

Elevate Patient Care with **INTERCEPT[®] - Treated Platelets**

Join the >80% of Leading US Cancer Hospitals.¹

INTERCEPT[®] Blood System for Platelets Pathogen Reduction System

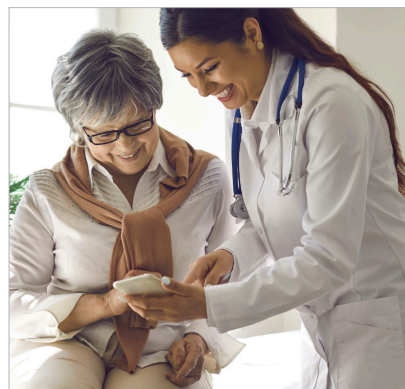
Instill Patient Confidence with INTERCEPT® Platelets

Leukemia and lymphoma patients undergoing cytotoxic chemotherapy and hematopoietic stem-cell transplantation (HSCT) are highly susceptible to bacterial and viral infection risks given their neutropenic state.² Platelet transfusions pose a risk to these patients due to potential for bacterial contamination, which may lead to sepsis; residual leukocytes (cytokines) in donated platelets may increase risk of pulmonary injury.³⁻⁶ Though antibiotic prophylaxis is often used to manage the risk, it does not always provide comprehensive coverage.⁷

INTERCEPT® pathogen reduced platelets (INTERCEPT Platelets) help protect patients by reducing bacterial contamination risk and offering safety beyond bacteria through the inactivation of viruses, protozoans, and leukocytes.*

Help maximize success in patient treatment with reduced transfusion-transmitted infectious (TTI) risk

- Reduce the risk of platelet contamination which could jeopardize critical procedures.
- Lower transfusion-transmitted infection risk due to bacteria, including sepsis, both of which may be associated with prolonged hospital length of stay.⁸
- Reduce septic reaction risk, including delayed reactions, which require follow up;^{4,9} gives greater assurance when discharging patients.
- Help reduce risks associated with leukocytes in platelet components.⁹
- Support antibiotic/antimicrobial stewardship.



“With such a large immunosuppressed patient population, I think there’s tremendous advantages to using pathogen reduced platelets where the patients are already severely at risk of opportunistic infections.”

Deva Sharma, MD
Hematologist
Vanderbilt University Medical Center



“We chose pathogen reduction because safety is our priority. We serve patients in our cancer center, as well as neonatal and pediatric patients, and want to make sure our products are safe for such vulnerable patients.

Pathogen reduction not only minimizes transfusion transmitted infections, but you get platelet products sooner; you don’t need to wait for bacterial testing and there’s no need to irradiate. It can be used immediately.”

Dr. María De Los Angeles Muñiz
Pathologist, Transfusion Medicine Dept
Robert Wood Johnson University Hospital

Expand patient access with earlier availability of INTERCEPT® Platelets

- Potentially receive platelets sooner and ready for transfusion with the avoidance of bacterial testing product holds.¹⁰
- Maintain continuity of patient care by helping to ensure platelet transfusions remain safe and accessible to patients during outbreaks or epidemics.^{11,12}

Administer platelets confidently with an FDA-approved alternative to irradiation and CMV testing

- Reduce risk of CMV infections and transfusion-associated graft versus host disease (TA-GVHD).⁹

“INTERCEPT® Platelets are a valuable enhancement to our blood supply. In addition to the increased confidence in the safety of the platelet supply, pathogen reduced INTERCEPT® Platelets have given our center the flexibility to release platelet units on Day 1, which has been essential during critical platelet shortages.”

Alyssa Ziman, MD
Medical Director
Transfusion Services, UCLA

Join the 80% of Leading US Cancer Hospitals that use INTERCEPT® Platelets¹

Ask your Blood Bank about INTERCEPT® Platelets

“I saw the devastation that bacterial contamination could cause. It was something that I wanted to make sure would never happen again. When I learned that INTERCEPT® Platelets were available, it was a no-brainer to me to say, okay, we need to adopt this technology.”

Mary Berg, MD
Medical Director
Transfusion Services
University of Colorado Hospital

“By implementing INTERCEPT® Pathogen Reduced Platelets we’ve been able to streamline our inventory and avoid costs associated with related TTIs, sepsis or TA-GVHD. We only need one inventory to treat all our patients, and no longer need to worry about CMV serology and irradiation. Overall, INTERCEPT Platelets have driven efficiencies across our institution.”

Jennifer Andrews, MD, MSc
Medical Director Blood Bank
Vanderbilt University Medical Center

*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.

References

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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.



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