

# Advances in Monoclonal Antibody Technology: Challenges and Opportunities

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## DESCRIPTION

The ability of monoclonal antibodies to target specific molecules with precision has made them invaluable in modern medicine. As research continues to expand the limits of what these antibodies can achieve, the field faces both significant challenges and potential opportunities. This article examines the advances in monoclonal antibody technology, the challenges that remain and the exciting prospects that await. Monoclonal antibodies are produced by identical immune cells cloned from a single parent cell, making them highly specific to a particular antigen. They were first developed using the hybridoma technique, which involved fusing a B-cell with a myeloma cell, allowing for the continuous production of antibodies. While this method was innovative, early monoclonal antibodies, particularly murine (mouse-derived) antibodies, faced several limitations. These included poor efficacy in humans due to immunogenicity where the human immune system recognized the antibodies as foreign and mounted an immune response against them.

## Development of monoclonal antibodies

To overcome this, the field advanced to the development of chimeric, humanized and ultimately fully human monoclonal antibodies.

**Chimeric antibodies:** These are part human, part mouse antibodies, with mouse variable regions and human constant regions. They were an improvement over murine antibodies but still posed immunogenicity issues.

**Humanized antibodies:** These are mostly human, with only the antigen-binding regions Complementarity-Determining Regions (CDRs) derived from mice.

**Fully human antibodies:** These are entirely human antibodies, produced using transgenic mice or phage display technologies, reducing the risk of immune rejection. With the development of fully human monoclonal antibodies, researchers were able to create therapies that are both highly specific and less likely to trigger adverse immune responses. These advancements laid the foundation for the therapeutic use of monoclonal antibodies,

which now represent one of the fastest-growing segments of the pharmaceutical industry.

## Advances in monoclonal antibody technology

Several technological advancements have propelled monoclonal antibody technology forward, allowing for greater precision, efficacy and versatility in treating diseases. Traditional monoclonal antibodies target a single antigen. However, bispecific monoclonal antibodies are engineered to recognize two different antigens simultaneously. This ability makes them particularly useful in cancer therapy, where they can engage both a tumor cell and an immune cell, bringing them into close proximity to enhance the immune response against the tumor. Blinatumomab, a Bispecific T-Cell Engager (BiTE), is one example used to treat Acute Lymphoblastic Leukemia (ALL). Bispecific antibodies are expanding the therapeutic scope of monoclonal antibodies, offering more dynamic and multifaceted approaches to disease treatment. Antibody-Drug Conjugates (ADCs) combine the targeting specificity of monoclonal antibodies with the potency of cytotoxic drugs. By linking a monoclonal antibody to a toxic agent, ADCs can deliver the drug directly to cancer cells, minimizing the damage to healthy cells. This targeted approach allows for the use of highly potent drugs that would be too toxic if delivered systemically. Brentuximab vedotin and trastuzumab emtansine are examples of ADCs used in cancer therapy. The challenge with ADCs lies in optimizing the balance between the antibody's targeting ability and the potency of the conjugated drug, as well as preventing premature release of the toxic payload in the bloodstream.

## Treating infectious diseases of antibodies

Monoclonal antibodies have shown significant potential in treating infectious diseases, particularly in the COVID-19 pandemic. Antibodies such as casirivimab and imdevimab were developed to neutralize the SARS-CoV-2 virus, reducing the severity of illness in high-risk patients. Beyond COVID-19, monoclonal antibodies are being examined as treatments for other infectious diseases, including HIV, Ebola and Respiratory Syncytial Virus (RSV). These antibodies can neutralize pathogens

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directly or modulate the immune response to enhance pathogen clearance. Most monoclonal antibodies are delivered *via* intravenous infusion, which can be time-consuming and inconvenient for patients. Some modern formulations allow for subcutaneous administration, but the delivery of monoclonal antibodies remains a challenge, especially for chronic conditions requiring frequent dosing. Researchers are working on developing long-acting antibodies and alternative delivery methods, such as inhalable formulations, which could improve patient compliance and access. In some cases, pathogens or cancer cells can develop resistance to monoclonal antibody therapies. This can occur through mutations in the target antigen, which prevent the antibody from binding effectively. The emergence of resistance is a particular concern in infectious diseases, where pathogens can evolve rapidly. Combination therapies, in which multiple antibodies target different epitopes on the same antigen, are being examined as a way to overcome resistance. Even fully human monoclonal antibodies can trigger immune responses in some patients. These Anti-Drug Antibodies (ADAs) can reduce the efficacy of the treatment and

lead to adverse reactions. While humanization of antibodies has reduced the risk of immunogenicity, it remains a concern, particularly in long-term treatments. Advances in protein engineering and immune tolerance strategies are being examined to mitigate this issue. Monoclonal antibody technology has made significant advancements since its inception, providing strong therapeutic tools for a wide range of diseases. Advances in bispecific antibodies, antibody-drug conjugates and immune checkpoint inhibitors have expanded the potential of monoclonal antibodies, while applications in infectious diseases and cancer continue to evolve. However, challenges related to cost, delivery, resistance and immunogenicity remain significant obstacles. Looking ahead, the field of monoclonal antibody technology holds exciting opportunities, from personalized medicine to novel antibody formats and gene therapy applications. Continued innovation in these areas will ensure that monoclonal antibodies remain at the leading position of medical research and treatment, providing restored optimism for patients battling some of the most challenging diseases of this generation.