

ABID CASE #23

1. What is the probable identity of this antibody? Which reaction is anomalous? How might you explain this reaction?

The patient has anti-f. The reaction with screening cell #2 (R2R2) does not fit this diagnosis, and may be due to an antibody directed against a low frequency antigen, possibly an HLA antigen.

2. What is the titer in this case? (Hint: what would the titer be if the LISS IAT were used to determine the titer of antibodies.) How would you follow this pregnancy?

Based on the negative reaction in the LISS-IAT with double dose f positive RBCs the titer is <1. One would follow the patient's titer beginning at 20 weeks. It might be useful to determine the father's Rh phenotype.

3. Does this antibody cause hemolytic transfusion reactions? Hemolytic disease of the newborn?

Anti-f has been reported to cause mild HTRs and HDN.

4. Show the reactions you would expect for the antibodies anti-Ce and anti-cE in the following panel.

Lot#	Rh system	Kell						Duffy		Kidd		Xg	Lewis		MNSs				P	Lutheran		Other Typings	>cE	>Ce							
Cell	Rh	D	C	E	c	e	V	K	k	Kp ^a	Kp ^b	Js ^a	Js ^b	Fy ^a	Fy ^b	JK ^a	JK ^b	Xg ^a	Le ^a	Le ^b	S	s	M	N	P1	Lu ^a	Lu ^b	Cell	AHG	AHG	
1	R1wR1	+	+	0	0	+	0	0	+	0	+	0	+	+	0	+	+	+	0	+	+	+	0	+	0	+		1	0	+	
2	R1R1	+	+	0	0	+	0	0	+	0	+	0	+	+	+	+	+	0	0	0	+	0	+	0	+	0	+		2	0	+
3	R2R2	+	0	+	+	0	0	0	+	0	+	0	+	0	+	+	+	+	0	0	+	+	+	+	+	0	+		3	+	0
4	Ror	+	0	0	+	+	+	0	+	0	+	0	+	0	0	+	0	+	+	0	0	+	0	+	+	0	+		4	0	0
5	r'r	0	+	0	+	+	0	0	+	0	+	0	+	+	0	0	+	+	0	+	0	+	+	+	+	0	+		5	0	+
6	r''r	0	0	+	+	+	0	0	+	0	+	0	+	+	0	0	+	+	0	+	+	+	+	+	+	0	+		6	+	0
7	rr	0	0	0	+	+	0	+	+	0	+	0	+	0	+	+	+	+	0	+	0	+	+	+	0	+		7	0	0	
8	rr	0	0	0	+	+	0	0	+	0	+	0	+	+	0	+	0	+	+	0	+	+	+	+	+	0	+		8	0	0
9	rr	0	0	0	+	+	0	0	+	0	+	0	+	0	+	0	+	0	0	+	0	+	0	+	+	0	+		9	0	0
10	rr	0	0	0	+	+	0	0	+	0	+	0	+	0	+	+	+	+	0	+	+	0	+	0	+	0	+		10	0	0
11	R1R1	+	+	0	0	+	0	+	+	0	+	0	+	0	+	+	+	0	0	+	0	+	0	+	+	0	+		11	0	+
Patient																													AC		