May 22, 2020

The Honorable Mitch McConnell
Senate Majority Leader
U.S. Senate
U.S. Capitol Building
S-230
Washington, DC 20515

The Honorable Nancy Pelosi
Speaker of the House of Representatives
U.S. House of Representatives
H-232
Washington, DC 20515

The Honorable Charles E. Schumer
Senate Minority Leader
U.S. Senate
U.S. Capitol Building
S-221
Washington, DC 20515

The Honorable Kevin McCarthy
House Minority Leader
U.S. House of Representatives
H-204
Washington, DC 20515

Dear Majority Leader McConnell, Madam Speaker, Minority Leader Schumer, and Minority Leader McCarthy:

The donation of human plasma is a lifesaving necessity for individuals who depend upon the medicines made from plasma proteins. These therapies are lifelong treatments for chronic rare diseases and are also used in emergency, surgical, and preventative medicine. Across all uses, there are hundreds of thousands of individuals whose lives require access to plasma protein therapies. These therapies and their indicated chronic uses include:

- Immunoglobulin therapies for the treatment of primary immunodeficiencies and acute and chronic neurological diseases (e.g. chronic inflammatory demyelinating polyneuropathy)
- Alpha-1 proteinase inhibitors for the treatment of Alpha-1 antitrypsin deficiency
- C1 esterase inhibitors for the treatment of hereditary angioedema
- Clotting factors for the treatment of bleeding disorders, such as hemophilia and other rare coagulation factor disorders

Plasma protein therapies also include hyperimmune immunoglobulins that treat acute infections such as rabies, tetanus, and when pregnant women’s blood types are incompatible with their babies’ (rhesus incompatible pregnancies). In addition, plasma protein therapies are often used to treat secondary immune deficiencies, which occur when the body’s immune response is hindered as a result of HIV or chemotherapy, as well as severe burns, major trauma, and malnutrition.
These essential medicines are almost totally dependent on the donation of plasma at more than 850 donation centers in the U.S. The production of finished plasma protein therapies is lengthy, taking anywhere from seven to twelve months. Many complex steps are required and any disruption in normal collections may have a pronounced and detrimental lagged impact on the availability of finished products in the future.

Although plasma donation centers are considered an “essential” function under the CISA Critical Infrastructure guidance, the COVID-19 pandemic has interrupted the collection process because donors are staying at home and not going to centers. In order to ensure the well-being and health of the patient communities that depend on plasma protein therapies, there must be an organized and concerted effort to promote plasma donation during this pandemic.

The undersigned companies strongly support efforts to increase awareness of the need for plasma donation and the continued manufacturing of vital plasma protein therapies like immunoglobulins. Such efforts would benefit from the specific acknowledgment of the importance of plasma donation in Section 3226 of the CARES Act which established a blood awareness campaign to be conducted by the HHS Secretary. For this reason, we encourage your support for amending that section to include “plasma”. In this regard, we note that the HEROES Act recently introduced in the House contained such a provision. We ask that when Congress completes its work on the next bill to address COVID-19, the plasma donation provision is included with bipartisan support.

Sincerely,

Amy Chevalier Efantis
President & CEO
Plasma Protein Therapeutics Association

And the undersigned membership of PPTA North America:

ADMA Biologics, Inc.
Bio Products Laboratory
CSL Behring
Emergent BioSolutions
Grifols
Kedrion SpA
Takeda