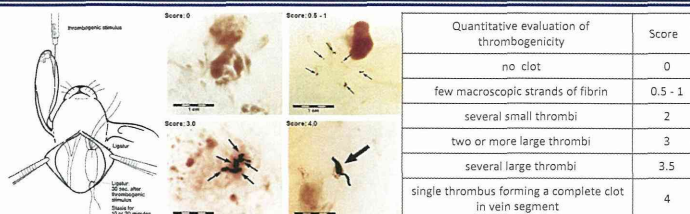


## The *In Vivo* Wessler Test

Baxter



Quantitative evaluation of thrombogenicity	Score
no clot	0
few macroscopic strands of fibrin	0.5 - 1
several small thrombi	2
two or more large thrombi	3
several large thrombi	3.5
single thrombus forming a complete clot in vein segment	4

Product	Wessler Score				Average
	male	male	female	female	
Gammagard Liquid	2	1	2	0.5	1.38
Competitor 1 (tested in 2009)	4	3.5	4	4	3.88

### Conclusions:

- In the Wessler *in vivo* test KIOVIG showed a very low thromboembolic potential
- The *in vivo* test results are consistent with the *in vitro* test results

Bioplasma World Asia Conference

Wolfgang Teschner, Baxter Innovations GmbH, Vienna, Austria

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## Acknowledgements

Baxter

### Experiments:

Ursula Mais-Paul

Brigitte Talir

### In vitro tests:

Johan Deprez

Martina Simon

Alfred Weber

### Wessler test:

Eva-Maria Muchitsch

### Coagulation expertise:

Hans-Peter Schwarz

### Global Pathogen Safety:

Gerhard Pölsler

### Stability:

Dagmar Racz

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Wolfgang Teschner, Baxter Innovations GmbH, Vienna, Austria

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## Pro-coagulant Activity Removal: Conclusions

Baxter

- Baxter's KIOVIG process has an excellent removal capacity for procoagulant activities
  - NAPTT, chromogenic substrates and the *in vivo* Wessler test were already used for the development of KIOVIG
  - Only 1.9% of FXI zymogen / FXIa present in Cohn pool are found in Precipitate G
  - In the PptG intermediate procoagulant activities are already low
  - The downstream chromatographic process removes procoagulant activities to an acceptable low level even if 100 U/L FXIa were spiked into PptG suspension
- Low procoagulant activity in KIOVIG final container were confirmed *in vivo* with the Wessler test and *in vitro* with a broad range of tests established at Baxter
- KIOVIG/Gammagard Liquid was shown to have the lowest thrombotic adverse events in the study published in Transfusion by Daniel G.W. et al.: "Immune globulins and thrombotic adverse events as recorded in a large administrative database in 2008 through 2010"

G.W. Daniel, M. Menis, G. Sridhar, D. Scott, A. E. Wallace, M. V. Ovanesov, B. Golding, S.A. Anderson, J. Epstein, D. Martin, R. Ball, and H. S. Izurieta, (2012) Transfusion <http://onlinelibrary.wiley.com/doi/10.1111/j.1537-2995.2012.03589.x/pdf>

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## Conclusions

Baxter

Baxter has almost 60 years of fractionation experience

Donor, donation and manufacturing related safety measures guarantee the high safety standard of Baxter plasma products

Baxter delivers albumin in glass vials and in unique flexible containers with improved efficiency, safety and ease of administration

Pharmacovigilance data demonstrate the excellent safety of Baxter's albumin

KIOVIG/Gammagard Liquid was used as a reference preparation having the lowest thrombotic adverse events in the study published in Transfusion by Daniel G.W. et al

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Wolfgang Teschner, Baxter Innovations GmbH, Vienna, Austria

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資料 3 : 「Significant Differences of Properties between Model viruses and target viruses in HAV,HEV and B19 during manufacturing processes of plasma derivatives」  
Mikihiro Yunoki

Bioplasma World Asia, Bali

## Significant differences of properties between model viruses and target viruses (wild type) in HAV, HEV and B19 during manufacturing processes of plasma derivatives

Speaker: Mikihiro Yunoki <sup>1,2,3)</sup>  
Co-authors: Katsuro Hagiwara <sup>2)</sup> and Kazuyoshi Ikuta <sup>3)</sup>

<sup>1)</sup> Research and Development Division, Japan Blood Products Organization, Japan.  
<sup>2)</sup> School of Veterinary Medicine, Rakuno Gakuen University, Japan.  
<sup>3)</sup> Department of Virology, Research Institute for Microbial Diseases, Osaka University, Japan

Bioplasma World Asia, Bali

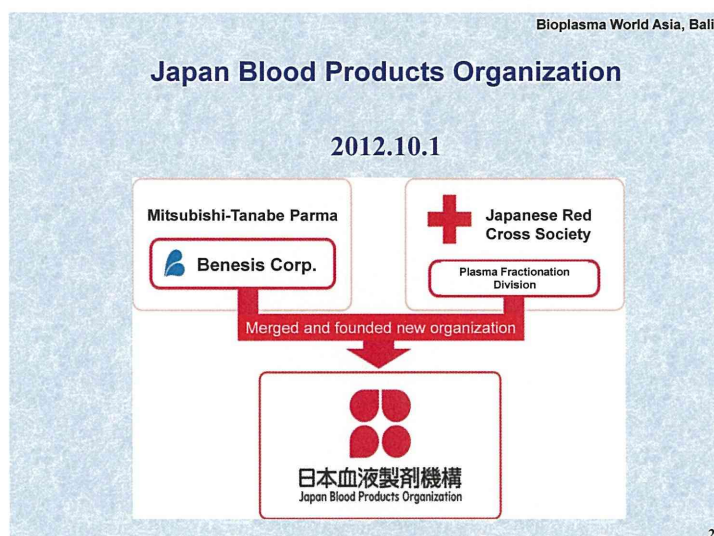
## Guidance for virus inactivation and/or removal

Base guidance (also see others)

- ICH Topic Q5A (R1), 1999 (ICH)
- WHO Technical Report, Series No. 924, 2004 (WHO)
- CPMP/BWP/268/95r1, 1996 (EMA)
- Iyakuhatu1047, 1999 (MHLW Japan)

Guidelines required to use model viruses in accordance to GLP/GMP with notify the differences of virus properties between clinical isolated virus and the model.

[http://www.ich.org/fileadmin/Public\\_Web\\_Site/ICH\\_Products/Guidelines/Quality/Q5A\\_R1/Step4/Q5A\\_R1\\_\\_Guideline.pdf](http://www.ich.org/fileadmin/Public_Web_Site/ICH_Products/Guidelines/Quality/Q5A_R1/Step4/Q5A_R1__Guideline.pdf)  
[http://www.who.int/bloodproducts/publications/WHO\\_TRS\\_924\\_A4.pdf](http://www.who.int/bloodproducts/publications/WHO_TRS_924_A4.pdf)  
[http://www.ema.europa.eu/docs/en\\_GB/document\\_library/Scientific\\_guideline/2009/09/WC500003684.pdf](http://www.ema.europa.eu/docs/en_GB/document_library/Scientific_guideline/2009/09/WC500003684.pdf)  
<http://www.mhlw.go.jp/new-info/kobetu/iyaku/kenketsugo/51.html>



Bioplasma World Asia, Bali

## Purpose of virus clearance study

Evaluate  
the virus inactivation/removal ability of the step

Clarify  
the characteristic features  
the mechanism such as inactivation and/or removal of the step

Confirm  
whether constructed more than two inactivation and/or removal steps during the manufacturing (for enveloped viruses)

Virus clearance study is an evaluation, do not guarantee/validate the virus inactivation and/or removal ability of the clinical virus treat.

Bioplasma World Asia, Bali

## Today's presentation

- Purpose of virus clearance study.
- Relationship of the model viruses and clinical isolated viruses.
- Characteristic comparison of B19 and the model virus.
- Characteristic comparison of HAV and the model virus.
- Characteristic comparison of HEV and the model virus.
- Points to consider in the evaluation of specific viruses inactivation and/or removal using the model viruses.

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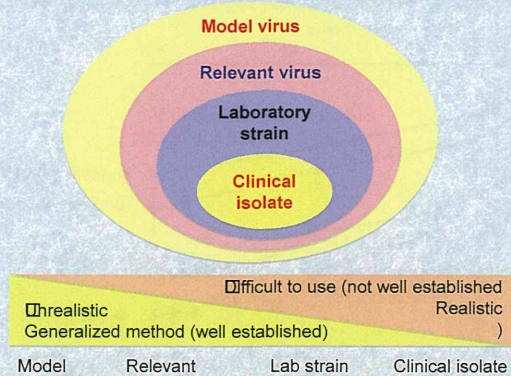
## Model / Relevant virus cases for clearance study

Model / Relevant virus	Model for	Size (nm)	Nucleic acid	Envelope
HIV-1 Human immunodeficiency virus-1	HIV-1/2	100—120	ss-RNA	Yes
BHV Bovine herpes virus type-1	Herpes (HBV)	150	ds-DNA	Yes
BVD Bovine viral diarrhoea virus	HCV (HBV)	40—60	ss-RNA	Yes
EMC Murine encephalomyocarditis virus	HAV	30	ss-RNA	No
CPV Canine parvovirus	Parvovirus B19	20—26	ss-DNA	No

Case of former Benesis Corp



## Relationship of the model, relevant, lab strain and clinical isolated viruses



We should pay attention to the difference properties of these viruses

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## Considering model viruses for B19

	Human parvovirus B19 (B19)	Porcine / Canine Parvo virus (PPV / CPV)
Family	Parvoviridae	Parvoviridae
Genome	ssDNA	ssDNA
Particle size	22-24 nm	21-26 nm
Envelope type	none	none

Virus Taxonomy, Ninth Report of the International Committee on Taxonomy of Viruses  
Clin Microbiol Rev. 2002 July; 15(3): 485-505.

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## Recently topical viruses of threat

Plasma derivatives

Human parvovirus B19 (B19)  
Hepatitis A virus (HAV)  
Hepatitis E virus (HEV)

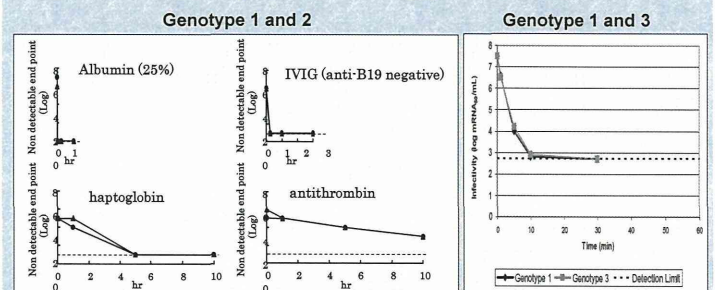
Biologicals derived from cultured cells

Mouse minute virus (MVM)  
Porcine circovirus (PCV)

Small particles and resistant to the virus inactivation and/or removal treatment

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## Comparison of heat sensitivity of B19 genotypes 1, 2, 3 by pasteurization



Viruses in 25% albumin, IVIG, haptoglobin and antithrombin solution and heat treated at 60 ° C for 10 hr

Viruses in 5% albumin solution and heat treated at 56.5 ° C for 60 min. Performed by PEL.

B19 genotype 1, 2 and 3 showed same heat sensitivity

Vox Sang. 2012 Feb;102(2):93-9.  
Transfusion. 2012 Jul;52(7):1490-7

11

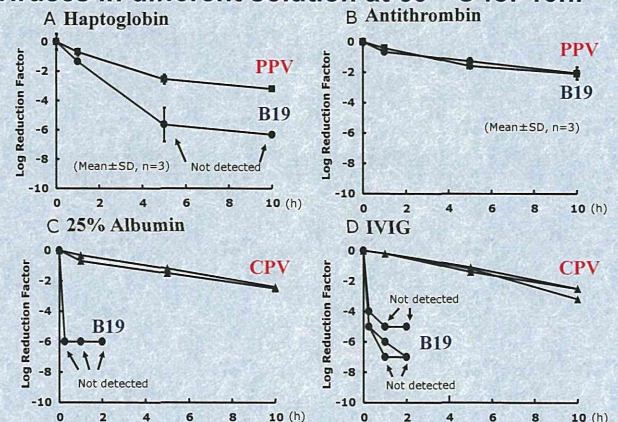
## Characteristic comparison of specific virus and the model viruses

### B19 and CPV/PPV case (Parvoviruses)

B19: Clinical isolates  
PPV/CPV: Established strains (ATCC)

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## Heat inactivation kinetics of B19 and the model viruses in different solution at 60° C for 10hr



A, B: Hattori S et al., VoxSang (2007) 92, 121-124, Benesis Corp.;  
C: Yumaki M et al., Vox Sang (2003) 84, 164-169, Benesis Corp.; D: Yumaki et al., Br. J. Haematol (2004) 128, 401-404, Benesis Corp.

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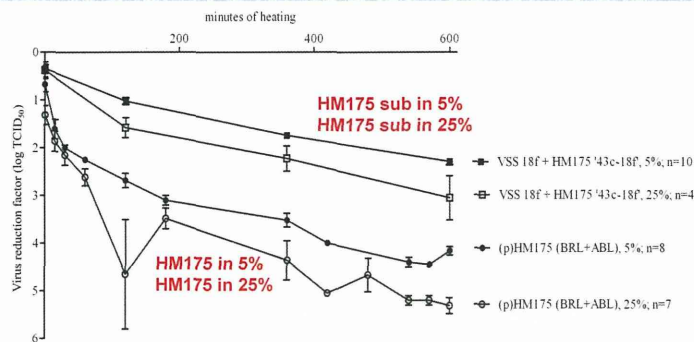


### Summary of this part

- No difference of heat sensitivity with B19 genotype 1, 2 and 3 clinical isolates.
- B19 and the model viruses showed different heat inactivation kinetic patterns in albumin and IVIG solution.
- B19 and the model viruses showed similar heat inactivation kinetic patterns in antithrombin and haptoglobin solution.
- These results indicated that B19 and the model viruses CPV and PPV have different nature of the virus.

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### Different heat kinetics of HAV HM175 and substrain in 5 and 25% albumin at 60° C for 10hr



HM175 and the substrain showed different nature of heat inactivation

Farcet et al., Transfusion. 2012; 52: 181-187 16

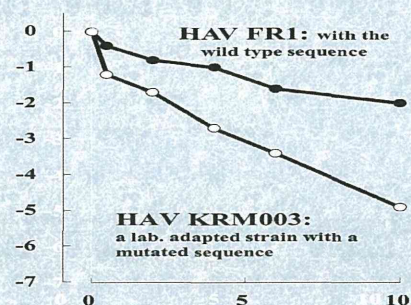
### Characteristic comparison of specific virus and the model viruses

#### HAV and EMC case

HAV: Passaged lab strains  
Wild type lab strain by reverse genetics  
Established strain (ATCC)  
EMC: Established strain (ATCC)

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### Different heat kinetics of passaged HAV and wild type HAV by reverse genetics in 25% albumin at 60° C for 10hr



Wild type of HAV could resist to heat inactivation and the lab strain may show heat sensitive nature in the clearance study.

Yunoki et al., Transfusion. 2013; In press 17

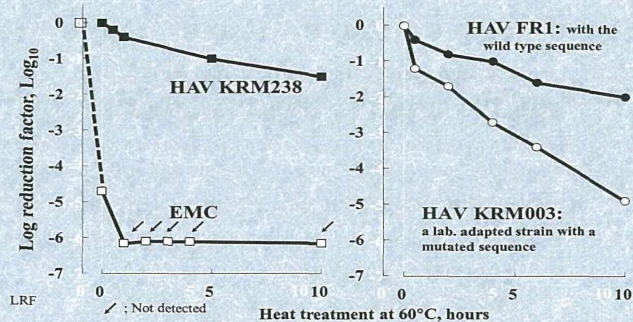
### Considering Model Viruses for HAV

	Hepatitis A virus (HAV)	Mouse Encephalomyocarditis virus (EMC)
Family	Picornaviridae	Picornaviridae
Genome	ssRNA (+)	ssRNA (+)
Particle size	27-32 nm	30 nm
Envelope type	none	none

Virus Taxonomy, Ninth Report of the International Committee on Taxonomy of Viruses  
<http://www.who.int/csr/disease/hepatitis/whocdscsrec2007/en/index2.html#morphology>

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### Different heat kinetics of HAV KRM238 and the model virus in 25% albumin at 60° C for 10hr



HAV KRM238 and the model virus EMC showed different heat sensitivity

Yunoki et al., Transfusion. 2013; In press 18

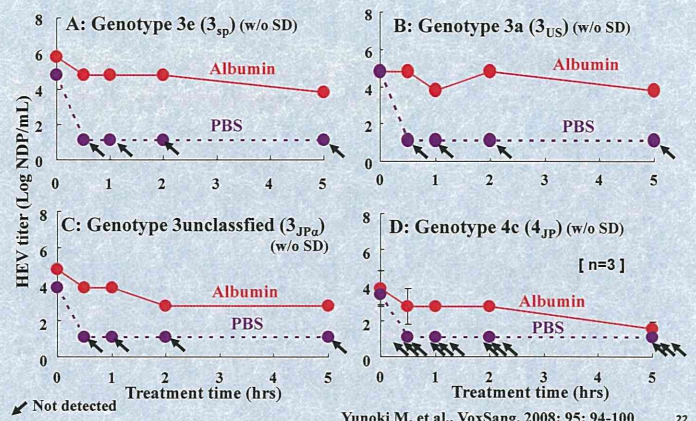


## Summary of this part

- Some HAV strains in albumin showed sensitive nature in heat inactivation than wild type strains.
- KRM238 strain showed similar nature with wild type.
- HAV and the model virus EMC showed different heat inactivation kinetic patterns in albumin.
- These results suggested that not only HAV and the model viruses EMC has different nature of the virus but also some HAV lab strains could have different nature.
- We should select the model or relevant virus of HAV for the heat inactivation study carefully.

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## Inactivation kinetics of four HEV isolates in albumin during 60°C liquid-heating



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## Characteristic comparison of specific virus and the model viruses

### HEV and EMC/PPV case

**HEV:** Clinical isolate (human plasma)  
Lab strain propagated by animal study (swine feces)

**EMC:** Established strain (ATCC)

**PPV:** Established strain (ATCC)

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## HEV removal by virus removal filters

Load material	Planova Filter	HEV in PBS			
		3unclassified (3jpa)	3a (3us)	3e (3sp)	4c (4jp)
Detergent treatment, 0.22µm, 0.1µm filtrate	P-75 (73±2 nm)	(6.2/4.7) 1.5	(8.9/7.5) 1.4	(8.2/6.9) 1.3	(7.6/6.3) 1.3
	P-35 (35±2 nm)	(6.2/4.8) 1.4	(6.9/<3.3) ≥3.6	(6.4/3.8) 2.6	(5.6/4.5) 1.1
	P-20 (19±2 nm)	(6.2/<3.3) ≥2.9	(6.9/<3.3) ≥3.6	(6.4/<3.2) ≥3.2	(5.6/<3.0) ≥2.6
	P-15 (15±2 nm)	(6.2/<3.3) ≥2.9	(6.9/<3.3) ≥3.6	(6.4/<3.2) ≥3.2	(5.6/<3.0) ≥2.6

Condition of filtration  
P-75N: Planova 75: 0.001m<sup>2</sup> module, 50kPa, RT  
P-35N: Planova 35: 1cm long single module, 50kPa, RT  
P-20N: Planova 20: 1cm long single module, 50kPa, RT  
P-15N: Planova 15: 1cm long single module, 50kPa, RT

Upper column: Log genome amounts (Before / Filtrate) of HEV were determined by PCR.  
Lower column: Log reduction factor

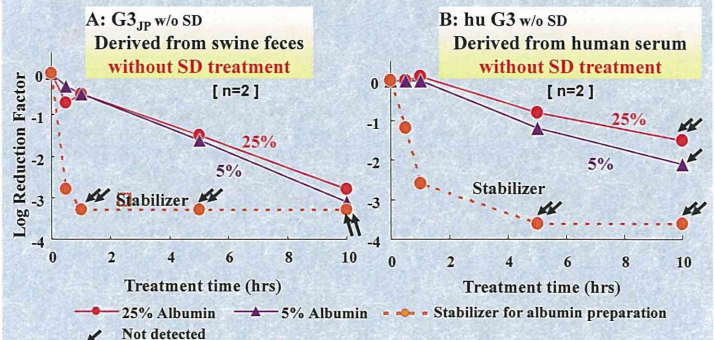
Yunoki M. et al., VoxSang (2008) 95, 94-100, Benesis Corp. 23

## Hepatitis E Virus

Classification	Family; Hepeviridae	Genus; Hepevirus
Pathogenicity	Viral hepatitis	
Natural Route of Human HEV Infection	* Food-borne in developed countries * Water-borne in developing countries * Transfusion and Transplantation	
Reservoirs	Pig, Wild Boar, Deer etc.	
Serotypes/Genotypes	Serotypes: 1 Genotypes: 1 ~ 4 (Genotypes 1, 3 and 4 were found in Japan and major is 3)	
Structural Characterization	Non-enveloped ssRNA virus Spherical viral particle, 27 ~ 34 nm in size	
Resistance to Inactivations	Low pH: Yes      Detergents: Yes Heat: ? (conditions for heat-stability are remained obscure)	

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## Difference of inactivation kinetics between two types of HEV isolates during 60°C liquid-heating

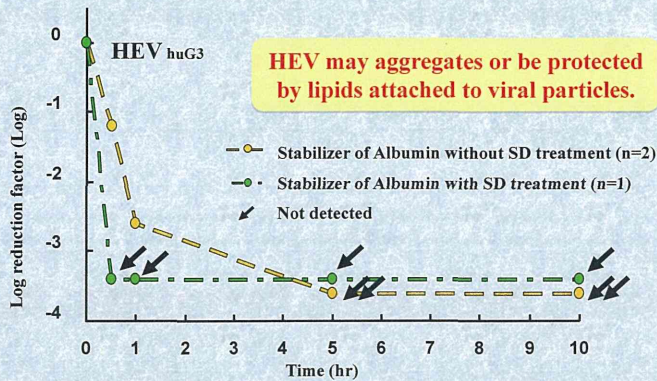


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**HEV in serum tends to more resistant against heat inactivation in first phase period**



### Change of kinetics pattern of HEV derived from human serum after SD treatment



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### HEV properties during heat treatments

- No different patterns were shown using 4 isolates.
- Agent in plasma which is dissociated from HEV particle by detergent could protect HEV during liquid heating.
- Heat sensitivity of HEV derived from human serum and swine feces were slightly different.
- Heat stability of HEV was dependent on concentration of albumin.
- HEV showed similar inactivation patterns during heating to HAV and CPV.

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### Considering Model Viruses for HEV

	Hepatitis E virus (HEV)	Murine Encephalomyocarditis virus (EMC)	Porcine / Canine Parvo virus (PPV / CPV)
Family	Hepeviridae	Picornaviridae	Parvoviridae
Genome	ssRNA (+)	ssRNA (+)	ssDNA
Particle size	27-34 nm	30 nm	21-26 nm
Envelope type	none	none	none

Virus Taxonomy, Ninth Report of the International Committee on Taxonomy of Viruses

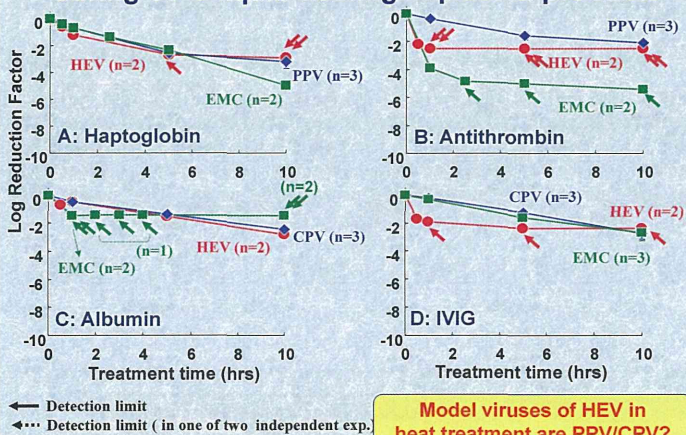
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### Summary of this part

- HEV showed similar inactivation patterns during heating to HAV and PPV.
- The model virus EMC showed more heat sensitive than HEV.
- We should select the model virus of HEV for heat inactivation study carefully.
- Also, should pay attention the derivation and preparation method of HEV

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### Inactivation kinetics of PPV, CPV, EMC and HEV during 60°C liquid-heating in plasma products



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### Summary of virus inactivation and/or removal using small and non-enveloped viruses

Specific viruses:

Clinical isolates: B19

Lab strains: HAV, HEV

Model viruses:

EMC, CPV and PPV

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## Virus reduction during ethanol fractionation of albumin preparation

Fractionation Step	Model Virus		Relevant Virus/Origin			
	CPV	EMC	B19	HAV	HEV	
			Human Plasma	Cul.Sup	Swine Feces	Human Serum*
I	0.0	0.0	0.0	0.0	0.0	0.0
II+III	≥4.3	2.4	2.9	3.3	2.3	0.0
IV	4.1	5.6	2.5	2.2	0.0	1.3

\*: without detergent treatment

**Partitioning property of HEV during ethanol fractionation is not reproducible.**

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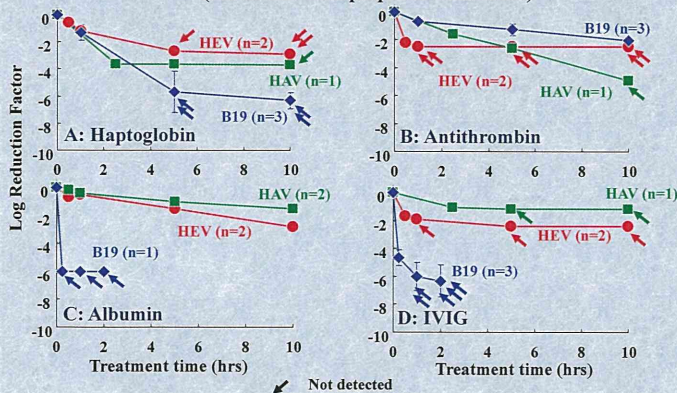
## Summary of this part

- Model viruses, relevant viruses and clinical isolates could show different nature and result of clearance studies.
- The wild type viruses and lab adapted could show different nature and result of clearance studies.
- Preparation methods of spiking viruses could also affect the viruses nature and the result of clearance studies.
- We should pay attention to the selection of model viruses and preparation methods of spiking viruses and subsequently the interpretation of the result.

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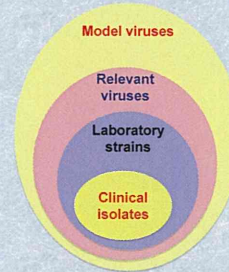
## Inactivation kinetics of B19, HAV and HEV during 60°C liquid-heating in plasma products

(All viruses were prepared without SD)



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## Relationship of Model virus, Relevant virus, Lab strain, Clinical isolate



Target	Clinical isolate	Relevant virus		Model virus
		Lab adapted strain	Established strain	Related virus (established strain)
B19	B19 (Heat sensitive in some case)	None	None	PPV/CPV
HAV	None	HAV (Heat sensitive) (Heat resistant)	HAV (Heat sensitive) (Heat resistant)	EMC for virus filter PPV/CPV for inactivation
HEV	HEV	HEV (Property is different from HEV in plasma)	None	EMC for virus filter PPV/CPV for inactivation

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## Virus removal in Albumin and Fibrinogen preparations by virus removal filtrations

Product	Filter	Model virus		Relevant Virus (Origin)		
		CPV	EMC	B19 (Human plasma)	HAV (Culture sup)	HEV (Swine feces)
Albumin	P-15 (15±2 nm)	2.5	≥4.7	5.3	≥3.9	≥3.5
Fibrinogen	P-35 (35±2 nm)	0.0	2.4	0.0	0.0	3.2
	P-20 (19±2 nm)	2.5	≥6.7	1.9	2.2	≥3.9

- Virus amount of CPV and EMC were measured by infectivity assay whereas B19, HAV and HEV were measured by PCR.
- The results were shown as LRF, mean of two experiments.

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## Research Collaborators

### JBPO

Sakai K., Tsujikawa M., Tanaka H., Urayama T., Hattori S., Ideno S., Adan-Kubo J., Ohkubo Y., Yada K., Nishida A., Kashiwara J., Fukunaga U., Miyamoto H., Yamamoto S., Nishigaki H., Takahashi K., Furuki R., Ueda C., Yoshikawa M., Yamamoto I., Tanaka Y., Satake Y., Masuda M., Konoshima Y., Minagi T.

### Rakuno Gakuen Univ.

Kanai Y., Kato-Mori Y., Kawami S., Iwabu Y., Miyasho T., Daijoji T., Miyasaka S., Uyama S., Nishiyama S.

### Osaka Univ.

Yamate M., Sapsutthipas S., Yamashita A., Ibrahim MS., Yasunaga T.

### Other research organizations

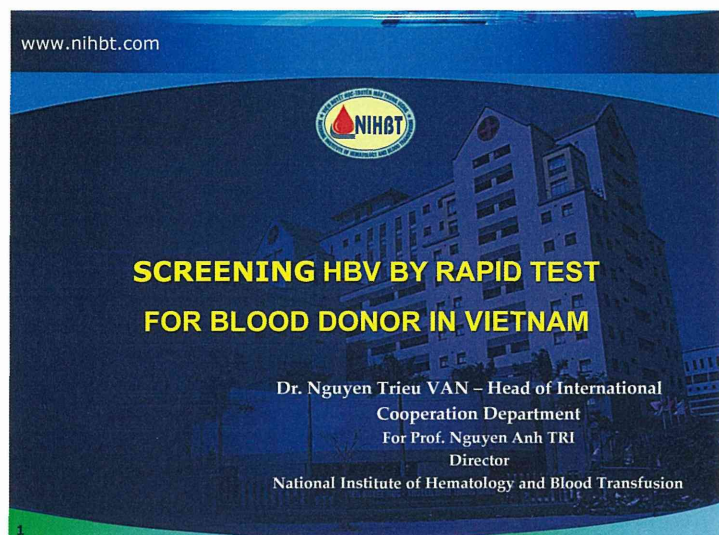
Yamaguchi T., Yasue H., Sato K., Totsuka A.

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資料 4 : 「Screening HBV by Rapid Test for Blood Donor in Vietnam」

Dr.Nguyen trieu VAN



## I. SITUATION

### HBV prevalence in the community and on primary blood donors:

- WHO: Vietnam is rated as country with high HBV prevalence rate. Average rate of HBsAg in Vietnam about 15%-20% in 1992.

#### Movement in blood donation through years

**Paid blood donors**

**Voluntary blood donors**

#### Trend of increase in number of primary blood donors

Relatively high HBsAg rate on voluntary blood donor  
(10 – 20% and over depended on area)

4/21



## VIETNAM

A country located in ASIA, region with high rate of HBV:  
**A massive risk to safe blood transfusion**

2/21

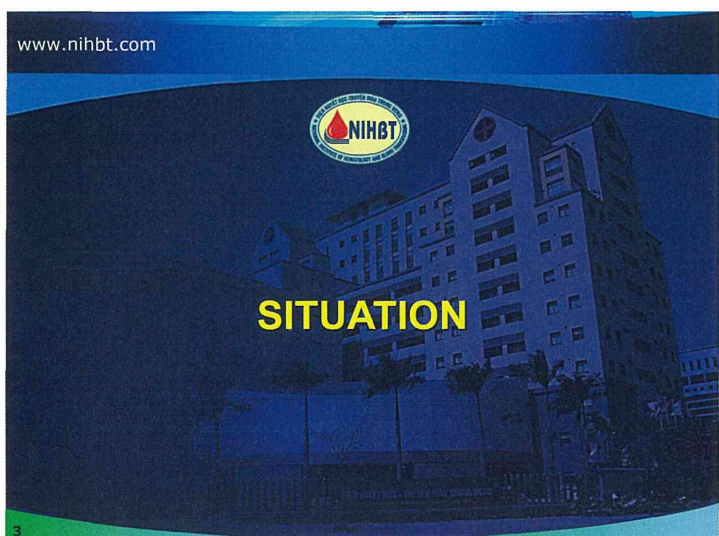


## I. SITUATION

### The results of changes from paid donors to voluntary donors (1994):

Year	1993	2003	2012
Paid donors	95%	59%	9%
Voluntary blood donors	5%	41%	91%

5/21



## I. SITUATION

### History of techniques applied in HBsAg screening in Vietnam:

- From 1973: Agarose gel electrophoresis + Immune electrophoresis to detect Australia antigen.
- From 1987: Began to use ELISA for HBsAg screening.
- From 1998: Spread ELISA for HBsAg screening.
- 2009: Began to applied ECL at some main blood centers.
- Currently: ELISA + ECL at main centers; rapid test at some small blood collection units in remote, frontier and island area.

6/21





## NUMBER THROUGH YEARS HBV SCREENING ON VARIOUS TYPES OF BLOOD DONORS

7



### NUMBER THROUGH YEARS - HBV SCREENING ON VARIOUS TYPES OF BLOOD DONORS: Period 2004 – 2008

Type of donor	HBsAg rate(+) on paid donors	HBsAg rate (+) on voluntary blood donors without recruitment screening	HBsAg rate (+) on voluntary blood donors with recruitment screening
Technique			
ELISA	< 5%	13-16%	< 3%

10/21



### NUMBER THROUGH YEARS - HBV SCREENING ON VARIOUS TYPES OF BLOOD DONORS: Before 1995

Type of donor	HBsAg rate(+) on paid donors
Technique	
Agarose gel electrophoresis and Immune electrophoresis	4.14%
ELISA	8-10%

8/21



### NUMBER THROUGH YEARS - HBV SCREENING ON VARIOUS TYPES OF BLOOD DONORS: After 2008

Type of donor	HBsAg rate(+) on paid donors	HBsAg rate (+) on voluntary blood donors without recruitment screening	HBsAg rate (+) on voluntary blood donors with recruitment screening
Technique			
ELISA & CL (Chemiluminescence)	< 1%	10-15%	< 1%

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### NUMBER THROUGH YEARS - HBV SCREENING ON VARIOUS TYPES OF BLOOD DONORS: Period 1995 – 2004

Type of donor	HBsAg rate(+) on paid donors	HBsAg rate (+) on voluntary blood donors
Technique		
ELISA	6-9%	13-16%

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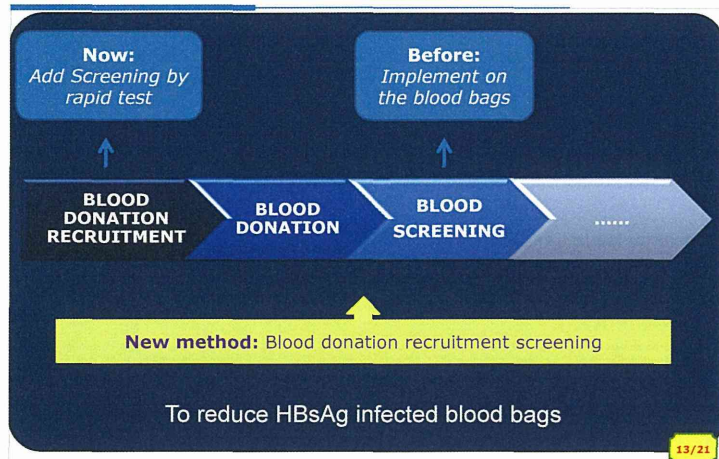
## LESSON LEARNT

12





## BLOOD DONATION RECRUITMENT SCREENING HBsAg BY RAPID TEST



13/21



## THE BENEFIT OF BLOOD DONATION RECRUITMENT SCREENING HBsAg BY RAPID TEST

- Protect health, inform on infection risk and consult to people bring HBV virus and their families.
- Save expenses; by using rapid test may increase testing cost but reduce the main cost on throwing away blood which would reduce the total expense. It is evaluated that by using rapid test could reduce 5 – 8% expense for each blood unit.
- Ensure safety for community, environment as reduce throwing away a large quantity of swab with high risk.
- Ensure humanism of blood donation.
- Contribute on reducing HBV infection risk in the community.

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## BLOOD DONATION RECRUITMENT SCREENING HBsAg BY RAPID TEST

### Timeline

- 2003 – 2004** • Pilot study
- 2004 – 2007** • Implement at NIHBT
- 2007** • Issue national guideline including recommendation on blood donation recruitment screening
- 2013** • New version of National Guidelines: force to apply blood donation recruitment screening for the whole country

14/21

www.nihbt.com



## CONCLUSION

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## BLOOD DONATION RECRUITMENT SCREENING HBsAg BY RAPID TEST

### Achievement

	2004	2005	2006	2007	2008	2009	2010	2011	2012
<b>At NIHBT</b>	1.6	0.9	0.85	0.8	0.8	0.9	0.93	0.8	0.84
<b>Country</b>	5.2	4.7	4.5	3.6	3.2	3.5	3.21	3.29	2.5

Reduce rate of HBV infected blood units and thrown-away blood units

15/21



Application of this method for years prove:

- Reduce on rate of HBV infection on thrown away blood units.
- Save expense on blood collection
- Ensure health for blood donors

18/21