New Solutions to Enhance Testing Efficiency and Blood Safety

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Disclaimers

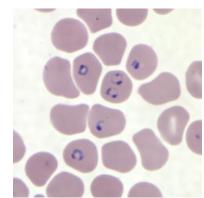
- Procleix Plasmodium assay and Procleix ArboPlex assay are under development and performance characteristics have not been determined; both assays are not available for commercial sale
- Procleix is a trademark of Grifols Worldwide Operations Limited
- Panther is a trademark of Hologic, Inc.

Topics

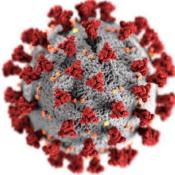
- Grifols NAT Research & Development update
- New Assays under development for use on the Procleix Panther system:
 - Procleix Plasmodium assay: new assay for detection of 5 species of *Plasmodium*
 - Procleix ArboPlex assay: new multiplex assay for detection of West Nile, Usutu, chikungunya, dengue and Zika viruses



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Scott Bauer. (USDA ARS)



Grifols NAT Research & Development Update

Procleix UltrioPlex E assay

- Multiplex assay for detection of 5 viruses: HIV-1, HIV-2, HCV, HBV, and HEV
- Launched in Japan for nation-wide screening: August 2020
- CE mark: January 2021

Procleix Babesia assay

- Detection of 4 Babesia species: B. microti, B. divergens, B. duncani, and B. venatorum
- US FDA approval: January 2019; CE mark: January 2021

Procleix Panther featuring ART (Automation Ready Technology)

- Significant hardware & software improvements to decrease "hands-on" time and total labor hours
- Simplified user management through connection of multiple instruments to track system and control from central dashboard
- CE mark: October 2019; US FDA approval: April 2020

Procleix SARS-CoV-2 assay

- Same technology as blood screening assays (magnetic-based target capture, TMA, and chemiluminescent detection) with modifications for respiratory specimen testing
- Available commercially in selected EU markets; organ-tissue donor screening in US (under US FDA Emergency Use Authorization)
- Research studies at Vitalant Research Institute & American Red Cross
- CE mark: May 2020









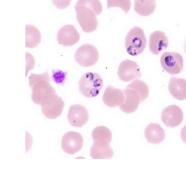
Procleix Plasmodium Assay (Under Development)



Procleix Plasmodium Assay on Panther System

NAT under development for detection of *Plasmodium* ribosomal RNA

- Requires whole blood sample lysis step performed manually or on automated pipettor (Procleix Xpress System)
 - Whole blood added to Parasite Transport Medium (PTM) to disrupt red blood cells, parasites, and stabilize *Plasmodium* 18s rRNA
 - Sample preparation identical to US FDA licensed and CE-marked Procleix Babesia assay
 - Testing of individual or pooled lysates (16-lysate samples)
- Assay designed to detect five Plasmodium species with equivalent sensitivity:
 - P. falciparum, P. knowlesi, P. malariae, P. ovale, P. vivax
- RUO version of assay currently used in research study to evaluate donors deferred for malaria risk







Research Study: Malaria Risk in Deferred Donors

Two Phases using RUO version of Procleix Plasmodium assay

Phase 1 Preliminary Clinical Specificity

- 10,000 20,000 unique, unlinked US donations
- Testing at American Red Cross (ARC, Gaithersburg, MD)
- Initially reactive results:
 - Re-tested in duplicate using the same lysate
 - New lysate tested in triplicate
 - Further confirmatory testing with alternative NAT, antigen, and antibody detection
- Confirmed positive samples to be evaluated in lysate pools of 8 and 16

Phase 2 Screening Deferred Donors

- 5,000 deferred donors collected in US and Canada
- Testing at American Red Cross (ARC, Gaithersburg, MD USA)
- 3 individual lysates each tested in singlet to increase sensitivity
 - Estimated to allow 97% probability of detecting ~1 parasite/mL, based on a 95% limit of detection of ~3 parasites/mL
- Initially reactive results: re-tested same as Phase 1
- Confirmatory testing: same as Phase 1
- Confirmed positive samples to be evaluated in lysate pools of 8 and 16



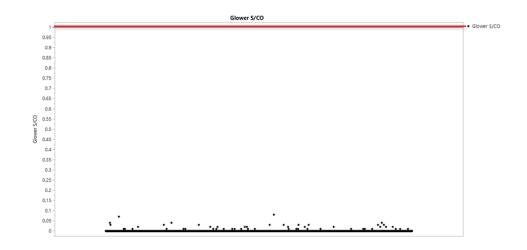
Preliminary Clinical Specificity of Procleix Plasmodium Assay

Phase 1 Results

10,751 fresh whole blood donations collected by ARC: June 21, 2019 to January 16, 2020

# Specimens Tested	# Initial Reactive	# Nonreactive	# Confirmed Positive	% Specificity (95% CI)
10,751	0	10,751	0	100 (99.966 –100)

#: number; CI: Confidence Interval



100% specificity observed in normal donors collected in the US



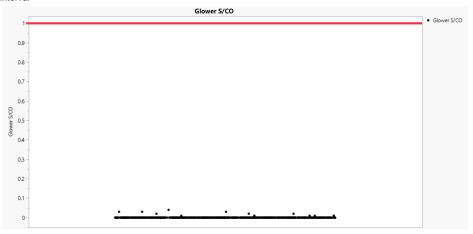
Plasmodium RNA in US Donors Deferred for Malaria Risk

Phase 2 (interim results)

- 315 deferred US donors tested with Procleix Plasmodium RUO Assay (3 individual lysates tested)
 - ~15% born in the US / ~85% born outside of the US (India ~33%, Brazil ~16%, Mexico ~8%, Philippines and China ~4%, Columbia ~3%)
 - ~80% never been in Africa / ~20% lived or traveled to Africa

# Donations Tested	# Initial Reactive	# Nonreactive	# Confirmed Positive
315	0	945	0

#: number; CI: Confidence Interval



No reactive donors were identified among deferred donors tested thus far



Procleix Plasmodium Assay

Preliminary analytical sensitivity (RNA copies/mL)

Limit of Detection (LoD) by probit analysis using *in vitro* synthesized transcripts for 5 Plasmodium species in copies/mL

<i>In vitro</i> transcript, N=24	50% LoD in Copies/mL (95% Fiducial Limits)	95% LoD in Copies/mL (95% Fiducial Limits)
P. falciparum	1.9 (1.0 - 2.7)	7.0 (4.6 – 17.4)
P. knowlesi	4.9 (3.5 - 6.4)	12.5 (9.2 – 21.0)
P. malariae	2.3 (1.2 – 3.3)	11.6 (7.3 – 29.7)
P. ovale	6.7 (4.9 – 8.3)	12.3 (10.1 – 18.5)
P. vivax	4.5 (3.0 – 6.2)	16.3 (11.1 – 32.5)

- Similar LoD values for 5 species tested
- 95% LoD ranged from 7.0 to 16.3 copies/mL (similar to other Procleix assays)



Procleix Plasmodium Assay

Preliminary analytical sensitivity (parasitized RBCs/mL)

- Cultured P. falciparum infected erythrocytes and naturally infected specimens for 4 species
- Infected erythrocytes quantified by Fluorescence-Activated Cell Sorting (FACS)
- Naturally infected human whole blood quantified with research real-time Plasmodium TMA assay

Sample type, N=16	50% LoD in pRBC/mL (95% Fiducial Limits)	95% LoD in pRBC/mL (95% Fiducial Limits)
P. falciparum-infected erythrocytes	0.6 (0.3 - 0.9)	2.6 (1.7 – 6.3)
P. falciparum*	0.4 (0.0 – 0.7)	3.2 (1.9 – 11.1)
P. malariae*	0.7 (0.3 – 1.1)	3.3 (2.2 – 6.9)
P. ovale*	1.5 (1.0 – 2.0)	5.0 (3.6 – 9.3)
P. vivax*	0.9 (0.5 – 1.2)	2.8 (2.0 – 5.8)

Cultured P. falciparum infected erythrocytes obtained from New York Blood Center; * Naturally Infected Human Whole Blood obtained from Wadsworth Center, NYSDOH

- Similar LoD values for 4 species tested
- 95% LoD ranged from 2.6 to 5.0 pRBC/mL (similar to Procleix Babesia Assay)



Procleix Plasmodium Assay

Preliminary analytical sensitivity (IU/mL): 1st WHO International Standard (04-176)

- Freeze-dried whole blood preparation collected from a patient by exchange transfusion
- Resuspended in 0.5 mL of nuclease-free water for 20 min; concentration 1 x 10⁹ IU/mL
- Half-log dilutions from 10,000 IU/mL to 3.16 IU/mL

1 st WHO IS (04-176), IU/mL	% Reactivity, n = 24
10,000	100
3,160	100
1,000	100
316	100
100	100
31.6	100
10	79
3.16	33
0	0

Note: the Plasmodium 1st WHO IS was developed for nucleic acid tests targeting **DNA**. Procleix Plasmodium assay targets **RNA**; handling of the material is critical

1 st WHO IS (04-176)	50% LoD in IU/mL (95% Fiducial Limits)	95% LoD in IU/mL (95% Fiducial Limits)
P. falciparum	5.0 (2.7 – 6.9)	16.6 (11.2 – 44.3)



Procleix ArboPlex Assay (Under Development)



Summary of Design Goals for the ArboPlex Assay

Assay under development for detecting 5 arboviruses

- Detect 5 viruses and internal control (IC) in one reaction:
 - Dengue viruses (DENV): types 1-4
 - Chikungunya virus (CHIKV): West African, East/Central/South African, and Asian genotypes
 - Zika virus (ZIKV): African and Asian lineages
 - West Nile virus (WNV): lineages 1 and 2 and Usutu virus (USUV)
- Use existing technology: magnetic-based target capture, TMA, and chemiluminescent detection
 - Compatible with existing Panther instruments (or Panther ART) at current testing sites;
 no new hardware or major system SW changes needed
- No increase in staffing needs—no increase in turn-around time
- Detection of WNV/USUV from initial reactive result (no discrimination)
- Maintain or improve performance compared to the Procleix Dengue, Zika and WNV assays















Preliminary analytical sensitivity: WNV

- Lineage 1: virus in processed plasma (defibrinated, delipidated citrate sodium plasma)
- Lineage 2: in vitro synthesized transcript

WNV	ArboPlex Assay		Procleix WNV Assay	
Lineage 1 TCID ₅₀ /mL	# Reactive / # Tested	% Reactivity	# Reactive / # Tested	% Reactivity
0.692	20/20	100%	20/20	100%
0.347	20/20	100%	20/20	100%
0.115	19/20	95%	20/20	100%
0.035	13/20	65%	14/20	70%
0.011	5/20	25%	10/20	50%
0	0/20	0%	0/20	0%

MANINA	ArboPle	ex Assay	Procleix WNV Assay	
WNV Lineage 2 Copies/mL**	# Reactive / # Tested	% Reactivity	# Reactive / # Tested	% Reactivity
60	20/20	100%	20/20	100%
30	20/20	100%	20/20	100%
10	19/20	95%	16/20	80%
3	12/20	60%	5/20	25%
1	1/20	5%	2/20	10%
0	0/20	0%	0/20	0%

^{**} RNA in vitro transcript (IVT)

Access	Lineage	Detection Probabilities, TCID ₅₀ /mL or Copies/ml	
Assay	(strain)	50% (95% Fiducial Limit)	95% (95% Fiducial Limit)
ArboPlex	Lineage 1 (NY2001-6263)	0.025 (0.013-0.037)	0.110 (0.069-0.269)
Procleix WNV Assay		0.014 (0.004-0.022)	0.079 (0.047-0.347)
ArboPlex	Lineage 2	3.13 (2.03 – 4.28)	8.86 (6.30 - 15.86)
Procleix WNV Assay	(Hungary 2004)	5.27 (3.49 – 7.35)	16.23 (10.94 – 35.15)



Preliminary Analytical Sensitivity: WNV lineages 1 and 2 and Usutu virus

Lineage	TCID /ml or o/ml .	% Reactive	
(Strain)	TCID ₅₀ /mL or c/mL	ArboPlex Assay	Procleix WNV assay
WNV L1	0.347 TCID ₅₀ /mL	100%	100%
(NY2001-6263)	0.115 TCID ₅₀ /mL	90%	100%
WNV L1*	30 c/mL	90%	100%
(NY99)	10 c/mL	90%	90%
WNV L2*	30 c/mL	90%	100%
(2014/Hungary)	10 c/mL	40%	10%
WNV L2*	30 c/mL	90%	50%
(Italy/Montova/40.1)	10 c/mL	80%	10%
WNV L2	0.036 TCID ₅₀ /mL	100%	100%
(1986)	0.012 TCID ₅₀ /mL	80%	100%
WNV L2	0.479 TCID ₅₀ /mL	100%	100%
(B-956 Uganda)	0.162 TCID ₅₀ /mL	100%	80%
USUV Europe 3*	100 c/mL	100%	
(1477)	30 c/mL	90%	NA
USUV African 3*	100 c/mL	100%	NA
(491)	30 c/mL	70%	

^{*} RNA in vitro transcript (IVT); NA = Not applicable due to USUV panel levels being below the limit of detection with Procleix WNV assay



Preliminary analytical sensitivity: WHO International Standard ZIKV (11468/16)

ZIKV	ArboPle	x Assay	Procleix Zika V	
PEI Code 11468/16, IU/mL*	# Reactive / # Tested	% Reactivity	# Reactive / # Tested	% Reactivity
30	20/20	100%	NT	NT
10	20/20	100%	20/20	100%
3	19/20	95%	20/20	100%
1	14/20	70%	16/20	80%
0.3	4/20	20%	8/20	40%
0	0/20	0%	0/20	0%

^{*}Diluted in processed plasma: defibrinated, delipidated citrate sodium plasma; NT = Not tested

	Detection Probabilities, IU/mL		
Assay	50% (95% Fiducial Limit)	95% (95% Fiducial Limit)	
ArboPlex	0.70 (0.38 – 1.01)	2.71 (1.80 – 5.96)	
Procleix Zika Virus Assay	0.42 (0.17 – 0.63)	1.69 (1.09 – 5.39)	
Procleix Zika Virus Assay Package Insert*	0.64 (0.54 - 0.76)	2.90 (2.22 – 4.18)	

^{*} tested in negative plasma



Preliminary analytical sensitivity: Dengue virus types 1 & 4

DENV-1 and DENV-4 in vitro synthesized transcripts tested

	ArboPlex Assay		Procleix Dengue Virus Assay	
DENV-1 Copies/mL	# Reactive / # Tested	% Reactivity	# Reactive / # Tested	% Reactivity
100	20/20	100%	20/20	100%
30	20/20	100%	20/20	100%
10	16/20	80%	15/20	75%
3	9/20	45%	9/20	45%
1	7/20	35%	3/20	15%
0	0/20	0%	0/20	0%

	ArboPlex Assay		Procleix Dengue Virus Assay	
DENV-4 Copies/mL	# Reactive / # Tested	% Reactivity	# Reactive / # Tested	% Reactivity
100	20/20	100%	20/20	100%
30	19/20	95%	19/20	95%
10	17/20	85%	10/20	50%
3	8/20	40%	6/20	30%
1	4/20	20%	0/20	0%
0	0/20	0%	0/20	0%

Annay	DENV	Detection Probabilities, Copies/mL		
Assay	Туре	50% (95% Fiducial Limit)	95% (95% Fiducial Limit)	
ArboPlex	DENV-1	2.80 (1.28 – 4.46)	20.28 (11.69 – 62.84)	
Procleix Dengue Virus Assay	DENV-1	4.16 (2.41 – 6.11)	19.12 (12.06 – 45.83)	
ArboPlex	DENI/ 4	3.81 (2.00 – 5.88)	23.91 (14.54 – 57.73)	
Procleix Dengue Virus Assay	DENV-4	8.66 (5.65 – 12.16)	30.95 (20.76 – 62.01)	



Preliminary Analytical Sensitivity: Dengue virus types 1-4 (in vitro synthesized transcripts)

DENV Type		% Reactive, n = 10		
(Strain)	Copy/mL	ArboPlex Assay	Procleix Dengue Assay	
	100	100%	100%	
Type 1 (Hawaii)	30	100%	90%	
(,	10	90%	90%	
	100	100%	100%	
Type 2 (New Guinea C)	30	100%	100%	
(risir Samsa s)	10	70%	70%	
	100	100%	100%	
Type 3 (80-2)	30	100%	100%	
(30 2)	10	90%	80%	
Type 4 (H241)	100	100%	100%	
	30	90%	100%	
	10	80%	80%	



Preliminary Analytical Sensitivity: WHO International Standard Chikungunya Virus (11785/16)

CHIKV PEI Code 11785/16, IU/mL*	ArboPlex Assay		Real-Time Triplex Research Assay (RUO)	
	# Reactive / # Tested	% Reactivity	# Reactive / # Tested	% Reactivity
30	20/20	100%	20/20	100%
10	19/20	95%	18/20	90%
3	15/20	75%	9/20	45%
1	6/20	30%	5/20	25%
0.3	4/20	20%	0/20	0%
0	0/20	0%	0/20	0%

^{*}Prepared in processed plasma (defibrinated, delipidated citrate sodium plasma)

Anna	Detection Probabilities, IU/mL		
Assay	50% (95% Fiducial Limit)	95% (95% Fiducial Limit)	
ArboPlex Assay	1.55 (0.86 – 2.37)	9.27 (5.60 – 22.83)	
Real-Time Triplex Research Assay (RUO)	3.28 (2.13 – 4.66)	12.32 (8.13 – 25.29)	



Preliminary Analytical Sensitivity: CHIKV East/Central/South African, West African, Indian Ocean and Asian lineages

CHIKV lineage* (Strain)	Copies/mL	% Reactive, n =10
	100	100%
East/Central/South African (S27)	30	100%
(321)	10	90%
	100	100%
West African (SH2830)	30	100%
(3112333)	10	60%
	100	100%
Indian Ocean (BNI-CHIKV 899)	30	100%
(Biti Grint's 655)	10	100%
	100	100%
Asian (99659)	30	100%
(33033)	10	80%

^{*}in vitro synthesized transcripts



Summary

- Grifols continues to develop multiplex assays to consolidate testing into a single reaction
 - Procleix UltrioPlex E assay (HIV-1, HIV-2, HCV, HBV, and HEV)
 - Procleix ArboPlex assay (WNV, USUV, DENV, ZIKV, and CHIKV)
- Panther ART will allow advances in automation.
 - Increase in efficiency possible by decreasing hands-on time and centralized control of multiple instruments
- Procleix Plasmodium assay
 - Demonstrated high specificity and sensitivity (both in RNA copies/mL and parasitized red cells)
 - Sensitive detection of ribosomal RNA could change current testing and deferral strategies (possible elimination of antigen or antibody detection assays)
- Procleix ArboPlex assay
 - Preliminary results using a wide range of genetic variants showed similar or improved analytical sensitivity compared to current monoplex assays
 - Multiplex testing will help address the unpredictable nature of arboviral outbreaks



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