Technical Note

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Bioconjugate Chem., Just Accepted Manuscript • DOI: 10.1021/bc3006144 • Publication Date (Web): 09 Jul 2013
Downloaded from http://pubs.acs.org on July 19, 2013

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Sensitivity of PEGylated interferon detection by anti-polyethylene glycol (PEG) antibodies depends on PEG length

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Abstract

Attachment of poly(ethylene glycol) to proteins can mask immune epitopes to increase serum half-life, reduce immunogenicity, and enhance in vivo biological efficacy. However, PEGylation mediated epitope-masking may also limit sensitivity and accuracy of traditional ELISA. We previously described an anti-PEG-based sandwich ELISA for universal assay of PEGylated molecules. Here, we compared the quantitative assessment of PEGylated interferons by anti-PEG and traditional anti-interferon sandwich ELISA. The detection limits for PEG-Intron® (12k-PEG) and Pegasys® (40k-PEG) were 1.9 and 0.03 ng/mL for anti-PEG ELISA compared to 0.18 and 0.42 ng/mL for traditional anti-interferon sandwich ELISA. These results indicate that the sensitivity of anti-PEG sandwich ELISA was insensitive to PEGylation mediated epitope-masking and increased in proportion to the length of PEG. By contrast, PEG-masking interfered with detection by traditional anti-interferon sandwich ELISA. Human and mouse serum did not affect the sensitivity of anti-PEG ELISA but impeded traditional anti-interferon sandwich ELISA. The anti-PEG sandwich ELISA was comparable to anti-interferon sandwich ELISA and radioassay of ¹³¹I-Pegasys® in pharmacokinetic studies in mice. The anti-PEG sandwich ELISA provides a sensitive, accurate and convenient quantitative measurement of PEGylated protein drugs.
Introduction

Polyethylene glycol (PEG) is a highly water-soluble and non-toxic polymer that is approved by the Food and Drug Administration (FDA) for human use. Covalent linkage of PEG to proteins can shield binding sites, minimize proteolytic cleavage and mask immunogenic sites, thereby prolonging the circulation time in the human body, improving therapeutic efficacy and reducing the injection frequency to enhance patients' quality of life.

Based on these advantages, PEGylation has become one of the most useful pharmaceutical technologies to create protein drugs with markedly improved therapeutic properties compared with their unconjugated counterparts. For example, the clinical treatment of chronic hepatitis B and C with interferon-α-2a (Roferon®-A) has been limited by the short half-life of IFN-α in patients (less than 12 hours), resulting in the need to administer repeated injections at least three times a week to achieve the desired therapeutic benefits. PEGylated interferons, including PEG-Intron® (linear PEG12K-interferon-α-2b) and Pegasys® (branched PEG40K-interferon-α-2a), display dramatically increased half-lives, allowing decreased dosing to once per week. How to efficiently assess the pharmacokinetics of PEGylated drugs is an important issue with the ever increasing number of such compounds under development.

Measurement of drug concentrations in serum samples is important for clinical drug development and assessment of drug pharmacokinetics and bioavailability. However, attachment of PEG molecules to proteins may mask antibody-binding epitopes that interfere
with detective sensitivity using protein-specific antibodies\textsuperscript{9,10}. We previously reported that an anti-PEG based sandwich ELISA using anti-PEG monoclonal antibodies (AGP4 and 3.3) can detect a wide range of PEGylated molecules including Pegasys, PEG-Intron, Neulasta and PEG-Lipo-Dox with ng/mL sensitivities\textsuperscript{10}. Based on those results, we hypothesized that the anti-PEG sandwich ELISA is not affected by PEG generated epitope-masking.

Here, we compared the measurement of PEGylated interferon by anti-PEG based and traditional anti-interferon based sandwich ELISAs. We first examined the detection limits of the anti-PEG and anti-interferon based sandwich ELISAs. We also investigated whether human or mouse serum affected detection sensitivities of the assays. Finally, we compared the measurement of $^{131}$I labeled Pegasys ($^{131}$I-Pegasys) in the serum of mice by radioactive quantification or ELISA. The anti-PEG based sandwich ELISA displayed high sensitivity and was free from interference by serum proteins, suggesting that anti-PEG ELISA is particularly suitable as a standard method for measuring the pharmacokinetics of PEGylated protein drugs in pre-clinical and clinical study.
Materials and Methods

Reagents and animals

Maxisorp flat-bottom 96-well plates were purchased from Nunc, NY, USA. Skim milk was purchased from BD Difco™, NJ, U.S.A. Pegasys® and Roferon®-A were from Roche, NJ, USA. PEG-Intron® was from Merck, NY, USA. Horseradish peroxidase-conjugated streptavidin were from Jackson ImmunoResearch Laboratories, PA, U.S.A. 2,2’-azino-bis-[3-ethylbenzthiazolium- 6-sulfonic acid] (ABTS) and 30% hydrogen peroxide were from Sigma-Aldrich, MO, USA. 5-week-old BALB/c female mice were purchased from the National Laboratory Animal Center, Taipei, Taiwan, and were bred in the specific pathogen-free facility at Kaohsiung Medical University.

Sandwich ELISA

In the anti-PEG sandwich ELISA, Maxisorp flat-bottom 96 well plates were coated with 50 µl/well of AGP4 (20 µg/ml) in coating buffer (100 mM Na₂CO₃, pH 8.0) at 37 °C for 2 h and then at 4 °C for overnight. The wells were blocked with 5% skim milk in PBS at 37°C for 2 h and then washed twice in phosphate-buffered saline (PBS). Non-modified interferon α-2a (Roferon®-A), PEG₁₂K–interferon α-2b (PEG-Intron®) and PEG₄₀K–interferon α-2a (Pegasys®) were serially diluted in dilution buffer (2% skim milk in PBS), added to wells (50 µl/well) and incubated at room temperature for 2 h. After washing with PBS three times, the wells were sequentially incubated with 50 µl/well of biotinylated anti-PEG antibody (3.3-biotin, 5 µg/ml...
in dilution buffer) and 50 µl/well horseradish peroxidase (HRP)-conjugated streptavidin
(1µg/ml in dilution buffer). The wells were washed with PBS eight times and 100 µl of
substrate solution (0.4 mg/ml ABTS, 0.01% hydrogen peroxide in 100 mM phosphate-citrate
buffer, pH 4.0) was added and incubated in the dark at room temperature for 30 min. The
absorbance in the wells was measured at 405 nm using a MRX microplate reader (Dynex
Technologies, VA, U.S.A.).

Anti-interferon sandwich ELISA was performed using the VeriKine™ Human IFN-α
ELISA Kit (catalog number 41100; Pestka Biomedical Laboratories, NJ, U.S.A.). All three
interferons were serially diluted with dilution buffer and added to wells (100 µl/well) and
incubated at room temperature for 1 h, following the manufacturer’s guidelines. After washing
with wash solution, the well was stained with 100 µl/well of diluted antibody concentrate at
room temperature for 1 h followed by staining with 100 µl/well of diluted HRP conjugate.
After the wells were washed four times, 100 µl of 3,3’,5,5’-tetramethylbenzidine (TMB)
substrate was added to the wells. Color development was stopped by the addition of 100 µl of
stop solution. The absorbance in the wells was measured at 450 nm using the MRX microplate
reader.

**Detection of Pegasys® in serum by ELISA**

To investigate the influence of serum in sandwich ELISA, human serum was obtained
from three healthy volunteers and mouse serum was collected from five BALB/c female mice.
Endogenous anti-PEG antibodies were not detected in any of the serum samples. Pegasys® in dilution buffer containing 0-20% human or murine serum was measured by the anti-PEG and the anti-interferon ELISAs as described above.

Analysis of Pegasys® stability in human serum

A 10 µg/ml aliquot of Pegasys® was incubated with DEME buffer contain 50% human serum and 1% penicillin-streptomycin at 37°C. Samples collected at different times (0, 24, 48, 72, and 96 h) were electrophoresed in a 7% sodium-dodecyl sulfate polyacrylamide gel under reducing conditions and then transferred onto a nitrocellulose paper (Millipore). After blocking in 5% skim milk, the blot was incubated with 5 µg/ml AGP4-biotin in PBS containing 2% skim milk for 1 h at room temperature. The blot was washed 3 times with PBS-T (PBS containing 0.05% Tween-20) and twice with PBS before incubation with streptavidin-HRP for 1 h at room temperature. After washing three times with PBS-T and twice with PBS, specific bands were visualized by ECL detection according to the manufacturer’s instructions (Pierce, Rockford, IL, U.S.A.).

Pharmacokinetic analysis of 131I-Pegasys® in mice

For comparison of anti-PEG sandwich ELISA with existing methods, the pharmacokinetics of Pegasys® in mice was analyzed by the anti-PEG and the anti-interferon ELISAs and a traditional radioassay as a reference method. 131I-Pegasys® were synthesized by
Hsin-ELL Wang, Ph.D. (Department of Medical Radiation Technology and Institute of Radiological Sciences, National Yang-Ming University, Taiwan). BALB/c mice were intravenously (i.v.) injected with 740 kBq of $^{131}$I-Pegasys® (containing 5 µg of Pegasys®).

Serum was isolated from venous blood of the mice at the indicated time points after injection (1, 2, 4, 8, 16, 24, 48 and 72 hr.) and analyzed by the sandwich ELISAs described above. The radioactivity of $^{131}$I-Pegasys® in the blood was independently determined by Wallac 1470 Wizard gamma counter (Perkin-Elmer, MA, USA.). Results (mean±SD) are expressed as the concentration of Pegasys® in serum (µg/mL).

**Statistical Analysis**

To determine whether serum affected the measurement of ELISA, statistical comparisons were made using or one-way ANOVA followed by Dunnett’s multiple comparison tests between control group (0%) and test groups (2, 5 and 20%). Statistical significance was defined as $p < 0.05$. 
Results

Quantification of PEGylated protein drugs by anti-PEG and anti-interferon sandwich ELISAs

To evaluate the utility of anti-PEG and anti-interferon sandwich ELISAs, defined concentrations of a non-PEGylated interferon (Roferon®-A), a 12K-PEG modified interferon (PEG-Intron®), and a 40K-PEG modified interferon (Pegasys®) were measured by AGP4/3.3 anti-PEG sandwich ELISA 10 and a commercial VeriKine™ Human IFN-α ELISA Kit. Figure 1A shows that the detection limits of the anti-PEG sandwich ELISA were 1.9 ng/mL for PEG-Intron® and 0.03 ng/mL for Pegasys®. As expected, Roferon®-A was not detected by the anti-PEG sandwich ELISA since Roferon®-A does is not modified with PEG molecules. The detected limitation of Roferon®-A, PEG-Intron®, and Pegasys® were 0.12, 0.18, 0.42 ng/mL as measured by the VeriKine™ Human IFN-α ELISA Kit (Fig. 1B). Thus, the detection sensitivity of the anti-PEG sandwich ELISA increased as the size of PEG chains on interferon increased whereas the anti-interferon sandwich ELISA showed the opposite trend.

Influence of serum on anti-PEG and anti-interferon sandwich ELISAs

To investigate the effect of serum on detection sensitivity, defined concentrations of Pegasys® were incubated in 0, 5 or 20% human or mouse serum before assay by anti-PEG sandwich ELISA or the VeriKine™ Human IFN-α ELISA. The presence of 5% or 20% mouse
(Fig. 2A) or human (Fig. 2C) serum did not affect the sensitivity of the anti-PEG ELISA. By contrast, 20% mouse (Fig. 2B) or human (Fig. 2D) serum significantly (p < 0.05) decreased the sensitivity of the IFN-α ELISA. To assess the stability of the linkage between PEG and interferon in serum, Pegasys® (10 µg/mL) was incubated with 50% human serum for 0, 24, 48, 72, and 96 hours. The stability of Pegasys® in human serum was detected by western blot using biotinylated anti-PEG antibody (AGP4-Biotin). Figure 2E showed that Pegasys® did not dissociate in human serum even after 96 hours, indicating that the linkage between PEG and interferon is very stable in serum. These results indicate that the presence of serum does not hamper detection of PEGylated proteins by anti-PEG sandwich ELISA.

**Pharmacokinetics of** $^{131}$I-Pegasys® **determined by anti-PEG and anti-interferon sandwich ELISAs**

To investigate the feasibility of using anti-PEG sandwich ELISA to measure PEGylated interferon in pharmacokinetic studies, 740 kBq (5 µg) of $^{131}$I-labeled Pegasys® was i.v. injected into BALB/c mice. Venous sera were collected at the indicated times and the concentrations of $^{131}$I-Pegasys® were determined by anti-PEG ELISA, VeriKine™ Human IFN-α ELISA and a gamma counter which directly determined levels of radioactivity in the sera. Figure 3 shows that the pharmacokinetics of $^{131}$I-Pegasys® determined using the anti-PEG based ELISA ($t_{1/2}$ = 13.14 h) was similar to the half-life measured by the Human IFN-α ELISA Kit ($t_{1/2}$ = 12.44 h).
Lower concentrations and a shorter half-life (t½ = 7.64 h) were determined by measuring the radioactivity in serum samples. Based on these results, we conclude that the anti-PEG based sandwich ELISA is a highly efficient method to measure the pharmacokinetics of PEGylated protein drugs.
Discussion

The shielding effect of PEG can mask antibody-binding epitopes on proteins, resulting in weaker interactions with detection and capture antibodies during ELISA, thereby decreasing assay sensitivity. We demonstrated that an anti-PEG sandwich ELISA to detect PEGylated interferon is superior to a commercial anti-interferon sandwich ELISA. The anti-PEG sandwich ELISA displayed high sensitivity and was not inhibited by PEG-mediated epitope masking or the presence of serum in samples. The sensitivity of the anti-PEG sandwich ELISA increased with the length of PEG chains attached to interferon. The concentration of $^{131}$I-Pegasys® in serum samples measured by anti-PEG sandwich ELISA was comparable to a commercial anti-interferon sandwich ELISA and to direct measurement of serum radioactivity. These data indicate that the anti-PEG sandwich ELISA may reliably measure PEGylated proteins for drug development or in clinical trials.

PEGylation of proteins and peptides is a Food & Drug Administration (FDA) approved technology to increase half-life and therapeutic efficacy $^{5,11-13}$. Many PEGylated protein drugs are now available for clinical use, including PEGylated anti-tumor necrosis factor α antibody (PEG-anti-TNFα) $^{14}$, PEGylated anti-interleukin-8 (PEG-anti-IL8) $^{15}$, PEGylated Toll like receptor 7 ligands $^{5}$ and PEGylated granulocyte colony stimulating factor (PEG-G-CSF) $^{16}$. The anti-PEG sandwich ELISA employs anti-PEG antibodies for PEG-dependent/target molecule-independent quantization of any PEGylated compound. Our previous results showed
that PEG-G-CSF (Neulasta®) and PEGylated nanoparticles such as PEG-Qdot® 525 and Lipo-Dox® were also detected by the anti-PEG sandwich ELISA\textsuperscript{10,17}. In this study, we used the anti-PEG sandwich ELISA to quantify two types of PEGylated interferons (PEG-Intron® and Pegasys®). Taken together, our results indicate that anti-PEG sandwich ELISA can be used for quantification of a variety of PEGylated substances.

Site-specific monoPEGylation is accepted as good manufacturing practice (GMP) for clinical use\textsuperscript{18,19}. Protein drugs are usually conjugated with single high molecular weight (40 kDa) PEG molecule to achieve homogeneous modification and improved therapeutic efficacy\textsuperscript{7,16}. For example, attachment of a branched PEG polymer with an average molecular mass of 40,000 to interferon increased its serum half-life by 330-fold in rats\textsuperscript{20}. HCV patients treated once per week with Pegasys® experienced greater decreases in liver inflammation than patients treated with standard three-times-weekly interferon\textsuperscript{7}, thereby increasing patient compliance and quality of life. However, long chain PEG molecules may mask antibody-binding epitopes on proteins\textsuperscript{9,10,21} and decrease the sensitivity of traditional protein-specific ELISA (Fig. 1B).

We used anti-PEG antibodies to generate a quantitative platform for PEGylated drugs in which PEGylated proteins are quantified by surface-linked PEG molecules. Our previous results demonstrated that a single long chain PEG chain contains multiple epitopes for binding by anti-PEG antibodies\textsuperscript{10,22,23}. Detection sensitivity is proportional to the length of the PEG chain. The anti-PEG sandwich ELISA is therefore particularly suited for measuring protein drugs
modified with long chain PEG molecules.

Development of a quantitative method that is insensitive to the presence of serum in samples is important for in vivo pharmacokinetic studies of drugs. The half-life of a drug in blood is a key factor in pharmacokinetic analysis and is related to absorption and distribution of the drug after administration. However, serum interference is an often encountered obstacle in ELISA assay development \(^{24,25}\). For example, some serum proteins, such as heterophilic antibodies, can cause high non-specific binding in virus antibody ELISAs \(^{26,27}\) and may hamper detection of proteins by epitope-masking \(^{28}\). In addition, serum can seriously lower the detection sensitivity of traditional ELISA \(^{29}\). We also observed here that serum impeded the detection sensitivity of the anti-interferon sandwich ELISA. By contrast, the presence of mouse or human serum in samples \(^{10,22,23}\) did not decrease the sensitivity of the anti-PEG sandwich ELISA.

The covalent linkage between PEG and interferon in Pegasys\(^{\circledR}\) is very stable in human serum (Fig. 2E). The lower concentration of \(^{131}I\)-Pegasys\(^{\circledR}\) in serum determined by measuring radioactivity is unlikely due to dissociation of the linkage between PEG and interferon, but rather likely resulted from deiodination of \(^{131}I\) from interferon. Iodine can be hydrolyzed from radiolabeled proteins by iodotyrosine deiodinase, resulting in underestimation of protein concentrations \(^{30,31}\). This may explain the higher interferon concentrations detected by the anti-PEG and anti-interferon sandwich ELISAs (Fig. 3). In our study, anti-IFN sandwich
ELISA was used as a standard assay kit to compare with anti-PEG sandwich ELISA to determine the pharmacokinetics of Pegasys® in mice. However, the anti-IFN sandwich ELISA cannot sensitively detect PEG-modified interferon, especially Pegasys® (Fig. 1B), and the presence of mouse serum also interfered in the sensitivity of anti-IFN sandwich ELISA (Fig. 2B). Similar to previous studies, we used a high dose of Pegasys® (5 µg per mouse) to allow detection at later time points by anti-IFN sandwich ELISA. By contrast, the anti-PEG sandwich ELISA can detect PEGylated interferon very sensitively with a detection limit of 0.03 ng/mL for Pegasys® (Fig. 1A). In addition, the presence of 20% of mouse serum did not affect the sensitivity of anti-PEG sandwich ELISA (Fig. 2A). Another potential advantage of the anti-PEG ELISA is that endogenous cytokines in sera will not be detected (as shown for Roferon®-A in Fig. 1A). By contrast, traditional cytokine ELISAs can also detect circulating cytokines, thereby overestimating PEGylated cytokine concentrations. Thus, anti-PEG sandwich ELISA may more precisely measure PEGylated drug concentrations as compared to traditional methods.

In summary, we demonstrate that the anti-PEG sandwich ELISA can be used to quantify PEGylated protein drugs. The advantages of anti-PEG sandwich ELISA are (1) it is insensitive to PEG-mediated epitope masking, (2) it is insensitive to serum interference, and (3) it can quantify any PEGylated molecule. The sensitivity of detection is proportional to the length of the PEG conjugated on the protein drug, so the ELISA is most suitable for proteins that contain
a single long PEG molecule or multiple short PEG molecules. The anti-PEG sandwich ELISA may also be superior when endogenous compounds can be recognized by traditional ELISA. The universality and convenience of the anti-PEG sandwich ELISA suggests that this assay offers a standard method for quantification of PEGylated proteins in pre-clinical and clinical pharmacokinetic studies.

Acknowledgements

This work was supported by grants from the National Research Program for Biopharmaceuticals, National Science Council, Taipei, Taiwan (NSC101-2325-B-037-001, NSC101-2321-B-037-001), the Department of Health, Executive Yuan, Taiwan (DOH102-TD-C-111-002) and the Grant of Biosignature in Colorectal Cancers, Academia Sinica, Taiwan and NSYSU-KMU Joint Research Project (NSYSUKMU102-P035)
References


Figure Legends

Figure 1. Comparison of anti-PEG and anti-IFN sandwich ELISAs for detection of non-modified and PEGylated interferon. Serially diluted Roferon®-A (○), PEG-Intron® (■) and Pegasys® (●) were detected by anti-PEG sandwich ELISA (A) or anti-IFN sandwich ELISA (B), respectively. Representative data from three independent experiments are shown. Bars, SD.
Figure 2. Serum interference in anti-PEG and anti-IFN sandwich ELISAs. Pegasys® serially diluted in 0% (○), 5% (●) or 20% (■) mouse or human serum were detected by the anti-PEG sandwich ELISA (A, C) or anti-IFN sandwich ELISA (B, D). Bars, SD. *, p<0.05; **, p<0.01, Dunnett’s multiple comparison tests between control group (0%) and other groups. (E) The stability of the linkage between PEG and interferon in serum. Pegasys® was incubated in 50% human serum for 0 h (lane 2), 24 h (lane 3), 48 h (lane 4), 72 h (lane 5), and 96 h (lane 6). Samples were electrophoresed on a 7% reduced SDS-PAGE gel, transferred to nitrocellulose paper, and probed with AGP4-biotin as described in Materials and Methods. Lane 1, 50% serum as blank control; Lane 7, Pegasys® as a positive control. Representative data from three independent experiments are shown.
Figure 3. Serum concentration-time curve of $^{131}$I-Pegasys® i.v. injected into mice. Sera of BALB/c mice (n=4) were collected at the indicated times (1, 2, 4, 8, 16, 24, 48, 72 hours) after i.v. injection of $^{131}$I-Pegasys®. The concentration of $^{131}$I-Pegasys® was determined by anti-PEG sandwich ELISA (●), anti-IFN sandwich ELISA (○) or gamma counter (▲). Representative data from three independent experiments are shown. Bars, SD.
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39x18mm (600 x 600 DPI)
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Figure 3. Serum concentration-time curve of 131I-Pegasys® i.v. injected into mice. Sera of BALB/c mice (n=4) were collected at the indicated times (1, 2, 4, 8, 16, 24, 48, 72 hours) after i.v. injection of 131I-Pegasys®. The concentration of 131I-Pegasys® was determined by anti-PEG sandwich ELISA (●), anti-IFN sandwich ELISA (○) or gamma counter (▲). Representative data from three independent experiments are shown. Bars, SD.
Anti-PEG based sandwich ELISA

PEGylated proteins

Pharmacokinetic Study

Concentration (μg/mL)

Time (h)

50x29mm (300 x 300 DPI)