

TRANSITIONING FROM FP TO OCTAPLASMA®

Information for Health Care Professionals

February 02, 2023

Dear Health Care Professional,

We refer to CBS customer letter [2022-28](#), in which they advised us of their migration to pathogen reduced plasma as part of their broader long-term commitment to introducing pathogen inactivation technology (PIT) to fresh blood products. Consequently, restrictions for ordering Octaplasma® (solvent/detergent (S/D) treated, pathogen inactivated plasma) are expected to be lifted on March 27, 2023 allowing all hospitals to order Octaplasma® for all patients in clinical settings where plasma usage is needed and considered appropriate.

Octaplasma® is a solvent/detergent (S/D) treated, pooled human plasma that offers consistent levels of plasma proteins, coagulation factors, and inhibitor content¹. The solvent/ detergent treatment reduces the risk of potential infections from known and emerging pathogens¹. Octaplasma® is manufactured using multiple, dedicated viral inactivation methods to reduce or remove enveloped and non-enveloped viruses and prions¹. Octaplasma® is cell and debris free, to ensure the removal of intracellular pathogens and significantly reduce cell- dependent adverse reactions¹.

The use of Octaplasma® has demonstrated reduced allergic reactions, immune- mediated transfusion reactions², and no reported cases of TRALI*¹ and a reduction in the overall use of plasma³.

Important Octaplasma® label update on post thaw storage conditions:

Octaplasma® Product Monograph was recently updated to include extended storage options after thawing the product. Similar to Frozen Plasma provided by Canadian Blood Services, after thawing, Octaplasma® may be stored for up to 5 days at +2°C to 8°C or for up to 8 hours at room temperature (+20°C to 25°C) before use¹. Stability studies have demonstrated the stability of thawed Octaplasma® during the 5-6 days storage period was comparable to the stability of thawed plasma derived from either single-donor fresh frozen plasma (FFP) or plasma frozen within 24 hours (FP), during the same period^{4,5,6}.

Confidence from Global Experience:

Octaplasma® is the most extensively used pathogen inactivated plasma worldwide with more than 11.8 million bags infused and more than 3.95 million patients treated⁷. Canada, excluding Quebec, is the latest amongst a host of countries that have transitioned to Octaplasma® as the preferred product for plasma transfusion. In several European countries, including (but not limited to) the UK, Norway, Finland, and the Netherlands, Octaplasma® is the preferred product where plasma usage is needed^{8,9}. It is also important to remember that Octaplasma® has been in clinical use for a variety of large volume plasma exchange procedures since 2016 with an excellent safety and efficacy record, with over 95,000 bags infused in Canadian patients.

Octapharma Commitment to a smooth transition and practical support:

Octapharma is committed to supporting customers and healthcare providers in Canada in ensuring a smooth transition from frozen plasma to Octaplasma®, for your plasma transfusion needs. Hospitals can be confident in Octapharma to meet 100% of your plasma needs. Adequate inventory will be maintained across the major hubs and distribution sites in Western, Central and Eastern Canada across all blood groups. There are no restrictions on the amount of Octaplasma® AB any institution can order.

Additionally, to support healthcare providers, we are developing a series of educational materials including a product website, a how-to-administer Octaplasma® video, a downloadable product information deck, and an FAQ document. A separate communication on Octaplasma® resources developed by Octapharma, along with detailed product handling information will be shared with you.

To receive regular updates on the transition to Octaplasma®, please subscribe by filling out the form [here](#). Your email will be used specifically for this purpose.

Sincerely,
Octapharma Canada Inc

Important Safety Information:

Octaplasma® is contraindicated in patients with IgA deficiency with documented antibodies against IgA as it may cause anaphylactic and anaphylactoid reactions, in severe deficiency of protein S, and in patients who are hypersensitive to this drug or to any ingredient in the formulation.

For complete prescribing information, refer to the complete Octaplasma® Product Monograph. If you have any medical inquiries, please contact medical information service by emailing medinfo.canada@octapharma.com or calling 1-888-438-0488.

References:

1. Octaplasma® Product Monograph, October 31, 2022.
2. Scully M, Longair et al. Cryosupernatant and solvent detergent fresh-frozen plasma (Octaplas) usage at a single centre in acute thrombotic thrombocytopenic purpura. Vox Sang. 2007;93(2):154-158.
3. Saadah et al. Transition from fresh frozen plasma to solvent/detergent plasma in the Netherlands: comparing clinical use and transfusion reaction risks Haematologica 2019.
4. Stability of OctaplasLG® after thawing; Storage for 6 days at +2-8°C. Study Report 020STD952.443/00, Heger A, 24.10.2017
5. Keller MK, Krebs M, Spies C, Wernecke KD, Heger A, von Heymann C. Clotting factor activity in thawed Octaplas® LG during storage at 2-6°C for 6 days from a quality assurance point of view. Transfusion Apher Sci 2012; 46(2):129-136 ([https://www.trasci.com/article/S1473-0502\(12\)00006-7/fulltext](https://www.trasci.com/article/S1473-0502(12)00006-7/fulltext))
6. Neisser-Svae A, Trawnicek L, Heger A, Mehta T, Triulzi D. Five-day stability of thawed plasma: solvent/detergent-treated plasma comparable with fresh-frozen plasma and plasma frozen within 24 hours. Transfusion 2016; 56:404-409 ([Five-day stability of thawed plasma: solvent/detergent-treated plasma comparable with fresh-frozen plasma and plasma frozen within 24 hours - PubMed \(nih.gov\)](#))
7. Octapharma data on file 2022
8. Scully M. Trends in the diagnosis and management of TTP: European perspective. Transfusion and Apheresis Science. 2014;51(1):11-14.
9. Blombery P, Scully M. Management of thrombotic thrombocytopenic purpura: current perspectives. J Blood Med. 2014;5:15-23. Published 2014 Feb 5