CLAIMS

We claim:

1. A method of treating prurigo nodularis (PN), comprising a step of:
administering to a subject in need of treatment an anti-OSMRß antibody at a therapeutically effective dose and an administration interval for a treatment period sufficient to improve, stabilize or reduce one or more symptoms of prurigo nodularis relative to a control.
2. The method according to claim 1, wherein the subject presents with pruritic hyperkeratotic nodules.
3. The method according to claim 1, wherein the prurigo nodularis is idiopathic.
4. The method according to any one of the claims 1-3, wherein the prurigo nodularis is not associated with any other underlying co-morbidities.
5. The method according to claim 1 or 2, wherein the prurigo nodularis is associated with one or more underlying co-morbidities.
6. The method according to any one of the preceding claims, wherein IL-31 expression level is elevated in the subject relative to a control.
7. The method according to any one of the preceding claims, wherein IL-31Rα expression level is elevated in the subject relative to a control.
8. The method according to any one of the preceding claims, wherein OSM expression level is elevated in the subject relative to a control.
9. The method according to any one of the preceding claims, wherein OSMRβ expression level is elevated in the subject relative to a control.
10. The method according to any one of claims 6-9, wherein the levels of any one of IL-31, IL-31Rα, OSM and OSMRβ in the subject is determined via skin biopsy from hyperkeratotic nodules.
11. The method according to any one of claims 6-9, wherein the control is a healthy subject, who is not diagnosed with a pruritic disease.
12. The method of any one of the preceding claims, wherein the subject in need of treatment has a score on a pruritus NRS greater than or equal to 5
13. The method of any one of claims 1-11, wherein the subject in need of treatment has a score on a pruritus NRS greater than or equal to 7.
14. The method of any one of the preceding claims, wherein the subject in need of treatment has elevated MCP-1/CCL2 levels in comparison to a control subject.
15. The method of any one of the preceding claims, wherein treating results in a reduction of MCP-1/CCL2 levels in the subject.

16. The method of claim 15, wherein treating results in a reduction of MCP-1/CCL2 levels in the subject equivalent to levels in a healthy subject.

17. A method of treating pruritus in a subject having a disease or a condition selected from Chronic Idiopathic Pruritus (CIP), Chronic Spontaneous Urticaria (CSU), Chronic Idiopathic Urticaria (CIU), Cutaneous Amyloidosis (CA), Plaque Psoriasis (PPs), Lichen Simplex Chronicus (LSC), Lichens Planus (LP), Inflammatory Ichthyosis (II), Mastocytosis (MA) and Bullous Pemphigoid (BP), comprising a step of: administering to the subject in need of treatment an anti-OSMRß antibody at a therapeutically effective dose and an administration interval for a treatment period sufficient to improve, stabilize or reduce pruritus relative to a control.

18. The method of claim 17, wherein the subject has CIP.

19. The method of claim 17, wherein the subject has CSU or CIU.

20. The method of claim 17, wherein the subject has CA.

21. The method of claim 17, wherein the subject has LSC.

22. The method of claim 17, wherein the subject has LP.

23. The method of claim 17, wherein the subject has II.

24. The method of claim 17, wherein the subject has MA.

25. The method of claim 17, wherein the subject has BP.

26. The method of claim 17, wherein the subject has PPs.

27. The method of claim 17, wherein the subject has CIU.

28. A method of treating inflammation, the method comprising administering to a subject in need of treatment an anti-OSMRß antibody at a therapeutically effective dose and an administration interval for a treatment period such that one or more symptoms associated with inflammation are reduced in intensity, severity, or frequency or has delayed in onset.

29. The method of claim 28, wherein the inflammation is T_H2 mediated inflammation.

30. The method of claim 28 or 29, wherein the inflammation is independent of IL-31.

31. The method of claim 28, wherein the subject is suffering from an inflammatory disease, disorder or condition.

32. The method of any one of claims 28-31, wherein the subject is suffering from a chronic inflammatory disease.

33. The method of claim 31 or 32, wherein the inflammatory disease, disorder or condition is an inflammatory skin disease, disorder or condition.

34. A method of treating CIU, the method comprising administering to the subject in need of treatment an anti-OSMRß antibody at a therapeutically effective dose and an

administration interval for a treatment period sufficient to improve, stabilize or reduce urticaria relative to a control.

35. A method of treating atopic dermatitis, comprising a step of:
administering to a subject in need of treatment an anti-OSMRß antibody at a therapeutically effective dose and an administration interval for a treatment period sufficient to improve, stabilize or reduce one or more symptoms of atopic dermatitis relative to a control.

36. The method of claim 35, wherein the step of administering comprises subcutaneous administration.

37. The method of claim 35, wherein the step of administering comprises intravenous administration.

38. The method of claim 35, wherein the step of administering comprises intravenous administration followed by subcutaneous administration.

39. The method of claim 36, wherein the subcutaneous administration is through subcutaneous injection.

40. The method of claim 36, wherein the subcutaneous administration is through a subcutaneous pump.

41. The method of any one of the preceding claims, wherein the therapeutically effective dose is an initial loading dose, and wherein the method further comprises administering at least one maintenance dose.

42. The method of claim 41, wherein the initial loading dose is greater than the at least one maintenance dose.

43. The method of claim 41, wherein the initial loading dose is two fold greater in dosage than the dosage of the at least one maintenance dose, and wherein the loading dose is 720 mg/kg.

44. The method of any one of the preceding claims, wherein the therapeutically effective dose is equal to or greater than 0.1 mg/kg, 0.2 mg/kg, 0.3 mg/kg, 0.5 mg/kg, 1 mg/kg, 1.5 mg/kg, 2 mg/kg, 3 mg/kg, 4 mg/kg, 5 mg/kg, 6 mg/kg, 7 mg/kg, 7.5 mg/kg, 8 mg/kg, 9 mg/kg, 10 mg/kg, 11 mg/kg, 12 mg/kg, 13 mg/kg, 14 mg/kg, 15 mg/kg, 16 mg/kg, 17 mg/kg, 18 mg/kg, 19 mg/kg or 20 mg/kg.

45. The method of any one of claims 1-43, wherein the therapeutically effective dose is approximately 0.1-20 mg/kg, 0.2-20 mg/kg, 0.3-20 mg/kg, 0.3-10 mg/kg, 0.3-7.5 mg/kg, 0.1-15 mg/kg, 0.1-10 mg/kg, 1.0-50 mg/kg, 1-25 mg/kg, 1-20 mg/kg, 1.5-20 mg/kg, 2-20 mg/kg, 3-20 mg/kg, approximately 4-20 mg/kg, approximately 5-20 mg/kg, approximately 6-20 mg/kg, approximately 7-20 mg/kg, approximately 8-20 mg/kg,

approximately 9-20 mg/kg, approximately 10-20 mg/kg, approximately 11-20 mg/kg, approximately 12-20 mg/kg, approximately 13-20 mg/kg, approximately 14-20 mg/kg, approximately 15-20 mg/kg, approximately 16-20 mg/kg, approximately 17-20 mg/kg, approximately 18-20 mg/kg, approximately 19-20 mg/kg, approximately 3-19 mg/kg, approximately 3-18 mg/kg, approximately 3-17 mg/kg, approximately 3-16 mg/kg, approximately 3-15 mg/kg, approximately 3-14 mg/kg, approximately 3-13 mg/kg, approximately 3-12 mg/kg, approximately 3-11 mg/kg, approximately 3-10 mg/kg, approximately 3-9 mg/kg, approximately 3-8 mg/kg, approximately 3-7 mg/kg, approximately 3-6 mg/kg, approximately 3-5 mg/kg, or approximately 3-4 mg/kg.

46. The method of any one of claims 1-43, wherein the therapeutically effective dose is equal to or greater than 50 mg/kg, 100 mg/kg, 150 mg/kg, 200 mg/kg, 250 mg/kg, 300 mg/kg, 350 mg/kg, 400 mg/kg, 450 mg/kg, 500 mg/kg, 550 mg/kg, 600 mg/kg, 650 mg/kg, 700 mg/kg, 750 mg/kg, 800 mg/kg, 850 mg/kg, 900 mg/kg, 950 mg/kg, or 1000 mg/kg.

47. The method of any one of claims 1-43, wherein the therapeutically effective dose is approximately 50-1,000 mg/kg, approximately 100-1,000 mg/kg, approximately 150-1,000 mg/kg, approximately 200-1,000 mg/kg, approximately 250-1,000 mg/kg, approximately 300-1,000 mg/kg, approximately 350-1,000 mg/kg, approximately 400-1,000 mg/kg, approximately 450-1,000 mg/kg, approximately 500-1,000 mg/kg, approximately 550-1,000 mg/kg, approximately 600-1,000 mg/kg, approximately 650-1,000 mg/kg, approximately 700-1,000 mg/kg, approximately 750-1,000 mg/kg, approximately 800-1,000 mg/kg, approximately 850-1,000 mg/kg, approximately 900-1,000 mg/kg, approximately 950-1,000 mg/kg, approximately 50-950 mg/kg, approximately 50-900 mg/kg, approximately 50-850 mg/kg, approximately 50-800 mg/kg, approximately 50-750 mg/kg, approximately 50-700 mg/kg, approximately 50-650 mg/kg, approximately 50-600 mg/kg, approximately 50-550 mg/kg, approximately 50-500 mg/kg, approximately 50-450 mg/kg, approximately 50-400 mg/kg, approximately 50-350 mg/kg, approximately 50-300 mg/kg, approximately 50-250 mg/kg, approximately 50-200 mg/kg, approximately 50-150 mg/kg, or approximately 50-100 mg/kg.

48. The method of any one of claims 1-43, wherein the therapeutically effective dose is a flat dose.

49. The method of claim 48, wherein the flat dose is equal to or greater than 50 mg, 100 mg, 150 mg, 200 mg, 250 mg, 300 mg, 320 mg, 360 mg, 380 mg, 400 mg, 450 mg, 500 mg, 550 mg, 600 mg, 650 mg, 700 mg, 720 mg, 740 mg, 760 mg, 780 mg or 800 mg.

50. The method of claim 48, wherein the flat dose ranges from 50-800 mg, 100-500 mg, 150-400 mg, 200-400 mg, 250-400 mg, 300-350 mg, 320-400 mg, 350-400 mg.
51. The method of claim 48, wherein the flat dose is 720 mg initial loading dose, and is 360 mg maintenance dose.
52. The method of any one of the preceding claims, wherein the administration interval is daily.
53. The method of any one of claims 1-51, wherein the administration interval is every other day.
54. The method of any one of claims 1-51, wherein the administration interval is multiple times a week.
55. The method of any one of claims 1-51, wherein the administration interval is once every week.
56. The method of any one of claims 1-51, wherein the administration interval is once every two weeks.
57. The method of any one of claims 1-51, wherein the administration interval is once every three weeks.
58. The method of any one of claims 1-51, wherein the administration interval is once every four weeks.
59. The method of any one of claims 1-51, wherein the administration interval is once every five weeks.
60. The method of any one of 35-59, wherein the one or more symptoms of atopic dermatitis are assessed by an Investigators' Global Assessment (IGA) of atopic dermatitis.
61. The method of any one of claims 35-59, wherein the one or more symptoms of atopic dermatitis are assessed by an Eczema Area and Severity Index (EASI).
62. The method of any one of claims 35-59, wherein the one or more symptoms of atopic dermatitis are assessed by SCORing Atopic Dermatitis.
63. The method of any one of claims 35-59, wherein the one or more symptoms of atopic dermatitis are assessed by atopic dermatitis Area Photographs.
64. The method of any one of claims 35-59, wherein the one or more symptoms of atopic dermatitis are assessed by Body Surface Area Involvement (BSA) of Atopic Dermatitis.
65. The method of any one of claims 35-59, wherein the one or more symptoms of atopic dermatitis are assessed by a Dermatology Life Quality Index (DLQI).
66. The method of any one of claims 35-59, wherein the one or more symptoms of atopic dermatitis are assessed by a Hospital Anxiety and Depression Scale (HADS).

67. The method of any one of claims 35-59, wherein the one or more symptoms of atopic dermatitis are assessed by actigraphy.

68. The method of any one of claims 35-59, wherein the one or more symptoms of atopic dermatitis are assessed by a quantitative numerical pruritus scale.

69. The method of claim 68, wherein the administration of an anti-OSMRß antibody results in a statistically-significant drop on a quantitative numerical pruritus scale.

70. The method of claim 69, wherein the quantitative numerical pruritus scale is selected from the group consisting of a Pruritus Numerical Rating Scale (NRS), Visual Analogue Scale (VAS), Verbal Rating Scale (VRS), and combinations thereof.

71. The method of any one of the preceding claims, wherein the administration of an anti-OSMRß antibody results in an improvement in at least one of the subject's quality of life, quality of sleep and quantity of sleep.

72. The method of any one of claims 35-71, wherein the control is indicative of the one or more symptoms of atopic dermatitis in the subject before the treatment.

73. The method of any one of claims 35-71, wherein the one or more symptoms of atopic dermatitis in the subject before the treatment comprises a score on a pruritus NRS greater than or equal to 5, or an equivalent assessment on a quantitative numerical pruritus scale.

74. The method of any one of claims 35-73, wherein the one or more symptoms of atopic dermatitis in the subject before the treatment comprises a score on a pruritus NRS greater than or equal to 7, or an equivalent assessment on a quantitative numerical pruritus scale.

75. The method of any one of claims 35-74, wherein the subject in need of treatment has been diagnosed with atopic dermatitis for at least one year.

76. The method of any one of claims 35-75, wherein the subject in need of treatment has been diagnosed with moderate to severe atopic dermatitis, wherein moderate to severe atopic dermatitis comprises IGA of 3 or 4 and BSA involvement of approximately 10% or more.

77. The method of any one of claims 35-76, wherein the control is indicative of the one or more symptoms of atopic dermatitis in a control subject with the same disease status without treatment.

78. The method of any one of claims 35-77, wherein, the control is indicative of the one or more symptoms of atopic dermatitis in a control subject with the same disease status that was administered a placebo.

79. The method of any one of the preceding claims, wherein the administration results in no serious adverse effects in the subject.

80. The method of any one of the preceding claims, wherein the administration does not result in an adverse event selected from the group consisting of peripheral edema, exacerbation of atopic dermatitis, nasopharyngitis, upper respiratory tract infections, increased creatine phosphokinase, conjunctivitis, blepharitis, oral herpes, keratitis, eye pruritus, other herpes simplex virus infection, and dry eye, peripheral edema and combinations thereof.

81. A method of treating uremic pruritus, comprising a step of:
administering to a subject in need of treatment an anti-OSMRß antibody at a therapeutically effective dose and an administration interval for a treatment period sufficient to improve, stabilize or reduce one or more symptoms of uremic pruritus relative to a control.

82. The method of claim 81, wherein the step of administering comprises subcutaneous administration.

83. The method of claim 81, wherein the step of administering comprises intravenous administration.

84. The method of claim 81, wherein the step of administering comprises intravenous administration followed by subcutaneous administration.

85. The method of any one of claims 82 or 84, wherein the subcutaneous administration is through subcutaneous injection.

86. The method of any one of claims 82 or 84, wherein the subcutaneous administration is through a subcutaneous pump.

87. The method of any one of claims 81-86, wherein the therapeutically effective dose is an initial loading dose, and wherein the method further comprises administering at least one maintenance dose.

88. The method of claim 87, wherein the initial loading dose is greater than the at least one maintenance dose.

89. The method of claim 87, wherein the initial loading dose is two fold greater in dosage than the dosage of the at least one maintenance dose.

90. The method of any one of claims 81-89, wherein the therapeutically effective dose is equal to or greater than 0.1 mg/kg, 0.3 mg/kg, 0.5 mg/kg, 1 mg/kg, 1.5 mg/kg, 2 mg/kg, 3 mg/kg, 4 mg/kg, 5 mg/kg, 6 mg/kg, 7 mg/kg, 7.5 mg/kg, 8 mg/kg, 9 mg/kg, 10 mg/kg, 11 mg/kg, 12 mg/kg, 13 mg/kg, 14 mg/kg, 15 mg/kg, 16 mg/kg, 17 mg/kg, 18 mg/kg, 19 mg/kg or 20 mg/kg.

91. The method of any one of claims 91-89, wherein the therapeutically effective dose is approximately 0.1-20 mg/kg, 0.3-20 mg/kg, 0.5-20 mg/kg, 1-20 mg/kg, 1.5-20 mg/kg, 2-

20 mg/kg, 3-20 mg/kg, approximately 4-20 mg/kg, approximately 5-20 mg/kg, approximately 6-20 mg/kg, approximately 7-20 mg/kg, approximately 8-20 mg/kg, approximately 9-20 mg/kg, approximately 10-20 mg/kg, approximately 11-20 mg/kg, approximately 12-20 mg/kg, approximately 13-20 mg/kg, approximately 14-20 mg/kg, approximately 15-20 mg/kg, approximately 16-20 mg/kg, approximately 17-20 mg/kg, approximately 18-20 mg/kg, approximately 19-20 mg/kg, approximately 3-19 mg/kg, approximately 3-18 mg/kg, approximately 3-17 mg/kg, approximately 3-16 mg/kg, approximately 3-15 mg/kg, approximately 3-14 mg/kg, approximately 3-13 mg/kg, approximately 3-12 mg/kg, approximately 3-11 mg/kg, approximately 3-10 mg/kg, approximately 3-9 mg/kg, approximately 3-8 mg/kg, approximately 3-7 mg/kg, approximately 3-6 mg/kg, approximately 3-5 mg/kg, or approximately 3-4 mg/kg.

92. The method of any one of the preceding claims, wherein the therapeutically effective dose is equal to or greater than 50 mg/kg, 100 mg/kg, 150 mg/kg, 200 mg/kg, 250 mg/kg, 300 mg/kg, 350 mg/kg, 400 mg/kg, 450 mg/kg, 500 mg/kg, 550 mg/kg, 600 mg/kg, 650 mg/kg, 700 mg/kg, 750 mg/kg, 800 mg/kg, 850 mg/kg, 900 mg/kg, 950 mg/kg, or 1000 mg/kg.

93. The method of any one of the preceding claims, wherein the therapeutically effective dose is approximately 50-1,000 mg/kg, approximately 100-1,000 mg/kg, approximately 150-1,000 mg/kg, approximately 200-1,000 mg/kg, approximately 250-1,000 mg/kg, approximately 300-1,000 mg/kg, approximately 350-1,000 mg/kg, approximately 400-1,000 mg/kg, approximately 450-1,000 mg/kg, approximately 500-1,000 mg/kg, approximately 550-1,000 mg/kg, approximately 600-1,000 mg/kg, approximately 650-1,000 mg/kg, approximately 700-1,000 mg/kg, approximately 750-1,000 mg/kg, approximately 800-1,000 mg/kg, approximately 850-1,000 mg/kg, approximately 900-1,000 mg/kg, approximately 950-1,000 mg/kg, approximately 50-950 mg/kg, approximately 50-900 mg/kg, approximately 50-850 mg/kg, approximately 50-800 mg/kg, approximately 50-750 mg/kg, approximately 50-700 mg/kg, approximately 50-650 mg/kg, approximately 50-600 mg/kg, approximately 50-550 mg/kg, approximately 50-500 mg/kg, approximately 50-450 mg/kg, approximately 50-400 mg/kg, approximately 50-350 mg/kg, approximately 50-300 mg/kg, approximately 50-250 mg/kg, approximately 50-200 mg/kg, approximately 50-150 mg/kg, or approximately 50-100 mg/kg.

94. The method of any one of claims 81-89, wherein the therapeutically effective dose is a flat dose.

95. The method of claim 94, wherein the flat dose is equal to or greater than 50 mg, 100 mg, 150 mg, 200 mg, 250 mg, 300 mg, 320 mg, 360 mg, 380 mg, or 400 mg.

96. The method of claim 94, wherein the flat dose ranges from 50-500 mg, 100-400 mg, 150-400 mg, 200-400 mg, 250-400 mg, 300-350 mg, 320-400 mg, 350-400 mg.

97. The method of claim 94, wherein the flat dose is 360 mg.

98. The method of any one of claims 81-97, wherein the administration interval is daily.

99. The method of any one of claims 81-97, wherein the administration interval is every other day.

100. The method of any one of claims 81-97, wherein the administration interval is multiple times a week.

101. The method of any one of claims 81-97, wherein the administration interval is once every week.

102. The method of any one of claims 81-97, wherein the administration interval is once every two weeks.

103. The method of any one of claims 81-97, wherein the administration interval is once every three weeks.

104. The method of any one of claims 81-97, wherein the administration interval is once every four weeks.

105. The method of any one of claims 81-97, wherein the administration interval is once every five weeks.

106. The method of any one claims 81-105, wherein the treatment period is for as long as the subject is on hemodialysis.

107. The method of any one of claims 81-106, wherein the step of administering occurs one day before the subject undergoes hemodialysis.

108. The method of any one of claims 81-107, wherein the step of administering occurs during hemodialysis.

109. The method of any one of claims 81-107, wherein the step of administering occurs within one day after hemodialysis.

110. The method of any one of claims 81-109, wherein the one or more symptoms of uremic pruritus are assessed by a quantitative numerical pruritus scale.

111. The method of claim 110, wherein the administration of an anti-OSMRß antibody results in a statistically-significant drop on a quantitative numerical pruritus scale.

112. The method of claim 111, wherein the quantitative numerical pruritus scale is selected from the group consisting of a Pruritus Numerical Rating Scale (NRS), Pruritus Visual Analogue Scale (VAS), Verbal Rating Scale (VRS), and combinations thereof.

113. The method of any one of claims -81-112, wherein the administration of an anti-OSMRß antibody results an improvement in at least one of the subject's quality of life, quality of sleep and quantity of sleep.

114. The method of any one of claims 81-109, wherein the one or more symptoms of uremic pruritus are assessed by a Dermatology Life Quality Index (DLQI).

115. The method of any one of claims 81-109, wherein the one or more symptoms of uremic pruritus are assessed by a Hospital Anxiety and Depression Scale (HADS).

116. The method of any one of claims 81-109, wherein the one or more symptoms of atopic dermatitis are assessed by actigraphy.

117. The method of any one of claims 81-116, wherein the control is indicative of the one or more symptoms of uremic pruritus in the subject before the treatment.

118. The method of any one of claims 81-117, wherein the one or more symptoms of uremic pruritus in the subject before the treatment comprises a score on a pruritus NRS greater than or equal to 5, or an equivalent assessment on a quantitative numerical pruritus scale.

119. The method of any one of claims 81-118, wherein the one or more symptoms of uremic pruritus in the subject before the treatment comprises a score on a pruritus NRS greater than or equal to 7, or an equivalent assessment on a quantitative numerical pruritus scale.

120. The method of any one of claims 81-119, wherein the subject in need of treatment has end stage renal disease.

121. The method of claim 120, wherein the subject in need of treatment is undergoing a hemodialysis regimen at least one time-per-week.

122. The method of claim 120, wherein the subject in need of treatment is undergoing a three-times-per-week hemodialysis regimen.

123. The method of claim 122, wherein the three-times-per-week hemodialysis regimen has been stable for at least three months.

124. The method of any one of claims 81-123, wherein the control is indicative of the one or more symptoms of uremic pruritus in a control subject with the same disease status without treatment.

125. The method of any one of claims 81-124, wherein, the control is indicative of the one or more symptoms of uremic pruritus in a control subject with the same disease status that was administered a placebo.

126. The method of any one of claims 81-125, wherein the administration results in no serious adverse effects in the subject.

127. The method of any one of claims 81-126, wherein the administration does not result in an adverse event selected from the group consisting of peripheral edema, nasopharyngitis,

upper respiratory tract infections, increased creatine phosphokinase, conjunctivitis, blepharitis, oral herpes, keratitis, eye pruritus, other herpes simplex virus infection, dry eye and combinations thereof.

128. A method of treating pruritus in a subject having a kidney disease, comprising a step of: administering to the subject in need of treatment an anti-OSMRß antibody at a therapeutically effective dose and an administration interval for a treatment period sufficient to improve, stabilize or reduce one or more symptoms of pruritus relative to a control.

129. The method of claim 128, wherein the subject has chronic kidney disease.

130. The method of claims 128 or 129, wherein administering an anti-OSMRß antibody occurs prior to, during, or immediately following dialysis.

131. The method of claim 128, wherein the method treats pruritus in predialysis subjects suffering from chronic kidney disease.

132. The method of any one of claims 128-131, wherein the pruritus is chronic kidney disease-associated pruritus.

133. The method of any one of claims 128-132, wherein the subject is a juvenile.

134. The method of any one of the preceding claims, wherein the anti-OSMRß antibody comprises:

a light chain complementary-determining region 1 (LCDR1) defined by SEQ ID NO: 8, a light chain complementary-determining region 2 (LCDR2) defined by SEQ ID NO: 9, and a light chain complementary-determining region 3 (LCDR3) defined by SEQ ID NO: 10; and

a heavy chain complementary-determining region 1 (HCDR1) defined by SEQ ID NO: 5, a heavy chain complementary-determining region 2 (HCDR2) defined by SEQ ID NO: 6, and a heavy chain complementary-determining region 3 (HCDR3) defined by SEQ ID NO: 7.

135. The method of claim 134, wherein the anti-OSMRß antibody comprises:

a light chain variable domain having an amino acid sequence at least 90% identical to SEQ ID NO: 4; and

a heavy chain variable domain having an amino acid sequence at least 90% identical to SEQ ID NO: 3.

136. The method of claim 135, wherein

the light chain variable domain has the amino acid sequence set forth in SEQ ID NO: 4; and

the heavy chain variable domain has the amino acid sequence set forth in SEQ ID NO: 3.

137. The method of any one of claims 134-136, wherein the anti-OSMRß antibody comprises CH1, hinge and CH2 domains derived from an IgG4 antibody fused to a CH3 domain derived from an IgG1 antibody.

138. The method of claim 137, wherein the anti-OSMRß antibody comprises
a light chain having an amino acid sequence at least 90% identical to SEQ ID NO: 2; and
a heavy chain having an amino acid sequence at least 90% identical to SEQ ID NO: 1.

139. The method of claim 138, wherein
the light chain has the amino acid sequence set forth in SEQ ID NO: 2; and
the heavy chain has the amino acid sequence set forth in SEQ ID NO: 1.

140. The method of any one of the preceding claims, wherein administering the anti-OSMRβ antibody results in a decrease in pruritus Numerical Rating Score (NRS) compared to a control.

141. The method of claim 140, wherein the control is a NRS indicative of a subject with comparable disease status without treatment.

142. The method of claim 140, wherein the control is a NRS in the subject prior to the treatment.

143. The method of any one of the preceding claims, wherein administering the anti-OSMRβ antibody results in a decrease in pruritus Visual Analog Scale (VAS) compared to a control.

144. The method of claim 143, wherein the control is a VAS indicative of a subject with comparable disease status without treatment.

145. The method of claim 143, wherein the control is a baseline VAS in the subject prior to the treatment.

146. The method of any one of claims 134-145, wherein the NRS is decreased by at least 2-points, or by at least 3-points, or by at least 4-points, or by at least 5-points, or by at least 6 points, or by at least 7 points, or by at least 8 points.

147. The method of claim 146, wherein the NRS is decreased by at least 4 points.

148. The method of claim 146, wherein the NRS is deceased by at least 8 points.

149. The method of claim 146, wherein the decrease in NRS is at least 4 points in at least 30%, or at least 40%, or at least 50%, or at least 60% of the subjects administered the anti-OSMRβ antibody.

150. The method of claim 146, wherein the decrease in NRS is at least 6 points in at least 10%, or at least 20%, or at least 30%, or at least 40% of the subjects administered the anti-OSMRβ antibody.

151. The method of claims 140-150, wherein the decrease in NRS occurs less than 5 weeks, or less than 4 weeks, or less than 3 weeks, or less than 2 weeks, or less than 1 week after the subject's initial dose of the anti-OSMRβ antibody.

152. The method of any one of claims 140-151, wherein the decrease in NRS is greater than 20%, or greater than 30%, or greater than 40% or greater than 50% compared to the control about 4 weeks after the subject's initial dose of the anti-OSMRβ antibody.

153. The method of any one of claims 140-152, wherein the NRS is worst itch NRS (WI-NRS).

154. The method of any one of claims 140-152, wherein the NRS value is calculated as a weekly average.

155. The method of any one of the preceding claims, wherein administering the anti-OSMRβantibody results in improved sleep in a subject as evidenced by a decrease in sleep-loss VAS compared to a control.

156. The method of claim 155, wherein the control is a sleep-loss VAS indicative of a subject with comparable disease status without treatment.

157. The method of claim 155, wherein the control is a sleep-loss VAS in the subject prior to the treatment.

158. The method of claim 155, wherein the control is a sleep-loss VAS in a subject with comparable disease status but treated with a placebo.

159. The method of any one of claims 155-158, wherein the decrease in the sleep-loss VAS relative to the control is by at least 10%, or by at least 20%, or by at least 30%, or by at least 40%, or by at least 50%, or by at least 60%, or by at least 70%, or by at least 80%, or by at least 90%.

160. The method of claims 155-159, wherein the decrease in the sleep-loss VAS occurs less than 5 weeks, or less than 4 weeks, or less than 3 weeks, or less than 2 weeks, or less than 1 week after the subject's initial dose of the anti-OSMRβ antibody.

161. The method of claims 155-160, wherein the sleep-loss VAS value is calculated as a weekly average.

162. The method of any one of the preceding claims, wherein administering the anti-OSMRβ antibody results in a decrease in EASI compared to a control.

163. The method of claim 162, wherein the control is an EASI indicative of a subject with comparable disease status without treatment.

164. The method of claim 163, wherein the control is an EASI in the subject prior to the treatment.

165. The method of any one of claims 162-164, wherein the decrease in EASI compared to the control is by at least 10%, or by at least 20%, or by at least 30%, or by at least 40%, or by at least 50%, or by at least 60%, or by at least 70%, or by at least 75%, or by at least 80%, or by at least 90%.

166. The method of any one of claims 162-165, wherein the decrease in EASI occurs less than 5 weeks, or less than 4 weeks, or less than 3 weeks, or less than 2 weeks, or less than 1 week after the subject's initial dose of the anti-OSMRß antibody.

167. The method of any one of claims 162-166, wherein the EASI value is calculated as a weekly average.

168. The method of any one of any one of the preceding claims, wherein administering the anti-OSMRβ antibody results in two or more of:

a decrease in pruritus Numerical Rating Score (NRS) by at least 4-points compared to a control NRS;

a decrease in EASI by at least 20% compared to a control EASI;

a decrease in sleep-loss VAS by at least 20% compared to a control VAS;

an improvement in Scoring of Active Dermatitis (SCORAD) compared to a control SCORAD;

an improvement in Dermatology Life Quality Index (DLQI) compared to a control DLQI; and

an improvement in Hospital Anxiety and Depression Scale (HADS) compared to a control HADSl.

169. The method of claim 168, wherein administering the anti-OSMRβ antibody results in a decrease in pruritus Numerical Rating Score (NRS) by at least 4-points compared to a control NRS, and a decrease in EASI by at least 20% compared to a control EASI.

170. The method of claim 168 or 169, wherein administering the anti-OSMRβ antibody results in a decrease in pruritus Numerical Rating Score (NRS) by at least 4-points compared to a control NRS, and a decrease in sleep-loss VAS by at least 20% compared to a control VAS.

171. The method of any one of claims 162-170, wherein administering the anti-OSMRβ antibody results in a decrease in sleep-loss VAS by at least 20% compared to a control VAS, and a decrease in EASI by at least 20% compared to a control EASI.

172. The method of any one of claims 162-171, wherein administering the anti-OSMRβ antibody results in a decrease in pruritus Numerical Rating Score (NRS) by at least 4-points, 5-points, 6-points, 7-points, 8-points, or 9-points compared to the control NRS.

173. The method of any one of claims 162-172, wherein administering the anti-OSMRß antibody results in a decrease in EASI by at least 30%, or by at least 40%, or by at least 50%, or by at least 60%, or by at least 70%, or by at least 75%, or by at least 80%, or by at least 90% compared to the control EASI.

174. The method of any one of claims 162-173, wherein administering the anti-OSMRß antibody results in a decrease in sleep-loss VAS by at least 30%, or by at least 40%, or by at least 50%, or by at least 60%, or by at least 70%, or by at least 80%, or by at least 90% compared to the control VAS.

175. The method of any one of claims 162-174, wherein the control is a value indicative of a respective parameter in a subject with comparable disease status without treatment.

176. The method of any one of claims 162-174, wherein the control is a value indicative of a respective parameter in a subject prior to the treatment.

177. The method of any one of claims 162-174, wherein the control is a value indicative of a respective parameter in a subject with comparable disease status but treated with a placebo.

178. The method of any one of the preceding claims, wherein the anti-OSMRß antibody is administered in conjunction with an additional therapeutic agent.

179. The method of claim 178, wherein the additional therapeutic agent is a topical corticosteroid.