

A Recombinant anti-RhD antibody for hemolytic disease

The Problem

- Globally 50% of pregnant women cannot access the current plasma-derived anti-RhD prophylaxis (discovered in 1960s) for Hemolytic Disease of the Foetus and Newborn (HDFN) resulting in foetal death and disability and miscarriages, hospitalisation and trauma for mothers.
- HDFN is 200 times more common in developing countries.
- In high-income countries costs for HDFN management and persistent inequities in outcomes especially Black mothers and neonates still remains.
- Since 2023 FDA has reported shortages of plasma-derived anti-RhD which is unsustainable due to its dependency on blood/plasma donations

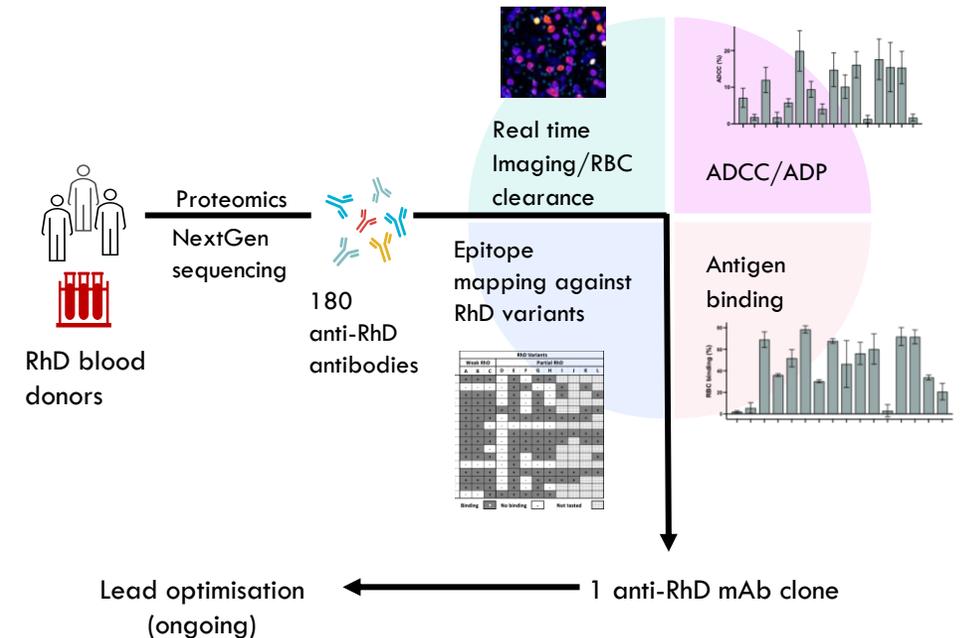
The Solution

- We are developing a **recombinant anti-RhD antibody** as a safe, standardised and scalable replacement to 60y old prophylaxis.
- Our solution is distinct from *Nipocalimab*, which only manages HDFN post-alloimmunization, and *Rhoclon*, which lacks FDA/EMA approval and robust clinical efficacy.
- Our innovation follows proven examples where recombinant technology has revolutionized plasma-derived Factor VIII/IX therapies.

Our Program

- Collaboration with Australian Red Cross Lifeblood (ARCL)
- Early engagement with the AlloHope Foundation (patient advocacy group) and the Worldwide Initiative for Rh disease Eradication (WIRhE) (a global consortium)
- Progress: Identified a recombinant lead antibody clone, benchmarked data with commercial product and assessed *in vitro* functional assays and epitope mapping of RhD variants

Seeking **partnerships and funding** for preclinical studies and antibody development (manufacturing, regulatory guidance, clinical trials)



Our Team

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