

Session 9

Antibody Content In Plasma: Bridging The Present And The Future

1- Marion Lanteri:

Creative Testing Solutions
USA

Role of Hyperimmune IVIg/IgG, Convalescent Plasma, and New Technologies in Future Pandemics

2- David Sullivan:

Johns Hopkins
USA

Lessons from COVID-19 Convalescent Plasma for Future Emerging Infectious Diseases

3- Sheila Keating:

Grifols Diagnostics
USA

Next Generation of Antibody Therapeutics for Treating Infectious Diseases

Role of Hyperimmune IVIg/IgG, Convalescent Plasma, and New Technologies in Future Pandemics

Lessons learned from COVID-19 – *Are we ready for the next pandemic?*

Marion C. Lanteri, PhD,
Vice President, Scientific Affairs
Creative Testing Solutions, USA

32nd IPFA/PEI International Workshop on Surveillance and Screening of Blood-borne Pathogens

Emerging Respiratory Disease: Hantavirus (*Andes*)

Cruise Ship Runs Aground With 206 Passengers and Crew Onboard



Outbreak News: Ebola Virus (*Bundibugyo*)





Lesson #1

No Vaccine, No Drug, No Diagnostic Test

Antibodies work!!!

Sources of Antibodies?

- Plasma-derived:

Plasma from healthy donors



Hyperimmune IVIg

➤ **IgG concentration varies depending on health status, past and recent infections, vaccines**

Optimized plasma collection from recently infected or vaccinated donors



Enriching in specific IgG

Plasma from convalescent donors

Plasma from vaccinated donors



Hyperimmune IgG

Hyperimmune IVIg
enriched in specific IgG

Sources of Antibodies?

- Lab derived:

Monoclonal Antibodies
Polyclonal Antibodies
Recombinant Antibodies



Hyperimmune IVIg
enriched in specific IgG

Libraries of antibody producing cells
Proactively produce antibodies
Stockpile

Enriching in specific IgG



Lesson #2

When EID Emerge, Time is of the Essence

Timeline of availability

- Plasma-derived:

Plasma from convalescent donors

Hyperimmune IgG

Hyperimmune IVIg
enriched in specific IgG



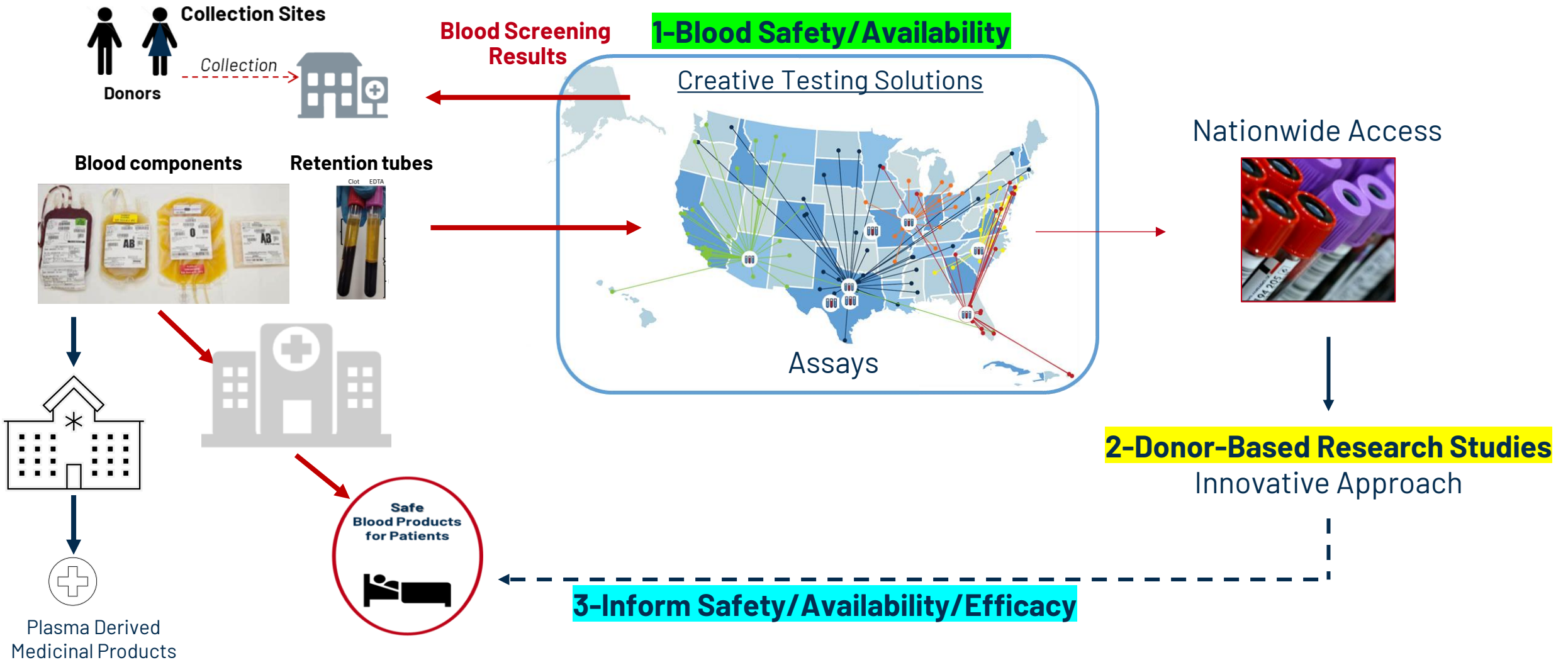
**Readily available if
you can identify
convalescent
donors**

Manufacturing



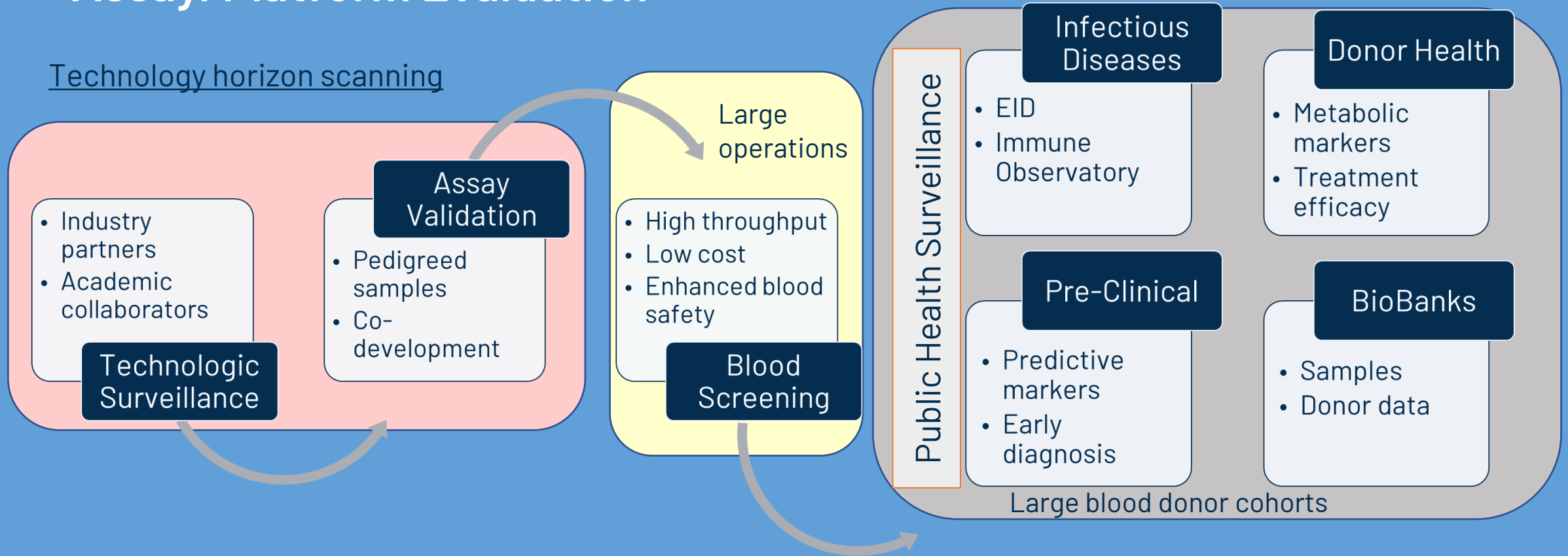
Blood and Plasma Screening at Creative Testing Solutions

A unique infrastructure for blood safety and research



Assay/Platform Evaluation

Technology horizon scanning



- ✓ **Regulatory Approvals**
- ✓ **Blood /Plasma Safety, Availability, Efficacy**
- ✓ **Rapid Response to EID – Public Health Surveillance to Inform Policies**

Screening at Creative Testing Solutions

Blood Screening

Marker	Test	Vendor	System
Classic Agents	HIV/HCV/HBV NAT	Grifols	Panther
	Anti-HIV-1/2 Combo	Abbott	Alinity s
	Anti-HCV	Abbott	Alinity s
	Anti-HBc	Abbott	Alinity s
	HBsAg	Abbott	Alinity s
	Anti-HTLV-I/II	Abbott	Alinity s
	CMV	Fujirebio	PK7400
	Syphilis	New Market Bio.	PK7400
	Syphilis RPR	Arlington	ASI
	Vector-Borne Agents	WNV NAT	Grifols
<i>Babesia species</i> NAT		Grifols	Panther
Anti- <i>T. cruzi</i>		Abbott	Alinity s
Blood Typing	ABO/Rh	Diagast	PK7400
	HLA Class I and II	Immucor GTI	Gemini
	RBC Antibody Screen	Immucor	Neo Iris
	Antibody Identification	QuidelOrtho	Vision
Donor Health	Triglyceride	Beckman Coulter	AU680
	A1C	Abbott	Alinity c
	Ferritin	Beckman Coulter	AU680

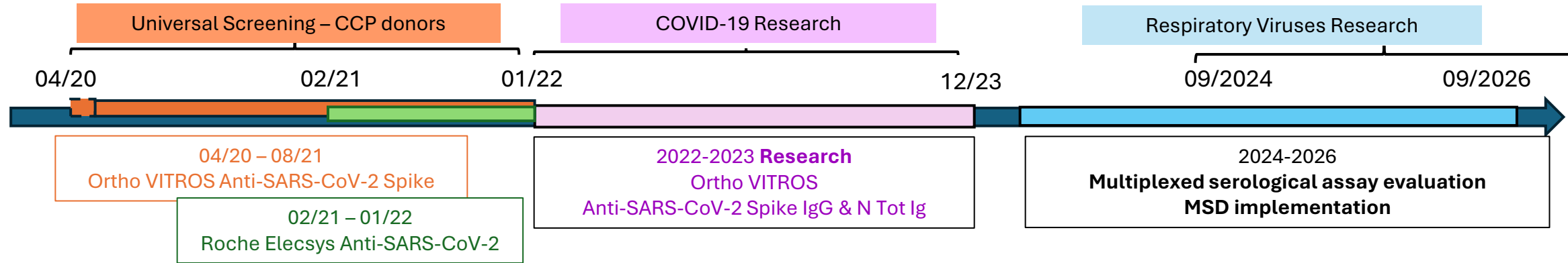
Plasma Screening

Marker	Test	Vendor	System
Classic Agents	HIV/HCV/HBV NAT	Grifols	Panther
	Anti-HIV-1/2 Combo	Abbott	Alinity s
	Anti-HCV	Abbott	Alinity s
	HBsAg	Abbott	Alinity s
	Syphilis RPR	Arlington	ASI
	HAV/B19 NAT	Grifols	Panther
	HAV/B19 NAT (recovered)	Roche	c6800
	Donor Health	Serum Protein	Sebia
ALT		Abbott	Alinity c
Lp(a)		Abbott	Alinity c

Rapid implementation of SARS-CoV-2 serological assays :

- To support the identification of CCP donors
- To enable epidemiology studies to monitor infections
- Blood donors are ideal for public health surveillance

Assays are needed to maintain blood/blood product availability



CTS Operations:

- Anti-S screening to identify CCP donors
- Anti-N screening to identify infected CCP donors
- CCP demand decreased
- Testing was discontinued



Enabled CCP availability

CTS R&D:

- Maintained SARS-CoV-2 serological assays
- Donor-based research
- Expanded approach to other respiratory viruses
- For public health surveillance with CDC



→ Rapid response to the next EID



Lesson #3

Rapid Responses to EID Require Laboratory Infrastructure Assays, Samples, & Research Capacity

Responding to the SARS-CoV-2 evolving pandemic... Extending the approach to other respiratory viruses

NBDS Cross Sectional Donor Serosurveillance

Q2 2020-Q4 2021

~152,000 monthly donations, 17 BCOs

Track infections
Vaccinations
Hybrid Immunity

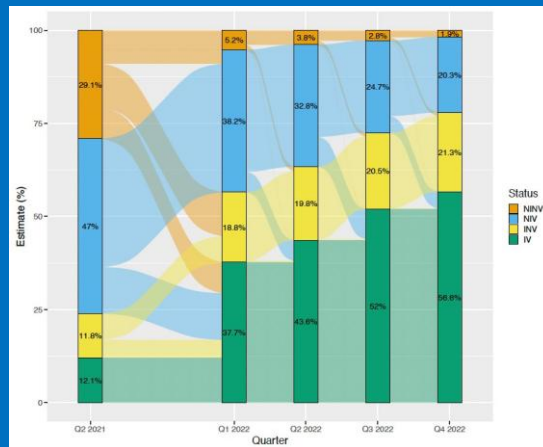


NBDC Longitudinal Donor Cohort Program

Q2 2021-Q4 2022

~142,000 routine donors

Vx breakthrough and reinfections,
Vx effectiveness, correlates of
protection, impact of VoC, surveys

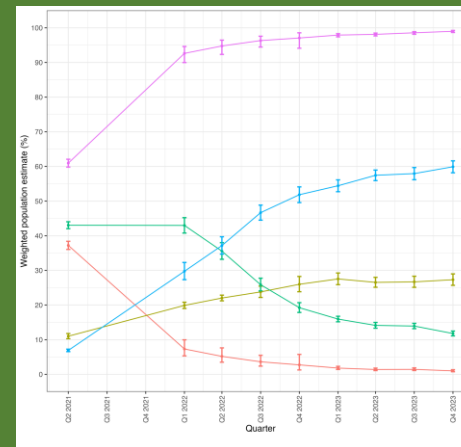


2023 Repeat Donor Cohort Program

Q1 2023-Q4 2023

~46,000 informative donors

Self-funded ongoing sample and
survey data acquisition, real time
quarterly testing

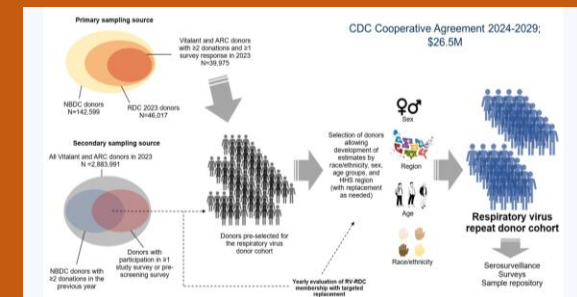


Respiratory Virus Repeat Donor Cohort Program

Q3 2024-Q2 2029

~30,000 donors

~10,000 donations real-time tested
quarterly for 10 RV antigens
Capacity to add emerging RVs



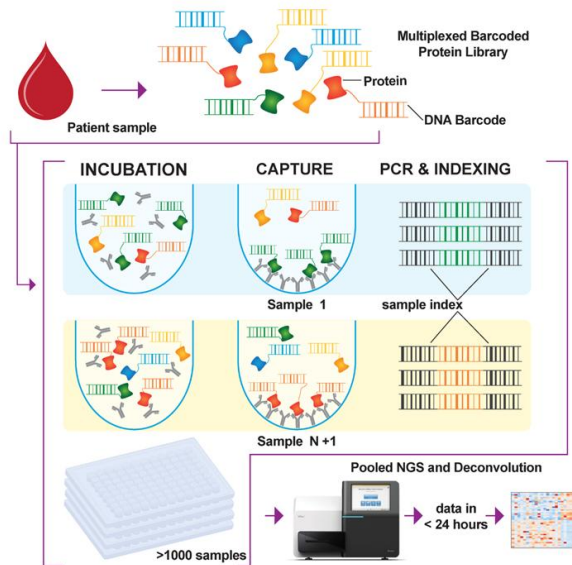
SARS-CoV-2 variants

+RSV, hMPV, Flu, hPIV

Evaluation of Multiplexed Serological Assays

Performance and rapid repurposing for response to EID

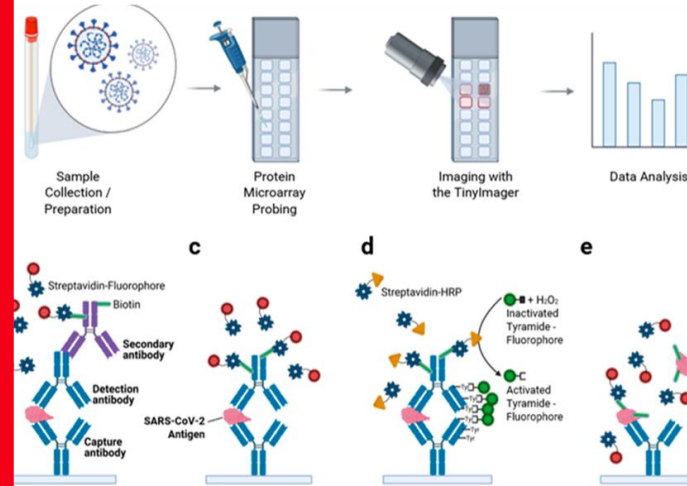
Solution-Based



- Multiplex In-solution Protein Array (MISPA) - **Gila Diagnostics**
- Molecular indexing of protein self assembling (MIPSA) - **Infinity Bio**

200 antigens
2,000 samples per run
3-6 logs of dynamic range

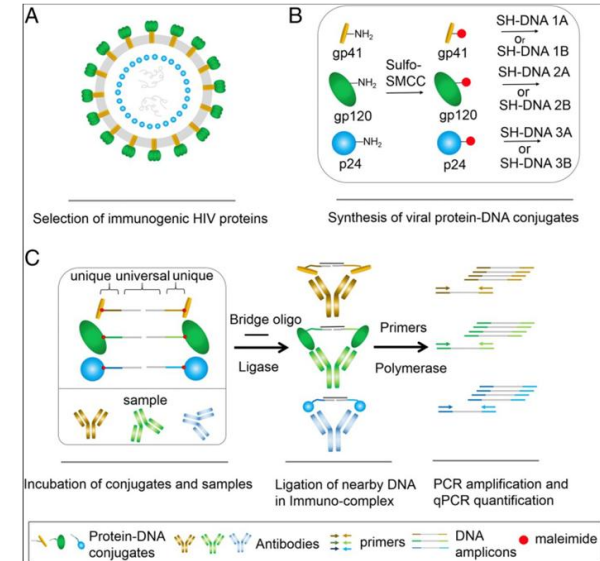
Plate-Based



- **COVAM - UC Irvine**
- **V-Plex - Meso Scale Discovery (MSD)**

10-30 antigens, 16-74 samples per run, 3-6 logs of dynamic range

PCR-Based



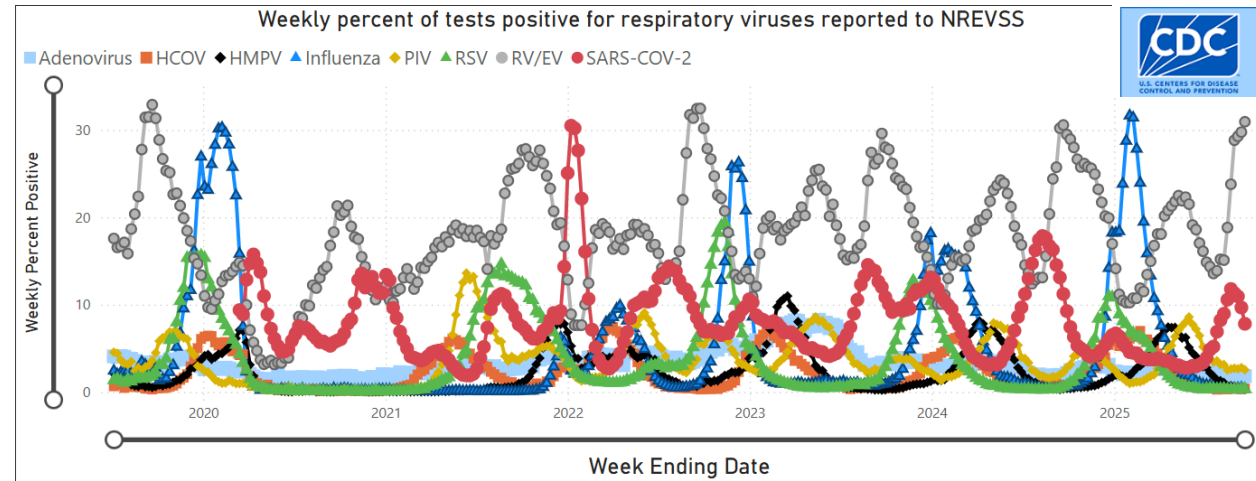
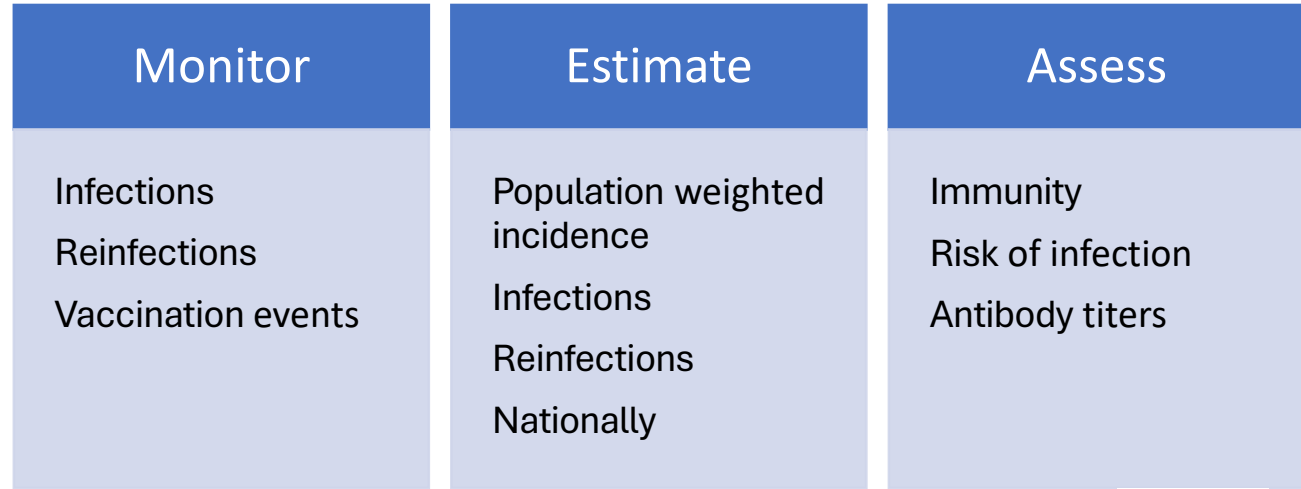
- Antibody Detection by Agglutination-PCR (ADAP) – **Enable Biosciences**

Respiratory Virus-Repeat Donor Cohort Program Goals

MesoScaleDiscovery
Custom-made assay

Respiratory Panel 5-CoV-2 Prototype			
Spot	Antigen Type	Antigen	Assay Name
1	CoV-2 Spike	SARS-CoV-2 Spike	CoV-2 Spike
2	Influenza	Flu A/Wisconsin/67/2022 H1	H1/Wisconsin/22
3	Metapneumovirus	hMPV F	hMPV F
4	Influenza	Flu A/DC/27/2023 H3	H3/DC/23
5	CoV-2 Nucleocapsid	SARS-CoV-2 N	CoV-2 N
6	Parainfluenza	hPIV (1-2) F	hPIV (1-2) F
7	RSV	RSV Pre-Fusion F	RSV Pre-F
8	Parainfluenza	hPIV3 F	hPIV3 F
9	Influenza	Flu B/Austria/2021 HA	B/Austria/21
10	CoV-2 Spike	SARS-CoV-2 Spike (LP.8.1)	CoV-2 Spike (LP.8.1)

- SARS-CoV-2
- Respiratory Syncytial Virus
- Influenza (2A, 1B)
- Metapneumovirus
- Parainfluenza 1/2-3



+ Emerging Respiratory Viruses of Public Health Interest



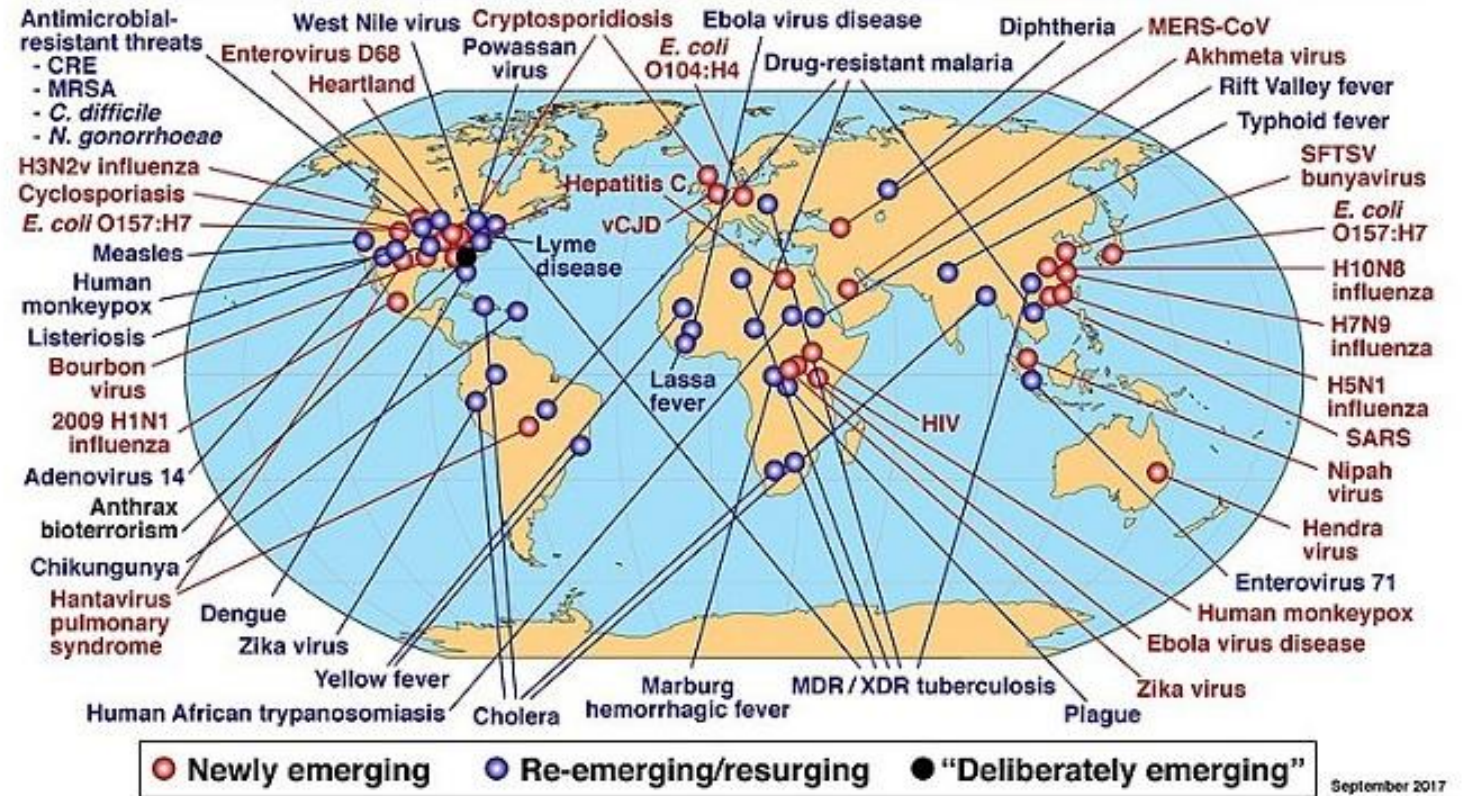
Lesson #4

Can we predict the next EID?

WNV, DENV, CHIKV, ZIKV,
Babesia, SARS-CoV-2,
OROV, H5N1...

Responding to Global Emergences

Can we predict which one will emerge next?



Proactive surveillance may help!!!

Proactive surveillance

OneHealth Applied to Emerging Infectious Diseases

Sample EID
Hotspots



Perform
Pathogen
Discovery



Characterize
Risk

Human, animal, and environmental interface



POLICY FORUM

INFECTIOUS DISEASES

The Global Virome Project

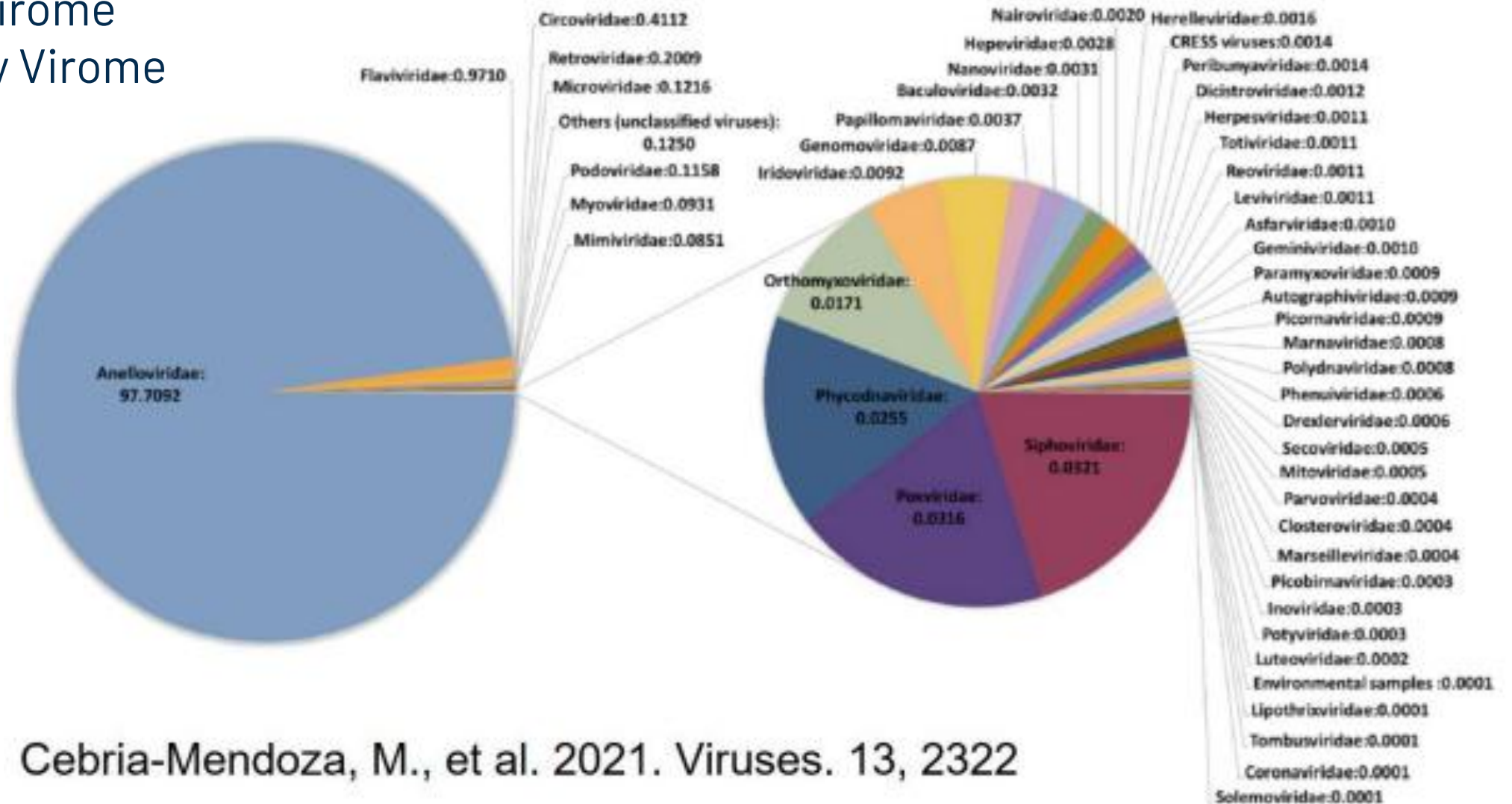
Expanded viral discovery can improve mitigation viruses. **The Global Virome Project aims to identify and characterize the majority of currently unknown viruses in key wildlife groups, including rodents, nonhuman primates, and bats.**

By Dennis Carroll, Peter Daszak, Nathan D. Wolfe, George F. Gao, Carlos M. Morel, Subhash Morzaria, Ariel Pablos-Méndez, Oyewale Tomori, Jonna A. K. Mazet

The Human Virome Project

1. Healthy Virome
2. Unhealthy Virome

Human Blood Virome



Cebria-Mendoza, M., et al. 2021. *Viruses*. 13, 2322

Multiplexed Assays, OMICS Approaches

Global virome project

viruses MDPI

Review
Viral Metagenomics for Identification of Emerging Viruses in Transfusion Medicine

Direct detection of known and unknown EID

overview of the viral nucleic acid abundance, also named "blood virome". Detailed characterization of the blood virome of healthy donors could identify unknown (emerging) viral genomes."

Blood transmission issue

- The virus is viremic: short or long viremia?
- Survival of the virus in collected blood or components?
- Ability to cause infection by intravenous introduction?
- Ability to cause disease in the recipient?
- Frequency of transmission by blood transfusion?
- Immune status of the recipient?
- Prevalence in the blood donor population?

Public health impact

- Adequate study groups: capability of identification of emerging agents?

Global Immunological Observatory

SCIENCE FORUM eLife

A Global Immunological Observatory to meet a time of pandemics

Detecting changes in immunosignatures at population levels

MICHAEL J MINA^{1*}, C JESSICA E METCALF^{1*}, ADRIAN B MCDERMOTT, DANIEL C DOUEK, JEREMY FARRAR AND BRYAN T GRENFELL

A) Serology as epidemiological 'dark matter'

Antibody response profiling Peptide Arrays

Unsupervised Clustering, Final Weight Vectors

New OMICS tools

Integrative Analysis of Multi-omics Data

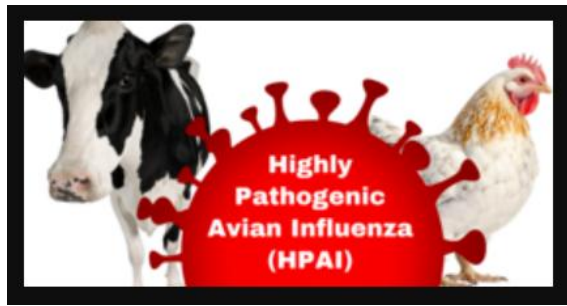
Adv. Genet. 2016;93:147-90.
 Cancer Drug Resist 2019;2:419-27.

Integration of multi-faceted approaches combined with AI powered Systems Analyses will further enhance our agility



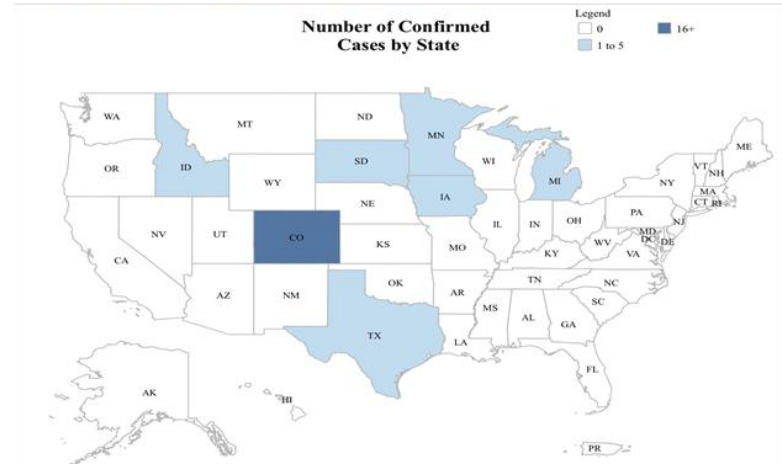
Lesson #5

Now is the time!

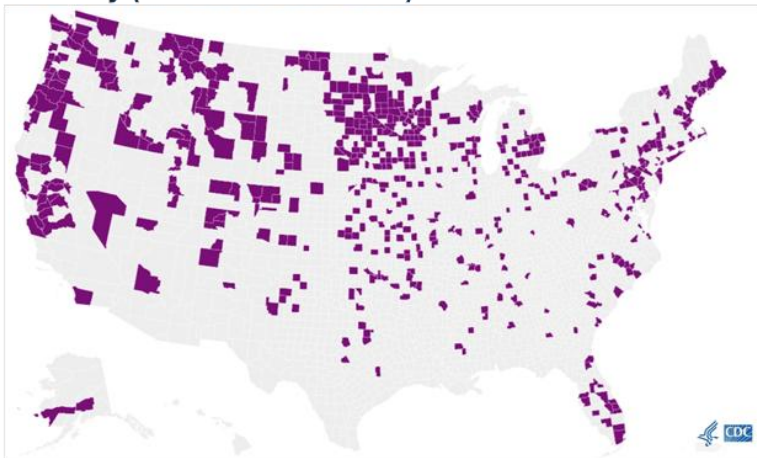


Emerging Respiratory Viruses: H5N1 Influenza and Hantavirus

Dairy cattle (affected states):



Poultry (affected counties):

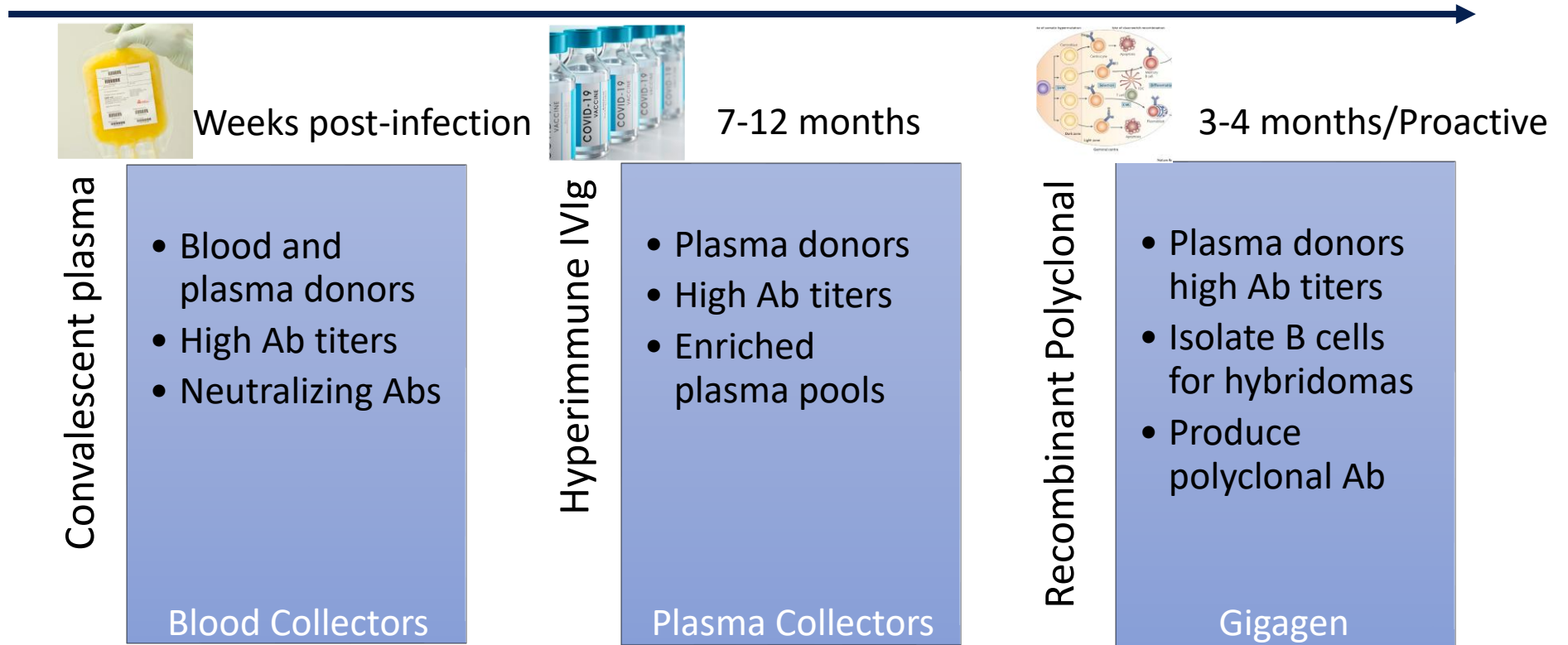


Cruise Ship Runs Aground With 206 Passengers and Crew Onboard

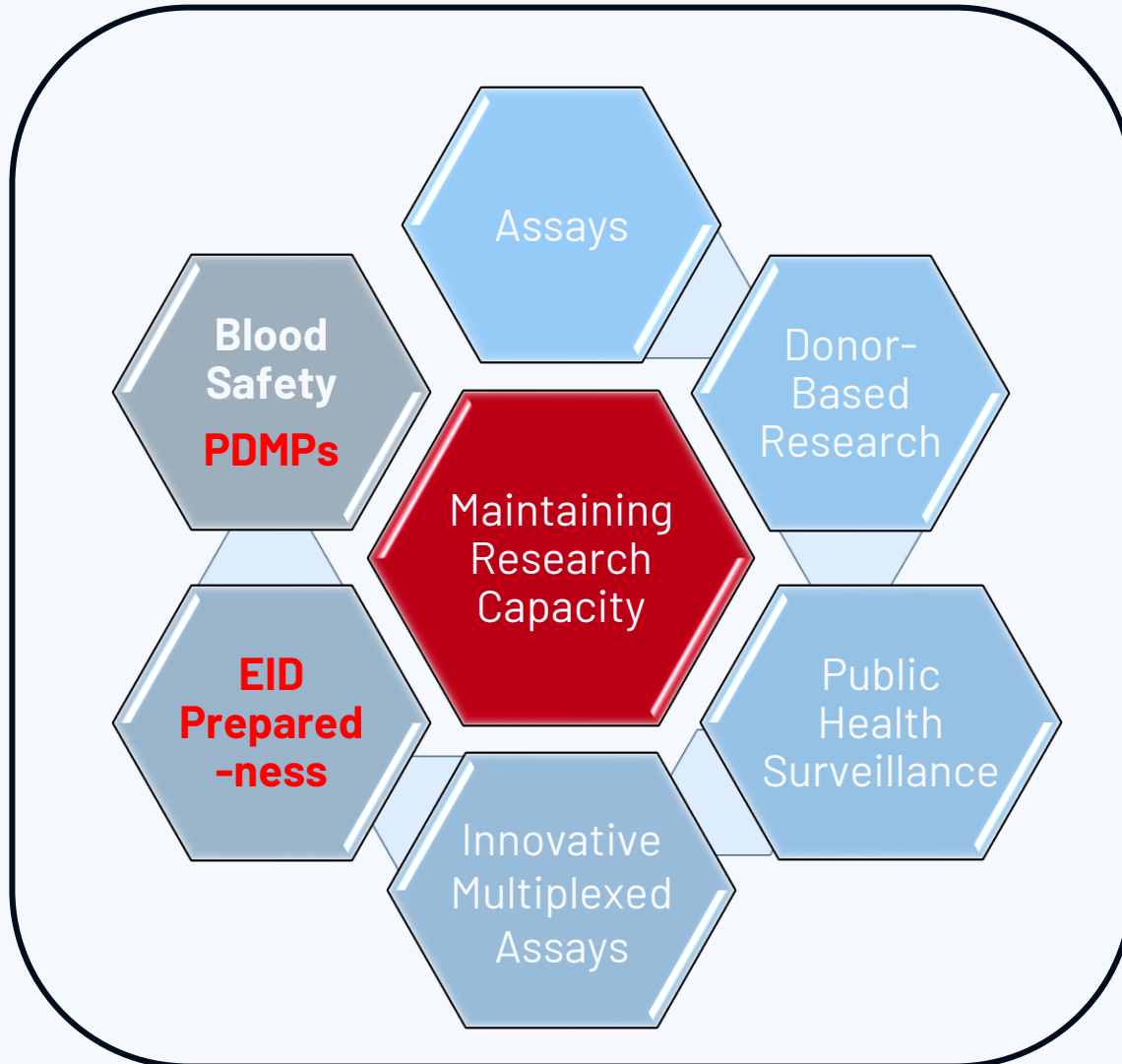


Prepare or react?

Multi-faceted approach according to timeline



EID Response: Our Strategy?



- Capitalizing on a unique infrastructure for sample capture
- Maintaining testing capacity
- Performing donor-based research
 - ✓ To identify EID early
 - ✓ To maintain blood safety
 - ✓ To inform public health policies
 - ✓ To enable faster therapeutic response



“We can act now to put us in a position so that when the next pandemic does happen, we don’t have to allow it to get out of control”

Michael Mina



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