

In one aspect, the present disclosure refers to the use of a MASP-2 inhibitory monoclonal antibody, or fragment thereof that specifically binds to a portion of SEQ ID NO:6 in the manufacture of a medicament for preventing, treating, reverting and/or delaying angiogenesis in a mammalian subject suffering from an angiogenesis-dependent cancer or an angiogenesis-dependent benign tumor, wherein the MASP-2 inhibitory monoclonal antibody, or fragment thereof comprises a heavy chain variable region comprising SEQ ID NO:67 and a light chain variable region comprising SEQ ID NO:69. In another example, the present disclosure refers to the use of a MASP-2 inhibitory agent in the manufacture of a medicament for treating a subject suffering from an ocular angiogenic disease or condition selected from the group consisting of AMD, uveitis, ocular melanoma, corneal neovascularization, primary pterygium, HSV stromal keratitis, HSV-1-induced corneal lymphangiogenesis, proliferative diabetic retinopathy, retinopathy of prematurity, retinal vein occlusion, corneal graft rejection, neovascular glaucoma, and rubeosis. In still another example, the present disclosure refers to the use of a MASP-2 inhibitory agent in the manufacture of a medicament for inhibiting tumor angiogenesis in a subject with cancer. Also described herein are methods for preventing, treating, reverting and/or delaying angiogenesis in a mammalian subject suffering from, or at risk for developing, an angiogenesis-dependent disease or condition, comprising

The Kabat CDRs (24-34 (L1); 50-56 (L2); and 89-97 (L3) are bolded; and the Chothia CDRs (24-34 (L1); 50-56 (L2) and 89-97 (L3) are underlined. These regions are the same whether numbered by the Kabat or Chothia system.

5 17D20m_d3521N11 light chain variable region (VL) (SEQ ID NO:69)
 QPVLTPPPSLSVSPGQTASITCS**GEKLGDKYAYWY**QQKPGQSPVLVMYQ
 DKQRPSGIPERFSGSNSGNTATLTISGTQAMDEADYYCQ**AWDSSTAVF**GGGGTKL
 TVL

10 17N16m_d17N9 light chain variable region (VL) (SEQ ID NO:71, encoded by
 SEQ ID NO:70)
 SYELIQPPSVSVAPGQTATITC**GDNLGKKRVHWY**QQRPGQAPVLVIYD
 DSDRPSGIPDRFSASNSGNTATLTITRGEAGDEADYYCQ**VWDIATDHV**VFGGGT
 KLTVLAAAGSEQKLISE

15 The MASP-2 antibodies OMS100 and MoAb_d3521N11VL, (comprising a heavy
 chain variable region set forth as SEQ ID NO:67 and a light chain variable region set
 forth as SEQ ID NO:69, also referred to as “OMS646”), which have both been
 demonstrated to bind to human MASP-2 with high affinity and have the ability to block
 functional complement activity, were analyzed with regard to epitope binding by dot blot
 analysis. The results show that OMS646 and OMS100 antibodies are highly specific for
 MASP-2 and do not bind to MASP-1/3. Neither antibody bound to MAp19 nor to
 MASP-2 fragments that did not contain the CCP1 domain of MASP-2, leading to the
 conclusion that the binding sites encompass CCP1.

25 The MASP-2 antibody OMS646 was determined to avidly bind to recombinant
 MASP-2 (Kd 60-250pM) with >5000 fold selectivity when compared to C1s, C1r or
 MASP-1 (see TABLE 10 below):

30 **TABLE 10:** Affinity and Specificity of OMS646 MASP-2 antibody-MASP-2
 interaction as assessed by solid phase ELISA studies

Antigen	K _D (pM)
MASP-1	>500,000
MASP-2	62±23*

CLAIMS

The embodiments of the invention in which an exclusive property or privilege is claimed are defined as follows:

1. Use of a MASP-2 inhibitory monoclonal antibody, or fragment thereof that specifically binds to a portion of SEQ ID NO:6 in the manufacture of a medicament for preventing, treating, reverting and/or delaying angiogenesis in a mammalian subject suffering from an angiogenesis-dependent cancer or an angiogenesis-dependent benign tumor, wherein the MASP-2 inhibitory monoclonal antibody, or fragment thereof comprises a heavy chain variable region comprising SEQ ID NO:67 and a light chain variable region comprising SEQ ID NO:69.
2. The use of Claim 1, wherein the subject is suffering from an angiogenesis-dependent cancer selected from the group consisting of: solid tumor(s), blood borne tumors, high-risk carcinoid tumors, and tumor metastases.
3. The use of Claim 2, wherein the subject is suffering from one or more solid tumors.
4. The use of Claim 3, wherein the subject is suffering from or at risk for tumor metastases.
5. The use of Claim 1, wherein the subject is suffering from an angiogenesis-dependent benign tumor(s) selected from the group consisting of hemangiomas, acoustic neuromas, neurofibromas, trachomas, carcinoid tumors, and pyogenic granulomas.
6. The use of Claim 1, wherein the antibody or fragment thereof is selected from the group consisting of a recombinant antibody, an antibody having reduced effector function, a chimeric antibody, a humanized antibody and a human antibody.
7. The use of Claim 1, wherein the composition is for subcutaneous administration, intraperitoneal administration, intra-muscular administration, intra-arterial administration, intravenous administration, or as an inhalant.