We claim:

1. An antibody formulation suitable for pharmaceutical infusion or subcutaneous injection, comprising:

an anti-APRIL antibody at a concentration of between about 20 mg/mL to about 190 mg/mL;

about 10 mM L-histidine;

about 75 mM L-arginine;

about 3% wt % sorbitol;

about 0.01 wt % polysorbate 20; and

a pH of about 6.0 to about 6.6;

wherein the formulation (i) has a viscosity of about 16 cP or less, (ii) does not comprise glutamic acid or its salt, (iii) has an osmolality of between about 250 mOsm/kg to about 390 mOsm/kg, and (iv) has an OD330 of less than about 1.0.

2. An antibody formulation according to claim 1, wherein the formulation maintains at least 96% purity of the anti-APRIL antibody following storage at 2-8ºC for 9 months following manufacture of the formulation.

3. An antibody formulation according to claim 2, wherein the formulation maintains at least 95% purity of the anti-APRIL antibody following storage at 25ºC for 6 months following manufacture of the formulation.

4. An antibody formulation according to one of claims 1-3, wherein the formulation has a second virial coefficient of $2.5x10^{-5}$ mol·mL/g^2 or greater measured at 25ºC.

5. An antibody formulation according to one of claims 1-4, wherein the formulation has a calculated isoelectric point of about 7.4 or greater.

6. An antibody formulation according to one of claims 1-5, wherein the anti-APRIL antibody in the formulation is at a concentration of about 150 mg/mL.

7. An antibody formulation according to claim 6, wherein the formulation has an osmolality of between about 290 mOsm/kg to about 390 mOsm/kg.

8. An antibody formulation according to one of claims 6 or 7, wherein the formulation has an OD330 of about 0.8 or less.

9. An antibody formulation according to one of claims 1-5, wherein the anti-APRIL antibody is at a concentration of about 20 mg/mL.

10. An antibody formulation according to claim 9, wherein the formulation has an osmolality of between about 293 mOsm/kg to about 333 mOsm/kg.

11. An antibody formulation according to one of claims 1-10, wherein the anti-APRIL antibody is a humanized antibody comprising a heavy chain variable region.light chain variable region pair selected from the group consisting of VH11.VL15, VH12.VL15, VH13.VL15, VH14.VL15, VH14_1.VL15, VH14_1C.VL15, VH14_1D.VL15, VH14_1E.VL15, and VH14_1G.VL15.

12. An antibody formulation according to one of claims 1-11, wherein the formulation is free of glycine, carbonate, HEPES, phosphate, citrate, and acetate.

13. A single-use or multi-use vial comprising the antibody formulation of one of claims 1-12.

14. The single-use or multi-use vial of claim 13 containing a volume of between 0.5 mL and 50 mL of the formulation having an anti-APRIL antibody concentration of between about 20 mg/mL to about 190 mg/mL.

15. The single-use or multi-use vial of claim 14, wherein the formulation has an anti-APRIL antibody concentration of about 20 mg/mL.

16. The single-use or multi-use vial of claim 14, wherein the formulation has an anti-APRIL antibody concentration of about 150 mg/mL.

17. The single-use or multi-use vial of one of claims 14-16, containing a volume of 5 mL of the formulation.

18. A pre-filled syringe, autoinjector, or injector pen comprising the antibody formulation of one of claims 1-12.

19. The pre-filled syringe, autoinjector, or injector pen of claim 18 containing a volume of between about 0.5 mL and about 10 mL of the formulation having an anti-APRIL antibody concentration of between about 20 mg/mL to about 190 mg/mL.

20. The pre-filled syringe, autoinjector, or injector pen of claim 19, wherein the formulation has an anti-APRIL antibody concentration of about 20 mg/mL.

21. The pre-filled syringe, autoinjector, or injector pen of claim 19, wherein the formulation has an anti-APRIL antibody concentration of about 150 mg/mL.

22. The pre-filled syringe, autoinjector, or injector pen of one of claims 19-21, containing a volume of about 2 mL of the formulation.

23. Use of the formulation of one of claims 1-12 in the manufacture of a medicament for treating IgA nephropathy, wherein the formulation is to be administered by subcutaneous injection into an individual in need thereof.

24. The use according to claim 23, wherein the administration is to be repeated on at least an every week (QW) schedule for at least 2 administration cycles.

25. The use according to claim 23, wherein the administration is to be repeated on at least an every two weeks (Q2W) schedule for at least 2 administration cycles.

26. The use according to claim 23, wherein the administration is to be repeated on at least an every 4 weeks (Q4W) or monthly (QMT) schedule for at least 2 administration cycles.

27. The use according to one of claims 23-26, wherein a total dose of between about 10 mg to about 1350 mg of the anti-APRIL antibody is to be administered per dosing event.

28. The use according to claim 27, wherein about 2 mL of the formulation at a concentration of about 150 mg/mL of the anti-APRIL antibody is to be delivered per administration, and each dosing event comprises one or more of said administrations.

29. The use according to claim 27, wherein about 4 mL of the formulation at a concentration of about 150 mg/mL of the anti-APRIL antibody is to be delivered per administration, and each dosing event comprises one or more of said administrations.

30. The use according to one of claims 23-29, wherein the formulation is to be subcutaneously administered into a site in the individual's thigh, abdomen, or upper arm.

31. Use of the formulation of one of claims 1-12 in the manufacture of a medicament for treating IgA nephropathy, wherein the formulation is to be administered by intravenous infusion into an individual in need thereof.

32. The use according to claim 31, wherein the administration is to be repeated on at least a QW schedule for at least 2 administration cycles.

33. The use according to claim 31, wherein the administration is to be repeated on at least a Q2W schedule for at least 2 administration cycles.

34. The use according to claim 31, wherein the administration is to be repeated on at least a Q4W or monthly schedule for at least 2 administration cycles.

35. The use according to any one of claims 31-34, wherein the intravenous infusion comprises:

the formulation of one of claims 1-12 diluted to a concentration of between about 0.1 mg/mL to about 10 mg/mL in 0.9% saline; and

a total dose of between about 10 mg to about 1350 mg of the anti-APRIL antibody is to be administered to the individual in a single intravenous dose of the diluted formulation over a period of about 2 hours.

36. The use according to claim 35, wherein 15 mL of the formulation at a concentration of 20 mg/mL is to be added to 235 mL of 0.9% saline to provide the intraveneous dose at a concentration of 1.2 mg/mL.

37. Use of an anti-APRIL antibody in the manufacture of a medicament for treating IgA nephropathy, wherein the anti-APRIL antibody is to be administered by a loading/maintenance administration protocol to an individual in need thereof.

38. The use according to claim 37, wherein the loading component of the loading/maintenance administration protocol comprises one or more administrations of the anti-APRIL antibody at a higher concentration than the anti-APRIL antibody concentration in the maintenance component of the loading/maintenance administration protocol.

39. The use according to claim 37, wherein the loading component of the loading/maintenance administration protocol comprises one or more administrations of the anti-APRIL antibody at a higher frequency than the frequency of administration of the anti-APRIL antibody in the maintenance component of the loading/maintenance administration protocol.

40. The use according to one of claims 37-39, wherein the loading component of the loading/maintenance administration protocol comprises one or more administrations of the anti-APRIL antibody at a different route than the route of administration of the anti-APRIL antibody in the maintenance component of the loading/maintenance administration protocol.

41. The use according to claim 37, wherein the loading component of the loading/maintenance administration protocol comprises one or more intravenous administrations of the anti-APRIL antibody and the maintenance component of the loading/maintenance administration protocol comprises one or more subcutaneous administrations of the anti-APRIL antibody.

42. The use according to one of claims 37-41, wherein the anti-APRIL antibody is an antibody formulation according to one of claims 1-12.

43. The use according to one of claims 23-41, wherein the individual in need thereof has a serum IgA level greater than 4g/L.

44. The use according to one of claims 23-41, wherein the individual in need thereof is an IgA nephropathy patient.

45. The use according to one of claims 23-41, wherein the individual has a hyperimmunoglobulinemia.