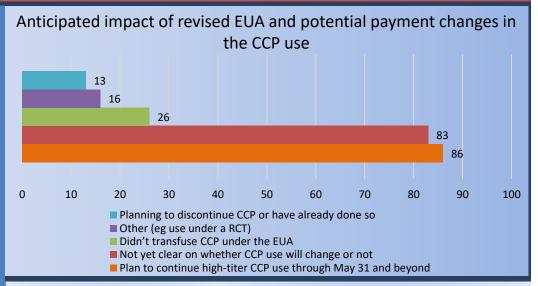
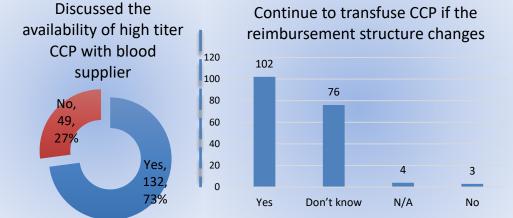


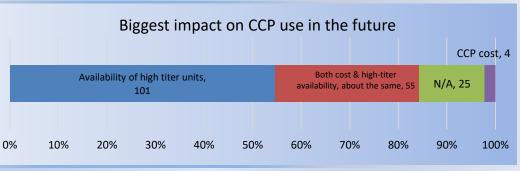
AABB Survey: Impact of upcoming changes to CCP use

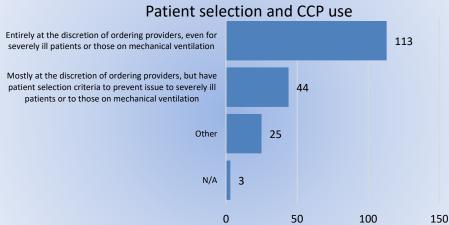
Highlights

- □ Survey conducted from Feb. 22-24, 2021.
- ☐ 224 hospitals responded.
- □ 38.7% hospitals plan to continue high-titer CCP use through May 31 and beyond.
- ☐ 37.1% are not yet clear on whether CCP use will change or not
- ☐ Only 5.8% (n=13) hospitals are planning to discontinue CCP or have already done so. Among these hospitals, lack of stronger efficacy data followed by plan to shift towards other treatments were the two most common factors for discontinuation.
- ☐ 132 (~ 73%, total response=181) hospitals have discussed the availability of high titer CCP with their blood supplier.
- Most hospitals are willing to continue transfusing CCP if the reimbursement structure changes to a more traditional model.
- Most hospitals believe availability of high titer units will have the biggest impact on their CCP use in the future.
- A majority of the hospitals reported the use of CCP was at the entirely at the discretion of the ordering physician.









Reasons to discontinue use of CCP* Plan to shift toward Other, 7.7% other treatments, including the use of Lack of monoclonal stronger antibodies for nonhospitalized patients, efficacy data. 38.5% 61 5% The anticipated Concerns about the cost of purchasing availability of high titer CCP units, 7.7% units, 15.4%

^{*} Response ratio presented based on a multi-select question. 13 hospitals responded as planning to discontinue CCP use or have already done so.