Claims

1. Use of a neutralizing antibody which binds human IL-17A and human IL-17F in the manufacture of a medicament for treating psoriatic arthritis in a human wherein the antibody comprises a light chain variable domain and a heavy chain variable domain, wherein the variable domain of the light chain comprises the sequence given in SEQ ID NO:10 and the variable domain of the heavy chain comprises the sequence given in SEQ ID NO:11 and wherein multiple doses comprising between 160 and 640 mg of the antibody are to be administered at a four week interval.
2. The use of claim 1, wherein the antibody is bimekizumab.
3. The use of claim or claim 2, wherein the antibody is to be administered as a pharmaceutical composition.
4. The use of any one of claims 1 through 3, wherein the antibody is to be administered subcutaneously.
5. The use of any one of claims 1 through 3, wherein the antibody is to be administered intravenously.
6. The use of any one of claims 1 to 5 wherein the human has a diagnosis of adult-onset psoriatic arthritis.
7. The use of claim 6, wherein the human is at least 18 years of age.
8. The use of claim 6, wherein the human was diagnosed at least six months prior to administration of the antibody.
9. The use of claim 6, wherein the human was diagnosed based on the CASPAR criteria.
10. The use of any one of claims 1 to 9 wherein the human has active arthritis.
11. The use of any one of claims 1 to 10 wherein the human has active psoriatic lesions or a history of psoriatic lesions.
12. The use of any one of claims 1 to 11 wherein the human is an inadequate responder to at least one non-biologic disease-modifying antirheumatic drug (“DMARD”) and/or one approved biologic DMARD.
13. The use of any one of claims 1 to 12 wherein the human is concurrently treated with methotrexate.
14. The use of any one of claims 1-13 in the manufacture of a medicament for treating psoriatic arthritis, wherein (a) 160 mg of antibody is to be administered every four weeks,

(b) 320 mg loading dose of antibody is to be administered followed by a maintenance dose of 160 mg of antibody every four weeks, or (c) 320 mg of antibody is to be administered every four weeks.

15. The use of any one of claims 1 through 14, wherein multiple doses are to be administered over a treatment period of at least 12 weeks.

16. The use of claim 15, wherein multiple doses are to be administered over a treatment period of at least 24 weeks.

17. The use of claim 15, wherein multiple doses are to be administered over a treatment period of at least 48 weeks.

18. The use of claim 15, wherein multiple doses are to be administered over a treatment period of at least 52 weeks.