

# Antibody Screening (RAI)

*S.Pouya- 13 february 2018*



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# Welcome

# Blood Group Antigens

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# Blood Group: Antigens

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- **Blood groups are represented by molecules: Antigens.**
- **Antigens are able to induce an immune response.**
- **Different type of antigens exist:**
  - Hetero-antigens: from another species
  - Allo-antigens: from the same species
  - Auto-antigens: from the same individual
- **More than 300 blood group antigens discovered so far classify within 35 systems**

# Blood Group: Antigens

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- **System ABO:** antigen A, B...
- **System Rhesus:** antigen D,C,E,e,c,Cw,...
- **System Kell:** antigens K, k, Kpa, Kpb, ...
- **System Lutheran:** Lua, Lub, ...
- **System Lewis:** antigen Lea, Leb,...
- **System MNS:** antigens M, N, S, s, ...
- .....35 systems >300 antigens

# Blood Group: Antigens

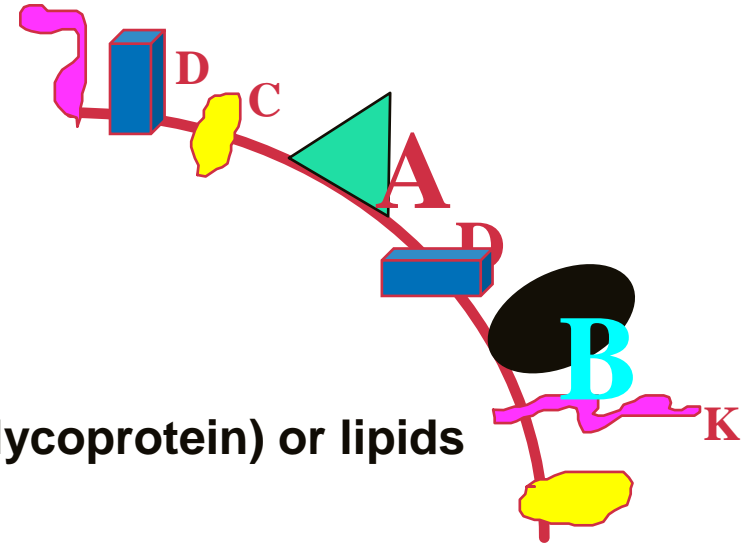
- Antigenes are present on the surface of red blood cells

- Chemical structures made of:

- Protein
- Carbohydrate determinants on proteins (glycoprotein) or lipids (glycolipid)

- Function: membrane structures, membrane transport, receptors...

**Antigens give the identity of each individual**



# Blood Group Antibodies

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# Immune Response

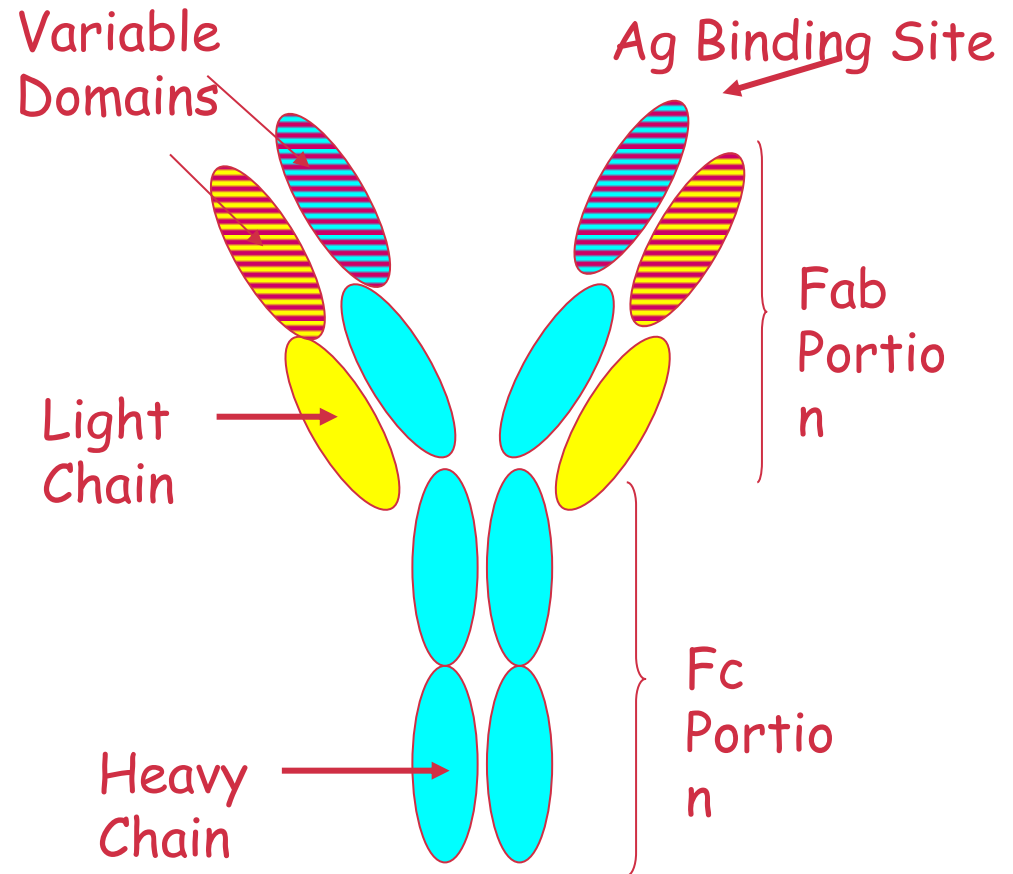
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- Reaction to the invader (Antigen)
- The ability of an antigen to stimulate the production of its corresponding antibody is called **immunogenicity**
- An Antibody (Ab) is a chemically complex protein molecule produced in response to an antigen
- Immunization to red cell antigens may result from pregnancy, transfusion, transplant



# Antibodies (Ab)

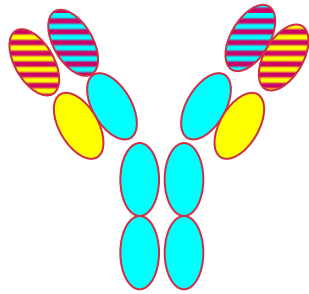
- Serum/plasma contain antibodies
- Antibodies are molecules that can destroy red blood cells
- Antibodies can be dangerous in Blood transfusion and must be *screened*



# Immunoglobulin (Antibody)

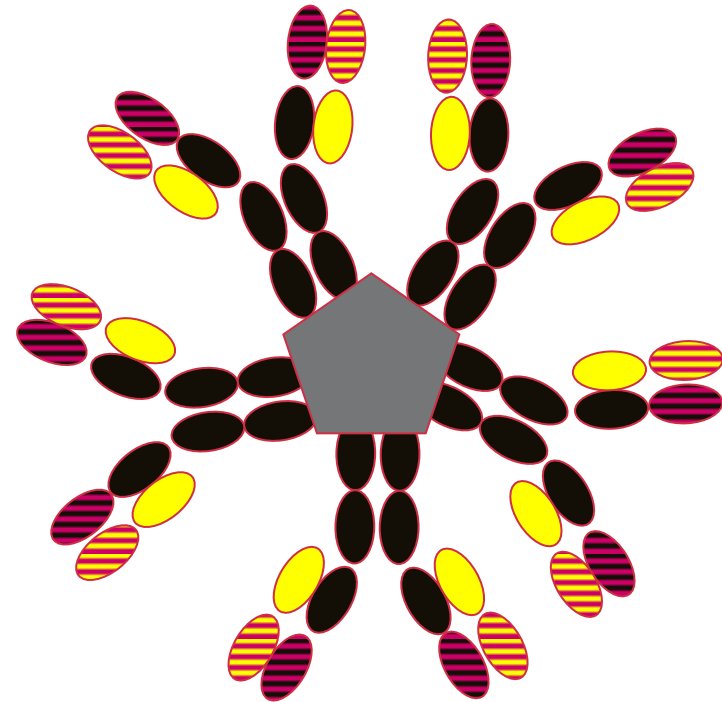
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## Structure



IgG

IgA, IgD, IgE



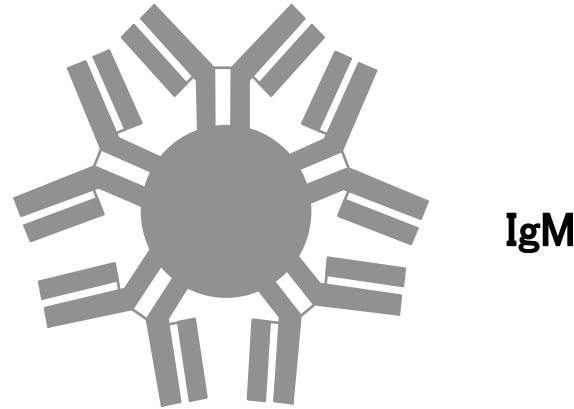
IgM

# Blood Group Antibody

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## Natural antibodies:

“naturally occurring” Individuals can make Ab to antigens (Ag) NOT present on their own red cells - alloantibodies e.g. anti-A and anti-B



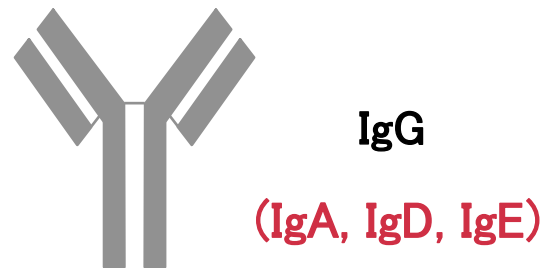
## Immune antibodies:

Unexpected antibodies produced after exposure to foreign red cell antigens

Red Cell Transfusion

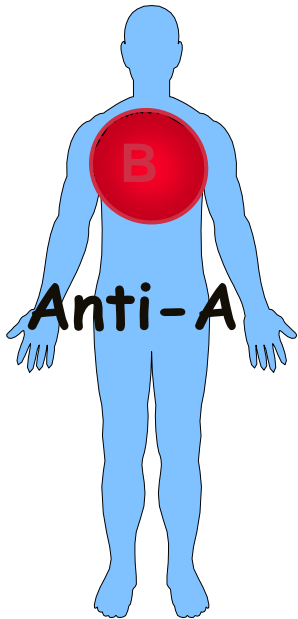
Pregnancy

Transplant ...



# Blood Group Antibody

## “Naturally” occurring



### Typically:

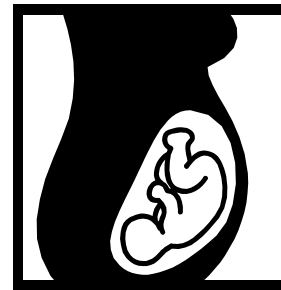
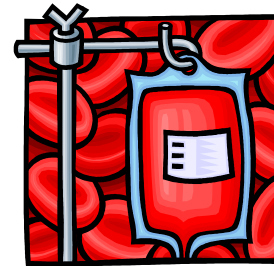
- IgM
- **Directly** agglutinate RBC
- Optimally react at <math><30^{\circ}\text{C}</math> (cold antibodies)
- **Fix the complement**
- Elicited by carbohydrate antigens

Examples:

**Expected: Anti-A &/or Anti-B**

Unexpected: Anti-Le<sup>a</sup>, Anti-M, Anti-P<sub>1</sub>

## Immune stimulated



### Typically:

- IgG
- **Indirectly** agglutinate RBC
- Optimally react at **37°C** (warm antibodies)
- Most **not** able to **fix** the complement
- **Cross placenta**
- Elicited by protein antigens

Examples: **all unexpected**

Anti-D, Anti-C, Anti-K

Anti-Jk<sup>a</sup>, Anti-Fy<sup>a</sup>, Anti-Fy<sup>b</sup>

# Antibody Screening

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Test used to detect/ confirm presence/absence of **unexpected blood group antibodies** in serum/plasma

Ensure safe transfusion

Detect/monitor HDN

# The Basics...

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- When detecting and/or identifying antibodies, we test

Known:

Unknown:

**Reagent RBCs      +      patient serum**

- Antibody Screens use 2 or 3 Screening Cells to “detect” if antibodies are present in the serum/plasma
- If antibodies are detected, they must be identified

# Identification test

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- **Screening Cells and Panel Cells are the same with minor differences:**
  - Screening cells
    - Antibody detection
    - Sets of 2 or 3 vials
  - Panel cells
    - Antibody identification
    - At least 10 vials per set

**An antibody panel is just an extended version of an antibody screen**

# Reagents

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**Group O red cells** for antibody screening of serum or plasma are commercially available and are offered as sets of either two or three vials of single-donor red cells.

Reagent cells must express the following antigens: D, C, E, c, e, M, N, S, s, P1, Lea , Leb , K, k, Fya , Fyb , Jka and Jkb

>> for additional antigens, refer to local regulations



# Reagents

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in France, the screening panel needs to contain:

- At least 3 test RBC group O
- On this panel following antigens must be present: D, C, E, c, e, K, k(cellano), Kpb, Fya, Fyb, Jka, Jkb, M, N, S, s, Lea, Leb, P1, Lub
- The following phenotypes must be present :Rh: 1,2,-3,-4,5; Rh: 1,-2, 3,4,-5; Rh: -1,-2,-3,4,5.
- Antigens Fya, Jka, Jkb, S must be homozygous.

Recommended homozygous antigens for Fyb and s

# Panel

Each of the panel cells has been antigen typed (shown on antigram)

+ refers to the presence of the antigen

0 refers to the absence of the antigen

Cell #	Rh-hr	Donor Number	Rh-hr								KELL					DUFFY		KIDD		Sex	LEWIS			MNS				P	LUTHERAN		Special Antigen Typing	Cell #	Test Results			
			D	C	E	c	e	f	C <sup>w</sup>	V	K	k	Kp <sup>a</sup>	Kp <sup>b</sup>	Js <sup>a</sup>	Js <sup>b</sup>	Fy <sup>a</sup>	Fy <sup>b</sup>	Jk <sup>a</sup>	Jk <sup>b</sup>	Xg <sup>a</sup>	Le <sup>a</sup>	Le <sup>b</sup>	S	s	M	N	P <sub>1</sub>	Lu <sup>a</sup>	Lu <sup>b</sup>						
1	R1wR1	315357	+	+	0	0	+	0	+	0	0	+	0	+	/	+	0	+	0	+	+	0	+	+	+	+	0	+S	+	+						
2	R2R2	319426	+	0	+	+	0	0	0	0	0	+	0	+	/	+	+	+	0	+	+	+	0	+	0	+	+	+	0	+						
3	rr	102926	0	0	0	+	+	+	0	0	+	+	0	+	0	+	+	0	+	0	+	0	+	0	+	0	+	+S	0	+						
	Patient Cells																																			

Shaded columns indicate those antigens which are destroyed or depressed by enzyme treatment.

LOT NO.

8SS363

EXP. DATE

2017-12-26

CCYY-MM-DD

ANTIGRAM®

Antigen

Profile

635200771

"/" represents "Not Tested" for new donors.

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Reagent Red Blood Cells

0.8% Surgiscreen®

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Cell #	Rh-hr	Donor Number	Rh-hr								KELL				DUFFY		KIDD		Sex Linked	LEWIS			MNS		P	LUTHERAN				
			D	C	E	c	e	f	C <sup>w</sup>	V	K	k	Kp <sup>a</sup>	Kp <sup>b</sup>	Js <sup>a</sup>	Js <sup>b</sup>	Fy <sup>a</sup>	Fy <sup>b</sup>	Jk <sup>a</sup>	Jk <sup>b</sup>	Xg <sup>a</sup>	Le <sup>a</sup>	Le <sup>b</sup>	S	s	M	N	P <sub>1</sub>	Lu <sup>a</sup>	Lu <sup>b</sup>
1	R1wR1	315357	+	+	0	0	+	0	+	0	0	+	0	+	/	+	0	+	0	+	+	0	+	+	+	+	0	+s	+	+
2	R2R2	319426	+	0	+	+	0	0	0	0	0	+	0	+	/	+	+	+	0	+	+	+	0	+	0	+	+	+	0	+
3	rr	102926	0	0	0	+	+	+	0	0	+	+	0	+	0	+	+	0	+	0	+	0	+	0	+	0	+	+s	0	+
	Patient Cells																													

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ANTIGRAM

Antigen Profile

635200771

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Reagent Red Blood Cells

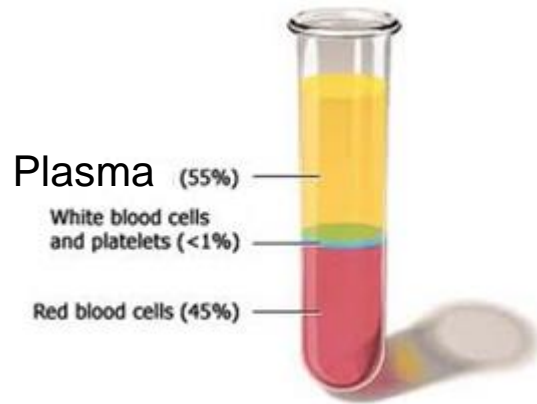
0.8% Surgiscreen®

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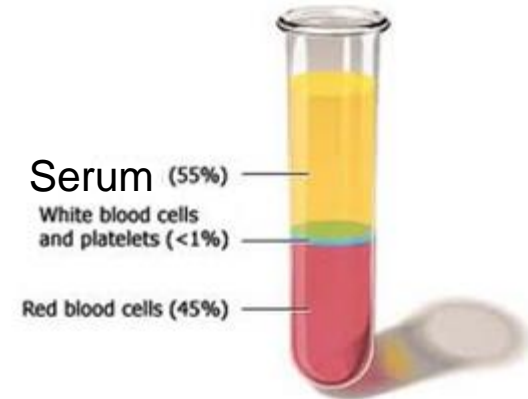
# Blood specimens

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To be use with the BioVue method, sample tubes need to be centrifuge 5 minutes between 900 and 1000 G



Blood taken on tube with anticoagulant



Blood taken on tube without anticoagulant

# Unexpected Antibodies

# Complement

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# Complement & Hemolysis

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- **The Complement System is a group of 18 to 20 naturally occurring soluble proteins dissolved in the blood plasma that provide immune protection.**
- **The function of the complement system is to generate activated complement proteins that lead to antigen destruction.**
- **Complement proteins become activated in a chain reaction sequence.**

# Complement & Hemolysis

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- IgM or IgG binds to Ag (RBC)\*
- 1<sup>st</sup> component of complement (C1q) binds to Fc portion of IgM or adjacent IgG antibodies



- Initiates a “cascade” or series of activations of complement components, some bind to the RBC

\* Aggregates of immunoglobulins can also initiate complement activation via an alternate pathway

# Complement & Hemolysis

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- **C3 Activation**
  - **C3b binds to the RBC membrane; C3a fluid phase**
  - **C3b sensitized (coated) RBC can adhere to cells that have C3b receptors (phagocytes)**
  - **C3b is rapidly cleaved *in vivo* leaving C3d on the RBC surface.**
  - **Presence of C3d on RBC indicator of *in vivo* complement activation**

C3 Sensitized

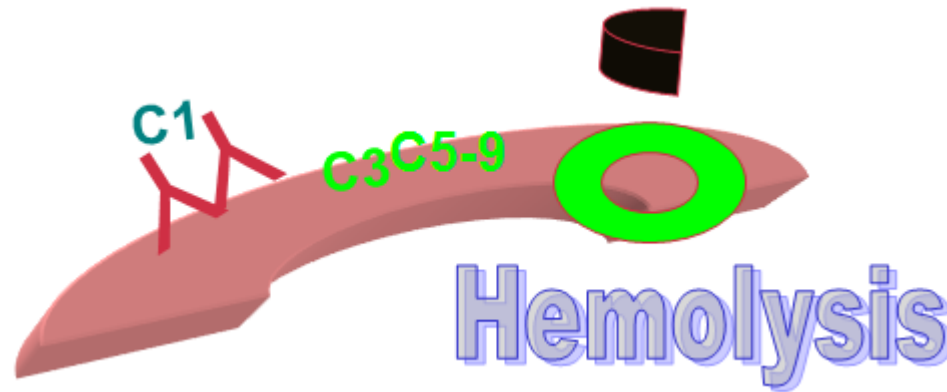




# Complement & Hemolysis

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When all components of complement are activated (C1 → C9) the RBC membrane is damaged & lysis occurs



The complement activation needs the presence of  $\text{Ca}^{++}$  and  $\text{Mg}^{++}$

# Unexpected Antibodies

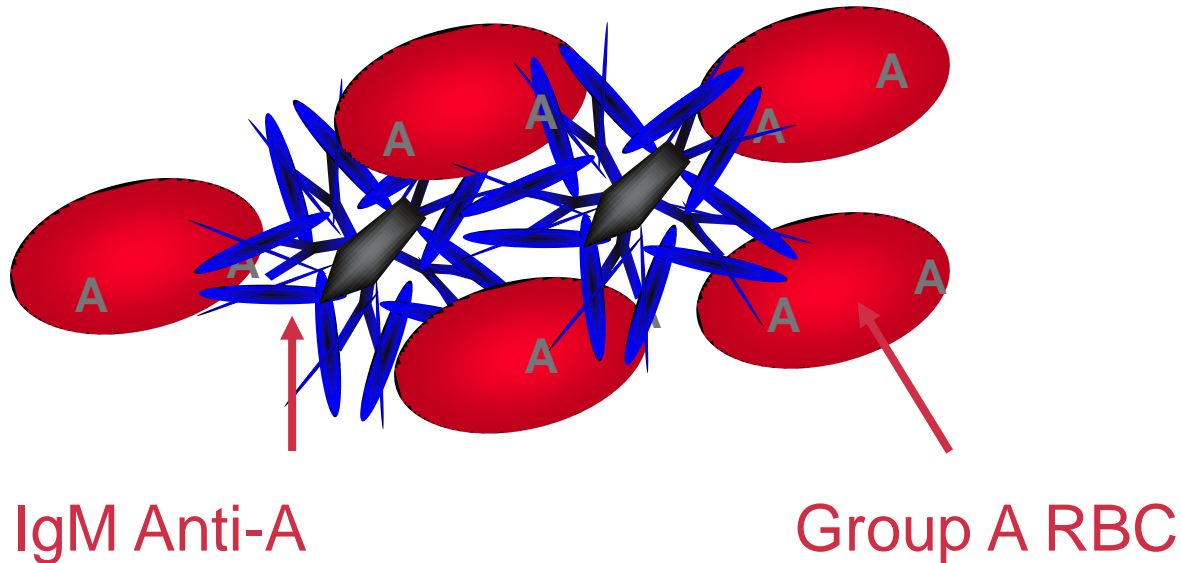
# Agglutination

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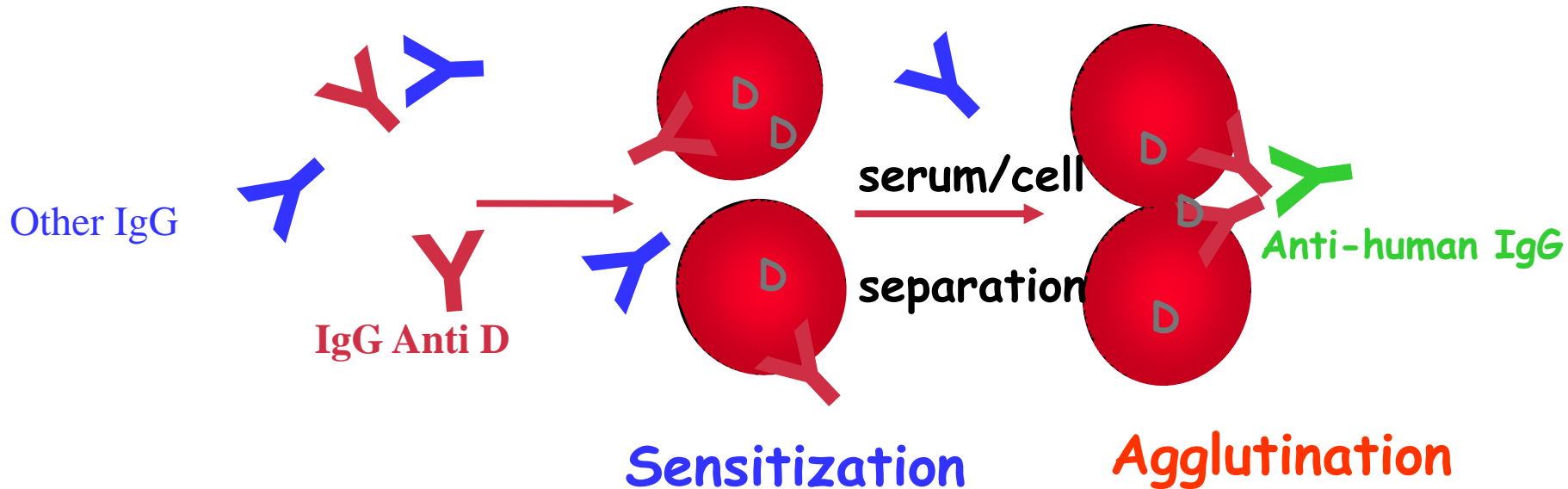
# Direct Agglutination

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- **Reaction is Visible = Agglutination**
- **In solution RBC are negatively charged and repel each other**
- **IgM antibody large enough to reach antigens on negatively charged RBC**

# Indirect Agglutination \*



- Agglutination occurs using a second antibody
- IgG antibodies cannot “bridge” the gap between RBC
- IgG antibodies bind (sensitize), but do not agglutinate RBC

\*Basis of Indirect Anti-human globulin Test (IAT) or AHG Test

# In Vitro RBC Ag/Ab Reactions

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- **Antibody binds to antigen on RBC surface**
- **Binding detected by Agglutination, Hemolysis**
- **Conditions that affect [ Ag\_Ab] reaction**
  - Ab class (IgM, IgG) and concentration
  - Antigen :
    - Accessibility close to cell surface
    - Density
  - Environment: pH, ionic strength, temperature, time
  - Affinity of antibody for antigen

# Unexpected Antibodies

## Anti-Human Globulin

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# Anti-Human Globulin (AHG)

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**Major Plasma proteins: Fibrinogen**

**Albumin**

**Globulins**

They are separated by electrophoresis

In the globulins family we have:

**Gamma globulins = immunoglobulin (IgM, IgG, IgA, IgD, IgE)**

**Beta globulins = complement components**

# Anti-Human Globulin (AHG)

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**Rabbits injected with human globulins produce anti-human globulin (AHG)\***

- Anti-human gamma globulin: i.e. Anti-human IgG
- Anti-human beta globulin: i.e. Anti-human complement

\* More specific antibodies can be made by using purified antigens (IgG or IgG heavy chain) or by producing monoclonal antibodies



# Anti-Human Globulin (AHG)

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**Anti-Human Globulin can be**

➤ ***Polyspecific:***

Anti-IgG and anti-C3b-C3d are pooled into one reagent antiserum.

➤ ***Monospecific:***

Anti-IgG or anti-C3b-C3d are the component of the reagents

# Test Theory

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# Test Theory

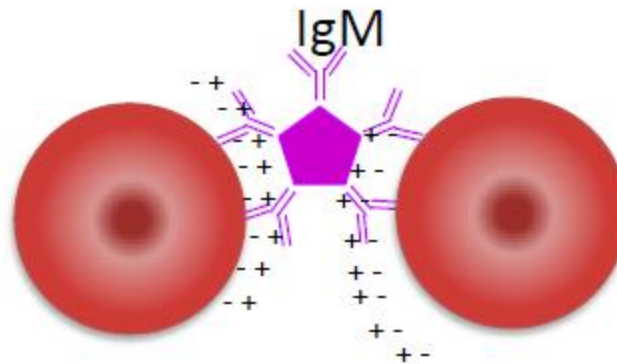
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Unexpected/Immune AB binds known Antigen present on the surface of the Reagent Red Blood Cells.

The reaction is visible after the agglutination occurs.

## IgM

Because it has 10 Antigen binding sites, IgM can bind between RBCs ⇒ **Direct Agglutination (the agglutination is visible)**



# Test Theory

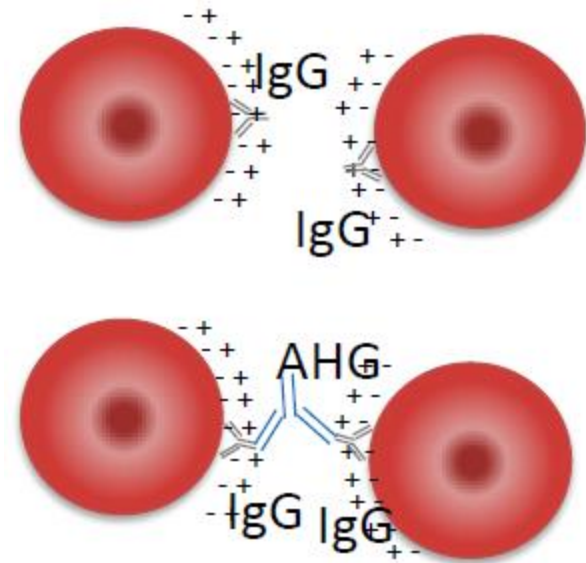
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## IgG

It cannot bind between RBCs. We need to add “artefact” to allow the agglutination

### ⇒ Indirect Agglutination

- The first step will be to fix the Ab to the Antigen.
- The second step to create a “bridge” between 2 RBCs.



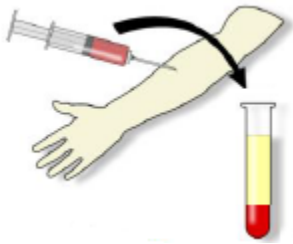
# Test Theory

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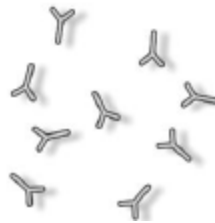
- **2 methods are available to detect immune AB:**
  - Indirect Anti-Globulin Test, **IAT**, called also Indirect Coombs Test, **ICT**.
  - Enzyme test. The latest test cannot be performed alone as some antigens are destroyed by enzyme (Antigen Fya, Fyb, M,N,S,s...)

# IAT: Components

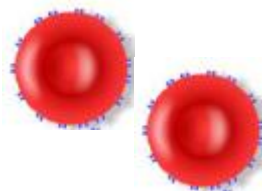
- Indirect **A**nti-human **G**lobuline Test/Indirect **C**oombs **T**est



Patient plasma/serum  
containing unexpected  
IgG Antibodies



Reagent Red Blood  
Cells containing  
known Antigens



# IAT: Components



## BLISS

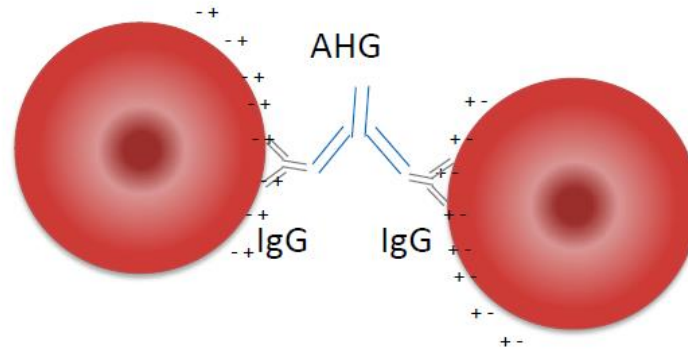
BioVue Low Ionic Strength Solution

- Blood cells have a slight negative charge.
- This charge can interfere with the binding between antibodies, reducing agglutination.
- LISS (OCD product is “BLISS”) is used to reduce negative charge, for better agglutination
- RBCs diluted at 0.8% already contain the BLISS. It needs to be added only with 3% cells



**Anti-Human Globulin (AHG)** is produced from rabbits that are immunized with human serum. They produce anti-human antibodies which will bind to human antibodies

Using AHG in blood testing will provide assistance to create the “bridge” between Antibodies from 2 cells allowing the agglutination.

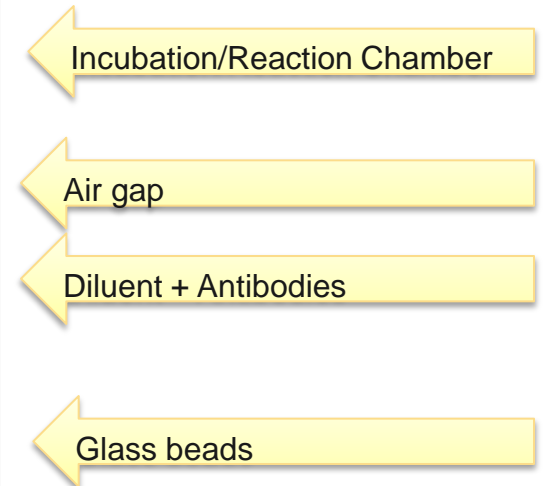
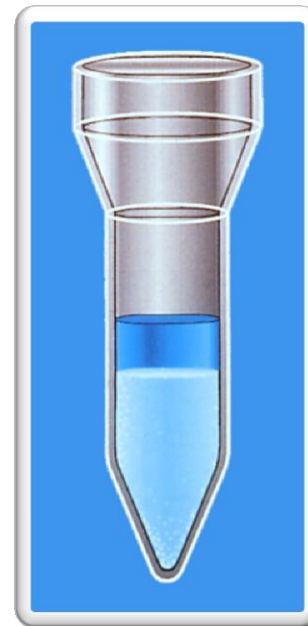


# Column Agglutination Technology

## Screening and Identification:

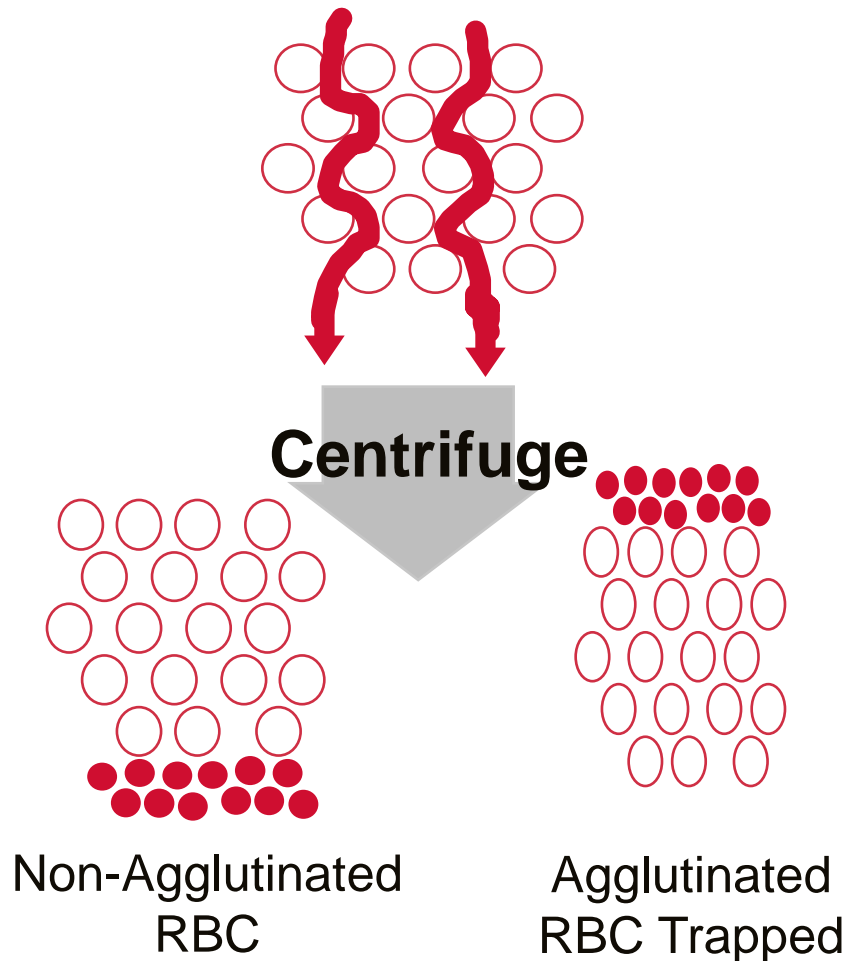
**Serum/plasma & reagents RBC & Bliss to be added to column**

**AHG reagent contained in the diluent of the cassettes (22/33)**



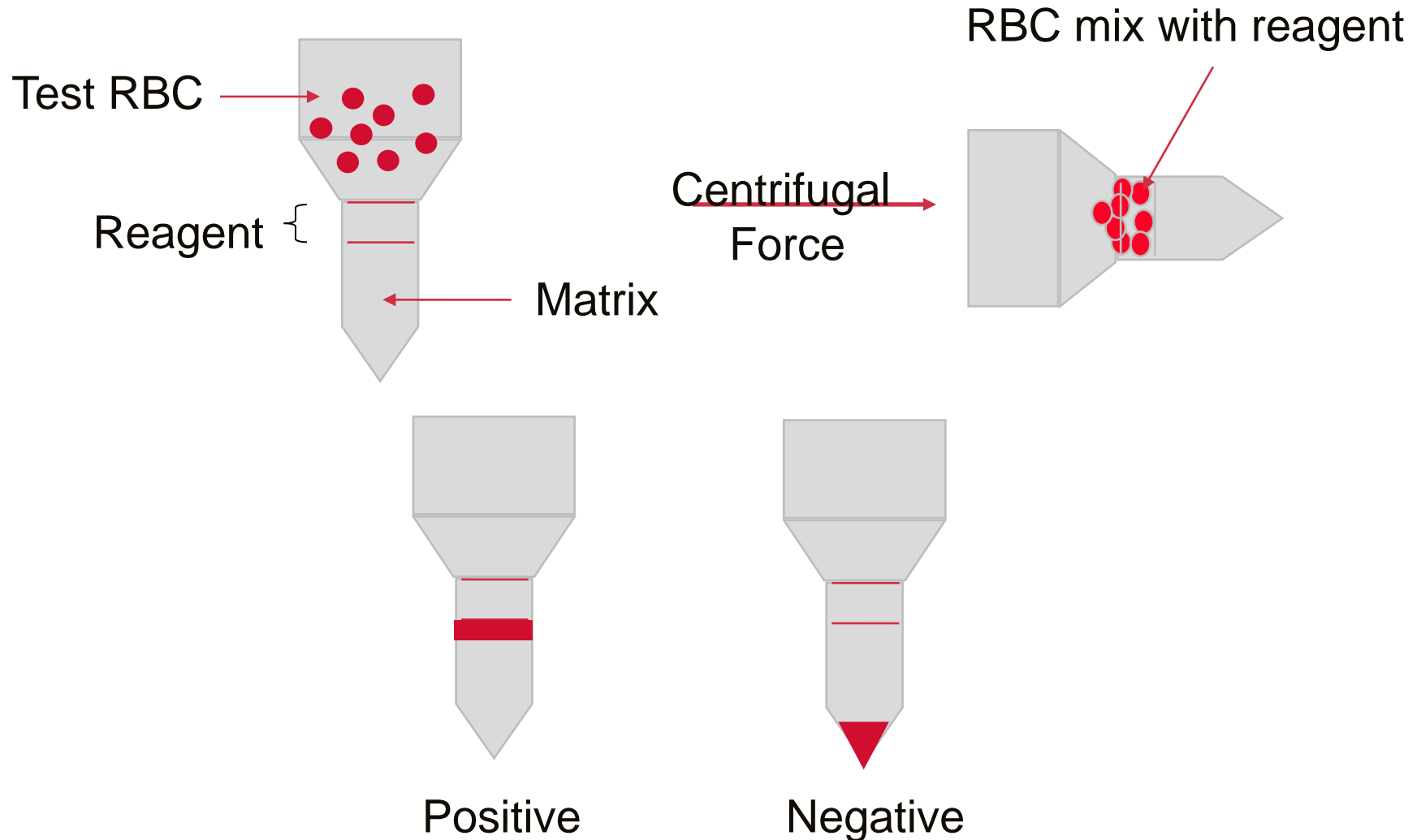


# Column Agglutination Technology

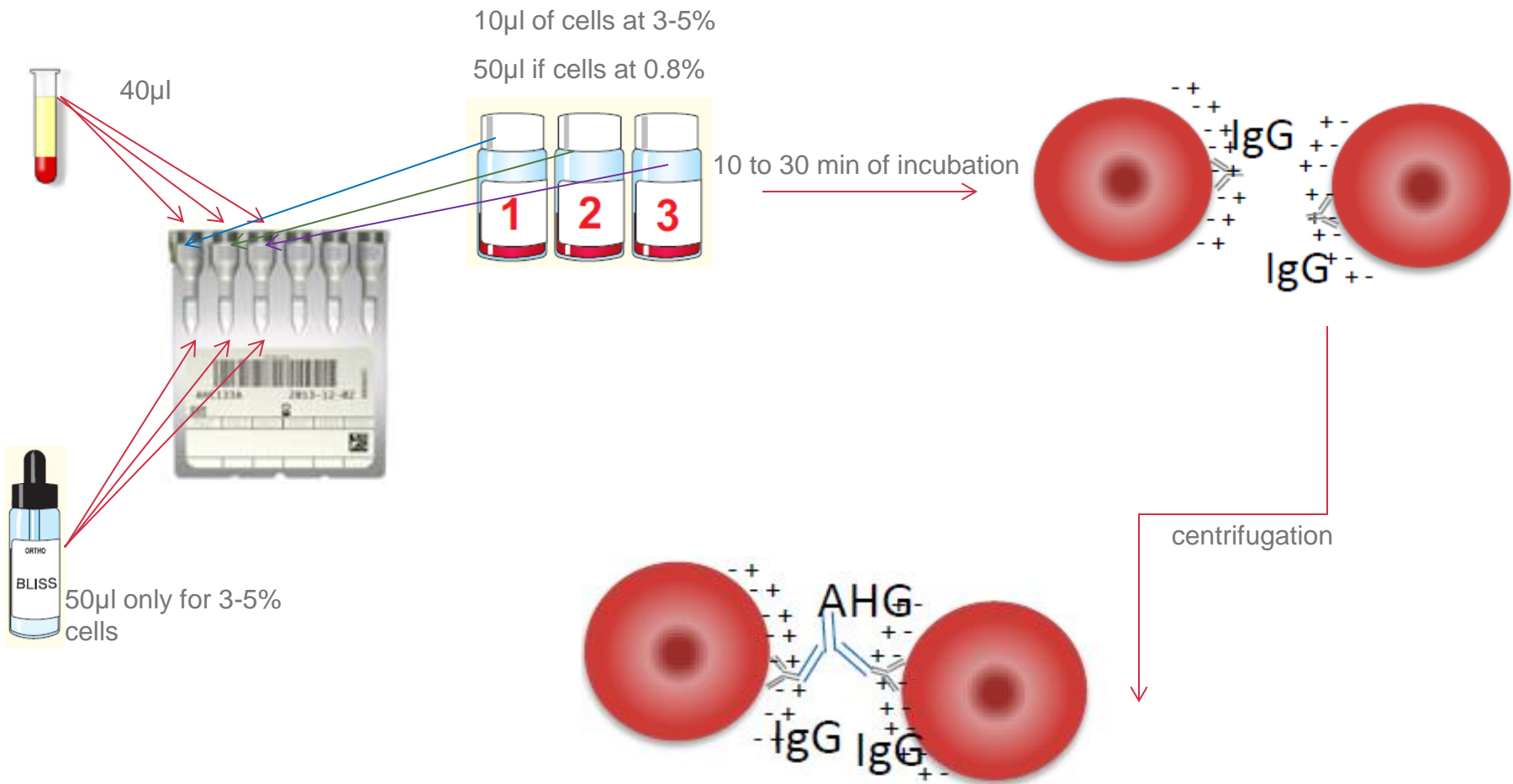


- The CAT uses defined volume of RBCs instead of drops of high cell concentration (as in tube method)
- The CAT is a standardised method (centrifugation vs shaking)
- The CAT is a stable support for multiple readers or for electronic reading
- Beads act as a filter because of :  
Size, shape and composition

# Column Agglutination Technology



# IAT Test



# IAT Test

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## Cassette used for the IAT

- ▶ AHG anti-IgG (33)
- ▶ AHG Polyspecific (22)

## Reagent used for the IAT test

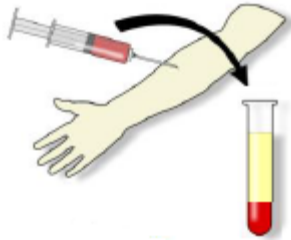
- ▶ Bliss if RBCs are diluted at 3-5%

## RBCs used for the IAT test

- ▶ Selectogen at 3-5% or 0.8% ⇨ 2 cells
- ▶ Surgiscreen at 3-5% or 0.8% ⇨ 3 cells
- ▶ BioVue Screen Ficin at 3-5% or 0.8% ⇨ 3 untreated cells

# Enzyme Test : components

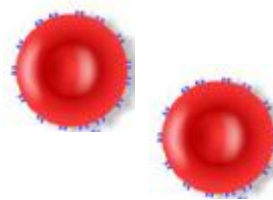
## – Enzym test



Patient plasma/serum containing unexpected IgG Antibodies



Reagent Red Blood Cells contain known Antigens and are treated with Papain, ficin or bromelin



Enzyme decreases the potential zeta and allow the agglutination of cells

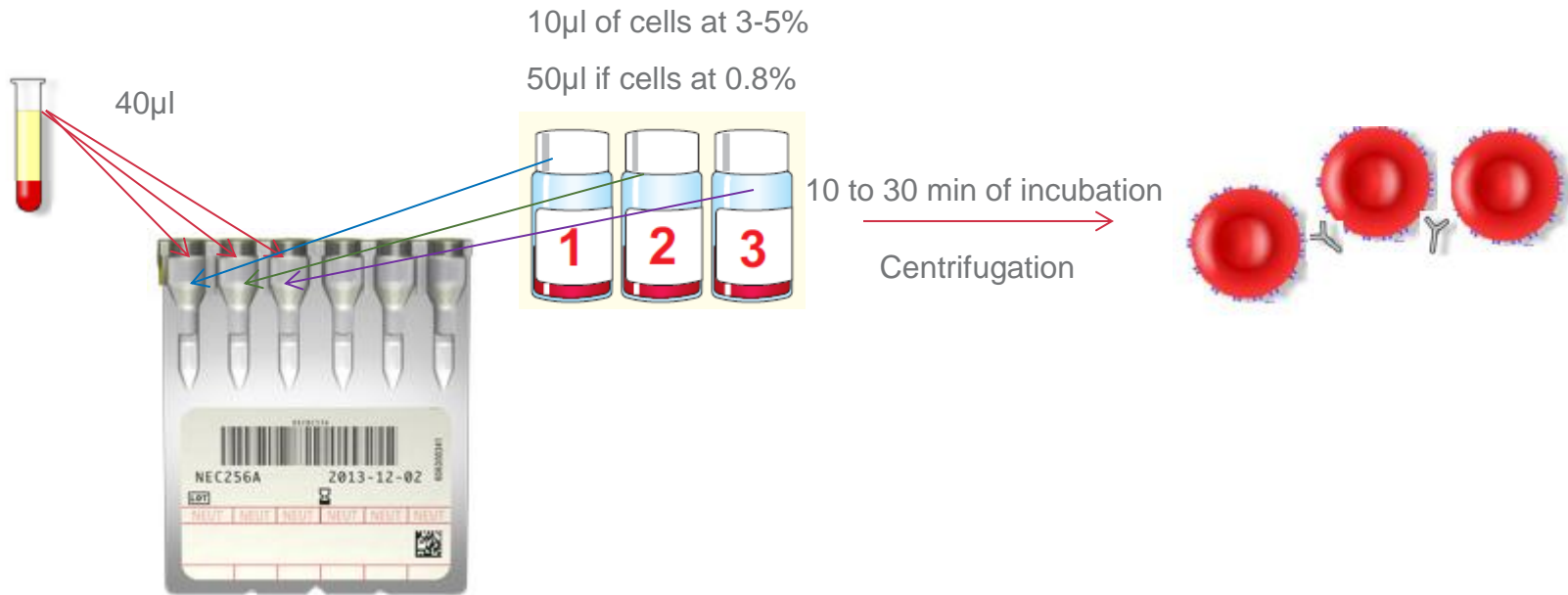
Enzyme destroys some antigen like: Fya, Fyb, S,s,M,N..

Some Ag-Ab reactions can be enhanced by enzyme, like D, C, E, c, e...



Neutral cassettes contain only PEG diluent

# Enzyme test



# Enzyme test

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## Cassettes used for the enzyme test

- ▶ Neutral (88)

## RBCs used for the enzyme test

- ▶ BioVue Screen Ficin at 3-5% or 0.8% ⇒ 3 treated cells

**Always performed as a second intention test**

**Antigens destroyed : Fya, Fyb, M, N, S, s**

**enhanced: Rh, Kell**

# Antibody Screening Test Interpretation

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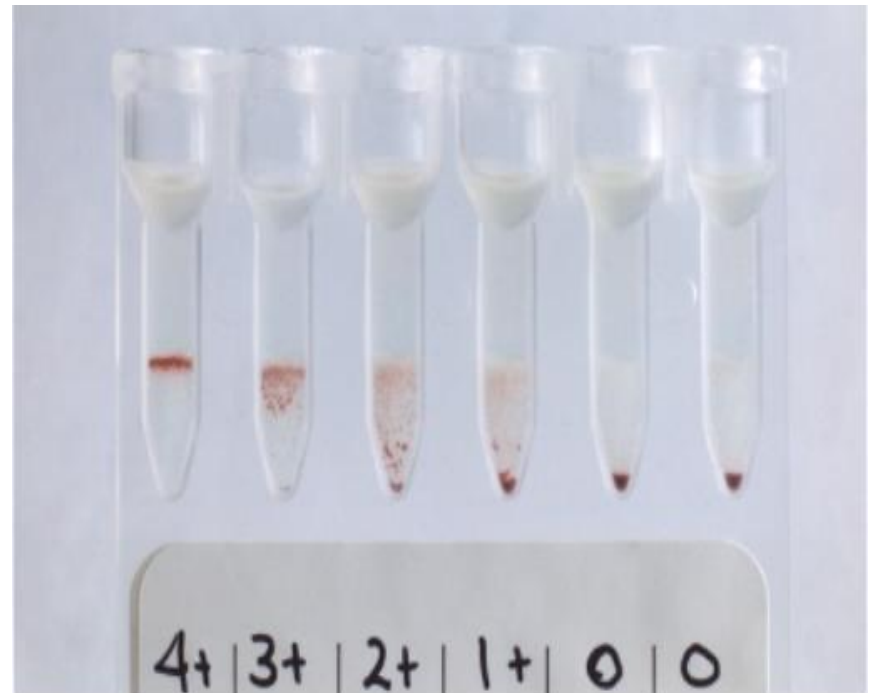


# Reading



# Different Reaction Grades

- 4+** A band at the top of the beads
- 3+** Most RBC remain in the upper half of the beads column
- 2+** Agglutination throughout the length of the column. Small cell button
- 1+** Agglutinated cells remain in the lower half. A button cells is present
- 0.5** Disrupted bottom + small agglutination above the button
- 0** Negative : All RBC passed through the glass beads



# Antibody Screening

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Negative : absence of unexpected antibodies represented in the screening panel

Validity : 3 days ( 72hours)

Can be extended to 21 days under certain conditions ( absence of transfusion, pregnancy, transplant in the last 6 months)

# Antibody Screening

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Result positive : presence of unexpected antibodies

perform an identification

- Unexpected red cell alloantibodies can be found in 1% to 2% of the population
- RH ( anti D, anti E) Kell ( anti K)
- Negative Crossmatch required prior any transfusion

Cell #	Rh-hr	Donor Number	Rh-hr								KELL						DUFFY		KIDD		Sex Linked	LEWIS			MNS		P	LUTHERAN		
			D	C	E	c	e	f	C <sup>w</sup>	V	K	k	Kp <sup>a</sup>	Kp <sup>b</sup>	Js <sup>a</sup>	Js <sup>b</sup>	Fy <sup>a</sup>	Fy <sup>b</sup>	Jk <sup>a</sup>	Jk <sup>b</sup>	Xg <sup>a</sup>	Le <sup>a</sup>	Le <sup>b</sup>	S	s	M	N	P <sub>1</sub>	Lu <sup>a</sup>	Lu <sup>b</sup>
1	R1wR1	315357	+	+	0	0	+	0	+	0	0	+	0	+	/	+	0	+	0	+	+	0	+	+	+	+	0	+s	+	+
2	R2R2	319426	+	0	+	+	0	0	0	0	0	+	0	+	/	+	+	+	0	+	+	+	0	+	0	+	+	+	0	+
3	rr	102926	0	0	0	+	+	+	0	0	+	+	0	+	0	+	+	0	+	0	+	0	+	0	+	0	+	+	0	+
	Patient Cells																													

Shaded columns indicate those antigens which are destroyed or depressed by enzyme treatment.

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CCYY-MM-DD

ANTIGR/  
Antigen  
Profile

635200771

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Reagent Red Blood Cells  
0.8% Surgiscreen®

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# Antibody Screening

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- Mandatory prior any transfusion**
- Post transfusion : between 3rd and 5th week**
- During pregnancy**

# Difficulties

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- **No match / incomplete match**
- **Weak antibodies**
- **Antibody against low frequency antigens**
- **Pan agglutination/ auto antibodies**
- **Multiple antibodies**

# Questions?

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**Thank you!**

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