Pro	Gln	Gly	Leu	Trp	Gly	Phe	Tyr	Asn	Phe	Pro	Glu	Cys	Tyr	Asn

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210	215	220
Tyr Asp Phe Lys Ser Pro Asn Tyr Thr Gly Arg Cys Pro Leu Asn Ile 225 230 235 240		
Cys Ala Gln Asn Asp Gln Leu Gly Trp Leu Trp Gly Gln Ser Arg Ala 245 250 255		
Leu Tyr Pro Ser Ile Tyr Leu Pro Ala Ala Leu Glu Gly Thr Lys Lys 260 265 270		
Thr Gln Met Phe Val Gln His Arg Val Ala Glu Ala Phe Arg Val Ala 275 280 285		
Ala Gly Ala Gly Asp Pro Lys Leu Pro Val Leu Pro Tyr Met Gln Leu 290 295 300		
Phe Tyr Asp Met Thr Asn His Phe Leu Pro Ala Glu Glu Leu Glu His 305 310 315 320		
Ser Leu Gly Glu Ser Ala Ala Gln Gly Ala Ala Gly Val Val Leu Trp 325 330 335		
Val Ser Trp Leu Ser Thr Ser Thr Lys Glu Ser Cys Gln Ala Ile Lys 340 345 350		
Glu Tyr Val Asp Thr Thr Leu Gly Pro Ser Ile Leu Asn Val Thr Ser 355 360 365		
Gly Ala Arg Leu Cys Ser Gln Val Leu Cys Ser Gly His Gly Arg Cys 370 375 380		
Ala Arg Arg Pro Ser Tyr Pro Lys Ala Arg Leu Ile Leu Asn Ser Thr 385 390 395 400		
Ser Phe Ser Ile Lys Pro Thr Pro Gly Gly Gly Pro Leu Thr Leu Gln 405 410 415		
Gly Ala Leu Ser Leu Glu Asp Arg Leu Arg Met Ala Val Glu Phe Glu 420 425 430		
Cys Arg Cys Tyr Arg Gly Trp Arg Gly Thr Arg Cys Glu Gln Trp Gly 435 440 445		
Met Trp 450		
<210> SEQ ID NO 11 <211> LENGTH: 553 <212> TYPE: PRT <213> ORGANISM: Bos taurus <220> FEATURE: <223> OTHER INFORMATION: PH20 <400> SEQUENCE: 11		
Met Arg Met Leu Arg Arg His His Ile Ser Phe Arg Ser Phe Ala Gly 1 5 10 15		
Ser Ser Gly Thr Pro Gln Ala Val Phe Thr Phe Leu Leu Leu Pro Cys 20 25 30		
Cys Leu Ala Leu Asp Phe Arg Ala Pro Pro Leu Ile Ser Asn Thr Ser 35 40 45		
Phe Leu Trp Ala Trp Asn Ala Pro Val Glu Arg Cys Val Asn Arg Arg 50 55 60		
Phe Gln Leu Pro Pro Asp Leu Arg Leu Phe Ser Val Lys Gly Ser Pro 65 70 75 80		
Gln Lys Ser Ala Thr Gly Gln Phe Ile Thr Leu Phe Tyr Ala Asp Arg 85 90 95		
Leu Gly Tyr Tyr Pro His Ile Asp Glu Lys Thr Gly Lys Thr Val Phe 100 105 110		
Gly Gly Ile Pro Gln Leu Gly Asn Leu Lys Ser His Met Glu Lys Ala		

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115					120					125						
Lys	Asn	Asp	Ile	Ala	Tyr	Tyr	Ile	Pro	Asn	Asp	Ser	Val	Gly	Leu	Ala	
130					135					140						
Val	Ile	Asp	Trp	Glu	Asn	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	
145					150					155					160	
Pro	Lys	Asp	Val	Tyr	Arg	Asp	Glu	Ser	Val	Glu	Leu	Val	Leu	Gln	Lys	
165					170					175						
Asn	Pro	Gln	Leu	Ser	Phe	Pro	Glu	Ala	Ser	Lys	Ile	Ala	Lys	Val	Asp	
180					185					190						
Phe	Glu	Thr	Ala	Gly	Lys	Ser	Phe	Met	Gln	Glu	Thr	Leu	Lys	Leu	Gly	
195					200					205						
Lys	Leu	Leu	Arg	Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	
210					215					220						
Cys	Tyr	Asn	His	Asn	His	Asn	Gln	Pro	Thr	Tyr	Asn	Gly	Asn	Cys	Pro	
225					230					235					240	
Asp	Val	Glu	Lys	Arg	Arg	Asn	Asp	Asp	Leu	Glu	Trp	Leu	Trp	Lys	Glu	
245					250					255						
Ser	Thr	Ala	Leu	Phe	Pro	Ser	Val	Tyr	Leu	Asn	Ile	Arg	Leu	Lys	Ser	
260					265					270						
Thr	Gln	Asn	Ala	Ala	Leu	Tyr	Val	Arg	Asn	Arg	Val	Gln	Glu	Ala	Ile	
275					280					285						
Arg	Leu	Ser	Lys	Ile	Ala	Ser	Val	Glu	Ser	Pro	Leu	Pro	Val	Phe	Val	
290					295					300						
Tyr	Ala	Arg	Pro	Val	Phe	Thr	Asp	Gly	Ser	Ser	Thr	Tyr	Leu	Ser	Gln	
305					310					315					320	
Gly	Asp	Leu	Val	Asn	Ser	Val	Gly	Glu	Ile	Val	Ser	Leu	Gly	Ala	Ser	
325					330					335						
Gly	Ile	Ile	Met	Trp	Gly	Ser	Leu	Asn	Leu	Ser	Leu	Ser	Met	Gln	Ser	
340					345					350						
Cys	Met	Asn	Leu	Gly	Thr	Tyr	Leu	Asn	Thr	Thr	Leu	Asn	Pro	Tyr	Ile	
355					360					365						
Ile	Asn	Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	His	
370					375					380						
Asn	Glu	Gly	Val	Cys	Thr	Arg	Lys	His	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	
385					390					395					400	
His	Leu	Asn	Pro	Met	Asn	Phe	Ala	Ile	Gln	Thr	Gly	Glu	Gly	Gly	Lys	
405					410					415						
Tyr	Thr	Val	Pro	Gly	Thr	Val	Thr	Leu	Glu	Asp	Leu	Gln	Lys	Phe	Ser	
420					425					430						
Asp	Thr	Phe	Tyr	Cys	Ser	Cys	Tyr	Ala	Asn	Ile	His	Cys	Lys	Lys	Arg	
435					440					445						
Val	Asp	Ile	Lys	Asn	Val	His	Ser	Val	Asn	Val	Cys	Met	Ala	Glu	Asp	
450					455					460						
Ile	Cys	Ile	Asp	Ser	Pro	Val	Lys	Leu	Gln	Pro	Ser	Asp	His	Ser	Ser	
465					470					475					480	
Ser	Gln	Glu	Ala	Ser	Thr	Thr	Thr	Phe	Ser	Ser	Ile	Ser	Pro	Ser	Thr	
485					490					495						
Thr	Thr	Ala	Thr	Val	Ser	Pro	Cys	Thr	Pro	Glu	Lys	His	Ser	Pro	Glu	
500					505					510						
Cys	Leu	Lys	Val	Arg	Cys	Ser	Glu	Val	Ile	Pro	Asn	Val	Thr	Gln	Lys	
515					520					525						
Ala	Cys	Gln	Ser	Val	Lys	Leu	Lys	Asn	Ile	Ser	Tyr	Gln	Ser	Pro	Ile	
530					535					540						

<210> SEQ ID NO 13

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<211> LENGTH: 340
<212> TYPE: PRT
<213> ORGANISM: *Vespula vulgaris*
<220> FEATURE:
<223> OTHER INFORMATION: hyaluronidase B

<400> SEQUENCE: 13

Asp Arg Thr Ile Trp Pro Lys Lys Gly Phe Ser Ile Tyr Trp Asn Ile
1 5 10 15

Pro Thr His Phe Cys His Asn Phe Gly Val Tyr Phe Lys Glu Leu Lys
20 25 30

Gln Phe Asn Ile Lys Tyr Asn Ser Met Asn Asn Phe Arg Gly Glu Thr
35 40 45

Ile Ser Leu Phe Tyr Asp Pro Gly Asn Phe Pro Ser Met Val Leu Leu
50 55 60

Lys Asn Gly Thr Tyr Glu Ile Arg Asn Glu Gly Val Pro Gln Lys Gly
65 70 75 80

Asn Leu Thr Ile His Leu Glu Gln Phe Thr Lys Glu Leu Asp Glu Ile
85 90 95

Tyr Pro Lys Lys Ile Ala Gly Gly Ile Gly Val Ile His Phe His Asn
100 105 110

Trp Arg Pro Ile Phe Arg Arg Asn Val Asp Asn Leu Lys Ile Asn Lys
115 120 125

Asp Ile Ser Ile Asp Leu Val Arg Lys Glu His Pro Lys Trp Asp Lys
130 135 140

Ser Met Ile Glu Lys Glu Ala Ser Asn Arg Phe Glu Thr Ser Ala Lys
145 150 155 160

Ile Phe Met Glu Lys Thr Leu Lys Leu Ala Lys Glu Ile Arg Lys Lys
165 170 175

Thr Glu Trp Gly Tyr His Gly Tyr Pro His Cys Leu Ser Gly Ser Thr
180 185 190

Asp Lys Pro Ser Phe Asp Cys Asp Ala Leu Ser Met Ser Glu Asn Asp
195 200 205

Lys Met Ser Trp Leu Phe Asn Asn Gln Asn Val Leu Leu Pro Ser Ile
210 215 220

Tyr Leu Lys Asn Val Leu Lys Pro Asp Glu Lys Ile His Leu Val Gln
225 230 235 240

Glu Arg Leu Lys Glu Ala Ile Arg Ile Ser Lys Asn Phe Lys His Leu
245 250 255

Pro Lys Val Leu Pro Tyr Trp Trp Tyr Thr Tyr Gln Asp Lys Glu Ser
260 265 270

Ile Phe Leu Thr Glu Ala Asp Val Lys Asn Thr Phe Lys Glu Ile Leu
275 280 285

Thr Asn Gly Ala Asp Gly Ile Ile Ile Trp Gly Val Ser Tyr Glu Leu
290 295 300

Thr Asp Arg Lys Arg Cys Glu Lys Leu Lys Glu Tyr Leu Met Lys Ile
305 310 315 320

Leu Gly Pro Ile Ala Phe Lys Val Thr Lys Ala Val Lys Glu Asn Thr
325 330 335

Pro Leu Asn Phe
340

<210> SEQ ID NO 14
<211> LENGTH: 382
<212> TYPE: PRT
<213> ORGANISM: *Apis mellifera*

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<220> FEATURE:
<223> OTHER INFORMATION: hyaluronidase
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<400> SEQUENCE: 14

Met 1	Ser	Arg	Pro	Leu 5	Val	Ile	Thr	Glu	Gly 10	Met	Met	Ile	Gly	Val 15	Leu
Leu	Met	Leu	Ala 20	Pro	Ile	Asn	Ala	Leu 25	Leu	Leu	Gly	Phe	Val 30	Gln	Ser
Thr	Pro	Asp 35	Asn	Asn	Lys	Thr	Val 40	Arg	Glu	Phe	Asn	Val 45	Tyr	Trp	Asn
Val	Pro	Thr	Phe	Met	Cys	His 55	Lys	Tyr	Gly	Leu	Arg 60	Phe	Glu	Glu	Val
Ser 65	Glu	Lys	Tyr	Gly	Ile 70	Leu	Gln	Asn	Trp	Met 75	Asp	Lys	Phe	Arg	Gly 80
Glu	Glu	Ile	Ala	Ile 85	Leu	Tyr	Asp	Pro	Gly 90	Met	Phe	Pro	Ala	Leu 95	Leu
Lys	Asp	Pro	Asn 100	Gly	Asn	Val	Val	Ala 105	Arg	Asn	Gly	Gly	Val 110	Pro	Gln
Leu	Gly	Asn 115	Leu	Thr	Lys	His	Leu 120	Gln	Val	Phe	Arg	Asp 125	His	Leu	Ile
Asn	Gln	Ile	Pro	Asp	Lys	Ser 135	Phe	Pro	Gly	Val	Gly 140	Val	Ile	Asp	Phe
Glu 145	Ser	Trp	Arg	Pro	Ile 150	Phe	Arg	Gln	Asn	Trp 155	Ala	Ser	Leu	Gln	Pro 160
Tyr	Lys	Lys	Leu	Ser 165	Val	Glu	Val	Val	Arg 170	Arg	Glu	His	Pro	Phe 175	Trp
Asp	Asp	Gln	Arg 180	Val	Glu	Gln	Glu	Ala 185	Lys	Arg	Arg	Phe	Glu 190	Lys	Tyr
Gly	Gln	Leu 195	Phe	Met	Glu	Glu	Thr 200	Leu	Lys	Ala	Ala	Lys 205	Arg	Met	Arg
Pro	Ala 210	Ala	Asn	Trp	Gly	Tyr 215	Tyr	Ala	Tyr	Pro	Tyr 220	Cys	Tyr	Asn	Leu
Thr 225	Pro	Asn	Gln	Pro	Ser 230	Ala	Gln	Cys	Glu	Ala 235	Thr	Thr	Met	Gln	Glu 240
Asn	Asp	Lys	Met 245	Ser	Trp	Leu	Phe	Glu	Ser 250	Glu	Asp	Val	Leu	Leu 255	Pro
Ser	Val	Tyr	Leu 260	Arg	Trp	Asn	Leu	Thr 265	Ser	Gly	Glu	Arg	Val 270	Gly	Leu
Val	Gly	Gly 275	Arg	Val	Lys	Glu	Ala 280	Leu	Arg	Ile	Ala	Arg 285	Gln	Met	Thr
Thr 290	Ser	Arg	Lys	Lys	Val	Leu 295	Pro	Tyr	Tyr	Trp	Tyr 300	Lys	Tyr	Gln	Asp
Arg 305	Arg	Asp	Thr	Asp	Leu 310	Ser	Arg	Ala	Asp	Leu 315	Glu	Ala	Thr	Leu	Arg 320
Lys	Ile	Thr	Asp	Leu 325	Gly	Ala	Asp	Gly	Phe 330	Ile	Ile	Trp	Gly	Ser 335	Ser
Asp	Asp	Ile	Asn 340	Thr	Lys	Ala	Lys	Cys 345	Leu	Gln	Phe	Arg	Glu 350	Tyr	Leu
Asn	Asn	Glu 355	Leu	Gly	Pro	Ala	Val 360	Lys	Arg	Ile	Ala	Leu 365	Asn	Asn	Asn
Ala	Asn 370	Asp	Arg	Leu	Thr	Val 375	Asp	Val	Ser	Val	Asp 380	Gln	Val		

<210> SEQ ID NO 15

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<211> LENGTH: 331
<212> TYPE: PRT
<213> ORGANISM: Dolichovespula maculata
<220> FEATURE:
<223> OTHER INFORMATION: hyaluronidase

<400> SEQUENCE: 15

Ser Glu Arg Pro Lys Arg Val Phe Asn Ile Tyr Trp Asn Val Pro Thr
1 5 10 15

Phe Met Cys His Gln Tyr Gly Leu Tyr Phe Asp Glu Val Thr Asn Phe
20 25 30

Asn Ile Lys His Asn Ser Lys Asp Asp Phe Gln Gly Asp Lys Ile Ser
35 40 45

Ile Phe Tyr Asp Pro Gly Glu Phe Pro Ala Leu Leu Pro Leu Lys Glu
50 55 60

Gly Asn Tyr Lys Ile Arg Asn Gly Gly Val Pro Gln Glu Gly Asn Ile
65 70 75 80

Thr Ile His Leu Gln Arg Phe Ile Glu Asn Leu Asp Lys Thr Tyr Pro
85 90 95

Asn Arg Asn Phe Asn Gly Ile Gly Val Ile Asp Phe Glu Arg Trp Arg
100 105 110

Pro Ile Phe Arg Gln Asn Trp Gly Asn Met Met Ile His Lys Lys Phe
115 120 125

Ser Ile Asp Leu Val Arg Asn Glu His Pro Phe Trp Asp Lys Lys Met
130 135 140

Ile Glu Leu Glu Ala Ser Lys Arg Phe Glu Lys Tyr Ala Arg Leu Phe
145 150 155 160

Met Glu Glu Thr Leu Lys Leu Ala Lys Lys Thr Arg Lys Gln Ala Asp
165 170 175

Trp Gly Tyr Tyr Gly Tyr Pro Tyr Cys Phe Asn Met Ser Pro Asn Asn
180 185 190

Leu Val Pro Asp Cys Asp Ala Thr Ala Met Leu Glu Asn Asp Lys Met
195 200 205

Ser Trp Leu Phe Asn Asn Gln Asn Val Leu Leu Pro Ser Val Tyr Ile
210 215 220

Arg His Glu Leu Thr Pro Asp Gln Arg Val Gly Leu Val Gln Gly Arg
225 230 235 240

Val Lys Glu Ala Val Arg Ile Ser Asn Asn Leu Lys His Ser Pro Lys
245 250 255

Val Leu Ser Tyr Trp Trp Tyr Val Tyr Gln Asp Asp Thr Asn Thr Phe
260 265 270

Leu Thr Glu Thr Asp Val Lys Lys Thr Phe Gln Glu Ile Ala Ile Asn
275 280 285

Gly Gly Asp Gly Ile Ile Ile Trp Gly Ser Ser Ser Asp Val Asn Ser
290 295 300

Leu Ser Lys Cys Lys Arg Leu Arg Glu Tyr Leu Leu Thr Val Leu Gly
305 310 315 320

Pro Ile Thr Val Asn Val Thr Glu Thr Val Asn
325 330

<210> SEQ ID NO 16
<211> LENGTH: 367
<212> TYPE: PRT
<213> ORGANISM: Polistes annularis
<220> FEATURE:
<223> OTHER INFORMATION: hyaluronidase

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<400> SEQUENCE: 16

Tyr Val Ser Leu Ser Pro Asp Ser Val Phe Asn Ile Ile Thr Asp Asp
1 5 10 15

Ile Ser His Gln Ile Leu Ser Arg Ser Asn Cys Glu Arg Ser Lys Arg
20 25 30

Pro Lys Arg Val Phe Ser Ile Tyr Trp Asn Val Pro Thr Phe Met Cys
35 40 45

His Gln Tyr Gly Met Asn Phe Asp Glu Val Thr Asp Phe Asn Ile Lys
50 55 60

His Asn Ser Lys Asp Asn Phe Arg Gly Glu Thr Ile Ser Ile Tyr Tyr
65 70 75 80

Asp Pro Gly Lys Phe Pro Ala Leu Met Pro Leu Lys Asn Gly Asn Tyr
85 90 95

Glu Glu Arg Asn Gly Gly Val Pro Gln Arg Gly Asn Ile Thr Ile His
100 105 110

Leu Gln Gln Phe Asn Glu Asp Leu Asp Lys Met Thr Pro Asp Lys Asn
115 120 125

Phe Gly Gly Ile Gly Val Ile Asp Phe Glu Arg Trp Lys Pro Ile Phe
130 135 140

Arg Gln Asn Trp Gly Asn Thr Glu Ile His Lys Lys Tyr Ser Ile Glu
145 150 155 160

Leu Val Arg Lys Glu His Pro Lys Trp Ser Glu Ser Met Ile Glu Ala
165 170 175

Glu Ala Thr Lys Lys Phe Glu Lys Tyr Ala Arg Tyr Phe Met Glu Glu
180 185 190

Thr Leu Lys Leu Ala Lys Lys Thr Arg Lys Arg Ala Lys Trp Gly Tyr
195 200 205

Tyr Gly Phe Pro Tyr Cys Tyr Asn Val Thr Pro Asn Asn Pro Gly Pro
210 215 220

Asp Cys Asp Ala Lys Ala Thr Ile Glu Asn Asp Arg Leu Ser Trp Met
225 230 235 240

Tyr Asn Asn Gln Glu Ile Leu Phe Pro Ser Val Tyr Val Arg His Glu
245 250 255

Gln Lys Pro Glu Glu Arg Val Tyr Leu Val Gln Gly Arg Ile Lys Glu
260 265 270

Ala Val Arg Ile Ser Asn Asn Leu Glu His Ser Pro Ser Val Leu Ala
275 280 285

Tyr Trp Trp Tyr Val Tyr Gln Asp Lys Met Asp Ile Tyr Leu Ser Glu
290 295 300

Thr Asp Val Glu Lys Thr Phe Gln Glu Ile Val Thr Asn Gly Gly Asp
305 310 315 320

Gly Ile Ile Ile Trp Gly Ser Ser Ser Asp Val Asn Ser Leu Ser Lys
325 330 335

Cys Lys Arg Leu Arg Glu Tyr Leu Leu Asn Thr Leu Gly Pro Phe Ala
340 345 350

Val Asn Val Thr Glu Thr Val Asn Gly Arg Ser Ser Leu Asn Phe
355 360 365

<210> SEQ ID NO 17
<211> LENGTH: 462
<212> TYPE: PRT
<213> ORGANISM: Mus musculus
<220> FEATURE:
<223> OTHER INFORMATION: hyaluronidase

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<400> SEQUENCE: 17																
Met	Leu	Gly	Leu	Thr	Gln	His	Ala	Gln	Lys	Val	Trp	Arg	Met	Lys	Pro	
1				5					10					15		
Phe	Ser	Pro	Glu	Val	Ser	Pro	Gly	Ser	Ser	Pro	Ala	Thr	Ala	Gly	His	
			20					25					30			
Leu	Leu	Arg	Ile	Ser	Thr	Leu	Phe	Leu	Thr	Leu	Leu	Glu	Leu	Ala	Gln	
		35					40					45				
Val	Cys	Arg	Gly	Ser	Val	Val	Ser	Asn	Arg	Pro	Phe	Ile	Thr	Val	Trp	
	50					55				60						
Asn	Gly	Asp	Thr	His	Trp	Cys	Leu	Thr	Glu	Tyr	Gly	Val	Asp	Val	Asp	
65					70					75					80	
Val	Ser	Val	Phe	Asp	Val	Val	Ala	Asn	Lys	Glu	Gln	Ser	Phe	Gln	Gly	
				85					90					95		
Ser	Asn	Met	Thr	Ile	Phe	Tyr	Arg	Glu	Glu	Leu	Gly	Thr	Tyr	Pro	Tyr	
			100					105					110			
Tyr	Thr	Pro	Thr	Gly	Glu	Pro	Val	Phe	Gly	Gly	Leu	Pro	Gln	Asn	Ala	
		115					120					125				
Ser	Leu	Val	Thr	His	Leu	Ala	His	Thr	Phe	Gln	Asp	Ile	Lys	Ala	Ala	
	130					135					140					
Met	Pro	Glu	Pro	Asp	Phe	Ser	Gly	Leu	Ala	Val	Ile	Asp	Trp	Glu	Ala	
145					150					155					160	
Trp	Arg	Pro	Arg	Trp	Ala	Phe	Asn	Trp	Asp	Ser	Lys	Asp	Ile	Tyr	Arg	
				165					170					175		
Gln	Arg	Ser	Met	Glu	Leu	Val	Gln	Ala	Glu	His	Pro	Asp	Trp	Pro	Glu	
		180					185						190			
Thr	Leu	Val	Glu	Ala	Ala	Ala	Lys	Asn	Gln	Phe	Gln	Glu	Ala	Ala	Glu	
	195						200					205				
Ala	Trp	Met	Ala	Gly	Thr	Leu	Gln	Leu	Gly	Gln	Val	Leu	Arg	Pro	Arg	
	210					215					220					
Gly	Leu	Trp	Gly	Tyr	Tyr	Gly	Phe	Pro	Asp	Cys	Tyr	Asn	Asn	Asp	Phe	
225					230					235					240	
Leu	Ser	Leu	Asn	Tyr	Thr	Gly	Gln	Cys	Pro	Val	Phe	Val	Arg	Asp	Gln	
			245						250					255		
Asn	Asp	Gln	Leu	Gly	Trp	Leu	Trp	Asn	Gln	Ser	Tyr	Ala	Leu	Tyr	Pro	
		260						265					270			
Ser	Ile	Tyr	Leu	Pro	Ala	Ala	Leu	Met	Gly	Thr	Gly	Lys	Ser	Gln	Met	
	275						280					285				
Tyr	Val	Arg	His	Arg	Val	Gln	Glu	Ala	Leu	Arg	Val	Ala	Ile	Val	Ser	
	290					295					300					
Arg	Asp	Pro	His	Val	Pro	Val	Met	Pro	Tyr	Val	Gln	Ile	Phe	Tyr	Glu	
305					310					315					320	
Met	Thr	Asp	Tyr	Leu	Leu	Pro	Leu	Glu	Glu	Leu	Glu	His	Ser	Leu	Gly	
			325						330					335		
Glu	Ser	Ala	Ala	Gln	Gly	Val	Ala	Gly	Ala	Val	Leu	Trp	Leu	Ser	Ser	
		340						345					350			
Asp	Lys	Thr	Ser	Thr	Lys	Glu	Ser	Cys	Gln	Ala	Ile	Lys	Ala	Tyr	Met	
		355					360					365				
Asp	Ser	Thr	Leu	Gly	Pro	Phe	Ile	Val	Asn	Val	Thr	Ser	Ala	Ala	Leu	
	370					375					380					
Leu	Cys	Ser	Glu	Ala	Leu	Cys	Ser	Gly	His	Gly	Arg	Cys	Val	Arg	His	
385					390					395					400	
Pro	Ser	Tyr	Pro	Glu	Ala	Leu	Leu	Thr	Leu	Asn	Pro	Ala	Ser	Phe	Ser	
			405						410					415		

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Ile	Glu	Leu	Thr	His	Asp	Gly	Arg	Pro	Pro	Ser	Leu	Lys	Gly	Thr	Leu	
			420					425					430			
Ser	Leu	Lys	Asp	Arg	Ala	Gln	Met	Ala	Met	Lys	Phe	Arg	Cys	Arg	Cys	
		435					440					445				
Tyr	Arg	Gly	Trp	Arg	Gly	Lys	Trp	Cys	Asp	Lys	Arg	Gly	Met			
	450					455					460					
<210> SEQ ID NO 18																
<211> LENGTH: 473																
<212> TYPE: PRT																
<213> ORGANISM: Mus musculus																
<220> FEATURE:																
<223> OTHER INFORMATION: Hyaluronidase 2																
<400> SEQUENCE: 18																
Met	Arg	Ala	Gly	Leu	Gly	Pro	Ile	Ile	Thr	Leu	Ala	Leu	Val	Leu	Glu	
1				5					10					15		
Val	Ala	Trp	Ala	Gly	Glu	Leu	Lys	Pro	Thr	Ala	Pro	Pro	Ile	Phe	Thr	
			20					25					30			
Gly	Arg	Pro	Phe	Val	Val	Ala	Trp	Asn	Val	Pro	Thr	Gln	Glu	Cys	Ala	
		35					40					45				
Pro	Arg	His	Lys	Val	Pro	Leu	Asp	Leu	Arg	Ala	Phe	Asp	Val	Lys	Ala	
	50					55				60						
Thr	Pro	Asn	Glu	Gly	Phe	Phe	Asn	Gln	Asn	Ile	Thr	Thr	Phe	Tyr	Tyr	
65					70				75					80		
Asp	Arg	Leu	Gly	Leu	Tyr	Pro	Arg	Phe	Asp	Ala	Ala	Gly	Thr	Ser	Val	
			85					90						95		
His	Gly	Gly	Val	Pro	Gln	Asn	Gly	Ser	Leu	Cys	Ala	His	Leu	Pro	Met	
			100				105						110			
Leu	Lys	Glu	Ser	Val	Glu	Arg	Tyr	Ile	Gln	Thr	Gln	Glu	Pro	Gly	Gly	
		115					120					125				
Leu	Ala	Val	Ile	Asp	Trp	Glu	Glu	Trp	Arg	Pro	Val	Trp	Val	Arg	Asn	
	130					135					140					
Trp	Gln	Glu	Lys	Asp	Val	Tyr	Arg	Gln	Ser	Ser	Arg	Gln	Leu	Val	Ala	
145				150					155						160	
Ser	Arg	His	Pro	Asp	Trp	Pro	Ser	Asp	Arg	Val	Met	Lys	Gln	Ala	Gln	
				165				170					175			
Tyr	Glu	Phe	Glu	Phe	Ala	Ala	Arg	Gln	Phe	Met	Leu	Asn	Thr	Leu	Arg	
		180					185						190			
Tyr	Val	Lys	Ala	Val	Arg	Pro	Gln	His	Leu	Trp	Gly	Phe	Tyr	Leu	Phe	
		195				200						205				
Pro	Asp	Cys	Tyr	Asn	His	Asp	Tyr	Val	Gln	Asn	Trp	Glu	Ser	Tyr	Thr	
	210				215						220					
Gly	Arg	Cys	Pro	Asp	Val	Glu	Val	Ala	Arg	Asn	Asp	Gln	Leu	Ala	Trp	
225				230					235					240		
Leu	Trp	Ala	Glu	Ser	Thr	Ala	Leu	Phe	Pro	Ser	Val	Tyr	Leu	Asp	Glu	
			245					250					255			
Thr	Leu	Ala	Ser	Ser	Val	His	Ser	Arg	Asn	Phe	Val	Ser	Phe	Arg	Val	
		260					265						270			
Arg	Glu	Ala	Leu	Arg	Val	Ala	His	Thr	His	His	Ala	Asn	His	Ala	Leu	
		275				280						285				
Pro	Val	Tyr	Val	Phe	Thr	Arg	Pro	Thr	Tyr	Thr	Arg	Gly	Leu	Thr	Gly	
	290				295						300					
Leu	Ser	Gln	Val	Asp	Leu	Ile	Ser	Thr	Ile	Gly	Glu	Ser	Ala	Ala	Leu	
305					310					315					320	

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Gly	Ser	Ala	Gly	Val	Ile	Phe	Trp	Gly	Asp	Ser	Glu	Asp	Ala	Ser	Ser	
				325					330					335		
Met	Glu	Thr	Cys	Gln	Tyr	Leu	Lys	Asn	Tyr	Leu	Thr	Gln	Leu	Leu	Val	
			340					345					350			
Pro	Tyr	Ile	Val	Asn	Val	Ser	Trp	Ala	Thr	Gln	Tyr	Cys	Ser	Trp	Thr	
		355					360					365				
Gln	Cys	His	Gly	His	Gly	Arg	Cys	Val	Arg	Arg	Asn	Pro	Ser	Ala	Asn	
	370					375					380					
Thr	Phe	Leu	His	Leu	Asn	Ala	Ser	Ser	Phe	Arg	Leu	Val	Pro	Gly	His	
385					390					395					400	
Thr	Pro	Ser	Glu	Pro	Gln	Leu	Arg	Pro	Glu	Gly	Gln	Leu	Ser	Glu	Ala	
				405					410					415		
Asp	Leu	Asn	Tyr	Leu	Gln	Lys	His	Phe	Arg	Cys	Gln	Cys	Tyr	Leu	Gly	
			420					425					430			
Trp	Gly	Gly	Glu	Gln	Cys	Gln	Arg	Asn	Tyr	Lys	Gly	Ala	Ala	Gly	Asn	
		435					440					445				
Ala	Ser	Arg	Ala	Trp	Ala	Gly	Ser	His	Leu	Thr	Ser	Leu	Leu	Gly	Leu	
	450					455					460					
Val	Ala	Val	Ala	Leu	Thr	Trp	Thr	Leu								
465					470											
<210> SEQ ID NO 19																
<211> LENGTH: 412																
<212> TYPE: PRT																
<213> ORGANISM: Mus musculus																
<220> FEATURE:																
<223> OTHER INFORMATION: hyaluronidase 3																
<400> SEQUENCE: 19																
Met	Ile	Met	His	Leu	Gly	Leu	Met	Met	Val	Val	Gly	Leu	Thr	Leu	Cys	
1				5					10					15		
Leu	Met	His	Gly	Gln	Ala	Leu	Leu	Gln	Val	Pro	Glu	His	Pro	Phe	Ser	
		20						25					30			
Val	Val	Trp	Asn	Val	Pro	Ser	Ala	Arg	Cys	Lys	Ala	His	Phe	Gly	Val	
		35					40					45				
His	Leu	Pro	Leu	Asp	Ala	Leu	Gly	Ile	Val	Ala	Asn	His	Gly	Gln	His	
	50					55					60					
Phe	His	Gly	Gln	Asn	Ile	Ser	Ile	Phe	Tyr	Lys	Asn	Gln	Phe	Gly	Leu	
65				70					75						80	
Tyr	Pro	Tyr	Phe	Gly	Pro	Arg	Gly	Thr	Ala	His	Asn	Gly	Gly	Ile	Pro	
			85					90						95		
Gln	Ala	Val	Ser	Leu	Asp	His	His	Leu	Ala	Arg	Ala	Ala	His	Gln	Ile	
		100						105					110			
Leu	His	Ser	Leu	Gly	Ser	Ser	Phe	Ala	Gly	Leu	Ala	Val	Leu	Asp	Trp	
		115					120					125				
Glu	Glu	Trp	Tyr	Pro	Leu	Trp	Ala	Gly	Asn	Trp	Gly	Pro	His	Arg	Gln	
	130					135					140					
Val	Tyr	Leu	Ala	Ala	Ser	Trp	Val	Trp	Thr	Gln	Gln	Met	Phe	Pro	Gly	
145					150					155					160	
Leu	Asp	Pro	Gln	Glu	Gln	Leu	His	Lys	Ala	His	Thr	Ser	Phe	Glu	Gln	
			165					170						175		
Ala	Ala	Arg	Ala	Leu	Met	Glu	Tyr	Thr	Leu	Gln	Leu	Gly	Arg	Thr	Leu	
		180						185					190			
Arg	Pro	Ser	Gly	Leu	Trp	Gly	Phe	Tyr	Arg	Tyr	Pro	Ala	Cys	Gly	Asn	
	195					200						205				

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Gly	Trp	His	Lys	Met	Ala	Ser	Asn	Tyr	Thr	Gly	His	Cys	His	Ala	Ala	
210						215				220						
Ile	Thr	Thr	Gln	Asn	Thr	Gln	Leu	Arg	Trp	Leu	Trp	Ala	Ala	Ser	Ser	
225					230					235					240	
Ala	Leu	Phe	Pro	Ser	Ile	Tyr	Leu	Pro	Pro	Arg	Leu	Pro	Leu	Ala	Tyr	
				245					250						255	
Arg	Gln	Ala	Phe	Val	Arg	His	Arg	Leu	Glu	Glu	Ala	Phe	Arg	Val	Ala	
			260					265					270			
Leu	Leu	Glu	His	Ser	His	Pro	Leu	Pro	Val	Leu	Ala	Tyr	Ser	Arg	Leu	
		275					280					285				
Thr	His	Arg	Ser	Ser	Gly	Arg	Phe	Leu	Ser	Leu	Asp	Asp	Leu	Met	Gln	
	290					295					300					
Thr	Ile	Gly	Val	Ser	Ala	Ala	Leu	Gly	Thr	Ala	Gly	Val	Val	Leu	Trp	
305					310					315					320	
Gly	Asp	Leu	Ser	Phe	Ser	Ser	Ser	Glu	Glu	Lys	Cys	Trp	Arg	Leu	His	
				325					330					335		
Asp	Tyr	Leu	Val	Gly	Thr	Leu	Gly	Pro	Tyr	Val	Ile	Asn	Val	Thr	Lys	
		340						345					350			
Ala	Asp	Met	Ala	Cys	Ser	His	Gln	Arg	Cys	His	Gly	His	Gly	Arg	Cys	
	355						360					365				
Ala	Arg	Lys	Asp	Pro	Gly	Gln	Met	Glu	Ala	Phe	Leu	His	Leu	Gln	Pro	
	370					375					380					
Asp	Asp	Ser	Leu	Gly	Ala	Trp	Asn	Ser	Phe	Arg	Cys	His	Cys	Tyr	Ser	
385					390					395					400	
Gly	Trp	Ala	Gly	Pro	Thr	Cys	Leu	Glu	Pro	Lys	Pro					
			405						410							
<210> SEQ ID NO 20																
<211> LENGTH: 435																
<212> TYPE: PRT																
<213> ORGANISM: Sus scrofa																
<220> FEATURE:																
<223> OTHER INFORMATION: hyalauronidase																
<400> SEQUENCE: 20																
Met	Ala	Ala	His	Leu	Leu	Pro	Ile	Cys	Thr	Leu	Phe	Leu	Asn	Leu	Leu	
1				5					10					15		
Ser	Val	Ala	Gln	Gly	Ser	Arg	Asp	Pro	Val	Val	Leu	Asn	Arg	Pro	Phe	
		20						25					30			
Thr	Thr	Ile	Trp	Asn	Ala	Asn	Thr	Gln	Trp	Cys	Leu	Lys	Arg	His	Gly	
		35					40					45				
Val	Asp	Val	Asp	Val	Ser	Val	Phe	Glu	Val	Val	Val	Asn	Pro	Gly	Gln	
	50					55					60					
Thr	Phe	Arg	Gly	Pro	Asn	Met	Thr	Ile	Phe	Tyr	Ser	Ser	Gln	Leu	Gly	
65					70					75					80	
Thr	Tyr	Pro	Tyr	Tyr	Thr	Ser	Ala	Gly	Glu	Pro	Val	Phe	Gly	Gly	Leu	
			85						90					95		
Pro	Gln	Asn	Ala	Ser	Leu	Asp	Val	His	Leu	Asn	Arg	Thr	Phe	Lys	Asp	
		100						105					110			
Ile	Leu	Ala	Ala	Met	Pro	Glu	Ser	Asn	Phe	Ser	Gly	Leu	Ala	Val	Ile	
	115						120					125				
Asp	Trp	Glu	Ala	Trp	Arg	Pro	Arg	Trp	Ala	Phe	Asn	Trp	Asp	Ala	Lys	
	130					135					140					
Asp	Ile	Tyr	Arg	Gln	Arg	Ser	Arg	Ala	Leu	Val	Gln	Lys	Gln	His	Pro	
145					150					155					160	

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Asp	Trp	Pro	Ala	Pro	Trp	Val	Glu	Ala	Ala	Ala	Gln	Asp	Gln	Phe	Gln	
				165						170				175		
Glu	Ala	Ala	Gln	Thr	Trp	Met	Ala	Gly	Thr	Leu	Lys	Leu	Gly	Gln	Thr	
			180					185					190			
Leu	Arg	Pro	His	Gly	Leu	Trp	Gly	Phe	Tyr	Gly	Phe	Pro	Asp	Cys	Tyr	
		195					200					205				
Asn	Tyr	Asp	Phe	Gln	Ser	Ser	Asn	Tyr	Thr	Gly	Gln	Cys	Pro	Pro	Gly	
	210						215				220					
Val	Ser	Ala	Gln	Asn	Asp	Gln	Leu	Gly	Trp	Leu	Trp	Gly	Gln	Ser	Arg	
225					230					235					240	
Ala	Leu	Tyr	Pro	Ser	Ile	Tyr	Leu	Pro	Ser	Ala	Leu	Glu	Gly	Thr	Asn	
				245					250					255		
Lys	Thr	Gln	Leu	Tyr	Val	Gln	His	Arg	Val	Asn	Glu	Ala	Phe	Arg	Val	
			260					265					270			
Ala	Ala	Ala	Ala	Gly	Asp	Pro	Asn	Leu	Pro	Val	Leu	Pro	Tyr	Ala	Gln	
		275					280					285				
Ile	Phe	His	Asp	Met	Thr	Asn	Arg	Leu	Leu	Ser	Arg	Glu	Glu	Leu	Glu	
	290					295					300					
His	Ser	Leu	Gly	Glu	Ser	Ala	Ala	Gln	Gly	Ala	Ala	Gly	Val	Val	Leu	
305					310					315					320	
Trp	Val	Ser	Trp	Glu	Asn	Thr	Arg	Thr	Lys	Glu	Ser	Cys	Gln	Ser	Ile	
				325					330					335		
Lys	Glu	Tyr	Val	Asp	Thr	Thr	Leu	Gly	Pro	Phe	Ile	Leu	Asn	Val	Thr	
		340						345					350			
Ser	Gly	Ala	Leu	Leu	Cys	Ser	Gln	Ala	Val	Cys	Ser	Gly	His	Gly	Arg	
		355					360					365				
Cys	Val	Arg	Arg	Pro	Ser	His	Thr	Glu	Ala	Leu	Pro	Ile	Leu	Asn	Pro	
	370					375					380					
Ser	Ser	Phe	Ser	Ile	Lys	Pro	Thr	Pro	Gly	Gly	Gly	Pro	Leu	Thr	Leu	
385					390					395					400	
Gln	Gly	Ala	Leu	Ser	Leu	Lys	Asp	Arg	Val	Gln	Met	Ala	Glu	Glu	Phe	
				405					410					415		
Gln	Cys	Arg	Cys	Tyr	Pro	Gly	Trp	Arg	Gly	Thr	Trp	Cys	Glu	Gln	Gln	
			420					425					430			
Gly	Thr	Arg														
		435														
<210> SEQ ID NO 21																
<211> LENGTH: 419																
<212> TYPE: PRT																
<213> ORGANISM: Sus scrofa																
<220> FEATURE:																
<223> OTHER INFORMATION: hyaluronidase 3																
<400> SEQUENCE: 21																
Met	Thr	Met	Gln	Leu	Gly	Leu	Ala	Leu	Val	Leu	Gly	Val	Ala	Met	Cys	
1				5					10					15		
Leu	Gly	Cys	Gly	Gln	Pro	Leu	Leu	Arg	Ala	Pro	Glu	Arg	Pro	Phe	Cys	
			20					25					30			
Val	Leu	Trp	Asn	Val	Pro	Ser	Ala	Arg	Cys	Lys	Ala	Arg	Phe	Gly	Val	
		35					40					45				
His	Leu	Pro	Leu	Glu	Ala	Leu	Gly	Ile	Thr	Ala	Asn	His	Gly	Gln	Arg	
	50					55				60						
Phe	His	Gly	Gln	Asn	Ile	Thr	Ile	Phe	Tyr	Lys	Ser	Gln	Leu	Gly	Leu	
65				70					75						80	

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Tyr	Pro	Tyr	Phe	Gly	Pro	Arg	Gly	Thr	Ala	His	Asn	Gly	Gly	Ile	Pro	
				85					90					95		
Gln	Ala	Val	Ser	Leu	Asp	His	His	Leu	Ala	Arg	Ala	Ala	Tyr	Gln	Ile	
			100					105					110			
His	Arg	Ser	Leu	Arg	Pro	Gly	Phe	Thr	Gly	Leu	Ala	Val	Leu	Asp	Trp	
		115					120					125				
Glu	Glu	Trp	Cys	Pro	Leu	Trp	Ala	Gly	Asn	Trp	Gly	Arg	Arg	Gln	Ala	
	130					135					140					
Tyr	Gln	Ala	Ala	Ser	Cys	Ala	Trp	Ala	Gln	Arg	Val	Tyr	Pro	Asn	Leu	
145					150					155					160	
Asp	Pro	Gln	Glu	Gln	Leu	Cys	Lys	Ala	Arg	Ala	Gly	Phe	Glu	Glu	Ala	
				165					170					175		
Ala	Arg	Ala	Leu	Met	Glu	Asp	Thr	Leu	Arg	Leu	Gly	Arg	Met	Leu	Arg	
			180					185					190			
Pro	His	Gly	Leu	Trp	Gly	Phe	Tyr	His	Tyr	Pro	Ala	Cys	Gly	Asn	Gly	
		195					200					205				
Trp	His	Gly	Thr	Ala	Ser	Asn	Tyr	Thr	Gly	His	Cys	His	Ala	Ala	Ala	
		210				215					220					
Leu	Ala	Arg	Asn	Thr	Gln	Leu	Tyr	Trp	Leu	Trp	Ala	Ala	Ser	Ser	Ala	
225					230					235					240	
Leu	Phe	Pro	Ser	Ile	Tyr	Leu	Pro	Pro	Gly	Leu	Pro	Pro	Ala	Tyr	His	
				245					250					255		
Gln	Ala	Phe	Val	Arg	Tyr	Arg	Leu	Glu	Glu	Ala	Phe	Arg	Val	Ala	Leu	
			260					265					270			
Val	Gly	His	Pro	His	Pro	Leu	Pro	Val	Leu	Ala	Tyr	Ala	Arg	Leu	Thr	
		275					280					285				
His	Arg	Asn	Ser	Gly	Arg	Phe	Leu	Ser	Gln	Asp	Glu	Leu	Val	Gln	Thr	
	290					295				300						
Ile	Gly	Val	Ser	Ala	Ala	Leu	Gly	Ala	Ser	Gly	Val	Val	Leu	Trp	Gly	
305					310					315					320	
Asp	Leu	Ser	Phe	Ser	Ser	Ser	Glu	Glu	Glu	Cys	Trp	His	Leu	Arg	Gly	
			325						330					335		
Tyr	Leu	Val	Gly	Thr	Leu	Gly	Pro	Tyr	Val	Ile	Asn	Val	Thr	Arg	Ala	
			340					345					350			
Ala	Met	Ala	Cys	Ser	His	Gln	Arg	Cys	His	Gly	His	Gly	Arg	Cys	Ala	
		355					360					365				
Trp	Gln	Asp	Pro	Gly	Gln	Leu	Lys	Val	Phe	Leu	His	Leu	His	Pro	Gly	
	370					375					380					
Gly	Ser	Pro	Gly	Ala	Trp	Glu	Ser	Phe	Ser	Cys	Arg	Cys	Tyr	Trp	Gly	
385					390					395					400	
Trp	Ala	Gly	Pro	Thr	Cys	Gln	Glu	Pro	Arg	Pro	Glu	Leu	Gly	Pro	Glu	
				405					410					415		
Glu	Ala	Thr														

<210> SEQ ID NO 22
<211> LENGTH: 449
<212> TYPE: PRT
<213> ORGANISM: Rattus norvegicus
<220> FEATURE:
<223> OTHER INFORMATION: hyaluronidase 1

<400> SEQUENCE: 22

Met Lys Pro Phe Ser Pro Glu Val Ser Pro Asp Pro Cys Pro Ala Thr
1 5 10 15

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Ala	Ala	His	Leu	Leu	Arg	Thr	Tyr	Thr	Leu	Phe	Leu	Thr	Leu	Leu	Glu
			20					25					30		
Leu	Ala	Gln	Gly	Cys	Arg	Gly	Ser	Met	Val	Ser	Asn	Arg	Pro	Phe	Ile
		35					40				45				
Thr	Val	Trp	Asn	Ala	Asp	Thr	His	Trp	Cys	Leu	Lys	Asp	His	Gly	Val
	50					55					60				
Asp	Val	Asp	Val	Ser	Val	Phe	Asp	Val	Val	Ala	Asn	Lys	Glu	Gln	Asn
65					70					75					80
Phe	Gln	Gly	Pro	Asn	Met	Thr	Ile	Phe	Tyr	Arg	Glu	Glu	Leu	Gly	Thr
				85					90					95	
Tyr	Pro	Tyr	Tyr	Thr	Pro	Thr	Gly	Glu	Pro	Val	Phe	Gly	Gly	Leu	Pro
			100					105					110		
Gln	Asn	Ala	Ser	Leu	Val	Thr	His	Leu	Ala	His	Ala	Phe	Gln	Asp	Ile
		115					120					125			
Lys	Ala	Ala	Met	Pro	Glu	Pro	Asp	Phe	Ser	Gly	Leu	Ala	Val	Ile	Asp
	130						135				140				
Trp	Glu	Ala	Trp	Arg	Pro	Arg	Trp	Ala	Phe	Asn	Trp	Asp	Ser	Lys	Asp
145					150					155					160
Ile	Tyr	Gln	Gln	Arg	Ser	Met	Glu	Leu	Val	Arg	Ala	Glu	His	Pro	Asp
				165					170					175	
Trp	Pro	Glu	Thr	Leu	Val	Glu	Ala	Glu	Ala	Gln	Gly	Gln	Phe	Gln	Glu
			180					185					190		
Ala	Ala	Glu	Ala	Trp	Met	Ala	Gly	Thr	Leu	Gln	Leu	Gly	Gln	Val	Leu
		195					200					205			
Arg	Pro	Arg	Gly	Leu	Trp	Gly	Tyr	Tyr	Gly	Phe	Pro	Asp	Cys	Tyr	Asn
	210					215					220				
Tyr	Asp	Phe	Leu	Ser	Pro	Asn	Tyr	Thr	Gly	Gln	Cys	Ser	Leu	Ser	Ile
225					230					235					240
His	Asp	Gln	Asn	Asp	Gln	Leu	Gly	Trp	Leu	Trp	Asn	Gln	Ser	Tyr	Ala
			245						250					255	
Leu	Tyr	Pro	Ser	Ile	Tyr	Leu	Pro	Ala	Ala	Leu	Met	Gly	Thr	Gly	Lys
			260					265					270		
Ser	Gln	Met	Tyr	Val	Arg	Tyr	Arg	Val	Gln	Glu	Ala	Phe	Arg	Leu	Ala
		275					280					285			
Leu	Val	Ser	Arg	Asp	Pro	His	Val	Pro	Ile	Met	Pro	Tyr	Val	Gln	Ile
	290					295					300				
Phe	Tyr	Glu	Lys	Thr	Asp	Tyr	Leu	Leu	Pro	Leu	Glu	Glu	Leu	Glu	His
305					310					315					320
Ser	Leu	Gly	Glu	Ser	Ala	Ala	Gln	Gly	Ala	Ala	Gly	Ala	Val	Leu	Trp
			325						330					335	
Ile	Ser	Ser	Glu	Lys	Thr	Ser	Thr	Lys	Glu	Ser	Cys	Gln	Ala	Ile	Lys
			340					345					350		
Ala	Tyr	Met	Asp	Ser	Thr	Leu	Gly	Pro	Phe	Ile	Leu	Asn	Val	Thr	Ser
		355					360					365			
Ala	Ala	Leu	Leu	Cys	Ser	Glu	Ala	Leu	Cys	Ser	Gly	Arg	Gly	Arg	Cys
		370					375				380				
Val	Arg	His	Pro	Ser	Tyr	Pro	Glu	Ala	Leu	Leu	Thr	Leu	Ser	Pro	Ala
385					390					395					400
Ser	Phe	Ser	Ile	Glu	Pro	Thr	His	Asp	Gly	Arg	Pro	Leu	Ser	Leu	Lys
			405						410					415	
Gly	Thr	Leu	Ser	Leu	Lys	Asp	Arg	Ala	Gln	Met	Ala	Met	Lys	Phe	Lys
			420					425					430		
Cys	Arg	Cys	Tyr	Arg	Gly	Trp	Ser	Gly	Glu	Trp	Cys	Lys	Lys	Gln	Asp

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435	440	445
Met		
<210> SEQ ID NO 23		
<211> LENGTH: 473		
<212> TYPE: PRT		
<213> ORGANISM: Rattus norvegicus		
<220> FEATURE:		
<223> OTHER INFORMATION: hyaluronidase 2		
<400> SEQUENCE: 23		
Met Arg Ala Gly	Leu Gly Pro Ile Ile Thr Leu Ala Leu Val Leu Glu	
1	5 10 15	
Val Ala Trp Ala Ser Glu Leu Lys Pro Thr Ala Pro Pro Ile Phe Thr		
	20 25 30	
Gly Arg Pro Phe Val Val Ala Trp Asn Val Pro Thr Gln Glu Cys Ala		
	35 40 45	
Pro Arg His Lys Val Pro Leu Asp Leu Arg Ala Phe Asp Val Glu Ala		
	50 55 60	
Thr Pro Asn Glu Gly Phe Phe Asn Gln Asn Ile Thr Thr Phe Tyr Tyr		
65	70 75 80	
Asp Arg Leu Gly Leu Tyr Pro Arg Phe Asp Ala Ala Gly Met Ser Val		
	85 90 95	
His Gly Gly Val Pro Gln Asn Gly Ser Leu Cys Ala His Leu Pro Met		
	100 105 110	
Leu Lys Glu Ala Val Glu Arg Tyr Ile Gln Thr Gln Glu Pro Ala Gly		
	115 120 125	
Leu Ala Val Ile Asp Trp Glu Glu Trp Arg Pro Val Trp Val Arg Asn		
	130 135 140	
Trp Gln Glu Lys Asp Val Tyr Arg Gln Ser Ser Arg Gln Leu Val Ala		
145	150 155 160	
Ser Arg His Pro Asp Trp Pro Ser Asp Arg Ile Val Lys Gln Ala Gln		
	165 170 175	
Tyr Glu Phe Glu Phe Ala Ala Arg Gln Phe Met Leu Asn Thr Leu Arg		
	180 185 190	
Tyr Val Lys Ala Val Arg Pro Gln His Leu Trp Gly Phe Tyr Leu Phe		
	195 200 205	
Pro Asp Cys Tyr Asn His Asp Tyr Val Gln Asn Trp Asp Ser Tyr Thr		
	210 215 220	
Gly Arg Cys Pro Asp Val Glu Val Ala Gln Asn Asp Gln Leu Ala Trp		
225	230 235 240	
Leu Trp Ala Glu Asn Thr Ala Leu Phe Pro Ser Val Tyr Leu Asp Lys		
	245 250 255	
Thr Leu Ala Ser Ser Lys His Ser Arg Asn Phe Val Ser Phe Arg Val		
	260 265 270	
Gln Glu Ala Leu Arg Val Ala His Thr His His Ala Asn His Ala Leu		
	275 280 285	
Pro Val Tyr Val Phe Thr Arg Pro Thr Tyr Thr Arg Arg Leu Thr Glu		
	290 295 300	
Leu Asn Gln Met Asp Leu Ile Ser Thr Ile Gly Glu Ser Ala Ala Leu		
305	310 315 320	
Gly Ser Ala Gly Val Ile Phe Trp Gly Asp Ser Val Tyr Ala Ser Ser		
	325 330 335	
Met Glu Asn Cys Gln Asn Leu Lys Lys Tyr Leu Thr Gln Thr Leu Val		
	340 345 350	

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Pro	Tyr	Ile	Val	Asn	Val	Ser	Trp	Ala	Thr	Gln	Tyr	Cys	Ser	Trp	Thr	
		355					360					365				
Gln	Cys	His	Gly	His	Gly	Arg	Cys	Val	Arg	Arg	Asn	Pro	Ser	Ala	Ser	
	370					375					380					
Thr	Phe	Leu	His	Leu	Ser	Pro	Ser	Ser	Phe	Arg	Leu	Val	Pro	Gly	Arg	
385					390					395					400	
Thr	Pro	Ser	Glu	Pro	Gln	Leu	Arg	Pro	Glu	Gly	Glu	Leu	Ser	Glu	Asp	
				405					410					415		
Asp	Leu	Ser	Tyr	Leu	Gln	Met	His	Phe	Arg	Cys	His	Cys	Tyr	Leu	Gly	
			420					425					430			
Trp	Gly	Gly	Glu	Gln	Cys	Gln	Trp	Asn	His	Lys	Arg	Ala	Ala	Gly	Asp	
		435					440					445				
Ala	Ser	Arg	Ala	Trp	Ala	Gly	Ala	His	Leu	Ala	Ser	Leu	Leu	Gly	Leu	
	450					455					460					
Val	Ala	Met	Thr	Leu	Thr	Trp	Thr	Leu								
465					470											
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<211> LENGTH: 412																
<212> TYPE: PRT																
<213> ORGANISM: Rattus norvegicus																
<220> FEATURE:																
<223> OTHER INFORMATION: hyaluronidase 3																
<400> SEQUENCE: 24																
Met	Ile	Thr	Gln	Leu	Gly	Leu	Thr	Leu	Val	Val	Gly	Leu	Thr	Leu	Cys	
1				5					10					15		
Leu	Val	His	Val	Gln	Ala	Leu	Leu	Gln	Val	Pro	Glu	Phe	Pro	Phe	Ser	
			20					25					30			
Val	Leu	Trp	Asn	Val	Pro	Ser	Ala	Arg	Cys	Lys	Thr	Arg	Phe	Gly	Val	
		35					40					45				
His	Leu	Pro	Leu	Asp	Ala	Leu	Gly	Ile	Ile	Ala	Asn	His	Gly	Gln	Arg	
	50					55					60					
Phe	His	Gly	Gln	Asn	Ile	Thr	Ile	Phe	Tyr	Lys	Asn	Gln	Phe	Gly	Leu	
65				70					75						80	
Tyr	Pro	Tyr	Phe	Gly	Pro	Arg	Gly	Thr	Ala	His	Asn	Gly	Gly	Ile	Pro	
			85					90						95		
Gln	Ala	Val	Ser	Leu	Asp	His	His	Leu	Ala	Gln	Ala	Ala	His	Gln	Ile	
			100					105					110			
Leu	His	Asn	Leu	Gly	Ser	Ser	Phe	Ala	Gly	Leu	Ala	Val	Leu	Asp	Trp	
		115					120					125				
Glu	Glu	Trp	Tyr	Pro	Leu	Trp	Ala	Gly	Asn	Trp	Gly	Thr	His	Arg	Gln	
	130					135					140					
Val	Tyr	Gln	Ala	Ala	Ser	Trp	Ala	Trp	Ala	Gln	Gln	Met	Phe	Pro	Asp	
145					150					155					160	
Leu	Asn	Pro	Gln	Glu	Gln	Leu	His	Lys	Ala	Gln	Thr	Gly	Phe	Glu	Gln	
			165						170					175		
Ala	Ala	Arg	Ala	Leu	Met	Glu	His	Thr	Leu	Arg	Leu	Gly	Gln	Met	Leu	
			180					185					190			
Arg	Pro	His	Gly	Leu	Trp	Gly	Phe	Tyr	Arg	Tyr	Pro	Val	Cys	Gly	Asn	
		195					200					205				
Gly	Trp	His	Asn	Met	Ala	Ser	Asn	Tyr	Thr	Gly	His	Cys	His	Pro	Ala	
	210					215					220					
Ile	Ile	Thr	Arg	Asn	Thr	Gln	Leu	Arg	Trp	Leu	Trp	Ala	Ala	Ser	Ser	
225					230					235					240	

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Ala	Leu	Phe	Pro	Ser	Ile	Tyr	Leu	Pro	Pro	Arg	Leu	Pro	Pro	Ala	Tyr	
				245					250					255		
His	Gln	Thr	Phe	Val	Arg	His	Arg	Leu	Glu	Glu	Ala	Phe	Arg	Val	Ala	
			260					265					270			
Leu	Thr	Gly	His	Ala	His	Pro	Leu	Pro	Val	Leu	Ala	Tyr	Val	Arg	Leu	
		275					280					285				
Thr	His	Arg	Ser	Ser	Gly	Arg	Phe	Leu	Ser	Leu	Asp	Asp	Leu	Met	Gln	
	290					295					300					
Thr	Ile	Gly	Val	Ser	Ala	Ala	Leu	Gly	Ala	Ala	Gly	Val	Val	Leu	Trp	
305					310				315					320		
Gly	Asp	Leu	Ser	Val	Ser	Ser	Ser	Glu	Glu	Glu	Cys	Trp	Arg	Leu	His	
				325				330						335		
Asp	Tyr	Leu	Val	Gly	Thr	Leu	Gly	Pro	Tyr	Val	Ile	Asn	Val	Thr	Lys	
			340					345					350			
Ala	Ala	Thr	Ala	Cys	Ser	His	Gln	Arg	Cys	His	Gly	His	Gly	Arg	Cys	
		355					360					365				
Ser	Trp	Lys	Asp	Pro	Gly	Gln	Met	Glu	Ala	Phe	Leu	His	Leu	Gln	Pro	
	370					375					380					
Asp	Asp	Asn	Leu	Gly	Ala	Trp	Lys	Ser	Phe	Arg	Cys	Arg	Cys	Tyr	Leu	
385					390					395					400	
Gly	Trp	Ser	Gly	Pro	Thr	Cys	Leu	Glu	Pro	Lys	Pro					
				405					410							
<210> SEQ ID NO 25																
<211> LENGTH: 545																
<212> TYPE: PRT																
<213> ORGANISM: Oryctolagus cuniculus																
<220> FEATURE:																
<223> OTHER INFORMATION: PH20																
<400> SEQUENCE: 25																
Met	Gly	Val	Leu	Lys	Phe	Lys	His	Ile	Phe	Phe	Gly	Ser	Ala	Val	Glu	
1				5					10					15		
Leu	Ser	Gly	Val	Phe	Gln	Ile	Val	Phe	Ile	Phe	Leu	Leu	Ile	Pro	Cys	
			20					25					30			
Cys	Leu	Thr	Ala	Asn	Phe	Arg	Ala	Pro	Pro	Val	Ile	Pro	Asn	Val	Pro	
		35					40					45				
Phe	Leu	Trp	Ala	Trp	Asn	Ala	Pro	Thr	Glu	Phe	Cys	Leu	Gly	Lys	Ser	
	50				55					60						
Gly	Glu	Pro	Leu	Asp	Met	Ser	Leu	Phe	Ser	Leu	Phe	Gly	Ser	Pro	Arg	
65					70				75					80		
Lys	Asn	Lys	Thr	Gly	Gln	Gly	Ile	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	
			85					90					95			
Gly	Tyr	Tyr	Pro	Tyr	Ile	Asp	Pro	His	Thr	Gly	Ala	Ile	Val	His	Gly	
			100					105					110			
Arg	Ile	Pro	Gln	Leu	Gly	Pro	Leu	Gln	Gln	His	Leu	Thr	Lys	Leu	Arg	
		115					120					125				
Gln	Glu	Ile	Leu	Tyr	Tyr	Met	Pro	Lys	Asp	Asn	Val	Gly	Leu	Ala	Val	
	130					135					140					
Ile	Asp	Trp	Glu	Glu	Trp	Leu	Pro	Thr	Trp	Leu	Arg	Asn	Trp	Lys	Pro	
145					150					155				160		
Lys	Asp	Ile	Tyr	Arg	Ile	Lys	Ser	Ile	Glu	Leu	Val	Lys	Ser	Gln	His	
			165						170				175			
Pro	Gln	Tyr	Asn	His	Ser	Tyr	Ala	Thr	Glu	Lys	Ala	Lys	Arg	Asp	Phe	
			180					185					190			

Glu	Lys	Ala	Gly	Lys	Asp	Phe	Met	Glu	Glu	Thr	Leu	Lys	Leu	Gly	Arg
		195					200					205			
Leu	Leu	Arg	Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys
	210					215					220				
Tyr	Asn	His	His	Tyr	Asp	Lys	Pro	Asn	Leu	Tyr	Lys	Gly	Ser	Cys	Phe
225					230					235					240
Asp	Ile	Glu	Lys	Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Lys	Glu
				245					250					255	
Ser	Thr	Ala	Leu	Phe	Pro	Ser	Val	Tyr	Leu	Thr	Ser	Arg	Ala	Arg	Ser
			260					265					270		
Ala	Thr	Ala	Leu	Ser	Lys	Leu	Tyr	Val	Val	Arg	Asn	Arg	Val	His	Glu
		275					280					285			
Ala	Ile	Arg	Val	Ser	Lys	Ile	Pro	Asp	Asp	Lys	Ser	Pro	Leu	Pro	Asn
	290					295					300				
Phe	Val	Tyr	Thr	Arg	Leu	Val	Phe	Thr	Asp	Gln	Ile	Phe	Gln	Phe	Leu
305					310					315					320
Ser	His	His	Asp	Leu	Val	Tyr	Thr	Ile	Gly	Glu	Ile	Val	Ala	Leu	Gly
				325					330					335	
Ala	Ser	Gly	Ile	Val	Val	Trp	Gly	Ser	Gln	Ser	Leu	Ala	Arg	Ser	Met
			340					345					350		
Lys	Ser	Cys	Leu	His	Leu	Asp	Asn	Tyr	Met	Lys	Thr	Ile	Leu	Asn	Pro
		355					360					365			
Tyr	Leu	Ile	Asn	Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Asn	Gln	Val	Leu
	370					375					380				
Cys	Gln	Glu	Gln	Gly	Val	Cys	Thr	Arg	Lys	Asn	Trp	Asn	Pro	Asn	Asp
385					390					395					400
Tyr	Leu	His	Leu	Asn	Pro	Gly	Asn	Phe	Ala	Ile	Gln	Leu	Gly	Ser	Asn
				405					410					415	
Gly	Thr	Tyr	Lys	Val	Asp	Gly	Lys	Pro	Thr	Leu	Thr	Asp	Leu	Glu	Gln
			420					425					430		
Phe	Ser	Lys	Asn	Phe	Gln	Cys	Ser	Cys	Tyr	Thr	Asn	Leu	Asn	Cys	Lys
		435					440					445			
Glu	Arg	Thr	Asp	Met	Asn	Asn	Val	Arg	Thr	Val	Asn	Val	Cys	Ala	Val
						455					460				
Glu	Asn	Val	Cys	Ile	Asp	Thr	Asn	Val	Gly	Pro	Gln	Ala	Val	Thr	Tyr
465					470					475					480
Ala	Pro	Lys	Glu	Lys	Lys	Asp	Val	Ala	His	Ile	Leu	Ser	Asn	Thr	Thr
				485					490					495	
Ser	Ile	Asn	Ser	Ser	Thr	Thr	Met	Ser	Leu	Pro	Phe	Pro	Arg	Lys	His
			500					505					510		
Val	Ser	Gly	Cys	Leu	Leu	Val	Leu	Cys	Met	Tyr	Ser	Gln	Tyr	Leu	Asn
		515					520					525			
Ile	Cys	Tyr	Arg	Leu	Val	Ala	Ile	Gly	Ile	Gln	His	Gly	Tyr	Tyr	Leu
	530					535					540				
Lys															

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<210> SEQ ID NO 26
<211> LENGTH: 476
<212> TYPE: PRT
<213> ORGANISM: Ovis aries
<220> FEATURE:
<223> OTHER INFORMATION: hyaluronidase 2

<400> SEQUENCE: 26
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Met	Trp	Thr	Gly	Leu	Gly	Pro	Ala	Val	Thr	Leu	Ala	Leu	Val	Leu	Val	
1				5					10					15		
Val	Ala	Trp	Ala	Thr	Glu	Leu	Lys	Pro	Thr	Ala	Pro	Pro	Ile	Phe	Thr	
			20					25					30			
Gly	Arg	Pro	Phe	Val	Val	Ala	Trp	Asp	Val	Pro	Thr	Gln	Asp	Cys	Gly	
		35					40					45				
Pro	Arg	His	Lys	Met	Pro	Leu	Asp	Pro	Lys	Asp	Met	Lys	Ala	Phe	Asp	
	50					55				60						
Val	Gln	Ala	Ser	Pro	Asn	Glu	Gly	Phe	Val	Asn	Gln	Asn	Ile	Thr	Ile	
65					70				75						80	
Phe	Tyr	Arg	Asp	Arg	Leu	Gly	Met	Tyr	Pro	His	Phe	Asn	Ser	Val	Gly	
				85					90					95		
Arg	Ser	Val	His	Gly	Gly	Val	Pro	Gln	Asn	Gly	Ser	Leu	Trp	Val	His	
			100					105					110			
Leu	Glu	Met	Leu	Lys	Gly	His	Val	Glu	His	Tyr	Ile	Arg	Thr	Gln	Glu	
		115					120					125				
Pro	Ala	Gly	Leu	Ala	Val	Ile	Asp	Trp	Glu	Asp	Trp	Arg	Pro	Val	Trp	
	130					135					140					
Val	Arg	Asn	Trp	Gln	Asp	Lys	Asp	Val	Tyr	Arg	Arg	Leu	Ser	Arg	Gln	
145					150				155						160	
Leu	Val	Ala	Ser	His	His	Pro	Asp	Trp	Pro	Pro	Glu	Arg	Ile	Val	Lys	
				165					170					175		
Glu	Ala	Gln	Tyr	Glu	Phe	Glu	Phe	Ala	Ala	Arg	Gln	Phe	Met	Leu	Glu	
			180					185				190				
Thr	Leu	Arg	Phe	Val	Lys	Ala	Phe	Arg	Pro	Arg	His	Leu	Trp	Gly	Phe	
		195					200					205				
Tyr	Leu	Phe	Pro	Asp	Cys	Tyr	Asn	His	Asp	Tyr	Val	Gln	Asn	Trp	Glu	
	210					215					220					
Thr	Tyr	Thr	Gly	Arg	Cys	Pro	Asp	Val	Glu	Val	Ser	Arg	Asn	Asp	Gln	
225					230					235					240	
Leu	Ser	Trp	Leu	Trp	Ala	Glu	Ser	Thr	Ala	Leu	Phe	Pro	Ser	Val	Tyr	
			245						250					255		
Leu	Glu	Glu	Thr	Leu	Ala	Ser	Ser	Thr	His	Gly	Arg	Asn	Phe	Val	Ser	
			260					265					270			
Phe	Arg	Val	Gln	Glu	Ala	Leu	Arg	Val	Ala	Asp	Val	His	His	Ala	Asn	
		275					280					285				
His	Ala	Leu	Pro	Val	Tyr	Val	Phe	Thr	Arg	Pro	Thr	Tyr	Ser	Arg	Gly	
	290					295					300					
Leu	Thr	Gly	Leu	Ser	Glu	Met	Asp	Leu	Ile	Ser	Thr	Ile	Gly	Glu	Ser	
305					310					315					320	
Ala	Ala	Leu	Gly	Ala	Ala	Gly	Val	Ile	Leu	Trp	Gly	Asp	Ala	Gly	Phe	
			325						330					335		
Thr	Thr	Ser	Asn	Glu	Thr	Cys	Arg	Arg	Leu	Lys	Asp	Tyr	Leu	Thr	Arg	
			340					345					350			
Ser	Leu	Val	Pro	Tyr	Val	Val	Asn	Val	Ser	Trp	Ala	Ala	Gln	Tyr	Cys	
		355					360					365				
Ser	Trp	Ala	Gln	Cys	His	Gly	His	Gly	Arg	Cys	Val	Arg	Arg	Asp	Pro	
	370					375					380					
Asn	Ala	His	Thr	Phe	Leu	His	Leu	Ser	Ala	Ser	Ser	Phe	Arg	Leu	Val	
385					390					395					400	
Pro	Ser	His	Ala	Pro	Asp	Glu	Pro	Arg	Leu	Arg	Pro	Glu	Gly	Glu	Leu	
				405					410					415		

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Ser	Trp	Ala	Asp	Arg	Asn	His	Leu	Gln	Thr	His	Phe	Arg	Cys	Gln	Cys
			420					425					430		
Tyr	Leu	Gly	Trp	Gly	Gly	Glu	Gln	Cys	Gln	Trp	Asp	Arg	Arg	Arg	Ala
		435					440				445				
Ala	Gly	Gly	Ala	Ser	Gly	Ala	Trp	Ala	Gly	Ser	His	Leu	Thr	Gly	Leu
	450					455					460				
Leu	Ala	Val	Ala	Val	Leu	Ala	Phe	Thr	Trp	Thr	Ser				
465					470					475					
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<213> ORGANISM: Ovis aries															
<220> FEATURE:															
<223> OTHER INFORMATION: PH20 partial sequence															
<400> SEQUENCE: 27															
Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Leu	Ser	Lys	Ile
1				5					10					15	
Ala	Ser	Val	Glu	Ser	Pro	Leu	Pro	Val	Phe	Val	Tyr	His	Arg	Pro	Val
			20					25					30		
Phe	Thr	Asp	Gly	Ser	Ser	Thr	Tyr	Leu	Ser	Gln	Gly	Asp	Leu	Val	Asn
		35					40					45			
Ser	Val	Gly	Glu	Ile	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	Ile	Met	Trp
	50					55					60				
Gly	Ser	Leu	Asn	Leu	Ser	Leu	Thr	Met	Gln	Ser	Cys	Met	Asn	Leu	Gly
65				70						75				80	
Asn	Tyr	Leu	Asn	Thr	Thr	Leu	Asn	Pro	Tyr	Ile	Ile	Asn	Val	Thr	Leu
			85						90					95	
Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln	Gly	Val	Cys
			100					105					110		
Ile Arg															
<210> SEQ ID NO 28															
<211> LENGTH: 414															
<212> TYPE: PRT															
<213> ORGANISM: Pongo pygmaeus															
<220> FEATURE:															
<223> OTHER INFORMATION: hyaluronidase 3															
<400> SEQUENCE: 28															
Met	Thr	Thr	Arg	Leu	Gly	Pro	Ala	Leu	Val	Leu	Gly	Val	Ala	Leu	Cys
1				5					10					15	
Leu	Gly	Cys	Gly	Gln	Pro	Leu	Pro	Gln	Val	Pro	Glu	Arg	Pro	Phe	Ser
			20					25					30		
Val	Leu	Trp	Asn	Val	Pro	Ser	Ala	His	Cys	Lys	Ser	Arg	Phe	Gly	Val
		35					40					45			
His	Leu	Pro	Leu	Asn	Ala	Leu	Gly	Ile	Ile	Ala	Asn	Arg	Gly	Gln	His
	50					55					60				
Phe	His	Gly	Gln	Asn	Met	Thr	Ile	Phe	Tyr	Lys	Asn	Gln	Leu	Gly	Leu
65				70					75					80	
Tyr	Pro	Tyr	Phe	Gly	Pro	Lys	Gly	Thr	Ala	His	Asn	Gly	Gly	Ile	Pro
			85					90						95	
Gln	Ala	Leu	Pro	Leu	Asp	Arg	His	Leu	Ala	Leu	Ala	Ala	Tyr	Gln	Ile
			100					105					110		
His	His	Ser	Leu	Arg	Pro	Gly	Phe	Ala	Gly	Pro	Ala	Val	Leu	Asp	Trp
			115				120					125			

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Glu	Glu	Trp	Cys	Pro	Leu	Trp	Ala	Gly	Asn	Trp	Gly	Arg	Arg	Arg	Ala
130						135					140				
Tyr	Gln	Ala	Ala	Ser	Trp	Ala	Trp	Ala	Gln	Gln	Val	Phe	Pro	Asp	Leu
145					150					155					160
Asp	Pro	Gln	Glu	Gln	Leu	Tyr	Lys	Ala	Tyr	Thr	Gly	Phe	Glu	Gln	Ala
				165					170					175	
Ala	Arg	Ala	Leu	Met	Glu	Asp	Thr	Leu	Arg	Val	Ala	Gln	Ala	Leu	Arg
			180					185					190		
Pro	His	Gly	Leu	Trp	Gly	Phe	Tyr	His	Tyr	Pro	Ala	Cys	Gly	Asn	Gly
		195					200					205			
Trp	His	Ser	Met	Ala	Ser	Asn	Tyr	Thr	Gly	Arg	Cys	His	Ala	Ala	Thr
		210				215					220				
Leu	Ala	Arg	Asn	Thr	Gln	Leu	His	Trp	Leu	Trp	Ala	Ala	Ser	Ser	Ala
225					230					235					240
Leu	Phe	Pro	Ser	Ile	Tyr	Leu	Pro	Pro	Arg	Leu	Pro	Pro	Ala	His	His
				245					250					255	
Gln	Ala	Phe	Val	Arg	His	Arg	Leu	Glu	Glu	Ala	Phe	Arg	Val	Ala	Leu
			260					265					270		
Val	Gly	His	Leu	Pro	Val	Leu	Ala	Tyr	Val	Arg	Leu	Thr	His	Arg	Arg
		275					280					285			
Ser	Gly	Arg	Phe	Leu	Ser	Gln	Asp	Asp	Leu	Val	Gln	Thr	Ile	Gly	Val
	290					295					300				
Ser	Ala	Ala	Leu	Gly	Ala	Ala	Gly	Val	Val	Leu	Trp	Gly	Asp	Leu	Ser
305					310					315					320
Leu	Ser	Ser	Ser	Glu	Glu	Glu	Cys	Trp	His	Leu	His	Asp	Tyr	Leu	Val
				325					330					335	
Asp	Thr	Leu	Gly	Pro	Tyr	Gly	Ile	Asn	Val	Thr	Arg	Ala	Ala	Met	Ala
			340					345						350	
Cys	Ser	His	Gln	Arg	Cys	His	Gly	His	Gly	Arg	Cys	Ala	Arg	Arg	Asp
		355					360					365			
Pro	Gly	Gln	Met	Glu	Ala	Phe	Leu	His	Leu	Trp	Pro	Asp	Gly	Ser	Leu
						375					380				
Gly	Asp	Trp	Lys	Ser	Phe	Ser	Cys	His	Cys	Tyr	Trp	Gly	Trp	Ala	Gly
385					390					395					400
Pro	Thr	Cys	Gln	Glu	Pro	Arg	Leu	Gly	Pro	Lys	Glu	Ala	Val		
			405						410						
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<212> TYPE: PRT															
<213> ORGANISM: Macaca fascicularis															
<220> FEATURE:															
<223> OTHER INFORMATION: PH20															
<400> SEQUENCE: 29															
Met	Gly	Val	Leu	Lys	Phe	Lys	His	Ile	Phe	Phe	Arg	Ser	Phe	Val	Lys
1				5					10					15	
Ser	Ser	Gly	Val	Ser	Gln	Ile	Val	Phe	Thr	Phe	Leu	Leu	Ile	Pro	Cys
			20					25					30		
Cys	Leu	Thr	Leu	Asn	Phe	Arg	Ala	Pro	Pro	Ile	Ile	Pro	Asn	Val	Pro
		35					40					45			
Phe	Leu	Trp	Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe
	50					55					60				
Asn	Glu	Pro	Leu	Asp	Met	Ser	Leu	Phe	Thr	Leu	Met	Gly	Ser	Pro	Arg
65					70					75					80

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Ile	Asn	Val	Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	
				85					90					95		
Gly	Tyr	Tyr	Pro	Tyr	Ile	Asp	Leu	Thr	Thr	Gly	Val	Thr	Val	His	Gly	
			100					105					110			
Gly	Ile	Pro	Gln	Lys	Val	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ser	Lys	
		115					120					125				
Gln	Asp	Ile	Leu	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val	
	130					135					140					
Ile	Asp	Trp	Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro	
145					150					155					160	
Lys	Asp	Val	Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn	
				165					170					175		
Val	Gln	Leu	Ser	Leu	Pro	Gln	Ala	Thr	Asp	Lys	Ala	Lys	Gln	Glu	Phe	
		180						185					190			
Glu	Lys	Ala	Gly	Lys	Asp	Phe	Met	Leu	Glu	Thr	Ile	Lys	Leu	Gly	Arg	
		195					200					205				
Ser	Leu	Arg	Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	
	210					215					220					
Tyr	Asn	His	His	Tyr	Arg	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asp	
225					230					235					240	
Val	Glu	Ile	Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser	
			245					250						255		
Thr	Ala	Leu	Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Val	Val	
		260						265					270			
Val	Ala	Thr	Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val	
		275					280				285					
Ser	Lys	Ile	Pro	Asp	Ala	Lys	Asn	Pro	Leu	Pro	Val	Phe	Val	Tyr	Ala	
	290					295					300					
Arg	Leu	Val	Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Arg	Glu	Glu	
305					310					315					320	
Leu	Val	Ser	Thr	Leu	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	
			325					330						335		
Val	Ile	Trp	Gly	Ser	Leu	Ser	Ile	Thr	Arg	Ser	Met	Lys	Ser	Cys	Leu	
		340						345					350			
Leu	Leu	Asp	Thr	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn	
		355					360					365				
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln	
		370				375					380					
Gly	Val	Cys	Ile	Arg	Lys	Asp	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu	
385					390					395					400	
Asn	Pro	Asp	Asn	Phe	Asp	Ile	Arg	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr	
			405					410						415		
Val	His	Gly	Lys	Pro	Thr	Val	Glu	Asp	Leu	Glu	Glu	Phe	Ser	Glu	Lys	
		420					425					430				
Phe	Tyr	Cys	Ser	Cys	Tyr	Thr	Asn	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp	
		435					440					445				
Val	Lys	Asp	Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys	
		450				455					460					
Ile	Asp	Ala	Ser	Leu	Lys	Pro	Pro	Val	Glu	Thr	Glu	Gly	Ser	Pro	Pro	
465					470				475						480	
Ile	Phe	Tyr	Asn	Thr	Ser	Ser	Ser	Thr	Val	Ser	Thr	Thr	Met	Phe	Ile	
			485					490						495		
Val	Asn	Ile	Leu	Phe	Leu	Ile	Ile	Ser	Ser	Val	Ala	Ser	Leu			

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500

505

510

<210> SEQ ID NO 30

<211> LENGTH: 529

<212> TYPE: PRT

<213> ORGANISM: Cavia porcellus

<220> FEATURE:

<223> OTHER INFORMATION: PH20

<400> SEQUENCE: 30

Met Gly Ala Phe Thr Phe Lys His Ser Phe Phe Gly Ser Phe Val Glu
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Cys Ser Gly Val Leu Gln Thr Val Phe Ile Phe Leu Leu Ile Pro Cys
20 25 30

Cys Leu Ala Asp Lys Arg Ala Pro Pro Leu Ile Pro Asn Val Pro Leu
35 40 45

Leu Trp Val Trp Asn Ala Pro Thr Glu Phe Cys Ile Gly Gly Thr Asn
50 55 60

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

Asn Ile Thr Gly Gln Ser Ile Thr Leu Tyr Tyr Val Asp Arg Leu Gly
85 90 95

Tyr Tyr Pro Tyr Ile Asp Pro His Thr Gly Ala Ile Val His Gly Gly
100 105 110

Leu Pro Gln Leu Met Asn Leu Gln Gln His Leu Arg Lys Ser Arg Gln
115 120 125

Asp Ile Leu Phe Tyr Met Pro Thr Asp Ser Val Gly Leu Ala Val Ile
130 135 140

Asp Trp Glu Glu Trp Arg Pro Thr Trp Thr Arg Asn Trp Arg Pro Lys
145 150 155 160

Asp Ile Tyr Arg Asn Lys Ser Ile Glu Leu Val Lys Ser Gln His Pro
165 170 175

Gln Tyr Asn His Ser Tyr Ala Val Ala Val Ala Lys Arg Asp Phe Glu
180 185 190

Arg Thr Gly Lys Ala Phe Met Leu Glu Thr Leu Lys Leu Gly Lys Ser
195 200 205

Leu Arg Pro Ser Ser Leu Trp Gly Tyr Tyr Leu Phe Pro Asp Cys Tyr
210 215 220

Asn Thr His Phe Thr Lys Pro Asn Tyr Asp Gly His Cys Pro Pro Ile
225 230 235 240

Glu Leu Gln Arg Asn Asn Asp Leu Gln Trp Leu Trp Asn Asp Ser Thr
245 250 255

Ala Leu Tyr Pro Ser Val Tyr Leu Thr Ser Arg Val Arg Ser Ser Gln
260 265 270

Asn Gly Ala Leu Tyr Val Arg Asn Arg Val His Glu Ser Ile Arg Val
275 280 285

Ser Lys Leu Met Asp Asp Lys Asn Pro Leu Pro Ile Tyr Val Tyr Ile
290 295 300

Arg Leu Val Phe Thr Asp Gln Thr Thr Thr Phe Leu Glu Leu Asp Asp
305 310 315 320

Leu Val His Ser Val Gly Glu Ile Val Pro Leu Gly Val Ser Gly Ile
325 330 335

Ile Ile Trp Gly Ser Leu Ser Leu Thr Arg Ser Leu Val Ser Cys Ile
340 345 350

Gly Leu Glu Asn Tyr Met Lys Gly Thr Leu Leu Pro Tyr Leu Ile Asn

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355					360					365						
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Gly	Gln	Val	Leu	Cys	Lys	Asn	Gln	
370					375					380						
Gly	Ile	Cys	Thr	Arg	Lys	Asp	Trp	Asn	Thr	Asn	Thr	Tyr	Leu	His	Leu	
385					390					395					400	
Asn	Ala	Thr	Asn	Phe	Asp	Ile	Glu	Leu	Gln	Gln	Asn	Gly	Lys	Phe	Val	
					405					410					415	
Val	His	Gly	Lys	Pro	Ser	Leu	Glu	Asp	Leu	Gln	Glu	Phe	Ser	Lys	Asn	
					420					425					430	
Phe	His	Cys	Ser	Cys	Tyr	Thr	Asn	Val	Ala	Cys	Lys	Asp	Arg	Leu	Asp	
					435					440					445	
Val	His	Asn	Val	Arg	Ser	Val	Asn	Val	Cys	Thr	Ala	Asn	Asn	Ile	Cys	
450					455					460						
Ile	Asp	Ala	Val	Leu	Asn	Phe	Pro	Ser	Leu	Asp	Asp	Asp	Asp	Glu	Pro	
465					470					475					480	
Pro	Ile	Thr	Asp	Asp	Thr	Ser	Gln	Asn	Gln	Asp	Ser	Ile	Ser	Asp	Ile	
					485					490					495	
Thr	Ser	Ser	Ala	Pro	Pro	Ser	Ser	His	Ile	Leu	Pro	Lys	Asp	Leu	Ser	
					500					505					510	
Trp	Cys	Leu	Phe	Leu	Leu	Ser	Ile	Phe	Ser	Gln	His	Trp	Lys	Tyr	Leu	
515					520					525						
Leu																
<210> SEQ ID NO 31																
<211> LENGTH: 512																
<212> TYPE: PRT																
<213> ORGANISM: Rattus norvegicus																
<220> FEATURE:																
<223> OTHER INFORMATION: PH20																
<400> SEQUENCE: 31																
Met	Gly	Glu	Leu	Gln	Phe	Lys	Trp	Leu	Phe	Trp	Arg	Ser	Phe	Ala	Glu	
1				5				10				15				
Ser	Gly	Gly	Thr	Phe	Gln	Thr	Val	Leu	Ile	Phe	Leu	Phe	Ile	Pro	Tyr	
			20				25				30					
Ser	Leu	Thr	Val	Asp	Tyr	Arg	Ala	Thr	Pro	Val	Leu	Ser	Asp	Thr	Thr	
35						40				45						
Phe	Val	Trp	Val	Trp	Asn	Val	Pro	Thr	Glu	Ala	Cys	Val	Glu	Asn	Val	
50						55				60						
Thr	Glu	Pro	Ile	Asp	Leu	Ser	Phe	Phe	Ser	Leu	Ile	Gly	Ser	Pro	Arg	
65						70				75				80		
Lys	Thr	Ala	Ile	Gly	Gln	Pro	Val	Thr	Leu	Phe	Tyr	Val	Asp	Arg	Leu	
			85				90				95					
Gly	Asn	Tyr	Pro	His	Ile	Asp	Ala	Gln	Gln	Thr	Glu	His	His	Gly	Gly	
			100				105				110					
Ile	Pro	Gln	Lys	Gly	Asp	Leu	Thr	Thr	His	Leu	Val	Lys	Ala	Lys	Glu	
			115				120				125					
Asp	Val	Glu	Arg	Tyr	Ile	Pro	Thr	Asp	Lys	Leu	Gly	Leu	Ala	Ile	Ile	
130						135				140						
Asp	Trp	Glu	Glu	Trp	Arg	Pro	Thr	Trp	Met	Arg	Asn	Trp	Thr	Pro	Lys	
145						150				155				160		
Asp	Ile	Tyr	Arg	Asn	Lys	Ser	Ile	Glu	Leu	Val	Gln	Ala	Ala	Asp	Pro	
165					170					175						
Ala	Ile	Asn	Ile	Thr	Glu	Ala	Thr	Val	Arg	Ala	Lys	Ala	Gln	Phe	Glu	
180					185					190						

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Gly	Ala	Ala	Lys	Glu	Phe	Met	Glu	Gly	Thr	Leu	Lys	Leu	Gly	Lys	His
	195						200					205			
Ile	Arg	Pro	Lys	His	Leu	Trp	Gly	Phe	Tyr	Leu	Phe	Pro	Asp	Cys	Tyr
	210					215					220				
Asn	Asn	Lys	Phe	Gln	Val	Asp	Asn	Tyr	Asp	Gly	Gln	Cys	Pro	Asp	Val
225					230					235					240
Glu	Lys	Lys	Arg	Asn	Asp	Asp	Leu	Asp	Trp	Leu	Trp	Lys	Glu	Ser	Thr
				245					250					255	
Gly	Leu	Tyr	Pro	Ser	Val	Tyr	Leu	Lys	Lys	Asp	Leu	Lys	Ser	Ser	Arg
			260					265					270		
Lys	Ala	Thr	Leu	Tyr	Val	Arg	Tyr	Arg	Val	Leu	Glu	Ser	Ile	Arg	Val
	275						280					285			
Ser	Lys	Val	Ser	Asp	Glu	Ser	Asn	Pro	Val	Pro	Ile	Phe	Val	Tyr	Ile
	290						295				300				
Arg	Leu	Val	Phe	Thr	Asp	His	Val	Ser	Glu	Tyr	Leu	Leu	Glu	Asp	Asp
305					310					315					320
Leu	Val	Asn	Thr	Ile	Gly	Glu	Ile	Val	Ala	Gln	Gly	Thr	Ser	Gly	Ile
				325					330					335	
Ile	Ile	Trp	Asp	Ala	Met	Ser	Leu	Ala	Gln	Arg	Ser	Ala	Gly	Cys	Pro
			340					345					350		
Ile	Leu	Arg	Gln	Tyr	Met	Lys	Thr	Thr	Leu	Asn	Pro	Tyr	Ile	Val	Asn
	355						360					365			
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Thr	Leu	Cys	Lys	Glu	Lys
	370					375					380				
Gly	Met	Cys	Ser	Arg	Lys	Thr	Glu	Ser	Ser	Asp	Ala	Tyr	Leu	His	Leu
385					390					395					400
Asp	Pro	Ser	Ser	Phe	Ser	Ile	Asn	Val	Thr	Glu	Ala	Gly	Lys	Tyr	Glu
				405					410					415	
Val	Leu	Gly	Lys	Pro	Glu	Val	Lys	Asp	Leu	Glu	Tyr	Phe	Ser	Glu	His
			420					425					430		
Phe	Lys	Cys	Ser	Cys	Phe	Ser	Lys	Met	Thr	Cys	Glu	Glu	Thr	Ser	Asp
	435						440					445			
Met	Arg	Ser	Ile	Gln	Asp	Val	Asn	Val	Cys	Met	Gly	Asp	Asn	Val	Cys
	450					455					460				
Ile	Lys	Ala	Thr	Leu	Gly	Pro	Asn	Ser	Ala	Phe	His	Leu	Leu	Pro	Gly
465					470					475					480
Lys	Gly	Leu	Leu	Leu	Met	Thr	Thr	Leu	Ala	His	Ile	Leu	His	His	Leu
				485					490					495	
Pro	His	Asp	Ile	Phe	Val	Phe	Pro	Trp	Lys	Met	Leu	Val	Ser	Thr	Pro
			500					505					510		
<210> SEQ ID NO 32															
<211> LENGTH: 512															
<212> TYPE: PRT															
<213> ORGANISM: Mus musculus															
<220> FEATURE:															
<223> OTHER INFORMATION: PH20															
<400> SEQUENCE: 32															
Met	Gly	Glu	Leu	Arg	Phe	Lys	His	Leu	Phe	Trp	Gly	Ser	Phe	Val	Glu
1				5					10					15	
Ser	Gly	Gly	Thr	Phe	Gln	Thr	Val	Leu	Ile	Phe	Leu	Leu	Ile	Pro	Cys
			20					25					30		
Ser	Leu	Thr	Val	Asp	Tyr	Arg	Ala	Ala	Pro	Ile	Leu	Ser	Asn	Thr	Thr
	35						40					45			

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Phe	Leu	Trp	Ile	Trp	Asn	Val	Pro	Thr	Glu	Arg	Cys	Val	Gly	Asn	Val		
50					55						60						
Asn	Asp	Pro	Ile	Asp	Leu	Ser	Phe	Phe	Ser	Leu	Ile	Gly	Ser	Pro	Arg		
65					70				75						80		
Lys	Thr	Ala	Thr	Gly	Gln	Pro	Val	Thr	Leu	Phe	Tyr	Val	Asp	Arg	Leu		
				85					90					95			
Gly	Leu	Tyr	Pro	His	Ile	Asp	Ala	Asn	Gln	Ala	Glu	His	Tyr	Gly	Gly		
			100					105					110				
Ile	Pro	Gln	Arg	Gly	Asp	Tyr	Gln	Ala	His	Leu	Arg	Lys	Ala	Lys	Thr		
		115					120					125					
Asp	Ile	Glu	His	Tyr	Ile	Pro	Asp	Asp	Lys	Leu	Gly	Leu	Ala	Ile	Ile		
	130					135					140						
Asp	Trp	Glu	Glu	Trp	Arg	Pro	Thr	Trp	Leu	Arg	Asn	Trp	Lys	Pro	Lys		
145					150					155					160		
Asp	Asn	Tyr	Arg	Asn	Lys	Ser	Ile	Glu	Leu	Val	Gln	Ser	Thr	Asn	Pro		
				165					170					175			
Gly	Leu	Ser	Ile	Thr	Glu	Ala	Thr	Gln	Lys	Ala	Ile	Gln	Gln	Phe	Glu		
			180					185					190				
Glu	Ala	Gly	Arg	Lys	Phe	Met	Glu	Gly	Thr	Leu	His	Leu	Gly	Lys	Phe		
		195					200					205					
Leu	Arg	Pro	Asn	Gln	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	Tyr		
	210					215					220						
Asn	Asn	Lys	Phe	Gln	Asp	Pro	Lys	Tyr	Asp	Gly	Gln	Cys	Pro	Ala	Val		
225					230					235					240		
Glu	Lys	Lys	Arg	Asn	Asp	Asn	Leu	Lys	Trp	Leu	Trp	Lys	Ala	Ser	Thr		
				245					250					255			
Gly	Leu	Tyr	Pro	Ser	Val	Tyr	Leu	Lys	Lys	Asp	Leu	Lys	Ser	Asn	Arg		
			260					265					270				
Gln	Ala	Thr	Leu	Tyr	Val	Arg	Tyr	Arg	Val	Val	Glu	Ala	Ile	Arg	Val		
		275					280					285					
Ser	Lys	Val	Gly	Asn	Ala	Ser	Asp	Pro	Val	Pro	Ile	Phe	Val	Tyr	Ile		
	290					295					300						
Arg	Leu	Val	Phe	Thr	Asp	Arg	Thr	Ser	Glu	Tyr	Leu	Leu	Glu	Asp	Asp		
305					310					315					320		
Leu	Val	Asn	Thr	Ile	Gly	Glu	Ile	Val	Ala	Leu	Gly	Thr	Ser	Gly	Ile		
				325					330					335			
Ile	Ile	Trp	Asp	Ala	Met	Ser	Leu	Ala	Gln	Arg	Ala	Ala	Gly	Cys	Pro		
			340					345					350				
Ile	Leu	His	Lys	Tyr	Met	Gln	Thr	Thr	Leu	Asn	Pro	Tyr	Ile	Val	Asn		
		355					360					365					
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Thr	Leu	Cys	Asn	Glu	Lys		
		370				375					380						
Gly	Met	Cys	Ser	Arg	Arg	Lys	Glu	Ser	Ser	Asp	Val	Tyr	Leu	His	Leu		
385					390					395					400		
Asn	Pro	Ser	His	Phe	Asp	Ile	Met	Leu	Thr	Glu	Thr	Gly	Lys	Tyr	Glu		
				405					410					415			
Val	Leu	Gly	Asn	Pro	Arg	Val	Gly	Asp	Leu	Glu	Tyr	Phe	Ser	Glu	His		
			420					425					430				
Phe	Lys	Cys	Ser	Cys	Phe	Ser	Arg	Met	Thr	Cys	Lys	Glu	Thr	Ser	Asp		
		435					440					445					
Val	Lys	Asn	Val	Gln	Asp	Val	Asn	Val	Cys	Val	Gly	Asp	Asn	Val	Cys		
		450				455					460						

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Ile	Lys	Ala	Lys	Val	Glu	Pro	Asn	Pro	Ala	Phe	Tyr	Leu	Leu	Pro	Gly
465					470					475					480
Lys	Ser	Leu	Leu	Phe	Met	Thr	Thr	Leu	Gly	His	Val	Leu	Tyr	His	Leu
				485					490					495	
Pro	Gln	Asp	Ile	Phe	Val	Phe	Pro	Arg	Lys	Thr	Leu	Val	Ser	Thr	Pro
			500					505					510		
<210> SEQ ID NO 33															
<211> LENGTH: 807															
<212> TYPE: PRT															
<213> ORGANISM: Staphylococcus aureus															
<220> FEATURE:															
<223> OTHER INFORMATION: hyaluronidase															
<400> SEQUENCE: 33															
Met	Thr	Tyr	Arg	Ile	Lys	Lys	Trp	Gln	Lys	Leu	Ser	Thr	Ile	Thr	Leu
1				5					10					15	
Leu	Met	Ala	Gly	Val	Ile	Thr	Leu	Asn	Gly	Gly	Glu	Phe	Arg	Ser	Val
			20					25					30		
Asp	Lys	His	Gln	Ile	Ala	Val	Ala	Asp	Thr	Asn	Val	Gln	Thr	Pro	Asp
		35					40					45			
Tyr	Glu	Lys	Leu	Arg	Asn	Thr	Trp	Leu	Asp	Val	Asn	Tyr	Gly	Tyr	Asp
	50					55					60				
Lys	Tyr	Asp	Glu	Asn	Asn	Pro	Asp	Met	Lys	Lys	Lys	Phe	Asp	Ala	Thr
65					70					75					80
Glu	Lys	Glu	Ala	Thr	Asn	Leu	Leu	Lys	Glu	Met	Lys	Thr	Glu	Ser	Gly
				85					90					95	
Arg	Lys	Tyr	Leu	Trp	Ser	Gly	Ala	Glu	Thr	Leu	Glu	Thr	Asn	Ser	Ser
			100					105					110		
His	Met	Thr	Arg	Thr	Tyr	Arg	Asn	Ile	Glu	Lys	Ile	Ala	Glu	Ala	Met
		115					120					125			
Arg	Asn	Pro	Lys	Thr	Thr	Leu	Asn	Thr	Asp	Glu	Asn	Lys	Lys	Lys	Val
	130						135				140				
Lys	Asp	Ala	Leu	Glu	Trp	Leu	His	Lys	Asn	Ala	Tyr	Gly	Lys	Glu	Pro
145					150					155					160
Asp	Lys	Lys	Val	Lys	Glu	Leu	Ser	Glu	Asn	Phe	Thr	Lys	Thr	Thr	Gly
			165						170					175	
Lys	Asn	Thr	Asn	Leu	Asn	Trp	Trp	Asp	Tyr	Glu	Ile	Gly	Thr	Pro	Lys
		180						185					190		
Ser	Leu	Thr	Asn	Thr	Leu	Ile	Leu	Leu	Asn	Asp	Gln	Phe	Ser	Asn	Glu
		195					200					205			
Glu	Lys	Lys	Lys	Phe	Thr	Ala	Pro	Ile	Lys	Thr	Phe	Ala	Pro	Asp	Ser
	210						215				220				
Asp	Lys	Ile	Leu	Ser	Ser	Val	Gly	Lys	Ala	Glu	Leu	Ala	Lys	Gly	Gly
225					230				235						240
Asn	Leu	Val	Asp	Ile	Ser	Lys	Val	Lys	Leu	Leu	Glu	Cys	Ile	Ile	Glu
			245						250					255	
Glu	Asp	Lys	Asp	Met	Met	Lys	Lys	Ser	Ile	Asp	Ser	Phe	Asn	Lys	Val
			260					265					270		
Phe	Thr	Tyr	Val	Gln	Asp	Ser	Ala	Thr	Gly	Lys	Glu	Arg	Asn	Gly	Phe
		275					280					285			
Tyr	Lys	Asp	Gly	Ser	Tyr	Ile	Asp	His	Gln	Asp	Val	Pro	Tyr	Thr	Gly
	290					295					300				
Ala	Tyr	Gly	Val	Val	Leu	Leu	Glu	Gly	Ile	Ser	Gln	Met	Met	Pro	Met
305					310					315					320

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Ile	Lys	Glu	Thr	Pro	Phe	Asn	Asp	Lys	Thr	Gln	Asn	Asp	Thr	Thr	Leu
				325					330						335
Lys	Ser	Trp	Ile	Asp	Asp	Gly	Phe	Met	Pro	Leu	Ile	Tyr	Lys	Gly	Glu
			340					345					350		
Met	Met	Asp	Leu	Ser	Arg	Gly	Arg	Ala	Ile	Ser	Arg	Glu	Asn	Glu	Thr
		355					360					365			
Ser	His	Ser	Ala	Ser	Ala	Thr	Val	Met	Lys	Ser	Leu	Leu	Arg	Leu	Ser
	370					375					380				
Asp	Ala	Met	Asp	Asp	Ser	Thr	Lys	Ala	Lys	Tyr	Lys	Lys	Ile	Val	Lys
385					390					395					400
Ser	Ser	Val	Glu	Ser	Asp	Ser	Ser	Tyr	Lys	Gln	Asn	Asp	Tyr	Leu	Asn
				405				410						415	
Ser	Tyr	Ser	Asp	Ile	Asp	Lys	Met	Lys	Ser	Leu	Met	Thr	Asp	Asn	Ser
			420					425					430		
Ile	Ser	Lys	Asn	Gly	Leu	Thr	Gln	Gln	Leu	Lys	Ile	Tyr	Asn	Asp	Met
		435					440					445			
Asp	Arg	Val	Thr	Tyr	His	Asn	Lys	Asp	Leu	Asp	Phe	Ala	Phe	Gly	Leu
	450					455					460				
Ser	Met	Thr	Ser	Lys	Asn	Val	Ala	Arg	Tyr	Glu	Ser	Ile	Asn	Gly	Glu
465					470					475					480
Asn	Leu	Lys	Gly	Trp	His	Thr	Gly	Ala	Gly	Met	Ser	Tyr	Leu	Tyr	Asn
				485					490					495	
Ser	Asp	Val	Lys	His	Tyr	His	Asp	Asn	Phe	Trp	Val	Thr	Ala	Asp	Met
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Lys	Arg	Leu	Ser	Gly	Thr	Thr	Thr	Leu	Asp	Asn	Glu	Ile	Leu	Lys	Asp
		515					520					525			
Thr	Asp	Asp	Lys	Lys	Ser	Ser	Lys	Thr	Phe	Val	Gly	Gly	Thr	Lys	Val
	530					535					540				
Asp	Asp	Gln	His	Ala	Ser	Ile	Gly	Met	Asp	Phe	Glu	Asn	Gln	Asp	Lys
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Thr	Leu	Thr	Ala	Lys	Lys	Ser	Tyr	Phe	Ile	Leu	Asn	Asp	Lys	Ile	Val
			565						570					575	
Phe	Leu	Gly	Thr	Gly	Ile	Lys	Ser	Thr	Asp	Ser	Ser	Lys	Asn	Pro	Val
			580					585					590		
Thr	Thr	Ile	Glu	Asn	Arg	Lys	Ala	Asn	Gly	Tyr	Thr	Leu	Tyr	Thr	Asp
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Asp	Lys	Gln	Thr	Thr	Asn	Ser	Asp	Asn	Gln	Glu	Asn	Asn	Ser	Val	Phe
	610					615					620				
Leu	Glu	Ser	Thr	Asp	Thr	Lys	Lys	Asn	Ile	Gly	Tyr	His	Phe	Leu	Asn
625					630					635					640
Lys	Pro	Lys	Ile	Thr	Val	Lys	Lys	Glu	Ser	His	Thr	Gly	Lys	Trp	Lys
				645					650					655	
Glu	Ile	Asn	Lys	Ser	Gln	Lys	Asp	Thr	Gln	Lys	Thr	Asp	Glu	Tyr	Tyr
			660					665					670		
Glu	Val	Thr	Gln	Lys	His	Ser	Asn	Ser	Asp	Asn	Lys	Tyr	Gly	Tyr	Val
		675					680					685			
Leu	Tyr	Pro	Gly	Leu	Ser	Lys	Asp	Val	Phe	Lys	Thr	Lys	Lys	Asp	Glu
	690					695					700				
Val	Thr	Val	Val	Lys	Gln	Glu	Asp	Asp	Phe	His	Val	Val	Lys	Asp	Asn
705					710					715					720
Glu	Ser	Val	Trp	Ala	Gly	Val	Asn	Tyr	Ser	Asn	Ser	Thr	Gln	Thr	Phe
				725					730					735	
Asp	Ile	Asn	Asn	Thr	Lys	Val	Glu	Val	Lys	Ala	Lys	Gly	Met	Phe	Ile

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Tyr	Val	Gly	Pro	Asp	Gly	Gly	Phe	His	Ser	Gly	Ala	Asn	Ser	Thr	Val
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Ala	Gly	Asn	Leu	Thr	Val	Lys	Asp	Pro	Thr	Ser	Gly	Lys	His	Ala	Ala
			340					345					350		
Thr	Lys	Asp	Tyr	Val	Asp	Glu	Lys	Ile	Ala	Glu	Leu	Lys	Lys	Leu	Ile
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			20					25					30		
Gly	Ile	Thr	Glu	Asn	Phe	Tyr	Glu	Ile	Tyr	Pro	Lys	Pro	Gln	Glu	Ile
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Ser	Tyr	Ser	Gly	Gly	Glu	Phe	Gln	Ile	Ser	Asp	Glu	Ile	Asn	Ile	Val
	50					55					60				
Tyr	Asp	Asp	Gly	Ile	Asp	Thr	Tyr	Thr	Lys	Lys	Arg	Val	Asp	Glu	Val
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Leu	Glu	Ala	Ser	Asn	Leu	Glu	Ala	Thr	Val	Ser	Asn	Glu	Ile	Val	Pro
				85					90					95	
Gly	Lys	Thr	Asn	Phe	Leu	Val	Gly	Ile	Asn	Glu	Ser	Gly	Gly	Val	Val
			100					105					110		
Asp	Asn	Tyr	Phe	Asn	Lys	Asn	Ile	Pro	His	Asp	Glu	Ser	Phe	Phe	Asp
		115					120					125			
Glu	Lys	Met	Asp	Ala	Asn	Ile	Val	Ser	Val	Lys	Asp	Gly	Val	Ile	Gly
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Val	Ile	Gly	Glu	Asp	Thr	Asp	Ser	Ala	Phe	Tyr	Gly	Val	Thr	Thr	Leu
145					150					155					160
Lys	His	Val	Phe	Asn	Gln	Leu	Glu	Glu	Gly	Asn	Lys	Ile	Gln	Ser	Phe
				165					170					175	
Arg	Ala	Asp	Asp	Tyr	Ala	Glu	Val	Ala	His	Arg	Gly	Phe	Ile	Glu	Gly
			180					185					190		
Tyr	Tyr	Gly	Asn	Pro	Trp	Ser	Asn	Glu	Asp	Arg	Ala	Glu	Leu	Met	Lys
		195					200					205			
Phe	Gly	Gly	Asp	Tyr	Lys	Leu	Asn	Gln	Tyr	Val	Phe	Ala	Pro	Lys	Asp
		210				215					220				
Asp	Pro	Tyr	His	Asn	Ser	Lys	Trp	Arg	Asp	Leu	Tyr	Pro	Glu	Glu	Lys
225					230					235					240
Leu	Ser	Glu	Ile	Lys	Lys	Leu	Ala	Gln	Val	Gly	Asn	Glu	Thr	Lys	Asn
				245					250					255	
Arg	Tyr	Val	Tyr	Ala	Leu	His	Pro	Phe	Met	Asn	Asn	Pro	Val	Arg	Phe
			260					265					270		
Asp	Thr	Glu	Glu	Asn	Tyr	Gln	Asn	Asp	Leu	Gly	Val	Ile	Lys	Ala	Lys

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275					280					285						
Phe	Thr	Gln	Leu	Leu	Glu	Asn	Asp	Val	Arg	Gln	Phe	Ala	Ile	Leu	Ala	
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Asp	Asp	Ala	Ser	Ala	Pro	Ala	Gln	Gly	Ala	Ser	Met	Tyr	Val	Lys	Leu	
305					310					315					320	
Leu	Thr	Asp	Leu	Thr	Arg	Trp	Leu	Glu	Glu	Gln	Gln	Ser	Thr	Tyr	Pro	
					325					330					335	
Asp	Leu	Lys	Thr	Asp	Leu	Met	Phe	Cys	Pro	Ser	Asp	Tyr	Tyr	Gly	Asn	
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Gly	Ser	Ser	Ala	Gln	Leu	Lys	Glu	Leu	Asn	Lys	Ala	Glu	Asp	Asn	Val	
					355					360					365	
Ser	Ile	Val	Met	Thr	Gly	Gly	Arg	Ile	Trp	Gly	Glu	Val	Asp	Glu	Asn	
370					375					380						
Phe	Ala	Asn	Asn	Phe	Met	Asn	Asn	Ile	Ser	Thr	Glu	Gly	His	Pro	Gly	
385					390					395					400	
Arg	Ala	Pro	Phe	Phe	Trp	Ile	Asn	Trp	Pro	Cys	Ser	Asp	Asn	Ser	Lys	
					405					410					415	
Gln	His	Leu	Ile	Met	Gly	Gly	Asn	Asp	Thr	Phe	Leu	His	Pro	Gly	Val	
					420					425					430	
Asp	Pro	Ser	Lys	Ile	Asp	Gly	Ile	Val	Leu	Asn	Pro	Met	Gln	Gln	Ala	
435					440					445						
Glu	Ala	Asn	Lys	Ser	Ala	Leu	Phe	Ala	Ile	Ala	Asp	Tyr	Ala	Trp	Asn	
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Ile	Trp	Asp	Asn	Lys	Glu	Glu	Ala	Asp	Glu	Asn	Trp	Asn	Asp	Ser	Phe	
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Lys	Tyr	Met	Asp	His	Gly	Thr	Ala	Glu	Glu	Thr	Asn	Ser	Ser	Leu	Ala	
					485					490					495	
Leu	Arg	Glu	Ile	Ser	Lys	His	Met	Ile	Asn	Gln	Asn	Met	Asp	Gly	Arg	
					500					505					510	
Val	Arg	Pro	Leu	Gln	Glu	Ser	Val	Glu	Leu	Ala	Pro	Lys	Leu	Glu	Ala	
					515					520					525	
Phe	Lys	Gln	Lys	Tyr	Asp	Ser	Gly	Ala	Ser	Ile	Lys	Glu	Asp	Ala	Leu	
530					535					540						
Glu	Leu	Ile	Ala	Glu	Phe	Thr	Asn	Leu	Gln	Lys	Ala	Ala	Asp	Tyr	Tyr	
545					550					555					560	
Lys	Asn	Asn	Pro	Gly	Asn	Glu	Arg	Thr	Arg	Asp	Gln	Ile	Ile	Tyr	Trp	
					565					570					575	
Leu	Asn	Cys	Trp	Glu	Asp	Thr	Met	Asp	Ala	Ala	Ile	Gly	Tyr	Leu	Lys	
					580					585					590	
Ser	Ala	Ile	Ala	Ile	Glu	Glu	Gly	Asp	Asp	Glu	Ala	Ala	Trp	Ala	Asn	
595					600					605						
Tyr	Ser	Glu	Ala	Gln	Gly	Ala	Phe	Glu	Lys	Ser	Lys	Thr	Tyr	Gly	Phe	
610					615					620						
His	Tyr	Val	Asp	His	Thr	Glu	Tyr	Ala	Glu	Val	Gly	Val	Gln	His	Ile	
625					630					635					640	
Val	Pro	Phe	Ile	Lys	Ser	Met	Gly	Gln	Asn	Leu	Ser	Val	Val	Ile	Gly	
					645					650					655	
Ser	Ile	Val	Asp	Pro	Asn	Arg	Ile	Ile	Ala	Thr	Tyr	Ile	Ser	Asn	Arg	
					660					665					670	
Gln	Asp	Ala	Pro	Thr	Gly	Asn	Pro	Asp	Asn	Ile	Phe	Asp	Asn	Asn	Ala	
675					680					685						
Ser	Thr	Glu	Leu	Val	Tyr	Lys	Asn	Pro	Asn	Arg	Ile	Asp	Val	Gly	Thr	
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Tyr Val Gly Val Lys Tyr Ser Asn Pro Ile Thr Leu Asn Asn Val Glu	
705	710 715 720
Phe Leu Met Gly Ala Asn Ser Asn Pro Asn Asp Thr Met Gln Lys Ala	
	725 730 735
Lys Ile Gln Tyr Thr Val Asp Gly Arg Glu Trp Ile Asp Leu Glu Glu	
	740 745 750
Gly Val Glu Tyr Thr Met Pro Gly Ala Ile Lys Val Glu Asn Leu Asp	
	755 760 765
Leu Lys Val Arg Gly Val Arg Leu Ile Ala Thr Glu Ala Arg Glu Asn	
	770 775 780
Thr Trp Leu Gly Val Arg Asp Ile Asn Val Asn Lys Lys Glu Asp Ser	
	785 790 795 800
Asn Ser Gly Val Glu Phe Asn Pro Ser Leu Ile Arg Ser Glu Ser Trp	
	805 810 815
Gln Val Tyr Glu Gly Asn Glu Ala Asn Leu Leu Asp Gly Asp Asp Asn	
	820 825 830
Thr Gly Val Trp Tyr Lys Thr Leu Asn Gly Asp Thr Ser Leu Ala Gly	
	835 840 845
Glu Phe Ile Gly Leu Asp Leu Gly Lys Glu Ile Lys Leu Asp Gly Ile	
	850 855 860
Arg Phe Val Ile Gly Lys Asn Gly Gly Gly Ser Ser Asp Lys Trp Asn	
	865 870 875 880
Lys Phe Lys Leu Glu Tyr Ser Leu Asp Asn Glu Ser Trp Thr Thr Ile	
	885 890 895
Lys Glu Tyr Asp Lys Thr Gly Ala Pro Ala Gly Lys Asp Val Ile Glu	
	900 905 910
Glu Ser Phe Glu Thr Pro Ile Ser Ala Lys Tyr Ile Arg Leu Thr Asn	
	915 920 925
Met Glu Asn Ile Asn Lys Trp Leu Thr Phe Ser Glu Phe Ala Ile Ile	
	930 935 940
Ser Asp Glu Leu Glu Asn Ala Gly Asn Lys Glu Asn Val Tyr Thr Asn	
	945 950 955 960
Thr Glu Leu Asp Leu Leu Ser Leu Ala Lys Glu Asp Val Thr Lys Leu	
	965 970 975
Ile Pro Thr Asp Asp Ile Ser Leu Asn His Gly Glu Tyr Ile Gly Val	
	980 985 990
Lys Leu Asn Arg Ile Lys Asp Leu Ser Asn Ile Asn Leu Glu Ile Ser	
	995 1000 1005
Asn Asp Thr Gly Leu Lys Leu Gln Ser Ser Met Asn Gly Val Glu Trp	
	1010 1015 1020
Thr Glu Ile Thr Asp Lys Asn Thr Leu Glu Asp Gly Arg Tyr Val Arg	
	1025 1030 1035 1040
Leu Ile Asn Thr Ser Asn Glu Ala Val Asn Phe Asn Leu Thr Lys Phe	
	1045 1050 1055
Glu Val Asn Ser Asn Glu Val Tyr Glu Pro Ser Leu Val Asp Ala Tyr	
	1060 1065 1070
Val Gly Asp Asp Gly Ala Lys Lys Ala Val Asp Gly Asp Leu Lys Thr	
	1075 1080 1085
Arg Val Lys Phe Leu Gly Ala Pro Ser Thr Gly Asp Thr Ile Val Tyr	
	1090 1095 1100
Asp Leu Gly Gln Glu Ile Leu Val Asp Asn Leu Lys Tyr Val Val Leu	
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Asp	Thr	Glu	Val	Asp	His	Val	Arg	Asp	Gly	Lys	Ile	Gln	Leu	Ser	Leu	
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Asp	Gly	Glu	Thr	Trp	Thr	Asp	Ala	Ile	Thr	Ile	Gly	Asp	Gly	Val	Glu	
			1140					1145					1150			
Asn	Gly	Val	Asp	Asp	Met	Phe	Ser	Thr	Pro	Leu	Lys	Asn	Gly	Tyr	Lys	
		1155					1160					1165				
His	Gly	Asn	Gln	Ser	Gly	Gly	Ile	Val	Pro	Ile	Asp	Ser	Ala	Tyr	Val	
	1170					1175					1180					
Glu	Gly	Asp	Asn	Leu	Asn	Gln	Lys	Ala	Arg	Tyr	Val	Arg	Ile	Leu	Phe	
1185					1190					1195					1200	
Thr	Ala	Pro	Tyr	Arg	His	Arg	Trp	Thr	Val	Ile	Asn	Glu	Leu	Met	Ile	
				1205					1210					1215		
Asn	Asn	Gly	Glu	Tyr	Ile	Ser	Thr	Val	Asn	Asp	Pro	Thr	Tyr	Ile	Ser	
		1220						1225					1230			
Asn	Pro	Ile	Glu	Glu	Arg	Gly	Phe	Ala	Pro	Ser	Asn	Leu	Arg	Asp	Gly	
		1235					1240					1245				
Asn	Leu	Thr	Thr	Ser	Tyr	Lys	Pro	Asn	Thr	Asn	Asn	Gly	Glu	Ile	Ser	
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Glu	Gly	Ser	Ile	Thr	Tyr	Arg	Leu	Ser	Glu	Lys	Thr	Asp	Val	Arg	Lys	
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Val	Thr	Ile	Val	Gln	Ser	Gly	Ser	Ser	Ile	Ser	Asn	Ala	Lys	Val	Met	
				1285					1290					1295		
Ala	Arg	Val	Gly	Asp	Gly	Ser	Glu	Asn	Val	Thr	Asp	Gln	Trp	Val	Gln	
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Leu	Gly	Thr	Leu	Ser	Asn	Ser	Leu	Asn	Glu	Phe	Ile	Asn	Arg	Asp	Tyr	
	1315						1320					1325				
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	1330					1335					1340					
Ile	Tyr	Glu	Ile	Ile	Thr	Leu	Asn	Gln	Glu	Phe	Glu	Phe	Pro	Val	Asn	
1345					1350					1355				1360		
Asp	Ser	Leu	Lys	Ala	Lys	Tyr	Asp	Glu	Leu	Ile	Asn	Leu	Ser	Gly	Asp	
			1365						1370					1375		
Glu	Tyr	Thr	Leu	Ser	Ser	Phe	Glu	Thr	Leu	Lys	Glu	Ala	Leu	Asn	Glu	
			1380					1385					1390			
Ala	Lys	Ser	Ile	Leu	Asp	Asp	Ser	Asn	Ser	Ser	Gln	Lys	Lys	Ile	Asp	
	1395						1400					1405				
Lys	Ala	Leu	Glu	Lys	Leu	Asn	Lys	Ala	Glu	Glu	Arg	Leu	Asp	Leu	Arg	
	1410					1415					1420					
Ala	Thr	Asp	Phe	Glu	Asp	Phe	Asn	Lys	Val	Leu	Thr	Leu	Gly	Asn	Ser	
1425					1430					1435				1440		
Leu	Val	Glu	Glu	Glu	Tyr	Thr	Ala	Glu	Ser	Trp	Ala	Leu	Phe	Ser	Glu	
			1445					1450					1455			
Val	Leu	Glu	Ala	Ala	Asn	Glu	Ala	Asn	Lys	Asn	Lys	Ala	Asp	Tyr	Thr	
		1460					1465						1470			
Gln	Asp	Gln	Ile	Asn	Gln	Ile	Val	Ile	Asp	Leu	Asp	Ala	Ser	Ile	Lys	
	1475					1480						1485				
Ala	Leu	Val	Lys	Glu	Thr	Pro	Glu	Val	Asp	Lys	Thr	Asn	Leu	Gly	Glu	
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Asn	Val	Gly	Glu	Tyr	His	Lys	Gly	Ala	Lys	Asp	Gly	Leu	Thr	Val	Glu	
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Asn	Ser	Leu	Leu	Ile	Glu	Glu	Ser	Thr	Gly	Asp	Phe	Asn	Gly	Asn	Gly	
1570					1575					1580						
Lys	Ile	Asp	Ile	Gly	Asp	Leu	Ala	Met	Val	Ser	Lys	Asn	Ile	Gly	Ser	
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Thr	Thr	Asn	Thr	Ser	Leu	Asp	Leu	Asn	Lys	Asp	Gly	Ser	Ile	Asp	Glu	
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Thr	Thr	Val	Trp	Asn	Ala	Asn	Thr	Gln	Trp	Cys	Leu	Glu	Arg	His	Gly	
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Val	Asp	Val	Asp	Val	Ser	Val	Phe	Asp	Val	Val	Ala	Asn	Pro	Gly	Gln	
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Thr	Phe	Arg	Gly	Pro	Asp	Met	Thr	Ile	Phe	Tyr	Ser	Ser	Gln	Leu	Gly	
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Thr	Tyr	Pro	Tyr	Tyr	Thr	Pro	Thr	Gly	Glu	Pro	Val	Phe	Gly	Gly	Leu	
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Pro	Gln	Asn	Ala	Ser	Leu	Ile	Ala	His	Leu	Ala	Arg	Thr	Phe	Gln	Asp	
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Ile	Leu	Ala	Ala	Ile	Pro	Ala	Pro	Asp	Phe	Ser	Gly	Leu	Ala	Val	Ile	
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Asp	Trp	Glu	Ala	Trp	Arg	Pro	Arg	Trp	Ala	Phe	Asn	Trp	Asp	Thr	Lys	
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Asp	Ile	Tyr	Arg	Gln	Arg	Ser	Arg	Ala	Leu	Val	Gln	Ala	Gln	His	Pro	
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Asp	Trp	Pro	Ala	Pro	Gln	Val	Glu	Ala	Val	Ala	Gln	Asp	Gln	Phe	Gln	
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Gly	Ala	Ala	Arg	Ala	Trp	Met	Ala	Gly	Thr	Leu	Gln	Leu	Gly	Arg	Ala	
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Leu	Arg	Pro	Arg	Gly	Leu	Trp	Gly	Phe	Tyr	Gly	Phe	Pro	Asp	Cys	Tyr	
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Asn	Tyr	Asp	Phe	Leu	Ser	Pro	Asn	Tyr	Thr	Gly	Gln	Cys	Pro	Ser	Gly	
			210					215				220				
Ile	Arg	Ala	Gln	Asn	Asp	Gln	Leu	Gly	Trp	Leu	Trp	Gly	Gln	Ser	Arg	
			225					230				235				
Ala	Leu	Tyr	Pro	Ser	Ile	Tyr	Met	Pro	Ala	Val	Leu	Glu	Gly	Thr	Gly	
				245					250				255			
Lys	Ser	Gln	Met	Tyr	Val	Gln	His	Arg	Val	Ala	Glu	Ala	Phe	Arg	Val	
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Ala	Val	Ala	Ala	Gly	Asp	Pro	Asn	Leu	Pro	Val	Leu	Pro	Tyr	Val	Gln	

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275					280					285							
Ile	Phe	Tyr	Asp	Thr	Thr	Asn	His	Phe	Leu	Pro	Leu	Asp	Glu	Leu	Glu		
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His	Ser	Leu	Gly	Glu	Ser	Ala	Ala	Gln	Gly	Ala	Ala	Gly	Val	Val	Leu		
305					310					315					320		
Trp	Val	Ser	Trp	Glu	Asn	Thr	Arg	Thr	Lys	Glu	Ser	Cys	Gln	Ala	Ile		
					325					330					335		
Lys	Glu	Tyr	Met	Asp	Thr	Thr	Leu	Gly	Pro	Phe	Ile	Leu	Asn	Val	Thr		
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Ser	Gly	Ala	Leu	Leu	Cys	Ser	Gln	Ala	Leu	Cys	Ser	Gly	His	Gly	Arg		
					355					360					365		
Cys	Val	Arg	Arg	Thr	Ser	His	Pro	Lys	Ala	Leu	Leu	Leu	Leu	Asn	Pro		
370					375					380							
Ala	Ser	Phe	Ser	Ile	Gln	Leu	Thr	Pro	Gly	Gly	Gly	Pro	Leu	Ser	Leu		
385					390					395					400		
Arg	Gly	Ala	Leu	Ser	Leu	Glu	Asp	Gln	Ala	Gln	Met	Ala	Val	Glu	Phe		
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Lys	Cys	Arg	Cys	Tyr	Pro	Gly	Trp	Gln	Ala	Pro	Trp	Cys	Glu	Arg	Lys		
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				20				25				30					
Gly	Arg	Pro	Phe	Val	Val	Ala	Trp	Asp	Val	Pro	Thr	Gln	Asp	Cys	Gly		
				35				40				45					
Pro	Arg	Leu	Lys	Val	Pro	Leu	Asp	Leu	Asn	Ala	Phe	Asp	Val	Gln	Ala		
50				55				60									
Ser	Pro	Asn	Glu	Gly	Phe	Val	Asn	Gln	Asn	Ile	Thr	Ile	Phe	Tyr	Arg		
65				70				75				80					
Asp	Arg	Leu	Gly	Leu	Tyr	Pro	Arg	Phe	Asp	Ser	Ala	Gly	Arg	Ser	Val		
					85					90					95		
His	Gly	Gly	Val	Pro	Gln	Asn	Val	Ser	Leu	Trp	Ala	His	Arg	Lys	Met		
					100					105					110		
Leu	Gln	Lys	Arg	Val	Glu	His	Tyr	Ile	Arg	Thr	Gln	Glu	Ser	Ala	Gly		
					115					120					125		
Leu	Ala	Val	Ile	Asp	Trp	Glu	Asp	Trp	Arg	Pro	Val	Trp	Val	Arg	Asn		
130					135					140							
Trp	Gln	Asp	Lys	Asp	Val	Tyr	Arg	Arg	Leu	Ser	Arg	Gln	Leu	Val	Ala		
145					150					155					160		
Ser	Arg	His	Pro	Asp	Trp	Pro	Pro	Asp	Arg	Ile	Val	Lys	Gln	Ala	Gln		
					165					170					175		
Tyr	Glu	Phe	Glu	Phe	Ala	Ala	Gln	Gln	Phe	Met	Leu	Glu	Thr	Leu	Arg		
					180					185					190		
Tyr	Val	Lys	Ala	Val	Arg	Pro	Arg	His	Leu	Trp	Gly	Phe	Tyr	Leu	Phe		

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195					200					205						
Pro	Asp	Cys	Tyr	Asn	His	Asp	Tyr	Val	Gln	Asn	Trp	Glu	Ser	Tyr	Thr	
210					215					220						
Gly	Arg	Cys	Pro	Asp	Val	Glu	Val	Ala	Arg	Asn	Asp	Gln	Leu	Ala	Trp	
225					230					235					240	
Leu	Trp	Ala	Glu	Ser	Thr	Ala	Leu	Phe	Pro	Ser	Val	Tyr	Leu	Asp	Glu	
					245					250					255	
Thr	Leu	Ala	Ser	Ser	Arg	His	Gly	Arg	Asn	Phe	Val	Ser	Phe	Arg	Val	
					260					265					270	
Gln	Glu	Ala	Leu	Arg	Val	Ala	Arg	Thr	His	His	Ala	Asn	His	Ala	Leu	
275					280					285						
Pro	Val	Tyr	Val	Phe	Thr	Arg	Pro	Thr	Tyr	Ser	Arg	Arg	Leu	Thr	Gly	
290					295					300						
Leu	Ser	Glu	Met	Asp	Leu	Ile	Ser	Thr	Ile	Gly	Glu	Ser	Ala	Ala	Leu	
305					310					315					320	
Gly	Ala	Ala	Gly	Val	Ile	Leu	Trp	Gly	Asp	Ala	Gly	Tyr	Thr	Thr	Ser	
					325					330					335	
Thr	Glu	Thr	Cys	Gln	Tyr	Leu	Lys	Asp	Tyr	Leu	Thr	Arg	Leu	Leu	Val	
					340					345					350	
Pro	Tyr	Val	Val	Asn	Val	Ser	Trp	Ala	Thr	Gln	Tyr	Cys	Ser	Arg	Ala	
355					360					365						
Gln	Cys	His	Gly	His	Gly	Arg	Cys	Val	Arg	Arg	Asn	Pro	Ser	Ala	Ser	
370					375					380						
Thr	Phe	Leu	His	Leu	Ser	Thr	Asn	Ser	Phe	Arg	Leu	Val	Pro	Gly	His	
385					390					395					400	
Ala	Pro	Gly	Glu	Pro	Gln	Leu	Arg	Pro	Val	Gly	Glu	Leu	Ser	Trp	Ala	
					405					410					415	
Asp	Ile	Asp	His	Leu	Gln	Thr	His	Phe	Arg	Cys	Gln	Cys	Tyr	Leu	Gly	
					420					425					430	
Trp	Ser	Gly	Glu	Gln	Cys	Gln	Trp	Asp	His	Arg	Gln	Ala	Ala	Gly	Gly	
435					440					445						
Ala	Ser	Glu	Ala	Trp	Ala	Gly	Ser	His	Leu	Thr	Ser	Leu	Leu	Ala	Leu	
450					455					460						
Ala	Ala	Leu	Ala	Phe	Thr	Trp	Thr	Leu								
465					470											
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<211> LENGTH: 417																
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<223> OTHER INFORMATION: Hyaluronidase-3 [Precursor]																
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1					5					10					15	
Leu	Gly	Cys	Gly	Gln	Pro	Leu	Pro	Gln	Val	Pro	Glu	Arg	Pro	Phe	Ser	
					20					25					30	
Val	Leu	Trp	Asn	Val	Pro	Ser	Ala	His	Cys	Glu	Ala	Arg	Phe	Gly	Val	
35					40					45						
His	Leu	Pro	Leu	Asn	Ala	Leu	Gly	Ile	Ile	Ala	Asn	Arg	Gly	Gln	His	
50					55					60						
Phe	His	Gly	Gln	Asn	Met	Thr	Ile	Phe	Tyr	Lys	Asn	Gln	Leu	Gly	Leu	
65					70					75					80	
Tyr	Pro	Tyr	Phe	Gly	Pro	Arg	Gly	Thr	Ala	His	Asn	Gly	Gly	Ile	Pro	

	85							90						95					
Gln	Ala	Leu	Pro	Leu	Asp	Arg	His	Leu	Ala	Leu	Ala	Ala	Tyr	Gln	Ile				
			100					105					110						
His	His	Ser	Leu	Arg	Pro	Gly	Phe	Ala	Gly	Pro	Ala	Val	Leu	Asp	Trp				
		115					120					125							
Glu	Glu	Trp	Cys	Pro	Leu	Trp	Ala	Gly	Asn	Trp	Gly	Arg	Arg	Arg	Ala				
	130					135					140								
Tyr	Gln	Ala	Ala	Ser	Trp	Ala	Trp	Ala	Gln	Gln	Val	Phe	Pro	Asp	Leu				
145					150					155					160				
Asp	Pro	Gln	Glu	Gln	Leu	Tyr	Lys	Ala	Tyr	Thr	Gly	Phe	Glu	Gln	Ala				
				165					170						175				
Ala	Arg	Ala	Leu	Met	Glu	Asp	Thr	Leu	Arg	Val	Ala	Gln	Ala	Leu	Arg				
			180					185					190						
Pro	His	Gly	Leu	Trp	Gly	Phe	Tyr	His	Tyr	Pro	Ala	Cys	Gly	Asn	Gly				
		195					200					205							
Trp	His	Ser	Met	Ala	Ser	Asn	Tyr	Thr	Gly	Arg	Cys	His	Ala	Ala	Thr				
	210					215					220								
Leu	Ala	Arg	Asn	Thr	Gln	Leu	His	Trp	Leu	Trp	Ala	Ala	Ser	Ser	Ala				
225					230					235					240				
Leu	Phe	Pro	Ser	Ile	Tyr	Leu	Pro	Pro	Arg	Leu	Pro	Pro	Ala	His	His				
				245					250					255					
Gln	Ala	Phe	Val	Arg	His	Arg	Leu	Glu	Glu	Ala	Phe	Arg	Val	Ala	Leu				
			260					265					270						
Val	Gly	His	Arg	His	Pro	Leu	Pro	Val	Leu	Ala	Tyr	Val	Arg	Leu	Thr				
		275					280					285							
His	Arg	Arg	Ser	Gly	Arg	Phe	Leu	Ser	Gln	Asp	Asp	Leu	Val	Gln	Ser				
	290					295					300								
Ile	Gly	Val	Ser	Ala	Ala	Leu	Gly	Ala	Ala	Gly	Val	Val	Leu	Trp	Gly				
305					310					315					320				
Asp	Leu	Ser	Leu	Ser	Ser	Ser	Glu	Glu	Glu	Cys	Trp	His	Leu	His	Asp				
				325					330					335					
Tyr	Leu	Val	Asp	Thr	Leu	Gly	Pro	Tyr	Val	Ile	Asn	Val	Thr	Arg	Ala				
			340					345					350						
Ala	Met	Ala	Cys	Ser	His	Gln	Arg	Cys	His	Gly	His	Gly	Arg	Cys	Ala				
		355					360					365							
Arg	Arg	Asp	Pro	Gly	Gln	Met	Glu	Ala	Phe	Leu	His	Leu	Trp	Pro	Asp				
		370				375						380							
Gly	Ser	Leu	Gly	Asp	Trp	Lys	Ser	Phe	Ser	Cys	His	Cys	Tyr	Trp	Gly				
385					390					395					400				
Trp	Ala	Gly	Pro	Thr	Cys	Gln	Glu	Pro	Arg	Pro	Gly	Pro	Lys	Glu	Ala				
				405					410					415					

Val His Leu Thr Ser Trp Leu Leu Ile Phe Phe Ile Leu Lys Ser Ile
20 25 30

Ser	Cys	Leu	Lys	Pro	Ala	Arg	Leu	Pro	Ile	Tyr	Gln	Arg	Lys	Pro	Phe
		35					40					45			
Ile	Ala	Ala	Trp	Asn	Ala	Pro	Thr	Asp	Gln	Cys	Leu	Ile	Lys	Tyr	Asn
	50					55					60				
Leu	Arg	Leu	Asn	Leu	Lys	Met	Phe	Pro	Val	Ile	Gly	Ser	Pro	Leu	Ala
65					70					75					80
Lys	Ala	Arg	Gly	Gln	Asn	Val	Thr	Ile	Phe	Tyr	Val	Asn	Arg	Leu	Gly
				85					90					95	
Tyr	Tyr	Pro	Trp	Tyr	Thr	Ser	Gln	Gly	Val	Pro	Ile	Asn	Gly	Gly	Leu
			100					105					110		
Pro	Gln	Asn	Ile	Ser	Leu	Gln	Val	His	Leu	Glu	Lys	Ala	Asp	Gln	Asp
		115					120					125			
Ile	Asn	Tyr	Tyr	Ile	Pro	Ala	Glu	Asp	Phe	Ser	Gly	Leu	Ala	Val	Ile
	130					135					140				
Asp	Trp	Glu	Tyr	Trp	Arg	Pro	Gln	Trp	Ala	Arg	Asn	Trp	Asn	Ser	Lys
145					150					155					160
Asp	Val	Tyr	Arg	Gln	Lys	Ser	Arg	Lys	Leu	Ile	Ser	Asp	Met	Gly	Lys
				165					170					175	
Asn	Val	Ser	Ala	Thr	Asp	Ile	Glu	Tyr	Leu	Ala	Lys	Val	Thr	Phe	Glu
			180					185					190		
Glu	Ser	Ala	Lys	Ala	Phe	Met	Lys	Glu	Thr	Ile	Lys	Leu	Gly	Ile	Lys
		195					200					205			
Ser	Arg	Pro	Lys	Gly	Leu	Trp	Gly	Tyr	Tyr	Leu	Tyr	Pro	Asp	Cys	His
	210					215					220				
Asn	Tyr	Asn	Val	Tyr	Ala	Pro	Asn	Tyr	Ser	Gly	Ser	Cys	Pro	Glu	Asp
225					230					235					240
Glu	Val	Leu	Arg	Asn	Asn	Glu	Leu	Ser	Trp	Leu	Trp	Asn	Ser	Ser	Ala
				245					250					255	
Ala	Leu	Tyr	Pro	Ser	Ile	Gly	Val	Trp	Lys	Ser	Leu	Gly	Asp	Ser	Glu
			260					265					270		
Asn	Ile	Leu	Arg	Phe	Ser	Lys	Phe	Arg	Val	His	Glu	Ser	Met	Arg	Ile
		275					280					285			
Ser	Thr	Met	Thr	Ser	His	Asp	Tyr	Ala	Leu	Pro	Val	Phe	Val	Tyr	Thr
		290				295					300				
Arg	Leu	Gly	Tyr	Arg	Asp	Glu	Pro	Leu	Phe	Phe	Leu	Ser	Lys	Gln	Asp
305					310					315					320
Leu	Val	Ser	Thr	Ile	Gly	Glu	Ser	Ala	Ala	Leu	Gly	Ala	Ala	Gly	Ile
				325					330					335	
Val	Ile	Trp	Gly	Asp	Met	Asn	Leu	Thr	Ala	Ser	Lys	Ala	Asn	Cys	Thr
			340					345					350		
Lys	Val	Lys	Gln	Phe	Val	Ser	Ser	Asp	Leu	Gly	Ser	Tyr	Ile	Ala	Asn
		355					360					365			
Val	Thr	Arg	Ala	Ala	Glu	Val	Cys	Ser	Leu	His	Leu	Cys	Arg	Asn	Asn
						375					380				
Gly	Arg	Cys	Ile												

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Ile	Lys	Thr	Ala	Asp	Gly	Cys	Ser	Gly	Val	Ser	Pro	Ser	Pro	Gly	Ser	
	450					455				460						
Leu	Met	Thr	Leu	Cys	Leu	Leu	Leu	Leu	Ala	Ser	Tyr	Arg	Ser	Ile	Gln	
465					470					475					480	
Leu																
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<211> LENGTH: 467																
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<213> ORGANISM: Homo sapiens																
<220> FEATURE:																
<223> OTHER INFORMATION: sHuPH20 precursor 1-467																
<400> SEQUENCE: 40																
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1				5				10						15		
Ser	Ser	Gly	Val	Ser	Gln	Ile	Val	Phe	Thr	Phe	Leu	Leu	Ile	Pro	Cys	
			20					25					30			
Cys	Leu	Thr	Leu	Asn	Phe	Arg	Ala	Pro	Pro	Val	Ile	Pro	Asn	Val	Pro	
			35				40					45				
Phe	Leu	Trp	Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe	
	50					55					60					
Asp	Glu	Pro	Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg	
65					70					75					80	
Ile	Asn	Ala	Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	
				85					90					95		
Gly	Tyr	Tyr	Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly	
			100					105					110			
Gly	Ile	Pro	Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys	
		115					120					125				
Lys	Asp	Ile	Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val	
	130					135					140					
Ile	Asp	Trp	Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro	
145					150					155					160	
Lys	Asp	Val	Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn	
				165					170					175		
Val	Gln	Leu	Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe	
			180					185					190			
Glu	Lys	Ala	Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys	
	195						200					205				
Leu	Leu	Arg	Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	
	210					215					220					
Tyr	Asn	His	His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn	
225					230					235					240	
Val	Glu	Ile	Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser	
			245						250					255		
Thr	Ala	Leu	Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val	
			260					265					270			
Ala	Ala	Thr	Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val	
		275					280					285				
Ser	Lys	Ile	Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr	
	290					295					300					
Arg	Ile	Val	Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu	
305					310					315				320		
Leu	Val	Tyr	Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	

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325
Val Ile Trp Gly Thr Leu Ser Ile Met Arg Ser Met Lys Ser Cys Leu
340 345 350
Leu Leu Asp Asn Tyr Met Glu Thr Ile Leu Asn Pro Tyr Ile Ile Asn
355 360 365
Val Thr Leu Ala Ala Lys Met Cys Ser Gln Val Leu Cys Gln Glu Gln
370 375 380
Gly Val Cys Ile Arg Lys Asn Trp Asn Ser Ser Asp Tyr Leu His Leu
385 390 395 400
Asn Pro Asp Asn Phe Ala Ile Gln Leu Glu Lys Gly Gly Lys Phe Thr
405 410 415
Val Arg Gly Lys Pro Thr Leu Glu Asp Leu Glu Gln Phe Ser Glu Lys
420 425 430
Phe Tyr Cys Ser Cys Tyr Ser Thr Leu Ser Cys Lys Glu Lys Ala Asp
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Val Lys Asp Thr Asp Ala Val Asp Val Cys Ile Ala Asp Gly Val Cys
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Ile Asp Ala
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<211> LENGTH: 477
<212> TYPE: PRT
<213> ORGANISM: Homo sapiens
<220> FEATURE:
<223> OTHER INFORMATION: sHuPH20 precursor 1-477
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Ser Ser Gly Val Ser Gln Ile Val Phe Thr Phe Leu Leu Ile Pro Cys
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Cys Leu Thr Leu Asn Phe Arg Ala Pro Pro Val Ile Pro Asn Val Pro
35 40 45
Phe Leu Trp Ala Trp Asn Ala Pro Ser Glu Phe Cys Leu Gly Lys Phe
50 55 60
Asp Glu Pro Leu Asp Met Ser Leu Phe Ser Phe Ile Gly Ser Pro Arg
65 70 75 80
Ile Asn Ala Thr Gly Gln Gly Val Thr Ile Phe Tyr Val Asp Arg Leu
85 90 95
Gly Tyr Tyr Pro Tyr Ile Asp Ser Ile Thr Gly Val Thr Val Asn Gly
100 105 110
Gly Ile Pro Gln Lys Ile Ser Leu Gln Asp His Leu Asp Lys Ala Lys
115 120 125
Lys Asp Ile Thr Phe Tyr Met Pro Val Asp Asn Leu Gly Met Ala Val
130 135 140
Ile Asp Trp Glu Glu Trp Arg Pro Thr Trp Ala Arg Asn Trp Lys Pro
145 150 155 160
Lys Asp Val Tyr Lys Asn Arg Ser Ile Glu Leu Val Gln Gln Gln Asn
165 170 175
Val Gln Leu Ser Leu Thr Glu Ala Thr Glu Lys Ala Lys Gln Glu Phe
180 185 190
Glu Lys Ala Gly Lys Asp Phe Leu Val Glu Thr Ile Lys Leu Gly Lys
195 200 205
Leu Leu Arg Pro Asn His Leu Trp Gly Tyr Tyr Leu Phe Pro Asp Cys

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210				215				220							
Tyr	Asn	His	His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn
225					230					235					240
Val	Glu	Ile	Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser
				245					250					255	
Thr	Ala	Leu	Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val
			260					265					270		
Ala	Ala	Thr	Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val
		275					280					285			
Ser	Lys	Ile	Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr
	290					295					300				
Arg	Ile	Val	Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu
305					310					315					320
Leu	Val	Tyr	Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile
				325					330					335	
Val	Ile	Trp	Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu
			340					345					350		
Leu	Leu	Asp	Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn
		355					360					365			
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln
	370					375					380				
Gly	Val	Cys	Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu
385					390					395					400
Asn	Pro	Asp	Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr
				405					410					415	
Val	Arg	Gly	Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys
			420					425					430		
Phe	Tyr	Cys	Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp
		435					440					445			
Val	Lys	Asp	Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys
	450					455					460				
Ile	Asp	Ala	Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu			
465					470					475					
<210> SEQ ID NO 42															
<211> LENGTH: 478															
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<220> FEATURE:															
<223> OTHER INFORMATION: sHuPH20 precursor 1-478															
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Ser	Ser	Gly	Val	Ser	Gln	Ile	Val	Phe	Thr	Phe	Leu	Leu	Ile	Pro	Cys
			20					25					30		
Cys	Leu	Thr	Leu	Asn	Phe	Arg	Ala	Pro	Pro	Val	Ile	Pro	Asn	Val	Pro
		35					40					45			
Phe	Leu	Trp	Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe
	50					55					60				
Asp	Glu	Pro	Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg
65					70					75					80
Ile	Asn	Ala	Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu
			85					90						95	
Gly	Tyr	Tyr	Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly

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100						105						110					
Gly	Ile	Pro	Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys		
		115					120					125					
Lys	Asp	Ile	Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val		
	130					135					140						
Ile	Asp	Trp	Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro		
145					150					155					160		
Lys	Asp	Val	Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn		
				165					170					175			
Val	Gln	Leu	Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe		
			180					185					190				
Glu	Lys	Ala	Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys		
		195					200					205					
Leu	Leu	Arg	Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys		
	210					215					220						
Tyr	Asn	His	His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn		
225					230					235					240		
Val	Glu	Ile	Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser		
			245						250					255			
Thr	Ala	Leu	Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val		
			260					265					270				
Ala	Ala	Thr	Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val		
		275					280					285					
Ser	Lys	Ile	Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr		
	290					295					300						
Arg	Ile	Val	Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu		
305					310					315					320		
Leu	Val	Tyr	Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile		
				325					330					335			
Val	Ile	Trp	Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu		
			340					345					350				
Leu	Leu	Asp	Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn		
		355					360					365					
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln		
		370				375					380						
Gly	Val	Cys	Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu		
385					390					395					400		
Asn	Pro	Asp	Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr		
				405					410					415			
Val	Arg	Gly	Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys		
			420					425					430				
Phe	Tyr	Cys	Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp		
		435					440					445					
Val	Lys	Asp	Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys		
		450				455					460						
Ile	Asp	Ala	Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu	Pro				
465					470					475							

<210> SEQ ID NO 43
<211> LENGTH: 479
<212> TYPE: PRT
<213> ORGANISM: Homo sapiens
<220> FEATURE:
<223> OTHER INFORMATION: sHuPH20 precursor 1-479

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<400> SEQUENCE: 43																			
Met	Gly	Val	Leu	Lys	Phe	Lys	His	Ile	Phe	Phe	Arg	Ser	Phe	Val	Lys				
1				5					10					15					
Ser	Ser	Gly	Val	Ser	Gln	Ile	Val	Phe	Thr	Phe	Leu	Leu	Ile	Pro	Cys				
			20					25					30						
Cys	Leu	Thr	Leu	Asn	Phe	Arg	Ala	Pro	Pro	Val	Ile	Pro	Asn	Val	Pro				
			35				40					45							
Phe	Leu	Trp	Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe				
	50					55					60								
Asp	Glu	Pro	Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg				
65					70					75					80				
Ile	Asn	Ala	Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu				
				85					90					95					
Gly	Tyr	Tyr	Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly				
			100					105						110					
Gly	Ile	Pro	Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys				
			115				120					125							
Lys	Asp	Ile	Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val				
	130					135					140								
Ile	Asp	Trp	Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro				
145					150					155					160				
Lys	Asp	Val	Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn				
				165					170					175					
Val	Gln	Leu	Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe				
			180					185					190						
Glu	Lys	Ala	Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys				
	195					200						205							
Leu	Leu	Arg	Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys				
	210					215					220								
Tyr	Asn	His	His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn				
225					230					235					240				
Val	Glu	Ile	Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser				
			245						250					255					
Thr	Ala	Leu	Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val				
			260					265						270					
Ala	Ala	Thr	Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val				
		275					280					285							
Ser	Lys	Ile	Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr				
	290					295					300								
Arg	Ile	Val	Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu				
305					310					315					320				
Leu	Val	Tyr	Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile				
			325						330					335					
Val	Ile	Trp	Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu				
			340					345					350						
Leu	Leu	Asp	Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn				
		355					360					365							
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln				
			370				375					380							
Gly	Val	Cys	Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu				
385					390					395					400				
Asn	Pro	Asp	Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr				
			405						410					415					

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Val	Arg	Gly	Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys	
			420					425					430			
Phe	Tyr	Cys	Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp	
		435					440					445				
Val	Lys	Asp	Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys	
	450					455					460					
Ile	Asp	Ala	Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu	Pro	Gln		
465					470					475						
<210> SEQ ID NO 44																
<211> LENGTH: 480																
<212> TYPE: PRT																
<213> ORGANISM: Homo sapiens																
<220> FEATURE:																
<223> OTHER INFORMATION: sHuPH20 precursor 1-480																
<400> SEQUENCE: 44																
Met	Gly	Val	Leu	Lys	Phe	Lys	His	Ile	Phe	Phe	Arg	Ser	Phe	Val	Lys	
1				5				10					15			
Ser	Ser	Gly	Val	Ser	Gln	Ile	Val	Phe	Thr	Phe	Leu	Leu	Ile	Pro	Cys	
			20					25					30			
Cys	Leu	Thr	Leu	Asn	Phe	Arg	Ala	Pro	Pro	Val	Ile	Pro	Asn	Val	Pro	
		35					40					45				
Phe	Leu	Trp	Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe	
	50					55					60					
Asp	Glu	Pro	Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg	
65					70				75						80	
Ile	Asn	Ala	Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	
				85					90					95		
Gly	Tyr	Tyr	Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly	
			100					105					110			
Gly	Ile	Pro	Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys	
		115					120					125				
Lys	Asp	Ile	Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val	
	130					135					140					
Ile	Asp	Trp	Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro	
145					150					155					160	
Lys	Asp	Val	Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn	
				165					170					175		
Val	Gln	Leu	Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe	
			180					185					190			
Glu	Lys	Ala	Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys	
		195					200					205				
Leu	Leu	Arg	Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	
	210					215					220					
Tyr	Asn	His	His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn	
225					230					235					240	
Val	Glu	Ile	Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser	
				245					250					255		
Thr	Ala	Leu	Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val	
			260					265					270			
Ala	Ala	Thr	Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val	
		275					280					285				
Ser	Lys	Ile	Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr	
	290					295					300					

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Arg	Ile	Val	Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu
305					310					315					320
Leu	Val	Tyr	Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile
				325					330					335	
Val	Ile	Trp	Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu
			340					345					350		
Leu	Leu	Asp	Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn
		355					360					365			
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln
	370					375					380				
Gly	Val	Cys	Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu
385					390					395					400
Asn	Pro	Asp	Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr
				405					410					415	
Val	Arg	Gly	Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys
			420					425					430		
Phe	Tyr	Cys	Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp
		435					440					445			
Val	Lys	Asp	Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys
	450					455					460				
Ile	Asp	Ala	Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu	Pro	Gln	Ile
465					470					475					480
<210> SEQ ID NO 45															
<211> LENGTH: 481															
<212> TYPE: PRT															
<213> ORGANISM: Homo sapiens															
<220> FEATURE:															
<223> OTHER INFORMATION: sHuPH20 precursor 1-481															
<400> SEQUENCE: 45															
Met	Gly	Val	Leu	Lys	Phe	Lys	His	Ile	Phe	Phe	Arg	Ser	Phe	Val	Lys
1				5					10					15	
Ser	Ser	Gly	Val	Ser	Gln	Ile	Val	Phe	Thr	Phe	Leu	Leu	Ile	Pro	Cys
			20					25					30		
Cys	Leu	Thr	Leu	Asn	Phe	Arg	Ala	Pro	Pro	Val	Ile	Pro	Asn	Val	Pro
		35					40					45			
Phe	Leu	Trp	Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe
	50					55					60				
Asp	Glu	Pro	Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg
65					70					75					80
Ile	Asn	Ala	Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu
			85						90					95	
Gly	Tyr	Tyr	Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly
			100					105					110		
Gly	Ile	Pro	Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys
		115					120					125			
Lys	Asp	Ile	Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val
	130					135					140				
Ile	Asp	Trp	Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro
145					150					155					160
Lys	Asp	Val	Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn
			165						170					175	
Val	Gln	Leu	Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe
		180						185						190	

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Glu	Lys	Ala	Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys	
	195						200					205				
Leu	Leu	Arg	Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	
	210					215					220					
Tyr	Asn	His	His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn	
225					230					235					240	
Val	Glu	Ile	Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser	
			245						250					255		
Thr	Ala	Leu	Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val	
		260						265					270			
Ala	Ala	Thr	Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val	
	275						280					285				
Ser	Lys	Ile	Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr	
	290					295					300					
Arg	Ile	Val	Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu	
305					310					315					320	
Leu	Val	Tyr	Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	
				325					330					335		
Val	Ile	Trp	Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu	
			340					345					350			
Leu	Leu	Asp	Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn	
	355						360					365				
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln	
	370					375					380					
Gly	Val	Cys	Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu	
385					390					395					400	
Asn	Pro	Asp	Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr	
			405						410					415		
Val	Arg	Gly	Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys	
		420						425					430			
Phe	Tyr	Cys	Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp	
	435						440					445				
Val	Lys	Asp	Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys	
	450					455					460					
Ile	Asp	Ala	Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu	Pro	Gln	Ile	
465					470					475					480	
Phe																
<210> SEQ ID NO 46																
<211> LENGTH: 483																
<212> TYPE: PRT																
<213> ORGANISM: Homo sapiens																
<220> FEATURE:																
<223> OTHER INFORMATION: sHuPH20 precursor 1-483																
<400> SEQUENCE: 46																
Met	Gly	Val	Leu	Lys	Phe	Lys	His	Ile	Phe	Phe	Arg	Ser	Phe	Val	Lys	
1				5					10					15		
Ser	Ser	Gly	Val	Ser	Gln	Ile	Val	Phe	Thr	Phe	Leu	Leu	Ile	Pro	Cys	
			20					25					30			
Cys	Leu	Thr	Leu	Asn	Phe	Arg	Ala	Pro	Pro	Val	Ile	Pro	Asn	Val	Pro	
	35						40					45				
Phe	Leu	Trp	Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe	
	50					55				60						

[illegible]

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<210> SEQ ID NO 47
<211> LENGTH: 432
<212> TYPE: PRT
<213> ORGANISM: Homo sapiens
<220> FEATURE:
<223> OTHER INFORMATION: sHuPH20 mature 36-467

<400> SEQUENCE: 47

Leu Asn Phe Arg Ala Pro Pro Val Ile Pro Asn Val Pro Phe Leu Trp
1 5 10 15

Ala Trp Asn Ala Pro Ser Glu Phe Cys Leu Gly Lys Phe Asp Glu Pro
20 25 30

Leu Asp Met Ser Leu Phe Ser Phe Ile Gly Ser Pro Arg Ile Asn Ala
35 40 45

Thr Gly Gln Gly Val Thr Ile Phe Tyr Val Asp Arg Leu Gly Tyr Tyr
50 55 60

Pro Tyr Ile Asp Ser Ile Thr Gly Val Thr Val Asn Gly Gly Ile Pro
65 70 75 80

Gln Lys Ile Ser Leu Gln Asp His Leu Asp Lys Ala Lys Lys Asp Ile
85 90 95

Thr Phe Tyr Met Pro Val Asp Asn Leu Gly Met Ala Val Ile Asp Trp
100 105 110

Glu Glu Trp Arg Pro Thr Trp Ala Arg Asn Trp Lys Pro Lys Asp Val
115 120 125

Tyr Lys Asn Arg Ser Ile Glu Leu Val Gln Gln Gln Asn Val Gln Leu
130 135 140

Ser Leu Thr Glu Ala Thr Glu Lys Ala Lys Gln Glu Phe Glu Lys Ala
145 150 155 160

Gly Lys Asp Phe Leu Val Glu Thr Ile Lys Leu Gly Lys Leu Leu Arg
165 170 175

Pro Asn His Leu Trp Gly Tyr Tyr Leu Phe Pro Asp Cys Tyr Asn His
180 185 190

His Tyr Lys Lys Pro Gly Tyr Asn Gly Ser Cys Phe Asn Val Glu Ile
195 200 205

Lys Arg Asn Asp Asp Leu Ser Trp Leu Trp Asn Glu Ser Thr Ala Leu
210 215 220

Tyr Pro Ser Ile Tyr Leu Asn Thr Gln Gln Ser Pro Val Ala Ala Thr
225 230 235 240

Leu Tyr Val Arg Asn Arg Val Arg Glu Ala Ile Arg Val Ser Lys Ile
245 250 255

Pro Asp Ala Lys Ser Pro Leu Pro Val Phe Ala Tyr Thr Arg Ile Val
260 265 270

Phe Thr Asp Gln Val Leu Lys Phe Leu Ser Gln Asp Glu Leu Val Tyr
275 280 285

Thr Phe Gly Glu Thr Val Ala Leu Gly Ala Ser Gly Ile Val Ile Trp
290 295 300

Gly Thr Leu Ser Ile Met Arg Ser Met Lys Ser Cys Leu Leu Leu Asp
305 310 315 320

Asn Tyr Met Glu Thr Ile Leu Asn Pro Tyr Ile Ile Asn Val Thr Leu
325 330 335

Ala Ala Lys Met Cys Ser Gln Val Leu Cys Gln Glu Gln Gly Val Cys
340 345 350

Ile Arg Lys Asn Trp Asn Ser Ser Asp Tyr Leu His Leu Asn Pro Asp
355 360 365

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Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr	Val	Arg	Gly	
370						375					380					
Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys	Phe	Tyr	Cys	
385					390					395					400	
Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp	Val	Lys	Asp	
				405					410					415		
Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys	Ile	Asp	Ala	
			420					425					430			
<210> SEQ ID NO 48																
<211> LENGTH: 448																
<212> TYPE: PRT																
<213> ORGANISM: Homo sapiens																
<220> FEATURE:																
<223> OTHER INFORMATION: sHuPH20 mature 36-483																
<400> SEQUENCE: 48																
Leu	Asn	Phe	Arg	Ala	Pro	Pro	Val	Ile	Pro	Asn	Val	Pro	Phe	Leu	Trp	
1				5					10					15		
Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe	Asp	Glu	Pro	
			20					25					30			
Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg	Ile	Asn	Ala	
		35					40					45				
Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	Gly	Tyr	Tyr	
	50					55					60					
Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly	Gly	Ile	Pro	
65					70					75					80	
Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys	Lys	Asp	Ile	
				85					90					95		
Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val	Ile	Asp	Trp	
			100					105					110			
Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro	Lys	Asp	Val	
		115					120					125				
Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn	Val	Gln	Leu	
	130					135					140					
Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe	Glu	Lys	Ala	
145					150					155					160	
Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys	Leu	Leu	Arg	
				165					170					175		
Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys	Tyr	Asn	His	
			180					185					190			
His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn	Val	Glu	Ile	
		195					200					205				
Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser	Thr	Ala	Leu	
	210					215					220					
Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val	Ala	Ala	Thr	
225					230					235					240	
Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val	Ser	Lys	Ile	
				245					250					255		
Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr	Arg	Ile	Val	
			260					265					270			
Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu	Leu	Val	Tyr	
		275					280					285				
Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	Val	Ile	Trp	
	290					295					300					

Gly 305	Thr	Leu	Ser	Ile	Met 310	Arg	Ser	Met	Lys	Ser 315	Cys	Leu	Leu	Leu	Asp 320
Asn	Tyr	Met	Glu	Thr 325	Ile	Leu	Asn	Pro	Tyr 330	Ile	Ile	Asn	Val	Thr	Leu 335
Ala	Ala	Lys	Met	Cys 340	Ser	Gln	Val	Leu	Cys 345	Gln	Glu	Gln	Gly	Val	Cys 350
Ile	Arg	Lys 355	Asn	Trp	Asn	Ser	Ser 360	Asp	Tyr	Leu	His	Leu 365	Asn	Pro	Asp
Asn 370	Phe	Ala	Ile	Gln	Leu	Glu 375	Lys	Gly	Gly	Lys	Phe 380	Thr	Val	Arg	Gly
Lys 385	Pro	Thr	Leu	Glu	Asp 390	Leu	Glu	Gln	Phe	Ser 395	Glu	Lys	Phe	Tyr	Cys 400
Ser	Cys	Tyr	Ser	Thr 405	Leu	Ser	Cys	Lys	Glu 410	Lys	Ala	Asp	Val	Lys	Asp 415
Thr	Asp	Ala	Val	Asp 420	Val	Cys	Ile	Ala 425	Asp	Gly	Val	Cys	Ile	Asp	Ala 430
Phe	Leu	Lys 435	Pro	Pro	Met	Glu	Thr	Glu 440	Glu	Pro	Gln	Ile	Phe	Tyr	Asn 445

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<210> SEQ ID NO 49
<211> LENGTH: 1446
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens
<220> FEATURE:
<223> OTHER INFORMATION: DNA encoding soluble rHuPH20 "precursor"
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<400> SEQUENCE: 49

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cctcctgtta	ttccaaatgt	gcctttcctc	tgggcctgga	atgccccaa	tgaattttgt	180
cttgaaaaat	ttgatgagcc	actagatatg	agcctcttct	ctttcatagg	aagccccga	240
ataaacgcca	cggggcaagg	tgttacaata	ttttatgttg	atagacttgg	ctactatcct	300
tacatagatt	caatcacagg	agtaactgtg	aatggaggaa	tccccagaa	gatttcctta	360
caagaccatc	tggaacaaag	taagaaagac	attacatctt	atatgccagt	agacaatttg	420
ggaatggctg	ttattgactg	ggaagaatgg	agaccactt	gggcaagaaa	ctggaaacct	480
aaagatgttt	acaagaatag	gtctattgaa	ttggttcagc	aacaaaatgt	acaacttagt	540
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gtagaaataa	aaagaaatga	tgatctcagc	tggttggtgga	atgaaagcac	tgctctttac	780
ccatccatct	atttgaacac	tcagcagctc	cctgtagctg	ctacactcta	tgtgcgcaat	840
cgagttcggg	aagccatcag	agtttccaaa	atacctgatg	caaaaagtcc	acttccgggt	900
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atactgaatc	cttacataat	caacgtcaca	ctagcagcca	aaatgtgtag	ccaagtgcct	1140
tgccaggagc	aaggagtgtg	tataaggaaa	aactggaatt	caagtgacta	tcttcacctc	1200
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<210> SEQ ID NO 50	
<211> LENGTH: 509	
<212> TYPE: PRT	
<213> ORGANISM: Homo sapiens	
<220> FEATURE:	
<223> OTHER INFORMATION: PH20 variant P48A	
<400> SEQUENCE: 50	
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Ser Ser Gly Val Ser Gln Ile Val Phe Thr Phe Leu Leu Ile Pro Cys	
20 25 30	
Cys Leu Thr Leu Asn Phe Arg Ala Pro Pro Val Ile Pro Asn Val Ala	
35 40 45	
Phe Leu Trp Ala Trp Asn Ala Pro Ser Glu Phe Cys Leu Gly Lys Phe	
50 55 60	
Asp Glu Pro Leu Asp Met Ser Leu Phe Ser Phe Ile Gly Ser Pro Arg	
65 70 75 80	
Ile Asn Ala Thr Gly Gln Gly Val Thr Ile Phe Tyr Val Asp Arg Leu	
85 90 95	
Gly Tyr Tyr Pro Tyr Ile Asp Ser Ile Thr Gly Val Thr Val Asn Gly	
100 105 110	
Gly Ile Pro Gln Lys Ile Ser Leu Gln Asp His Leu Asp Lys Ala Lys	
115 120 125	
Lys Asp Ile Thr Phe Tyr Met Pro Val Asp Asn Leu Gly Met Ala Val	
130 135 140	
Ile Asp Trp Glu Glu Trp Arg Pro Thr Trp Ala Arg Asn Trp Lys Pro	
145 150 155 160	
Lys Asp Val Tyr Lys Asn Arg Ser Ile Glu Leu Val Gln Gln Gln Asn	
165 170 175	
Val Gln Leu Ser Leu Thr Glu Ala Thr Glu Lys Ala Lys Gln Glu Phe	
180 185 190	
Glu Lys Ala Gly Lys Asp Phe Leu Val Glu Thr Ile Lys Leu Gly Lys	
195 200 205	
Leu Leu Arg Pro Asn His Leu Trp Gly Tyr Tyr Leu Phe Pro Asp Cys	
210 215 220	
Tyr Asn His His Tyr Lys Lys Pro Gly Tyr Asn Gly Ser Cys Phe Asn	
225 230 235 240	
Val Glu Ile Lys Arg Asn Asp Asp Leu Ser Trp Leu Trp Asn Glu Ser	
245 250 255	
Thr Ala Leu Tyr Pro Ser Ile Tyr Leu Asn Thr Gln Gln Ser Pro Val	
260 265 270	
Ala Ala Thr Leu Tyr Val Arg Asn Arg Val Arg Glu Ala Ile Arg Val	
275 280 285	
Ser Lys Ile Pro Asp Ala Lys Ser Pro Leu Pro Val Phe Ala Tyr Thr	
290 295 300	
Arg Ile Val Phe Thr Asp Gln Val Leu Lys Phe Leu Ser Gln Asp Glu	
305 310 315 320	

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Leu	Val	Tyr	Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile	
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Val	Ile	Trp	Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu	
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Leu	Leu	Asp	Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn	
		355					360					365				
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln	
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Gly	Val	Cys	Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu	
385					390				395						400	
Asn	Pro	Asp	Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr	
				405					410					415		
Val	Arg	Gly	Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys	
			420					425					430			
Phe	Tyr	Cys	Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp	
		435					440					445				
Val	Lys	Asp	Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys	
	450						455				460					
Ile	Asp	Ala	Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu	Pro	Gln	Ile	
465					470					475					480	
Phe	Tyr	Asn	Ala	Ser	Pro	Ser	Thr	Leu	Ser	Ala	Thr	Met	Phe	Ile	Val	
				485					490					495		
Ser	Ile	Leu	Phe	Leu	Ile	Ile	Ser	Ser	Val	Ala	Ser	Leu				
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<210> SEQ ID NO 51																
<211> LENGTH: 509																
<212> TYPE: PRT																
<213> ORGANISM: Homo sapiens																
<220> FEATURE:																
<223> OTHER INFORMATION: precursor PH20 variant L499W																
<400> SEQUENCE: 51																
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1				5					10					15		
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			20					25					30			
Cys	Leu	Thr	Leu	Asn	Phe	Arg	Ala	Pro	Pro	Val	Ile	Pro	Asn	Val	Pro	
		35					40					45				
Phe	Leu	Trp	Ala	Trp	Asn	Ala	Pro	Ser	Glu	Phe	Cys	Leu	Gly	Lys	Phe	
	50					55					60					
Asp	Glu	Pro	Leu	Asp	Met	Ser	Leu	Phe	Ser	Phe	Ile	Gly	Ser	Pro	Arg	
65					70					75					80	
Ile	Asn	Ala	Thr	Gly	Gln	Gly	Val	Thr	Ile	Phe	Tyr	Val	Asp	Arg	Leu	
				85					90					95		
Gly	Tyr	Tyr	Pro	Tyr	Ile	Asp	Ser	Ile	Thr	Gly	Val	Thr	Val	Asn	Gly	
			100					105					110			
Gly	Ile	Pro	Gln	Lys	Ile	Ser	Leu	Gln	Asp	His	Leu	Asp	Lys	Ala	Lys	
		115					120					125				
Lys	Asp	Ile	Thr	Phe	Tyr	Met	Pro	Val	Asp	Asn	Leu	Gly	Met	Ala	Val	
		130				135					140					
Ile	Asp	Trp	Glu	Glu	Trp	Arg	Pro	Thr	Trp	Ala	Arg	Asn	Trp	Lys	Pro	
145					150					155					160	
Lys	Asp	Val	Tyr	Lys	Asn	Arg	Ser	Ile	Glu	Leu	Val	Gln	Gln	Gln	Asn	
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Val	Gln	Leu	Ser	Leu	Thr	Glu	Ala	Thr	Glu	Lys	Ala	Lys	Gln	Glu	Phe
			180					185					190		
Glu	Lys	Ala	Gly	Lys	Asp	Phe	Leu	Val	Glu	Thr	Ile	Lys	Leu	Gly	Lys
		195					200					205			
Leu	Leu	Arg	Pro	Asn	His	Leu	Trp	Gly	Tyr	Tyr	Leu	Phe	Pro	Asp	Cys
	210					215					220				
Tyr	Asn	His	His	Tyr	Lys	Lys	Pro	Gly	Tyr	Asn	Gly	Ser	Cys	Phe	Asn
225					230					235					240
Val	Glu	Ile	Lys	Arg	Asn	Asp	Asp	Leu	Ser	Trp	Leu	Trp	Asn	Glu	Ser
				245					250					255	
Thr	Ala	Leu	Tyr	Pro	Ser	Ile	Tyr	Leu	Asn	Thr	Gln	Gln	Ser	Pro	Val
			260					265					270		
Ala	Ala	Thr	Leu	Tyr	Val	Arg	Asn	Arg	Val	Arg	Glu	Ala	Ile	Arg	Val
		275					280					285			
Ser	Lys	Ile	Pro	Asp	Ala	Lys	Ser	Pro	Leu	Pro	Val	Phe	Ala	Tyr	Thr
	290					295					300				
Arg	Ile	Val	Phe	Thr	Asp	Gln	Val	Leu	Lys	Phe	Leu	Ser	Gln	Asp	Glu
305					310					315					320
Leu	Val	Tyr	Thr	Phe	Gly	Glu	Thr	Val	Ala	Leu	Gly	Ala	Ser	Gly	Ile
				325					330					335	
Val	Ile	Trp	Gly	Thr	Leu	Ser	Ile	Met	Arg	Ser	Met	Lys	Ser	Cys	Leu
			340					345					350		
Leu	Leu	Asp	Asn	Tyr	Met	Glu	Thr	Ile	Leu	Asn	Pro	Tyr	Ile	Ile	Asn
		355					360					365			
Val	Thr	Leu	Ala	Ala	Lys	Met	Cys	Ser	Gln	Val	Leu	Cys	Gln	Glu	Gln
	370					375					380				
Gly	Val	Cys	Ile	Arg	Lys	Asn	Trp	Asn	Ser	Ser	Asp	Tyr	Leu	His	Leu
385					390					395					400
Asn	Pro	Asp	Asn	Phe	Ala	Ile	Gln	Leu	Glu	Lys	Gly	Gly	Lys	Phe	Thr
				405					410					415	
Val	Arg	Gly	Lys	Pro	Thr	Leu	Glu	Asp	Leu	Glu	Gln	Phe	Ser	Glu	Lys
			420					425					430		
Phe	Tyr	Cys	Ser	Cys	Tyr	Ser	Thr	Leu	Ser	Cys	Lys	Glu	Lys	Ala	Asp
		435					440					445			
Val	Lys	Asp	Thr	Asp	Ala	Val	Asp	Val	Cys	Ile	Ala	Asp	Gly	Val	Cys
	450					455					460				
Ile	Asp	Ala	Phe	Leu	Lys	Pro	Pro	Met	Glu	Thr	Glu	Glu	Pro	Gln	Ile
465					470					475					480
Phe	Tyr	Asn	Ala	Ser	Pro	Ser	Thr	Leu	Ser	Ala	Thr	Met	Phe	Ile	Val
				485					490					495	
Ser	Ile	Trp	Phe	Leu	Ile	Ile	Ser	Ser	Val	Ala	Ser	Leu			
			500					505							

<210> SEQ ID NO 52
<211> LENGTH: 6630
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: HZ24 vector

<400> SEQUENCE: 52

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aatatgaccg ccatgttggc attgattatt gactagttat taatagtaat caattacggg 180

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gtcattagtt	catagcccat	atatggagtt	ccgcgttaca	taacttacgg	taaatggccc	240
gcctggctga	ccgcccacg	acccccgccc	attgacgtca	ataatgacgt	atgttcccat	300
agtaacgcca	atagggactt	tccattgacg	tcaatgggtg	gagtatttac	ggtaaactgc	360
ccacttggca	gtacatcaag	tgtatcatat	gccaaagtccg	ccccctattg	acgtcaatga	420
cggtaaatgg	ccgcctggc	attatgccc	gtacatgacc	ttacgggact	ttcctacttg	480
gcagtacatc	tacgtattag	tcacgctat	taccatgggtg	atgcggtttt	ggcagtacac	540
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caatgggagt	ttgttttggc	acaaaaatca	acgggacttt	ccaaaatgtc	gtaataaccc	660
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tgctaacgca	gtcagtgtt	ctgacacaac	agtctcgaa	ttaagctgca	gaagttggc	840
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aactgtgaat	ggaggaatcc	cccagaagat	ttccttacaa	gaccatctgg	acaaagctaa	1440
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ctctcagtag	aatctgctct	gatgccgcct	agttaagcca	gccccgacac	ccgccaacac	4620
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ccgtctccgg	gagctgcatg	tgtcagaggt	tttcaccgct	atcacccaaa	cgcgcgagac	4740
gaaagggcct	cgtgatacgc	ctatthtttat	aggttaatgt	catgataata	atgggtttctt	4800
agacgtcagg	tggcactttt	cggggaaatg	tgcgcggaac	ccctatthtgt	ttatthtttct	4860
aaatacatc	aaatatgtat	ccgctcatga	gacaataacc	ctgataaatg	cttcaataat	4920

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The invention claimed is:

1. A method for treating an IG-treatable disease or condition in a subject, comprising subcutaneously administering to the subject no more than once monthly a soluble hyaluronidase and an immune globulin (IG) composition for treating the disease or condition, wherein:

the IG is from human plasma;

the IG and hyaluronidase are administered separately;

the hyaluronidase is administered prior to administration of the IG;

the IG composition has a protein concentration that is 5 to 25% w/v IG;

the IG is administered at a dosage of 100 mg per kg body weight (100 mg/kg BW) to 2 g/kg BW; and

the hyaluronidase is administered at a ratio of Units hyaluronidase per gram of IG that is *in* the range of about 10 to 500 Units hyaluronidase per gram of the IG, whereby the dose of IG administered is a full monthly dose.

2. The method of claim 1, wherein the soluble hyaluronidase is an ovine PH20, bovine PH20 or a soluble human PH20, wherein the soluble human PH20 is a C-terminally truncated PH20 that lacks all or a portion of the glycosylphosphatidylinositol (GPI) anchor attachment sequence.

3. The method of claim 1, wherein the soluble hyaluronidase is selected from among a polypeptide having a sequence of amino acids set forth in any of SEQ ID NOS:4-9.

4. The method of claim 1, wherein:

the IG is administered in a volume of 50 mL to 700 mL; and

the hyaluronidase is administered in a volume of less than 50 mL.

5. The method of claim 1, wherein the IG *composition* is administered as a liquid solution in a volume of 50 mL to 700 mL.

6. The method of claim 1, wherein the pH of the IG [preparation] *composition* is at or about 4.8 to 5.0.

7. The method of claim 1, wherein the pH of the IG [preparation] *composition* is at or about 4.6 to 5.1.

8. The method of claim 1, wherein the pH of the IG [preparation] *composition* is at or about 4.2 to 5.4.

9. The method of claim 1, wherein 20-30 grams (g) IG is administered.

10. The method of claim 1, wherein about or 5 grams (g), 10 g, 15 g, 20 g, 21 g, 22 g, 23 g, 24 g, 25 g, 26 g, 27 g, 28 g, 29 g, 30 g, 31 g, 32 g, 33 g, 34 g, 35 g, 36 g, 37 g, 38 g, 39 g or 40 g of IG is administered.

11. The method of claim 1, wherein at least 5 grams (g) of IG is administered.

12. The method of claim 1, wherein the IG is administered at a dosage of at least 200 mg/kg BW, 300 mg/kg BW, 400 mg/kg BW, 500 mg/kg BW or 600 mg/kg BW.

13. The method of claim 1, wherein the IG is administered at 600 mg/kg body weight (BW) and the soluble hyaluronidase is administered at a ratio of 50 units hyaluronidase/gram of IG.

14. The method of claim 1, wherein the hyaluronidase is administered in a volume of less than 50 mL.

15. The method of claim 1, wherein the hyaluronidase is administered in a volume of 5-30 mL.

16. The method of claim 1, wherein bioavailability of the subcutaneously administered IG is at least about 90% of the bioavailability of the same dosage administered via IV administration.

17. The method of claim 1, wherein the soluble hyaluronidase is a PH20, or a truncated form thereof.

18. The method of claim 17, wherein the PH20 is selected from an ovine, bovine or truncated human PH20.

19. The method of claim 18, wherein the PH20 is a truncated human PH20 selected from among a polypeptide having a sequence of amino acids set forth in any of SEQ ID NOS:4-9, or a variant thereof that has at least 95% sequence identity with any of SEQ ID NOS:4-9, is soluble and exhibits hyaluronidase activity.

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20. The method of claim 18, wherein the truncated human PH20 is selected from among a polypeptide having a sequence of amino acids set forth in any of SEQ ID NOS:4-9.

21. The method of claim 1, wherein the soluble hyaluronidase is designated rHuPH20.

[22. The method of claim 1, wherein the IG is purified from human plasma.]

23. The method of claim [22] 1, wherein the IG [purified] from human plasma is purified by alcohol fractionation.

24. The method of claim 23, wherein the IG is further purified by any one or more of a chemical modification, so incubation at pH 4.0 with or without pepsin, polyethylene glycol (PEG) precipitation, ion-exchange chromatography, enzymatic cleavage, solvent detergent treatment, diafiltration or ultrafiltration.

25. The method of claim 1, wherein the IG *composition* contains IgG, IgA and IgM.

26. The method of claim 25, wherein the IG *composition* contains greater than 95% IgG.

27. The method of claim 26, wherein the IgG is monomeric.

28. The method of claim 1, wherein the IG *composition* further contains protein-stabilizing excipients.

29. The method of claim 28, wherein the protein-stabilizing excipient is selected from among one or more of glycine, maltose, a polyol, human serum albumin, mannitol, and non-ionic detergent.

30. The method of claim 1, wherein the pH of the IG [preparation] *composition* is at or about 4.2 to 5.4, 4.6 to 5.1 or 4.8 to 5.0.

31. The method of claim 30, wherein the IG *composition* has a protein concentration that is or is about 5 to 15% w/v, 6 to 15% w/v, or 8 to 12% w/v of IG *composition*.

32. The method of claim 30, wherein the IG has a protein concentration that is or is about 5 to 15% w/v of IG *composition*.

33. The method of claim 31, wherein the protein concentration is 10% w/v.

34. The method of claim 1, where the IG *composition* is administered as a liquid solution and the volume of liquid is or is about to 100 ml, 150 ml, 200 ml, 300 ml, 400 ml, 500 ml, 600 ml or 700 ml.

35. The method of claim 1, wherein the IG *composition* is infused at a rate of 10 ml/hr to 300 ml/hr.

36. The method of claim 35, wherein the rate is selected is from among at or about 10 ml/hr, 20 ml/hr, 30 ml/hr, 40 ml/hr, 50 ml/hr, 60 ml/hr, 70 ml/hr, 80 ml/hr, 90 ml/hr, 100 ml/hr, 150 ml/hr, 200 ml/hr, 250 ml/hr and 300 ml/hr.

37. The method of claim 35, wherein the rate is controlled by a pump.

38. The method of claim 35, wherein the rate is controlled by gravity.

39. The method of claim 1, wherein the hyaluronidase is administered 0.5 minutes, 1 minute, 2 minutes, 3 minutes, 4 minutes, 5 minutes, 6 minutes, 7 minutes, 8 minutes, 9 minutes, 10 minutes, 20 minutes or 30 minutes prior to administration of IG.

40. The method of claim 1, wherein the hyaluronidase is administered at a ratio (units hyaluronidase/grams of IG) at or about 10 U/gram (g), 20 U/g, 30 U/g, 35 U/g, 40 U/g, 50 U/g, 60 U/g, 70 U/g, 80 U/g, 90 U/g, 100 U/g, 150 U/g, or 300 U/g.

41. The method of claim 40, wherein the hyaluronidase is administered at a ratio of or about 50 U/gram IG.

42. The method of claim 1, wherein the hyaluronidase that is administered is at or about 10 Units to 500,000 Units, 100

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Units to 100,000 Units, 500 Units to 50,000 Units, 1000 Units to 10,000 Units, 5000 Units to 7500 Units, 5000 Units to 50,000 Units, or 1,000 Units to 10,000 Units.

43. The method of claim 1, wherein the IG-treatable disease or condition is selected from among immunodeficiency; acquired hypogammaglobulinemia secondary to hematological malignancies; Kawasaki's disease; chronic inflammatory demyelinating polyneuropathy (CIDP); Guillain-Barre Syndrome; Idiopathic thrombocytopenic purpura; inflammatory myopathies; Lambert-Eaton myasthenic syndrome; multifocal motor neuropathy; Myasthenia Gravis; Moersch-Woltmann syndrome; secondary hypogammaglobulinaemia specific antibody deficiency; Acute disseminated encephalomyelitis; ANCA-positive systemic necrotizing vasculitis; Autoimmune haemolytic anaemia; Bullous pemphigoid; Cicatricial pemphigoid; Evans syndrome; Foeto-maternal/neonatal alloimmune thrombocytopenia (FMAIT/NAIT); Haemophagocytic syndrome; high-risk allogeneic haemopoietic stem cell transplantation; IgM paraproteinaemic neuropathy; kidney transplantation; multiple sclerosis; Opsoclonus myoclonus ataxia; Pemphigus foliaceus; Pemphigus vulgaris; Post-transfusion purpura; Toxic epidermal necrolysis/Steven Johnson syndrome (TEN/SJS); Toxic shock syndrome; Alzheimer's Disease; Systemic lupus erythematosus; multiple myeloma; sepsis; B cell tumors; trauma; and a bacterial, viral or fungal infection.

44. The method of claim 43, wherein the IG-treatable disease or condition is an immunodeficiency and the immunodeficiency is selected from among common variable immunodeficiency (CVID), congenital agammaglobulinemia, Wiskott-Aldrich syndrome, severe combined immunodeficiency (SCID), primary hypogammaglobulinemia, primary immunodeficiency diseases with antibody deficiency, X-linked agammaglobulinemia (XLA), hypogammaglobulinemia of infancy, and paraneoplastic cerebellar degeneration with no antibodies.

45. The method of claim 43, wherein the IG-treatable disease or condition is acquired hypogammaglobulinemia secondary to hematological malignancies and the hematological malignancy is selected from among chronic lymphocytic leukemia (CLL), multiple myeloma (MM) and non-Hodgkin's lymphoma (NHL).

46. The method of claim 43, wherein the IG-treatable disease or condition is an inflammatory myopathy and the inflammatory myopathy is selected from among polymyositis, dermatomyositis and inclusion body myositis.

47. The method of claim 43, wherein the IG-treatable disease or condition is a bacteria, viral or fungal condition and the bacterial viral or fungal condition is selected from among Haemophilus influenzae type B, Pseudomonas aeruginosa types A and B, Staphylococcus aureus, Group B Streptococcus, Streptococcus pneumoniae types 1, 3, 4, 6, 7, 8, 9, 12, 14, 18, 19, and 23, Adenovirus types 2 and 5, Cytomegalovirus, Epstein Barr virus VCA, Hepatitis A virus, Hepatitis B virus, Herpes simplex virus-1, Herpes simplex virus-2, Influenza A, Measles, Parainfluenza types 1, 2 and 3, Polio, Varicella zoster virus, Aspergillus and Candida albicans.

48. The method of claim 1, wherein the IG *composition* has a protein concentration of from about 8 to about 12% w/v of IG.

49. The method of claim 1, wherein the IG *composition* has a protein concentration of from about 15 to about 25% w/v of IG.

50. The method of claim 1, wherein the IG *composition* has a protein concentration of from about 20 to about 25% w/v of IG.

51. The method of claim 1, wherein the soluble hyaluronidase comprises an amino acid sequence that is at least about 95% identical to SEQ ID NO:9.

52. The method of claim 1, wherein the soluble hyaluronidase comprises the amino acid sequence of SEQ ID NO:9.

53. The method of claim 1, wherein the IG is administered at from about 300 mg/kg BW to about 600 mg/kg BW.

54. The method of claim 1, wherein the IG-treatable disease or condition is a primary immunodeficiency.

55. The method of claim 1, wherein the IG-treatable disease or condition is chronic inflammatory demyelinating polyneuropathy.

56. A method for treating an immune globulin (IG)-treatable disease or condition in a subject, comprising:

subcutaneously administering a hyaluronidase composition comprising a soluble hyaluronidase at one or more sites on the subject;

after administering the hyaluronidase composition, subcutaneously administering an IG composition comprising IG for treating the disease or condition at the one or more sites on the subject, wherein:

the IG is from human plasma,

the IG composition has a protein concentration of from about 5 to about 25% w/v IG,

the subject is administered an IG dosage of from about 100 mg per kg body weight (mg/kg BW) to about 2 g/kg BW, and

the subject is administered a soluble hyaluronidase dosage at a ratio of from about 10 to about 500 Units hyaluronidase per gram of the administered IG;

wherein the hyaluronidase composition and the IG composition are subcutaneously administered to the subject no more frequently than once every three weeks.

57. The method of claim 56, wherein the IG-treatable disease or condition is selected from among immunodeficiency; acquired hypogammaglobulinemia secondary to hematological malignancies; Kawasaki's disease; chronic inflammatory demyelinating polyneuropathy (CIPD); Guillain-Barre Syndrome; Idiopathic thrombocytopenic purpura; inflammatory myopathies; Lambert-Eaton myasthenic syndrome; multifocal motor neuropathy; Myasthenia Gravis; Moersch-Woltmann syndrome; secondary hypogammaglobulinaemia specific antibody deficiency; Acute disseminated encephalomyelitis; ANCA-positive systemic necrotizing vasculitis; Autoimmune haemolytic anaemia; Bullous pemphigoid; Cicatricial pemphigoid; Evans syndrome; Foeto-maternal/neonatal alloimmune thrombocytopenia (FMAIT/NAIT); Haemophagocytic syndrome; high-risk allogeneic haemopoietic stem cell transplantation; IgM paraproteinaemic neuropathy; kidney transplantation; multiple sclerosis; Opsoclonus myoclonus ataxia; Pemphigus foliaceus; Pemphigus vulgaris; Post-transfusion purpura; Toxic epidermal necrolysis/Steven Johnson syndrome (TEN/SJS); Toxic shock syndrome; Alzheimer's Disease; Systemic lupus erythematosus; multiple myeloma; sepsis; B cell tumors; trauma; and a bacterial, viral or fungal infection.

58. The method of claim 56, wherein the IG-treatable disease or condition is a primary immunodeficiency.

59. The method of claim 56, wherein the IG-treatable disease or condition is chronic inflammatory demyelinating polyneuropathy.

60. The method of claim 56, wherein the hyaluronidase composition administered to the subject has a volume of less than about 50 mL.

61. The method of claim 56, wherein the soluble hyaluronidase is a soluble human PH2O that is C-terminally truncated and lacks all or a portion of the glycosylphosphatidylinositol (GPI) anchor attachment sequence.

62. The method of claim 56, wherein the soluble hyaluronidase has an amino acid sequence that is at least about 95% identical to SEQ ID NO:9.

63. The method of claim 56, wherein the soluble hyaluronidase has an amino acid sequence of SEQ ID NO:9.

64. The method of claim 56, wherein the subject is administered a soluble hyaluronidase dosage at a ratio of from about 50 to about 100 Units hyaluronidase per gram of the administered IG.

65. The method of claim 56, wherein the pH of the IG composition is about 4.6 to about 5.1.

66. The method of claim 56, wherein the protein content of the IG composition comprises at least about 95% IgG.

67. The method of claim 56, wherein the IG composition further comprises an amino acid.

68. The method of claim 56, wherein the IG composition has a protein concentration of from about 5% to about 15%.

69. The method of claim 56, wherein the IG composition has a protein concentration of from about 15 to about 25% w/v of IG.

70. The method of claim 56, wherein the IG composition has a protein concentration of about 10% w/v of IG.

71. The method of claim 56, wherein the IG composition has a protein concentration of from about 20 to about 25% w/v of IG.

72. The method of claim 56, wherein the IG composition is administered to the subject at an infusion rate of from about 10 mL/hr to about 300 mL/hr.

73. The method of claim 56, wherein the IG composition is administered to the subject at an infusion rate of from about 120 mL/hr to about 300 mL/hr.

74. The method of claim 56, wherein the IG composition is administered to the subject at an infusion rate of at least about 200 mL/hr.

75. The method of claim 56, wherein the IG composition is started within about 20 minutes of completion of administration of the hyaluronidase composition.

76. The method of claim 56, wherein the IG composition is started within about 10 minutes of completion of administration of the hyaluronidase composition.

77. The method of claim 56, wherein the subject is administered an IG dosage of from about 300 mg/kg BW to about 600 mg/kg BW.

78. The method of claim 56, wherein the bioavailability of the subcutaneously administered IG is at least about 80% of the bioavailability of the same dosage of IG administered via intravenous (IV) administration.

79. The method of claim 56, wherein the soluble hyaluronidase is selected from among a polypeptide having a sequence of amino acids set forth in any of SEQ ID NOS:4-9.