



Peripheral Hematopoietics Stem Cells Collection by Large Volume Leukapheresis (LVL) in Children

HSCT unit - Children's Hospital – Damascus - Syria

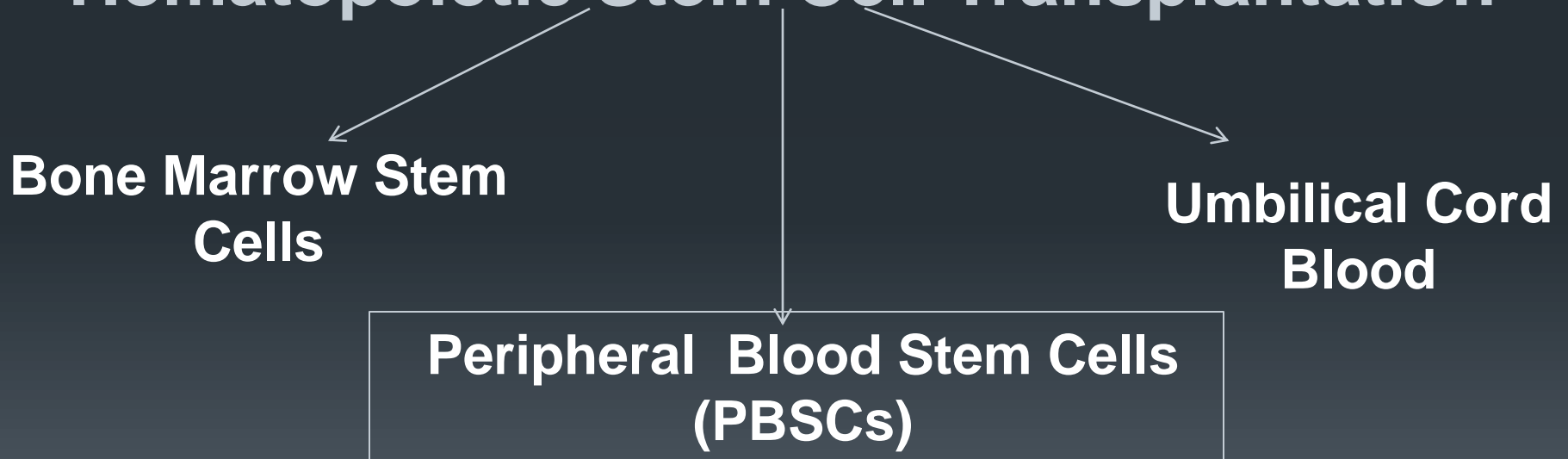
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Hematopoietic Stem Cell Transplantation Terminology

~~Bone Marrow Transplantation~~

Hematopoietic Stem Cell Transplantation



Background

Peripheral blood progenitor cells (PBPCs) have become the preferred source of stem cells for autologous transplantation because of:

- Easier accessibility
- Rapid engraftment

Background

- Experience with PBPCs collection in children, specially in very small ones, is still limited because of potential problems which are specific to children:
 - Vascular access difficulties
 - Low total blood volume (TBV)
 - Long duration of procedure: sedation?

Large Volume Leukapheresis (LVL)

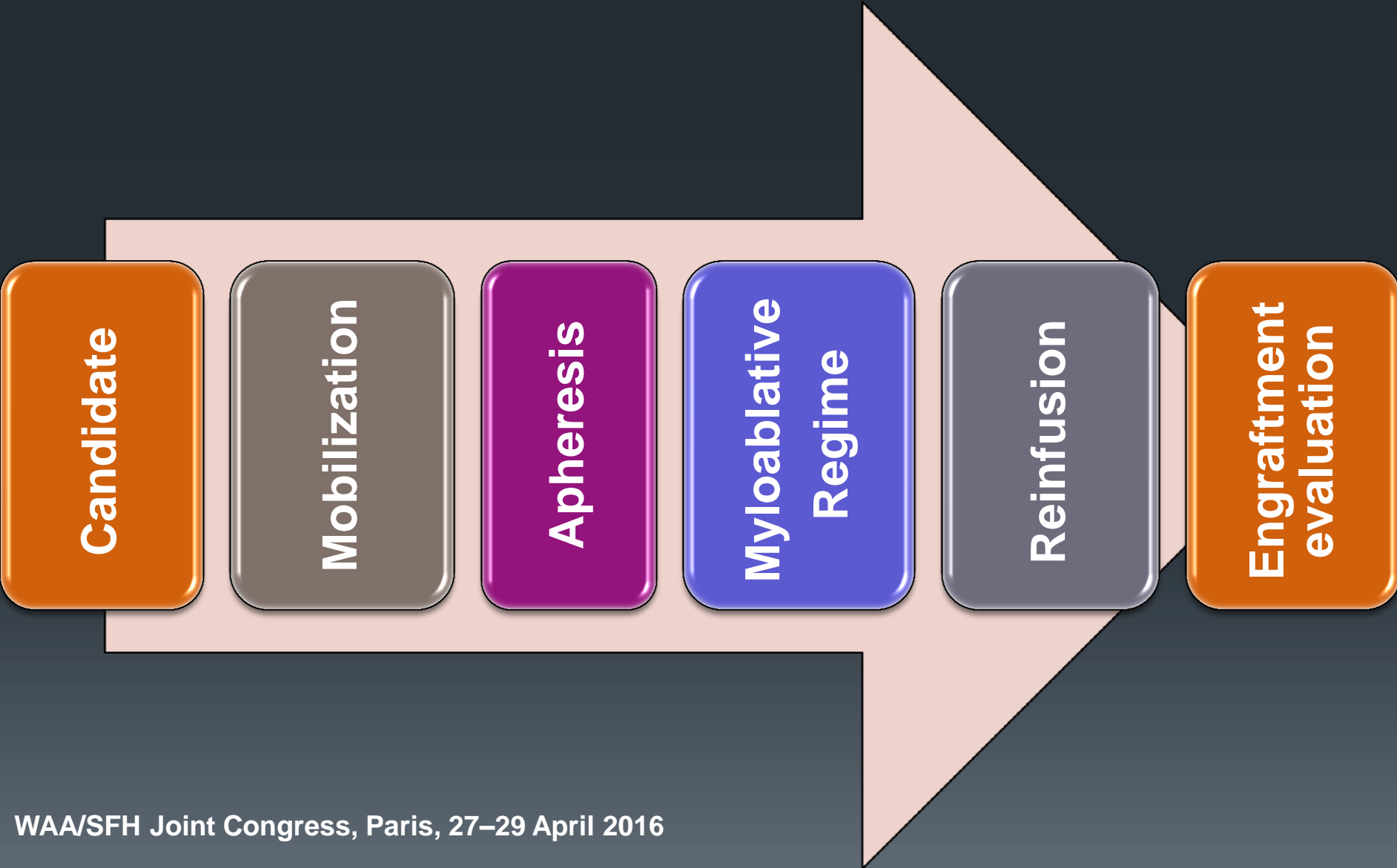


- In large volume leukapheresis (LVL) three or more blood volumes are processed in the same procedure.
- LVL is warranted in pediatric patients to decrease the number of procedures and potentially decrease tumor contamination

Aim of the study

**Evaluation the efficiency and safety of the
PBSCs collection by LVL in children for
auto-transplantation**

Process of HSC Auto-Transplantation



Materials and Methods

Sep 2014 - April 2016

HSC unit Children” Hospital - Damascus University - Syria

Patients ' Characteristics

N. patients (M/F)		7 (4/3)
Mean Age (year)		6.1 (4.4-9)
Mean Weight (kg)		18.5 (14-25)
Diagnosis	N.B IV / NHL	6 / 1
CV catheter	Femoral / Subclavian	6 / 1

Mobilisation

- Mobilization with GCS-F (10 µg/ kg for 3 days and 10 µg/ kg x2 the 4th day)
- The collection was performed at day 5
- Blood counts daily

Leukapheresis

- Spectra Optia MNC v.3.4,(Cardian BCT) was used with automatic interface management (AIM)
- Anticoagulant: acid citrate dextrose ACD-A + heparin(3000 u in 500 ml)
- AC infusion rate (ml/min/l TBV)= 08-1.2
- Inlet :AC ratio 1/30
- Priming with ABO RhD compatible, Phynotyped, irradiated, and leuko- filtrated RBC was necessary for 2 patients (28.5%)
- Monitoring continuously of vital signs, EKG and O2 saturation
- No sedation was needed

PBSC Collection Unit



PBSC Collection Unit



PBSCs Collection Targets



- Apheresis goals were the same in all children : to collect a dose of at least 2.5×10^6 CD34+ cells/kg body Weight.

Yield Calculation

- Complete blood counts of the PBSCs harvest using a hematology analyzer
- Cell Viability assessment
- CD34+ count was done by FACscalibur according to ISCHAGE protocol using BD reagents.

Results-LVL Procedures

	Mean	Min	Max
Age (Years)	6.1	4.4	9
Weight (kg)	18.5	14	25
N. Apheresis	1	1	1
TBV (ml)	1470	1120	1976
Whole blood processed (ml)	4938	3985	5863
Blood volume processed (ml/kg)	270	223	318
No of TBV processed	3	3	4
ACD used to patient	234	137	379
Collected Volume(ml)	128	77	179
Time(min)	222	181	285

The Harvesting Day

CBC & CD34 ⁺ Count		Mean	Min	Max
Peripheral Blood	WBC (x10 ⁹ /L)	35.5	8.1	55
	Hct (%)	34	28	40
	MNC (x10 ⁹ /L)	4.6	0.8	8.2
	Plt (x10 ⁹ /L)	197	116	333
	CD34 ⁺ /μL	168.8	53	300

Apheresis Product

CBC & CD34+ Count	Mean	Min	Max
WBC(x10⁹/L)	118	27.2	210
MNC (x10⁹/L)	77.4	9.9	146
Hb (g/dl)	0.6	0.13	1.2
Plt (x10⁹/L)	1155	800	1872
CD34+ (/μL)	1295.9	640	2390

CD34+ Yield



CBC & CD34+ Count	Mean	Min	Max
Yield of MNC (x10⁸/ kg)	4.79	0.65	4.89
Yield of CD34⁺ cell (x10⁶/ kg)	8.8	4.57	14.79

Engraftment Kinetics

	Median (Day)	Min	Max
P.N > 0.5x10⁹/L	10.7	8	14
Plt > 20x10⁹/L	15.1	11	18

Blood Transfusion Need

Blood Component	Mean	Min	Max
N. of RBC transfusion	1.1	1	2
N. of CPA Transfusion	4.9	3	7

Complication

- No complication was observed during the collection sessions
- Mean platelet loss was 50%, but platelet transfusion was not required in any patient

x10⁹/l	Mean	Min	Max
Plt before	197.1	116	333
Plt after	96.4	55	144
Plt in collection bag	1155	800	1872
Collection Volume	128	77	179
Collection phase N	7	4	9
Plt loss	50%	37.8%	64%

Results Of Our Experiences



Conclusion

- PHSC collection using apheresis is a safe and convenient procedure that can be carried out in children with relative ease
- We achieved the desired yield of **CD34+** **>4x10⁶/kg** in all patients by **one apheresis** procedure using large volume :
 - economical, psychological effects