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Título: Tratamiento con transfusión de plasma de donantes convalecientes de SARS CoV-2 a pacientes de cuidado y graves con ventilación espontánea.

Tipo de trabajo: Comunicación científica en vídeo

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Tema(s): Gestión clínica de la pandemia

Palabras clave: convalescent plasma, SARS-CoV-2 virus, COVID-19, coronavirus

Resumen: SARS-CoV-2 disease 2019 is a pandemic with no specific therapeutic agents and substantial mortality. The success of convalescent plasma therapy is based on the transfused plasma had high concentrations of anti-SARS-CoV-2 antibodies, and on the safe preparation of serum to eliminate potential risk factors, such as the transmission of viruses via transfusion. Twenty two patients laboratory confirmed COVID-19, diagnosed using reverse transcriptase–polymerase chain reaction (RT-PCR) classified like of care and serious not ventilated patients and only one critical patient, with moderate to severe hypoxemia, were received 300 mL convalescent plasma treatment. Each donated plasma was analyzed for specific anti-SARS-CoV-2 IgG, IgM and IgA isotype antibody titers by ELISA. The transfused plasma units had an antibody titer IgG isotype median 228, IgM median 25.50 and IgA isotype antibody titers median 198.0.
The time interval between the symptom onset and admission was 5.62 ± 4.75 days and the interval between admission and plasma transfusion was 4.75 ± 4.78 days. Before and after each transfusion, clinical and laboratory parameters were evaluated. After the plasma transfusion, oxygen partial pressure increased from medium value of 98.18 to 123.00 mm Hg and lactate dehydrogenase enzyme values decreased from 631.15 to 295.00; however, the ferritin values increased progressively from 661.31 to 1959.00.
Progressive improvement of inflammatory markers is observed with plasma transfusion, except with ferritin, which progressively increases until reaching normal values with the evolution of the disease. These values correspond to a decrease in hemoglobin values from a median of 12.29 to 10.30. Post-transfusion hospital discharge time was from 48 hours to 12 days and the SARS-CoV-2 PCR was negative between 3 and 5 days. No adverse transfusion reactions were reported. This report emphasis about the efficacy and security of convalescent plasma transfusion to care, seriously non-ventilated and critical patients like a therapy for severe respiratory distress for SARS-CoV-2 virus disease.

https://youtu.be/wIp_NBQULQo