Improvements of blood safety using NAT testing for donor screening

13th Střešovice Blood Transfusion day 2019-11-21

Ralf Himmelreich, GFE Blut





Agenda

- Blood donor screening: trends, changes, numbers
- World wide numbers
- NAT Testing
- Emerging viruses (HEV & WNV)
- Outlook



Blood donor screening: trends, changes, numbers



Blood donation in different countries



Sources: Global Status Report on Blood Safety and Availability 2016, WHO; World Bank; The Economist *At purchasing-power parity

Economist.com

 Donation rate is significantly higher in high developed countries

Red cell concentrates per 1000 inhabitants



 Also the need and consumption of blood products is higher in these countries
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Blood donation – covering the demand

- The Demographic change leads to a yearly loss of approx 100.000 donors due to age exclusion (73y)
- In Germany only 3% of the inhabitants are regularly blood donors







Application areas for blood donations





World wide numbers of Testing





Total 89.4 million whole blood donations





125 countries; 7'800+ laboratories

Please note: the numbers are related to whole blood; apheresis samples not included!



Screening in Germany

- 4 Blood-Screening-Services and the plasma-industry are testing ~80% of the donations (BSD West, NSTOB, BRK, BaWüHe; CSL Plasma Labor, Octapharma, Biotest, Heama)
- Remaining part is done by small laboratories





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NAT Testing was triggered by scandals

DER SPIEGEL 41/1993



The "AIDS Scandal"

The authors mention that they reported already 10 years ago on the risk of transmitting HIV by blood products and that there had been more than 200 critical articles on that issue and nothing happened.

Next scandal:

Detection of HCV RNA in Clotting Factor Concentrates <u>Blood.</u> 1993 Apr 1;81(7):1898-902. Hepatitis C viral RNA in clotting factor concentrates and the development of hepatitis in recipients. <u>Makris M</u>, et al.



Introduction of NAT Testing World Wide



Vox Sang. 2012; 102(1): 82-90

• Roche cobas 6800/8800







• Grifols Procleix – Tigris system





• Grifols Procleix – Panther System





• Altona Diagnostics – AltoStar





Siemens – VERSANT kPCR Molecular System





• GFE Blut - autoX System





GFE Blut: latest development

• GFE PoET System





System requirements and specifications

- Medium to high throughput laboratories
- Fully automated workflow
- Pooling options
- Efficient extraction protocol
- State of the art RT qPCR Assay
- Intuitive multilingual software with LIMS compatibility
- Highest safety standards
- Latest liquid handling and robotics technology
- Cost efficient, versatile and extendable





Emerging Viruses

HEV and WNV



Hepatitis E Virus - world wide distribution

- Source for infection mainly contaminated drinking water and food
- Yearly 6 Mio symptomatic patients in South-East Asia

Hepatitis E Infection



Endemic and epidemic in Southeast and Central Asia plus Japan, Middle East, North and West Africa, Mexico, Brazil



Testing strategy - international

- There is no uniform testing strategy
- Non-defined detection limits
 - As sensitiv as possible (Grifols ID-NAT ~2 IU/ml, Roche 6 IU/ml until 2.000 IU/ml)
- Infectious dose is not exactly known (10³ – 10⁴ IU/ml; Dreier et al.)



HEV Guideline in Germany

- As of January 2020 all Blood Donation Samples have to be screened for HEV
- 96er Pool testing is applicable
- Test sensitivity at least 2.000 IU/ml
- Transitional period for frozen products
- Transfusion risk shall be decreased by 80%



West Nile Virus WNV

Significant increase in European distribution



Increase of the WNV distribution

Climate changes trigger the distribution



Implications for WNV Testing in Germany

- Considerations for routine WNV testing is still ongoing. Paul-Ehrlich Institute has recently launched a phased plan approach
 - Assay has to cover linage 1 #2 with at least 250 IU/ml (single donor)
- In summer the holiday season there is a resource limitation in Blood donation centres
- Important issues are:
 - Costs, Sensitivity, Pool-Size (96 vs 8), organization and scheduling of extra testing work ...
- Common practice (according to ECD 2014/110/EU) so far:
 - Blood donation are set on hold for 28 days if donor has visited a WNV vulnerable zone. Exception: Donation is negative in an NAT single test



More Implications for WNV Testing

- Differentiation of Usutu Virus?
 - WNV and USUV are genetically closely related
 - Many NAT Tests cannot differentiate between Usutu and WNV infection
 - For patient cases it has been shown by sequencing that WNV infections turned out to be Usutu

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Emerg Infect Dis. 2019 Jun; 25(6): 1050–1057. doi: <u>10.3201/eid2506.181755</u> PMCID: PMC6537739 PMID: 31107223

West Nile and Usutu Virus Infections and Challenges to Blood Safety in the European Union

Dragoslav Domanović,⁵² Celine M. Gossner, Ryanne Lieshout-Krikke, Wolfgang Mayr, Klara Baroti-Toth, Alina Mirella Dobrota, Maria Antonia Escoval, Olaf Henseler, Christof Jungbauer, Giancarlo Liumbruno, Salvador Oyonarte, Constantina Politis, Imad Sandid, Miljana Stojić Vidović, Johanna J. Young, Inês Ushiro-Lumb, and Norbert Nowotny

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Associated Data

Supplementary Materials

Abstract

Go to: 🕑

West Nile virus (WNV) and Usutu virus (USUV) circulate in several European Union (EU) countries. The risk of transfusion-transmitted West Nile virus (TT-WNV) has been recognized, and preventive blood safety measures have been implemented. We summarized the applied interventions in the EU countries and assessed the safety of the blood supply by compiling data on WNV positivity among blood donors and on reported TT-WNV cases. The paucity of reported TT-WNV infections and the screening results suggest that blood safety interventions are effective. However, limited circulation of WNV in the EU and presumed underrecognition or underreporting of TT-WNV cases contribute to the present situation. Because of cross-reactivity between genetically related flaviviruses in the automated nucleic acid test systems, USUV-positive blood donations are found during routine WNV screening. The clinical relevance of USUV infection in humans and the risk of USUV to blood safety are unknown.



Emerging / Re-Emerging Viruses

- Cytomegalovirus
- Zika Virus
- Chikungunya Virus
- Dengue Virus



Outlook



Future challenges: Blood Donor NAT Screening

• Pathogens

- Emerging and re-emerging viruses
- New pathogen variants (e.h. HIV-1 Subtype L)
- Bacteria
- Parasites (Malaria, Chagas, Babesiosis, etc.)
- Product requirements
 - High through-put walk away automation and reagent management
 - High sensitivity and short time to result
 - Low costs, work load, complexity
- Implementation of new technologies
 - Fast, cost efficient and sensitive



Thank you very much for your attention

