CLAIMS

1. Use of an anti-IL-33 antibody or an antibody variant thereof in the manufacture of a medicament for treating chronic obstructive pulmonary disease (COPD) in a subject, wherein a therapeutically effective amount of an anti-IL-33 antibody or antibody variant thereof is to be administered in a dose of about 300 mg at an interval of every 2 weeks (Q2W), 4 weeks (Q4W) or 8 weeks (Q8W), or in a dose of about 600 mg at an interval of every 4 weeks (Q4W), wherein the anti-IL-33 antibody or variant thereof comprises a VH domain having the sequence set forth in SEQ ID NO: 4 and a VL domain having the sequence set forth in SEQ ID NO: 8.

2. The use according to claim 1, wherein the COPD is associated with chronic bronchitis in the subject.

3. The use of any preceding claim, wherein the COPD is moderate COPD, moderate-to-severe COPD or severe COPD.

4. The use of any preceding claim, wherein the subject has a history of at least one, or at least two moderate, or at least one severe, acute exacerbations of COPD (aeCOPD) in the 12 months prior to treatment.

5. The use of any preceding claim, wherein, prior to treatment, the subject has a post bronchodilator forced expiratory volume in 1 second (FEV_1) to forced vital capacity (FVC) ratio (post-BD-FEV_1/FVC) of less than (<) 0.70 and/or a post-BD FEV_1 > 20% of predicted normal value.

6. The use of any preceding claim, wherein the subject is a current smoker or a former smoker and optionally wherein the subject has a smoking history of at least 10 pack-years.

7. The use of any preceding claim, wherein the subject is receiving COPD inhaled maintenance therapy comprising a long acting Beta 2 agonist (LABA), a long acting muscarinic receptor antagonist (LAMA), and/or an inhaled corticosteroid (ICS) and wherein the inhaled maintenance therapy optionally comprises LABA and LAMA, ICS and LABA, or ICS, LABA and LAMA.

8. The use of any preceding claim, wherein the annualised rate of moderate to severe or severe COPD exacerbations is reduced in the subject and/or the time to first moderate to severe or severe COPD exacerbation is increased.

9. The use of any preceding claim, wherein the FEV_1, pre-bronchodilator FEV_1 and/or FEV_1 to Forced Vital Capacity (FVC) ratio (FEV_1/FVC) is improved in the subject.

10. The use of any preceding claim, wherein the score is improved in the subject in one or more questionnaires selected from Evaluating Respiratory Symptoms in COPD (E-RS), St George's Respiratory Questionnaire (SGRQ), COPD Assessment Test (CAT), Exacerbations of Chronic Pulmonary Disease Tool–Patient-reported Outcome (EXACT-PRO), Breathlessness, Cough and Sputum Scale (BCSS), 5-level EuroQol-5 Dimension (EQ-5D-5L), Work Productivity and Activity Impairment Questionnaire (WPAI-GH), Patient Global Impression of Severity (PGIS) and Patient Global Impression of Change (PGIC).

11. The use of claim 10, wherein the use achieves the minimum clinically important difference in E-RS: COPD score, SGRQ score and/or CAT score.

12. The use of any preceding claim, wherein the dose is effective to achieve a $C_{max.ss}$ of from about 10 to 35 µg/ml during the dosing period.

13. The use any preceding claim, wherein the anti-IL-33 antibody or antibody variant thereof is selected from: a human antibody, a humanized antibody, a chimeric antibody, a monoclonal antibody, a recombinant antibody, an antigen-binding antibody fragment, a single chain antibody, a monomeric antibody, a diabody, a triabody, tetrabody, a Fab fragment, an lgG1 antibody, an lgG2 antibody, an lgG3 antibody, and an lgG4 antibody.

14. The use of any preceding claim, wherein the anti-IL-33 antibody or antibody variant thereof is an IgG1.

15. The use of any preceding claim, wherein the anti-IL-33 antibody comprises a light chain sequence as set forth in SEQ ID NO:9 and a heavy chain sequence as set forth in SEQ ID NO:10.

16. The use of any preceding claim, wherein the anti-IL-33 antibody is 33_670087_7B (MEDI3506).

17. The use according to any preceding claim, wherein the administration is subcutaneous.