

NO:103), 07 (SEQ ID NO:104), 08 (SEQ ID NO:105), 09 (SEQ ID NO:106), 10 (SEQ ID NO:107), 11 (SEQ ID NO:108), 12 (SEQ ID NO:109), 13 (SEQ ID NO:110), 14 (SEQ ID NO:111), 15 (SEQ ID NO:112), 16 (SEQ ID NO:113), 17 (SEQ ID NO:114), 18 (SEQ ID NO:115), 19 (SEQ ID NO:116), 20 (SEQ ID NO:117), 21 (SEQ ID NO:118), 22 (SEQ ID NO:119), 23 (SEQ ID NO:120), or 24 (SEQ ID NO:121).

[0050] In any of the above embodiments, are provided methods, wherein the tandem diabody has a sequence selected from the group consisting of SEQ ID NOs:123-146. In any of the above embodiments, are provided methods, wherein the tandem diabody is tandem diabody 01 (SEQ ID NO:123), 02 (SEQ ID NO:124), 03 (SEQ ID NO:125), 04 (SEQ ID NO:126), 05 (SEQ ID NO:127), 06 (SEQ ID NO:128), 07 (SEQ ID NO:129), 08 (SEQ ID NO:130), 09 (SEQ ID NO:131), 10 (SEQ ID NO:132), 11 (SEQ ID NO:133), 12 (SEQ ID NO:134), 13 (SEQ ID NO:135), 14 (SEQ ID NO:136), 15 (SEQ ID NO:137), 16 (SEQ ID NO:138), 17 (SEQ ID NO:139), 18 (SEQ ID NO:140), 19 (SEQ ID NO:141), 20 (SEQ ID NO:142), 21 (SEQ ID NO:143), 22 (SEQ ID NO:144), 23 (SEQ ID NO:145), or 24 (SEQ ID NO:146).

[0051] In any of the above embodiments, are provided methods, wherein the method further comprises administering cytarabine, azacitidine, decitabine, anthracycline, fludarabine, clofarabine, cladribine, nelarabine, methotrexate, bortezomib, carfilzomib, melphalan, ibrutinib, thalidomide, lenalidomide, pomalidomide, apremilast, an epipodophyllotoxin, an anthracenedione, an anti-CD20 agent or combinations thereof. In any of the above embodiments, are provided methods, wherein the AML is AML with Recurrent Genetic Abnormalities, AML with myelodysplasia-related changes, Therapy-related myeloid neoplasms, Myeloid sarcoma, Myeloid proliferations related to Down syndrome, Blastic plasmacytoid dendritic cell neoplasm, or AML not otherwise categorized. In any of the above embodiments, are provided methods, wherein the AML is AML-M0, AML-M1, AML-M2, AML-M3, AML-M4, AML-M5, AML-M6, or AML-M7. In any of the above embodiments, are provided methods, wherein administering the protein, in a patient having received allogeneic hematopoietic stem cell transplant, after receiving a myeloablative conditioning regimen, results in improved overall response rate to therapy with the protein. In any of the above embodiments, are provided methods, wherein administering the protein, in a patient having received allogeneic hematopoietic stem cell transplant, after receiving a non-myeloablative conditioning regimen, results in improved overall response rate to therapy with the protein.

[0051a] In another aspect, provided herein is a use of a therapeutically effective amount of a protein that binds to human CD33 and human CD3, wherein said protein comprises a sequence selected from: SEQ ID NO:123, SEQ ID NO:124, SEQ ID NO:125, SEQ ID NO:126, SEQ ID NO:127, SEQ ID NO:128, SEQ ID NO:129, SEQ ID NO:130, SEQ ID NO:131, SEQ ID NO:132, SEQ ID NO:133, SEQ ID NO:134, SEQ ID NO:135, SEQ ID NO:136, SEQ ID NO:137, SEQ ID NO:138, SEQ ID NO:139, SEQ ID NO:140, SEQ ID NO:141, SEQ ID NO:142, SEQ ID NO:143, SEQ ID NO:144, SEQ ID NO:145, and SEQ ID NO:146

in the manufacture of a medicament for the treatment of acute myelogenous leukemia (AML) in a patient having received hematopoietic stem cell transplantation, wherein the medicament is to be administered to the patient.

CLAIMS

WHAT IS CLAIMED IS:

1. Use of a therapeutically effective amount of a protein that binds to human CD33 and human CD3, wherein said protein comprises
a sequence selected from: SEQ ID NO:123, SEQ ID NO:124, SEQ ID NO:125, SEQ ID NO:126, SEQ ID NO:127, SEQ ID NO:128, SEQ ID NO:129, SEQ ID NO:130, SEQ ID NO:131, SEQ ID NO:132, SEQ ID NO:133, SEQ ID NO:134, SEQ ID NO:135, SEQ ID NO:136, SEQ ID NO:137, SEQ ID NO:138, SEQ ID NO:139, SEQ ID NO:140, SEQ ID NO:141, SEQ ID NO:142, SEQ ID NO:143, SEQ ID NO:144, SEQ ID NO:145, and SEQ ID NO:146
in the manufacture of a medicament for the treatment of acute myelogenous leukemia (AML) in a patient having received hematopoietic stem cell transplantation, wherein the medicament is to be administered to the patient.
2. The use according to claim 1, wherein the transplantation is allogenic.
3. The use according to claim 1, wherein the transplantation is autologous.
4. The use according to any of claims 1-3, wherein the patient does not receive a conditioning regimen.
5. The use according to any of claims 1-3, wherein a conditioning regimen is to be further administered to the patient.
6. The use according to claim 5, wherein the conditioning regimen is myeloablative.
7. The use according to claim 5, wherein the conditioning regimen is non-myeloablative.
8. The use according to any of claims 1-2, wherein the medicament is to be administered at time of progression in allogeneic setting, with donor lymphocytes.
9. The use according to any of claims 1-2, wherein the medicament is to be administered at time of progression in allogeneic setting, without donor lymphocytes.