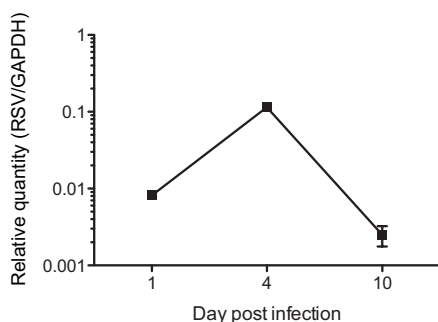


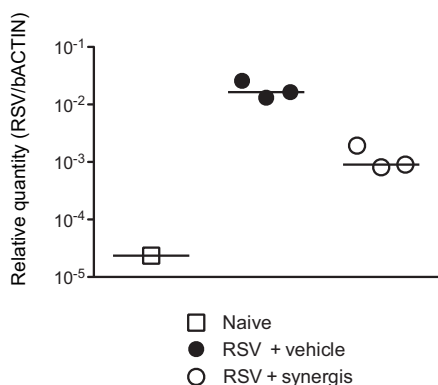
Respiratory Syncytial Virus (RSV):

RSV is a major respiratory pathogen that infects nearly all children by the age of 2 or 3; however, natural infection results in poor immunity and consequently people are not fully protected against subsequent infection. RSV infection can be fatal in the very young or old, and is a major cause of exacerbations of COPD. Severe prior infection with RSV has been linked with an increased susceptibility to the development of asthma and akin to Influenza virus infection, following RSV infection there is an increased susceptibility to bacterial infections. RSV is a unique virus given that the inflammatory response against it consists of both neutrophil and eosinophil recruitment in to the lung; characteristic of Th1 and Th2 responses, respectively. There are currently no vaccines available for RSV and prophylactic treatment with monoclonal antibodies are the primary source of protection for infants and the elderly.

RSV replicates upon infection of mice



Synergis antibody treatment reduces viral load



Experimental readouts:

- Viral load in lung tissue
- Weight loss, fever
- Histology; disease severity score
- RSV-specific antibody production
- Quantitative PCR of chemokine and cytokine levels in tissue
- Number and effector function of inflammatory cell infiltrates

Duration:

4-14 days dependent upon experimental readouts

Service Package I is available alone, or in combination with Service Packages II and III

Our scientific project managers can provide expert advice and guidance for all of your efficacy studies.

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Service Package I

- Administration of test compounds
- Intranasal infection with RSV
- Determination of viral load in lung tissue

Service Package II

- Daily measurement of weight and fever
- Differential cell counts of airway lymphocytes
- Histological analysis of lung tissue

Service Package III

- Measurement of virus specific antibody response
- Cytokine and chemokine analysis
- Lymphocyte effector function analysis