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Annual Report 2019

The life of EFS in figures

This publication presents the key figures for 2019, illustrating all the activities of FFS and its actors. The key figures concerning donors and donations, blood collections, blood components issued, vigilance reporting, quality control, medical and transfusion biology, research and technology transfer, products for use in laboratories. teaching and research, and the social data report highlight the effectiveness of EFS' operations. Because nothing would be possible without you, the donors, partners, employees, healthcare institutions, blood donor associations and stakeholders, all united to give substance to our raison d'être. Life.

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The life of our donors

1,610,173 donors in 2019

of which:

1.321.791 known donors. i.e. 82.09%

288,382 new donors, i.e. 17.91%

The number of donors (1.610.173), for all donation types, is down slightly by 0.82% compared with the previous year (1,623,494 donors in 2018).

39.7% of known donors

in 2018 gave blood again in 2019.

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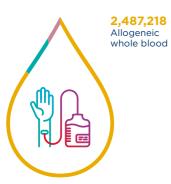
Collections

per donation type in 2019

(not including granulocytes and autologous)

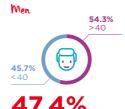
99.636 **Platelets**

338,284 Plasma



(all donations including 271 granulocytes)

Women 46.3% >40 53.7% **52.6%**



PLASMA/ 897,735 LITRES OF PLASMA ISSUED TO THE FRENCH FRACTIONATION AND BIOTECHNOLOGIES LABORATORY (LFB), I.E. +0.9% COMPARED WITH 2018.



380,716

applicants who did not donate in 2019 (out of 3,306,125 applications),

up

compared with 2018

Age pyramid of donors in 2019

(not including autologous blood donation) **TOTAL DONORS** 5,941 8,880 14.821 70+ 65-69 32,402 43,359 75,761 60-64 50,939 64,239 115,178 55-59 66.131 74.734 140.865 50-54 74.761 77.763 152.524 84,164 79,701 45-49 163.865 78.289 65.559 40-44 143.848 35-39 81.386 64.683 146,069 77,625 65,597 30-34 143.222 91,677 70,065 161,742 25-29 20-24 142.879 101.030 243.909 18-19 60,899 47,470 108,369

Number of female donors O

As every year, 20-24 year-olds account for the highest proportion of the donor population (16.88% for women and 13.25% for men. respectively).

This may be explained by blood drives at universities. However, their average annual donation is among the lowest: 1.45% for women and 1.61% for men.

Number of male donors

GENEROSITY/ 3.69%, LEVEL OF GENEROSITY (DONORS AS A PROPORTION OF THE POPULATION OF DONOR AGE).

1.82

average number

of donations per donor



1.63 blood donations 2.59 plasma donations 2.39 platelet donations

I.e.

Average number of donations:

2,925,409

1,610,173 donors

1.92

for known donors and

1.33 for new donors **COLLECTION**/ 53, AVERAGE NUMBER

OF DONATIONS PER MOBILE COLLECTION UNIT.

MOBILE COLLECTIONS



1,971,968 donations in 2019

of which:

1,971,919

Plasma

FIXED SITES

(not including granulocytes)



953,170 donations in 2019

of which:

515,299 Whole blood

338,235

Compared with 2018, a reduction in collections of whole blood was observed in 2019, essentially from mobile collection units. Collections from fixed sites increased slightly, in line with EFS' global strategy.

Donations that save lives

2,925,422 procedures in 2019. down by compared with 2018 (i.e. -1.4%).

FOCUS/ 2019 COLLECTIONS, DOWN COMPARED WITH 2018, EXCEPT IN THE CASE OF AUTOLOGOUS COLLECTIONS (+33%) AND APHAERESIS COLLECTIONS OF RBCC/APC/PLASMA (+12.4%).

DONATIONS OF WHOLE BLOOD

2,487,230

A decrease of -1% compared with 2018.

Of which

2,487,218 allogeneic

collections **(-1%)**

And

autologous collections (+33%)

APHAERESIS DONATIONS

438,192

collections in 2019

A decrease of -3.4% compared with 2018. There is a contrasted evolution from one donation type to the other.

339,265

aphaeresis (down 1.5% due to the reduction in plasma collections)

Of which

Plasmaphaeresis: 338,284 (-1.5%)

Platelet aphaeresis: 710 (-13.9%)

Granulocytes: 271 (-18.9%) 98,927

(down 9.5% due to the reduction in "APC/ plasma" aphaeresis)

Of which

APC/plasma: 96,137 (-10%)

> APC/RBCC: 81 (-8%)

RBCC/APC/plasma: 2,709 (+12.4%)

Quality control of our LBP

Red blood cell concentrates

Their active ingredient is haemoglobin. The RBCC must contain at least 40g of haemoglobin (Hb).

The average haemoglobin content of the RBCC prepared by EFS in 2019, with a compliance rate of:

99.4%

Aphaeresis platelet concentrates

attenuated to pathogenic agents by Intercept treatment (APC-IA)

Their active ingredient is the total quantity of platelets. APC-IA must contain at least 2.0×10^{11} platelets.

 4.5×10^{11}

platelets, the average platelet content of the APC-IA prepared by EFS in 2019, with a compliance rate of:

99.8%

Pooled platelet concentrates

attenuated to pathogenic agents by Intercept treatment (PPC-IA)

Their active ingredient is the total quantity of platelets. PPC-IA must contain at least 2.0 x 1011 platelets.

3.5 x 10¹¹

platelets, the average platelet content of the PPC-IA prepared by EFS, with a compliance rate of

100%

Residual leucocyte content in cellular I BPs

10

In terms of leucocyte reduction, the minimum percentage of compliant units stipulated by regulations is:

97%

All of the RBCC. APC-IA and PPC-IA prepared by EFS are compliant with these requirements.

Therapeutic plasma

(Q-AFFP and Q-FFP. FFP-IA and pooled FFP-IA)

Factor VIII and fibrinogen

The methods for testing and the standards applicable to FFP for FVIII and fibrinogen varv according to the plasma manufacturing method used. For FFP-IA and pooled FFP-IA, the minimum

requirement for FVIII is 0.5 UI/mI for a minimum of 70% of controlled units and 2 q/l fibringgen for a minimum of 70% of controlled units. All of the FFP-IA prepared by EFS is compliant with these requirements. As regards the plasma safeguarded by a 60-day quarantine (Q-AFFP and Q-FFP). the minimum requirement for FVIII is **0.7 UI/ml**. All of the guarantined FFP prepared by EFS is compliant with these requirements.

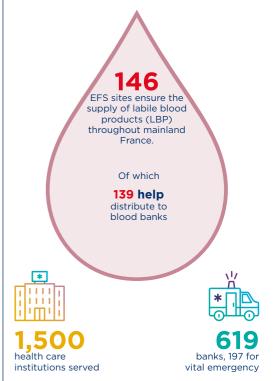
Residual leucocyte content

In terms of leucocyte reduction for therapeutic plasmas. the minimum percentage of compliant units stipulated by regulations is:

95%

All of the FFP prepared by EFS is compliant with these requirements.

LBP issuing



24/7

Most EFS issuing sites serve health care institutions, and therefore patients, to whom they deliver 24 hours a day 7 days a week and provide transfusion advice.

Units of blood components issued by EFS in 2019



2.9 million

products issued

RED BLOOD CELL CONCENTRATES (RBCC) ISSUED

-0.5%

fewer units of RBCC issued in 2019 compared with 2018.

In 2020, EFS implemented reinforced qualitative and quantitative monitoring of the increasing needs of patients for LBP.



PLATELETS ISSUED

-5.3%

fewer units of platelets based on quantity of active ingredient (QAI) issued in 2019 compared with 2018.

+4.9%

units of pooled platelet concentrates (PPC) originating from donations of whole blood issued.

66.9%

The proportion of PPC issued as a proportion of platelets issued, compared with 63.7% at the end of 2018.

-8.9%

fewer units of aphaeresis platelet concentrates (APC) issued.

Medical and transfusion biology



491 million

biomedical analysis value units.
This is the medical biology activity carried out by EFS in 2019. i.e. a +1.1% increase compared with 2018.

RCI

68%

of these tests vital to the transfusion of patients concerned red cell immunohematology (RCI).

VBMD

17,103

bone marrow donors (VBMD) registered in EFS centres in 2019, i.e. a 10% increase on 2018,

and 5.091

in mixed VBMD centres (CHU (university hospitals)/EFS).

HLA

157 million biomedical analysis value units

were carried out in 2019 by histocompatibility and immunogenetics laboratories, which perform biological testing associated with the HLA system. This figure is up by +3.9% compared with 2018.

15

HLA sites in mainland France

contribute to the treatment of patients undergoing transplantation. The majority are volunteer bone marrow donor centres and have contributed towards enriching the French Bone Marrow Transplant Registry kept by the Agency of Biomedicine (ABM).

Cell therapy activities

KNOW-HOW/ CELL THERAPY ACTIVITIES AND THE DEVELOPMENT AND PRODUCTION OF ADVANCED THERAPY MEDICINAL PRODUCTS (ATMPS) AND TISSUE BANKS ARE DISTRIBUTED ACROSS 9 REGIONAL ESTABLISHMENTS.

EFS IS MADE UP OF



cell therapy units



advanced therapy (ATMP) pharmaceutical platforms



8 tissue banks. In 2019, they issued:

9.214 units of tissue (not including skin)

189.169 cm² of skin

6.333 cells

Our research and technology transfer

RESEARCH AT EFS

112 dedicated full-time equivalents.

(FTEs) across 19 teams

€11.65M budget

214 publications in peer-reviewed iournals

51 clinical research projects ongoing in 2019. 16 of which sponsored

TECHNOLOGY TRANSFER

licensing agreements/ licensing options on patents signed with industrial partners

7 new priority requests

for patents filed in 2019

9 prior art studies performed. Prior art studies enable us to check whether an invention fulfils the conditions for obtaining a patent in terms of innovation

16 technologies promoted with the aim of technology transfer

58

patent families in the EFS portfolio

by EFS

declared inventions

Breakdown of patent families in the EFS portfolio

9% Production process

17% Medical device

32% Therapeutic



6% Safeguarding production

> 17% Diagnostic

19% Other

reagent production unit

IVDMD/ THE IN VITRO DIAGNOSTIC MEDICAL DEVICES WERE MANUFACTURED BY THE REAGENT PRODUCTION UNIT (RPU), AT 6 MANUFACTURING SITES. DISTRIBUTED OVER 5 REGIONAL ESTABLISHMENTS.



These generated 7.8 million

euros of the RPU's turnover. an increase of 16% compared with 2018.



product references, 30 of which have a CE label.



the proportion of turnover

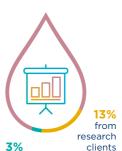
of total activity generated from external clients. up on the previous year (46% in 2018).

PLTR activity

The PLTR services (products for use in laboratories, teaching and research) form part of the establishment's public health mission by providing blood products that are indispensable for teaching and scientific progress. These donations, which are not directly for transfusion purposes, represent an alternative for many prospective donors who are permanently deferred, or for first-time donors who have temporary contraindications to blood donation

Breakdown of turnover

84% from industrial clients in the diagnostic or pharmaceutical sector



3% from teaching clients

In 2019, PLTR activity accounted for a turnover of

€8,925K

466 kev external client accounts 400,000 products issued in total

Moreover, the PLTR teams make the necessary blood products available to internal analytical and research laboratories within EFS, in addition to the reagent production unit (RPU).

47 FTEs

distributed throughout the establishments provide non therapeutic blood products to educational institutions and for research.

3 EFS regional establishments

Auverane - Rhône-Alpes, Centre - Pays de la Loire and Hauts-de-France - Normandie are ISO 2001 · 2015 certified for PLTR, and have dedicated teams capable of responding to "customised" specifications. All the plasmas and serums not used in the other establishments are centralised at the Hauts-de-France - Normandie FFS regional establishment. where specific screening tests allow starting materials to be proposed that are negative or positive for certain markers.

Health care centres full of life

EFS is made up of

62 health care centres

(HCCs) across the regional establishments.

The HCCs carry out

important activities:

bloodletting procedures, cell collection. therapeutic aphaeresis and transfusions.

IN 2019, THEY PERFORMED

bloodletting procedures on patients suffering from haemochromatosis or other iron overload diseases.

collections of autologous blood haematopoietic stem cells (HSC) and 367 allogenic, in addition to 105 donations of mononuclear cells and

3,491 extracorporeal photopheresis procedures (ECP).

4,981

aphaeresis procedures (not including HSC), a decrease of 33% compared with 2018, with

2,619 plasma exchanges

2,362 red cell exchanges

2,307

CELL THERAPIES/ EFS HAS 62 HCCs, 8 OF WHICH ARE APPROVED BY THE LABORATORIES FOR THE DONATION OF PRECURSOR CELLS OF CAR T-CELLS.

OTHER THERAPEUTIC **PROCEDURES**

The HCC teams mainly receive patients on an outpatient basis, but they also travel to health care establishments where necessary. In 2019, the aphaeresis procedures carried out outside the health care centres have seen a huge increase: 1.133 procedures (compared with 521 in 2018) were performed. especially in the case of paediatric treatments (children under 20 kg).



depletions of lipids or red cells



depletions of white cells

CAR T-CELLS: PROMISING NEW CELL THERAPIES

These use the patient's own T lymphocytes, genetically modified to fight tumour cells. The HCCs intervene in this treatment by collecting the patient's mononuclear cells (MNC). In 2019, 8 CAR T-cell-approved health care centres performed 201 CAR T-cell collections.

These types of collection rose sharply compared with the 60 donations performed in 2018. Once collected, the cells are shipped (via cell therapy and tissue engineering banks) to the USA, where the genetic modification is performed. The medicinal product thus obtained is returned to the patient for injection. The current indications for this treatment are blood disorders (acute and chronic leukaemias), but could be extended to solid tumours (glioblastoma, cancer of the ovaries, etc.).

Vigilance reporting to save lives

SDAE* 2011-2018 -INDICATORS PER 100.000 DONATIONS



*Severe Donor Adverse Events, grades 2, 3, 4 and imputabilities 1, 2, 3, NE.

Severe Donor Adverse Events (SDAE):

vasovagal reactions still in the foreground

The number of SDAE per 100,000 donations is increasing, rising from 221 in 2018 to 228 in 2019.

Vasovagal reactions still account for the greatest proportion of these SDAE, at **83.73%**.

NUMBER OF RAE WITH STRONG IMPUTABILITY



■ Grades 3, 4 ■ Grades 2, 3,

Recipient Adverse Events (RAE)

The number of RAE reported is constant: 9,175 in 2019 (all severities and all imputabilities combined, of which 8,869 investigations are closed), compared with 9,219 in 2018 (of which 8,966 investigations are closed).

FOCUS/ ON TRANSFUSION-TRANSMITTED BACTERIAL INFECTIONS (TTBI), NO TTBI IMPUTABLE TO A TRANSFUSION OF PLATELET CONCENTRATES HAS BEEN OBSERVED (GENERALISATION FROM IA-PC IN NOVEMBER 2017); IN CONTRAST, ONE CITROBACTER FREUNDII TTBI WHICH WAS ATTRIBUTED WITH CERTAINTY TO A TRANSFUSION OF RBCC WAS NOTED.

Two deaths are attributable to transfusion (compared with three in 2018)

The two deaths were caused by acute pulmonary oedema overload in the context of transfusion of two units of RBCC in elderly patients, one of whom presented with an underlying cardiovascular disorder. In one of the cases, the inter-transfusional time delay was not complied with: the two units of RBCC were transfused one after the other, triggering the APO overload.

Serious Adverse Events (SAE) in the transfusion chain

1.083 SAE were reported on the e-FIT IT system in 2019, of which 273 occurred at EFS (versus 1,159 in 2018, of which 357 occurred at EFS). Of the 273 reports, 114 relate to the collection stage (versus 167 in 2018) and 100 the distribution/issuing stage (versus 143 in 2018). The notable decrease in the number of SAE reported in 2019 (as in 2018) is associated with the change in reporting methods for SAE from "collections of excessive volumes of whole blood", which, since 2 January 2018, are no longer reported on the e-FIT IT system (for events occurring in 2018) but via a new reporting arrangement in compliance with the ANSM (French National Agency for Medicines and Health Products Safety).



Medical device vigilance

reports in 2019 compared with 146 in 2018



Reagent vigilance

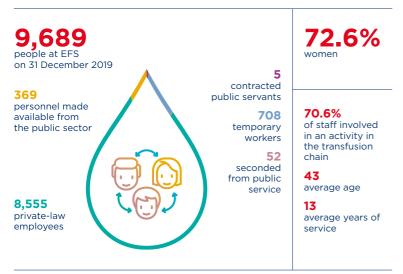
reports in 2019 compared with 13 in 2018

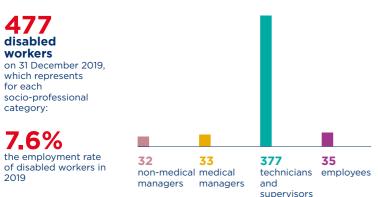


Biovigilance

reports in 2019 compared with 118 in 2018

Our social data report





HUMAN RESOURCES/ THE PERSONNEL IN OUR "CORE BUSINESS" ACTIVITIES OF RESEARCH AND SUPPORT.



