

# 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.

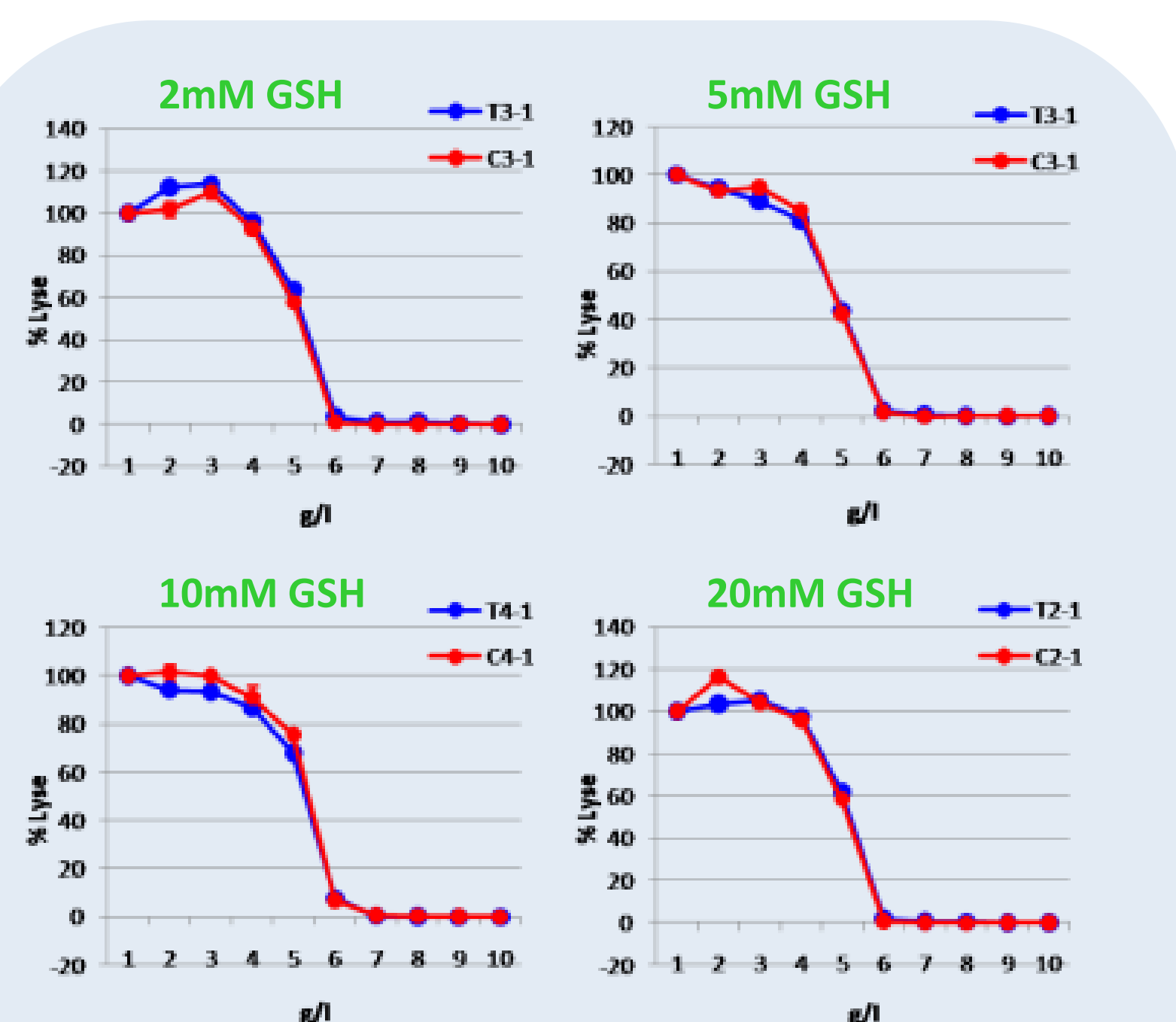
Our project, supported by the Humanitarian Foundation of the Swiss Red Cross, aims at finding a solution to improve the safety of transfusion practice in Africa. It entails the adaptation of Cerus' INTERCEPT Blood System for red blood cells (RBCs) for pathogen inactivation (PI) of whole blood (WB) and 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
	J3	35.9	37.9	7502	0.3	J3	4.6	32.2	6200	100	0.05
♂	J1	37.1	37.3	7502	0.31	J1	4.2	34.6	6634	107	0.04
	J2	37.1	37.3	7502	0.31	J2	3.6	34.6	6634	107	0.04
	J3	31.2	38.8	7874	0.24	J3	5.2	34.7	6696	108	0.05
♀	J1	19.2	39.8	7874	0.15	J1	5.1	35	6634	107	0.05
	J2	19.4	37.7	7564	0.16	J2	12.2	31.9	5704	92	0.15
	J3	20	37.9	7564	0.16	J3	7.2	33.6	6448	104	0.07
♂	J1	17.6	37.7	7502	0.15	J1	8	33.6	6510	105	0.08
	J2	15.7	39.3	7564	0.13	J2	8	34.7	6448	104	0.08
	J3	13.2	40.1	7874	0.1	J3	4.8	35.9	7006	113	0.04
♀	J1	6.5	39.4	7998	0.05	J1	2.5	35.7	7006	113	0.02
	J2	6.8	39.4	7936	0.05	J2	4	35.9	7006	113	0.04
	J3	8.5	39.6	7936	0.07	J3	4.8	35.9	7006	113	0.04
♂	J1	13.2	40.1	7874	0.1	J1	5.7	37.3	7006	113	0.05
	J2					J2					
	J3					J3					

**FIGURE 2: HEMATOCIT AND % OF HEMOLYSIS**

• A rise in free hemoglobin indicates hemolysis.

In blood RBC units, hemolysis has to be < 0.8% → our results are in the accepted range, according to the EDQM blood transfusion guides.

• HTC % and total hemoglobin concentration are stable with time, and slightly higher in control samples than in treated samples.

	2mM GSH	5mM GSH	10mM GSH	20mM GSH	
♂	J1	4.7	4.1	3.8	3.2
	J2	5.3	6.6	6.1	6.1
	J3	6.7	8.7	7.6	7.6
♀	J1	3.9	4.4	4.2	4.2
	J2	3	6.4	5.8	5.6
	J3	6.3	8.3	7.3	7
♂	J1	3.9	4.5	4.4	3.7
	J2	5.7	6	6.1	5
	J3	7.4	7.8	7.8	6.2
♀	J1	4.2	4.2	4.2	3.5
	J2	5.8	5.8	5.7	4.6
	J3	7.6	7.4	7.3	5.6
♂	J1	3	4.9	3.9	3.6
	J2	7	6.8	5.5	5.2
	J3	8.7	8.6	6.8	6.5
♀	J1	4.6	5	3.8	3.7
	J2	6.6	7	5.2	4.7
	J3	8.9	8.7	6.9	5.8

**FIGURE 3: K<sup>+</sup>**

- Stable and homogenous effect of time on K<sup>+</sup> concentration: it increases in T and C samples with time.
- Consistent with literature

	2mM GSH	5mM GSH	10mM GSH	20mM GSH	
♂	J1	4.7	4.1	3.8	3.2
	J2	4.1	3.7	3.6	2.6
	J3	3.7	3	3.1	2.5
♀	J1	4.3	4.6	4	3.6
	J2	4.7	3.9	3.7	2.9
	J3	4	3.5	3.5	2.6
♂	J1	4.2	4.2	4.5	4.3
	J2	3.6	3.5	3.9	4.2
	J3	3	3.2	3.3	3
♀	J1	4.1	4.7	4.3	4.5
	J2	3.5	3.9	4.2	3.9
	J3	3.8	3.5	3.9	3.4
♂	J1	4	3.8	3.8	4.3
	J2	3.9	3.9	2.7	3.4
	J3	3.3	3.1	2.6	3.4
♀	J1	4.3	4	3.6	4.3
	J2	3.8	3.4	3.5	4.3
	J3	3.4	3.3	2.9	3.2

**FIGURE 4: ATP**

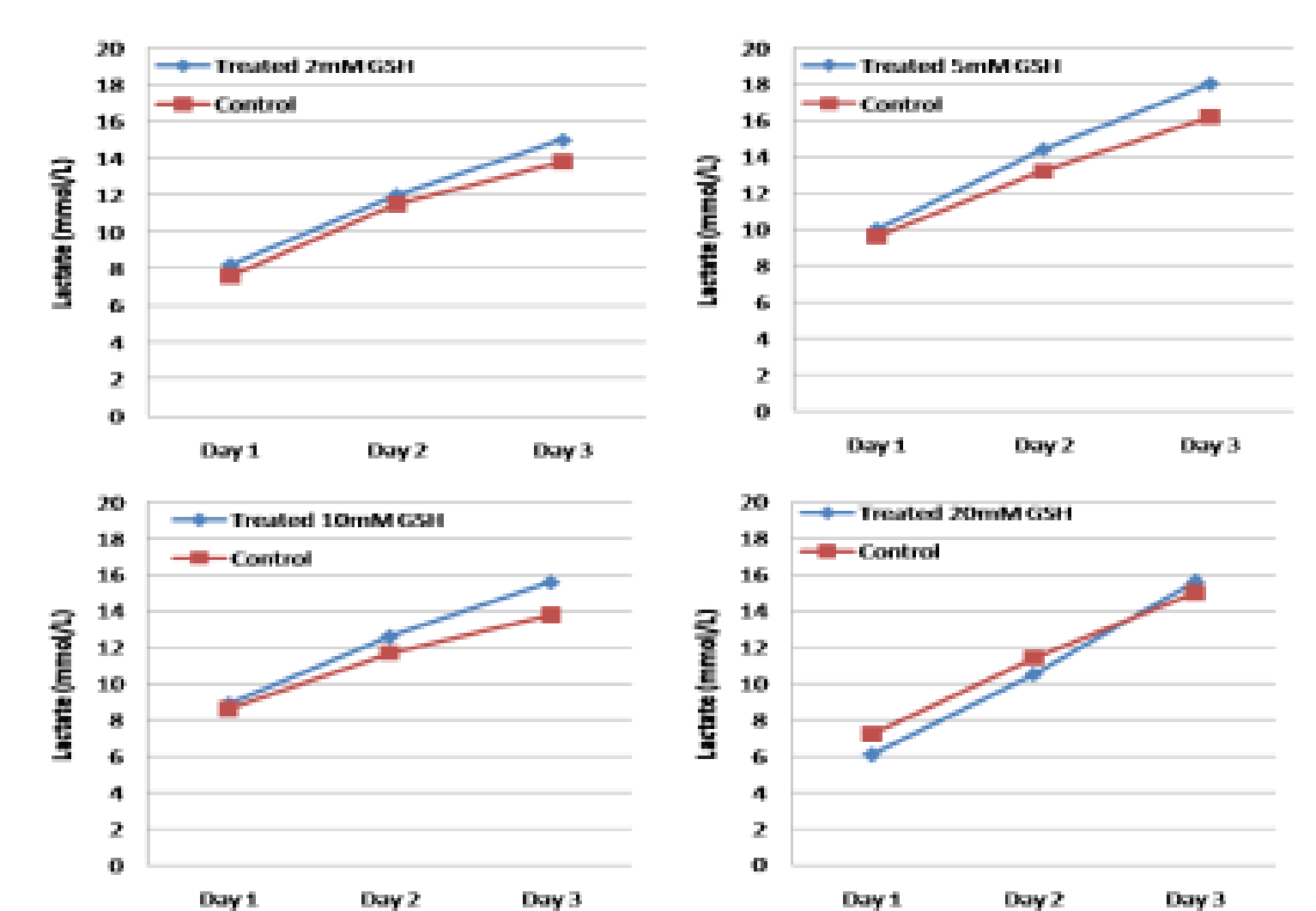
- Effect of time is observed with ATP decreasing over time
- All conditions result in >2.5µmol/g Hb consistent with ATP level observed by Cerus in RBCs stored at 4°C during 42 days

	2mM GSH	5mM GSH	10mM GSH	20mM GSH	
♂	J1	6.764	6.759	6.727	6.723
	J2	6.661	6.651	6.62	6.594
	J3	6.577	6.575	6.528	6.503
♀	J1	6.831	6.824	6.835	6.823
	J2	6.724	6.726	6.741	6.716
	J3	6.648	6.664	6.675	6.653
♂	J1	6.788	6.723	6.733	6.749
	J2	6.663	6.61	6.615	6.636
	J3	6.572	6.524	6.521	6.552
♀	J1	6.856	6.778	6.86	6.858
	J2	6.743	6.675	6.728	6.76
	J3	6.675	6.602	6.675	6.697
♂	J1	6.779	6.756	6.722	6.733
	J2	6.665	6.647	6.625	6.605
	J3	6.579	6.576	6.533	6.522
♀	J1	6.826	6.804	6.812	6.865
	J2	6.715	6.71	6.723	6.732
	J3	6.649	6.652	6.664	6.651

**FIGURE 5: pH**

• The pH decreased over time likely due to the increase of lactate with time.

• pH slightly lower in T compared to C; may be due to acidic S-303 molecule



**FIGURE 6: LACTATE**

- Lactate production increases with time.
- Lactate levels in T samples are slightly higher than in C samples

**CONCLUSIONS** Although the sample size was small, interestingly the experiments showed excellent acceptable results in treated and control WB units for most of the tested parameters, indicating that RBC viability and function are preserved after treatment. These preliminary results for S-303-treated whole blood are very encouraging, suggesting that pathogen inactivated whole blood could represent a safe and innovative blood product for transfusion. The next step will consist of in-depth studies of the treatment's effects, in particular on coagulation factors and platelet functions.

