

Ramping Up the Plasma Supply by VNRD in Denmark: Obstacles and Opportunities

Bjarne K. Møller, MD

Medical director, head consultant, assoc. professor

Dept. of Clinical Immunology &

Aarhus University Hospital

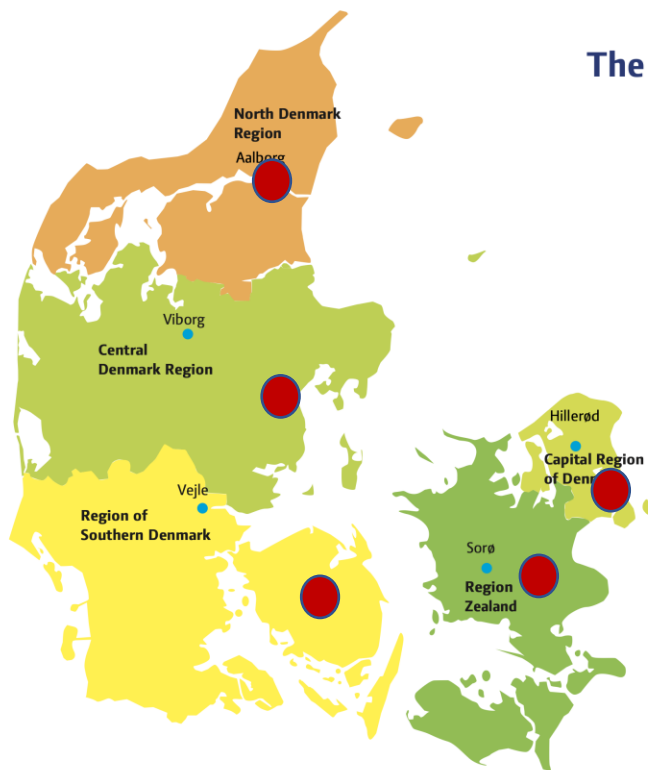
Denmark

Regional Blood and Tissue Center

Central Denmark Region

No conflicts of interest to declare.

Danish Health Care & Transfusion Service



The five regions

- Health care services are financed by general taxes and mainly provided free of charge
- The state holds regulatory and supervisory functions of the Health Care System
- Governed by the Ministry of Health
- Health care in hospitals is provided by "Danish Regions"
- Regional Blood and Tissue Centers
 - Hospital-based transfusion services
 - Supervised by Danish Patient Safety Authority

Obstacles to self-sufficiency of plasma-derived medicine

Supply of medicine during turbulent times

- Clinical demand and market economy

Donor recruitment

- Local donor organisations based primarily on volunteers

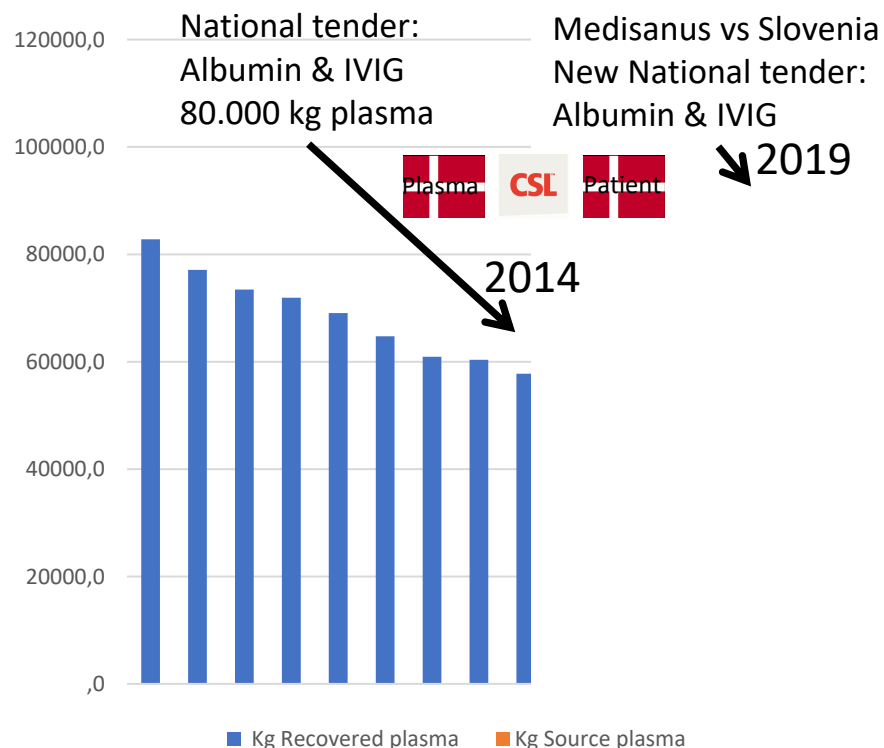
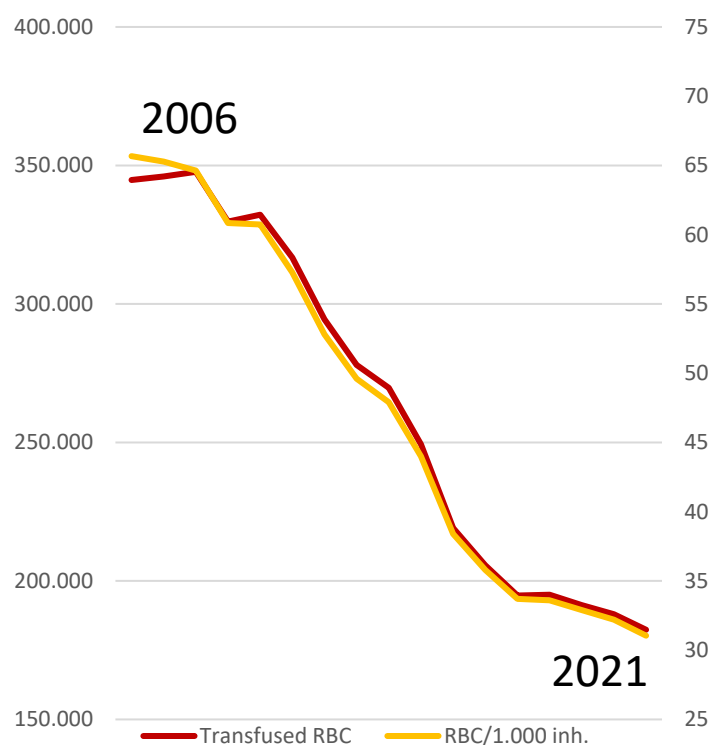
Geographical distribution of apheresis sites

- Political decision-making processes

National tenders for contract fractionation

- Political, legal and economical constraints

From a World Record in RBC transfusion....



Mediasinus vs. General Hospital Murska Sobota, Slovenia

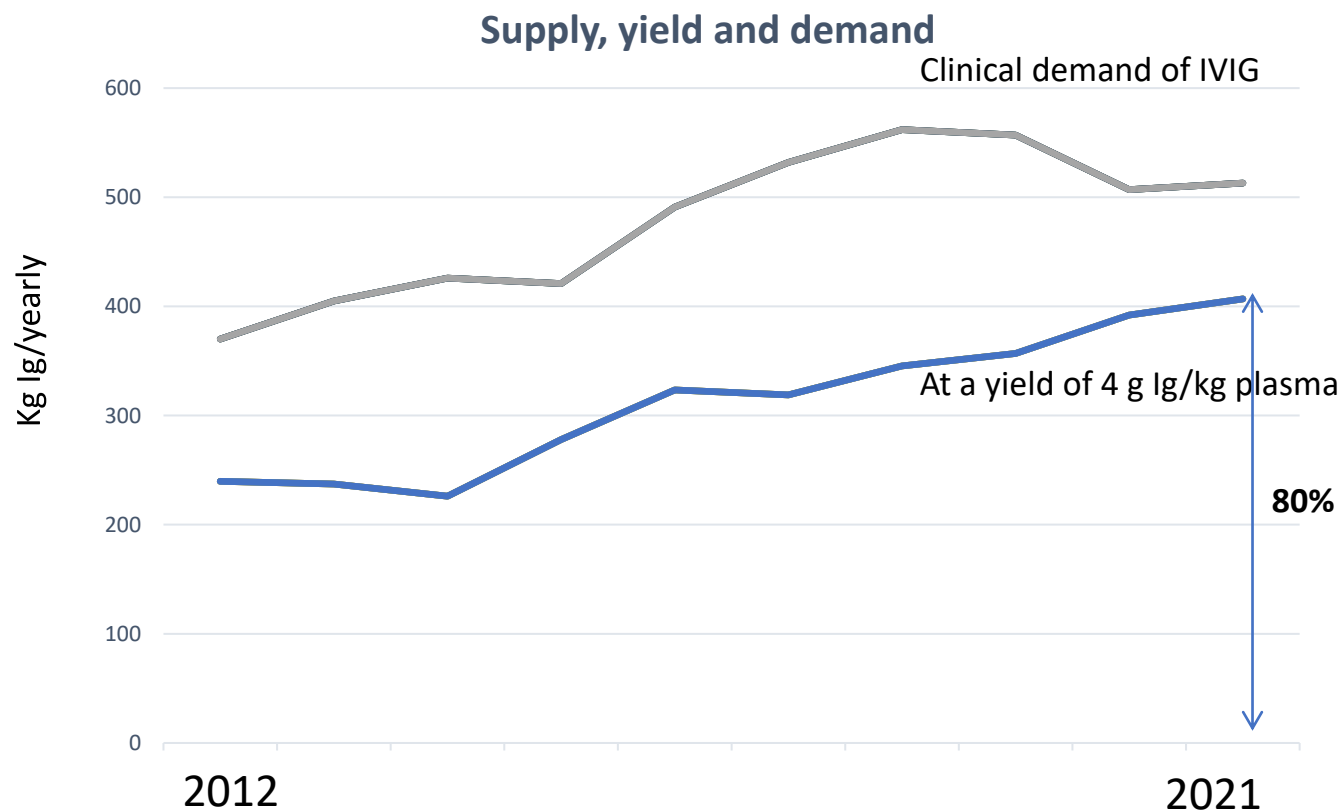
§

In 2015, General Hospital Murska Sobota reached decision on a tender specifying a technical prerequisite that two types of plasma-derived drugs had to be obtained from Slovenian plasma.

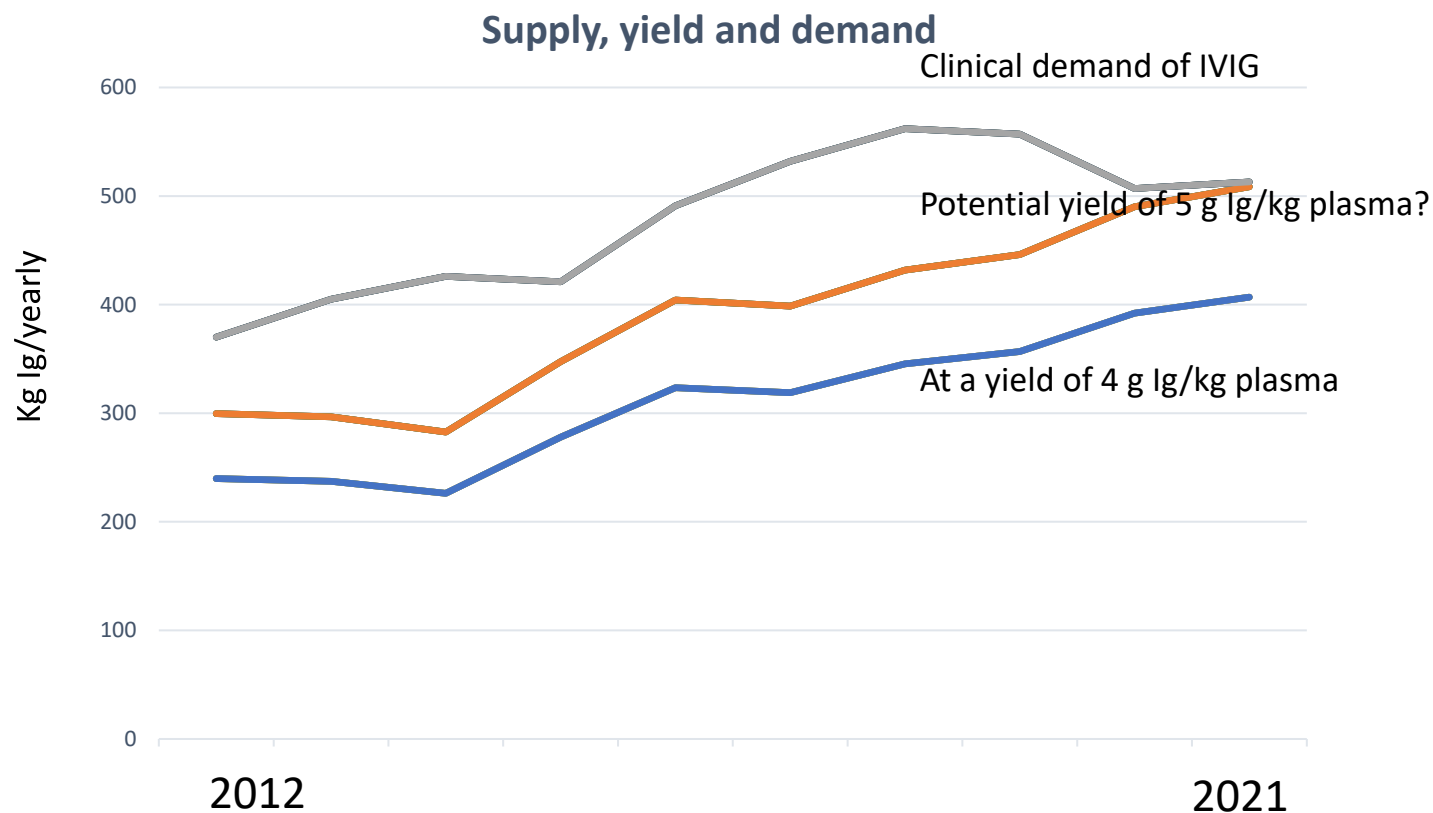
The Court of Justice of the European Union ruled in 2017 that the prerequisite is discriminatory, since **the prerequisite of national origin falls under Article 34** of the Treaty of the Functioning of the European Union (TFEU), which prohibits obstacles to the free movement of goods.

"The priority principle for medicinal products manufactured industrially from Slovenian plasma does not constitute decisively to encouraging the Slovenian population to make voluntary blood donations"

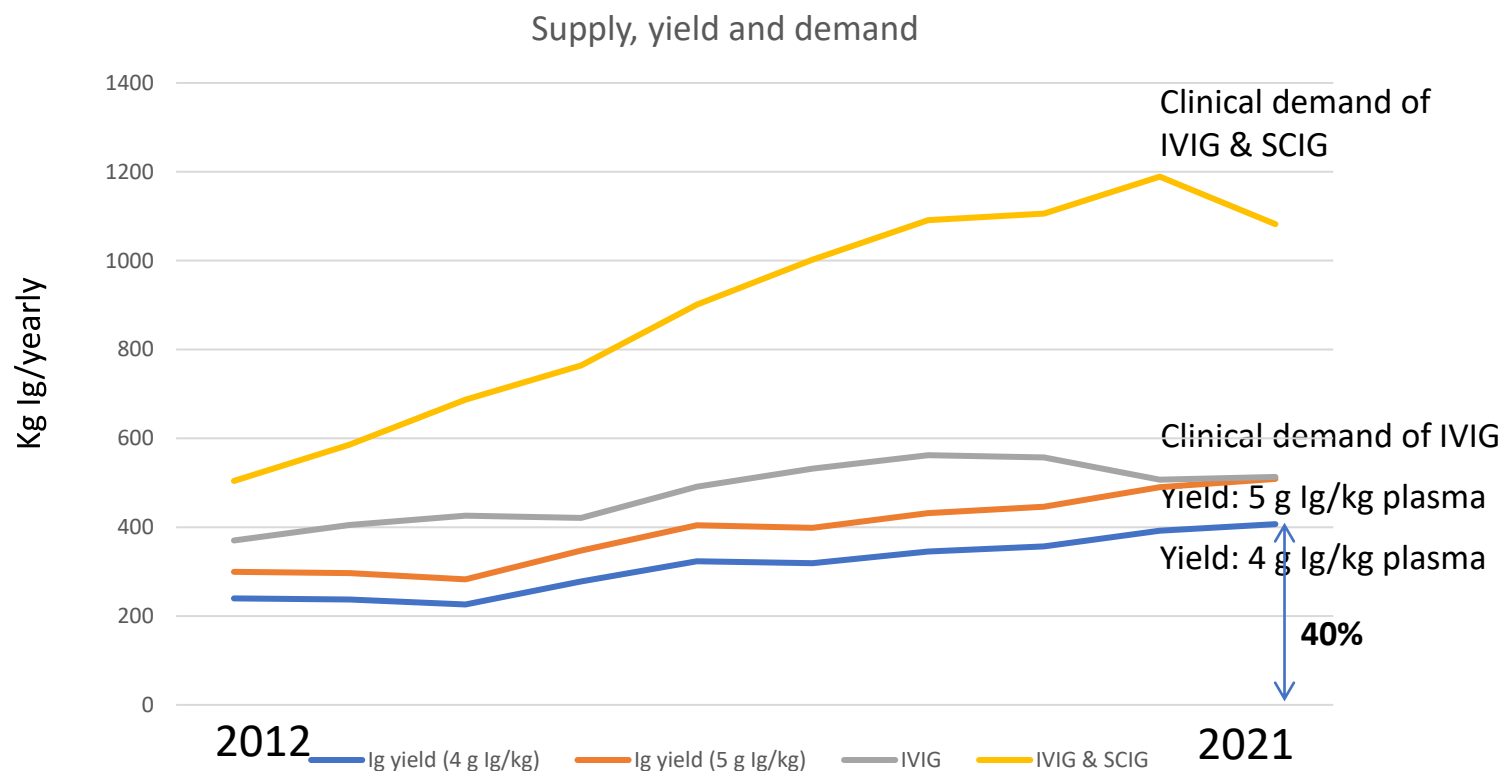
Immunoglobulin demand is a moving target



Immunoglobulin demand is a moving target

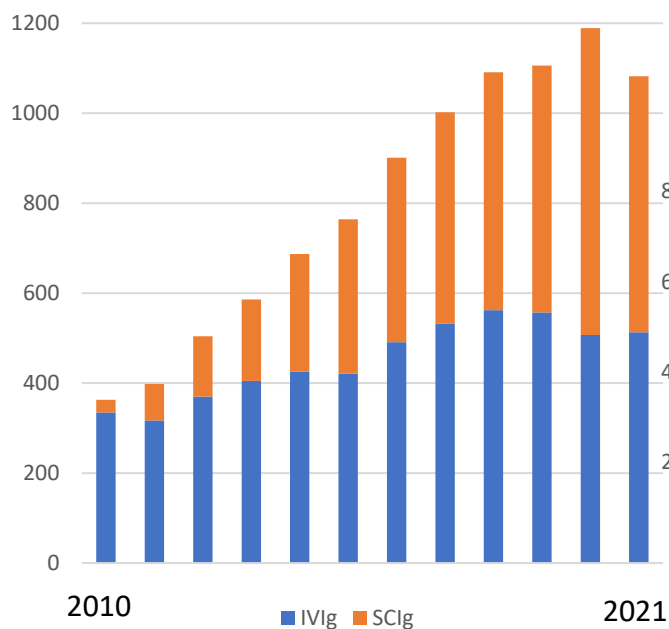


Immunoglobulin demand is a moving target

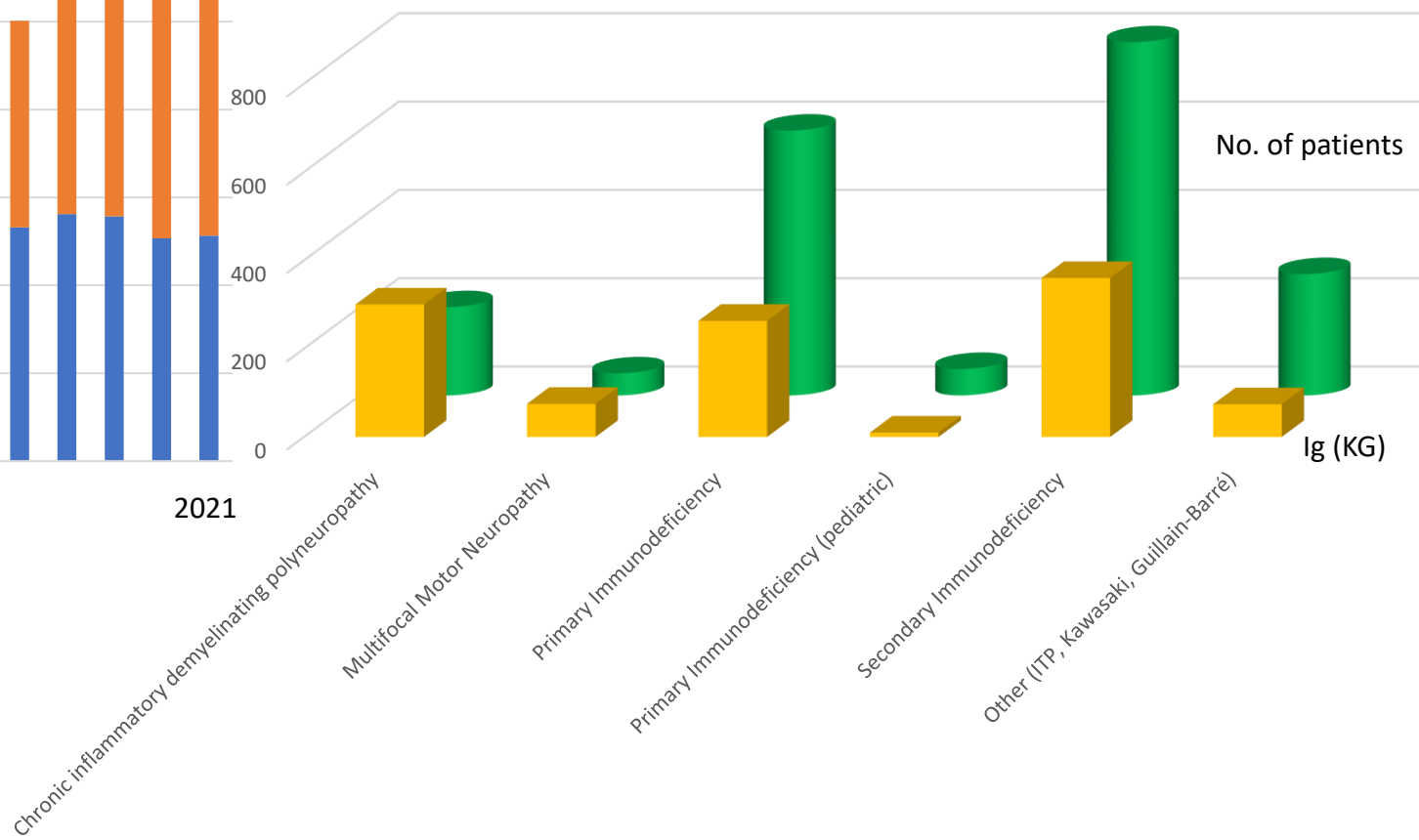


Demand and clinical indications

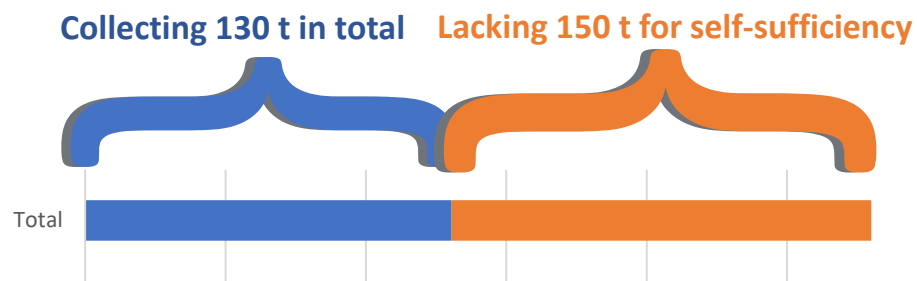
Clinical demand for
Immunoglobulin



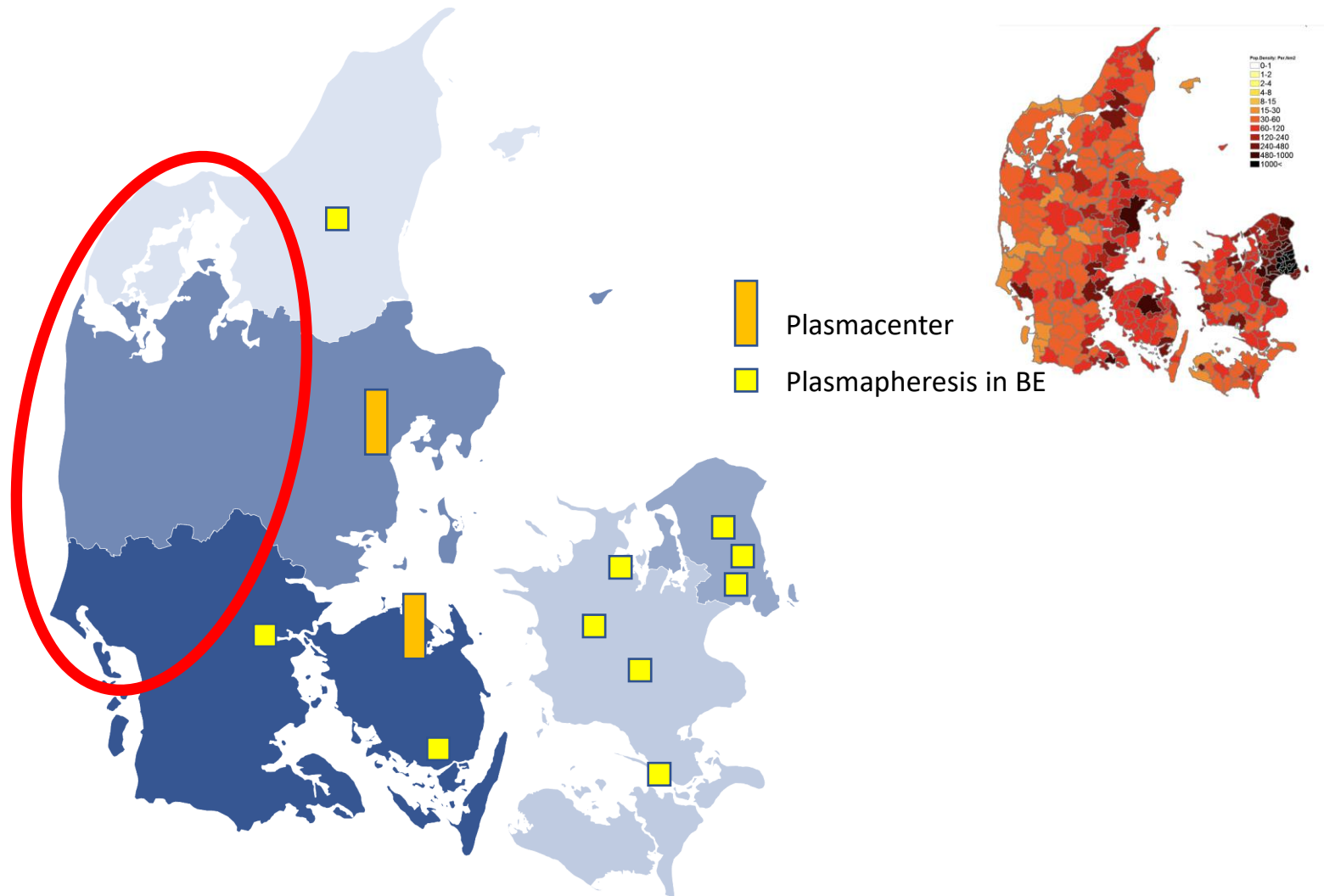
Clinical indications



Expected plasma collections in 2022 – Mind the gap...

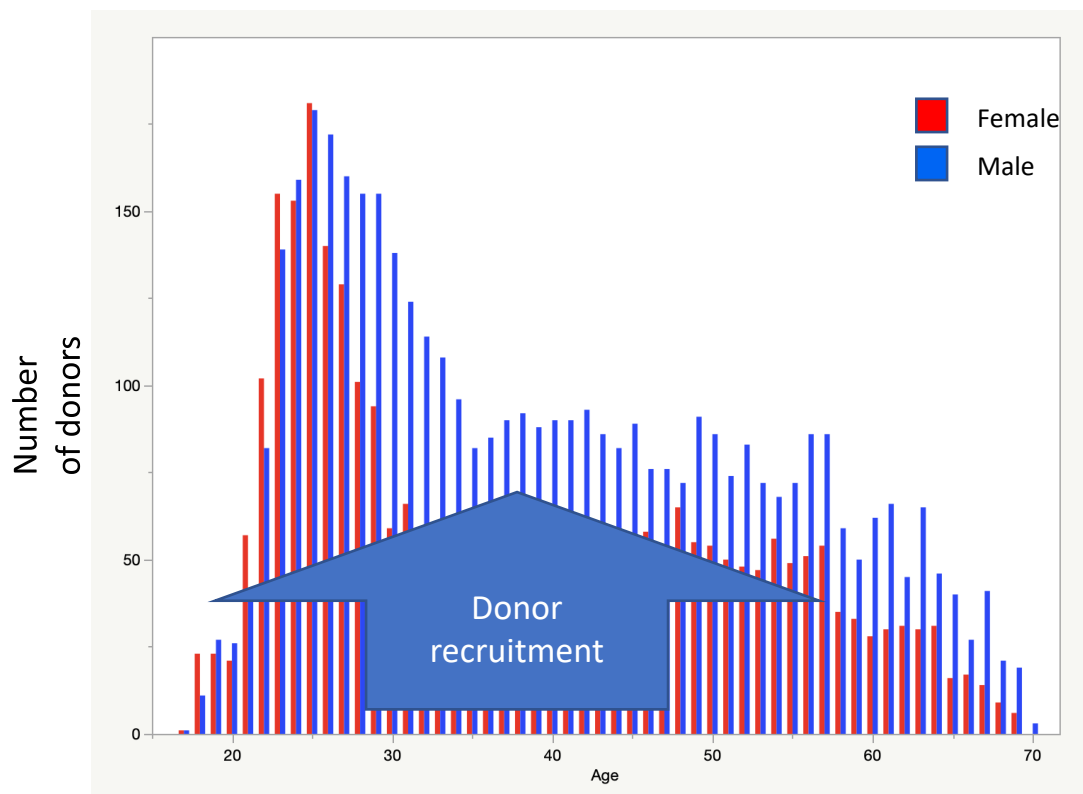


Plasma collection in the 5 regions

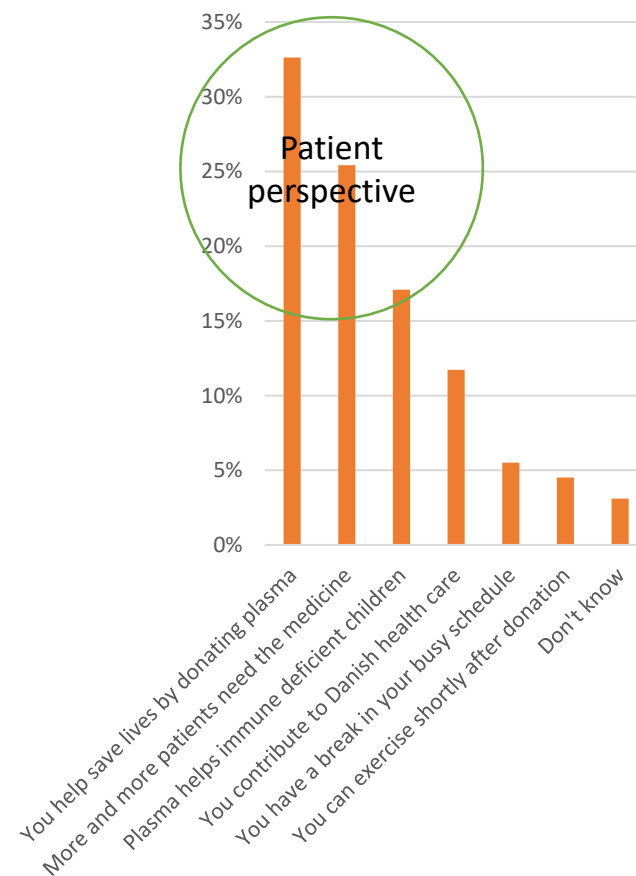


Plasma Donors: Age & Gender

Single center

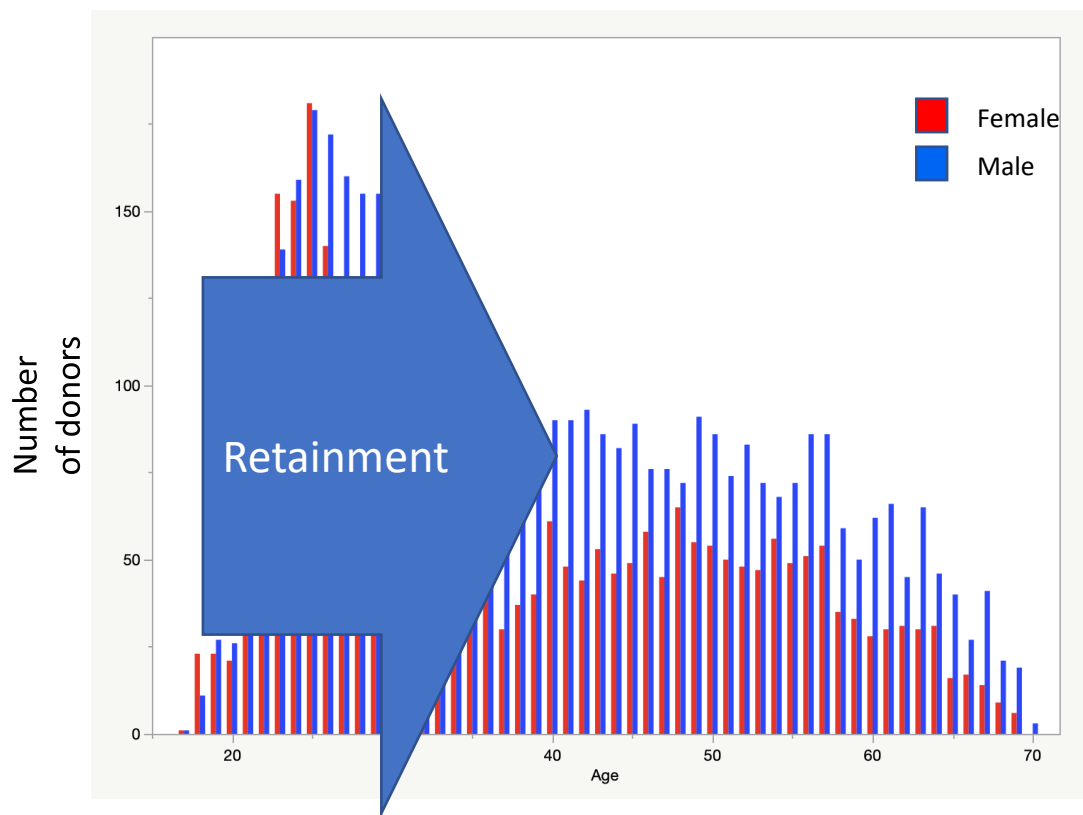


How can we convince others to become plasma donors?

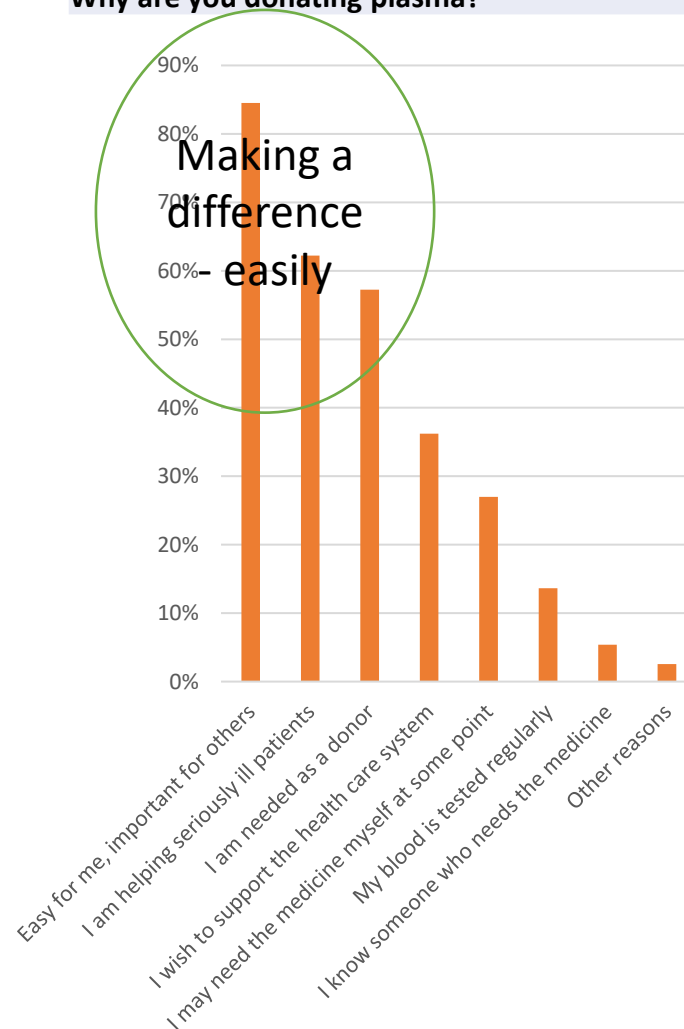


Plasma Donors: Age & Gender

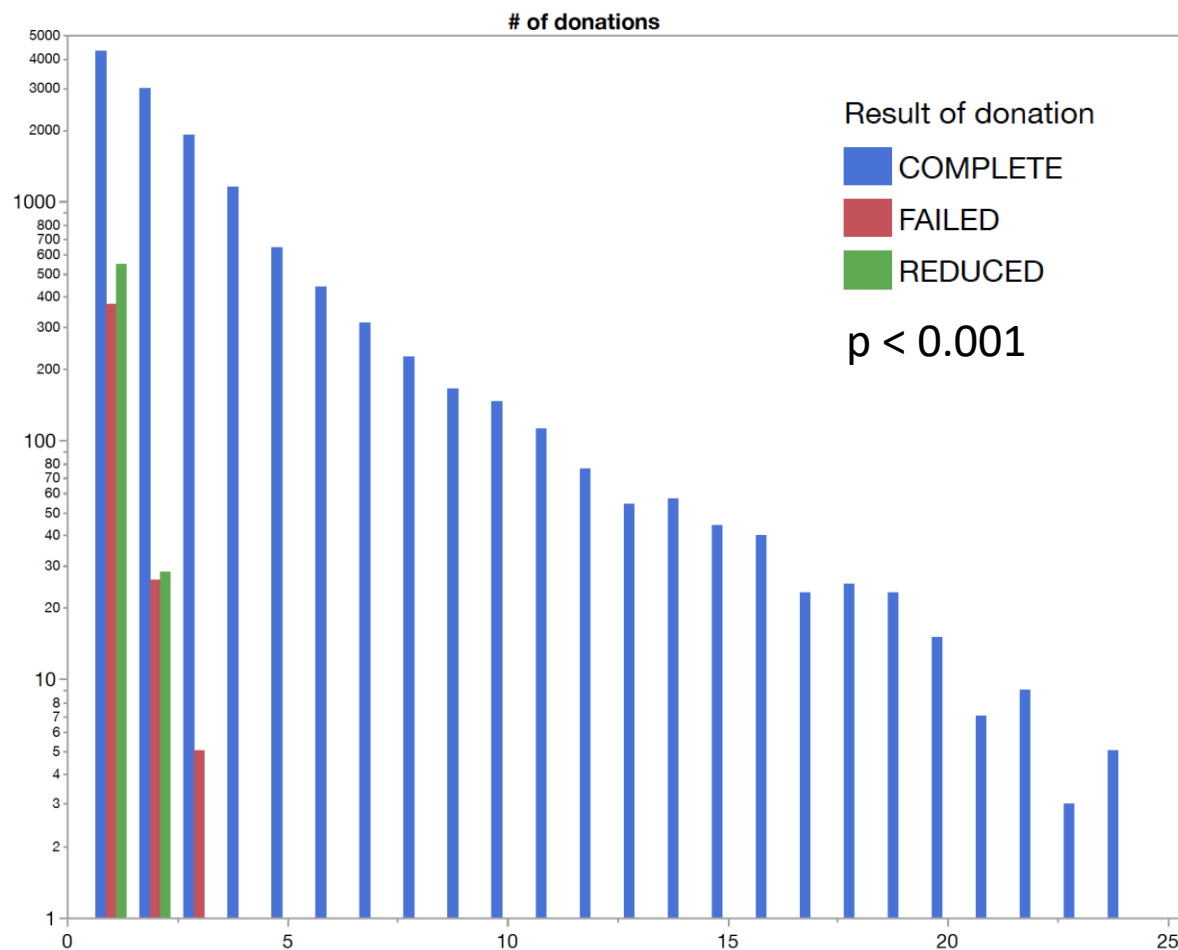
Single center



Why are you donating plasma?

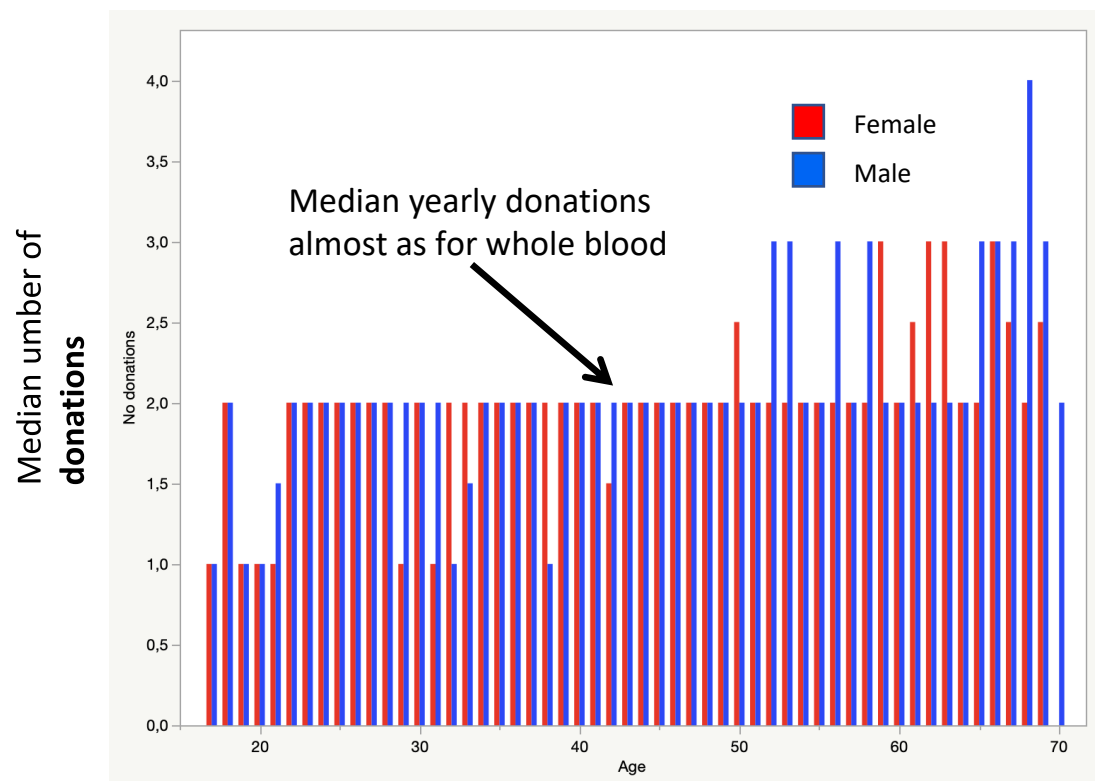


You never get a second chance to make a first impression...



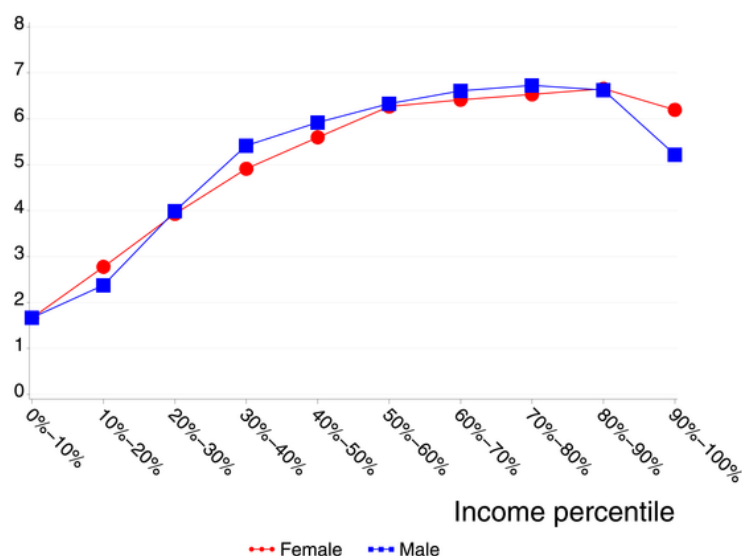
- Competency of personnel
- Failure rate of instruments
- Careful donor selection

Median Frequency of Plasma Donations Single center

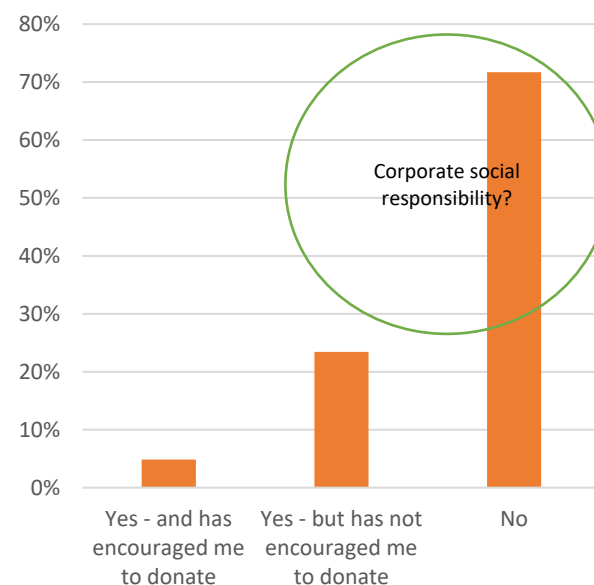


VNRDonors are well off – and most likely busy

Prevalence of blood donors (%)

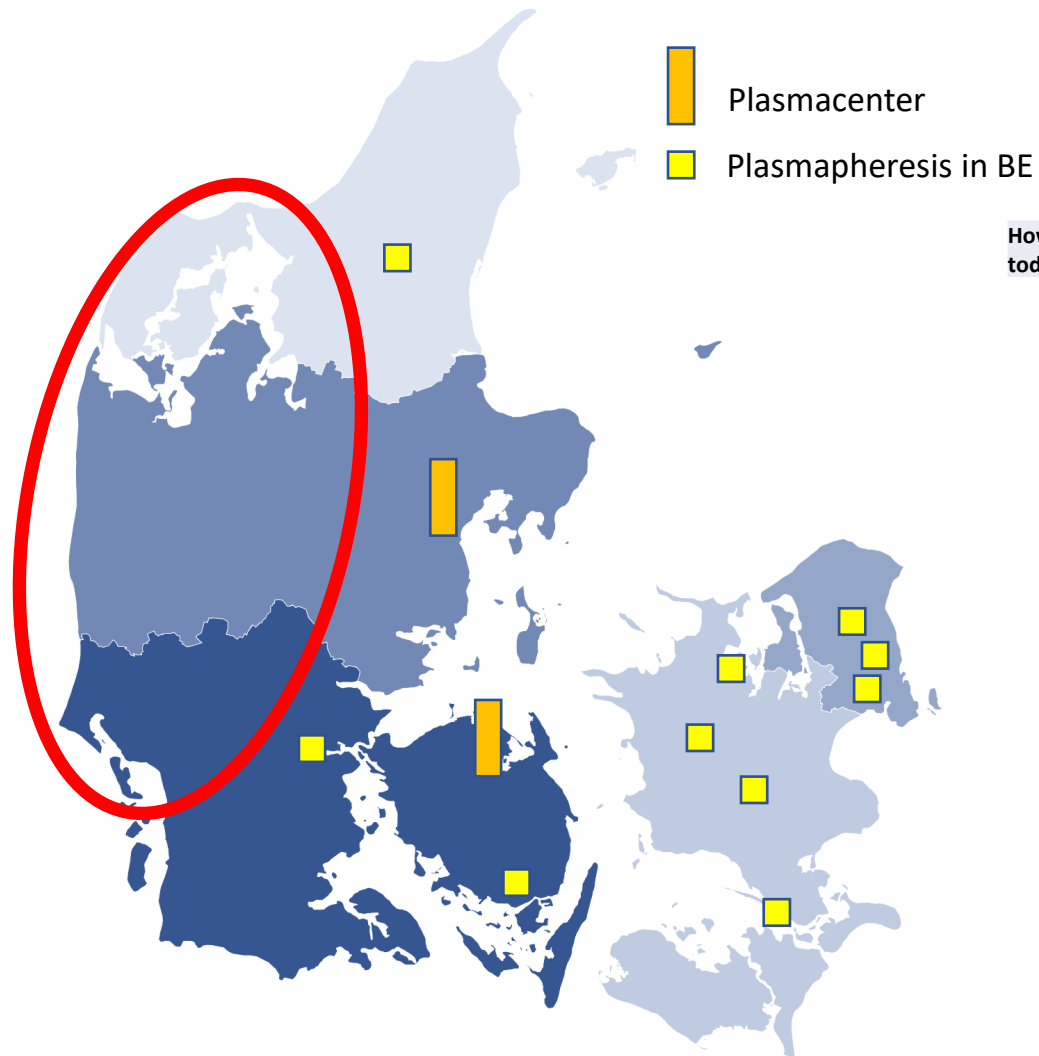


Does your employer allow you to donate during working hours?

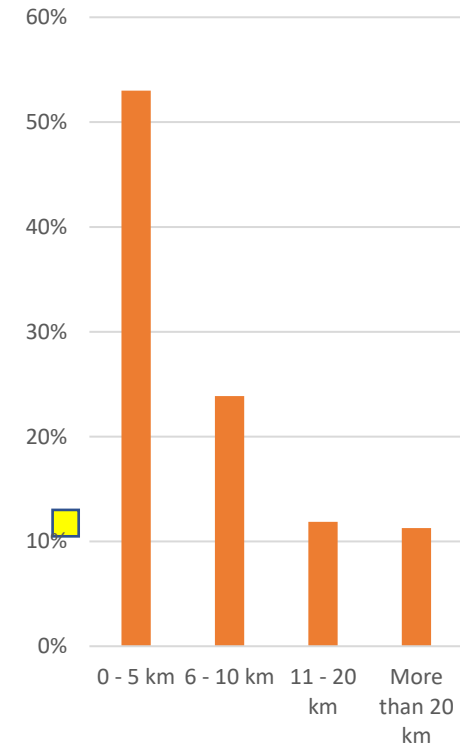


Burgdorf KS, Simonsen J, Sundby A, Rostgaard K, Pedersen OB, et al. (2017) Socio-demographic characteristics of Danish blood donors.
<https://doi.org/10.1371/journal.pone.0169112>

Plasma collection in the 5 regions

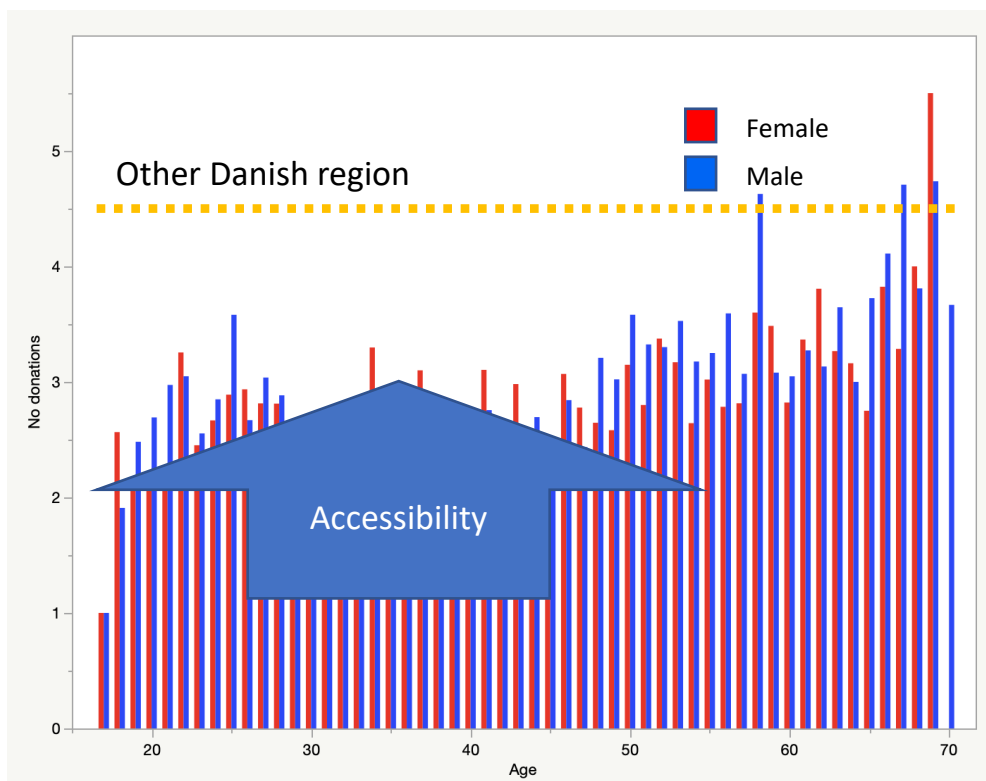


How far did you have to travel for the plasma center today?

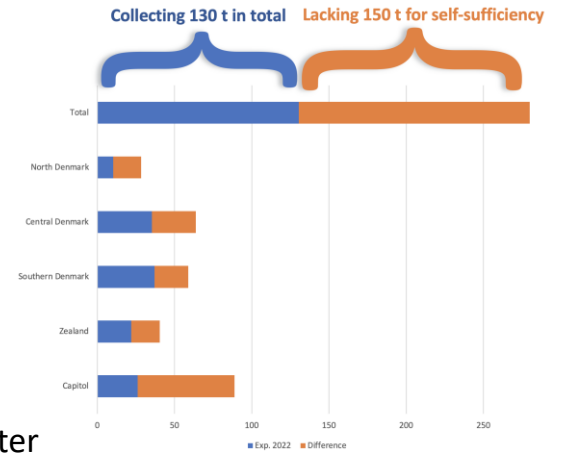
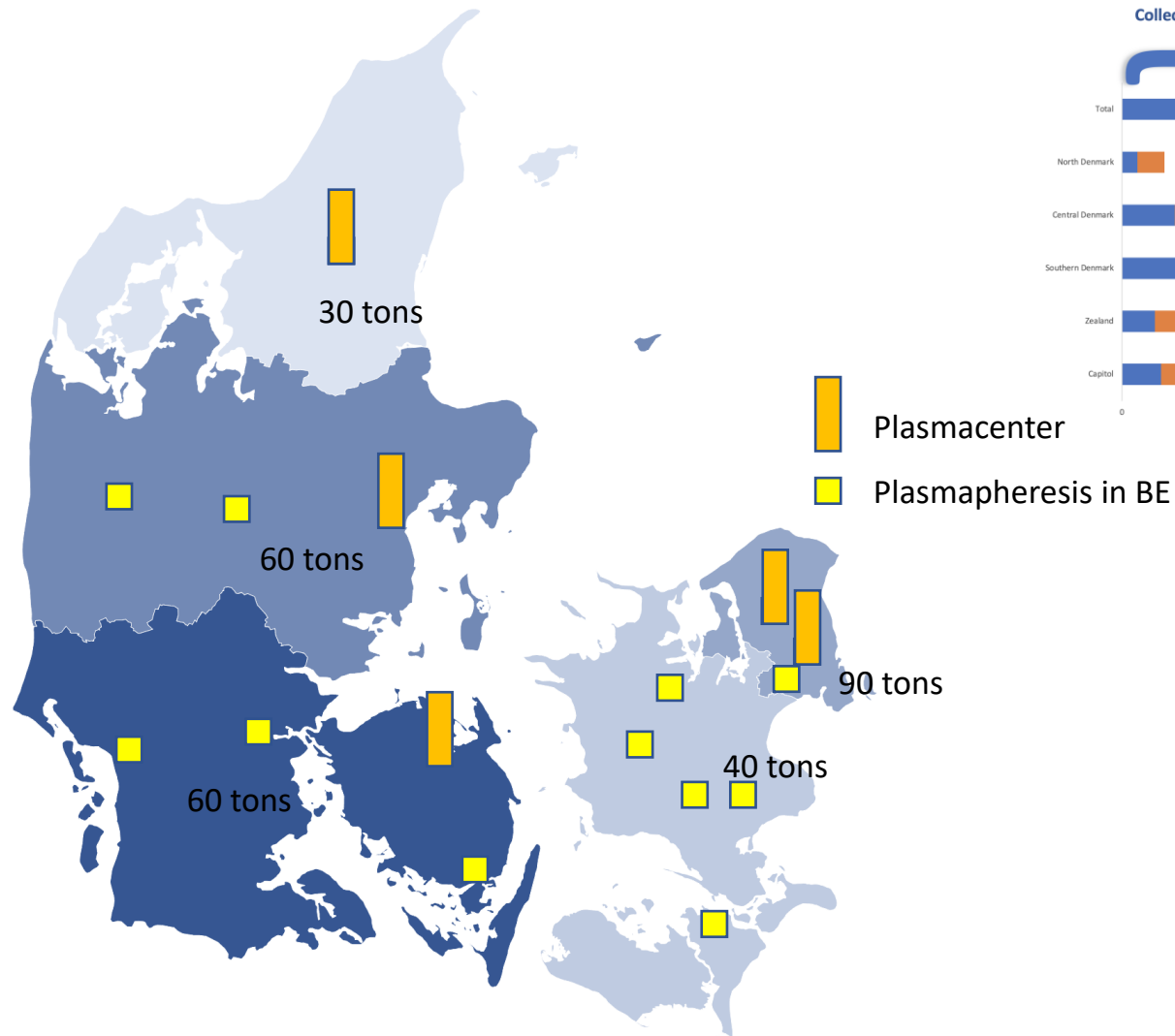


Mean donation frequency Single center

Mean
number
of
donations



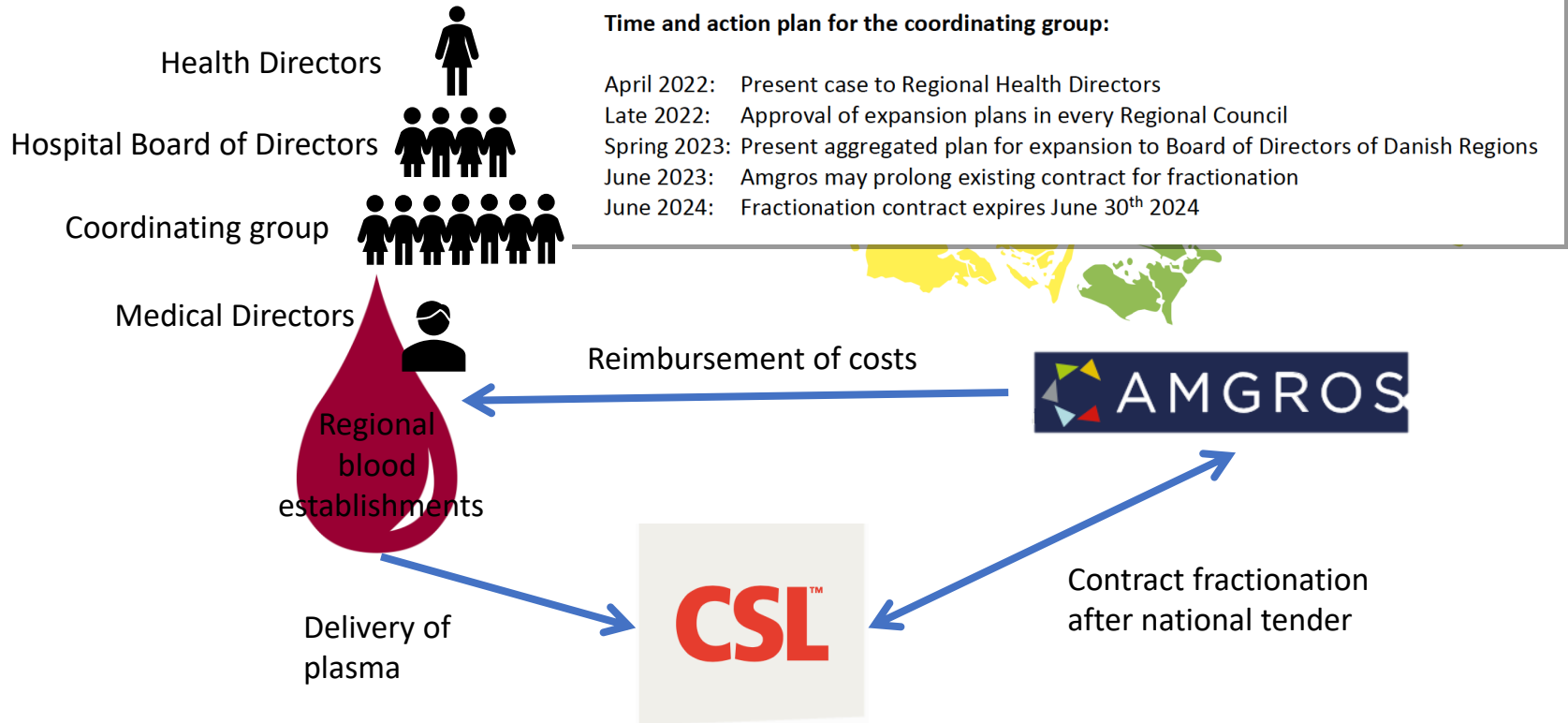
Future Plasma Collection Sites?



Decision making in a political system



The five regions



In conclusion – the Danish road from here

Recruitment and retainment of donors

- Encourage the donor organisations to increase recruitment
- Communicate the medical need and ease of donation to the public
- Increase the awareness of plasma donation as part of Corporate Social Responsibility

Facilitation of donor access to plasmapheresis sites

- Expand the number and geographical distribution of plasmapheresis sites
- Accelerate this process through lobbying of patient and donor organisations

National tender: Contract fractionation

- Encourage AMGROS to include both IVIG and SCIG to consolidate self-sufficiency
- Challenge the Medisanus vs. Slovenia ruling in the next national tender
- Give priority to fractionators with higher IG yields
 - ie. 4 -> 5 g / kg plasma

