INTERCEPT® Blood System for Platelets, pathogen reduction system
Operational Efficiencies Gained

Realize operational efficiencies from donor to patient

The INTERCEPT Blood System for Platelets can streamline operations through the replacement of specific tests and procedures. Resulting efficiencies can be gained with the INTERCEPT Blood System for Platelets throughout the donor-transfusion chain while providing significant clinical benefits via the proactive reduction of transfusion transmitted infections (TTIs).

Operational Efficiencies Gained

**Component Processing**

Produce two therapeutic doses from a single INTERCEPT Dual Storage (DS) Processing Set.

**Infectious Disease**

Lower the risk of bacterial contamination with robust, broad spectrum inactivation.

**Storage**

Reduce platelet wastage by allowing early release when compared to initial bacterial culture detection.

**Transfusion**

Reduce TTI, including sepsis, as well as the potential for transfusion-associated-graft-versus-host disease (TA-GVHD) in platelet components.

For CONTRAINDICATIONS, WARNINGS, and REFERENCES, see inside pages. See package insert for full prescribing information.
INTERCEPT Blood System for Platelets, pathogen reduction system

Achieve cost savings, increase productivity

Efficiencies gained with the INTERCEPT Blood System for Platelets translates to potential savings as demonstrated by:

- **Lower risk of microbial contamination**
  - INTERCEPT offers the potential to replace bacterial detection methods, including point of issue testing, with its ability to reduce the risk of bacterial contamination of platelets and sepsis.¹ This enables blood centers and hospitals to avoid costs associated with bacterial testing, labor and platelet waste due to potential false positive results.⁹

- **Increased productivity**
  - Double-dose pathogen reduction treatments enable blood centers to amortize INTERCEPT Dual Storage (DS) Processing Set costs over more than one therapeutic unit through double dose apheresis collections, decreasing costs per kit by 50%.¹
  - Unlike early bacterial culture detection, the INTERCEPT Blood System for Platelets may allow immediate accessibility of units with release of product on day one. Early platelet release provides added flexibility for managing inventory, and enables hospitals to attain fresher platelets.

- **Reduced treatment costs with reduced occurrence of TTI and TA-GVHD**
  - The INTERCEPT Blood System for Platelets reduces TTI, including sepsis.¹ It also potentially reduces the risk of TA-GVHD.¹ This can result in reduced costs associated with treatment, re-calls and follow-up investigations.¹³

Streamline operations while reducing the risk of TTI and potentially reducing TA-GVHD with the INTERCEPT Blood System for Platelets

Contact a Cerus representative today.

GLOBAL HEADQUARTERS | 2550 Stanwell Drive | Concord, CA US 94520 | 855.835.3523
www.cerus.com | www.intercept-usa.com

Rx only. There is no pathogen inactivation process that has been shown to eliminate all pathogens. Certain non-enveloped viruses (e.g., HAV, HEV, B19 and poliovirus) and Bacillus cereus spores have demonstrated resistance to the INTERCEPT process. For CONTRAINDICATIONS, WARNINGS, and REFERENCES, see inside pages. See package insert for full prescribing information.
**CONTRAINDICATIONS**

Contraindicated for preparation of platelet components intended for patients with a history of hypersensitivity reaction to amotosalen or other psoralens.

Contraindicated for preparation of platelet components intended for neonatal patients treated with phototherapy devices that emit a peak energy wavelength less than 425 nm, or have a lower bound of the emission bandwidth <375 nm, due to the potential for erythema resulting from interaction between ultraviolet light and amotosalen.

**WARNINGS AND PRECAUTIONS**

Only INTERCEPT Processing Sets for platelets are approved for use with the INTERCEPT Blood System. Use only the INTERCEPT INT100 Illuminator for UVA illumination of amotosalen-treated platelet components. No other source of UVA light may be used. Please refer to the Operator’s Manual for the INT100 Illuminator. Discard any platelet components not exposed to the complete INT100 illumination process.

Tubing components and container ports of the INTERCEPT Blood System contain polyvinyl chloride (PVC). Di(2-ethylhexyl) phthalate (DEHP) is known to be released from PVC medical devices, and increased leaching can occur with extended storage or increased surface area contact. Blood components will be in contact with PVC for a brief period of time (approx. 15 minutes) during processing. The risks associated with DEHP released into the blood components must be weighed against the benefits of therapeutic transfusion.

Pulmonary events: Acute Respiratory Distress Syndrome (ARDS)

INTERCEPT processed platelets may cause the following adverse reaction: Acute Respiratory Distress Syndrome (ARDS)

An increased incidence of ARDS was reported in a randomized trial for recipients of INTERCEPT processed platelets, 5/318 (1.6%), compared to recipients of conventional platelet components (0/327). Monitor patients for signs and symptoms of ARDS.
References

5. AABB, Standards for Blood Banks and Transfusion Services, in Process Control 2014, AABB: Bethesda, MD.