

# **Granulocytentransfusies: In de praktijk van de bloedbank**

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## Clinical response to GTX



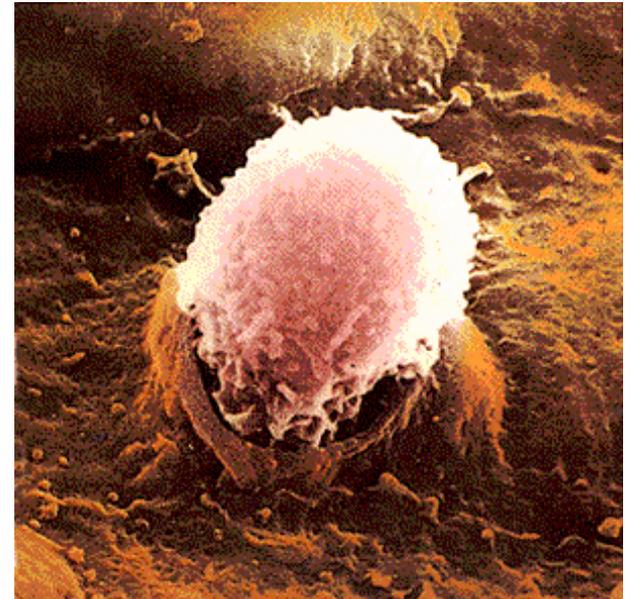
**Pseudomonas & Citrobacter infection before GTX – unresponsive to ceftazadime, tobramycin and meronem**

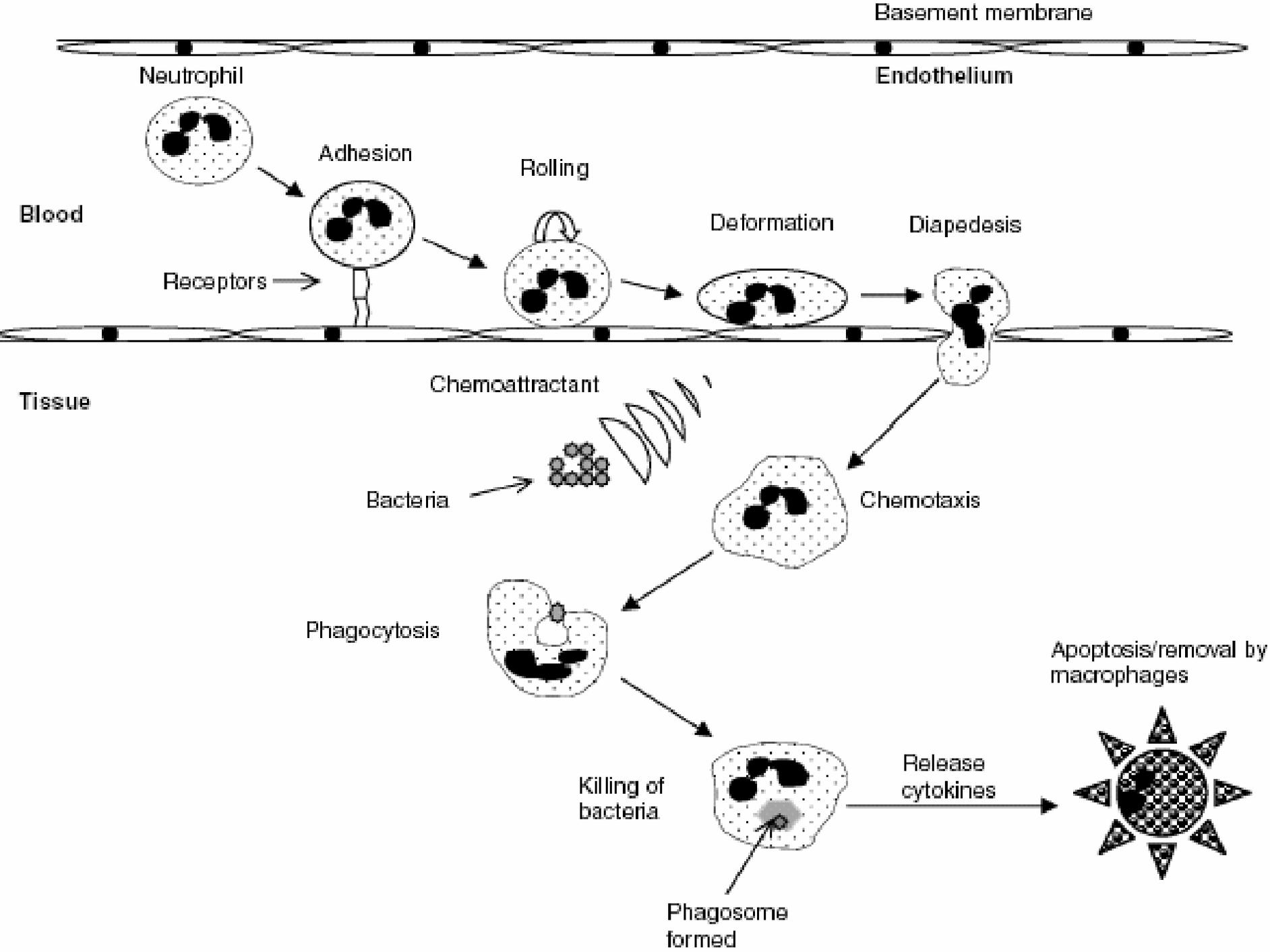


**Pseudomonas & Citrobacter infection following total 7 GTX and 3 weeks of antibiotic treatment. Blood and wound culture negative. Tissue regeneration and healing**

## Neutrophils

- Production:  $40-60 \times 10^9$  cells per day
- $2 - 7 \times 10^9/L$  (2,000 – 7,000 cells /  $mm^3$  or /  $\mu L$ )
- $\pm 50\%$  circulate free in blood flow
- Life span 9-10 days
  - 5-7 day in bone marrow
  - Peripheral circulation hrs
  - Tissues 2-3 day





## WBC (250 donors)

• Leukocytes	5.8 x 10 <sup>9</sup> /L	
• Lymphocytes	1.6 x 10 <sup>9</sup> /L	(28%)
• Monocytes	0.5 x 10 <sup>9</sup> /L	(9%)
• Granulocytes	3.7 x 10 <sup>9</sup> /L	(64%)
• Basophils	0.05 x 10 <sup>9</sup> /L	(1%)
• Eosinophils	0.18 x 10 <sup>9</sup> /L	(5%)
• Neutrophils	3.47 x 10 <sup>9</sup> /L	(94%)

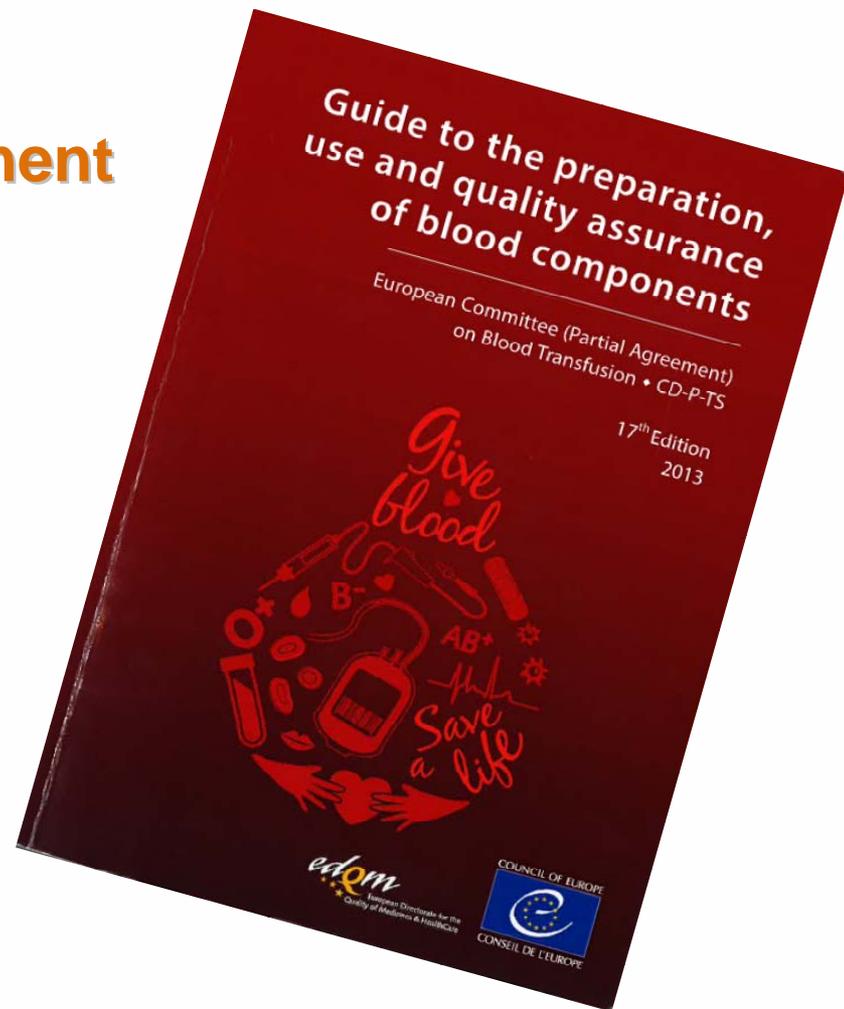
## **Granulocyte blood component**

- Whole blood
- Apheresis

## Granulocyte blood component

European guideline

- Less than 500 mL
- More than  $1 \times 10^{10}$  neutrophils/unit
- Adult dose:  $1.5 - 3.0 \times 10^8/\text{kg}$
- Must be irradiated



## **Granulocytes from whole blood**

- Buffycoat
- Buffycoat pool

## Results

	Buffycoat derived		Apheresis derived	
	Mean	± SD	Mean	± SD
Product volume	201	± 15	297	± 89
Granulocytes / unit (x 10 <sup>9</sup> )	11	± 1.3	47	± 23
Erythrocytes / L (x 10 <sup>12</sup> )	2.25	± 0.23	2.05	± 0.63
Platelets / unit (x 10 <sup>9</sup> )	327	± 75.7	108	± 44
Haematocrit (L/L)	0.21	± 0.02	0.18	± 0.06
Leukocytes / unit (x 10 <sup>9</sup> )	21.9	± 2.1	59	± 26

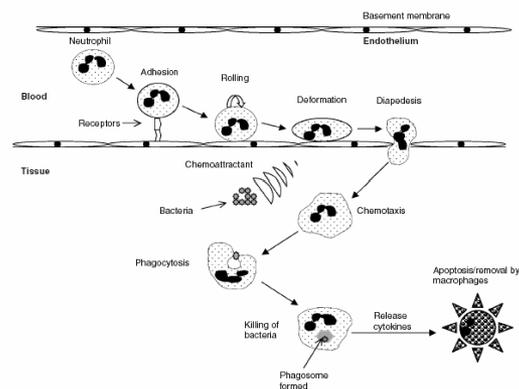
## Production Granulocyte-concentrate

From 10 buffycoats

1. To study storage conditions
2. Alternative granulocyte transfusion product

### Note

- Product at least 24 hrs after donation
- Not always available
- Function?



## Granulocytes from whole blood

# Neutrophil function is preserved in a pooled granulocyte component prepared from whole blood donations

Saber Bashir,<sup>1</sup> Simon Stanworth,<sup>2</sup> Edwin Massey,<sup>3</sup> Fred Goddard<sup>3</sup> and Rebecca Cardigan<sup>1</sup>

<sup>1</sup>NHS Blood and Transplant, Brentwood, <sup>2</sup>NHS Blood and Transplant, Oxford, and <sup>3</sup>NHS Blood and Transplant, Bristol, UK

*British Journal of Haematology*, 140, 701–711

**The Granulocytes in Neutropenia 1 (GIN 1) Study: A safety study of granulocytes collected from whole blood and stored in additive solution and plasma.**

E. Massey, et al, *Transfusion Medicine* 2012

## **Granulocytes derived by apheresis**

- Sufficient neutrophils in donor

## Collection of granulocytes → donors

- Not stimulated  $3.5 \pm 1.3 \times 10^9/L$  (2.1 – 6.9)
- G-CSF  $20.8 \pm 2.3 \times 10^9/L$  (14.8 – 36.9)
- G-CSF + dexamethason  $42.5 \pm 12.7 \times 10^9/L$  (19.7 – 82.0)

‘G-CSF mobilized neutrophils have normal function when tested in assays of respiratory burstchemiluminescence, phagocytosis, chemotaxis, and superoxide anion production.’

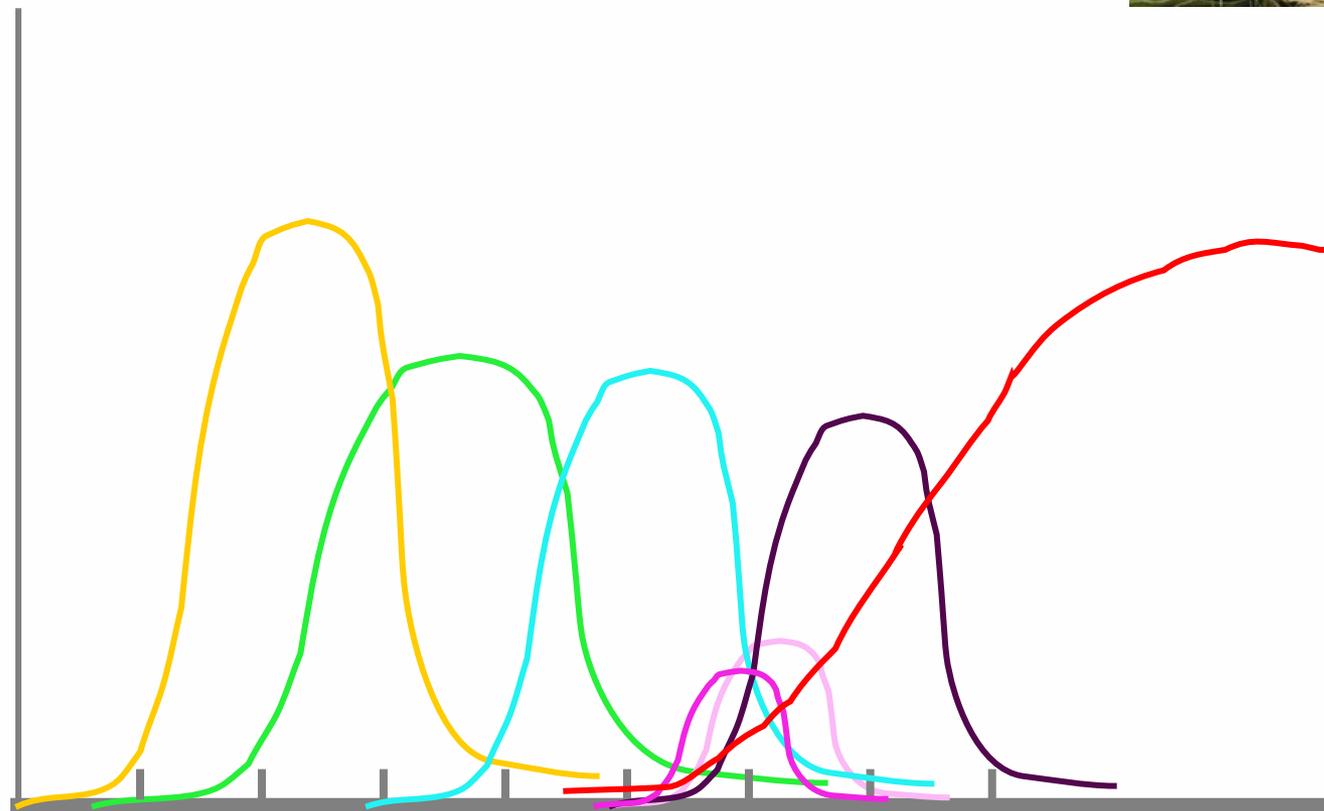
**Granulocyte concentrates: prolonged functional capacity during storage in the presence of phenotypic changes.** Drewniak A., et al. Haematologica 2008.

## Granulocyte apheresis

- Donors
- G-CSF & dexamethasone stimulation
- Anticoagulant
  - 46.7% sodium citrate (30 mL)
  - 6% hydroxyethylstarch (500 mL)



## Separation



## Indication for granulocyte transfusion



Courtesy: dr Lynne M. Ball, UMC Leiden

- Severly neutropenic patient with life-threatening bacterial and/or fungal infection unresponsive to conventional therapy.
- Preemptive

## **Granulocyte apheresis**

- Donors

## **Granulocyte apheresis**

- Family donors
  - Questionnaire for blood donors
  - Medical examination
  - Informed consent
  - AB0 Rh D
  - Virology tests
  - Compatibility tests

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  - 5 µg / kg G-CSF
  - 8 mg oraal

## **G-CSF & dexamethasone stimulation**

- Botpijn
- Moeheid
- Spierpijn / gewrichtsklachten
- Hoofdpijn
- Misselijkheid / braken
- Nachtzweeten
- Koorts / rillingen
- Slapeloosheid
- Splenomegalie

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## Granulocytferese

- Afnamelocatie
- Begin ochtend
- Keuring voor donors
- Bloedbeeld voorafgaand aan procedure
- ABO Rh(D)
- Spoedtests bloedoverdraagbare ziekten
  - Serologie (Lab Amsterdam: duur  $\pm 1,5$ )
- Procedure (2-3 uur)
- Bloedbeeld na de procedure
- “Bloedbeeld” product
- Product bestralen
- Uitgifte aan en transport naar transfusielab ziekenhuis

