

Rapid curation of a robust, recallable donor pool of CMV seropositive donors for delivery of RUO and GMP LeukoPACs™ to an international CDMO

INTRODUCTION

The monoclonal antibodies (mAbs) daratumumab, and elotuzumab have been approved by the US Food and Drug Administration for treating multiple myeloma (MM) in 2015. Although clinical responses have been promising, most patients' disease eventually progresses [1]. One of the potential anti-tumor mechanisms of mAbs in MM patients is antibody-dependent cellular cytotoxicity (ADCC) which is mediated by natural killer (NK) cells. NK cells are activated when the Fc portion of an antibody (bound to target tumor cell) binds their Fc receptor (FcγRIIIa or CD16a) and triggers activation, degranulation, and tumor killing [2-3].

In efforts to enhance ADCC and tumor killing, researchers have identified a novel, relatively rare subset of human NK cells with increased ADCC activity following NK Fc receptor crosslinking [4-5]. This special NK cell subset is only detectable at levels of 3 - 10% of total NK cells in only 25 - 30% of cytomegalovirus (CMV) seropositive individuals [6]. In order to utilize this specific NK cell subset as potential MM therapy, our client has developed an expansion method to allow scale up and manufacturing of these unique NK cells as an off-the-shelf, allogeneic cell therapy. To obtain these NK cells, our client needed a robust supply of fresh leukopaks from CMV seropositive donors.

OrganaBio was able to meet the client's unique needs to rapidly provide PBMCs from 100 CMV+ donors for screening and donor qualification, to subsequently draw RUO and GMP LeukoPACs from selected donors, and to ship fresh leukopaks to the client's CDMO in Singapore.

PROJECT OVERVIEW

The client reached out to OrganaBio about a multi-phase project pertaining to extensive CMV seropositive donor screening for IND (investigational new drug) application-enabling work. For the initial phases of the project, the client required PBMC vials from leukapheresis of 100 unique CMV seropositive donors for testing. Later phases of the project included collections of whole fresh RUO and GMP leukopak from donors identified to meet phenotypic and functional requirements of the client.

To rapidly screen donors while minimizing cost to the client, the OrganaBio team suggested whole blood draws from donors as opposed to full leukapheresis collections. The minimal blood draw allowed donors to return sooner for a full collection (due to an 8-week deferral period between leukapheresis procedures) and was a cost-effective way for the client to screen and select donors. Donor recruitment, screening, and sample collections were performed by OrganaBio's wholly-owned leukapheresis subsidiary, **HemaCenter, LLC**.



PROJECT MANAGEMENT

Utilizing our dedicated project manager, the project was managed cross-functionally by coordinating OrganaBio's Sales, Process Development, and Operations teams and **HemaCenter** staff, and timely updates were provided to the client via bi-weekly meetings to maintain clear, comprehensive, and timely communications. In addition, a project management software was regularly updated by the different departments at OrganaBio, and the client was able to follow project progress at any time, view all donor attributes and sample characteristics, and note which donors were critical to their process.

Product		Product Lot	SKU #			
LeukoPAC™-FRESH-4WHL		0001-P03	LXP-FB-001			
Product is for preclinical research use only. Donors are consented and collections are performed under IRB-approved protocols. Not intended for direct use in humans or for in vitro diagnostic use. Product contains human source material; treat as potentially infectious and take appropriate precautions.						
Product Information						
State of Manufacture	10MAAY2022					
Estimated Product Volume (Includes Anticoagulant)	153 mL					
Estimated Total Viable Cell Count	1.08 × 10 ¹⁰ cells					
Viability	98.2 %					
Sterility	Pending					
Storage Conditions	Process immediately					
LeukoPAC Immunophenotype Characterization						
CD3 ⁺	CD34 ⁺	CD31 ⁺	CD34 ⁺	CD3 ⁺	CD3 ⁺ CD4 ⁺	CD3 ⁺ CD8 ⁺
40.67 %	11.63 %	12.30 %	11.12 %	63.63 %	43.30 %	29.87 %
Data reported for information only. After immunophenotype results derived from the whole CD3 ⁺ gated population. CD34 ⁺ and CD34 ⁺ derived from the CD3 ⁺ gated population.						
LeukoPAC Collection Information						
Donor Number	0001					
Unit Control Number (UCN)	0001-P03					
Date of Collection	10MAAY2022					
Collection Start Time	10:21 AM					
Collection End Time	01:23 PM					
Total Blood Volume Processed	9073 mL					
LeukoPAC CBC Results						
White Blood Cells	73.45 × 10 ³ / µL					
Red Blood Cells	0.30 × 10 ¹² / µL					
Hematocrit	2.0 %					
Platelets	1984 × 10 ³ / µL					
Neutrophils	1.35 × 10 ³ / µL					
Lymphocytes	60.85 × 10 ³ / µL					
Only reported on information only. Testing performed on adherent product and results reported directly from a fully automated differential hematology analyzer.						
Donor Information						
Age	35					
Sex	Male					
Race	White					
Ethnicity	Non-Hispanic					
BAR	25.0					
Blood Type	AB+					
Smoking Status	Non-smoker					
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LeukoPAC™-FRESH-4WHL		0001-P03	LXP-FB-001
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Donor Serological and Infectious Disease Screening			
Test	Pre-screening Result	Collection Day Result*	
Human Immunodeficiency Virus (HIV 1/2 plus O)	Non-reactive	Pending	
Hepatitis B Virus (HBV)	Non-reactive	Pending	
Hepatitis C Virus (HCV)	Non-reactive	Pending	
HTLV-1/2	Non-reactive	Pending	
Syphilis	Non-reactive	Pending	
CMV	Non-reactive	Pending	
T. cruzi	Non-reactive	Pending	
HBV/HCV NAT	Non-reactive	Pending	
West Nile Virus NAT	Non-reactive	Pending	
Antibody Screen	Negative	Pending	
EBV	Positive	N/A	
*Results reported from a peripheral blood sample drawn on the day of adherent collection. If pre-screen results were reactive for CMV or positive for EBV, testing is not repeated for the collection day blood sample. Donor eligibility was determined according to 21 CFR Part 1271.			
Donor HLA Typing			
Gene	Allele 1	Allele 2	
HLA-A	24:02:01G	04:01:01G	
HLA-B	27:02:02G	44:02:01G	
HLA-C	01:02:01G	07:04:01G	
HLA-DPA1	01:01:01G	11:01:01G	
HLA-DQB1	02:02:01G	*N/N/N	
HLA-DQA1	01:01:01G	*N/N/N	
HLA-DDB1	01:01:01G	*N/N/N	
HLA-DDB2	01:01:01G	*N/N/N	
HLA-DDB3	01:01:01G	*N/N/N	
HLA-DPA2	04:01:01G	04:01:01G	
HLA-DPA3	01:01:01G	01:03:01G	
Results are reported from a peripheral blood sample drawn for pre-screening. *N/N/N denotes testing was negative. N/A indicates typing not performed.			
Approved By:		16May2022 Date	
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Each LeukoPAC is accompanied by a comprehensive Certificate of Analysis (CoA). CoAs are included with all OrganaBio products, including tissues, blood, and isolated cells.



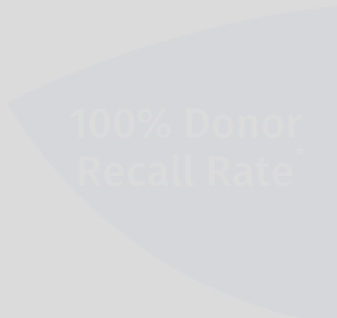
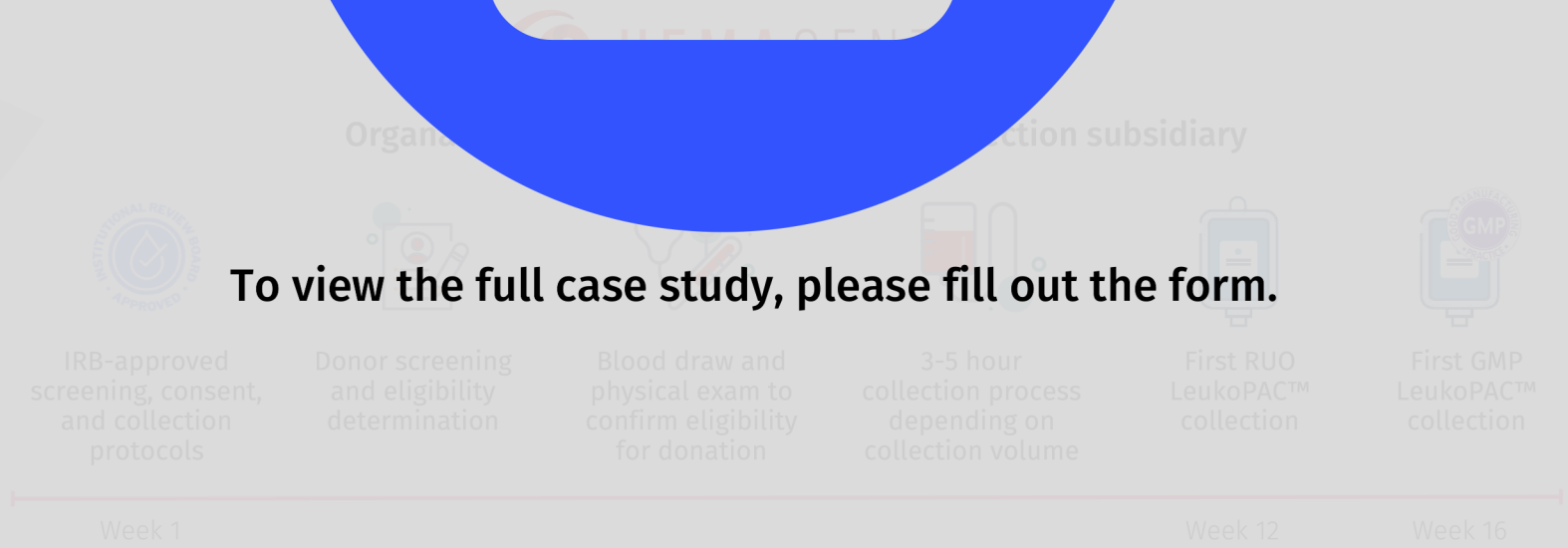
DONOR SCREENING, SELECTION, AND MANAGEMENT

PBMCs were isolated from whole blood samples using a standard protocol, and the client was provided with 25 million PBMC vials from each donor. The client then shipped directly to the client for their use. The client then shipped 25 million PBMC vials were shipped by a third-party screening laboratory selected by the client. The client's third-party lab streamlined logistics and reduced costs and accelerated time to market.

The client analyzed data from the project to select donors who best fit their target patient profile. Based on the results, OrganaBio was able to provide sizes of 100 million PBMCs for additional testing. Level of donor recall rate of 11.8% compared to a prior rate of only 5% when working with other vendors.



To view the full case study, please fill out the form.



* Data reported for this project at the time of report publication.

LEUKOPAK COLLECTION

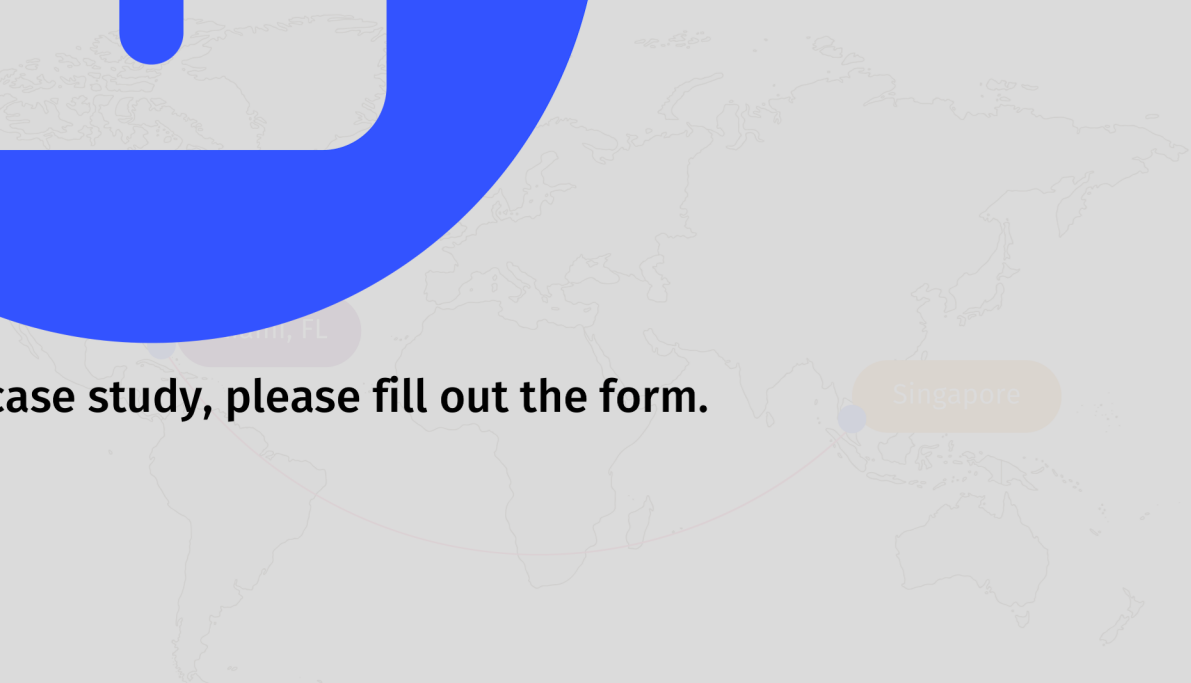
Using a ranked critical donor list, the client and OrganaBio successfully completed leukopak collections and shipment to the client's CDMO in Singapore, initially at 2-8°C in a validated NanoCool shipper. The client received the leukopak upon receipt, paving the way for shipment of the leukopak to the CDMO for manufacturing across the globe from Miami to Singapore. In addition to validating shipment of the leukopak, OrganaBio scheduled the client's preferred donor as well as a backup donor to ensure the leukopak collection occurred at the optimal timepoints. Given the logistics of shipment to Singapore and CDMO manufacturing, the leukopak was not delayed or delayed due to a donor issue.

Although the first GMP leukopak collection was scheduled to occur on a federal holiday to meet the CDMO timelines, OrganaBio successfully scheduled a recallable donor for the collection. OrganaBio completed the procedure and delivered the leukopak on time to the client's CDMO in Singapore. Given OrganaBio's proven international air logistics, OrganaBio has successfully delivered several RUO and GMP leukopaks to Singapore to meet the client's timelines.

Fresh LeukoPACs were shipped at 2-8°C in a validated NanoCool shipper



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CONCLUSIONS & ACHIEVEMENTS

The client and OrganaBio worked towards a mutual goal of supporting the client's efforts to a Singapore CDMO facility to support manufacturing of IND-enabling studies. Our team provided donor screening and curation of a reliable, recallable donor pool according to the client's specifications. Due to the success of the project, the client has extended the scope to screen more donors and is now beginning to procure GMP LeukoPACs for manufacturing of their NK cell therapy product.

Because OrganaBio's donor relationship process, the client was guaranteed an easy transition from R&D to GMP use, saving them time and money in screening new donors for GMP use. Together, we successfully delivered high quality fresh GMP LeukoPACs to support the client's manufacturing timelines, with OrganaBio delivering high quality fresh GMP LeukoPACs to the world.



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OrganaBio



OrganaBio cGMP
Manufacturing Facility
2420 NW 116th St, Suite 300
Miami, FL 33167

Coming Q2 2023
Opening a new office in SoCal

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Reference

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