



HOSPITAL-ACQUIRED INFECTIONS:

Was it the Platelets?

**Conventional platelet products
present the most significant
infectious risk in transfusion
medicine today.¹**

cerus 



Bacterial Infection: Under-recognized and Under-reported

Conventional Platelet Issues:

- **Susceptible to bacterial contamination**
 - Room temperature storage facilitates bacterial growth
 - Sensitivity of primary bacterial culture is only 26-44%²⁻⁴
 - Utility of secondary bacterial testing is constrained by its limit of detection^{5,a}
- **Sepsis and infections** attributed to platelets are under-reported due to passive surveillance.⁶
- **Hospital-acquired infections** are associated with platelet transfusions.⁷
- **Colonized central lines** can be caused by contaminated platelets.⁸

**Reduce your patient's risk of
transfusion-associated sepsis**



Emerging Pathogens: Is a Reactive Approach Enough?

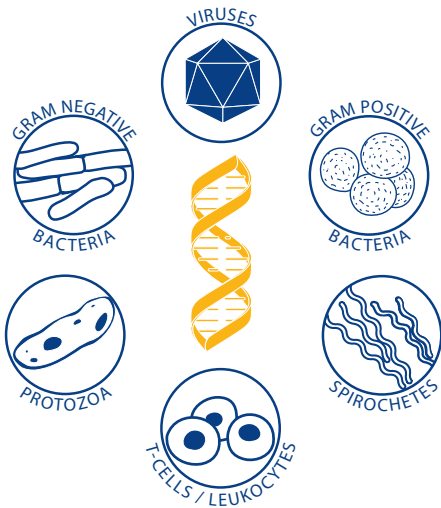
Conventional Testing Issues:

- **Not proactive.** Tests take a long time to develop once the pathogen has been identified.^{9,10}
- **New pathogens** threaten blood safety due to evolution, travel, migration, and environmental changes.^{9,11,12}
- **Mosquito and tick-borne pathogens, existing or emerging, are on the rise.**^{13,14}
- **Availability of commercially-approved screening tests is limited or non-existent.**^{12,15}

**Be proactive, not reactive,
against emerging pathogens**

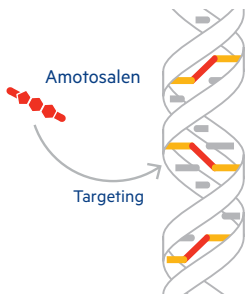
INTERCEPT Platelets:

- Proven to reduce the risk of sepsis¹⁶⁻¹⁸ and offer safety beyond bacteria by proactively targeting viruses, protozoans, leukocytes.^{19*}
- Delivered to hospitals transfusion-ready, potentially with longer shelf life than conventional platelets²⁰ due to elimination of certain tests and procedures.



Proven efficacy against over
40 clinically-relevant pathogens^{19*}

Mechanism of Action:



Amotosalen:

A photoactive psoralen-derivative targets nucleic acids and docks between the base pairs.

Exposure to UVA light activates amotosalen to form covalent bond crosslinks to DNA and RNA



UVA Illumination




Crosslinks render pathogens inactive by inhibiting transcription, translation, and replication of DNA and RNA

**Choose Transfusion-Ready
Platelets. Today.**

INTERCEPT[®] Blood System for Pla

Proven Safety and Efficacy in Routine Use for Over 15 Years

Zero cases of bacterial septic transfusion reactions (STR) and deaths reported in national hemovigilance data with INTERCEPT Blood System pathogen reduced platelets^{16-18*}





HV Program ^b	Conventional Platelets STRs (Deaths) Years Studied	INTERCEPT Platelets STRs (Deaths) Years Studied
 France ¹⁷	53 (9) 2006-2017	0 (0) 2006-2016
 Switzerland ¹⁸	16 (3) 2005-2018	0 (0) 2011-2017
 Belgium ¹⁶	7 (0) 2009-2016	0 (0) 2009-2015

^b 2005-2018 French, Swiss and Belgian hemovigilance data, over 3 million conventional and >800K INTERCEPT platelet units transfused to patients of all ages.

Pediatric Experience: >1300 neonate and pediatric patients in 11 countries have been transfused with >9000 INTERCEPT Platelets with no unexpected AEs.²⁵⁻²⁷

Redefining the Standard of Care for Blood Safety

INTERCEPT is an integral part of US blood policy

RISK	GUIDANCE OR STANDARD
 Bacterial Contamination	<p>FDA Draft Guidance: Recommends PR or 'enhanced' bacterial testing.^{1, 21}</p> <hr/> <p>PRT eliminates the need for primary and secondary testing, including rapid testing.</p> <hr/> <p>AABB Standard 5.1.5.2:²² Requires methods to detect bacteria or use PRT in platelet components.</p> <hr/> <p>PRT can be used as in place of bacterial detection.</p>
 Zika Virus and Babesia TTI	<p>FDA Guidance for Zika lists PRT as an option for mitigating Zika TTI risk.^{24b}</p> <hr/> <p>FDA Guidance for Babesia: Recommends testing, import or PR in active Babesia areas.²³</p> <hr/> <p>PR can be used in place of Zika or Babesia testing for platelet and plasma components.^b</p>
 CMV TTI	<p>AABB Standard 5.19.2:²² Policy requires to reduce the risk of CMV</p> <hr/> <p>INTERCEPT PRT fulfills AABB Standard 5.19.2.</p>
 TA-GVHD ^c	<p>PRT is FDA approved as an alternative to gamma irradiation for prevention of TA-GVHD.¹⁹</p> <hr/> <p>AABB Standard 5.19.3.1:²² Requires either irradiation or PRT to reduce the risk of TA-GVHD.</p>

^a Transfusion-Transmitted Infection

^b Data for pathogen reduction of ZIKA by the INTERCEPT Blood System, pathogen reduction system, have not been submitted for FDA review.

^c Transfusion-Associated Graft versus Host Disease

INTERCEPT[®] Blood System for Plasma

- ✓ FDA approved, CE marked
- ✓ Over 15 years in routine use in >200 blood centers and >30 countries
- ✓ Kits sold to produce >6 million INTERCEPT treated units
- ✓ Zero cases of transfusion-transmitted sepsis or TA-GVHD in over 800,000 monitored transfusions^{16-18,25,28-30}
- ✓ No increase in TRALI or adverse events^{28,30}
- ✓ Proactive strategy against known and unknown pathogens^{31*}
- ✓ No increase in utilization of platelets or RBCs²⁸
- ✓ No patient/population restrictions^{19**}

You can reduce the risk of transfusion-transmitted infection for your patients.

Committed to blood safety for your patients

Cerus Founder: Laurence Corash, MD



“I had a very personal motivation to found Cerus. In 1982 we had an epidemic of HIV in San Francisco. We had no tests; we had not even isolated the virus yet. I had 300 patients who acquired HIV infections

from blood transfusions that I personally had ordered for them. That was my motivating commitment to try to do something to improve the safety of blood transfusion.”



Listen to Dr. Corash describe the journey to improve blood safety.

<http://bit.ly/2FgWjPs>

*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.

** 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, PRECAUTIONS and CONTRAINDICATIONS, see package insert included with this material or visit the website link below to view and download current package inserts and additional resources.

INTERCEPT-USA.com/resources
or <http://bit.ly/2Fgc6hm>



The INTERCEPT® Blood System for Platelets
Pathogen Reduction System

FOOTNOTES and REFERENCES:

- a) Minimum of 1000 bacterial colony forming units/mL
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**Reduce Risk for
Your Patients with
the INTERCEPT® Blood System
for Pathogen Reduced Platelets**

Cerus is your partner
in proactive blood safety.

Contact us to learn how
your patients can receive
INTERCEPT Platelets today.



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