In \underline{T} 966/18, which includes detailed technical reasoning, the board was convinced that the medical use of claim 1 was plausible on the basis of several cited documents illustrating the knowledge of the skilled person, taken together with the relevant disclosure of the patent. It concluded that the body of knowledge evidenced had made the skilled person aware of a link between the reduction of α -synuclein aggregation and the treatment of Lewy body disease. Later published evidence was also taken into account and confirmed this conclusion.

On post-published documents, see also chapter <u>II.C.6.8</u>. and the referral decision in <u>T 116/18</u> (OJ 2022, A76), which, albeit concerned more with inventive step (Art. 56 EPC), also addresses sufficiency of disclosure (Art. 83 EPC) and identifies the following main lines of case law: "ab initio plausibility" (plausibility was ultimately not established in the decisions listed by <u>T 116/18</u>); "ab initio implausibility" (plausibility was ultimately established); and "no plausibility" line of case law. Case pending under **G 2/21**.

 c) Consideration of post-published documents limited: cannot remedy a fundamental insufficiency of disclosure

Post-published evidence may be taken into account, but only to back-up the findings in the application in relation to the use of the compound(s) as a pharmaceutical (T 609/02, T 950/13).

If the description in a patent specification provides no more than a vague indication of a possible medical use for a chemical compound yet to be identified, more detailed evidence cannot be used later to remedy the fundamental insufficiency of disclosure of such subject-matter (T 609/02). Where the therapeutic effect is a functional technical feature of the claim, the application must disclose the suitability of the product to be manufactured for the claimed therapeutic application and evidence filed later cannot be used to remedy a fundamental insufficiency of disclosure (point established in T 609/02, as summarised in T 1045/13).

Referring to <u>T 609/02</u>, the board in <u>T 433/05</u> recalled that where a therapeutic application was claimed in the Swiss-type form, attaining the claimed therapeutic effect was a functional technical feature of the claim. As a consequence, under <u>Art. 83 EPC 1973</u> the application had to disclose the suitability of the product to be manufactured for the claimed therapeutic application (see also <u>T 1685/10</u>). Note, however, that according to <u>G 2/08</u> (OJ 2010, 456), where the subject matter of a claim is rendered novel only by a new therapeutic use of a medicament, such claim may no longer have the format of a so-called Swiss-type claim as instituted by decision <u>G 5/83</u> (OJ 1985, 64). Following <u>T 609/02</u>, the board in <u>T 801/06</u> recalled that a claimed therapeutic effect **may be proven by any kind of data** as long as they clearly and unambiguously reflect the therapeutic effect. Thus, the fact per se that the experiments in the patent were not carried out with a "real" metastasis was not sufficient to deny sufficiency of disclosure.

In <u>T.2571/12</u> (treatment of schizophrenia with glutathione), the board stated that there was no evidence at all either in the patent or in the available prior art for a therapeutic effect of glutathione precursors for any of the claimed disorders, and hence the post-published