CLAIMS

What is claimed is:

1. Use of
   a) dexamethasone,
   b) montelukast, or
   c) methotrexate

   in the manufacture of a medicament for reducing occurrence or severity of infusion-related reactions (IRRs) in a subject to be treated with an anti-epidermal growth factor receptor (EGFR)/hepatocyte growth factor receptor (c-Met) antibody.

2. The use of claim 1, wherein the antibody comprises:
   a) a first domain that specifically binds EGFR, comprising heavy chain complementarity determining region 1 (HCDR1), HCDR2, HCDR3, light chain complementarity determining region 1 (LCDR1), LCDR2 and LCDR3 amino acid sequences of SEQ ID NOs: 1, 2, 3, 4, 5 and 6, respectively; and
   b) a second domain that specifically binds c-Met, comprising HCDR1, HCDR2, HCDR3, LCDR1, LCDR2 and LCDR3 amino acid sequences of SEQ ID NOs: 7, 8, 9, 10, 11 and 12, respectively.

3. The use of claims 1 or 2, wherein the first domain comprises a heavy chain variable region (VH) of SEQ ID NO:13 and a light chain variable region (VL) of SEQ ID NO:14, and the second domain comprises a VH of SEQ ID NO:15 and a VL of SEQ ID NO:16.

4. The use of any one of claims 1-3, wherein the antibody is of the IgG1 isotype.

5. The use of any one of claims 1-4, wherein the antibody comprises a first heavy chain (HC1) of SEQ ID NO:17, a first light chain (LC1) of SEQ ID NO:18, a second heavy chain (HC2) of SEQ ID NO:19 and a second light chain (LC2) of SEQ ID NO:20.

6. The use of any one of claims 1-5, wherein the antibody is an isolated bispecific antibody.

7. The use of any one of claims 1-6, wherein the bispecific antibody is amivantamab.

8. The use of any one of claims 1-7, wherein the antibody is to be administered at a dose of about 1,050 mg, about 1,400 mg, about 1,600 mg, or about 2,240 mg.

9. The use of claim 8, wherein the antibody is to be administered at a dose of about 1,400 mg.

10. The use of claim 8, wherein the antibody is to be administered at a dose of about 1,050 mg.

11. The use of claim 8, wherein the antibody is to be administered at a dose of about 1,600 mg.

12. The use of claim 8, wherein the antibody is to be administered at a dose of about 2,240 mg.

13. The use of any one of claims 1-12, wherein the antibody is to be administered once a week or once every two weeks.

14. The use of claim 13, wherein the antibody is to be administered once weekly for the first 4 weeks and then every 2 weeks.

15. The use of any one of claims 1-14, wherein the antibody is to be administered as a monotherapy.

16. The use of any one of claims 1-15, wherein the subject to be treated with the anti-EGFR/c-Met antibody is to be further administered one or more chemotherapeutic agents.

17. The use of claim 16, wherein the one or more chemotherapeutic agents comprise a tyrosine kinase inhibitor (TKI).

18. The use of claim 17, wherein the one or more chemotherapeutic agents comprise lazertinib.

19. The use of claim 17, wherein the one or more chemotherapeutic agents comprise osimertinib.

20. The use of any one of claims 1-19, wherein methotrexate is to be administered between 7 days to 3 days prior to the anti-EGFR/c-Met antibody is to be administered.

21. The use of claim 20, wherein methotrexate is to be administered at a dose of 25 mg.

22. The use of any one of claims 1-19, wherein montelukast is to be administered daily starting 4 days prior to the anti-EGFR/c-Met antibody is to be administered.

23. The use of claim 22, wherein montelukast is to be administered 5 times.

24. The use of claim 23, wherein montelukast is to be administered at a dose of 10 mg.

25. The use of any one of claims 20-24, further comprising dexamethasone to be administered intravenously on the first and second days of when the anti-EGFR/c-Met antibody is to be administered, wherein the dexamethasone is to be administered 45-60 minutes prior to the anti-EGFR/c-Met antibody is to be administered.

26. The use of claim 25, wherein dexamethasone is to be administered intravenously at a dose of 10 mg.

27. The use of any one of claims 1-19, wherein dexamethasone is to be administered orally 1 day prior to the anti-EGFR/c-Met antibody is to be administered.

28. The use of claim 27, wherein dexamethasone is to be administered orally at a total daily dose of 8 mg.

29. The use of any one of claims 27-28, further comprising dexamethasone to be administered intravenously on the first and second days of when the anti-EGFR/c-Met antibody is to be administered, wherein dexamethasone is to be administered intravenously at a dose between 10-20 mg.

30. The use of any one of claims 1-29, further comprising a premedication to be administered with one or more of antihistamines, antipyretics, or glucocorticoids.

31. The use of claim 30, wherein the premedication comprises diphenhydramine.

32. The use of claim 31, wherein the diphenhydramine is to be administered at a dose of 25 to 50 mg.

33. The use of claim 30, wherein the premedication comprises acetaminophen.

34. The use of claim 33, wherein the acetaminophen is to be administered at a dose of 650 to 1,000 mg.