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# **Analysis Comparing Standard Photopheresis (SP) and Modified Photopheresis (MP)**

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# Definition and Process

- Photopheresis
  - WBCs collected
  - 8-MOP added
  - WBCs exposed to ultraviolet-A light (UVA)
  - Treated WBCs are re-infused



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# Proposed Mechanism of Action

- Induces apoptosis of treated MNCs
    - Eliminates overactive allogeneic T-lymphocytes
    - Decreases T-cell proliferation
    - Induces proliferation of autologous regulatory T-cells ( $T_{reg}$ ) in the patient
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# Purpose of the Study

- Validate clinical practice
  - Determine, compare and contrast collection efficiency and cellular contents of 2 methods:
    - Products collected directly using the Therakos UVAR-XTS [Standard Photopheresis (SP)]
    - MNCs collected using the COBE Spectra, then secondarily UV-irradiated using the UVAR-XTS [Modified Photopheresis (MP)]
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# Methods

	<b>Standard Photopheresis (Therakos UVAR-XTS )</b>	<b>Modified Photopheresis (Spectra + XTS)</b>
<b>No. of Procedures</b>	<b>10</b>	<b>8</b>
<b>Gender</b>	<b>Female (2) Male (1)</b>	<b>Female (3)</b>
<b>Median Age (years)</b>	<b>Female (43) Male (41)</b>	<b>Female (48)</b>
<b>Access</b>	<b>Central Line (1) Peripheral Vein (2)</b>	<b>Central Line (3)</b>
<b>Diagnosis</b>	<b>Lung Transplant Rejection</b>	<b>cGVHD, s/p PBSC Transplantation</b>

Legend: cGVHD, chronic graft-versus-host disease; PBSC, peripheral blood stem cell; s/p, status/post

# Results

	Standard Photopheresis	Modified Photopheresis
TBV processed	3 Liters	4-6 Liters
Product vol. (mL)	275 ± 19	170 ± 57*
Total MNC (10 <sup>9</sup> )	1.21 ± 0.78	2.82 ± 1.13*
Granulocyte (%)	58 ± 21	31 ± 15*
Platelets (10 <sup>10</sup> )	5.5 ± 3.0	2.3 ± 2.2*
Total red cells (mL)	7.1 ± 1.7	5.2 ± 0.8*
Irradiation time (min)	34.7 ± 7.6	29.0 ± 3.9

- \* **p < 0.05**
- 5-mL samples of MNC concentrates had CBCs determined using the Beckman Coulter LH 750 Analyzer with automated differentials

# Conclusions

- Modified photopheresis (MP)
  - Collects significantly more MNCs with less granulocytes, platelets and RBC contamination.
  - For patients with post-PBSC cGVHD, MP is an alternative way to achieve *similar* therapy as the Therakos UVAR-XTS with once per week procedures.
- There were no significant differences in the irradiation times of the 2 methods.
- Other clinical outcome variables remain for future studies (e.g., MP was not performed in patients with lung transplant rejection; clinical benefits of irradiating MP-derived MNC contents remain to be established; effects of the number of MNCs treated on T<sub>reg</sub> cells induced in the patient).