Viral nucleic acid was detected in the repository sample of the donation, but

transfusion is unlikely to have caused infection* (voluntary report)

Viral genotypes, etc. were different

between the concerned donor and the

recipient



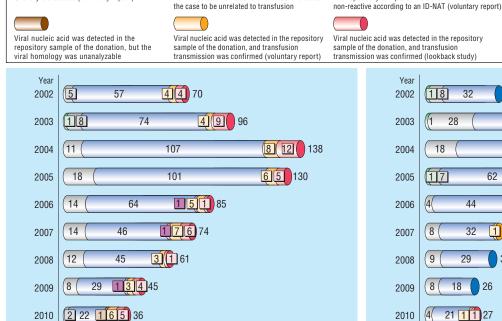
Unanalyzable cases (voluntary report)

Infectious Cases of Probably Related to Transfused Blood Components (2011)

JRCS analyzed and evaluated suspected transfusion transmitted viral and other infectious cases reported voluntarily by medical institutions to JRC blood centers and lookback study cases based on post-donation information. In 2011, thirteen cases of HBV infection and one case of human parvovirus B19 were confirmed by a positive viral nucleic acid test on a repository sample of the donation involved. One case of *Streptococcus dysgalactiae* subsp. *equisimilis* (Group G hemolytic streptococcus) was confirmed by the bacterial culture test using the relevant blood bag in suspected bacterial infection cases.

The Number of Cases Reported to JRC Blood Centers and/or Examined in Response to Post-donation Information on Suspected Transfusion-transmitted Infections, and the Results of Analysis [HBV and HCV infections] (2002 to 2011)

The repository sample of the donation was

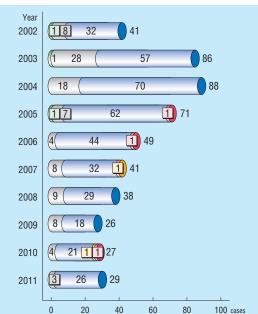


* In cases of confirmed transfusion transmission, one case for each of the years 2002, 2003, and

2008 was a fatal case of fulminant hepatitis.

Both medical institutions and JBCS evaluated

The number of suspected transfusion transmitted HBV cases reported by medical institutions (recipients who tested positive for HBV markers after transfusion) and the results of analysis



The number of suspected transfusion transmitted HCV cases

for HCV markers after transfusion) and the results of analysis

reported by medical institutions (recipients who tested positive

Summary of Case Reports (Transfusion transmission confirmed cases in which viral nucleic acid or bacteria was detected in the repository sample and/or relevant component of the concerned donor) (2011)

150 cases

[HBV]

2011

Voluntary reports: Cases reported by medical institutions

8 18 1 6 7 40

| Case | Primary disease | Blood component (year and month of blood collection) | ٨٠٠ | Cav | Pre-transfusion test | | | Post-transfusion test [▲] | | | ALT | | Recipient's sample |
|------|-------------------------------------|---|-------|-----|---------------------------------|--------|-----------------------|------------------------------------|--------|-------------------------|-------------------|-------------------------|--------------------|
| no. | | | Age S | Sex | Test items | Result | Period to transfusion | Test items | Result | Period from transfusion | Maximum (IU/L) | Period from transfusion | Pre-transfusion |
| 1 | Dissecting aortic aneurysm | FFP-LR (2009.11) | 80s | F | HBV-DNA, HBsAg, HBsAb, HBcAb | Neg. | 0 day | HBV-DNA | Pos. | 26 wks | 359 | 21 wks | Unavailable |
| 2 | Trauma due to a traffic accident | FFP-LR* (2010.2) | 20s | М | HBsAg, HBsAb, HBcAb | Neg. | 0 day | HBV-DNA | Pos. | 17 wks | • | • | Available |
| 3 | Acute myeloid leukemia | PC-LR* (2010.7) | 80s | М | HBsAg, HBcAb | Neg. | 24 days | HBsAg | Pos. | 29 wks | • | • | Available |
| 4 | Aortic valve stenosis, etc. | FFP-LR (2010.6) | 80s | F | HBsAg, HBsAb, HBcAb | Neg. | 31 days | HBsAg | Pos. | 19 wks | 503 | 20 wks | Available |
| 5 | Chronic heart failure | FFP-LR-Ap (2010.7) | 50s | М | HBsAg | Neg. | 5 days | HBV-DNA | Pos. | 26 wks | 2022 | 27 wks | Available |
| 6 | Uterine myoma | FFP-LR (2010.11) | 30s | F | HBsAg, HBsAb, HBcAb | Neg. | 15 days | HBsAg | Pos. | 13 wks | • | • | Available |

[^]Test results at medical institutions (on the day of the positive test result) ◆ No increase in ALT or no comparative data available

^{*}The relevant donation had tested negative for HBV-DNA, but the donor had a positive conversion at HBV screening in the subsequent donation

Post donation information: Cases reported by medical institutions based on lookback studies of positive conversion of a repeat donor

| Case no. | Case | Primary disease | Blood component (year and month of blood collection) | Ago | Sex | Pre-transfusion test | | | Post-transfusion test [♠] | | | ALT | | Recipient's sample |
|-------------|------|-------------------------------------|---|-----|-----|---------------------------------|--------|-----------------------|------------------------------------|--------|-------------------------|------|-------------------------|--------------------|
| | no. | | | Aye | SEX | Test items | Result | Period to transfusion | Test items | Result | Period from transfusion | | Period from transfusion | Pre-transfusion |
| | 7 | Chronic renal failure | RCC-LR (2009.12) | 50s | М | HBV-DNA, HBsAg, HBsAb, HBcAb | Neg. | 0 day | HBV-DNA | Pos. | 64 wks | • | • | Unavailable |
| | 8 | Pancreatic head carcinoma | RCC-LR (2011.5) | 70s | М | HBsAg | Neg. | 0 day | HBsAg | Pos. | 13 wks | • | • | Available |
| | 9 | Idiopathic thrombocytopenic purpura | Ir-PC-LR (2011.5) | 60s | F | HBsAg, HBsAb, HBcAb | Neg. | 10 days | HBV-DNA | Pos. | 14 wks | • | • | Unavailable |
| | 10 | Mitral valve insufficiency | FFP-LR** (2009.2) | 70s | М | HBsAg | Neg. | 18 days | HBV-DNA | Pos. | 20 wks | 2034 | 19 wks | Unavailable |
| | 11 | Aplastic anemia | Ir-PC-LR (2011.9) | 70s | М | HBV-DNA, HBsAg HBsAb, HBcAb | Neg. | 2 days | HBV-DNA | Pos. | 9 wks | • | • | Available |

^{**} Blood components derived from the same blood donor of the possible case of voluntary report No.2

OPost-donation information: Case reported by a medical institution based on lookback studies of the donor's health information

| 12 | Hypopharyngeal cancer | RCC-LR (2011.3) | 60s | М | HBV-DNA, HBsAg HBsAb, HBcAb | Neg. | 6 days | HBV-DNA | Pos. | 13 wks | • | • | Available |
|----|-----------------------|--------------------|-----|---|--------------------------------|------|--------|---------|------|--------|---|---|-----------|
|----|-----------------------|--------------------|-----|---|--------------------------------|------|--------|---------|------|--------|---|---|-----------|

Post-donation information: Case reported by the medical institution that had supplied the red cell concentrate derived from the same donation of the possible case of voluntary report no.4

| 13 | Ovarian tumor | RCC-LR | 40s | F | HBV-DNA, HBsAg Neg. | Neg. 1 day | HBV-DNA Pos. | 12 wks | • | | Available | |
|----|----------------|----------|-----|---|---------------------|--------------|--------------|------------------|--------|---|-----------|-----------|
| 13 | Ovarian tunion | (2010.6) | 405 | ' | HBsAb, HBcAb ¦ ' | vey. | i uay | TIDV-DIVA FUS. | 12 WKS | • | 1 | Available |

[Human parvovirus B19]

OVoluntary reports: Cases reported by medical institutions

| (| Case | Primary disease | Blood component (year and month of blood collection) | | e Sex | Pre-transfusion test | | | Post-transfusion test [♠] | | | Recipient's sample | Donor's information | |
|---|------|--|---|-----|-------|--------------------------|--------|-----------------------|------------------------------------|--------|----------------------------|--------------------|-------------------------------------|--------|
| | no. | | | Age | | Test items | Result | Period to transfusion | Test items | Result | Period from transfusion | Pre-transfusion | Test item | Result |
| | 1 | Pregnancy with previous cesarian section | Ir-RCC-LR (2011.6) | 30s | F | IgM-B19-Ab IgG-B19-Ab | Neg. | 0 day | IgM-B19-Ab IgG-B19-Ab | Pos. | 19 days | Available | B19-DNA IgM-B19-Ab IaG-B19-Ab | Pos. |

Symptoms such as fever were observed in the above cases, followed by recovery.

[Bacteria]

Voluntary reports: Cases reported by medical institutions

| Case | Primary disease | Blood component | A | 0 | · · | sfusion blood culture | Sympto | Recipient's | |
|------|-----------------|-------------------------|-----|-----|---|---|--|--|----------|
| no. | | of blood collection) | Age | Sex | Blood component | Recipient's blood | Major complaint | Expression time (after administration) | outcome |
| 1 | Aplastic anemia | Ir-PC-LR (2011.8) | 80s | M | Streptococcus dysgalactiae subsp. equisimilis (Group G hemolytic streptococcus) | Streptococcus dysgalactiae subsp. equisimilis (Group G hemolytic streptococcus) | Chill, fever, hypotension, hypoxemia | Approx. 60 min. | Recovery |

[^]Test results at medical institutions (on the day of the positive test) ◆ No increase in ALT or no comparative data available

Number of times that the nucleic acid amplification test (NAT) was performed and the frequency of positive samples (Aug. 2004 to June 2012) (Pooled Size of samples: 20-pool samples)

The table below describes the number of positive NAT results against donated blood samples with seronegative results (HBsAg: Negative; HBcAb: Negative; HCV-Ab: Negative; HIV-1- and HIV-2-Abs: Negative; ALT level: Normal).

| Toot paried | Number of tested | Number of positive Nat confirmed by ID-NAT (frequency) | | | | | | |
|-----------------------|------------------|--|-----------------------------|-----------------------------|--|--|--|--|
| Test period | sample | HBV | HCV | HIV | | | | |
| Aug.2004 to Jul.2008 | 18,514,278 | 334 (1:5.5×10 ⁴) | 32 (1:5.8×10 ⁵) | 11 (1:1.7×10 ⁶) | | | | |
| Aug.2008* to Jun.2012 | 19,853,083 | 371 (1:5.4×10 ⁴) | 15 (1:1.3×10 ⁶) | 7 (1:2.8×10 ⁶) | | | | |

^{*}Changed reagents and apparatuses for NAT

In case any of adverse reactions and/or infections related to transfusion of blood components or administration of plasma derivatives, please notify the medical representatives of your local JRC blood center immediately. Please provide the residual products, the recipient's pre- and post-transfusion samples, and any other related materials; it is helpful to investigate and/or identify the cause. For storage of residual products and the recipient's samples, refer to the "Guidelines for lookback studies of blood products."

Online Haemovigilance Information for Healthcare Professionals

URL http://www.jrc.or.jp/mr/english/

Issued by:

Medical Information Division, Blood Service Headquarters, Japanese Red Cross Society

1-1-3, Shiba Daimon, Minato-ku, Tokyo 105-8521, Japan

The homology of the viral genome partial sequences was confirmed using a recipient sample and repository sample of the donor.
Because parvovirus B19 spreads through respiratory secretion, a source of infection other than transfusion was also considered.

^{*} For more information, please contact the medical representatives of your local JRC blood center.