Reply to “Biologics in organ transplantation”

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LETTER TO THE EDITORS

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Dear Sirs,

Having read with interest the review from Page *et al.* [1], we felt that two points needed further discussion. First, we have been surprised to read that almost none of the biologics that are the main focus of that review are in clinical development. Actually, the only biologic targeting the CD40/CD40L costimulation pathway that is currently in a clinical trial in kidney transplantation (ASKP1240; clinical trial #NCT01279538) was relegated to one among a list of anti-CD40 MAbs in the last sentence of the section "Biologics in clinical development: costimulation blockade". ASKP1240 also showed efficacy to induce long-term hepatic allograft acceptance in nonhuman primates [2] and we feel that it deserved a more thorough review. Second, although the focus was on biologics at the preclinical stage, no mention was made of the preclinical work performed by our groups at the University of Nantes and the University of Maryland on selective CD28 antagonist Mabs in murine and primate models. Owing to several recent publications [3–7], including in Transplant International, plus the current development of FR104, a CD28 antagonist for kidney transplantation [7], it seems to us that this class of MAbs should be added to the list of preclinical biologics used for organ transplantation that are of potential interest for readers of Transplant International.

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Conflict of Interest

CBV is shareholder of a biotech company developing costimulation antagonists.

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