Meeting The Needs of Plasma Protein Therapies

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APEC Policy Dialogue and Workshop on Attaining a Safe and Sustainable Blood Supply Chain
Manila, The Philippines, October 1, 2014
Topics

Overview of plasma including recovered and source plasma for fractionation

Highlight global demand for plasma protein therapies

PPTA’s perspective on self-sufficiency for whole blood collection system and plasma protein therapies
467 Collection Centers PPTA Members
TYPE OF PLASMA PROCESSED WORLDWIDE - 1996 TO 2012
COMMERCIAL COMPANIES & NON-PROFIT ORGANIZATIONS
(Thousand Liters)

Total in 2012: 36,792,000 Liters

Apheresis plasma is increasingly fractionated in all regions

Source Plasma  Recovered Plasma
PLASMA REQUIREMENTS FOR ALBUMIN, FACTOR & IVIG
1974 - 2014 - Million Liters
CAGR +10.2% per year since 1984
+7.9% per year since 2000
THE WORLDWIDE PLASMA PROTEINS MARKET BY COMPANY - 2012

WITHOUT RECOMBINANT FACTORS

Total Market 15,222.4 Million

- CSL Behring: 22.6%
- Baxter: 22.3%
- Grifols: 19.6%
- Octapharma: 7.1%
- Non-Profit Organizations: 11.0%
- Biotest: 3.0%
- Mitsubishi/Genesis: 1.4%
- Kedrion: 3.8%
- All Others: 9.2%
Every country has the right and obligation to provide its population with safe and effective medicines

Self sufficiency is a goal
Self sufficiency is not a dogma

Globally we need to talk about sufficiency
Labile Blood Products are a National Issue

Plasma Derived Medicinal Products are a Global Issue

All donations, whether voluntary non-remunerated or compensated are voluntary
Change of European Landscape

Denmark
England
Finland
Germany
Norway
Scotland
Switzerland
Blood Industry Shrinks as Transfusions decline

- Changes in medicine have eliminated the need for millions of blood transfusions
  - Wave of mergers and job cutbacks unlike anything in the industry (ABC 68 -87)
  - Transfusions down one third over last five years
  - Blood bank revenue is falling (decline $1.5 billion from $5 billion in 2008)
  - Job losses will reach as high as 12,000 on next 3-5 years (25% work force)
- Red Cross deficit since 2008, balanced partly by cutting 1,500
- Within ARC 17,000 of 26,500 employees work in blood program
- Recent studies found many transfusions unnecessary
  - Some people need it, some other people are harmed by it
  - Surgical techniques improved
  - Insurance plans discourage transfusions
- Blood banks are turning to consolidated lab companies for testing, instead of maintaining their own labs
Troubles in the Blood Industry

• The blood business is hemorrhaging money and jobs due to changes in medicine that have reduced the need for transfusions.
  ➢ All Gov News August 28, 2014

• Community Blood center announces merger with New York Blood Center.
  ➢ 41 Action News Staff, August 4, 2014

• One Blood may merge with blood bank in Pittsburgh
  ➢ With demand for blood transfusions falling and hospitals clamoring for lower prices
  ➢ The landscape of the blood industry is shifting
  ➢ Studies show patients often recover more quickly without transfusions
  ➢ Blood transfusions dropped 7% industry wide
  ➢ 700 employees have been let go or left since 2012
    ➢ Orlando Sentinel July 28, 2014

• BloodSource opened plasma donor center in Granite Bay
  ➢ Effort by nonprofit community blood bank to respond to worldwide demand for plasma based medicines
    ➢ Sacramento Business Journal, September 4, 2014
IPFA/BCA Global Symposium on

The Future for Blood and Plasma Donations

In collaboration with BloodSource

23-24 September 2014
Sheraton Grand Sacramento, CA, USA
View on Self sufficiency

Whole Blood
- National Self sufficiency for blood components is achievable

Plasma derived medicinal products
- Focus on Global Sufficiency (need for multiple sources)
- Recovered plasma volumes are insufficient
- Clinical demand can only be met with source plasma collection
- Costs of plasma collection high with VNRD model (AUS, I, NL)
- Economy of scale is important (Japan)
- Many European countries could not afford own fractionation
- 80% of PDMP’s provided by private sector industry

- It is more important to focus on quality improvements than to build small scale fractionation centers
TODAY’S REALITY

1,200 PWH in register (10,000)
No FVIII, maybe next month
No FIX available
Current treatment ice, bandage
If lucky: cryoprecipitate
If cryoprecipitate in government hospital, PWH must bring 3 replacement donors
Retesting cryo increases costs
Hemophilia excluded from insurance
Monthly bleedings
2-3 per year hospitalization (1 -12 weeks)
Ibuprofen and Paracetamol

Meeting with representatives from HAPLOS and BLOOD BROTHERS
Monday September 29, 2014
New World Makati