Claims

1. Use of an anti-FXII antibody comprising

   (i) a V_H comprising a CDRH1 comprising a sequence set forth in SEQ ID NO:1; a CDRH2 comprising a sequence set forth in SEQ ID NO:2; and a CDRH3 comprising a sequence set forth in SEQ ID NO:3; and

   (ii) a V_L comprising a CDRL1 comprising a sequence set forth in SEQ ID NO:4; a CDRL2 comprising a sequence set forth in SEQ ID NO:5; and a CDRL3 comprising a sequence set forth in SEQ ID NO:6;

   in the preparation of a medicament for treating or preventing hereditary angioedema (HAE) in a subject, wherein the antibody is to be administered subcutaneously to the subject.

2. The use according to claim 1, wherein the anti-FXII antibody comprises a V_H comprising a sequence set forth in SEQ ID NO: 7 and a V_L comprising a sequence set forth in SEQ ID NO:8.

3. The use according to any of claims 1 or 2, wherein the anti-FXII antibody is an IgG.

4. The use of claim 3, wherein the IgG is an IgG4 antibody.

5. The use according to any one of claims 3 to 4, wherein the antibody comprises a mutation to proline at position 228 of the hinge region according to the EU numbering system.

6. The use according to any of claims 1 to 5, wherein the anti-FXII antibody comprises a heavy chain sequence set forth in SEQ ID NO:9 and a light chain sequence set forth in SEQ ID NO:10.

7. The use according to claim 6, wherein the heavy chain comprises an additional lysine linked to the last amino acid of SEQ ID NO:9.

8. The use according to any of claims 1 to 7, wherein the anti-FXII antibody is to be administered in an amount to maintain a concentration of the antibody of at least 5 µg/ml between two subsequent administrations of the antibody.

9. The use according to any of claims 1 to 8, wherein the antibody is to be administered at a dosage of 70 mg to 700 mg once every 1-3 months, preferably once every 1-2 months.

10. The use according to any of claims 1 to 9, wherein the antibody is to be administered at a dosage of 150 mg to 250 mg, preferably 170 mg to 220 mg, more preferably 200 mg.

11. The use according to any of claims 1 to 9, wherein the antibody is to be administered at a dosage of 50 mg to 150 mg, preferably 70 mg to 130 mg, more preferably 100 mg.

12. The use according to any of claims 1 to 11, wherein the antibody is to be administered every 1-2 months, preferably once every 1 month.

13. The use according to any of claims 1 to 12, wherein the subject is a human patient having, suspected of having or at risk for HAE.

14. The use according to any of claims 1 to 13, wherein the method includes a loading dose of the anti-FXII antibody to be administered to the subject.

15. The use according to claim 14, wherein the administration of a loading dose is an intravenous administration of the anti-FXII antibody at a dosage of between 30 mg and 400 mg, preferably between 100 and 300 mg, more preferably 200 mg.

16. The use according to claim 14, wherein the administration of a loading dose is a subcutaneous administration of the anti-FXII antibody at a dosage of between 70 mg and 700 mg, preferably between 200 and 500 mg, more preferably 400 mg.

17. The use according to any of claims 1 to 14 and 16, wherein the anti-FXII antibody is only to be administered subcutaneously to the subject.

18. The use according to any of claims 1 to 17, wherein the administration of the anti-FXII antibody reduces the risk of an HAE attack, preferably by more than 85 %, more preferably more than 90 % and even more preferably by more than 95 % or more than 98 %.

19. The use according to any of claims 1 to 18, wherein the anti-FXII antibody is to be administered in an amount sufficient to inhibit less than 60%, 50%, 40%, or 30% of the FXII-mediated kallikrein activity between two subsequent administrations of the antibody.