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2.

sizes the BKA25 should be considered. Though we have not used this machine for cryoprecipitate recovery the capacity will certainly be in excess of 10 kg (ie 1000 litres plasma pool).

Clean removal of the paste is likely to be even more difficult with the BKA25, hence provision of a proper facility for this must be a priority item.

## 4. FVIII EXTRACTION

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The vibromixer agitator (E2) operates in the range 10-150 litres. The extract volume is approximately 4.2 litres/100 litres plasma, hence capacity here is substantial.

## 5. A1(OH) 3 ADSORPTION

The key point here is removal of the gel. This is done by centrifugation and filtration. Five bucket centrifuges are available for this, but with only a 15 minute centrifugation time then the machines could be sequenced for multiple use. With appropriate phasing of these centrifuges and the clarifying filtration then about 40 litres of extract could be handled in the time available (Note: a reduction in the extraction time from 30 mins to 5 mins seems likely with the E2 agitator). Extra equipment (eg bell filters) may be needed to cope at this scale (eg 950 litres plasma).

## 6. FILTRATION AND DISPENSING

15 litre containers are currently in use (350 litres plasma) and 20 litre and 30 litre vessels are available. It should be possible to provide larger containers if necessary.

The time taken for these operations may become an important factor. This totals approximately 1 hour/10 litres of product for a 30 ml fill.

#### 7. FREEZE DRYING

#### 7.1 Leybold Heraeus

The limit here is a condenser capacity of 12 litres. This limit has been reached with the current pool size (300 kg plasma, gross) giving almost 12 litres of solution dispensed.

# 7.2 Usifroid

With the current 100 ml vial then space is the limiting factor. About 650 vials can be accommodated giving a maximum dispensed volume of 19.5 litres for a 30 ml fill. This would result from a plasma pool volume of about 450 litres.

If the PFC vial is replaced by the Elstree vial and if 2 extra shelves can be fitted then 950 vials could be accommodated from 28.5 litres of solution and a plasma pool volume of about 650 litres.

## 7.3 DRYING CYCLE

The current cycle is 3-4 days. The moisture content of the product must be less than 2% (E.P. monograph) however we do not know the lower limit necessary for stability. We do not know our routine moisture levels from our current cycle. To achieve full use of the driers the optimal moisture content (and drying cycle) should be determined.

## 8. CONCLUSION

The limiting factor on both plasma pool size and frequency of processing will be freeze drying capability.

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The Leybold Heraeus is limited to a plasma pool of 300 kg (gross) while the Usifroid will meet a pool size of about 500 kg (gross). The smaller FVIII vial may allow the pool size to be increased to 700 kg (gross) for the Usifroid.

The drying cycle of 4 days is a major limitation and the <u>best</u> that can be achieved may be 6 loads per drier per month. Allowing 3 loads for FIX concentrate (and FVII) then perhaps only 6 Usifroid and 3 Leybold loads will be possible per month for FVIII. Even this may have to be reduced if holding of the dispensed vials at  $-40^{\circ}$ C (in G86) is to be avoided.

Hence with the present vial, PFC capacity is limited to 975 kg plasma/week for Factor VIII recovery; this could be increased to 1275 kg/week if the smaller vial is introduced. This would give an annual capacity of 50-55,000 kg/year FFP. To meet the Scottish trends (66,000 kg/year) <u>plus</u> NBTS FFP we therefore require to increase both the number and size of our freeze driers. A partial solution to this problem would be to achieve a smaller fill volume (eg 200 iu FVIII in a 10 ml fill using 30 ml vials); this option would involve a yield penalty and would require a development decision by SNBTS (and NBTS).