THERAFLEX MB-PLASMA PROCEDURE: PLASMA QUALITY AFTER 15 MONTH STORAGE

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Introduction

Background: Although in the last decades thanks to the implementation of several methods like donor selection and testing procedures the risk of virus transmission from plasma has decreased, infection of patients still exists. Additionally new viruses like West Nile Virus enter the transfusion chain. Therefore, the treatment of therapeutic plasma with methylene blue (MB) is a technique used in several European countries for virus inactivation. MacoPharma has developed the proprietary photodynamic Theraflex MB-Plasma bag system including a MB pill, an illumination system (Maocotronic) with visible light, and a final MB filtration step with the Blueflex filter (Williamson et al. Transfusion 2003;43:1322-1329).

Aims: Aim of this study was to show the reduction of MB and photoproducts due to the Blueflex filter and to prove the reproducibility of the filtration efficiency. Additionally the quality of the plasma after 15 month storage was checked.

Materials & Methods

18 plasmas were treated at three different days. At different steps of the Theraflex MB-Plasma procedure the MB and photoproduct content was measured by HPLC, which was described previously (Verpoort et al. 2003; ISBT Istanbul P246). Measurement was done after dissolution of the MB pill, after illumination, and after filtration (Fig. 2).

At each day plasma was pooled and divided into several storage bags (storage temperature <-30 °C). At different time points a palette of plasma factors was measured. 1. global tests (Quick, INR. aPTT, thrombin time)

2. coagulation factors (Fibrinogen, F II, F V, F VII, F VIII:c, F IX, F X, F XI, F XII, FXIII, vWF Ristocetin Co-Factor)

3. Inhibitors (AT III, Protein C, Protein S)

4. Fibrinolysis (Plasmin inhibitor, alpha-1-Antitrypsin, Plasminogen)

5. Complement (CH50, C3a)

6. Activation (TAT, F XIIa, D-Dimer)

Results



Fig. 1: Storage stability of Theraflex MB-Plasma



Fig. 2: Methylene blue and photoproduct reduction due to Bluflex filtration

Illumination of MB-containing plasma with visible light using the Macotronic illumination device resulted in the generation of photoproducts as described previously. Mean reduction of the total phenothiazine content was 94.5%. Every single filtration yielded in a filtration efficiency of minimum 91%. The mean reduction capacity for MB was above 99.9%.

There was no significant change in the plasma factor content after treatment during the whole 15 month storage period. Slight variations are within the error of measurement. The only difference between the plasma parameters resulted from the treatment itself. Here, an increase in the INR and aPTT (14.3 %; 18.2 %), decrease of fibrinogen (-19.3 %), factor V (-25.3 %), factor VIII (-21.8 %), factor IX (-25.6 %), factor X (-23.4 %), and factor XI (-16.8 %) was observed. Despite this variations the values were within the ranges found in non-treated plasma.

Conclusions

The filtration of plasma with the Blueflex filter is a reliable method to reduce the amount of MB and photoproducts substantially. The plasma quality is not changed during the observed storage period ad remains within the physiological variation of non-treated plasma.