

Whole blood pathogen inactivation: preliminary results of a treatment combining S-303 and different glutathione concentrations on red blood cell parameters in treated vs. untreated whole blood

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BACKGROUND Blood transfusion is used to treat several life threatening diseases including acute anemia. Every day in many low resources countries, women are frequently dying during childbirth due to the lack of blood availability in transfusion centers. Moreover, these countries can experience significant problems with the transmission of infectious diseases through the use of blood infected by bacteria, viruses and parasites.

Our project, supported by the Humanitarian Foundation of the Swiss Red Cross, aims at finding a solution to improve the safety of transfusion practice in Africa. It entails the adaptation of Cerus' INTERCEPT Blood System for red blood cells (RBCs) for pathogen inactivation (PI) of whole blood (WB) and is specifically being developed for sub-Saharan African countries where infrastructures and resources are lacking.

AIM The first step of this project was to determine the effects of pathogen inactivation on different RBC parameters in treated whole blood.

MATERIALS AND METHODS WB units were treated with S-303, an alkylating agent used to crosslink nucleic acids and prevent replication of contaminating pathogens, and glutathione (GSH) used to quench non-specific reactions with proteins. The concentrations used for the treatment were 0.2 mM of S-303 and 2, 5, 10 and 20mM of GSH. The blood units were stored at room temperature during the experiment and were tested at different time points after treatment (24h, 48h, 72h and 7 days) for the following parameters: hematocrit, osmotic fragility, ATP, pH, lactate, K+ and the percentage of hemolysis.

- **Hematocrit (HTC)** is the relative percentage of the volume of cells circulating in blood reported to the total volume of blood. It gives an indication of the volume occupied by the RBCs. Hematocrit was obtained using a Sysmex KX-21.
- **Osmotic fragility** was determined by the measure of hemoglobin released from RBCs, when placed in an environment containing serial dilutions of Phosphate Buffered Saline (PBS).
- The percentage of hemolysis was calculated using the mathematical formula:

$$\% \text{ Hemolysis} = \frac{\text{free Hb} \times (100 - \text{HTC})}{\text{Hb Sysmex}}$$

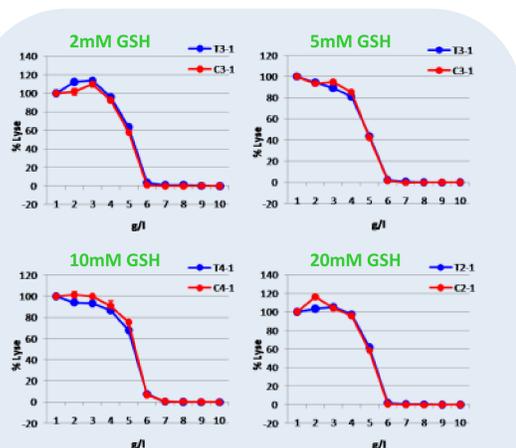


FIGURE 1: OSMOTIC FRAGILITY

- The more RBCs are stressed, the more the curves are left shifted (Blasi et al., Transfusion Medicine, 2014)

- Perfect overlapping of C and T curves
- No effect of treatment on osmotic fragility

RESULTS

2mM GSH						20mM GSH					
		Free Hb (µmol/L)	HCT (%)	HGB (µmol/L)	% hemolysis			Free Hb (µmol/L)	HCT (%)	HGB (µmol/L)	% hemolysis
♂	J1	16.7	34	6696	0.16	J1	29.3	33.6	6572	106	0.3
	J2	23.2	34.5	6696	0.23	J2	23.1	34.4	6572	106	0.23
	J3	23.4	34.5	6696	0.23	J3	14	34.1	6510	105	0.14
♀	J1	15.9	36.1	6758	0.15	J1	18	34.8	6510	105	0.18
	J2	5.2	35.3	7130	0.05	J2	1.2	35.6	7006	113	0.01
	J3	10.5	35.4	6944	0.12	J3	1.8	35.7	7068	114	0.02
♂	J1	10.8	35.3	6944	0.12	J1	2.7	36.4	7006	113	0.02
	J2	12.7	36.6	7006	0.13	J2	6	37.2	7068	114	0.05
	J3	37.1	37.3	7502	0.31	J3	4.9	32.2	6138	99	0.05
♀	J1	24.1	39	7502	0.21	J1	3.5	32.4	6200	100	0.04
	J2	30.8	36.7	7502	0.26	J2	4.6	32.2	6200	100	0.05
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